# General Dental Council Dental Professionals Survey

Report 2019

Pye Tait Consulting



# **EXECUTIVE SUMMARY**

#### **Research Objectives:**

- To enable benchmarking and measuring of performance; registrant awareness and perceptions of GDC's performance and impact in fulfilling its regulatory roles and responsibilities;
- To obtain registrants' insight into key policy initiatives, including Shifting the Balance being developed by the GDC;
- To test registrants' views and understanding of topical or current issues in dentistry/ dental regulation;
- To 'horizon scan' and identify emerging policy issues that are relevant to the GDC.

#### Methodology

 Quantitative survey completed by 7848 dental professionals (7.1% response rate)conducted between 3rd Jun – 31st July 2019;



• Five focus groups across the UK (Edinburgh, London, Leeds, Cardiff, Birmingham), encompassing 30 participants in total. Participants are a varied mix of Dentists and Dental Care Professionals (DCPs). Conducted between 30<sup>th</sup> September – 10<sup>th</sup> October 2019;



• 46 in-depth interviews (lasting 20-30 minutes) conducted with Dentists and DCPs 30th September – 25th October 2019.





#### Public confidence

- In the focus groups, dental professionals agreed that public confidence in dentistry was created at a local level (rather than national level). High profile legal cases involving dental (and other healthcare professionals) were typically seen as 'one-offs' and were thought to be unlikely to damage public confidence in the dental profession;
- The exception was when significant patient harm had occurred (either severity or widespread incidents) or where there had been a culture that allowed malpractice to continue.

#### Local resolution

- In the survey, more than half (53%) of dental professionals thought that concerns involving 'clinical care that falls below expected standards' should be resolved locally (rather than referred to GDC). Compared to the 2017 survey, a higher proportion of dental professionals stated that their practices had the facilities to receive and resolve complaints (2017 = 87%, 2019 = 93%);
- In the focus groups, dental professionals suggested that good communication, preventative initiatives, and quick resolution were key to preventing and resolving patient complaints. They also suggested that serious cases involving drink or drugs, or discrimination may need to be referred to the GDC.

#### **GDC Regulatory Purpose**

- In the survey, nearly two-thirds (64%) of dental professionals agreed that the GDC 'promotes and maintains confidence in the dental profession'. Dental professionals felt that the GDC could do more to help with public confidence in dentistry and with promoting the positives of the profession;
- Around three-fifths (61%) of dental professionals, in the survey, agreed that a dental regulator should place equal focus on preventing bad practice and taking action against dental professionals who have serious complaints raised against them.



## **Executive Summary**

#### Shifting the balance

• Three-fifths (60%) of dental professionals in the survey were aware of the GDC shifting its regulatory focus (through Shifting the Balance). There was no consensus in the focus groups discussion about the same topic about how far along this journey the GDC had progressed.

#### **Fitness to Practise**

- In the survey, the majority (89%) of dental professionals were confident in their understanding of the Fitness to Practise (FtP) process;
- In the focus groups, some dental professionals were concerned about the mental health of those registrants involved in an FtP case(because of it being a high pressure environment). They suggested further support from the GDC was required for dental professionals going through the FtP process.

#### **Future of the Profession**

• In the survey, a larger proportion of dental professionals were pessimistic about the next two years compared with two years ago (2017 = 33% 2019 = 42%). 'Meeting the demands of regulation' (65%) and administration / record keeping (57%) were the main challenges that dentists are facing on a daily basis. DCPs main challenge was 'finding time and opportunities to develop' (50%).

#### Advocacy

- More than half (57%) of dental professionals in the survey did not signpost patients to advocacy resources. The main reason for this was because they did not feel there was a need to (59%). Around one-in-ten (11%) registrants were not aware of advocacy services.
- In the focus group discussions, several of the dental professionals were aware of Advocacy resources.



## **Executive Summary**

#### Consumer v Patient mindset

- In the focus groups, dental professionals said that they would consider members of the public as patients first rather than consumers (when undertaking a treatment at their practice). This was deemed to be in line with the way they had been trained;
- Dental professionals did acknowledge that, in some cases, cosmetic dental treatments were having the effect of commercialising a predominantly healthcare-focused profession;
- Dental professionals did accept that some members of the public may consider themselves as consumers rather than patients, but that this scale was more on a continuum rather than a binary choice. Cost was a factor, members of the public receiving treatment on the NHS potentially view themselves as patients, whereas those receiving private treatment could feel more like consumers.

#### Scope of Practice (SoP) guidance

• In the survey, more than two-thirds (70%) of dental professionals referred to the SoP guidance at least once a year. Some focus group participants noted that the SoP guidance was a useful document but may require some specificity in the future for different dental job roles.

#### **Continuing Professional Development**

- Survey respondents generally provided positive comments about the new CPD programme that had been introduced in 2018.
- Some of the focus group participants agreed that the introduction of the Personal Development Plan in 2018 encouraged improved self awareness and reflective thinking;



## Structure of this report

| TOPIC                                     | SLIDE     |
|---|-----------|
| Executive Summary                         | <u>3</u>  |
| Introduction                              | <u>8</u>  |
| Public Confidence                         | <u>13</u> |
| Local Resolution of Complaints & Advocacy | <u>20</u> |
| Regulation                                | <u>37</u> |
| Fitness to Practise                       | <u>49</u> |
| Consumer vs Patient                       | <u>63</u> |
| Scope of Practice                         | <u>65</u> |
| Continual Professional Development        | <u>71</u> |
| Future of the Profession                  | <u>76</u> |
| Final Conclusions                         | <u>81</u> |

#### About this report

The structure of the report is aligned to the topics covered in the quantitative survey and qualitative research. A summary of the findings from all research tools is provided at the start of each section. In the same section a slide on the key themes shows the analysis per topic from the depth interviews and focus group discussions.

The final chapter draws together the main themes into conclusions for the General Dental Council (GDC) to consider.

Topline findings from the survey and copies of the discussion guide used in the qualitative discussion groups can be found in the separate Technical Appendix. Additional description of the methodological approach is also included in the Technical Appendix along with further demographic detail.

#### Acknowledgements and publication of the data

We would like to thank Guy Rubin, Humaira Khanom, Kristen Bottrell and Jonathan Key at the General Dental Council for their support and advice throughout the project.

We would also like to thank all the dental professionals who took part in the quantitative survey, depth interviews and focus groups around the country. Full data tables will be published and made available on the GDC's website.



# 1. INTRODUCTION

## 1.1 Background and Objectives

#### **Background**

The GDC is a UK-wide statutory dental regulator of just under 110,000 members [registrants] split approximately 45,000 dentists and 65,000 dental care professionals (DCPs). The GDC is independent of the Government and has the purpose of protecting dental patients and maintaining public confidence in dental services. The GDC sets standards for the dental team, investigates complaints about dental professionals' fitness to practise and works to ensure the quality of dental education. In order to practise, dental professionals must be registered with the GDC.

The GDC appointed Pye Tait Consulting, an independent social and market research agency who work in accordance with the Market Research Society Code of Conduct, to carry out this research on their behalf.

This report summarises the findings from the research carried out by Pye Tait Consulting on behalf of the GDC, specifically;

- Quantitative survey completed by 7848 dental professionals
- 46 in-depth interviews
- Five focus groups across the UK (encompassing 30 participants in total)

Further detail is provided in sections 1.2 and 11, as well as in the Technical Appendix.

The Dental Professional Survey has been carried out since 2011 (2011, 2012, 2013, and 2017) thus enabling the tracking and monitoring of trends over time. Results will be compared to 2017 where appropriate.



## 1.1 Background and Objectives

#### **Objectives**

The key research has four key objectives;

- 1. To enable benchmarking and measuring of performance; registrant awareness and perceptions of GDC's performance and impact in fulfilling its regulatory roles and responsibilities;
- 2. To obtain registrants' insight into key policy initiatives, including Shifting the Balance being developed by the GDC;
- 3. To test registrants' views and understanding of topical or current issues in dentistry/dental regulation;
- 4. To 'horizon scan' and identify emerging policy issues that are relevant to the GDC.



## 1.2 Methodology & Respondent Summary Profile<sup>1</sup>



## Survey

- **Dental Professional Survey** (Quantitative)
- Fieldwork dates: 3rd June -31st July 2019
- Dental professionals included:
  - o Dentists, including specialists
  - Dental technicians
  - Clinical dental technicians
  - o Dental nurses
  - o Dental hygienists
  - o Dental therapists
  - o Orthodontic therapists
- Online survey
- 7848 responses achieved (7.1% response rate)



## Focus group

- 5 x Focus groups (Qualitative)
- Fieldwork dates: 30th September – 10<sup>th</sup> October 2019
- Dental professionals included:
  - o Dentists, including specialists
  - o Dental technicians
  - Clinical dental technicians
  - Dental nurses
  - o Dental hygienists
  - o Dental therapists
  - o Orthodontic therapists
- Edinburgh, London, Leeds, Cardiff, Birmingham
- 30 participants



## **Depth Interviews**

- Depth interviews (Qualitative)
- Fieldwork dates: 30th September – 25<sup>th</sup> October 2019
- Dental professionals included:
  - o Dentists, including specialists
  - Dental technicians
  - Clinical dental technicians
  - o Dental nurses
  - o Dental hygienists
  - o Dental therapists
  - o Orthodontic therapists
  - o Specialists
- Via telephone
- 46 participants



## 1.2 Methodology<sup>2</sup>

The research project utilised both quantitative and qualitative methods and was conducted in two phases.

#### Quantitative Research (phase 1)



The purpose of the quantitative survey was to gain a representative picture of the views of the dental professional population about a range of topics/issues. Pye Tait Consulting conducted the survey by emailing an online survey link to a representative<sup>2</sup> sample of dental professionals from across the United Kingdom. A further sample of dental professionals (the remainder of GDC registrants with email addresses) was also subsequently emailed to boost response numbers.

In total, 110,535 registrants were invited to participate, and 7848 completed surveys were received, which represents a response rate of 7.1 per cent. The fieldwork period was 3rd June – 31st July 2019.

Responses were cleaned and weighted to the GDC registrant profile to account for any non-response bias. Cross-tabulations were used for analysis specifically to identify the existence of any specific trends or relationships in the data. Sub-group analysis has been conducted and where there were differences with the overall findings these have been stated.

