General Dental Council

Organisational Performance Report

Council meeting 26 September 2025

The report provides a view of GDC performance in relation to delivery of our core functions and progress towards the priorities set within the Costed Corporate Plan 2025. A quarter 2 2025 summary is provided for the reconciled position in budget. Latest month end updates to August are provided for delivery and operational performance where appropriate.

Type of business:	For discussion
Recommendations:	Council to discuss the report
Assurance trail:	Senior Management Team and Executive Leadership Team (ELT) performance review workshop on 15 July 2025
	ELT review on 19 August 2025
	Finance and Performance Committee review on 11 September 2025 with data updated to end July
	Council review on 26 September 2025 with data updated to end of August
Contents:	Performance key points dashboard: Pages 2-3
	Priorities performance summary: Pages 4-11
	Project delivery summary: Pages 12-15

Performance key points dashboard - August 2025 / Q2 where stated

Education provider inspections

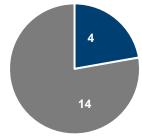
Providers with final reports completed for both the 2023/24 academic year inspections and 2024/25 year to date for end Q2 have met overall target standards. Those pending for 2024/25 are scheduled post the 2024/25 exam completions to enable assessment of the examination processes.

2023/24 academic year inspections



- Completed met target standards
- Completed awaiting final report

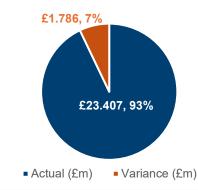
2024/25 academic year inspections



- Completed met target standards
- Inspections reports pending

Expenditure budget vs actual

Actual position is £1.786m (7%) less than budgeted. This is mainly due to timing of large project spend with the expenditure expected in the remainder of the year.

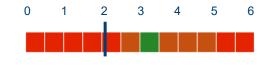


Forecast free reserves for end 2027

Current free reserves are at 3.3 months of operating expenditure which is within the Council policy range.

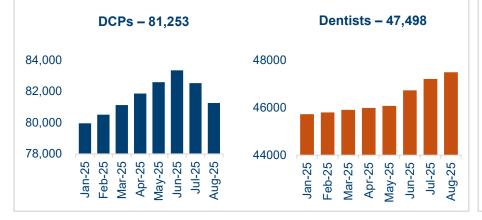
For the end of the current plan period (Dec 2027) the forecast is reduced to 2.1 months of operating expenditure, which is below the target of 3 months and is outside the 2.5-4.5 months policy range.

Our Medium-Term Financial Strategy and budget planning for 2026-2028 is applying measures to address this and achieve financial stability, which will be presented in October for Council approval.



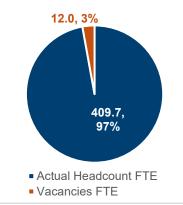
Register size - 128,751

There has been a slight reduction in the DCP register which is typical following the annual renewal period in July, with some DCPs not renewing. The DCP register remains larger than at the start of 2025 and with on average around 875 UK DCP applications received per month currently, we will monitor but do not expect an ongoing decrease.



FTE actual vs forecast

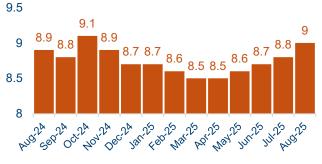
The actual headcount at the end of Q2 is 409.7 FTE, which is 12 FTE lower than the forecast held in the budget. These posts are in active recruitment and are forecast to join the business later in the year



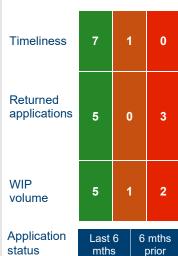
Sickness

Average working days lost per employee over rolling 12 months

2025 sickness levels in recent months have risen to the levels seen in late 2024. This is mainly a result of a small number of individual instances of extended sick leave impacting the overall. Our people partners continue to work with managers of teams to focus on staff wellbeing initiatives and reduce levels.



Registration application process Count of application routes performance last six months



4,407

7,536

enquiries

7000

Timeliness targets met in 7 of 8 application routes: Both the overseas DCP routes have been improving timeliness significantly each month with the initial application route returning to target timeliness in August, and the Additional titles route expected to be within the 80-day target by end of 2025.

