

A meeting of the Council of the General Dental Council

10:30am on Friday 22 September 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

Jeyanthi John

Sheila Kumar

Mike Lewis

Caroline Logan

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	10:30 – 10:35am (5 mins)	Oral
2.	Declarations of Interest	Toby Harris, Chair of the Council		Oral
3.	Questions Submitted by Members of the Public	Toby Harris, Chair of the Council		Paper
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 23 June 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 23 June 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	10:35 – 10:55am (20 mins)	Papers

No	Item & Presenter	Tabled for?	Time	Status
8.	Remote Hearings Ian Brack, Chief Executive and Registrar	For discussion	10:55 – 11:20am (25 mins)	Paper
9.	Reserves Policy Samantha Bache, Associate Director, Finance	For approval	11:20 – 11:45am (25 mins)	Paper
10.	Committee Appointments and Appointment of the Senior Independent Council Member Lord Harris, Chair of Council Katie Spears, Head of Governance	For approval	11:45 – 12:00pm (15 mins)	Paper
11.	Chair and Chief Executive Objectives Setting 2023 John Middleton, Head of People Services	For approval	12:00 – 12:10pm (10 mins)	Paper
12.	Council Member and Associates Remuneration John Middleton, Head of People Services	For approval	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 27 October 2023 (Colmore Square)			

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	Joint Regulators Whistleblowing Report	Colin MacKenzie	Noting	Public	20 September 2023

**Minutes of the Meeting of the
General Dental Council
held at 10:30am on Friday 23 June 2023
in Open Session at 37 Wimpole Street, London**

Council Members present:

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

Executive Directors in attendance:

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

Staff and Others in attendance:

Madeline Eastwood	Policy and Project Officer (item 9 only)
Toby Ganley	Head of Right Touch Regulation (item 9 only)
Rebecca Ledwidge	Deputy Head of Governance
Rebecca Lucas	Policy Manager (item 8 only)
Joanne Rewcastle	Associate Director, Communications and Engagement
Ross Scales	Head of Upstream Regulation (item 8 only)
Katie Spears	Head of Governance (Secretary)

Others in Attendance:

Sir Ross Cranston	Chair of the Statutory Panellists Assurance Committee (SPC)
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Members of the public attended as observers.

Apologies

Mike Lewis

1. Welcome and apologies for absence

- 1.1 The Chair welcomed everyone to the meeting, including members of the public who had joined to observe, and noted apologies from Mike Lewis.

2. Declaration of interests

- 2.1 All Members present made a declaration in respect of the item on the correspondence agenda – the Governance Manual.

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 21 April 2023 had been **approved via correspondence**.

5. Matters Arising and Rolling Actions List

- 5.1 The Council **agreed** that the one action marked ‘suggested complete’ should be considered complete.

6. Decisions Log

- 6.1 The Council **noted** that two decisions had been taken by correspondence since the last Council meeting:
- a. On 11 May 2023, the Council approved the update to the Delegation Framework in respect of strategic risk appetite.
 - b. On 21 June 2023, the Council approved minor updates to the Governance Manual.

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 had considered an update from the Chief Executive, and the Strategic Risk Register (SRR). The Committee had sought additional assurance on the escalation process from the operational risk registers to the SRR and on the implementation of the EDI Strategy. It had sought an update from the Finance and Performance Committee (FPC) on its assessment of progress within the Fitness to Practise (FtP) directorate, as far as it pertained to organisational risk. An additional meeting was planned to take place in August to consider some of these issues further.

Finance and Performance Committee:

- 7.3 The Chair of the 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 probed the emphasis within planning of the delivery of business-as-usual work as against project delivery and any changes to approach would be reflected in the next iteration of the work.

- 7.4 The Committee had also considered the ongoing recruitment and retention issues within the organisation, which were having an impact on the delivery of operational plans. There was a need to ensure that organisational policies supported effective recruitment and delivery. The Committee was supportive of the approach to adjust the Financial Delegated Authority to enable flexibility, within budget, to recruit and spend money in year and allow delivery at pace.
- 7.5 The Council heard that the Committee continued to monitor FtP performance closely and noted there were positive signs about the direction of travel. Changes to resourcing, process improvements, and a robust approach to management and leadership appeared to be bearing fruit and numbers were reducing steadily. There continued to be a delicate balance around allocation of resource to old and new cases and the Committee would liaise with the ARC, as appropriate, to support its assessment of risk mitigation in this area. It was noted that the Committee had no concerns about the quality of decision making and took assurance on this through a variety of quality control assurance mechanisms.
- 7.6 The Council heard that the Committee had considered the interdependencies between large projects – such as Estates, Total Reward and workforce development – and noted that the Council would consider some of these issues at its away day. The Committee had also conducted an in-depth review into the Dental Complaints Service (DCS).

Remuneration and Nomination Committee

- 7.7 The Chair of the Remuneration and Nomination Committee (RemNom) informed the Council that the Committee had met once since the last Council meeting. The Council heard that the Council Member appointments process remained on track and that the Professional Standards Authority considered the process followed to be robust and fair. A thorough induction process was being planned to support the new Members of Council and, if timings coincided, they would be invited to observe the summer Council away days. The Committee had also considered verbal updates on workforce development and total reward and would consider this work more fully at its June meeting, including an update on succession planning.

Statutory Panellists Assurance Committee

- 7.8 The Chair of the Statutory Panellists Assurance Committee (SPC) informed the Council that the Committee had met once since the last Council meeting. The Council heard that the Committee had visited some panellists training, had been updated about two large recruitment exercises (in respect of legal advisors and panellists) and were receiving updated reports, with more granular detail, on panel decision making.
- 7.9 The Council heard that, in respect of the administrative separation of the Hearings function, the work had progressed well but there were small technical elements that had been held up due to resourcing issues within the IT function. At its next meeting, the Committee planned to discuss potential approaches to running panels and case management.
- 7.10 The Council **noted** the assurance reports.

Sir Ross Cranston left the meeting. The Head of Upstream Regulation and the Policy Manager joined the meeting.

8. Promoting Professionalism

8.1 The Head of Upstream Regulation and the Associate Director, Communications and Engagement presented the paper that outlined the proposal to conduct exploratory engagement with stakeholders on an approach to updating guidance in respect of professionalism. This engagement was not planned as a formal consultation, but as an informal way of testing the organisation's thinking and gathering insight to enable the Council to take future decisions. There was a phased approach that would allow the team to pause and consider the feedback given at each stage, and progress or amend the proposed approach as appropriate. The first phase of work would start in the summer of 2023 and lay the groundwork for more structured conversations in September.

8.2 The Council **discussed** the following:

- a. It was likely that there would be no universally popular approach and the Council would focus on how best it could equip dental professionals to do the best for their patients.
- b. The Council noted that there would be a need to exercise judgment when considering the evidence gathered by this exercise. Ensuring that people could envisage the changes required to implement a new system was paramount. Ideologically, a move to a principles-based approach might be appealing, but it would need to be practicable. The Council welcomed the fact that the approach to understanding feedback would be iterative and that there were pause points that could be used if needed.
- c. Feedback would be critically analysed, and it would be vital to understand the impact of any changes in approach on operational delivery within Fitness to Practise.
- d. A more limited programme of minor reviews to the existing Standards should be considered, should the work falter at any one of the stages.
- e. There was a need to ensure consideration was given as to how to access 'hard to reach' groups and it was noted that practitioners at the end of their foundation training might offer more insight than students, as they would have more experience in applying the Standards. It was also noted that 'patient or person centred' might be a more useful term than 'holistic' which could be interpreted in a more nebulous way.
- f. The team should consider the need to progress this work as expeditiously as possible and ensure that timelines were focused appropriately. Registrant Members of Council were keen to be involved in helping understand the impact of the proposed materials for dental professionals and whether they were formulated in an accessible way.

8.3 The Council **approved** the approach to conducting exploratory engagement as outlined in the paper and **noted** that it would receive a progress update at the end of Stage 1 of the engagement (Q2 of 2024).

The Head of Upstream Regulation and the Policy Manager left the meeting, and the Head of Right Touch Regulation and Policy and Project Officer joined the meeting.

9. Comprehensive Complaints Resolution Model

- 9.1 The Head of Right Touch Regulation presented the paper that provided an update on the review of complaints handling by the Dental Complaints Service (DCS) and on the progress of this corporate project.
- 9.2 One of the areas of focus for this work was to ensure that complaints were effectively triaged into whichever organisation was best placed to address them and to facilitate lower-level complaints to be handled locally. The DCS had been created to manage complaints about private dental treatment and had filled a gap in the complaints-handling landscape. The team had explored whether there was potential benefit in the DCS considering complaints about NHS dental treatment but had concluded that this would be an intrusion on the existing NHS Complaints system and disproportionately costly.
- 9.3 The Council heard that the DCS provided a valuable function in signposting complainants to the appropriate NHS complaints handling body and this work was designed to promote confidence in the dental professions, avoid matters being drawn unnecessarily into the FtP process and supported patients with the effective resolution of complaints.
- 9.4 The Council **discussed** the following:
- a. Efforts to work with other stakeholders to improve the consistency of signposting across the healthcare system were welcomed.
 - b. There was potential to gather useful intelligence in respect of the dental landscape through these complaints handling functions and the relationships built with other organisations were important. There was also a nuanced interaction for the organisation around the work of the dental body corporates – who may have more developed local complaints handling processes than smaller practices.
 - c. The FPC had conducted an in-depth review into the performance of the DCS at its most recent meeting. It had discussed whether there was benefit in more clearly signposting that the organisation handled only complaints in respect of private dental treatment but noted that there was value in the triage work that took place. It was also noted that the Committee had scrutinised the trends in complaints, the resourcing of the DCS, its interaction with the fees policy and the role it played in managing workflows into FtP.
- 9.5 The Council **noted** the update.
- The Head of Right Touch Regulation and Policy and Project Officer left the meeting.

10. Communications and Engagement Strategy – Review of 2022

- 10.1 The Associate Director, Communications and Engagement presented the paper that outlined a review of progress in relation to the implementation of the Communications and Engagement Strategy.
- 10.2 The Council **discussed** the following:
- a. There was evidence of good progress here in respect of delivery against ambitions and the Council congratulated the team on their achievements to date. The Council welcomed hearing that the registrants' monthly newsletter had good reach.
 - b. The stakeholder engagement programme – particularly by the Chair – was creating good opportunities for the organisation to engage positively with the professions and the public. There was also important work that was ongoing in

delivering key messages about the role (or otherwise, given its statutory remit) that the organisation could play in improving access to NHS dentistry.

- c. It would be useful to understand more fully the groups that were less straightforward to reach and whether there were different ways to approach communicating with them. The evaluation work that took place after events would be valuable in assessing their utility and help future planning.
- d. The Council noted that there was a difference between the capacity and capability of a team to deliver and noted that there would be discussions about the appropriate resourcing levels for the team during the planning rounds for the Costed Corporate Plan and budget. There was a need to 'catch up' with the external world around the use of digital communication.
- e. Council Members noted that they were willing to involved in engagement work and agreed that it would be important to make considered choices about which events were best suited for individual Members.

10.3 The Council **noted** the update.

11. Any Other Business

11.1 There was no other business.

11.2 The meeting was closed at 12:35pm.

**Minutes of the Meeting of the
General Dental Council
held at 13:25pm on Friday 23 June 2023
in Closed Session at 37 Wimpole Street, London**

Council Members present:

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

Executive Directors in attendance:

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

Staff and Others in attendance:

Samantha Bache	Associate Director, Finance (item 8 only)
Rebecca Cooper	Associate Director, Policy and Research (item 9 only)
Rebecca Ledwidge	Deputy Head of Governance
John Middleton	Head of People Services (item 10 only)
Clare Paget	Associate Director, Legal (item 9 only)
Joanne Rewcastle	Associate Director, Communications and Engagement
Katie Spears	Head of Governance (Secretary)

Apologies

Angela Harding	Associate Director, People and Organisational Development
Mike Lewis	

1. Welcome and apologies for absence

- 1.1 The Chair welcomed everyone to the meeting and noted apologies from Angela Harding (in respect of Item 10 – Equality, Diversity and Inclusion (EDI) Strategy – Update on Action Plan) and Mike Lewis. Given that it created a suboptimal meeting experience, the Council **agreed** that hybrid attendance should generally only be permitted in cases of illness or where there was unusual travel disruption.

2. Declaration of interests

- 2.1 Gurvinder Soomal and Katie Spears made a declaration of interest in respect of the update on the Defined Benefit Pension Scheme contained within Item 6 – Minutes of the non-statutory Committees.

3. Approval of Minutes of Previous Meeting

- 3.1 The full minutes of the closed meeting held on 21 June 2023 had been **approved via correspondence**.

4. Matters Arising and Rolling Actions List

- 4.1 The Council **noted** that there were no live actions.

5. Decisions Log

- 5.1 The Council **noted** that one decision had been taken by correspondence since the last Council meeting:
- a. On 24 May 2023, the Council had approved the recommendations of the Selection Panel in respect of Council Member appointments for presentation to the Privy Council.

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 Audit and Risk Committee (ARC) meeting of 18 May 2023.
 - b. The Finance and Performance Committee (FPC) meeting of 25 May 2023.
 - c. The Remuneration and Nomination Committee (RemNom) meeting of 11 May 2023.
 - d. The Statutory Panellists Assurance Committee (SPC) meeting of 7 June 2023.

Audit and Risk Committee

- 6.2 The Council heard a verbal update from the Chair of the ARC in respect of the Committee's discussions in private session on 18 May 2023.