#### Qualitative Research (phase 2)

This explored the views and opinions of participants to get a greater understanding of main topics from the survey. The qualitative work was undertaken between the 30<sup>th</sup> September – 25<sup>th</sup> October 2019. There were two types of qualitative approaches used:



➤ Focus groups were conducted face-to-face in United Kingdom; London, Edinburgh, Birmingham, Leeds and Cardiff. In total, 30 participants attended. Participants were a mix of dentists and DCPs and there was variation by job role, region and gender. Each focus group lasted 2 hours and followed a structured topic guide which had been co-designed by Pye Tait and the GDC.



➤ Depth interviews were conducted over the telephone and typically lasted between 20 and 30 minutes. A total of 46 dental professionals took part in the depth interviews and there was variation by job role, region and gender. Thematic analysis was used to identify the key messages arising in the qualitative data. Where possible, a range of different dental professionals' comments were utilised (e.g. dental nurse, dentist, dental technician).



<sup>&</sup>lt;sup>2</sup> The sample was representative of the GDC's registrant profile across nation, gender, job role and years registered at the GDC.

# 2. PUBLIC CONFIDENCE

## 2.1 Public Confidence Summary

#### Public confidence was explored in the focus groups and interviews:





Dental professionals discussed the following points relating to public confidence

- Public confidence involves trust in individuals in a profession;
- Public confidence involves patients having trust that dental professionals will do what is best for patients;
- Respondents felt that there was an association between the availability of services and public trust dental professionals;
- A range of incidents within the public eye were discussed that had impacted public confidence.

#### Key themes:

- The public are unaffected unless the situation has a direct impact on them;
- Public confidence can be built through the individual relationships between dental professionals and their patients;
- Although dental professionals felt that the GDC have a role to play in promoting public confidence by highlighting the good
  work the dental practitioners are doing and promoting the positives of the profession, it should be recognised however, that
  this is not within the GDC's remit as a regulatory body.



#### 2.2 What is Public Confidence?

"Having faith in a body to deliver what it says it will, and to have a trust in the profession and the individuals."

Dental Nurse, Edinburgh Focus Group In the focus groups, dental professionals were asked to discuss what they thought the term Public Confidence meant. The main points from this discussion were:



- Having trust in the individuals that make up a profession;
- Trust that dental professionals will act in the best interests of their patients at all times;
- Public Confidence is won, promoted and maintained by individuals at a local level, rather than by the profession as a whole;
- Patients build up a relationship with their own dentist and therefore trust is built up over time. This is only damaged if something goes wrong;
- The better the access to services, the greater the level of trust the public have in dental professionals (e.g. the ability to obtain an appointment when required.

These findings echo the 2017 research where dental professionals mentioned that the public are primarily cared about:

- 1) Access to services
- 2) Dental professionals carry out their jobs properly



## 2.3 Events that affect Public Confidence



In the focus groups, dental professionals were asked if they could think of any events that had affected public confidence. These were the main stories, reported by the media, that were mentioned [unprompted in most cases] by dental professionals;

Cecil the lion - The case of the American dentist who shot and killed Cecil the Lion in Hwange National Park, Zimbabwe - Dental professionals felt that this attracted a lot of media attention due to the fact it had been a dentist. They mentioned the fact that they [the dental professionals] are professionals means they easily attract attention if something goes wrong;

Handwashing scandal – Dentist in 2016 accused of failing to wash hands after going to the toilet – this was mentioned in one focus group. Dental professionals stated that it attracted a lot of media attention and would undermine public confidence;

**Cross contamination issue -** this example from a few years ago was brought up by two of the focus groups in the context of bad news stories selling newspapers and particularly when it's turned into an emotional story. The dentist in question was responsible for using dirty, contaminated equipment on thousands of patients at his clinic;

Other medical professions - examples involving Doctors (Harold Shipman, Bawa Garba) were also mentioned.

While participants viewed these examples as potentially damaging to public confidence, they typically viewed them as 'one-off issues' relating to individuals and would not have a lasting impact on the public's confidence in dentistry.

When probed further, dental professionals explained that such cases would impact negatively on public confidence if the issue directly involved a member of the public. They also stated that if examples such as those above took place more frequently, then public confidence could be impacted.



## 2.4 Focus Group Scenarios - Scenario 1



In the focus groups a range of scenarios were presented by the moderators. Dental professionals were encouraged to discuss them to understand how they thought the public would feel. Their reactions are discussed on the next slide.

SCENARIO 1

You see a story on a news website about a local woman who has attacked an ex-boyfriend's new girlfriend on a night out. A video shows two-woman yelling at each other, one of whom is being physically restrained by some friends. She is then arrested for assault. When you go to a new dentist a week later, you recognise her as the dental nurse in the surgery. You mention having seen the story to one of the senior members of staff, who is clearly surprised, as they did not know about it.

#### Participant response:

**Local resolution:** Participants felt that local residents may be more understanding if they know the person involved. While it was agreed that this incident may damage public confidence, participants also believed that local resolution of such issues, rather than escalation, would be more effective. Local resolution is more conducive to building relationships between patients and dental professionals, which has a positive impact on public confidence.

The role of the regulator: Dental professionals believed that the GDC have a role in public confidence and felt that the GDC should do more to promote the positives of the profession and raise public confidence. Dental professionals felt that the GDC should respond carefully to incidents reported in the press and putting complaints in context is key.



## 2.4 Focus Group Scenarios – Scenario 2





SCENARIO 2

You see a news story about dental technicians in remote areas doing work they are not qualified to do. This includes a mention of a recent case where a dental technician was reported for making dentures without a Dentist referral.

#### Participant response:

**Lack of public awareness:** Dental professionals raised the point that the public are not fully aware of how dentistry works and see things as very 'black and white'. They felt the public believe they should have the ideal treatment from start to finish with no issues/problems occurring and have very high expectations.



## 2.4 Focus Group Scenarios - Scenario 3



SCENARIO 3

You see a news programme discussing how people use social media. As an example, one of the guests mentions a dentist at their local surgery who had posted pictures of themselves on Facebook with small bags of white powder and the heading "Ket Sundays".

## Participant response:

**Incidents are isolated:** Participants recognised that scenario 3 may damage public confidence, however there was also agreement that the public will see a distinction between social and professional life and that such incidents will only cause concern if these activities impacted on the dentist's professional judgement.



# 3. LOCAL RESOLUTION OF COMPLAINTS AND ADVOCACY

## 3.1 Local Resolution of Complaints and Advocacy Summary

#### Findings from the Dental Professional Survey:



- 93% of dental professionals agree that their place of work encourages patients to provide feedback;
- Most dental professionals believed that complaints should be resolved locally by the practice, except in incidents involving drink or drugs or cases of discrimination;
- 70% of respondents were aware of the principles for complaint handling;
- 50% of the respondents stated that the complaints procedures in their practices were based on the profession-wide complaints handling leaflet;
- Only 43% of dental professionals signposted patients to advocacy resources.

#### Findings from the Focus Groups and Interviews:



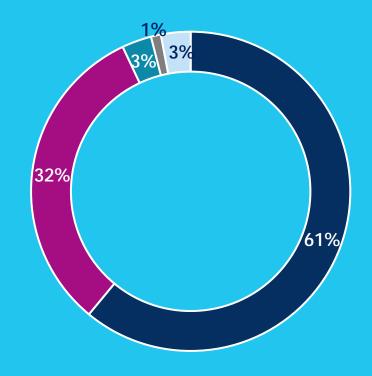


- Participants in focus groups and interviews expressed that complaints should go to the GDC when: they can't be resolved locally; when harm has come to the patient; or, if misconduct was intentional;
- Communication, prevention and quick resolution are key to preventing and resolving complaints;
- Interviews reported relatively low levels of awareness of the profession-wide complaints handling leaflet, although many participants stated that their practices use other leaflets and have complaints procedures in place;
- Most of the participants in focus groups and interviews did not know what the advocacy services were;
- Participants suggested that possible reasons for dental professionals not referring patients to advocacy are: low levels of awareness of the services; the problems had been resolved locally, or fear of the GDC.



93% of Dental Professionals either agreed or strongly agreed that their place of work encouraged patients to provide feedback (compared to 87% in 2017)

# Dental Practice encourages patients to provide feedback

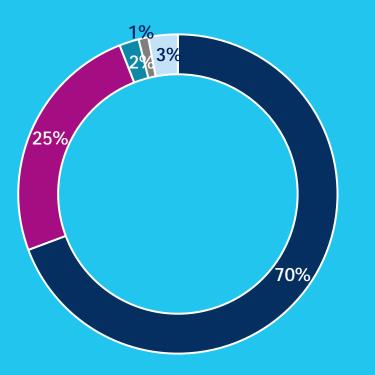


- Strongly agree
- Disagree

- Agree
- Strongly disagree
- Don't know/prefer not to say



# Dental Practice has written procedure for handling complaints





95% of Dental
Professionals either
agreed or strongly
agreed that their
place of work had a
written procedure for
handling complaints

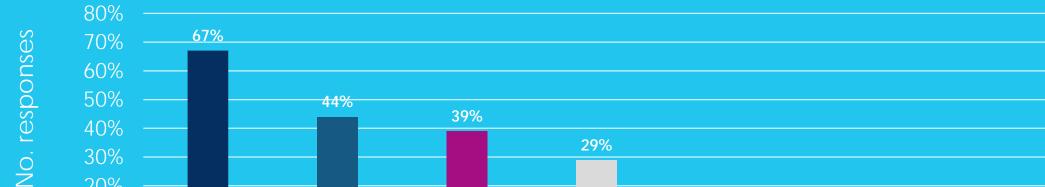
- Strongly agree
- Disagree

- Agree
- Strongly disagree
- Don't know/prefer not to say

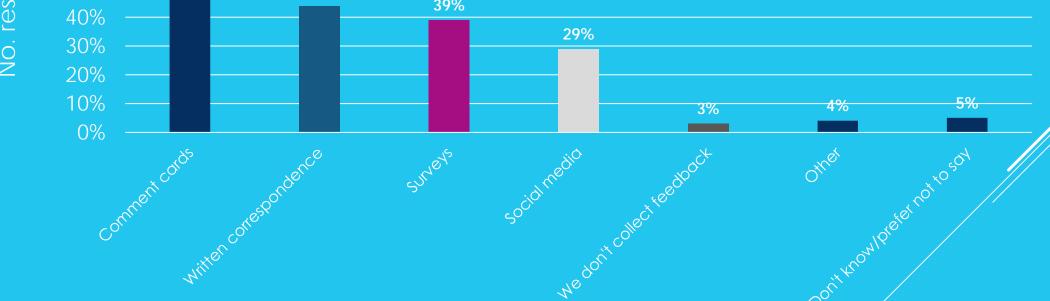


Comment cards were the most frequently mentioned way of collecting positive feedback (67%); similar findings were reported in the 2017 Dental Professional Survey