5 of 8 routes are meeting the current target < 20% which is overall average green: The need to return applications help indicate the usability of application guidance and process. UK DCP, Restorations and Specialist List are currently above the target. Both the Manage My GDC Registration online platform to be implemented in Q1 2026 and ongoing reviews to existing guidance are working to address this.

Work in progress volumes at target sustainable levels except for the overseas DCP routes and Specialist List: These are expected to return to sustained levels in Q3 as overseas DCPs is reducing monthly, and Specialist List is only 5 applications above the < 50 target.

42% fewer application status enquiries received in last 6 months: compared to the previous 6-month period, indicating improved awareness of status from proactive updates.

Fitness to Practise (FtP) work in progress cases

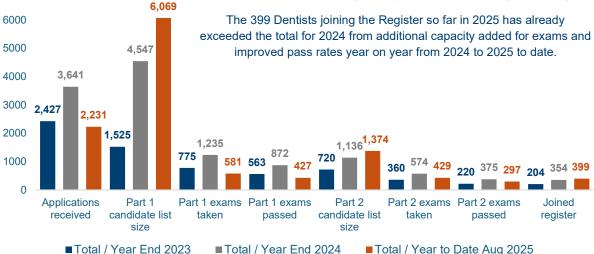
Caseloads have risen in Assessment stage from additional receipts at Initial Assessment (IAT) and also a vacancy for a manager role reducing capacity at this stage. Increased Rule 4 processing has impacted Case Examiners volumes. Subsequent Case Examiner referral volumes continue to impact the caseload in Legal Presentation and DPHS stages.



*Note target volumes are being reviewed to set for ILPS, ELPS and DPHS, hence these are not RAG rated currently.

ORE candidate progression rates

New applications received for the ORE continue at the high rates seen in 2024 and we are monitoring closely should the trend begin to change.



FtP case progression timeliness

Targets for time taken to make a final decision in a case stage, continue to be met consistently in the Assessment stage. IAT timeliness has been impacted in recent months by capacity and higher incoming concerns, but this is now resolved in August. Referrals continue to impact timeliness in the Case Examiner, Legal Presentation and DPHS stages.

Period	IAT	AS'MNT	CE	ILPS	ELPS	DPHS
2024	91%	78%	16%	75%	31%	47%
Last 6 months	86%	79%	19%	48%	8%	42%
Target	90% in 5 days	75% within 30wks/ 50wks for complex cases	70% within 13wks	80% disclosed with 98 working days	80% disclosed with 98 working days	CE referral to hearing - 70% with 40wks

Performance summary August 2025

Priority area	Performance summary
 Develop our strategic ambition and vision Success measures: Our staff know our strategic vision and priorities. We are a trusted, high-performing regulator. We provide an equal, diverse and inclusive environment for regulation and our working culture. 	Following approval by Council in April the proposed corporate strategy for dental regulation 2026-2028 was published in May for consultation and the period for responses closed on 21 August. The consultation feedback is currently being analysed and the finalised corporate strategy and supporting business plan & budget will be brought for Council approval in October. Work continues to embed our refreshed values in our ways of working across our working practices, with a toolkit of supporting materials developed to support all teams. The annual Professional Standards Authority (PSA) review of GDC performance against the standards set is in progress throughout Q3 & Q4, with the final panel making their decision in mid-November, and the final report published in December.
Strengthen education quality assurance Success measures: • We are confident in the rigour of education standards and those qualified. • Feedback to Quality Assurance processes are proportionate and enable learning and improvement.	The 2024-2025 academic year inspection timetable was amended to reflect that 11 inspections originally scheduled for completion in Q1 identified the need to perform further assessments post exam completions. All inspections will be completed in the overall period and as of the end of Q2, 6 inspections were completed, with 9 to complete in Q3 and 1 in Q4. 4 final reports have been completed with the providers meeting overall required standards. The revised standards for education which Council approved in April are on track for being published in Q3 as scheduled. Development of the process for quality assurance of specialty training is on track and due to complete in Q3. The thematic review of dental nursing report is in progress of drafting the final report, which is expected to be completed by Q4. We are scheduling an internal review of our risk-based evaluation process which identifies the level of quality assurance activity needed for each education provider, and we will ensure that the next inspection timetable includes contingencies required for review assessments. This work will be scoped in Q3 this year. Feedback on our quality assurance processes is collected annually from providers. We had a positive but a low response rate for 2023-24 academic year, so we are actively promoting feedback for 2024-25 and requesting it immediately following completion of each inspection. We have already seen an increase in responses. We will consolidate responses at the end of the academic year to report summaries in Q4 2025. Ref: Chart top left page 2. Note: 42 active education providers are inspected and monitored by the GDC Education QA team. Each academic year a risked based approach identifies the proportionate number of providers to assess in greater detail in the following year.