Finance and Performance Committee

- 6.3 The Council heard a verbal update from the Chair of the FPC in respect of the Committee's discussions in on the proposed buyout of the Defined Benefit Pensions Scheme.
- 6.4 The Council **noted** the updates.

7. Chief Executive's Report

- 7.1 The Chief Executive provided an update to the Council in respect of the current external and internal environment.
- 7.2 The Chief Executive noted that much had changed since the Council had approved its Strategy in October 2022. There was significant interlinked project work to deliver, and the Executive Management Team (EMT) was working to identify key priorities over the next plan period. There was a need to carefully focus on strategic priorities and mandatory activities and to avoid overcommitting. This would help to ensure that the organisation could deliver what mattered, and at pace.
- 7.3 The Council **noted** the updates.
The Associate Director, Finance joined the meeting.

8. Financial Delegated Authority – Headcount Management

- 8.1 The Associate Director, Finance presented the paper which proposed an amendment to the Financial Delegated Authority to allow for greater flexibility for the Executive Management Team to manage headcount requirements within the budget envelope agreed by the Council. The Council noted that the Chair of FPC and the Accounting Officer were supportive of the proposals and **approved** the update to the Financial Delegated Authority.
The Associate Director, Finance left the meeting.
The Associate Director, Policy & Research and Senior Counsel and Associate Director, Legal joined the meeting.

9. International Registration

- 9.1 The Associate Director, Policy & Research presented the paper which sought approval from the Council to consult on proposed draft Rules governing the GDC's international registration processes. The Council was presented with draft Rules for consideration in respect of the Overseas Registration Examination (ORE) and the assessment process for overseas qualified Dental Care Professionals (DCPs). The Council was reminded that the draft Rules were transitional provisions, which would be put in place to govern the system whilst longer term plans were developed.
- 9.2 The Council was reminded about the recent Section 60 Order which amended the GDC's legislative framework in respect of international registration. The existing Rules would expire in March 2024, so it was necessary for the Council to make new Rules to ensure that the organisation could continue to deliver the ORE and assessment processes for overseas qualified DCPs. There was a requirement for the organisation to consult on the form of those Rules and, whilst wholesale changes were not proposed at this point, this consultation also would help inform the development of longer-term policy approach.
- 9.3 The Council **discussed** and **approved** the proposal to consult, the draft consultation document (subject to a review for clarity) and the form of the draft Rules for consultation.
The Associate Director, Policy and Research and Senior Counsel and Associate Director, Legal left the meeting.
The Head of People Services joined the meeting.

10. Equality, Diversity and Inclusion (EDI) Strategy – Update on Action Plan

- 10.1 The Chief Operating Officer and Head of People Services presented the paper outlining the organisation's progress in implementing the EDI Strategy. The Council heard that the team had redrafted the paper following feedback from the ARC and noted that RSM were conducting an audit in this area over the next few weeks to support additional assurance.
- 10.2 The Council **noted** the update. The next iteration of the implementation of the action plan would be considered by the ARC and the refreshed Strategy would be considered by the Council in October.

The Head of People Services left the meeting.

11. Any Other Business

- 11.1 There was no other business, and the meeting was closed at 15:35pm.

Decisions Log – Public Council – 22 September 2023

Date decision taken (confirmed)	Decision taken by	Agenda Item	Purpose	Outcome
15 September 2023	Council – by correspondence	Recruitment of SPC Member and Independent Member of the Remuneration and Nomination Committee 2024	To commission the appointments processes for a replacement Member of the Statutory Panellists Assurance Committee and an independent Member of the Remuneration and Nomination Committee in 2024. The process will be scrutinised and approved by the Remuneration and Nomination Committee.	The Council commissioned the appointments processes for both positions.

Audit and Risk Committee (ARC) Assurance Report

Since the last Council meeting, the ARC has met once at an extraordinary meeting held on 10 August 2023.

The meeting was convened to review in detail the Strategic Risk Register (SRR) and the status of Internal Audit recommendations, and to determine whether there were any gaps in the Internal Audit Assurance Plan for the remainder of 2023.

The Committee:

- **Approved** the Strategic Risk Register (SRR) with amendments following an in-depth review and discussion. The Committee asked and was given verbal assurance that the activities shown in the risk register would be delivered by the dates indicated in the register.
- There was discussion that it might be more useful for the GDC – as a regulator – to consider risk in terms of tolerance rather than appetite. This is a question in part posed by the risks that remain outside appetite and have done for a considerable period of time.

The Committee agreed an approach for the management and reporting of emerging risk via the SRR and the Chief Executive's update to the Committee. The Committee requested that consideration be given to how risk reporting could be managed to support more contemporaneous discussions at meetings.

The Committee continues to question whether the risks on the SRR are indeed strategic and whether they are a full reflection of the risks to the delivery of the strategic objectives of the GDC and/or a capture of the concerns of the CEO and his senior team.

- **Approved** the status of implementation of internal audit recommendations. The Committee was informed that the process for closing internal audit recommendations had been strengthened, whereby evidence was being sought to demonstrate the implementation of Priority 1 and 2 recommendations.
- **Approved** the Internal Audit plans for the remainder of 2023. No changes were made to the plans after a review of the SRR and the Internal Audit Recommendation Tracker. The Committee sought and received assurance that there were robust processes in place to manage cyber risk. A recommendation was made for the GDC to establish an approach for horizon scanning for areas of risk which might be done against a PESTLE analysis for external risk.

The next meeting of the ARC is on Monday, 9 October 2023 in person at Wimpole Street.

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 twice since the last meeting of the Council. The Committee held one single-issue meeting on 13 September 2023 via MS Teams to discuss and scrutinise the Costed Corporate Plan (CCP) 2024-2026 and Budget Setting – Version 4. The Committee received the CCP draft plan and budget and raised a number of detailed questions and comments. Some of the comments raised had been accepted in the meeting and others would be worked on ahead of presentation to the Council. The Committee robustly scrutinised the plan and budget and raised issues which would be addressed by the Executive Management Team (EMT). The Committee also received the proposed 2024 Reserves Policy and agreed to endorse the policy on the condition that this would be reviewed (including benchmarking) in Q1 2024.

The Committee held a substantive meeting via MS Teams on 20 July 2023 to discuss:

- Organisational Performance Reporting Update
- Fitness to Practise Operational Update
- Request to Place Cash Held on Treasury Deposit
- Costed Corporate Plan (CCP) 2024-2026 and Budget Setting – Version 2
- Performance Management Framework
- In-Depth Review – Legal and Governance

The discussions and actions are summarised below:

1. Organisational Performance Reporting Update

- The Committee received a verbal update on Q2 performance including Operational Delivery, CCP Portfolio Delivery, Workforce and People and OD and a Financial Summary.
- The Committee heard that application volumes and the ability to meet timeliness targets for processing remained a significant challenge for the Registration function. There was a plan in place to help deal with this, commencing Q3 2024, to increase the size of Registration Casework teams and to increase the number of registration panels in place per month.
- The Committee heard that there were currently 33 projects in progress, 17 of which were reported in exception at the end of June 2023. Seven of the projects in exception required IT CRM development. As demand was exceeding current developer capacity, the EMT would consider a proposal for a change to IT priorities and how to manage current resource.
- A summary paper containing the information provided was circulated to the Committee following the meeting.

2. Fitness to Practise (FtP) Operational Update

- The Committee received an update on the performance of the FTP Casework function and the performance of the team in addressing the caseload.
- The Committee noted that the team was currently on track to reach the target number of cases in progress by the end of July 2023.
- The Committee noted that a reduction in older cases would be a pre-requisite for improving timeliness and agreed that when the volume of older cases had reduced, a review of the timeliness KPI would take place.

- The Committee noted that as there had been improvement in one area, with more cases being processed through to the next stage, it created pressure in other areas. The Committee was assured that the team was taking a proactive approach to dealing with this.
- The Committee discussed how the target caseload set was dependent on the type and number of cases received and the current capacity of the team, both of which were liable to change. The Committee requested that the next update should set out the caveats for a sustainable run rate, as well as what a sustainable caseload range might be.
- The Committee agreed that as FTP moved towards business-as-usual (BAU), future updates should provide a higher-level overview.

3. Request to Place Cash Held on Treasury Deposit

- The Committee received a proposal for two treasury deposits.
- The Committee discussed the current investments policy. It was agreed that, considering the new higher interest rate environment, the Committee should be presented with a proposal for a reframed policy which would enable the GDC to take advantage of current opportunities. This would include a minimum level of cash that should always be accessible.
- The Committee agreed to the proposed treasury deposits and accepted the risk of financial penalty (loss of interest) should there be a requirement to realise the deposits earlier than the agreed terms.

4. Costed Corporate Plan (CCP) 2024-2026 and Budget Setting – Version 2

- The Committee received the first full draft of the CCP 2024-2026 which included the portfolio, workforce and budget plans adhering to the CCP planning principles.
- The Committee noted that the Executive Management Team (EMT) had identified a set of priorities which were set out in the plan and that the next exercise would be for the EMT to take the full set of project and resource requirements and map them against the priorities to create a more focused plan.

5. Performance Management Framework

- The Committee noted the five core performance management tools that were in place across the GDC as part of wider reporting structures. The People and Organisational Development (POD) team were also finalising a new Capability Policy Procedure which would provide tools for managers to support employees if their performance had fallen below an acceptable standard due to capability issues.
- The Committee noted that although an appraisal management system had always been in place, the reporting of appraisals had changed. The setting of objectives at the beginning of the year along with a mid-year check in and an end of year discussion was being reintroduced in all areas of the business.
- The Committee heard that essential skills training was being provided to managers across the organisation to empower them to engage in difficult conversations with their direct reports. The Committee agreed that support should also be provided to old managers who did not previously receive training.
- The Committee indicated that the motivation for requesting the report was for the Committee to better understand the consequences of hybrid working and to receive assurance that hybrid working was helping the organisation to deliver against its objectives and the CCP. The Committee agreed that it was unable to draw those conclusions from the paper. The Remuneration and Nomination Committee (RemNom) would be asked to look at

performance management in a hybrid working environment from a cultural and behavioural perspective.

6. In-Depth Review – Legal and Governance

- The Committee received a current overview of the performance of the Legal and Governance Directorate.

The next Committee meeting will be held on 12 October 2023 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 29 June 2023. At the meeting the Committee **discussed** the following:

- Council Member Appointment Process

The Committee reviewed, scrutinised and approved the Council Member Appointment Process. The process remained consistent with that used for the 2023 appointment to Council of two Registrant Members which had been commended by the Professional Standards Authority (PSA) for being clear and robust.
- Council Member Reappointment Process

The Committee reviewed, scrutinised and approved the Council Member Reappointment Process for reappointments in 2024, which would follow the process used for the reappointment of two Registrant Members in 2023. The PSA would provide assurance to the Privy Council on the process.

The Committee noted the proposed one-year extension to the Chair of the Audit & Risk Committee's term of office.
- Chair and Chief Executive Objective Setting Process

The Committee received and commented on the proposed process to set objectives for the Chair and Chief Executive. The Committee recommended the Chair and Chief Executive Objective Setting Process to the Council for approval, subject to more clarity on how objectives are generated and improvements to the monitoring processes for the delivery of objectives.
- Update on Workforce Development Plan

The Committee received a report on the progress made with the Workforce Development Plan which will be delivered over the course of three years. A Project Initiation Document will be drafted alongside a project plan for the first year of delivery. A dashboard will be developed to report on progress against the project plan, which will include data points to enable the oversight and monitoring of delivery.
- Council Member and Associates Remuneration Light Touch Review

The Committee received a paper on the light touch review of Council Member and Associates Remuneration which had been commissioned by the Council to ensure that the level of remuneration remained commensurate with expected rises in inflation. The Committee accepted the recommendation for no changes to the remuneration of Council Members and Associates in 2023.
- Update on Total Reward Project

The Committee received an update on the Total Reward Project which seeks to establish an affordable pay and grading system, review the job evaluation method, provide work / life balance, improve employee engagement, refresh staff recognition schemes, and introduce non-financial reward mechanisms. A procurement process was underway to commission an external consultancy to deliver the pay and benefits package elements of the plan.

The Committee next meets on 18 October 2023.

Anne Heal, Chair of the Remuneration and Nomination Committee.

Statutory Panellists Assurance Committee (SPC) Assurance Report to the Council at its 22 September 2023 meeting

1. SPC met once since the last meeting of the Council on 05 September 2023 in Wimpole Street, London.
2. In addition, there continue to be informal conversations between SPC members and between the Chair and the Executive about the implementation of the Committee's priorities.
3. Ahead of the main Committee meeting a workshop session was held on the Future of the FTP Panels.

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 (DPHS).

Recruitment of FTP Panellists

5. The Committee received an update on the FTP panellist's recruitment project. An analysis of the EDI profile of appointees was being completed by People Services.
6. Panellists were selected for appointment in 2024 and 2025. Those selected for the second tranche would have some engagement with Hearings in preparation for appointment in 2025.
7. The Committee **approved** the appointment of the individuals identified as members of the FTP Panel either to sit from January 2024 or to be held in a pool for appointment during 2025.

Appointment of FTP Chairs

8. The Committee heard that two chair selection sessions had been held since the last Committee meeting.
9. The Committee **approved** the appointment of the individuals named to the FTP pool of chairs.

Appointment of Legal Advisers

10. The Committee received a proposal to appoint legal advisers serving from January 2024 following the recent recruitment campaign.
11. The Committee **approved** the appointment of the new advisers and the re-appointment of the existing advisers identified.