How positive feedback is collected



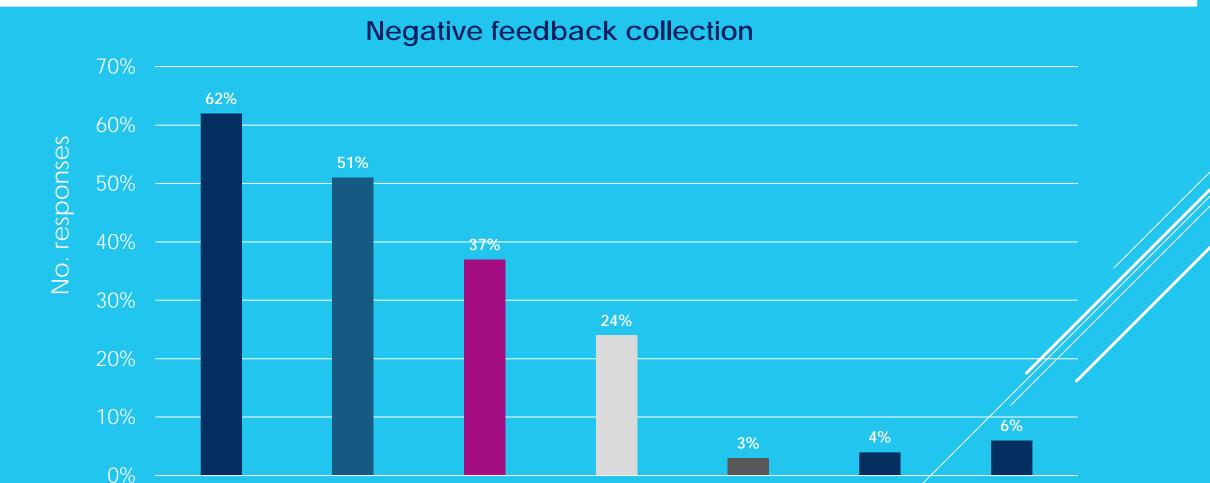
Base: Respondents were asked How is feedback (positive and negative) at your practice/place of work typically collected? (please select all that apply) (multi response)n=14821 responses



Comment cards

Comment cards were also the most frequently mentioned way of collecting negative feedback; similar findings were reported in the 2017 Dental Professional Survey





Other

We don't collect feedback

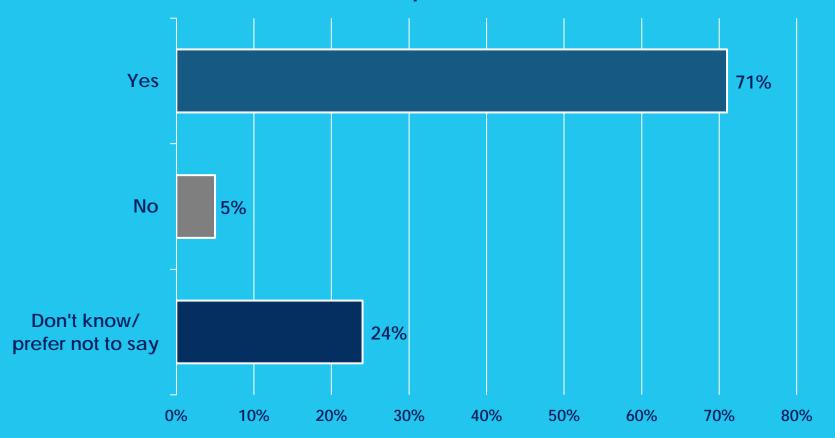
Don't know/prefer

not to say

ase: Respondents were asked How is feedback (positive and negative) at your practice/place of work typically collected? (please select all that pply) (multi response)n=13801 responses

Surveys

## Are patients asked about action preference in response to complaints?



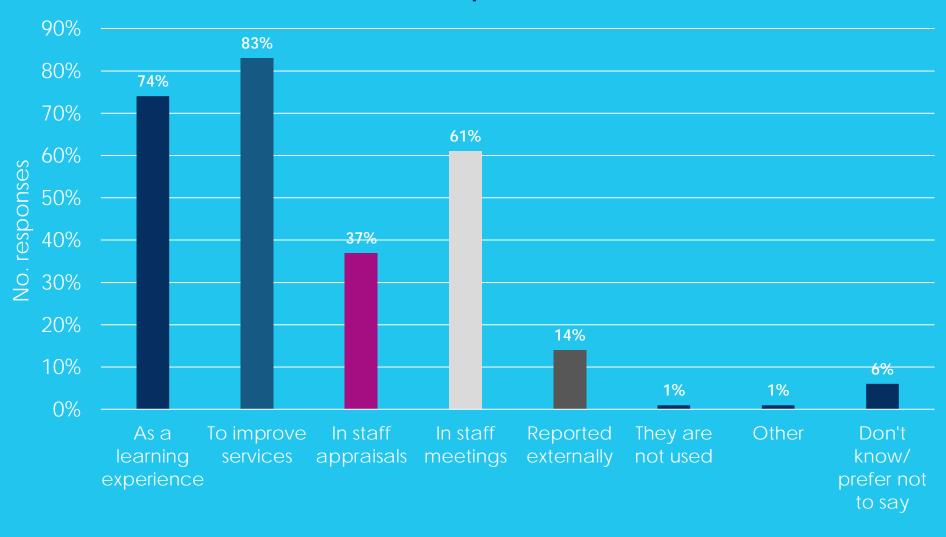
71%

of respondents said that patients were asked about action they would like to see in response to complaint



### 3.3 Complaint/Feedback Usage

## How complaints are used

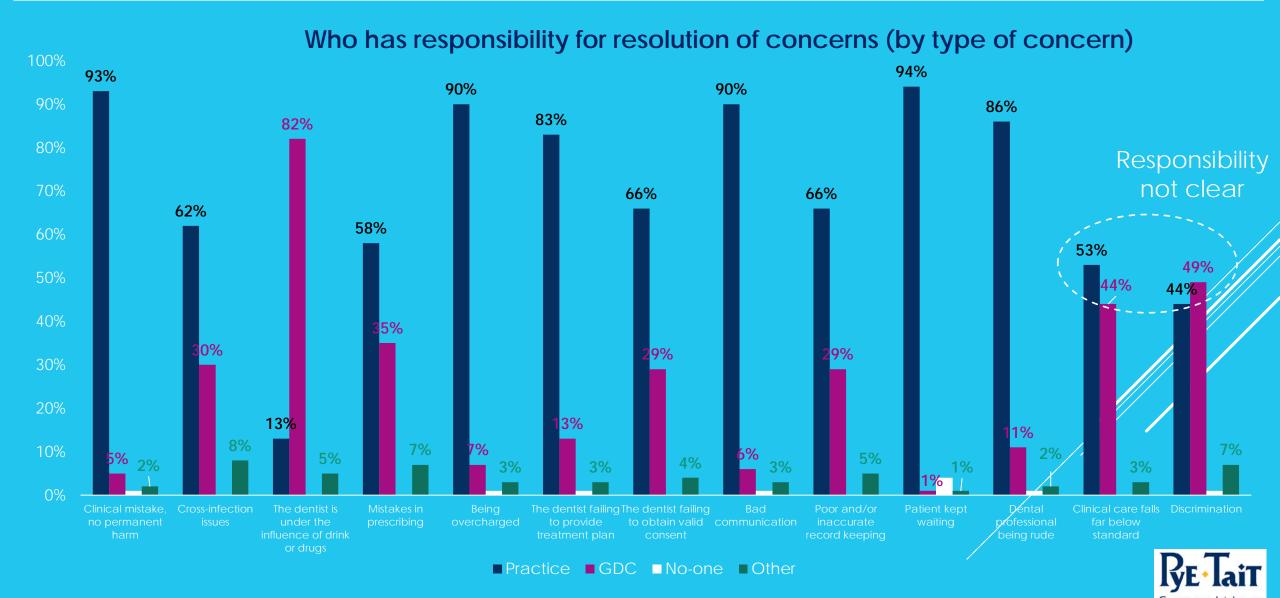


Complaints
were used by
dental
professionals to
provide feedback
and improvements
for staff and
processes. This is
similar to the 2017
Dental Professional
Survey



Most dental professionals who responded to the survey felt that concerns should be addressed by the practice except if the dentist is under the influence of drink or drugs (82%)or if it involves discrimination (49%).





## 3.4 Complaint Handling and Resolution

Dental professionals were typically in favour of local resolution.

However, participants in the focus groups did highlight situations where local resolution would not be possible and the complaint should be passed to the GDC:

- When an attempt to resolve locally has been unsuccessful;
- When harm has come to a patient;
- If misconduct by a dental professional is perceived as intentional;
- If a patient has chosen to go directly to the GDC rather than try to resolve it locally (Patient choice);
- If there is a repeated issue.

These findings echo those of the 2017 Dental Professional Survey which revealed that dental professionals agreed that complaints should be dealt with locally except:



- 1) When they are of a significant level of severity;
- 2) If patient safety was at risk;
- 3) If local resolution had failed.

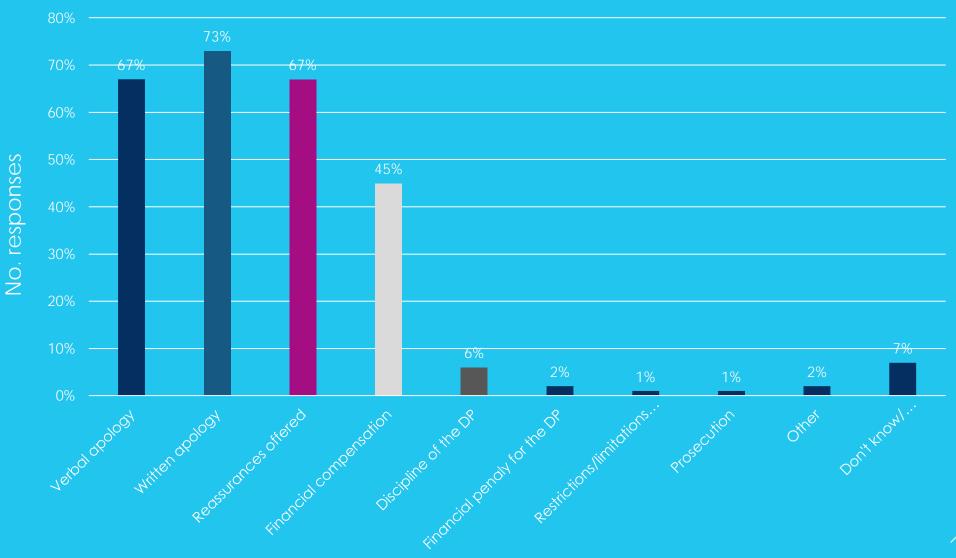
"If it is a recurrent behavior then that's the tipping point."