Priority area	Performance summary
Timely and quality decision-making in	Registration timeliness has consistently met target performance across all 6 UK and Specialist routes.
Registration Success measure: • We are confident in the integrity of the registers.	In Overseas DCPs routes some applications have remained over the 80-day processing target from the backlog received in 2023, with the majority of these being reassessments. Both the overseas DCP routes have been improving timeliness and reducing the caseload significantly each month with the initial application route returning to target timeliness in August, and the Additional titles route expected to be within target timeliness by Q4, with both routes reaching sustainable volume targets by the end of 2025.
	We report Registration appeals quarterly to the PSA. For Q2 2025 we received 16 appeals and concluded 10, with 3 upheld. These volumes are in line with 2024 receipts and the decision proportions.
	Ref: Chart top left page 3. Note: We track the average time taken for applications to be completed (timeliness) and monitor application WIP volumes to measure efficiency of our operational processes.
 Enable efficient overseas application routes Success measures: Suitably qualified overseas applicants are able to register within a reasonable timeframe. Supply and demand is met in registering internationally qualified dental professionals. 	 ORE capacity vs demand: With new ORE applications continuing to be received at the high levels seen in 2024, despite exam sittings capacity being increased, the ORE capacity cannot yet meet the demand from internationally qualified dental professionals applying to work in the UK. Actions taken: For the procurement of providers for both Parts 1 and 2 exams, we are in progress of the significant moderation exercise: with the procurement due to conclude in Q3. Throughout this we are focused on the critical importance of scalability and capacity in the future contracts. The expectation is that new providers will begin holding examinations from Q2 2026 onwards.
	 As part of our new corporate strategy delivery, we will be evaluating options for assessing internationally qualified applicants, to create an efficient and effective, forward-looking international registration framework that can meet future capacity demands. We are working closely with partners, with the aim to develop and implement new routes to registration, including, legislation permitting, a robust system for provisional registration which keeps patients safe and meets the needs of the system and the profession.
	 Exams for Part 1 and Part 2 are continuing with existing suppliers through to end April 2026. These are providing 1,800 places in ORE Part 1 with sittings in August, December and April, and 576 places for ORE Part 2 across sittings in September, November, January and April.
	399 new Dentists have now joined the Register so far in 2025 to the end of August after passing Part 2 ORE, which is 45 more than the entire year in 2024.
	The refugee policy implemented within the ORE route has now resulted in 13 applicants passing ORE part 2, with 8 of those who have joined the register. Once passing ORE part 2, an application to join the register is made and individuals may choose not to submit this immediately after passing the exam.

Ref: Chart bottom left page 3.

Priority area

Performance summary

Improving the regulatory framework

Success measures:

- We enhance public safety through advancing upstream regulation.
- Reinforce the shift from compliance to positive professionalism.
- Perceptions of Fitness to Practise effectiveness improved.

Delays to work on considering our regulatory approach to rapid dentistry changes: As reported previously our work to scope out how the GDC could adapt to rapid dentistry changes and consider our regulatory approach to; remote care, non-dental cosmetic treatments (injectables) and cosmetic dentistry has been deferred to 2026 as resource is not available due to a need to prioritise resource on ORE procurement support and evaluating options for international registration.

Action taken: The new role of Head of Registration Policy joined in Q2 to add focus across Registration practices. Resource for progressing the regulating rapid dentistry changes, as well as providing appropriate support for delivery of the new strategy is being included within the 2026-28 business plan, to be submitted for approval by Council in October.