Learning, Development and Performance Update

12. The Committee heard that training and induction dates for 2024 would be circulated to the Committee as soon as available.
13. The Committee noted that the area that had generated most feedback from panellists and advisers was around the CPD Registration Appeals which were currently being listed. The issues were being taken forward by the Legal and Registration teams.

Quality Assurance Reports

14. The Committee noted that Interim Order Committee (IOC) guidance was being updated and was expected to be published in Q4 2023.
15. The Committee noted that many issues identified at the Decision Scrutiny Group (DSG) had already been discussed at the Quality Assurance Group (QAG) which gave a good indication that issues were being identified appropriately.
16. The Committee noted that the issue of sanctions for those convicted of criminal offences was currently on the agenda for the upcoming Chair's training.

The next Committee meeting will be held on 09 November 2023 in Wimpole Street, London.

Sir Ross Cranston

Consultation on remote hearings

Executive Director	John Cullinane, Executive Director, Fitness to Practise
Author(s)	John Cullinane, Executive Director, Fitness to Practise Toby Ganley, Head of Right Touch Regulation
Type of business	For noting
Purpose	This paper set out our plans to consult on moving to a default position of hearing all Dental Professionals Hearings Service cases remotely.
Recommendation	Council is asked to note the contents of this paper.

1. Background

1.1 This paper sets out our plans for consulting on moving to an expectation that all hearings listed by the Dental Professionals Hearings Service will be heard remotely, unless there is agreement through the processes set out in the consultation. Although this has been the default position since 2020, because of COVID, we want to confirm this as our long-term position. In February 2022, we publicly committed to consulting on making this a permanent change. We are now ready to begin that consultation.

2. Current position

2.1 At present, we list all hearings to be heard remotely. In February 2021, we consulted on revisions to the guidance to Practice Committees for preliminary meetings, which included an additional section on the factors they should consider if asked to determine how a Practice Committee should be heard. That guidance was introduced in February 2022.

2.2 Since 2022, we have:

- Heard 89% of Practice Committee and Interim Order Committee hearings remotely and 11% fully or part in person;
- Heard 81% of initial PC hearings (166 cases) remotely and 19% (39 cases) fully or part in person;
- Received 42 applications for hearings to be heard in person, fully or in part. 17 were agreed by parties without reference to a panel, 20 agreed by a panel and only 5 rejected;
- Agreed the method of hearing between parties, without reference to a panel, of all 124 hearings in 2023, to the end of July.

2.3 This suggests that the current process for determining the method of hearing is clear to all parties and that there is general agreement on those cases which should be heard in person and those that are suitable to be heard remotely. We are also reassured that there have not been any appeals raised on the basis that the method of hearing was

unfair. This suggests that there are no widespread concerns that remote hearings are unfair.

2.4 Our data does not indicate an increase in representation or attendance at remote hearings compared to in person hearings, but other regulators have reported higher levels of engagement in remote hearings. We intend to collate and report on this data more fully in future.

2.5 In terms of support for participants in remote hearings, At the time of writing, we are progressing cases in line with the projections set out in previous papers. The team remains confident that the in-progress caseload will be around 550 cases by the end of July, in line with the target given to the team. The figures for the end of June, described later in this paper, demonstrate that this target is well within reach.

3. Proposals in the consultation

3.1 In the consultation, we propose that all hearings are, by default, heard remotely. However, should any party consider that the matter should be held in person, either in full or in part, there is an agreed mechanism to request this should there not be agreement amongst all parties. The mechanism will differ according to the type of hearing, because of the varying factors and rules relating to each activity. We are proposing the following for the different types of hearings:

- For Practice Committees – the Chair or members of the committee will make a determination about the format of the hearing at a Preliminary Meeting.
- For Registration Appeals Committees – the Chair or members of the committee will make a determination about the format of the hearing at a Directions Hearing.
- For Interim Orders Committees – due to the urgency of these hearings if parties are unable to agree to a remote hearing, it will be held in person.

3.2 In the consultation paper, we set out the factors that a Chair should consider. These include matters relating to the ability of participants to appropriately use technology, evidence that the fairness of the hearing may be compromised if held remotely, access of participants with disabilities, and any features of the case that might make it difficult to hold remotely (for example, specific issues around the evidence to be presented). These factors are the same that have been in place while we have been holding hearings remotely.

3.3 We ask two questions in the consultation. The first asks to what extent respondents agree with our proposals to hold hearings remotely, with the specific proposals for each type of case, and whether the specific factors listed are clear to all parties. The second questions asks whether respondents feel these proposals will affect any particular group of people, based on their protected characteristics.

3.4 We propose to launch the consultation as quickly as possible after the Council meeting. The consultation will run for 12 weeks, and we will publish a response to the consultation once we have analysed the responses.

4. Legal, policy and national considerations

- 4.1 ILAS colleagues have been involved in the development of this consultation proposal. The proposal itself is a continuation of our current policy on how we hold hearings, and follows our commitment to consult if we decided to make remote hearings the permanent default option. The Registrar was fully briefed on the proposal at the outset of the development of the proposal, and has been updated on progress throughout. There are no specific national considerations.

5. Equality, diversity, and privacy considerations

- 5.1 We have a specific question in the consultation seeking views on whether the proposals will adversely affect, or benefit, any groups as identified by protected characteristics. An EIA will be undertaken, informed by the responses to the consultation, and will be taken into account when the final decision on the proposal is made.

6. Resource considerations and CCP

- 6.1 The consultation will be led by the Policy team, who have confirmed that they have the capacity to run the consultation effectively.

7. Next steps

- 7.1 We will publish the consultation shortly after Council meeting, and we will report back on the outcome of the consultation in 2024.

John Cullinane, Executive Director, Fitness to Practise
jcullinane@gdc-uk.org
15 September 2023

Appendix 1

Consultation on the format of hearings

Overview

The Dental Professionals Hearings Service arranges and holds hearings about dental professionals' fitness to practise and registration under the Dentists Act 1984, the General Dental Council (Fitness to Practise) Rules Order of Council 2006, and the General Dental Council (Registration Appeals) Rules Order of Council 2006. The GDC is consulting on proposed changes to standard practice for the conduct of those hearings, and making permanent the current practice of holding hearings remotely¹ except where there are circumstances requiring an in-person hearing. To support this change, we have developed guidance for decision makers who are asked to determine the format of a hearing. It is proposed that this guidance will replace the section entitled *Direction on the format of the substantive hearing (remote or in-person)* of *The GDC Fitness to Practise: Preliminary Meetings Guidance* and will apply to all Practice Committee and Registration Appeals Committee hearings. The proposed guidance is set out below.

Prior to the onset of the COVID 19 pandemic in early 2020, GDC hearings were held in person accommodated by the 5-room hearing suite in the GDC's Wimpole Street offices. In common with other organisations, from March 2020 we were unable to convene in-person hearings due to the government-imposed lockdown measures. To ensure we could continue to hold hearings during the period where in-person meetings were not viable, we developed methods for holding hearings remotely. Since introducing remote hearings, we have made improvements to the process, and as a result have continued, since the end of the series of lockdowns and work-from-home orders, to operate hearings remotely, except where there are circumstances that require an in-person hearing to be convened. The current process still relies, however, on the position reached due to the pandemic and is therefore a temporary arrangement. We have previously committed to consulting stakeholders prior to making the current arrangements permanent.

Under the current arrangements, to ensure that the process is fair, that the parties are able to engage effectively with the proceedings, and that the outcome is not prejudiced by the format of the hearing, parties can request that a hearing be held in person. Where parties cannot agree the format of the hearing, the decision will be referred to a panel. In making the decision the panel will balance the interests of the registrant and the need to ensure the overall fairness of the proceedings against the public interest in fitness to practise cases being heard as expeditiously as possible. Decisions are made on a case-by-case basis, weighing the advantages and risks. The views of the parties are sought, and all points raised are considered. Neither party has a veto over the method of hearing.

We propose to deal with interim order hearings slightly differently due to the urgent nature of such hearings. The default position will be that these hearings are heard remotely, in common with other hearings. However, if a registrant requests that an Interim Order hearing is in person, then it will be held in person.

¹ Remote hearings are those where participants join by video or audio link. We currently use Microsoft Teams to support remote participation in hearings. In person hearings are those in which participants join at a specified physical location. Hybrid hearings are those where one or more of the participants are physically present for some or all of the time, while others join remotely.

We propose to continue these arrangements, with remote hearings being the default format.

Having successfully operated remote hearings for over three years and having improved and refined the process over this period, we are now confident that the format works effectively, and that there have been no negative impacts on fairness², privacy or efficiency³. There is also some anecdotal evidence to suggest that some registrants, may find it easier to engage with a virtual hearing than an in-person one, and some regulators have found that remote hearings have resulted in increased levels of participation.⁴

We also recognise, however, that there are times when hearings are best held in person, either fully or in part to meet the needs of participants or for the presentation of evidence.⁵

In this consultation, we are seeking views on our plans to hold hearings remotely by default. If we go ahead with this, it means that in future, unless one or both parties provide reasons that suggest that a hearing, or part of one, should be convened in person, all hearings will be held virtually. Making this change means that we need to provide guidance to decision-makers, which sets out how to determine the method of a hearing where parties do not agree on the format of the hearing. We are therefore also consulting on that guidance.

We are particularly interested in views on any positive or negative impacts of this proposal on any individuals or groups sharing any of the protected characteristics in the Equality Act 2010.

Consultation period and deadlines for responses

To be completed

Ways to respond

Please respond to this consultation using [the online survey](#).

Commented [JC1]: hyperlink

You can also submit your response by [email](#). When doing so please include the name of the consultation in the subject line, or something similar that helps it to be identified easily.

Commented [JC2]: hyperlink

When submitting by email, please reference your responses or views using the paragraph or question numbers used in this document.

For details of how your data will be processed and stored, please see our [Privacy Notice](#). Information held by the GDC is subject to Freedom of Information requests, so please do not provide any information you would not want to be disclosed.

Commented [JC3]: hyperlink

Response to your views

² Since 2020, there have been no appeals that take the point of unfairness on the basis of remote hearings.

³ Internal analysis has found that from January 2020 to December 2022, remote hearings had a median duration of 3 days compared to a median duration of 5 days for in person hearings, however, complexity of cases and other variables may have had an effect, and both remote and in person hearings closed within the predicted listing window.

⁴ HCPC has found "increased registrant attendance" where hearings are held remotely [enc-07---remote-hearings-consultation.pdf \(hcpc-uk.org.uk\)](#), and GPhC has found "increased engagement and attendance" [gphc-council-papers-12-may-2022.pdf \(pharmacyregulation.org\)](#)

⁵ See the PSA's [Guidance for regulators on fitness to practise hearings during the Covid19 pandemic](#)

The GDC will respond to views raised during the consultation by producing a consultation outcome report. The report will be published on the GDC website.

Contact us

If you have any questions or queries about this consultation:

Email: stakeholder@gdc-uk.org

Phone: 020 7167 6330

Details of the proposals for GDC hearings

Background

The GDC is the regulator of dental professionals, and it exists to protect the public. In seeking to protect the public, the GDC pursues three key objectives, which are set out in the [Dentists Act 1984](#). These are:

- to protect, promote and maintain the health, safety and well-being of the public;
- to promote and maintain public confidence in the professions regulated under this Act; and
- to promote and maintain proper professional standards and conduct for members of those professions.

The work we do in pursuit of these objectives is focused on our registers, and is aimed at ensuring that:

- only those who are appropriately trained and qualified are entered onto the registers;
- those who are on the registers continue to practise safely and professionally; and
- where a person on the register falls short of the required standards and thereby poses a risk to the public as a result of their competence, conduct or health, that risk is managed effectively.

Such risks are managed by our fitness to practise process. This process begins with an investigation into an allegation of impaired fitness to practise. The outcome of that investigation may require a hearing to determine whether a professional's fitness to practise is impaired, and whether they should be allowed to continue practising without restrictions. The panels that make decisions at these hearings are called Practice Committees.

Preliminary meetings provide an opportunity for parties to seek directions on a case prior to a Practice Committee hearing. They are a case management tool that can be used to narrow, refine or resolve issues ahead of a hearing. They can also be used to decide the format of a hearing, whether it be remote, in person or a hybrid.

In some cases, particularly those where there is thought to be a serious or imminent risk to the public, we convene hearings to consider whether to impose an interim order. Such an order can restrict a professional's practice before the full facts of the

case have been determined. The panels that make decisions at these hearings are called Interim Orders Committees.

Where a Practice Committee or an Interim Orders Committee has placed a restriction on a professional's practice, via, for example, conditions on their practice or a suspension, we also convene hearings to review those restrictions.

Committees called Registration Appeals Committees can also be convened to consider appeals from dental professionals where they have been refused entry onto a register, removed from the Register (but not by a Practice Committee, for example, for failing to comply with continuous professional development requirements), or not restored to the Register (but not by a practice Committee).

A Directions Hearing can be convened ahead of a Registration Appeal hearing and functions similarly to a Preliminary Meeting before a Practice Committee hearing and provides for the Committee to give directions as to the conduct of the case.

Prior to March 2020, hearings were held in person at our hearing facilities in London. When national lockdowns were imposed in March 2020 we were, in common with other regulatory bodies, unable to hold in-person hearings. We therefore explored alternatives and arranged for hearings to take place remotely, initially via Skype and later via Microsoft Teams. We initially focussed on interim orders and review hearings before starting to hold substantive hearings online in August 2020.