Dentist, Edinburgh Focus Group



## 3.4 Complaint Handling and Resolution

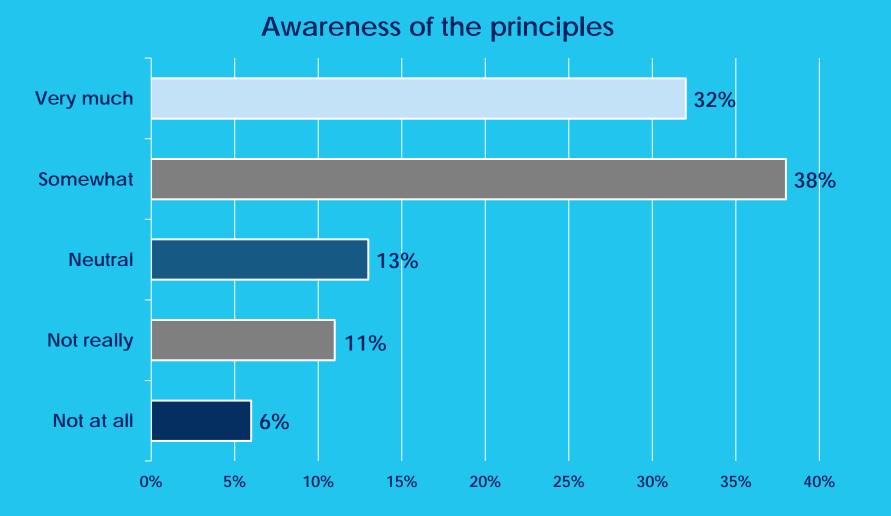
## Top 3 ways complaints are being addressed



The most frequently mentioned ways complaints were addressed by respondents were through apologies (written and verbal) and future assurances.



## 3.4 Complaint Handling & Resolution



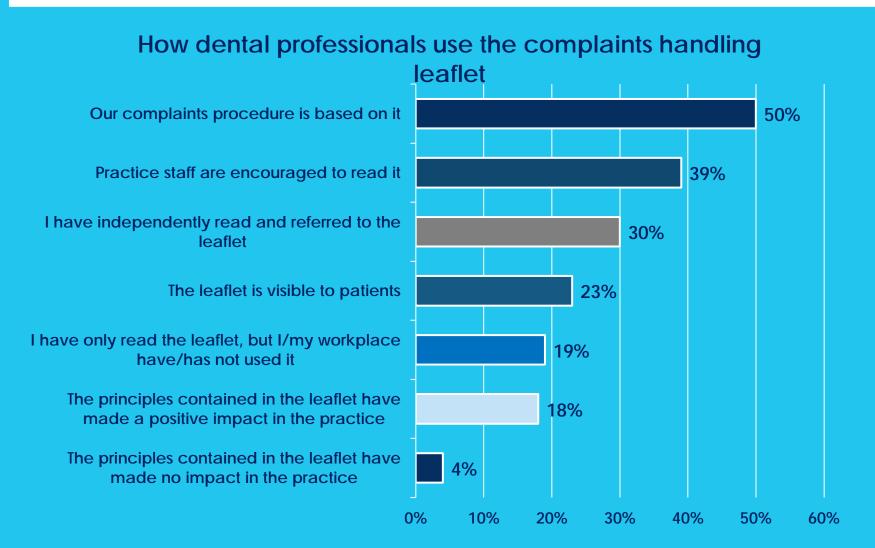
of dental professionals are aware of the principles for complaint handling & resolution

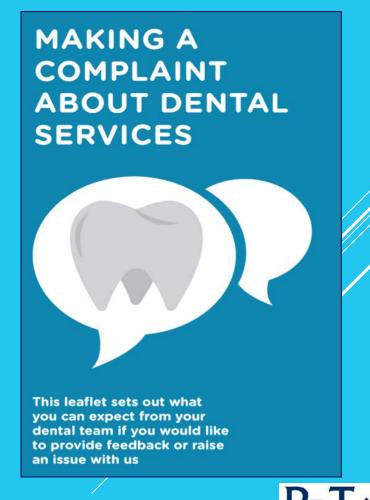


## 3.5 Complaints Leaflet

Half of respondents said that complaints procedures in their practices were based on the profession-wide complaints handling leaflet







## 3.5 Complaints Leaflet

"All the practices I have ever worked in have complaints procedures in place and everyone tries to keep complaints in house."

Dental Nurse, Edinburgh Focus Group During the depth interviews dental professionals were asked if they had come across the profession-wide complaints handling leaflet (displayed on the previous page).



#### Lack of awareness/usage

- Most of the dental professionals who took part in depth interviews stated that they
  had not come across the leaflet and did not use it in their practice;
- Those who had seen the leaflet reported seeing it online, in the newsletter, or through email;
- Some participants did mention using their own complaints leaflets and procedures within their practice (similar to the 2017 survey);
- Several participants also mentioned that practices were often unwilling to display the leaflet, primarily because practices felt they already had a lot of literature to display;
- Dental professionals emphasised that every effort should be made to resolve complaints locally;
- Some mentioned that more could be done by the GDC to promote the leaflet which may help increase awareness and usage.

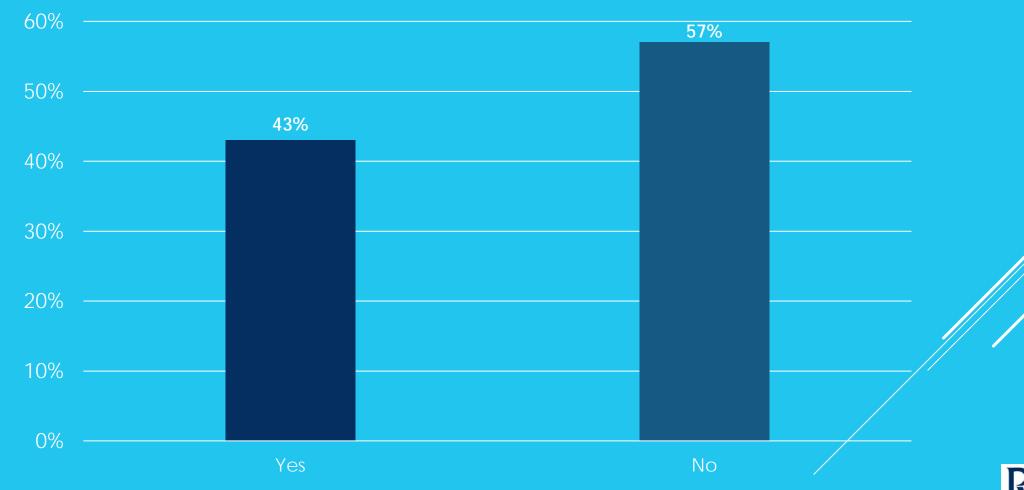


## 3.6 Advocacy services

57% of Dental Professionals had not signposted patients to advocacy in the past 12 months





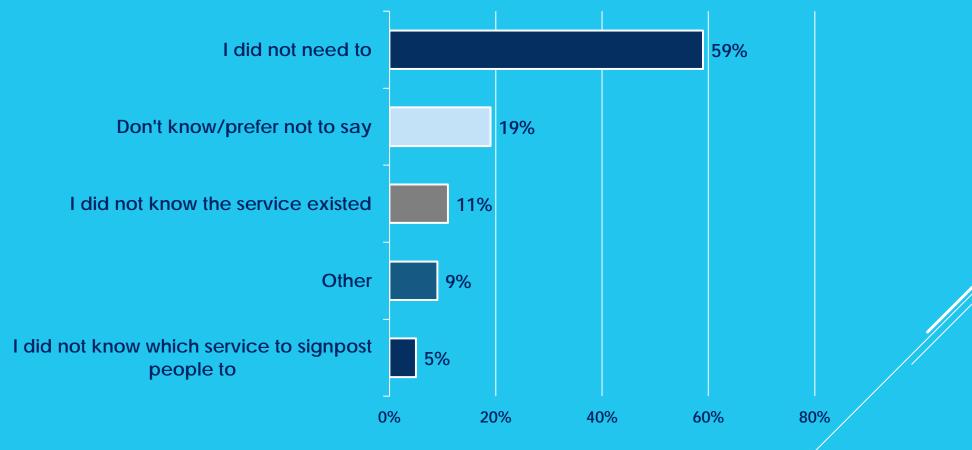


#### 3.6 Advocacy services

The most frequently mentioned reason for dental professionals not signposting patients to advocacy services was 'did not need to' (59%)







It is recognised that signposting to advocacy is part of NHS regulations for the four nations. Signposting to advocacy is a requirement.



Base: Respondents were asked: Do you signpost to advocacy? n=7605, Please explain why you have not signposted patients to advocacy services in the last 12 months (single response) n=4449

## 3.7 Key themes – Focus group

Complaints handling were discussed by the dental professional focus groups who provided the following:



#### Complaint prevention/Communication is key

- The key to resolving complaints or preventing them is communication, especially at a local level;
- Simply engaging with someone and offering empathy and understanding was said to often diffuse or resolve the situation amicably.

#### Local level resolution is preferable

• If an issue raised by a patient did reach complaint level, dental professionals felt strongly that most complaints should be resolved at a local level.

#### Quick resolution is necessary

- Most participants agreed that complaints should be dealt with quickly before they turn into fitness to practise concerns;
- Participants felt that FtP cases involving the GDC are usually long, drawn-out processes. They expressed concern over this as it has a negative impact on dental professionals' lives.