Sustain and promote professional standards

Success measures:

- We reinforce the shift from compliance to positive professionalism.
- Professionals and stakeholders take visible steps to engage with and act on the GDC's priorities.

Scope of Practice guidance was presented to Council in Q2 following external consultation where stakeholder feedback was sought on the proposed guidance prior to publication. This work focusses on professional judgement and the importance of application in practice. Guidance was published on the 16 September and comes into effect on 1 November.

Further preparation is continuing across Q2/Q3 as part of 2026 business planning for progressing our work of addressing sexual misconduct in the context of professionalism.

Development of the proposed professionalism framework is continuing. We are aiming to bring forward proposals for consultation in Q1 2026, subject to approval from Council in October. Development of the framework in time for the October Council meeting is challenging due to both the detail of work required and Policy team resource demand across initiatives.

Action taken: The project developing the professionalism framework is currently rated amber to acknowledge this risk and is working to mitigate all potential for delays to meet the October timeline.

Timely and quality decision-making in Fitness to Practise

Success measure:

 Correct and final case decisions made at the earliest stage in Fitness to Practise process. We have seen a consistent increase in new concerns received in 2025, with the monthly average year to date being 140, compared to 117 monthly average in the full year 2024 and 108 in 2023. At this time, we do not see any discernible trends to explain the increase. We continue to monitor closely and forward plan case progression resourcing, as the increase in cases is having an impact on maintaining timeliness and caseload targets at some stages.

Initial Assessment: Whilst there was a temporary impact in timeliness in initial assessment in Q2 due a resource shortage, this was acted upon through assistance from the Assessment team and both timeliness and work in progress caseload are returned to targets levels.

Assessment: Timeliness continues to meet target performance, however the increase in concerns raised and subsequent referrals to assessment is having an effect on how quickly we can allocate cases, which will impact our

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Priority area Performance summary ability to maintain timeliness and caseload targets. There has been, to date an increase of almost 100 cases in progress since March (496 in March to 593 in August) and the challenge from increased receipts persists. Action taken: The Assessment team are both working to reduce caseload and working with the Rule 4 and Case Examiner teams to forward plan resourcing for the expected throughput of referrals. Rule 4: There has been sustained focus to process cases in the Rule 4 queue, which has succeeded in reducing caseload from 189 in March to 116 in August, and within the target of sustaining lower than 130 cases. Case examiners: The average number of decisions being made per month is lower than forecast at 56 decisions per month since February. There are a range of reasons for this, but principle amongst them is the progression of a more complex aged cases which take longer to work through, together with a change in team structure. Action taken: Utilising underspend within the Regulation Directorate, Case Examiners on fixed term contracts have been extended to November/December 2025 and additional hours have been offered to deliver the target active caseload of 120 cases at this stage of the process. We continue to monitor performance closely and we currently anticipate that targets for timeliness and sustainable caseload will be achieved by late 2025. Legal Presentation Service: Disclosure targets have not been met due to continued increased referrals from Case Examiners which have been above the capacity for the legal presentation team. Action taken: A business case for additional resource was approved in Q1 and the team is now up to full capacity in August. The team are also identifying case management improvements to improve efficiency and capacity. We expect the benefit of resource and improvements to take effect in Q4. Dental Professional Hearings Service: Caseload has also subsequently increased, with average referrals per month rising to 27 in 2025, from circa 15 in 2024. Actions taken: We have proposed increased hearing capacity from five hearings a day to seven hearings a day from January 2026 in the business plan for 2026-2028. The additional resource in the Legal Presentation Service now recruited to increases capacity for case preparation on route to hearing. The process for monitoring the quality of FtP decisions made has been introduced; measuring the total number of FtP decisions made in a 12-month period, and what proportion of these have been subject to review where there has been material doubt about the robustness of the decision. The indicative RAG ratings have been set as follows: Green = ≤0.5%, Amber = Between 0.6% and 1%, Red = ≥ 1.1%. The current rolling 12-month figure reveals seven reviews where the original decision was found incorrect from a total of 3,726 decisions made, which is 0.2% and thus a 'green' rating.