From September 2020, we held some hearings in person, in line with national restrictions, but most hearings continued to be held remotely. In January and February 2021, we consulted on revisions to the guidance to Practice Committees for preliminary meetings, which included a new section on the factors they should consider if asked to determine how a Practice Committee hearing should be heard. [The guidance](#) was introduced in February 2022. At the time of introducing the guidance we were still working on the assumption that changes would be temporary, and we are now consulting on making remote hearings our permanent approach. The effect of these changes would be for hearings to be held remotely except where parties agree that they should be in person, or:

- For Practice Committees – the Chair or members of the committee at a preliminary meeting conclude, based on reasons provided by one or both parties, that it should be held in person.
- For Registration Appeals Committees – the Chair or members of a committee at a Directions Hearing conclude, based on reasons provided by one or both parties, that it should be held in person.

- For Interim Orders Committees – due to the urgency of these hearings if the registrant requests an in person hearing, it will be held in person.

The current position

As explained above, since March 2020 most hearings have been held remotely or on papers and the current presumption is that hearings will be remote. Parties can agree to hold the hearing, in full or in part, in person, or the Chair or members of a Practice Committee panel can direct that a hearing be held in person if asked at a Preliminary Meeting.

Since 2022, for Practice Committee and Interim Orders Committee hearings:

- 89% have been remote and 11% have been heard (fully or in part) in person.
- 81% (166 cases) of initial hearings have been remote and 19% (39 cases) have been heard (fully or in part) in person.
- there have been 42 applications for hearings to be held in person or hybrid with 17 of these agreed by parties without being referred to a panel, 20 were granted by a panel, and only 5 were refused.
- the method of hearing (remote, hybrid, in-person) has been agreed by parties for each of the 124 hearings in 2023, up to the end of July.

This suggests to us that holding hearings remotely by default is perceived by registrants and their representatives to be working well and the way we determine whether a hearing needs to be held in person is also effective.

There have been no appeals against the GDC, since 2020, that have challenged the decision on the basis that the hearing was held remotely. This, as well as the other data regarding requests for in person hearings, suggests to us that there are no widespread concerns that remote hearings are unfair or that there are any widespread concerns with the process that the GDC have for deciding on whether a hearing should be in person or remotely if there is no agreement.

Our data from hearings does not indicate whether or not representation and attendance is increased at remote hearings compared to in person hearings but some regulators have reported higher levels of engagement by registrants in remote hearings.⁶ We will continue to monitor these trends to determine whether the use of remote hearings has a measurable impact. If remote hearings lead to increased attendance and participation, it is likely that this would benefit registrants.

⁶ HCPC remote hearings consultation [enc-07---remote-hearings-consultation.pdf \(hcpc-uk.org.uk\)](#); GPhC consultation analysis [gphc-council-papers-12-may-2022.pdf \(pharmacyregulation.org\)](#);

However, there are also a range of potential disadvantages to remote hearings. Other regulators have highlighted issues such as: reduced support for the registrant from their representatives when they are joining from different locations, which may raise well-being issues, and potential distractions and privacy issues where environments that participants join from are not arranged appropriately.

We currently provide support to participants in remote hearings and propose to continue this support if we adopt our current remote hearings position on a permanent basis. Our participant support officer is available to signpost participants to support, particularly for unrepresented registrants. We also offer support for participants who have difficulty using the required technology. We discuss their needs and have hearing support officers who are available to offer test calls to check connectivity and discuss use of the technology. We also have guidance available for those who need it advising on how to join a Microsoft Teams call.

Proposals

We are proposing that our default position will be that hearings will be held remotely going forward, while preserving the ability for parties to request the hearing be held in person. When such a request is made to the GDC, if not agreed between parties, the request will be made to:

- For Practice Committees – the Chair or members of the committee will make a determination about the format of the hearing at a Preliminary Meeting.
- For Registration Appeals Committees – the Chair or members of the committee will make a determination about the format of the hearing at a Directions Hearing.

In relation to Interim Orders Committees, we propose a different process due to the urgency of these hearings. If the registrant requests a hearing in person, it will be held in person.

The draft guidance (included below) sets out the matters that the Chair or Committee members should take into account when making this decision.

We believe this process to decide on the method of hearings is fair to dental professionals and enables fitness to practice process that is fair to registrants. If a registrant wishes to have the hearing in person due to the particular circumstances of the case, then they are able to apply to a Chair or a panel if it is not agreed, which ensures that any particular issues are set out and considered by a panel in

accordance with objective criteria. This is an important safeguard to ensure that hearings are held in person when it is fair to do so.

The evidence base in relation to remote hearings is still developing, in regulatory contexts and others. However, we believe that introducing a permanent position of holding hearings remotely, by default, will have the following benefits:

- There will be certainty of all parties about the likely method of hearing a case;
- It will reduce the cost to registrants who would otherwise have had to travel to, and stay in, London;
- It will reduce the need to make alternative arrangements for those who have caring responsibilities and would otherwise have had to travel to, and stay in, London;
- There are potential significant cost savings to the GDC, including in not paying the expenses of witnesses and experts to travel to hearings.

We will monitor and evaluate the impact of the proposed changes should they be introduced, including paying particular attention to whether anyone faces disadvantages that relate to protected characteristics, or other personal circumstances, such as those related to professional role or resources.

Guidance for deciding the method of hearing

The following proposed guidance reflects the guidance for Preliminary Meetings that was introduced in February 2022. It is intended to clarify the basis on which the panel will consider any application to hold a hearing in person where parties do not agree to a remote hearing.

The GDC consulted on guidance for panels in February 2022 on the basis that it would be included on a temporary basis whilst pandemic concerns remained. We are now consulting to implement this guidance on a permanent basis to support our proposed process to hold hearings remotely by default, unless the parties agree to hold the hearings in person, or, in the absence of an agreement, a panel directs a hearing to be held in person.

Proposed Panel Guidance

Direction on the format of the substantive hearing (remote or in-person)

1. If parties do not agree to a remote hearing, the Chair or Committee members will be asked to give a direction whether the hearing should be held remotely or in-person at a preliminary meeting or directions hearing.
2. It is the GDC's position that hearings be held remotely, with in-person (or hybrid) hearings being the exception.
3. Where there is a request for a hearing to be held in-person, the Chair or Committee members must balance the interests of the registrant and the need to ensure the overall fairness of the proceedings, against the public interest in fitness to practise cases being heard as expeditiously as possible.
4. When determining whether a hearing currently listed should be held in-person (or as a hybrid), the Chair or Committee members must adopt the appropriate approach on a case-by-case basis, weighing the advantages and risks in each case. In that regard, where available, the views of the parties should be sought. The Chair or Committee members should ensure that all points raised by either party are considered when deciding on these matters and that these points are given appropriate weight in all circumstances. Neither party has a veto over the method of hearing.
5. The Chair or Committee members when determining the decision, should also take into account⁷:
 - (i) Whether the registrant and other participants have sufficient access to and understanding of technology to enable them to take part effectively in a remote hearing, including having access to advice.
 - (ii) Whether there is reason to believe that there are risks of a breach of privacy – these might arise where the facts are sensitive, especially if they involve intimate medical or sexual matters or vulnerable people, the case has attracted media attention, or there are particular features of the case or of those involved that point to a heightened risk.
 - (iii) Any features of the case which make it particularly difficult for it to be held remotely (for example, difficulties in presenting evidence, difficulties for witnesses or parties in following proceedings or accessing evidential bundles when required, and/or where an interpreter may be required).
 - (iv) Any evidence which suggests that the integrity or fairness of the hearing may be compromised by a remote hearing.
 - (v) The impact of any disabilities or other vulnerability of any of the participants.

⁷ See the PSA's [Guidance for regulators on fitness to practise hearings during the Covid19 pandemic](#)
⁸ Mr Justice Warby observed in *Dutta, R (On the Application Of) v General Medical Council (GMC) [2020] EWHC 1974 (Admin)*, that witness demeanour was an ineffective method to exclusively evaluate credibility and reliability. He stated: 'Reliance on a witness's confident demeanour is a discredited method of judicial decision-making'

- (vi) The ability to ensure that the hearing complies with government guidance on the safety of all involved.
 - (vii) And any other matters that would be likely to affect the integrity or smooth running of the hearing (including, for example, whether providing evidence from a home environment has the potential for distractions which might impact on their involvement such as childcare).
6. It is unlikely that the wish to assess the demeanour of a witness in person would, on its own, justify the need for an in-person hearing⁸.

Equality and Diversity

We are required by the Equality Act 2010 in exercising our functions 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 that the equality and diversity implications of any new proposal are considered. We believe that the proposals to hold hearings remotely by default are likely to benefit those who will find it difficult to travel to attend hearings in person, for example people with disabilities or those with caring responsibilities, who are likely to be female. We also believe that the ability to apply for the hearing to be held in person will ensure that there is no particular detriment suffered by those who would find remote participation difficult due to their protected characteristics.

We have asked for views on the impact of our proposals on those with protected characteristics.

Questions

To what extent do you agree with the following. Please provide your reasons for your answer:

1. The proposal to hold all hearings remotely by default, unless parties agree otherwise;
2. The proposed method to decide the format of a hearing where the parties do not agree in relation to:
 - a. Practice Committees

- b. Registration Appeal Committees
- c. Interim Order Committees

3. The factors in the proposed guidance are the appropriate ones when a panel considers whether to hold a hearing in person;
4. The factors in the proposed guidance are sufficiently clear to assist all parties when deciding whether to request or agree to an in person hearing.

We want to understand whether and how our proposals might advantage or disadvantage people. Please consider the following factors and indicate for each whether you think remote hearings might be advantage or disadvantage (Scale: Greatly advantage, somewhat advantage, Neither advantage nor disadvantage, somewhat disadvantage, greatly disadvantage, Not sure)

- Age
 - Disability
 - Gender reassignment
 - Marriage and civil partnership
 - Pregnancy and maternity
 - Race
 - Religion or belief
 - Sex
 - Sexual orientation
 - Dental professional role
 - Challenges with resources (time, travel costs etc)
5. If you think that our process for holding remote hearings by default as set out in this paper would be disadvantageous in relation to any of these factors, please explain why.

If there is anything else you would like to raise regarding our proposals, please use the box below.

Commented [JC4]: I've accepted the formatting but I see we have two sections starting "1" now?

Reserves Policy 2024

Executive Director	Gurvinder Soomal, Chief Operating Officer
Author(s)	Samantha Bache, Associate Director, Finance
Type of business	For approval
Purpose	This paper is presented to the Council in respect of its role in approving the reserves policy of the organisation.
Issue	To present the proposed Reserves Policy for the GDC in 2024.
Recommendation	The Council is asked to discuss the content of this paper, approve the Reserves Policy 2024, and note that a review of the reserves policy for future years will be undertaken in Q1 2024.

1. Background

- 1.1. The Reserves Policy is designed to ensure that the GDC remains financially viable and can deliver its functions and processes which protect the public and regulate the dental profession.
- 1.2. The GDC's reserves levels are actively managed and planned for. They form part of our annual budgeting process through our work on updating the rolling Costed Corporate Plan. They inform decision-making on what financial resource is available to support the delivery of our strategic activities and the Costed Corporate Plan process identifies what reserves we must continue to hold to meet potential financial uncertainty.
- 1.3. The current target level of free reserves per the 2023 Reserves Policy, as adjusted for known financial risk exposure, is equivalent to 4.5 months of operating expenditure. This target seeks to provide the optimum level of financial reserves to be held in providing resilience to respond to the known unknowns that cannot be accurately planned or provisioned for.
- 1.4. The current range of free reserves for the GDC, as adjusted for known financial risk exposure, is 3 – 6 months of our operating expenditure.
- 1.5. The range reflects the Council's appetite for a minimum level of reserves which must always be held by the GDC and also enables mitigation of any natural fluctuations in reserve levels that are expected to occur throughout the planning cycle. This would relate to slippage/deferment of operational activity between financial years, short-term fluctuations in the value of our investment portfolio and defined benefit pension scheme obligations.
- 1.6. To assist stakeholders in understanding our reserves policy, we publish further information on our website "Explaining the GDC's financial reserves"¹. This provides additional GDC-specific context as to the purpose of our holding reserves and how we monitor and manage the level of our reserves.
- 1.7. The current 2023 Reserves policy is provided in **Appendix 1** of this paper.

2. 2024 key issues for consideration

- 2.1. We are expected to face continued economic uncertainty through 2024 which impacts our planning process for the CCP 2024-26. The inflation rate (CPI) for the UK hit a 41-year high of 11.1% in October 2022, and whilst this has fallen to the current 6.8%, inflation remains above the

Bank of England (BoE) target of 2%. The falling gas and electricity prices throughout reduced summer demand has been the main contributor to the reduction in CPI seen through July and August 2023. The predictions of the speed of return to the BoE 2% target over the last 2 years have proved to be overly ambitious as inflation has remained sticky, largely due to rising energy costs and food prices.

- 2.2. We have attempted to address the potential impact of ongoing forward inflation through the planning process and have applied a risk provision based on the BoE forecast data. However, we note that the forecast data still shows a wide range of forecast projections from the other economic forecasters. This indicates that there remains ongoing uncertainty in inflation forecasts.
- 2.3. Several of our large commercial contracts were fixed throughout the period 2021-23, which means we have not felt the impact of historical and ongoing high inflation. We believe this has a high certainty of being reflected when we retender these services. Whilst we have assessed what this impact is likely to be in our planning process, by using the services producer price index, our confidence in this forecast is low due to the ongoing wider economic uncertainties.
- 2.4. We also anticipate that there will be a delay in historical inflation impact for our wider commercial arrangements which will materialise through the next planning period and which our reserves will need to address.
- 2.5. Other uncertainties faced by the organisation, for which we do not hold sufficient evidence or analytically data to plan for as a financial risk provision and therefore would need to be met by reserve, include:
 - a. a general election, which could have significant impacts on the wider Government Policy framework in which we operate.
 - b. the potential for legislative change, delivered by a S.60 order, during the next 3-year planning period.