#### Individual treatment of complaints

- The general feeling was that each complaint should be dealt with individually and how it is resolved would depend on e.g. type of complaint, who is involved, what happened. In other words, the response should be proportional to the complaint;
- It was also felt that the clinical lead or practice manager should deal with complaints.

#### Advocacy

- 57% of dental professionals had not signposted patients to advocacy services in past 12 months;
- Main reason to not signpost patient was 'I did not need to'.

"Resolution times need to be shorter, the GDC should understand the impact this delay has on real people's lives, sometimes the delay is disproportionate to the complaint."

Dentist, Cardiff Focus
Group



# 4. REGULATION

# 4.1 Regulation Summary

#### Findings from the Dental Professional Survey revealed that:



- 61% dental professionals felt that equal focus should be placed on 'preventing bad practice' and 'taking action against dental professionals that have serious complaints made against them';
- 75% of dental professionals agreed that the GDC protects, promotes and maintains the health, safety and well-being of the public;
- 64% of dental professionals agreed that the GDC promotes and maintains public confidence in the profession;
- 73% of dental professionals agreed that the GDC promotes and maintains proper professional standards and conduct for members of those professions.

#### Findings from the interviews and focus groups revealed:





- More could be done by the GDC in terms of prevention. There was limited awareness amongst participants around GDC focusing more on prevention work;
- Dental professionals felt mental health in dentistry is incredibly important and that the GDC could potentially do more to help support it;
- A recurring theme was that dental professionals felt it would be good to have more dental professionals working within the GDC to provide context from the coalface of dentistry;
- The key to effective whistleblowing procedures is to ensure anonymity;
- Dental professionals would like the GDC to support them more, for instance, during the FtP process.



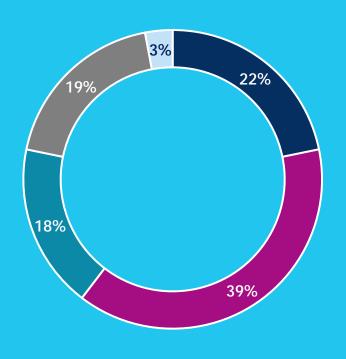
#### 4.1 Regulation

61%

of dental professionals were confident in the way they are regulated as a professional by the

GDC

# Confidence in regulation of professionals



- Very confident
- Not very confident
- Don't know/prefer not to say

Fairly confident

■ Not at all confident



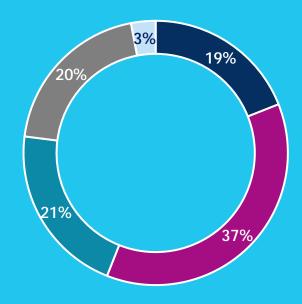
#### 4.1 Regulation

56%

N

of dental professionals were confident in the way the dental profession is regulated by the GDC

# Confidence in dental regulation by the GDC



- Very confident
- Not very confident
- Don't know/prefer not to say
- Fairly confident
- Not at all confident

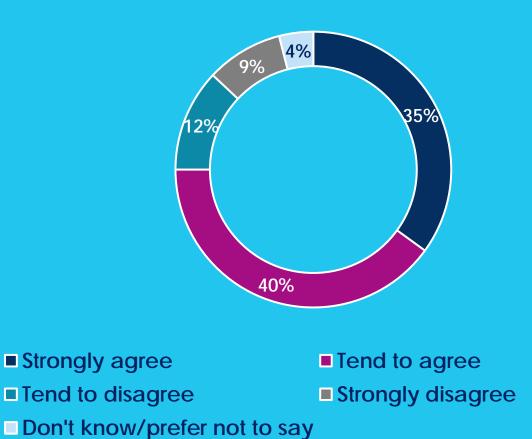


# 4.2 GDC's Three Key Purposes as a Regulator

75%

N

of dental professionals agreed that the GDC protects, promotes and maintains the health, safety and well-being of the public. 1. To protect, promote and maintain the health, safety and well-being of the public





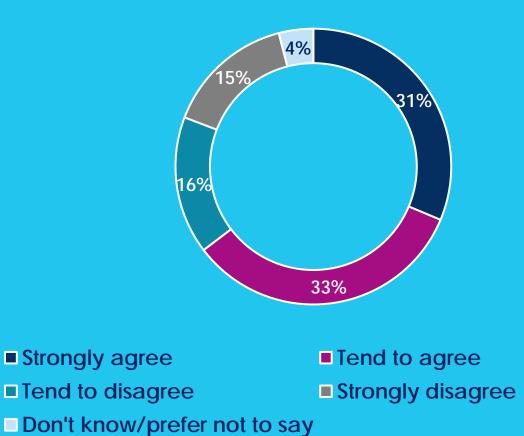
# 4.2 GDC's Three Key Purposes as a Regulator

N

64%

of dental professionals agreed that the GDC - promotes and maintains public confidence in the profession.

# 2. To promote and maintain public confidence in the profession





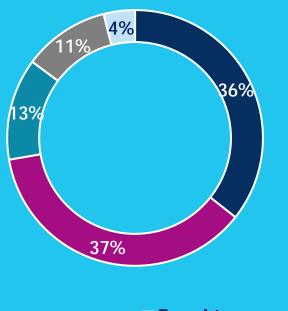
# 4.2 GDC's Three Key Purposes as a Regulator

N

73%

of dental professionals agreed that the GDC - promotes and maintains proper professional standards and conduct for members of those professions.

3. To promote and maintain proper professional standards and conduct for members of those professions



- Strongly agree
- Tend to disagree
- Don't know/prefer not to say
- Tend to agree
- Strongly disagree



### 4.2 GDC's Three Key Purposes as a Regulator – Sub-Group Analysis

The Dental Professional Survey revealed the following differences between groups when analysing the GDC's three key purposes:



#### The GDC protects, promotes and maintains the health, safety and well-being of the public

- Stronger agreement was found from hygienists and nurses (89% and 92%);
- In contrast there was stronger disagreement from dentists (33%);
- Stronger disagreement was found from UK qualified dentists (35%) compared to stronger agreement from UK dental care practitioners (91%).

#### The GDC promotes and maintains public confidence in the profession

- Stronger disagreement was revealed amongst dentists (49%) compared to higher agreement in other dental practitioner roles;
- Stronger disagreement was found among UK qualified dentists(53%) compared to higher agreement in other types of UK registered dental professionals (for instance, 86% of dental care practitioners in the UK agreed);
- In terms of gender, males show higher level of disagreement (50%) while females display higher level of agreement (75%). Higher agreement was found from dental care practitioners (87%) compared to dentists (47%).

#### The GDC promotes and maintains proper professional standards and conduct for members of those professions

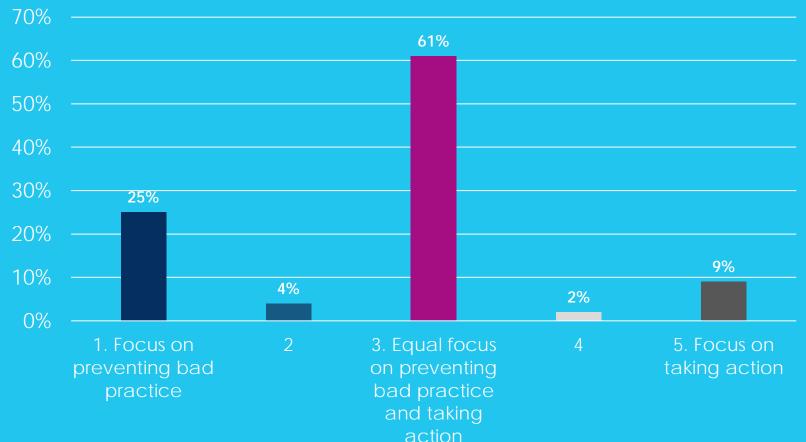
- Higher agreement was found among hygienists and nurses (87% and 91%) when compared with dentists (60%);
- More disagreement was displayed among UK dentists (37%) and EEA qualified (29%) entry routes. Dental care practitioners UK entry route showed 90% agreement;

Overall there were no differences found by practice size, or by disability status of dental professional.



# 4.3 Regulatory Focus





More than three-fifths (61%) of respondents thought the GDC should focus equally on preventing bad practice and taking action.



#### 4.3 Regulatory Focus

The quantitative Dental Professional Survey revealed the following in connection to regulatory focus:

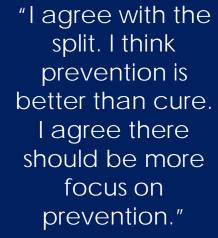
# N

#### **Equal focus**

- More than three fifths (61%) of respondents stated that the GDC should focus equally on preventing bad practice and, taking action against dentists that have serious complaints raised against them;
- A quarter of respondents said that the GDC should focus more on preventing bad practice.

#### Subgroup analysis

- Clinical dental technicians appear to have different views compared to respondents overall. 30% wanted more focus on preventing bad practice, and 22% wanted an increase focus on taking action;
- European Economic Area qualified dental professionals wanted greater focus on preventing bad practice (36%), while dental care practitioners UK qualified were more in favour of an equal balance (70%). Larger practices favoured an equal balance (70%);
- Compared to the all-study figure (61%) there was a slightly higher proportion of females that felt there should be equal focus on preventing bad practice and taking action (65%). Just over half of male respondents (53%) said there should be an equal focus (although it was still the most frequently mentioned answer);
- Depth interview findings supported the quantitative result of equal focus being placed on preventing bad practice and on taking action against dentists that have serious complaints raised against them.

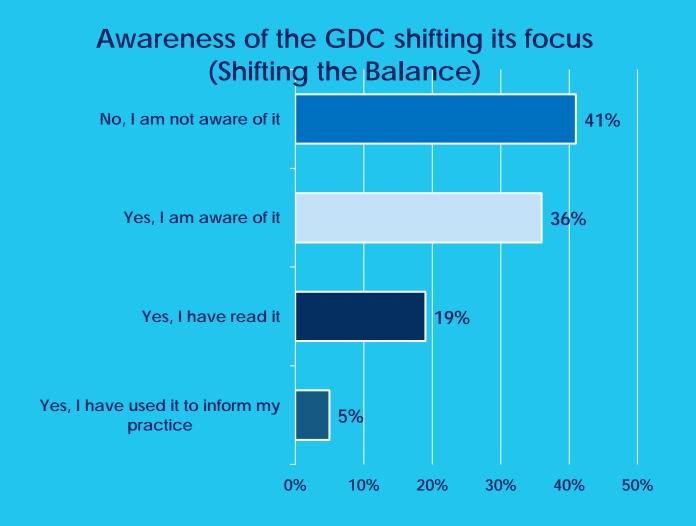


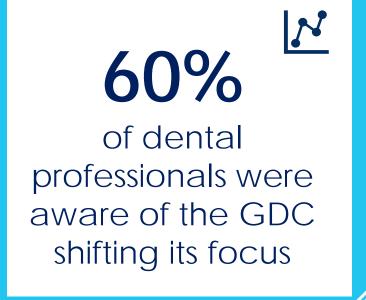
Dentist, Birmingham Focus Group





# 4.4 Shifting the Focus







#### 4.4 Shifting the focus





In the depth interviews dental professionals were asked what they thought about the GDC shifting its focus.