Ref: Charts right side page 3.

Priority area	Performance summary
Influence regulatory reform	There is ongoing dialogue being held with the DHSC on regulation developments.
Success measure: • We have fully explored the boundaries of the	Further discussions are to be held with stakeholders in relation to potential for additional routes for registration for internationally qualified professionals.
current legislation and leveraged all opportunities.	We continue to monitor the progress of regulatory reform within the GMC to understand potential implications to the GDC, should similar legislation changes be proposed for us in future.
Data and information management	In July, we published new inferential analysis of the dental care professionals' working patterns that builds on the
Success measures: • Our data is secure and effectively managed.	DCP data we first released in October last year. The analysis draws on responses from the 43,692 dental care professionals who completed the working patterns survey as part of their 2024 annual renewal period. This represents 58% of the DCP register.
 Our data is accurate and usable to increase our ability to drive and measure organisational decision-making. 	The second annual DCP Working Pattern targeted data collection was performed alongside the July Annual Retention Fee collection and the data report will be published in Q3.
We increase the value of published data to stakeholders.	We have been progressing activities to address recommendations from the audit held in December for our security and technical estate. The remediations are expected to address all significant vulnerabilities and achieve a substantial reduction in medium-risk vulnerabilities by the end of the year.
	Work began in July with the external supplier procured to perform an independent Data Maturity Assessment (DMA) of GDC's data management. They are performing analysis and interviews and will make recommendations for improvements for how we capture, manage, and use data, in a report due at the end of Q3.
User-centred service design Success measures: Our services are designed around the needs of users to be accessible, effective and efficient.	On average across all registration routes, returned applications proportions are below the 20% target. The UK DCP route, Restorations are outside target, with a 37% average of applications returned and requiring resubmission. The main reasons are where the qualification was not certified/provided or identification issues. The Specialist List (SLA) route is slightly above target by 2% but due to small volumes in not felt an issue. Other routes are within target, which will be revised to a 0% target once the Manage my GDC Registration platform is delivered.
	Calls to Customer Services asking for status updates decreased by 42% in the last 6 months compared to the previous period (4,407 v's 7,536 calls) however we continue to acknowledge these enquiries should not be necessary.
	Action taken: The current paper-based application processes will continue until the Manage my GDC Registration platform is introduced in early 2026, and this will address both these measures by removing the need for returns through the new platform providing online status updates, preventing the need to chase. In the meantime, we have been proactively reviewing, updating application and website guidance and providing updates to applicants. This is felt to have influenced the reduction in status update enquiries.
	Ref: Chart top left page 3.

Priority area

Performance summary

Communications and engagement

Success measures:

- We communicate clearly across channels.
- Our communications across channels achieve positive levels of engagement.
- We proactively engage with external bodies and professional groups.

We engage with the public and stakeholder groups through a combination of digital channels, as well as in person and online events. Since the last update to Council in June the significant engagements have been:

We announced a further extension to our Initial Enquiries process, to include isolated cases of perceived unprofessional behaviour, as part of ongoing efforts to improve timeliness and proportionality in fitness to practise investigations. Initial inquiries process extended to include conduct concerns - 1 July.

We published research that showed support for targeted remediation during FtP, which will inform our further thinking to improve FtP. Research finds support for targeted remediation to improve patient safety - 2 July.

We announced the new Chair of the GDC, Dr Helen Phillips, on 10 July. Dr Phillips' first comments to the sector were "My ambition is that dental professionals feel a sense of pride – never fear – in being regulated by a trusted, effective, proportionate regulator that embodies our values of being respectful, transparent, inclusive and purposeful."

We published the GDC's Annual report and Accounts for 2024, using it as an opportunity to demonstrate the GDC's performance and priorities. General Dental Council publishes Annual Report and Accounts 2024 - 16 July.

The CEO had a very engaging visit to Northern Ireland on 23/25 July, along with Council member Donald Burden and the Head of Nations and Engagement.

The GDC's student engagement programme got underway in Scotland for the coming academic year, and we had further engagement with professional associations to support development of policy proposals around principles of professionalism.