3. Benchmarking

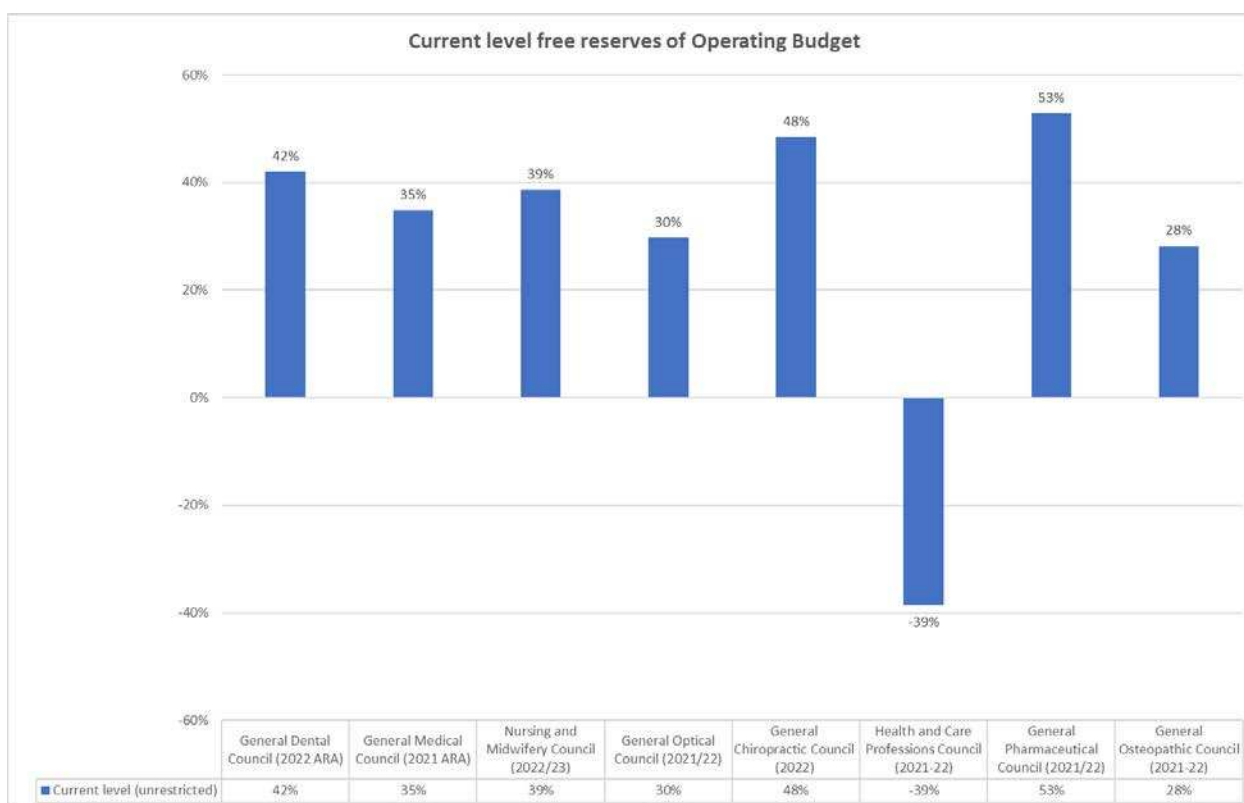
- 3.1. A reserves policy should be specific to the unique financial circumstances of the organisation to which it relates and therefore could differ substantially from organisation to organisation quite legitimately. However, understanding reserve levels from other similar organisations can be useful information when considering if there are any general themes in the approach being taken.
- 3.2. In consideration of our 2024 Reserves Policy, we have completed benchmarking across the other healthcare regulators to understand both the level of free reserves last publicly reported and the current practice around reserves policies elsewhere.
- 3.3. This benchmarking exercise has not indicated that the GDC is not an outlier with comparator organisations. Following discussion with the Finance and Performance Committee, we are recommending we completed a further review the reserves policy again in early 2024.
- 3.4. These are summarised in the table and diagram below and information was gathered following a review of the latest published annual report and accounts:

Table 1 Benchmarking data

Regulator	Reserve Policy from Annual Report and Accounts
GDC	3 – 6 months of operating expenditure, adjusted for known financial risk. £10.4m – £20.7m Target 4.5 months
GMC	2.3 – 4.6 months of operating expenditure £25.0m - £50.0m

Regulator	Reserve Policy from Annual Report and Accounts
NMC	0.0 – 2.6 months of operating expenditure £0m – £25m
GOC	2.6 months – 4.4 months of operating expenditure £2.3m - £3.8m
GCC	Target 6 months £1.5m
HCPC	Based on holding realisable net assets
GPhC	Not disclosed
GOcS	1.4 months– 3.0 months of operating expenditure £350k – £750k

Fig 2 Last reported level of free reserves held as a proportion of the operating budget.



4. Reserves Policy 2024 and recommendation

- 4.1. With consideration of the key issues for 2024, we recommend that the current reserves policy remains prudent and appropriate for the Council for 2024.
- 4.2. FPC reviewed the reserves policy for 2024 and endorsed no change to the policy. However, they recommended the policy be reviewed for future years, given the level of uncertainty faced by the organisation. This further review will be completed during Quarter 1 2024 in order to allow it to inform financial planning for 2025 onwards.

5. Legal, policy and national considerations

- 5.1. There are no legal, policy or national considerations in relation to the setting of this policy.

6. Equality, diversity and privacy considerations

6.1. There are no equality, diversity or privacy considerations in relation to the setting of this policy.

7. Risk considerations

- 7.1. The GDC must hold a level of reserves that supports financial viability and ensure our statutory duties can be completed, including providing financial agility to address any financial risks that may materialise.
- 7.2. In considering the level of financial risk exposure to be mitigated by free reserves, risks are identified in the Strategic Risk Register and through the CCP 2024-26 process. A detailed schedule of assessed financial risks and opportunities, which are then weighted by likelihood are being fully considered as part of our 3-year business planning process.
- 7.3. The most significant risk we face in the next planning period is the economic uncertainty, which is set out in section 2 of this paper.

8. Resource considerations and CCP

- 8.1. A detailed schedule of assessed financial risks and opportunities, which are then weighted by likelihood are considered as part of our 3-year business planning process. This informs our decision-making on what financial resource is available to support the delivery of our strategic activities and what reserves we must continue to hold for addressing financial uncertainty.

9. Monitoring and review

- 9.1. We regularly monitor and review our assessment of financial risk and the impact on the forecast free reserves position. This is regularly reported through the CCP Quarterly Performance Report, which is reviewed by EMT and FPC.
- 9.2. The Reserves Policy will continue to be reviewed annually by the Council.

10. Development, consultation and decision trail

- 10.1. The policy for 2024 was considered by the Executive Management Team on 7 September 2023.

11. Next steps and communications

- 11.1. The Council is asked to **approve** the policy for 2024 and **note** that a review will be undertaken in Q1 2024 for future years.

Appendices

1. Appendix 1 – 2023 Reserves Policy

Samantha Bache, Head of Finance and Procurement

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Tel: 0121 752 0049

13 September 2023

Appendix 1 - Reserves Policy 2023

1. The Council establishes a policy to maintain an appropriate level of financial reserves to protect the General Dental Council from a significant event or events which would have a substantial effect, such as a major loss of revenues or a sudden major increase in expenditure.
2. Reserves are classified as free reserves, reserves committed to fixed assets and pension reserves, as stated in the Annual Report & Accounts of the Council.
3. However, as our revenue comes mainly from statutory fees, we set the free reserves level having regard to:
 - a. the objectives of the Council in pursuit of our statutory and regulatory responsibilities.
 - b. funding working capital and management of day-to-day cash flows of the Council, where income is concentrated in summer and winter peaks.
 - c. risks to the income and expenditure of the Council.
 - d. planned major capital spending programmes.
4. The GDC aims to maintain the free reserves level at a level that is not excessive but does not put solvency at risk. Our policy is to maintain free reserves at a minimum of three months and a maximum of six months of operating expenditure, as adjusted for our current assessment of financial risk, with a target of four and a half months of operating expenditure by the end of the current strategic planning period.
5. The Council will review this Reserves Policy not less than annually.

ⁱ <https://www.gdc-uk.org/about-us/our-organisation/our-corporate-strategy-and-costed-corporate-plans/explaining-the-GDC-financial-reserves#:~:text=The%20GDC%E2%80%99s%20policy%20is%20to%20have%20not%20less,four%20and%20a%20half%20months%20of%20operating%20expenditure.>

Committee Appointments & Appointment of the Senior Independent Council Member 2023 - 2024

Executive Director	Lisa Marie Williams, Executive Director, Legal and Governance
Author(s)	Lord Harris, Chair of Council Katie Spears, Head of Governance
Type of business	For approval
Purpose	The Council is asked to: <ul style="list-style-type: none"> • approve the proposed appointments to the non-statutory Committees of the Council; and • approve the appointment of the Senior Independent Council Member (SICM) in line with the GDC Standing Orders for the Conduct of Business of the Council and Committees 2022.
Issue	To present the Council with the proposed Committee memberships and proposed SICM.
Recommendation	The Council is asked to approve the recommendations and make the proposed appointments.

1. Committee Appointments

- 1.1 Section 3.4 of the General Dental Council Standing Orders for the Conduct of Business for the Council and Committees 2022 ('the Standing Orders') provides that the Chair of Council will, at a public Council meeting, propose appointments to the non-statutory Committees of the Council. This will take place after there has been an assessment of the competencies for those roles.
- 1.2 Section 3.2 of the Standing Orders provides that the non-statutory Committees shall be constituted of:
- A Chair and at least two Council Members: of whom at least one must be a registrant Council Member and one must be a lay Council Member.
 - If a non-statutory Committee so decides, with the approval of the Council, an independent external Member.
- 1.3 The Chair of Council may not be a Member of the Remuneration and Nomination Committee or the Audit and Risk Committee and may only attend those meeting at the invitation of the Committee Chair. Quorum for each of the non-statutory Committees is two Council Members.
- 1.4 Appointments to the Audit and Risk Committee (ARC), Finance and Performance Committee (FPC) and Remuneration and Nomination Committee (RemNom) were made in September 2022, for terms of two years. The current membership of these Committees is as follows:
- a. **ARC:** Sheila Kumar (lay Chair), Simon Morrow (registrant Member), Angie Heilmann (registrant Member) and Liz Butler (independent Member).
 - b. **FPC:** Terry Babbs (lay Chair), Anne Heal (lay Member), Donald Burden (registrant Member), Ilona Blue (lay Member).

- c. **RemNom:** Anne Heal (lay Chair), Jeyanthi John (registrant Member), Caroline Logan (registrant Member), Laura Simons (lay Member), Mike Lewis (registrant Member) and Ann Brown (independent Member).
- 1.5 Jeyanthi John and Caroline Logan are due to leave office, and the RemNom, on 30 September 2023. The independent Member of the RemNom will leave office on 30 September 2024.
- 1.6 Serbjit Kaur has been appointed to the Council and will commence office on 1 October 2023. Serbjit was recruited with a view to her joining the ARC and has been inducted accordingly. The independent Member of the ARC will come to the end of her first term of office on 20 June 2025.
- 1.7 Timea Milovecz has been appointed to the Council, in a developmental role, without initial Committee portfolio. She will commence office on 1 October 2023.
- 1.8 During the Council Member appraisals, which took place in August 2023, Council Members were invited to state their Committee preferences to aid discussions with the Chair. As part of the appraisals, Council Members were given the opportunity to reflect on their skills and experience and their contributions to the various Committees. The Chair has used these conversations to propose the Committee membership for 2023 – 2024.
- 1.9 The Chair of Council and Committee Chairs have considered the proposed approach for the composition of the non-statutory Committees and reflected on the following areas:
 - a. The upcoming changes to the membership of the Council and subsequent impact on the composition and stability of the membership of the Committees.
 - b. The generic competencies required by Members to set on each Committee and the appraisals of Council Members.
 - c. The time commitment required to prepare and attend meetings of the non-statutory Committees, alongside advertised expectations about time commitments and the best use of Council Members' time as a resource.
 - d. Ensuring a balance of registrant and lay Members across the Committees.
 - e. Discussions with individuals about their preferences and ability to commit the time required for the roles.
 - f. Ensuring stability in Committee membership to safeguard the assurance framework that is in place.
- 1.10 It is proposed that the membership of the non-statutory Committees is accordingly comprised as set out in **Appendix 1**.
- 1.11 In summary, it is proposed that:
 - a. Serbjit Kaur joins the Audit and Risk Committee.
 - b. Angie Heilmann moves from the Audit and Risk Committee to join the Remuneration and Nomination Committee.
 - c. Laura Simons moves from the Remuneration and Nomination Committee to the Audit and Risk Committee.
- 1.12 These proposals would meet the requirements of the Standing Orders. Ordinarily appointments are made for two years, to allow for stability and consistency on the Committees. It is proposed that these appointments are made for two years, with the ability to review in a year's time, should the Chair or Council deem it appropriate.
- 1.13 Recruitment plans for 2024 will focus on appointment a lay Member with a broad non-executive skillset with the skills and experience to join the Finance and Performance Committee (given that Terry Babbs will leave the Council in 2024, and Anne Heal will leave the Council in 2025).

1.14 The Council is asked to approve the proposals and appoint Council Members to the Committees as outlined in **Appendix 1** until 30 September 2025.