- Overall, there was not a consensus about whether the GDC's efforts to shift its focus have been successful or not:
- Some dental professionals that the GDC were making progress / were starting to make progress;
- Some dental professionals did however highlight that there is still a lot of work to be done and that it may be too early to say whether focus has shifted enough;
- A few respondents felt quite strongly that there has been no shift and felt that the GDC was more focussed on capturing patient complaints and punishing dentists than on preventing bad practice and supporting the profession.



# 5. FITNESS TO PRACTISE (FTP)

### 5.1 Fitness to Practise (FtP) Summary

The Dental Professional Survey asked respondents a number of questions including about FtP confidence in their understanding of Fitness to Practise (FtP), their involvement in FtP for themselves or of others.



Of those responding to the multi-response question on involvement in FtP;

- 58% have never been involved with 48% saying they don't know of anyone involved;
- 20% respectively know of someone who has been involved or heard about someone who has;
- 6% selected the option 'I have been involved'.

With regard to the process, the overall responses were:

- 89% of dental professionals are very or fairly confident in their understanding of FtP;
- 74% are very or fairly confident in their understanding of the process;
- 73% are very or fairly confident in their understanding of impairment;
- Scores range from 43% 40% in relation to respondents' confidence in case examination (43%); case investigation (41%); in hearing conduction (40%).

Whilst there was not a direct question about fitness to practise in the focus groups and depth interviews, as a result of discussions on the preceding subject regarding complaints resolution, the following subjects arose:



- Prevention: dental professionals see this as a key area that they would like to see the GDC focus on;
- Whistle-blowing: there are a number of challenges when it comes to this and examples included ensuring anonymity and
  preventing loss of job following reporting a Dental Professional within a practice setting;
- More mental health support for practitioners going through FtP was highlighted;
- Concerns were expressed around the quality of training in the wider landscape, whilst acknowledging this is outside the GDC's remit;
- And, active engagement with students/trainees was commented upon and welcomed.



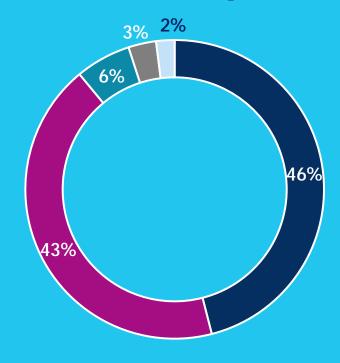
# 5.1 Understanding of FtP

89%

N

of dental professionals were confident in their understanding of the meaning of the term 'Fitness to Practice'

### **Understanding of FtP**



- Very confident
- Not very confident
- Don't know/prefer not to say
- Fairly confident
- Not at all confident



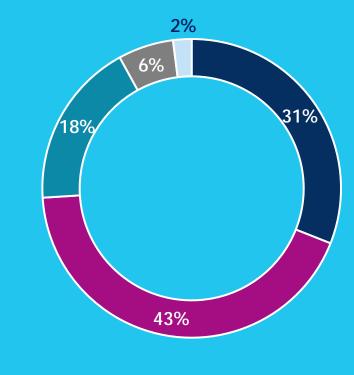
# 5.1 Understanding of FtP

74%

N

of dental professionals were confident in their understanding of the Fitness to Practice process

# **Understanding of FtP process**



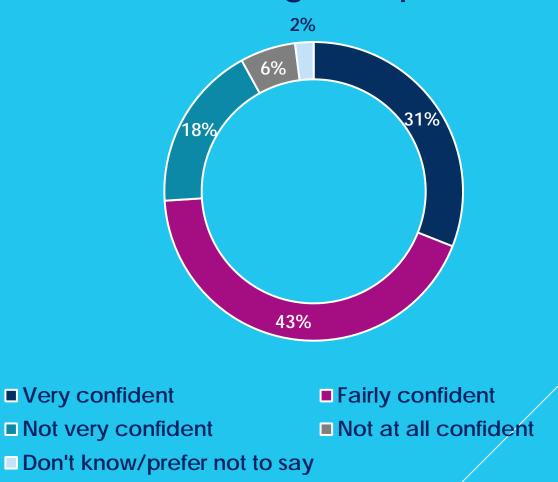
- Very confident
- Not very confident
- Don't know/prefer not to say
- Fairly confident
- Not at all confident



# 5.1 Understanding of FtP

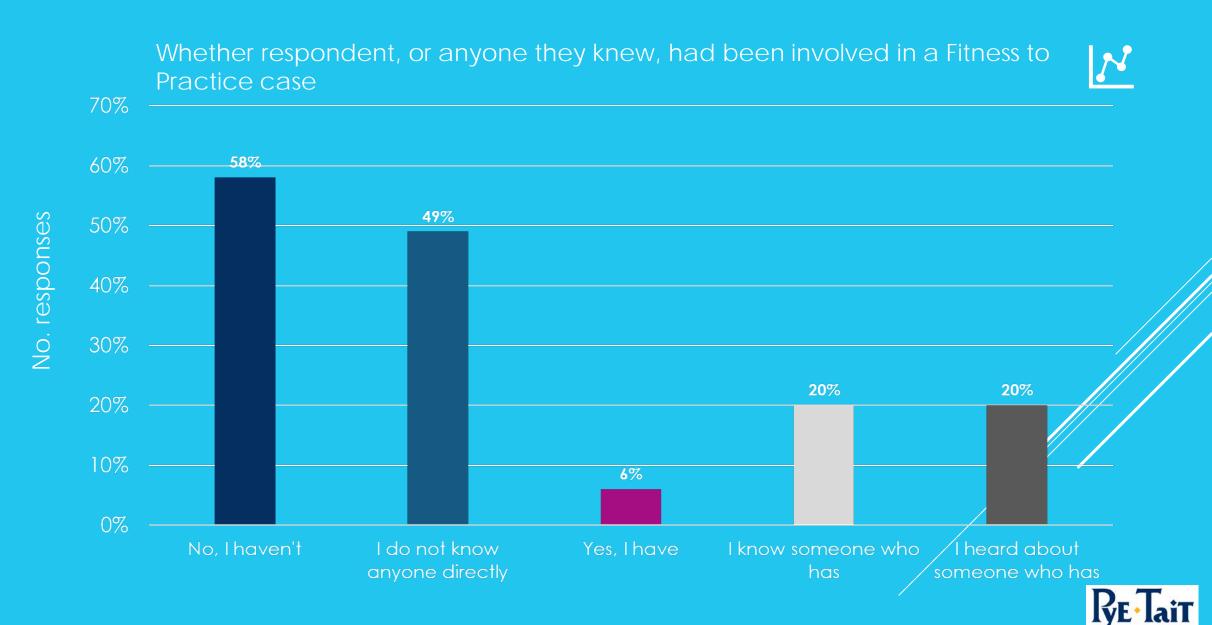
73% of dental professionals were confident in their understanding of the term impairment

### **Understanding of 'impairment'**





#### 5.2 Involvement in FtP



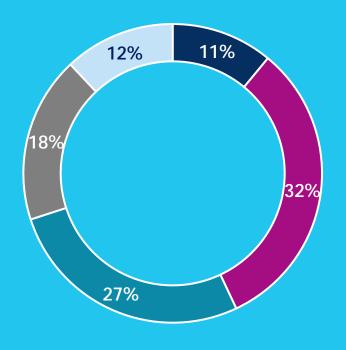
#### 5.3 Confidence in FtP process

43%



of dental professionals were confident in how FtP cases are examined by the GDC's Case Examiner teams

#### Confidence in case examination



- Very confident
- Not very confident
- Don't know/prefer not to say
- Fairly confident
- Not at all confident



#### 5.3 Confidence in FtP process

41%

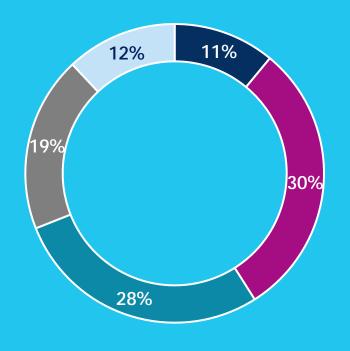
of dental

professionals were confident in the way

FtP cases are

investigated

# Confidence in case investigation



- Very confident
- Not very confident
- Don't know/prefer not to say
- Fairly confident
- Not at all confident



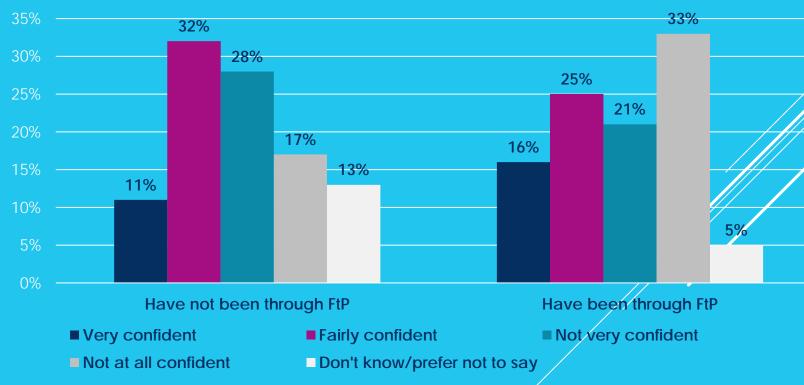
Base: Respondents were asked: How confident do you feel about the following aspects of the fitness to practise process? (single response). How cases are investigated n=7717

#### 5.3 Confidence in FtP process - Case Examiner

# 42%

of dental professionals
were confident in the
way case examiners
examiner FtP cases,
but this varied
depending on
whether the dental
professional had been
through the process