We continued to engage stakeholders on our Corporate Strategy proposals, with webinars in England and Scotland, encouraging responses. The consultation closed on 21 August, feedback is currently being reviewed and analysed, prior to the corporate strategy and supporting business plan being finalised and presented to Council for approval in October.

A case study from the GDC was featured in the PSA's good practice guide to the EDI standard, which we publicised, along with the EDI action plan, in the Chair's external blog post: A view from the Chair: sharing learning from EDI, understanding the working patterns of dental care professionals, and last chance to respond to our Corporate Strategy proposals.

In September:

We are holding a stakeholder workshop to bring together insights about sexual misconduct.

The Policy team are attending a PSA roundtable on preventative regulation.

We are publishing an evidence review of AI in dental services.

Priority area	Performance summary
Recruitment and retention Success measures:	There were 12 leavers in Q2 which is consistent with levels seen in 2024, and validated the insight that the 21 leavers in Q1 was an outlier.
 GDC is an attractive and inclusive employer. Turnover levels are within benchmarks of other comparable organisations. 	Twenty additional posts were included in the approved 2025 budget to commence in Q1 2025. For these positions and other vacancies, 24 offers were accepted and 11 new starters joined in Q1 and a further 30 offers have been accepted in Q2 with 17 new starters joining.
comparable organications.	Our rolling 12-month Turnover view has also reduced due to the reduced leavers in Q2 and currently sits at 12.7% in August, which is a year-on-year decrease of 3% and is below benchmarks of comparable organisations researched which range between 17% - 20%.
	The actual headcount at the end of Q2 is 409.7 FTE, which is 12 FTE lower than the forecast held in the budget with recruitment campaigns active/scheduled for the vacancies.
	Ref: Chart bottom centre page 2.
Sickness Success measure: • Sickness levels are within benchmarks of other comparable organisations.	Sickness levels are reduced but remain above public sector benchmarks: The rolling 12-month total sickness absence has increased by 104 days from 3,737 when last reported to Council for May, to 3,908 in August, which has also meant that the average working days lost per employee over rolling 12 months increased from 8.6 in May to 9.0 in August. The latest benchmark compared to public sector is 7.8 days. Comparing end of Q2 to end of Q1 2025 directly there has been a slight decrease in both days lost and proportion of total for 'Minor / season illness' and 'all other health matters.' Correspondingly, days lost for mental health reasons increased from March to similar proportions seen in December 2024. The increase is mainly a result of a small number of individual instances of extended sick leave impacting the overall total. Actions taken: Our People & Organisational Development Team continue to focus on wellbeing and management support initiatives, as well as working closely with line managers to support all individual cases. Additional work is being undertaken to review the sickness levels, causes of sickness and support managers require. The sickness absence policy is due to be reviewed and will aim to address gaps found in the review. Ref: Chart bottom right page 2.
Learning and development Success measure: We provide an equal, diverse and inclusive environment for regulation and our working culture.	The programmes continue for 'Managing the GDC Way' for the fundamentals for line management and 'Leading the GDC Way – Essentials' to enhance core skills in leadership. To date 75 colleagues have attended 'Managing the GDC Way' with a further 35 colleagues enrolled. The Leadership Community Network engagement has continued which have focused on embedding the refreshed GDC values and looking forward to our next Corporate Strategy, and how the network support delivery of these. The Leading the GDC Way - Inspire programme designed exclusively for the Leadership Community Network continues. The four modules being delivered through 2025 build on existing knowledge and provide further development for our leaders to confidently lead teams with purpose, empathy, and clarity.