2. Senior Independent Council Member (SICM)

2.1 Section 12.8 of the Standing Orders provides that the Council may choose to appoint one of its Members as the Senior Independent Council Member (SICM).

2.2 The role of the SICM is to:

- a. Be a conduit between Council Members and the Chair of Council to communicate any major concerns.
- b. Lead the appraisal process for the Chair of Council, with advice from the Council via the Remuneration and Nomination Committee.
- c. Investigate any complaints about the conduct of the Chair of Council and
- d. Occasionally deputise for the Chair of Council at external events or internal meetings.

2.3 Terry Babbs was appointed by the Council as SICM in October 2017 for an initial term of two years. He was reappointed to that role in 2019 and, in August 2021, he was appointed to the role for two years. His term as SICM is due to expire on 30 September 2023 and his term of office on the Council will come to an end on 30 September 2024.

2.4 Terry is the current Chair of the FPC and is eligible to be re-appointed to the SICM role. He has confirmed to the Chair of Council that he would be interested in continuing in the role, and continues to be able to meet the time commitment required of him. Terry has continued to provide guidance and support to the Chair, has performed his SICM role diligently and the Council may feel he continues to be well placed to deliver in the SICM role.

2.5 The Council is asked **to approve** the appointment of Terry Babbs to the role of SICM for the period of one year, expiring on 30 September 2024.

3. Legal, policy and national considerations

3.1 The proposals set out in this paper are in line with the Standing Orders and the legislative framework.

4. Equality, diversity and privacy considerations

4.1 An assessment of diversity of skills and experience has been undertaken as part of the assessment of Committee appointments.

5. Monitoring and review

5.1 It is proposed that the Committee memberships are reviewed in September 2025.

6. Development, consultation and decision trail

6.1 The Chair of Council has discussed these proposals with the governance team and key stakeholders, including the Committee Chairs and the Chief Executive. Council Members were subject to an appraisal process which took place over the summer months.

7. Next steps and communications

7.1 Subject to the approval of the Committee memberships and of the SICM, letters will be issued to Members confirming their appointments and inductions will be arranged as appropriate.

Appendices

1. Proposed table of Members and Chairs of the non-statutory Committees of Council.

Lord Harris, Chair of Council

Katie Spears, Head of Governance

21 August 2023

Appendix a

Table of Members and Chairs of the Non-Statutory committees of Council

Committee	Chair	Members
Audit and Risk Committee	Sheila Kumar (lay)	Simon Morrow (registrant) Laura Simons (lay) Serbjit Kaur (registrant) Liz Butler (Independent Member)
Finance and Performance Committee	Terry Babbs (lay)	Donald Burden (registrant) Anne Heal (lay) Ilona Blue (lay)
Remuneration and Nomination Committee	Anne Heal (lay)	Angie Heilmann (registrant) Mike Lewis (registrant) Ann Brown (Independent Member)

Chair and Chief Executive Objectives 2023

Executive Director	Gurvinder Soomal, Chief Operating Officer
Author(s)	John Middleton, Head of People Services
Type of business	For approval
Purpose	<p>The Remuneration and Nomination Committee (RemNom) is tasked with scrutinising and approving the process for setting the objectives of the Chair of Council and the Chief Executive and Registrar.</p> <p>The RemNom scrutinised and approved the objective setting process in June 2023, and it is accordingly presented to the Council to note.</p> <p>The Council is responsible for approving the objectives for the Chair of Council and Chief Executive and Registrar.</p> <p>This paper is presented to provide assurance to the Council on the process for setting the objectives of the Chair of Council and Chief Executive and Registrar and to present the draft 2023 objectives for the Chief Executive and Registrar for approval.</p> <p>The 2024 objectives for the Chair and Chief Executive and Registrar will be presented to the Council for approval at its meeting in October 2023. This will align their objectives with the approval of the Costed Corporate Plan 2024-2026.</p>
Issue	The Council is asked to note the approved objective setting process and to approve the 2023 objectives for the Chief Executive and Registrar.
Recommendation	The Council is asked to note the approved objective setting process and to approve the objectives for the Chief Executive for 2023.

1. Introduction

- 1.1 In June 2023, in line with its Terms of Reference, the Remuneration and Nomination Committee (RemNom) scrutinised and approved the objective setting process for the Chair of Council and Chief Executive and Registrar. The Council is asked **to note** the approved process for setting objectives for the Chair and the Chief Executive and Registrar.
- 1.2 The Council is responsible for approving the objectives of the Chief Executive and Registrar. Objectives were set for the Chair and Chief Executive by the Council in April 2022. Due to an oversight in 2022, the timescales for delivery of those objectives were stated differently for the Chair and for the Chief Executive and Registrar. To ensure that the Chief Executive has current objectives in place for the remainder of 2023, the Council is asked **to approve** the draft objectives for 2023 at this meeting. Objectives for both the Chair and Chief Executive for 2024 will be tabled for approval at the October 2023 meeting of Council, to align with the approval point for the Costed Corporate Plan.
- 1.3 The Chair of Council and Chief Executive objective setting process will be reviewed again in 2024 in advance of the objective setting for 2025.
- 1.4 The Council is asked **to note** the objective setting process and **to approve** the objectives for the Chief Executive for 2023.

2. Process

- 2.1 The objective setting process was scrutinised by the Remuneration and Nomination Committee at its meeting on 29 June 2023. The Committee asked for certain elements of the process to be refined and then, once this had taken place, approved the process via correspondence.
- 2.2 As a result of the feedback from the Committee:
 - a. It was stated with more clarity that the objectives should link to the corporate strategy and wider operational delivery. It was also clarified that these objectives should be cascaded through the organisation.
 - b. More formal review points and updates should be built into the assurance framework. As a result of this, the Chief Executive will provide the Council with quarterly updates as part of his Chief Executive's report to the Council and the review of objectives will be placed on the forward workplan for the Council at six-month intervals.
- 2.3 The objectives for the Chair and Chief Executive must reflect the objectives set out in the Costed Corporate Plan (CCP) and consequently deliver the strategic aims of the organisation. They will sit alongside the CCP.
- 2.4 The purpose of the objective setting process is to ensure there are robust goals in place to measure progress and to enhance the overall performance of the GDC.
- 2.5 Objective setting normally takes place as part of the appraisal process, which encompasses a discussion about contributions and performance, leadership, development, feedback from others, and self-reflection. The Chair is appraised by the Senior Independent Council Member (SICM) and the Chief Executive is appraised by the Chair of Council.
- 2.6 In practical terms, it is proposed that as last year, the Governance team will organise meetings between the respective parties to discuss performance and prepare annual objectives. The parties will have considered appropriate draft objectives in advance and agree the draft in the appraisal meeting.
- 2.7 Objectives should be set within in the SMART model – Specific, Measurable, Attainable, Relevant and Timebound. In line with good practice, there should be a maximum of five key objectives.
- 2.8 In respect of leadership, managing relationships and setting organisational culture, there is likely be to be some overlap between the objectives of the Chair and Chief Executive. There will also be differences in the objectives to properly reflect their roles in respect of strategic stewardship and responsibility for operational delivery.
- 2.9 A copy of the Chief Executive's objectives will be retained on their personal file. The Chair's objectives will be held within the Governance team.
- 2.10 Once the Chair's and Chief Executive's objectives are set, they should be used to ensure the objectives of EMT align. The objectives will be cascaded throughout the organisation as part of the enactment of the CCP and in team and individual objective setting meetings.
- 2.11 The Council is asked **to note** the objective setting process and **approve** the draft objectives for the Chief Executive in 2023.

3. Objectives

- 3.1 The Chief Executive's objectives for 2023 have been developed in conversation with the Chair in line with the approved the process outlined above. A full copy is provided in **Appendix 1**.

4. Equality, diversity and privacy considerations

- 4.1 The objectives for both the Chair and Chief Executive should reflect their respective responsibilities for delivery of the GDC's obligations around EDI.

5. Risk considerations

- 5.1 Not applicable.

6. Resource considerations and CCP

- 6.1 Not applicable.

7. Monitoring and review

- 7.1 Objectives will be discussed agreed and monitored as part of the normal meeting arrangements in place between the Chair and Chief Executive and the Senior Independent Member and Chair.
- 7.2 Progression of objectives will be regularly reviewed during meetings between the Chair and Senior Independent Council Member and the Chair and the Chief Executive. The Council will receive formal updates at six monthly intervals and progress updates via the Chief Executive's quarterly report to the Council.

8. Development, consultation and decision trail

- 8.1 The Remuneration and Nomination Committee scrutinised and approved the process in June 2023.

9. Next steps and communications

- 9.1 If approved, the objectives will be cascaded accordingly, and progress will be reviewed as outlined above.

Appendices**Appendix 1 – Chief Executive's objectives for 2023**

John Middleton, Head of People Services

jmiddleton@gdc-uk.org

14 September 2023

Chief Executive Objectives for 2023

- Corporate reporting and BAU activities such as budget setting are built into the Governance timetable.
- Detailed timelines relating to discrete projects will be incorporated into the Corporate plan.
- Discrete CEO-led corporate initiatives will be subject to timetables agreed with Council.

Objectives	Content	Timescale	Measures
1 The organisation's statutory duties and strategic objectives underpin its planning, budgeting, and the management of workforce and performance.	The Executive has a clear understanding of the organisation's mission and Council's priorities	Throughout year	<ul style="list-style-type: none"> • Proposals brought to Council or committee by executive always relate to delivery or furtherance of GDC statutory duties and strategic priorities • Council has opportunities to discuss strategic options and set or revise priorities in an informal, discursive context. • Where Council priorities are unclear, the Executive seeks clarification
	Council has a clear understanding of the Executive' short-, medium- and long-term operational plans	Throughout year	<ul style="list-style-type: none"> • Council is sighted on the Executive's plans in relation to operations of the GDC, providing understanding of how the budget and CCP will be delivered, understand the 'direction of travel' of the organisation and is aware of planned longer term operational, systems, managerial and structural changes.
	Structure, processes and management of organisation are focused on efficient and effective delivery of Statutory and Strategic priorities	End 2023	Regulatory Directorate is established and phased transfer of functions is underway.
		Throughout year	<ul style="list-style-type: none"> • People Services function full staffed • CEO undertakes continuous review of wider governance arrangements (delegations, structures, processes) to ensure they remain fit for purpose • CEO identifies to Council where further changes may be necessary and keeps Council members informed on planned changes.
	The GDC develops and maintains an organisational culture that:	End 2023	Project to revise and strengthen operational culture is underway and substantive work has been done to develop understanding and support for revised culture within and between:

Objectives		Content	Timescale	Measures
		<ul style="list-style-type: none"> • appropriate for an independent public sector regulatory body • Enables and supports good performance and value for money 		<ul style="list-style-type: none"> • EMT (programme of facilitated workshops and discussions) • SLT (collaborating with EMT to identify and develop better ways of working) • Key working groups (facilitated development work)
			End 2023	Training to improve staff understanding of public sector financial obligations and wider context of GDC financial controls is under development
			Throughout year	Control systems are reviewed to remove unnecessary delays or obstacles
			Throughout year	Ensure that Council members and any independent members of Committees have an appropriate level of understanding of public sector control and accountability issues to enable them to exercise informed and appropriate scrutiny
			By end 2023	Plan for ongoing CEO and senior management engagement with staff in relation to cultural change and GDC Change Programme is finalised and initiatives are underway.
2	The organisation is financially secure and maintains appropriate and effective financial controls	The organisation's budget, forecasting systems and processes are robust	End 2023	Forecast models have been reviewed and, where necessary, revisions have been made to the forecasting procedures – either by revising models or ensuring a post-modelling review and moderation phased is adopted.
			Throughout year	<ul style="list-style-type: none"> • Unplanned calls on contingent funding are used to identify learning points for future budgeting exercises. • Quarterly Forecasting exercises reflect known issues in performance, expenditure etc. • Half year & year end actuals reflect financial forecasts except where a significant and unanticipated extraneous cause for change is identified. • Medium-long term income and expenditure forecasts consistent over time except where a significant and unanticipated extraneous cause for change is identified
		Good financial management is prioritised throughout the executive, seeking value for money when spending, maintaining a culture of	Throughout year	<ul style="list-style-type: none"> • Unbudgeted expenditure where no relevant costed risk provision exists is minimised, calls on contingency within the budget are managed to ensure sound financial control, with costs absorbed within relevant directorate budget from savings where possible. Performance management

Objectives	Content	Timescale	Measures
	cost control, reducing costs where appropriate		<p>recognises and supports attempts to “beat the budget” – whilst maintaining quality.</p> <ul style="list-style-type: none"> Underspenders are identified swiftly and, where possible, mitigations put in place. Where this is not possible, causes and lessons are identified. EMT and SLT continue to identify options for improving corporate cost-effectiveness
	Budgets proposed to the Council are based on realistic and informed assumptions	End Q3	<ul style="list-style-type: none"> EMT scrutinises and challenges budget assumptions across the organisation Executive Directors actively challenge their Directorate’s budget assumptions – particularly performance and caseload assumptions – and require their managers to do the same for their functions and teams Lessons learned from any unbudgeted expenditure in 2023 are, where appropriate, incorporated into budget for 2024 Assumptions for budgeting purposes are shared with Council: supporting evidence provided Draft 2024-26 CCP and 2024 Budget is presented to FPC in good time to allow constructive interrogation and challenge.
		Oct 2023	<ul style="list-style-type: none"> Final draft 2024-26 CCP and 2024 Budget presented to Council endorsed by EMT, after a challenge process involving FPC, with outcomes reported to Council.
3	Council has the understanding and data necessary to scrutinise and challenge the executive and to assure itself regarding the operations and finances of the GDC	Throughout year	<ul style="list-style-type: none"> The EMT reviews, and where necessary revises, the management information and reporting structures to reflect the current and forecast business needs of the organisation. The EMT continues to hone and improve the reporting structure for Council and Committees, utilising existing and any newly developed business-led reports and mechanisms, to reflect the requirements identified during the Board development process The performance reports provide the necessary information to enable Committees and Council to gain the appropriate assurance