# Confidence in how cases are examined by the GDC's Case Examiner teams (Those who have not faced proceedings v those who have)



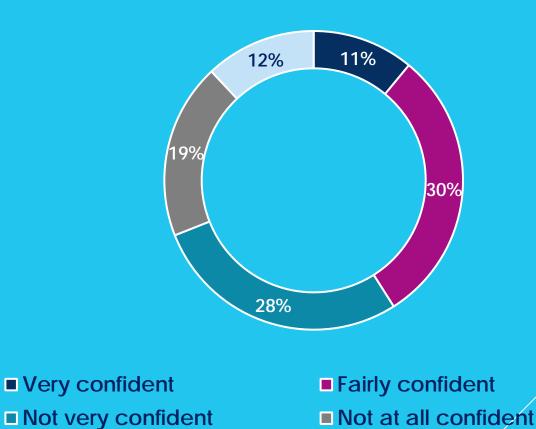


#### 5.3 Confidence in FtP process

40%

of dental professionals were confident in the way FtP hearings are conducted

### Confidence in hearing conduction

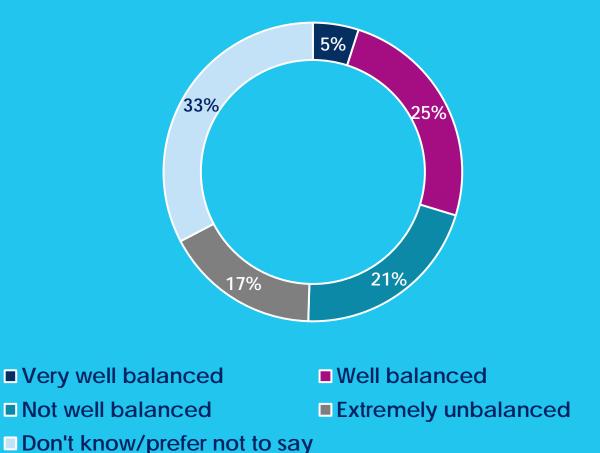




Don't know/prefer not to say

#### 5.3 Confidence in FtP process

#### How balanced is the FtP process?



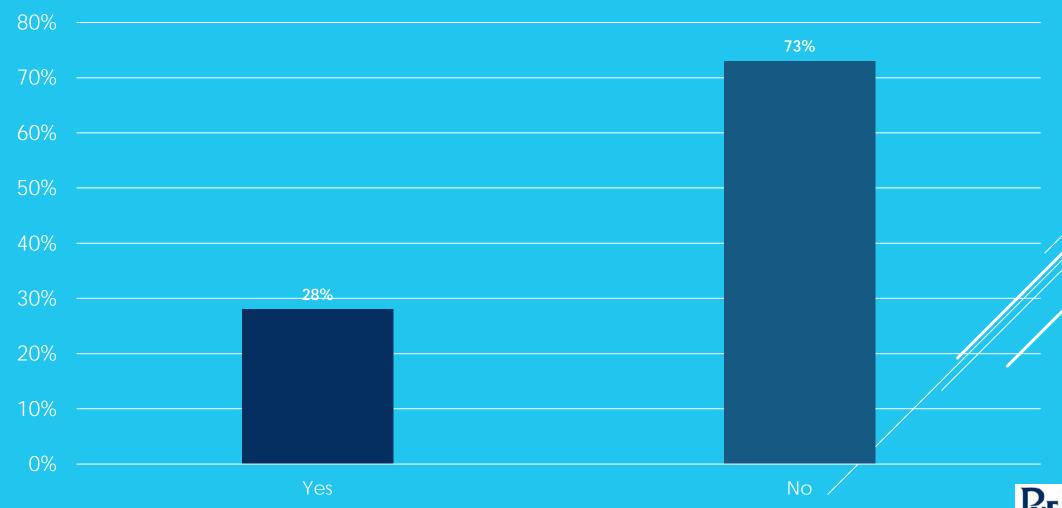
A third of dental professionals (33%) were not sure whether the FtP process balances thoroughness, time and cost involved to the professional and the regulator



73% of Dental professionals were not aware that there is support available from the GDC to those facing proceedings

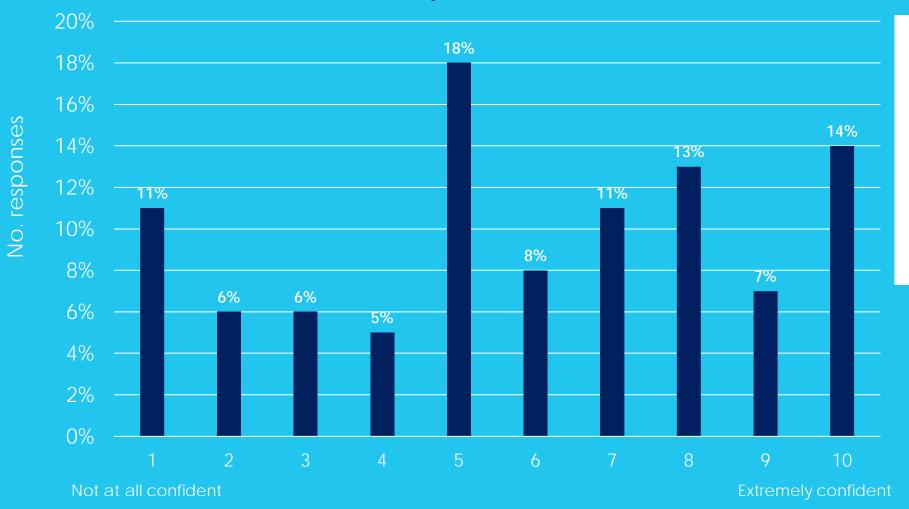


#### Awareness of GDC fitness to practise proceedings support



# 5.4 Raising complaints

# Confidence in raising a complaint about another dental professional



The majority
of respondents
did not feel
that confident about
being able to raise a
complaint about
another dental
professional. The mean
score was 5.9 out of 10



# 5.5 FtP Key themes- Focus groups and Interviews

The key themes that emerged from the qualitative research (depth interviews and focus groups) in the context of discussing raising complaints and fitness to practise are explored in the following slides:





#### Prevention should be a key focus

• Prevention came out as being a key area that dental professionals felt the GDC should focus on, with the majority of depth interviewees stating that they felt strongly that more should be done on the preventative side. The general feeling was the best outcome for the profession would be for issues to be resolved earlier or prevented from happening in the first place.

#### Whistleblowing<sup>3</sup> policies should ensure anonymity

- Whistleblowing procedures are welcomed by dental professionals with regards to preventing bad practice. Challenges were discussed around ensuring anonymity and preventing loss of job following reporting a Dental Professional within a practice setting these repercussions appear to put dental professionals off reporting people/incidents;
- There are also issues around the employment hierarchy and it was discussed that it can be difficult to report their boss, especially if directly employed by them;
- Dental professionals mentioned that dental nurses probably have the best insight into practice if it was required to be investigated;
- Dental professionals seemed to want the GDC to deal with whistleblowing issues rather than this being dealt with at practice level. This appears to be in contrast to earlier findings about patient related complaints being resolved at the local level.

#### Mental health support required

- Dental professionals were concerned over the mental health of dental professionals within the FtP process as it is a high-pressured environment. They elaborated that investigations must not be treated purely as an administrative process;
- They felt that the GDC should acknowledge that FtP cases can have an adverse effect on the dental professionals involved and that more should be done in respect of the mental health of dental professionals in general.

<sup>3</sup> It is recognised that GDC has the highest number of whistleblowing cases compared to other professions. A report by the healthcare regulators on Whistleblowing Disclosures report 2019 can be read <u>here</u>.



#### 5.5 Key themes/continued

#### More support for dental professionals in FtP

• In the survey, the majority of dental professionals were confident in their understanding of fitness to practise (FtP) (89%), and of the FtP process (74%). However, only 6% of respondents in this survey had been involved the FtP process;



- The majority (73%) of Dental professionals were unaware of the support that would be made available by the GDC if they were involved in an FtP case;
- Dental professionals felt that more communication during the complaints process would be helpful.

#### More dental professionals should be employed by the GDC

- Dental professionals in the focus groups suggested that the GDC and its FtP Panel should include a greater proportion of active dental professionals. As the GDC does have dental representation on the FtP Panel with a mixture of lay and dental professional membership this indicates some further clarity around the constituency of the Panel may well be necessary;

• The GDC having a lack of understanding of dental professionals and their role was raised as a related theme. Further engagement of the GDC with dental professionals may help to rectify this.

#### Quality of training and teaching

- Participants expressed the view that the GDC should do more to work with dental schools to ensure the quality of teaching and training is up to standard and that future dentists are obtaining the necessary knowledge;
- They felt that engaging at this level would help prevent future bad practice and felt that more collaboration with students would be very useful.

#### Active engagement welcomed

• The GDC's engagement with students was positively received. GDC visits to see students at colleges were positively received by dental professionals.



# 6. CONSUMER VS PATIENT

#### 6.1 Consumer vs Patient Summary

# From the focus groups the following key findings emerged on the discussion about whether patients saw themselves as consumers or patients:



- Dental professionals typically viewed the members of the public they treat as patients rather than consumers. They stated this is how they had been trained;
- Dental professionals recognised the potential for the public to see themselves as patients when receiving healthcare treatment but this may be along a scale / continuum (rather than a binary choice);
- Cost of treatment may also facilitate this shift in mindset, as may whether patient is receiving this treatment via the NHS or privately.

#### **Elective procedures**

- Nearly all dental professionals agreed that elective cosmetic procedures are consumer focused and that being a consumer is when it's their choice to have treatment:
- There was a lot of negativity towards cosmetic dentistry, specifically around fillers, botox and tooth whitening. It was stated that these treatments were commercialising a predominantly healthcare-focused profession;
- Dental professionals disapproved of fillers/botox being undertaken at beauticians etc. as they are unregulated.

#### **High expectations**

- Dental professionals highlighted the challenge of making decisions about treatment that are in the patients best interest, whilst also meeting patient expectations around choice and type of treatment;
- Dental professionals would typically rather focus necessary treatments over cosmetic procedure (e.g fillers, botox, tooth whitening).



# 7. SCOPE OF PRACTICE (SOP)

### 7.1 Scope of Practice Summary

#### Findings from the Dental Professional Survey:



- More than three-fifths (62%) of dental professionals know a 'fair amount' or a 'great deal' about the Scope of Practice guidance;
- More than two-thirds (70%) of dental professionals refer to Scope of Practice guidance at least once a year.