Priority area	Performance summary
2025 Budget	We report budget to the end of the previous quarter to Council to provide the reconciled position.
 Outcome sought: We reduce the time taken, resource levels required and costs for operational functions. 	At the end of Q2 there was an operating surplus of £11.96m which is £2.01m (20%) higher than budgeted. In addition to an expenditure timing difference on large projects, there was a small surplus in Dentist, Investment and exam income compared to budget.
	Expenditure position is £1.786m (7%) less than budgeted. This is mainly due to timing of large project spend with the expenditure expected in the remainder of the year.
	The forecast position for the end of the financial year is an anticipated operating overspend of £498k.
	Ref: Expenditure chart top centre page 2.
Forecast free reserves for end of current plan period – December 2027 Outcome sought: • We are financially sustainable.	Forecast free reserves currently outside of policy range: Current free reserves are at 3.3 months of operating expenditure which is within Council policy range of between 2.5 – 4.5 months, however following financial pressures that began to emerge in late 2024, the level of forecast free reserves for the end of the current plan period (December 2027) has reduced from the target level of 3.0 months of operating expenditure to being at 2.1 months at the end of Q2 2025. The reasons for reduction include call down on free reserves for Employer's National Insurance and to meet our liability in respect of the implications of the Somerville v's NMC judgement.
	Actions taken : We are developing our Medium-Term Financial Strategy and the budget plan for the 2026-2028 period to introduce measures which address the forecast to be within policy range and ensure the GDC sustains financial stability. A financial efficiency exercise is also in progress to work towards target savings over the next 5-year strategy period.
	Ref: Chart top right page 2.
Board effectiveness, governance and delegations for decision-making	The latest Board Effectiveness review completed with the action plan presented and approved by Council in April, for which the changes are in progress and on track for delivery across the remainder of 2025 and throughout 2026.
Outcome sought:We have proportionate governance in place for decision making.	Recommendations from Board Effectiveness review are informing a review of decision-making levels and a deep dive review is in progress with the Executive and ARC to inform the scope of potential changes, which will present findings later this year.

Project delivery summary August 2025

Project	Delivery update	Jun	Jul	Aug
Enable efficient overseas application routes				
ORE Part 1 and Part 2 Tenders and mobilisation To procure suppliers of examinations for overseas registrants.	The project remains in exception to recognise the ongoing risks to GDC resource demand during the moderation and to ensuring viability of ORE suppliers, which will remain until preferred suppliers are recommended in October 2025. Once final contracts are completed in Q4, the timescales to mobilise the suppliers and schedule first exams with them can be clarified.			
Revised international registration processes To review and optimise the international registration process.	Continued engagement with the DHSC and Secretary of State, Health (SoSH), on the future direction of wider work on international registration, management of candidate list and the wider ORE approach. Executive papers are in development for approach to discuss with Council in October 2025. Discovery work has also begun on the future international registration framework design and ORE approach for 2026 onwards.			
Improving the regulatory framework				
Case management procedural improvements Explore the case management processes from end to end, looking for efficiencies in the process.	The plan is being developed to deliver procedural improvements for implementation in 2026 onwards. To date three major areas of focus have been identified and the scope developed with stakeholders, which are for approaches to supportive resolutions and consensual panel determinations, plus introducing a refreshed set of KPIs to monitor performance. Subject to Executive approval these will be planned for delivery.			
FtP decision-making guidance To review and create guidance for decision makers at each stage of the fitness to practise process.	Due to changes in the project team membership, the project schedule has been delayed. There is currently a review of the scope and schedule of the project to ensure it is achievable and correctly resourced to move the project out of exception. Progress has been made on Case Examiner and assessment guidance.			
Improving communications and support in FtP Evaluate a range of improvements within the communications and support methods throughout the FtP process.	The project remains on track. Training to support development of capabilities in call handling are scheduled to commence with FtP teams in Q3.			