Objectives	Content	Timescale	Measures
			<ul style="list-style-type: none"> • Council concerns regarding performance or reporting of performance are swiftly addressed • The financial reports provide the necessary information to enable Committees and Council to gain a clear picture of the organisation's financial position • Council concerns regarding finance issues or reporting of finances swiftly addressed • The financial reports are historically consistent across time and any revision of previously reported positions is clearly drawn to the attention of council members. • The Risk register is timely and accurately reflects EMT concerns and the mitigations in place • Risk reports are timely, appropriately detailed and accurately reflect. EMT and AO views of both risks and mitigations • Council has the necessary information to assure itself regarding EDI considerations
	The executive provides considered, clear, evidence-based advice to the Council	Throughout year	<ul style="list-style-type: none"> • Performance monitoring, financial forecasting and risk management processes are appropriately cross-referenced and interconnected at both operational and strategic level. • Reports to council clearly identify costs of proposals, in a robust and transparent manner, and make recommendations on basis of value for money
	Interactions between the Council and executive are constructive, transparent and professional	Throughout year	<ul style="list-style-type: none"> • The Council receives reports for information, over the course of the year which cover all aspects of the GDC's work. • The Council is satisfied that it is appraised of significant issues or developments in a timely and appropriate fashion by the Executive • Both Council and the Executive are confident that they fully understood the content of meetings and the purpose and content of agreed actions • As much of this activity as possible takes place in public Council sessions

Objectives		Content	Timescale	Measures
			Throughout the year	<ul style="list-style-type: none"> • Informal interaction is maintained between the Council and Executive to help facilitate this, through an agreed schedule of informal one to one meetings, informal group contact and other opportunities. • Council members are able to easily contact members of the executive should they wish to.
		Effective, timely remedial action is proposed and taken by management when necessary	Throughout year	<ul style="list-style-type: none"> • Council or Committees have had timely to challenge proposals which lie within their remit • Council and Committees have not needed to substantively or fundamentally challenge management proposals which lie within their remit • Implementation of management proposals has proceeded to timetable or, where this is not possible, timely warning is provided and revised completion dates are approved in advance. • Council are informed on repercussive or significant issues outwith their remit
4	The organisation's design, systems and operations are fit for purpose	The organisational design supports agility and effective working;	Throughout year	<ul style="list-style-type: none"> • Organisational Structure is subject to ongoing review to ensure that it remains appropriate. • EMT membership kept under ongoing review • Changes to management, structure and process enhance resilience, effectiveness and agility. • Change Programme incorporated into CCP
		Changes to systems and structures are undertaken in a coherent, transparent and effective manner	By end 2023	<ul style="list-style-type: none"> • Total Reward project, Workplace Development and Estates Project are coordinated as an overall Corporate Change Programme, incorporated into the 2024 CCP. • Council and Committees are satisfied that the Executive is providing them with appropriate reports to ensure that they are able to exercise stewardship and scrutiny functions in relation to the GDC's systems and operations
		Flexible working arrangements to improve recruitment and retention	Throughout year	<ul style="list-style-type: none"> • Regularly review impacts of flexible working arrangements regarding:

Objectives	Content	Timescale	Measures
	are appropriately designed and managed		<ul style="list-style-type: none"> - Performance - Recruitment and Retention • Take account of sensitivities and longer term implications in relation to CCP
	The organisation provides the best possible value for money in delivering its mission and the Council's strategic priorities.	Throughout year	Performance is improved where necessary or otherwise maintained to plan
		End 2023	Auditors identify no material control failures or inappropriate expenditure in 2023
		Q4 2023	Appropriate consideration is given to whether a permanent or temporary reduction is necessary in relation to the ARF in 2024
	The wider systems and procedures of the organisation are appropriate and robust	Throughout year	<ul style="list-style-type: none"> • There are no concerns for the Accounting Officer to report • Managerial scrutiny and committee oversight expose no causes for concern which are not appropriately addressed
		End 2023	Internal auditors report satisfactory assurance at end of audit plan for 2023
	Equality, Diversity and Inclusion considerations are given appropriate emphasis in the operations and procedures of the GDC	Throughout year	<ul style="list-style-type: none"> • EDI monitoring of register, staff and associates is comprehensive, proportionate, and robust • Any evidence of bias in regulatory activity is swiftly identified, investigated and addressed as appropriate • EDI considerations are, where possible, actively addressed in recruitment of staff and associates
		End 2023	<ul style="list-style-type: none"> • EDI Action Plan is delivered (NB some actions will be ongoing) • Executive actively seek opportunities to effectively improve EDI • EDI Strategy review is undertaken Q4
	The executive is appropriately skilled and operates in the most effective manner to support delivery of the statutory mission and the wider strategic objectives, (collaborating as	Throughout year	<ul style="list-style-type: none"> • EMT actively seek to further develop collaboration between members and their Directorates, reviewing collaboration across the organisation regularly throughout the year. • EMT members demonstrate collegiate behaviour and, corporate perspective in Council and Committee meetings
		End 2023	<ul style="list-style-type: none"> • EMT and SLT have undertaken development activities to identify and where possible, develop more effective working arrangements.

Objectives		Content	Timescale	Measures
		necessary with stakeholders and partners)		
		The organisation collects and analyses the information it needs to undertake its functions and identify and remedy underperformance	Throughout year	The EMT reviews and where necessary revises the management information and reporting structures to reflect the current and forecast business needs of the organisation.
		Swift and effective action is taken to identify and remedy the causes of any persistent performance issues	Throughout year	EMT provides robust and appropriately detailed mitigation plans when balanced scorecard or other reports indicated inadequate levels of performance
			End 2023	<ul style="list-style-type: none"> • FTP active caseload has reached sustainable run-rate (c.550 case) and been maintained at that level. • FTP case age profile has shown sustained improvement • FTP casework timeliness is showing improvement
			End 2023	<ul style="list-style-type: none"> • Registration performance has shown sustainable improvement. • Longer term options for streamlining and improving Registration are under examination • Overseas-qualified DCP caseload is reducing to plan • Proposals for a further acceleration of the overseas-qualified DCP caseload have been brought forward.
		The Organisation engages effectively with stakeholders to build trust and understanding	End 2023	<ul style="list-style-type: none"> • Proposals are developed to enable Council members to play a meaningful role in external stakeholder engagement going forward. • Outline plans in place for CEO and senior management engagement activity with external stakeholders going forward.
5	The organisation is operationally effective and	Progress towards securing a complete set of	Throughout year	<ul style="list-style-type: none"> • The Executive seek to grow PSA understanding and recognition of the challenges faced in achieving single median timeliness standards for regulatory functions.

Objectives	Content	Timescale	Measures
continues to improve in the number of PSA targets obtained, securing all possible standards by the close of 2022	achievable PSA standards is monitored regularly		<ul style="list-style-type: none"> The Executive works to ensure the PSA is sighted on, and recognises, the timeliness improvements made in relation to specific case streams
		As appropriate throughout year	Reports made to Council (depending on PSA timings) to forecast performance against PSA standards, with supporting evidence for assumptions
		End 2023	Performance against standards accords with forecasts

Council Member and Associates Remuneration Light Touch Review

Executive Director	Gurvinder Soomal, Chief Operating Officer
Author(s)	John Middleton, Head of People Services Constantinos Kypridemos, Senior Operations Manager
Type of business	For approval
Purpose	To report on the light touch review of the remuneration of the Council Members and Associates in 2023 and highlight any proposed amendments
Issue	This paper summarises recent changes within the healthcare regulator sector for Council Member and Associate remuneration
Recommendation	The Council is asked to approve the recommendations that there are no changes to the current remuneration of Chair of Council, Council Members or Associates in 2023.

1. Introduction

- 1.1. On 18 April 2022, the Council considered the remuneration levels for the Chair of Council, Council Members, and the wider Associates group. The Council decided the following:
 - a. There should be no change to the standard rate of Associate daily fees.
 - b. There should be no change to cancellation terms.
 - c. Payment should continue to be made for reading and preparation time on the current model and this should be applied consistently across all groups.
 - d. There should be a consistent payment for training days adopted across all Associate groups.
 - e. The fee paid to legal advisors should be reduced (from £681.40 to £600 per day) and the remuneration to FtP Panel Chairs should be increased (by an additional half day's fee of £176.50 per 'booking', to reflect additional responsibilities held in comparison to other non-Chair panellists) from 1 January 2024.
- 1.2. The Council also asked that a light touch review of remuneration of the Chair, Council Members and Associates be completed in 2023, in light of likely rises in inflation, and any proposed amendments be brought back to the Council for approval.
- 1.3. In June 2023, the Remuneration and Nomination Committee scrutinised the light touch review.
- 1.4. The Council is asked **to approve** the recommendations that there are no changes to the current remuneration of Chair of Council, Council Members or Associates in 2023.

2. Current Market Conditions

- 2.1 Since the Council approved the Chair, Council Member and Associates Remuneration papers during April 2022, UK inflation increased from 7.8% (April 2022) to 10.1% by March 2023, peaking at 11.1% (October 2022).

- 2.2. In the year prior April 2022, inflation saw a marked increase from 0.9% at January 2021, to the 7.8% noted at the time of the April 2022 Council session.

3. Light Touch Review

- 3.1. As part of this paper, a review of the current available information for each of the eight healthcare regulators was undertaken. This included direct contact with the regulators, review of their websites and reviewing recently advertised roles.
- 3.2. **Appendix 1** identifies updates to remuneration for Council members and Associates. **Appendix 2** identifies the current Chair remuneration across the health regulators (where available).

Chair's Remuneration

- 3.3. On review of Chair's remuneration across the health regulators, the GDC's current annual allowance is below both the mean and median values identified as part of this review.
- 3.4. The current annual allowance of £55,000 is marginally below the current averages of £56,125 (mean) and £57,500 (median) in line with Appendix 2.
- 3.5. There is a variation in the annual time commitment for the GDC's Chair in comparison with other regulators, with four regulators (including the Nursing & Midwifery Council and the Health and Care Professionals Council) expecting a commitment of three days per week, whereas the GDC anticipates a spread of two to three days per week. These regulators also reflect the higher levels of remuneration in their annual allowances ranging from £60,000 to £110,000.
- 3.6. The average mean time commitment across the healthcare regulator group is 2.7 days per week with an annual allowance of £56,125. On the basis of the mean average, the GDC's remuneration for the Chair remains comparable with the sector as a whole where the GDC Chair undertook 2.5 days per week.
- 3.7. **It is recommended that based on this light touch review that the current Chair remuneration remains unchanged.**

Council Members remuneration

- 3.8. As noted to the Council on 18 April 2022, remuneration rates have not changed for Council Members since approximately 2014. In summary, the paper to Council noted that for Council Members:
- The mean average annual remuneration is £12,508.
 - The median average annual remuneration is £13,096.
 - GDC remuneration is above this at £15,000.
 - Time requirement at the GDC is above the mean and below the median.
- 3.9. Only two changes in the remuneration of Council Members across the eight healthcare regulators have been identified subsequently. The General Pharmaceutical Council and General Chiropractic Council both increased their Council Member remuneration levels by 20%, with the most recent increase of the two taking effect in January 2023.
- 3.10. It should be noted that the General Pharmaceutical Council remunerated Council Members at £12,500 per annum with 36 member days anticipated. Similarly, the General Chiropractic Council remunerated its members at £6,650 per annum with 15 days in total anticipated.

- 3.11. The 20% increases meant that the General Pharmaceutical Council allowance rose to £15,000 per annum, and the General Chiropractic Council allowance to £7,800 per annum.
- 3.12. From publicly available information, it is understood that the increase to the General Pharmaceutical Council’s allowance was undertaken to support market positioning and to support the recruitment of high calibre members moving forward, as part of an external review of their council member remuneration.
- 3.13. In comparison the GDC’s current package of £15,000 per annum for a minimum 35 days, remains above the average remuneration levels at present, with only the General Medical Council and the Nursing & Midwifery Council maintaining higher levels.
- 3.14. **It is recommended that based on this light touch review that the current Council member remuneration remains unchanged.**

Associates’ remuneration

- 3.15. Direct comparisons between GDC-specific associate roles and those at the other healthcare regulators is not always possible or straightforward. However, in the cases of Fitness to Practise panellists, both the Health Care Professionals Council and General Osteopathic Council increased their day rates. The Health Care Professionals Council raised this by 1.9% to £206 per day, and the General Osteopathic Council raised this by 4.5% to £320 per day from 1 April 2023. In both cases, this remains below the current GDC fee level at £353.
- 3.16. In line with *Table 1* below, the average mean for Fitness to Practise Panellist day rates are currently £300 for members and £356 for Panellist Chairs across the health regulators, with the GDC day rate for both associate types set at £353.

Table 1 – Fitness to Practise day rates summarised.

	FTP Member day rate	FTP Chair day rate
Average Mean	£300	£356
Average Median	£310	£351

- 3.17. The GDC continues to offer Fitness to Practise panellists the highest level of remuneration across the health regulators. In addition, it remains the case that the GDC continues to pay a higher daily fee to most categories of Associate than other healthcare regulators.
- 3.18. As noted in the paper to Council in April 2022, we have conducted three major recruitment campaigns for Associates since the last review in 2019 (FtP Panellists in 2020, Expert Witnesses and Clinical Advisers in 2020, Registration Panellists in 2021 as well as a re-appointment of Education Associates in 2021), all of which attracted a very healthy number of high quality and suitable applicants and a good degree of interest.
- 3.19. More recently, associate recruitment campaigns have continued to suggest that the current remuneration levels are not having a negative impact on recruitment, with the campaign for Registration Specialist List panellists’ recruitment receiving 179 applications for up to 40 possible places, and 26 candidates offered roles initially.

3.20. Overall, associate related day rate fees, regardless of the specific roles or titles which do not directly align to the GDC's own roles, saw minimal changes following a light touch review.

3.21. **It is recommended that based on this light touch review there is no need to increase the daily fee from its current level of £353.**

4. Legal, policy and national considerations

4.1. There are no legal considerations, policy changes or national issues that need to be considered.

5. Equality, diversity and privacy considerations

5.1. There are no equality, diversity or privacy considerations.

6. Risk considerations

6.1. Remuneration remains a potential barrier to attracting and retaining certain future Council and Associates candidates but is not considered to be the case at present as set out above.

7. Resource Considerations and CCP

7.1. There is no resourcing impact to the CCP as the remuneration levels are recommended to stay at current levels.

Appendices: -

Appendix 1, Council Member and Associates regulator data on remuneration

Appendix 2, Chair's remuneration data

John Middleton

Head of People Services
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07 September 2023

1. Table of UK Healthcare Regulator Council Member & Associate Fees – April 2023

Associate type	General Dental Council	Name of Regulator withheld at their request	Nursing & Midwifery Council	Health Care Professionals Council	General Optical Council	General Pharmaceutical Council	General Osteopathic Council	General Chiropractic Council	Social Work England
Associate changes	-	No change	-	1.9% increase to FTP roles	No change	No change	4.5% increase to FTP roles from 1 April 2023	No change	No change
Council member fee levels	-	No change	No change	No change	No change	20% increase from 1 April 2022	No change	20% increase from January 2023	No change
UK Healthcare Regulator Associate Fees (day rates) – 2023 updates									
Council Members	£428	£375-500	£442	£341	£421	-	£417	£520	-
Fitness to Practice Panellists	£353	£310	£310	£206	£319	£300	£320	£300	£310
FtP Panel Chairs	£353	£340	£340 LQC £500 plus VAT	£348	£372	Additional £36 for Investigating Committee Additional £140 for FTP Additional £290 for legally qualified chairs	£376	£350	£340
FtP Legal Advisers	£681.40	£500	£500 plus VAT	£627 (in 2019)	£450	£583	£600	£500 plus VAT	£525
FtP Medical Advisers	£617.87		N/A		N/A	N/A	£600	Not provided	N/A

FtP Professional Advisers	£500	Not provided	N/A		£319		N/A	Not provided	£310 CPD Advisers £80 per review for Registration Advisers
Clinical Advisers	£120/ hour + VAT	Not provided	N/A		Expert advisers (not clinical)£150 an hour capped at 10 hours	£400	N/A	Not provided	Salaried roles
Expert Witnesses	£120/ hour + VAT	Not provided	N/A	£202 (in 2019)	£650 (4 hours or more) £325 (up to 4 hours)	£750 full day attendance £500 for reading of papers, preparation of report. £250 ad hoc written advice	N/A	Hourly rate @£215plus vat	N/A
FtP Decision Scrutiny Group Chair	£400	Not provided	N/A		N/A	Quality Review Group Chair- on average £600 per meeting	N/A	Not provided	N/A
Education QA Inspectors	£353	£310	N/A	£202 (in 2019)	£319	N/A	N/A	£300	£310
Overseas Examination External Examiners	£176.50 per half day	Not provided	N/A		£45 per hour capped at £315 per day	N/A	N/A	Not provided	N/A
Overseas Examination Advisory Group Members	£176.50 per half day	Not provided	N/A		£45 per hour capped at £315 per day	N/A	N/A	Not provided	N/A
Registration Assessment Panel	£176.50 per half day		Not provided		Not provided	Registration assessment adviser £300, Registration assessment adjustments adviser £240, CPD	Not provided	Not provided	

						reviewer (now Revalidation reviewer) £30 per hour			
Specialist List Appeals Panel	£353	N/A	N/A		N/A	N/A	N/A	Not provided	

Notes:

GPhC – no identified day rate for Council members, but £15,000p.a. for 20 Council days plus committee meetings.

Social Work England have also confirmed no changes to their rates for 2023

All figures as of December 2021, unless otherwise specified.

Unless indicated, all fees are expressed in daily amounts for comparison purposes, however they may be paid in smaller units e.g. half-days.

GDC terminology is used for this table, however other regulators may use different names.

2. Table of UK Healthcare Regulator Chair remuneration - April 2023

	Average Mean	Average Median	General Dental Council	Name of Regulator withheld at their request	Nursing & Midwifery Council	Health Care Professionals Council	General Optical Council	General Pharmaceutical Council	General Osteopathic Council	General Chiropractic Council
Annual time commitment	137 days (2.7 days a week)	156 (3 days a week)	104-156 days (2-3 days a week)	156 days pa (3 days per week)	156 days (3 days a week)	156 days pa (3 days per week)	130 days (2.5 days per week)	156 days (3 days a week)	78 days (1.5 days per week)	no info
Annual allowance	£56,125	£57,500	£55,000	£110,000	£78,000	£65,000	£50,000	£60,000	£30,000	£27,000
Equivalent day rate	£435	£420	£352-£508	£705	£500	£416	£423	£384	£346	-
<i>Notes</i>									<i>From April 2024</i>	<i>From January 2023</i>

Joint Health Regulators Whistleblowing Disclosures Report

Executive Director	John Cullinane, Executive Director, Fitness to Practise
Author(s)	Colin MacKenzie, Head of Nations and Engagement
Type of business	For noting
Purpose	This paper provides details of the GDC submission for the combined annual report on whistleblowing concerns disclosed to health regulators, between 1 April 2022 and 31 March 2023.
Issue	To ensure that the Council is aware of the publication and its content.
Recommendation	The Council is asked to note the content of the GDC section of the report. This has been shared with GMC who will be in the process of collating and producing a designed version of the joint report, ready for publication in the week commencing 26 September 2023.

1. Background to the annual joint health regulators whistleblowing report

- 1.1 The GDC has additional whistleblowing responsibilities in relation to its role as a “prescribed person” (external whistleblowing). There are over 60 organisations who are prescribed persons. These organisations have been chosen because they have an authoritative or oversight relationships with their sector. Being a prescribed person means that the GDC is an alternative route for a worker or former worker who wishes to blow the whistle in relation to matters concerning the GDC’s statutory functions.
- 1.2 From April 2017 there has been a requirement for prescribed persons to publish an annual report. The report must detail the number of qualifying disclosures that have been raised and the action that the GDC has taken in relation to them.
- 1.3 The healthcare regulators, led by the GMC, agreed to prepare a joint report in relation to this requirement each year.
- 1.4 This is a joint report with seven other health regulators: GMC, NMC, GPhC, HCPC, GCC, GOC and GOsC.
- 1.5 The number of disclosures we received this year was 82, compared to 61 in 2022, and 100 in 2021. We believe the increase this year is partly due to an increased number of disclosures received around a dental professional’s behaviour, both in and outside the workforce, but it may also indicate that 2022 was an outlier.
- 1.6 We have attached the GDC submission for your information. The report is scheduled for publication in the week commencing 26 September 2023. We will share the final version of the joint Health Regulators Whistleblowing Disclosures report 2023 with Council via correspondence once it is published.

Appendices

- a. **Appendix 1** – GDC submission for Healthcare Regulators Whistleblowing Disclosures report 2023

Colin MacKenzie, Head of Nations and Engagement
cmackenzie@gdc-uk.org
08 September 2023

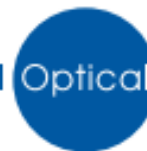
Whistleblowing disclosures report 2023

Healthcare and social work professional regulators

**General
Chiropractic
Council**



General **Optical Council**



General
Medical
Council

**General
Dental
Council**



General
Osteopathic
Council

**General
Pharmaceutical
Council**

hcpc health & care
professions
council

NMC Nursing &
Midwifery
Council

General Dental Council

The General Dental Council (GDC) is the UK-wide statutory regulator of around 115,000 members of the dental team, including over 43,000 dentists and 72,000 dental care professionals (DCPs).

An individual must be registered with the GDC to practise dentistry in the UK.

Unlike other health professional regulators, we register the whole dental team including dental nurses, dental hygienists, dental therapists, dental technicians, clinical dental technicians, orthodontic therapists and dentists.

Our primary purpose is:

- To protect, promote and maintain the health, safety and well-being of the public.
- To promote and maintain public confidence in the professions regulated.
- To promote and maintain proper professional standards and conduct for members of those professions.

To achieve this, we register qualified dental professionals, set standards for the dental team, work to ensure the quality of dental education, and investigate complaints and concerns about a dental professionals' fitness to practise,.

We want patients and the public to be confident that the treatment they receive is provided by a dental professional who is properly trained and qualified and who meets our standards. Where there are concerns about the quality of care or treatment, or the behaviour of a dental professional, we will investigate and take action if appropriate.

In addition, we provide the Dental Complaints Service (DCS), which aims to support patients and dental professionals in using mediation to resolve complaints about private dental care.

Number of disclosures received

From 01 April 2022 to 31 March 2023, the General Dental Council received 82 disclosures of information.

Actions taken in response to disclosures

Action type	Action description	Number of disclosures resulting in this action
Under review	This applies to disclosures which have been identified as a qualifying whistleblowing disclosure but no further assessment or action has taken place yet.	0
Closed with no action taken	<p>This applies to disclosures which have been identified as a qualifying whistleblowing disclosure but no regulatory assessment, action or onward referral was required.</p> <p>This could be in cases where it was decided the incident was resolved or no action was appropriate at the current time.</p>	0
Onward referral to alternative body	This applies to disclosures which have been identified as a qualifying whistleblowing disclosure and forwarded to another external organisation without any further assessment or action by the receiving regulator.	0
Regulatory action taken	This applies to disclosures where the regulator has taken an action which falls under their operative or regulatory remit.	60

	<p>This may include but is not limited to:</p> <ul style="list-style-type: none"> • Referral to fitness to practise team or any other fitness to practise process • Opening of an investigation • Advice or guidance given to discloser, employer, education body or any other person or organisation • Registration actions • Other enforcement actions <p>In cases where the disclosure was assessed via a regulatory action but it was then found that there was not enough information to proceed, the disclosure is categorised as 'no action – not enough information'.</p>	
<p>No action – not enough information</p>	<p>This applies to disclosures which have been assessed by the regulator and a decision has been made that there is not enough information to progress any further.</p> <p>This may be in cases where the disclosure was made anonymously with insufficient information to allow further investigation, a discloser is unable to provide more information or the disclosure was withdrawn before it could be investigated.</p>	<p>22</p>

Onward referral to alternative body and regulatory action taken	This applies to disclosures where a regulatory action was taken and the disclosure was referred on to another external organisation.	0
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Summary of actions taken

The number of disclosures received has increased from 61 last year to 82 this year. This rise is partially the result of an increased number of conduct concerns received around a dental professional's behaviour, both in and outside the workplace. This is also a return to the level of disclosures we received in previous years, indicating that last year may have been an outlier.

All 82 disclosures were made directly to the Fitness to Practise team. In 60 of those disclosures, regulatory action was taken, namely the opening of fitness to practise cases. These opened cases could lead to a range of resolving actions determined by a statutory practice committee. These include removal (erasure) from the Register, suspension from the Register, conditions for a determined period, or the conclusion that fitness to practise is not impaired and the case is be closed, with no further action.

Of the 82 whistleblowing concerns we received:

- 31 cases were closed with no further action. Of these 31 cases, nine were merged with other live cases, and 22 were closed with no further action as there was not enough information provided to progress further.
- 9 cases have been referred to the Case Examiners.
- 42 cases are still at Assessment stage.

Of the 82 cases received, 47 were received from dental professionals, 16 were from non-registrants (who were employed in dentistry) and 19 were anonymous.

None of the disclosures have resulted in resolution via employer(s). This is largely because either we did not have jurisdiction to consider this option or because the nature of the disclosures made them unsuitable for resolution in this way.

Learning from disclosures

The disclosures we have received have not had an impact on our ability to perform our regulatory functions and objectives during this period. Given our statutory framework the action we would take in response to a disclosure is the same as the regulatory action we would normally take.

The way initial concerns are reviewed through the initial assessment process has enabled us to identify whistle blowing complaints earlier and reduced the number of complaints we could not progress due to insufficient information, with only six falling into this category in 2022-2023.

Of the whistleblowing concerns received during this reporting period, we identified that conduct concerns appear in 70 of the 82 disclosures made to the GDC. This increased number of conduct concerns around a dental professional's behaviour, in and outside the workplace, may suggest that the standard dental professionals and those who work in dentistry hold the profession to, is higher than that of the general population.

Compared to some other regulators we have received a higher proportion of disclosures for the size of the register. It is worth noting that most dentistry is provided in a primary care setting and outside the more robust clinical governance frameworks that characterise some other forms of healthcare. This may mean that alternative disclosure routes are less present in dentistry, and a larger proportion are dealt with by the regulator.

We have also continued to review our processes and procedures for the identification of whistle blowers and have a more robust process for this identification at the point a concern is received, with support from internal legal services.

Please return the completed template to Ken Leach at the GMC ken.leach@gmc-uk.org no later than **25 August 2023**.