Project	Delivery update	Jun	Jul	Aug
Sustain and promote professional standards				
Outcome-focused model for lifelong learning Set the focus and support for the continuous development and learning of Registrants during their career.	All activities that can be developed under current legislation have completed. A closure report is in stakeholder review in September, to support final closure ahead of the original December 2025 deadline.			
Principles of professionalism Define and engage with stakeholders on standards.	Risk remains around developing the framework proposals ready for the October 2025 Council meeting, so that Council approval enables the consultation to be held in Q1 2026. Criteria for professional guidance and supporting materials have been drafted and are being progressed further in preparation for the Council review.			
Revise the standards for education Develop and introduce updated standards.	The revised education standards were approved by Council in April and prepublication planning and implementation activities have progressed to meet September timeline for publication.			
Develop our people and culture				
Organisational cultural change at the GDC Develop and embed values driven culture and behaviours.	The culture audit data was collated in August and sent for gap analysis, which will inform scope and resources for alignment with the Corporate Strategy and Business Plan 2026–28. This work was delayed, and the delay is being mitigated by having dedicated resources to the work for the next two months, in order to complete to schedule. A values-led recognition scheme has also been rolled out, with over 100 peer to peer acknowledgements of living the values at work since July, have been submitted.			
Review and improve the intranet Improve the GDC intranet to better support staff engagement and productivity.	We are currently planning for iteratively improving to the intranet site as standard business activity, putting the project work on hold until Q3 2026 for evaluation of options post the IT migration to SharePoint online. Requirements planning will commence in early 2026.			
Total reward Review the complete benefit and renumeration package for staff to ensure it is comparable to the sector.	A workshop planned with ELT in August to explore options for a pay and grading framework was cancelled to allow for redevelopment of grading model in alignment with organisation structure. Timeline to present to Council in October is unchanged, and at present this schedule target will be met. Benefits portal work has completed and has gone live to staff in September.			
Workforce development To improve learning, leadership, and succession planning.	Manager training cohorts concluded in August with graduation presentations being held in September.			

Project	Delivery update	Jun	Jul	Aug
Associates' development Assess the implications for the GDC following the Somerville vs NMC judgement.	Work is in progress to implement the new associate worker agreements, with circulation delayed but progressing. An extension of the project end date to December 2025 has been approved in principle to complete the work.			
	In August, 264 offer letters and supporting documents were issued (excluding 76 on hold pending tax advice), with around a quarter of signed agreements already returned.			
User-centred service design				
Implementing new Welsh language standards To create a Welsh language version of the online application processes.	Discussions with the Welsh Language Commissioner will take place in September regarding an extension to the December 2025 deadline to have online applications processes in Welsh, as this will be implemented as part of the new Manage my GDC Registration platform in Q1 2026.			
Manage My GDC registration To develop an online application and CPD processing platform.	The platform will be operational in Q1 2026; however, the project will run until Q3 2026 to ensure in-house processes are embedded and functioning as expected. A risk has been raised as the supplier is confirming statement of work for the next			
	phase at present, and this is not yet complete to the time scheduled. This will not impact the implementation of the platform timeline. Once this statement of work is confirmed (expected by end October) the project status will return to green.			
Financial and operational efficiency management				
Implement new procurement and contract management process To establish a new approach to procurement and contract management.	Procurement Act 2023 guidance has been approved, and training for contract owners and managers will begin in September. User acceptance testing of the new Contract Management database is underway and scheduled for release to production on 25 September.			
Optimisation of the GDC estate Reviewing the GDC premises for them being fit for purpose and cost effective.	A paper is being presented to ELT, FPC and Council in October to seek endorsement of recommended options, which will then be developed into a full business case.			
Replace credit card processing system Contracted and implemented a new provider for taking online card payments.	This project closed in July following successful application of new system in the recent ARF collection			

Project	Delivery update	Jun	Jul	Aug
SharePoint migration to online To move away from SharePoint on-premises service to the cloud version.	The project is aiming to take a procurement proposal to ELT in November for the recommended external supplier, costs, and approach to coordinate the migration to SharePoint Online. There is currently a risk to completing the procurement evaluation by November due to resource constraints within the IT team, which is being mitigated through support from others in the team. The project will return to green status once the ELT approval is obtained for the proposal.			
Case management and operational Improvements in the hearings service Explores the hearings service procedures, looking for efficiencies to introduce in the process.	New Legal Presentation and Hearings management information dashboards and notification were successfully deployed at the end of May, for use within the team. The project remains in exception through to October while planning for reporting and a clear delivery timeline is established.			
Application fees review for strategy cycle Analysis for ARF and applications fees for delivery of the new strategy.	Options model for budget and ARF levels have been evaluated against the new proposed strategy and were incorporated into the consultation. Feedback from the consultation is currently being analysed and any resulting changes included in the Strategy and business plan being presented to Council in October.			