#### Findings from the Focus Groups and Interviews:

Potential problems of Scope of Practice guidance - ambiguity; lack of specificity; and restrictive:



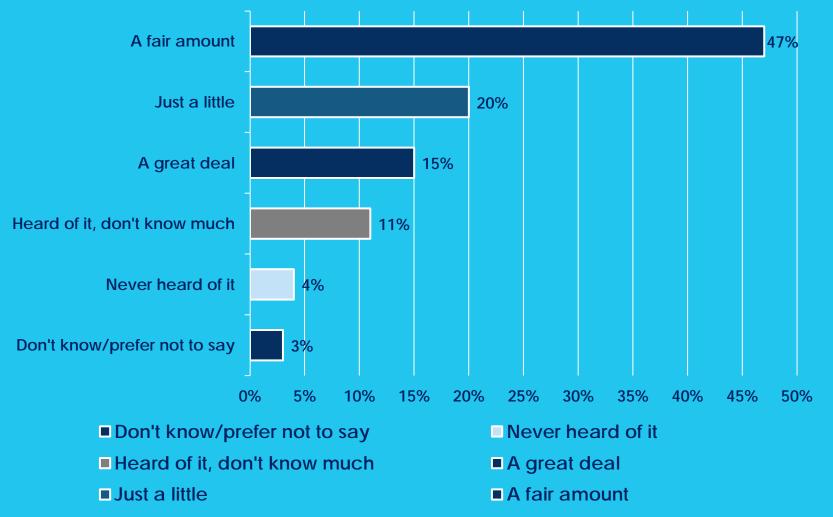


- Dental nurses reported their ability to work within their Scope of Practice is sometimes influenced by the dental practice they worked in;
- Dental professionals felt that the SoP guidance is helpful for the education and development of practitioners;
- Dental professionals thought SoP guidance were necessary and should be regulated, otherwise there was a risk of litigation.



#### 7.2 SoP guidance awareness

#### **Scope of Practice Guidance Awareness**



N

62%

of dental professionals were aware of the Scope of Practice guidance.



Base: Respondents were asked: How much, if anything, would you say you know about the Scope of Practice guidance published by the General Dental Council? (single response) n=7822

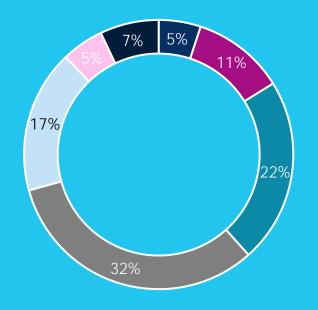
# 7.3 Scope of Practice Guidance usage



70%

of dental professionals refer to the Scope of Practice guidance at least once a year.

# How often scope of practice is referred to



Weekly or more

- Monthly
- Every 2 or 3 months

- Once or twice a year
- Less than once a year
- Never
- Don't know/prefer not to say



#### 7.4 Key themes

Dental professionals were asked in the focus groups and depth interviews about their awareness of Scope of Practice. The following are the main findings:





#### High awareness of SoP

• The majority of dental professionals, were aware of what the Scope of Practice is and what the guidance contains.

#### **Definition explanation**

- SoP was also described as; guidance, rules, regulations, procedures and duties that a dental professional should follow;
- It was also mentioned by some as a 'skillset' that underpins their activities as a dental professional.

#### **Content of SoP guidance**

- Participants highlighted that SoP is unclear for dental job roles apart from dentists;
- For non-dentists, SoP guidance can be quite restrictive and ambiguous, exhibiting some grey areas which require clarity;
- Some DCP respondents noted that their role could potentially be expanded to take on additional tasks, especially for those with vast experience;
- Some dental nurses raised that their remit differed depending on the practice they worked for;
- Some participants suggested SoP could be competence based, meaning dental professionals could perform more activities if they undergo more training.

"Making sure you are educated, and your skillset is up to date."

> Dental Nurse, Depth Interview



#### 7.4 Key themes / continued

#### **Regulation of SoP**

• Dental professionals felt that the SoP needs regulating otherwise it could lead to litigation or dental professionals performing activities they are not qualified to do;



- SoP guidance is in existence for the protection of dental professionals;
- They understand however, that regulating it is not straightforward but believed that the SoP guidance should continue to be issued;
- Dental professionals said that the GDC only intervene if something goes wrong and someone oversteps their remit.

#### SoP's role in professional development

- Some dental professionals felt that the SoP is beneficial and helpful in the professional development of qualified staff;
- Dental professionals stated that SoP helps staff understand not only theirs but others' responsibilities;
- Dental professionals said SoP is useful for student learning outcomes;
- It was mentioned that dental professionals would like the GDC to report on outputs of FtP cases for learning purposes as they felt this would be useful (similar to the 2017 Dental Professional Survey results).

"I feel that the SoP is worthwhile ...it does help dental professionals in their area of work. Dental professionals need to know what the boundaries are and need to do what they are expected to be doing."

Dental hygienist, Cardiff Focus Group



# 8. CONTINUAL PROFESSIONAL DEVELOPMENT (CPD)

## 8.1 CPD Summary

#### Findings from the Dental Professional Survey:



- Dental professionals undertake a broad range of CPD<sup>4</sup> with e-learning (83%), courses and lectures (80%) being most popular;
- Fewer than half (47%) of dental professionals have used all the GDC recommended CPD topics to guide their CPD in the last 12 months.

#### Findings from Focus Groups and Interviews:



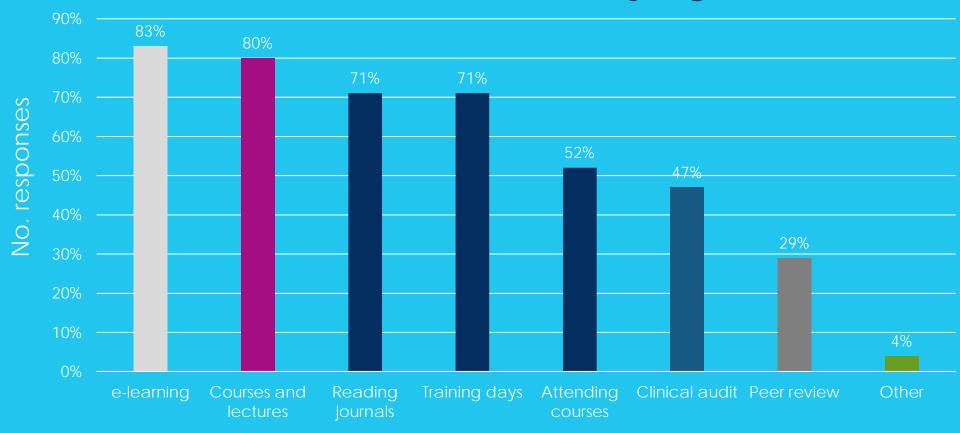


- New CPD scheme is perceived by dental professionals to be more tailored towards their needs;
- Dental professionals felt that the new CPD scheme that was introduced on 1<sup>st</sup> January 2018 for dentists and 1<sup>st</sup> August for dental care professionals – promotes improved self awareness and reflective thinking;
- There were some practical challenges around finding and getting onto CPD courses; fitting CPD in around busy schedules; cost; and travel;
- Volume of paperwork was highlighted as an issue because it is time consuming;
- Choice of CPD course was mainly based on interests and specialisms of the dental professional.



## 8.2 CPD activities & topics

## CPD activities undertaken by registrants



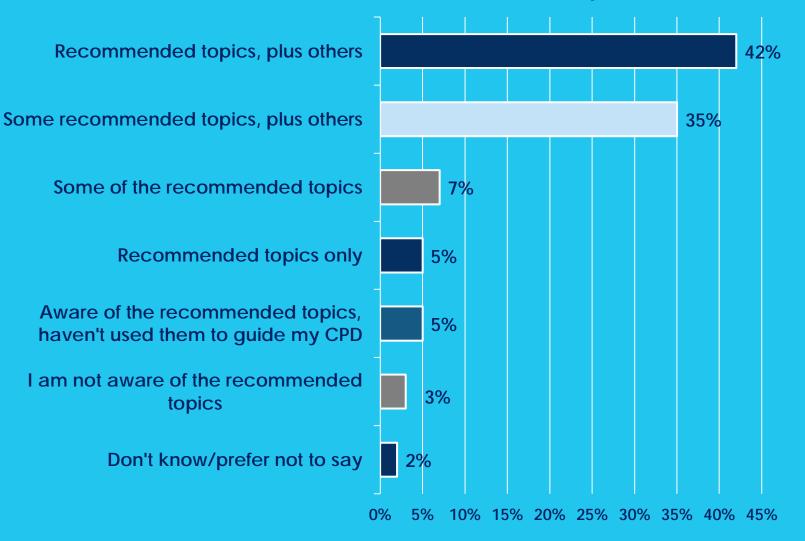
E-learning
was the most
frequently
mentioned
CPD activity

Base: Respondents were asked Which types of CPD have you undertaken in the last 12 months? (please select all that apply) (multi response)n=34157 responses



## 8.2 CPD activities & topics

## **Use of GDC recommended CPD topics**



47%

of dental professionals have used the GDC recommended CPD topics to guide their CPD in the last 12 months



### 8.3 CPD Scheme

In the survey, Dental professionals were asked to explain what they thought of the CPD scheme (launched on 1st January 2018 for dentists and 1st August for dental care professionals). The main points were:



#### **Positives**

- Many of those that liked the scheme welcomed the focus of activities around the Personal Development Plan;
- The scheme allows the individual practitioner greater control over the courses they do CPD choice is now based on interests and specialism;
- CPD scheme promoted greater self awareness and reflective thinking this helped DPs identify weaknesses and areas in their skills which they should work on.

#### Challenges

- Writing up CPD and evaluations was considered quite onerous by some dental professionals;
- Some Dental professionals wanted increased availability of some courses (as they were difficult to get on);
- Dental professionals also experienced challenges fitting in CPD training around busy schedules;
- The cost of courses was also raised as an issue, especially for dental nurses who earn a lot less than dentists. Cost of CPD and time commitment were also highlighted as issues in the 2017 Dental Professional Survey.



# 9. FUTURE OF THE PROFESSION

## 9.1 Future of the Profession Summary

#### Findings from the Dental Professional Survey:



- Fewer than a third (31%) of dental professionals were optimistic about the future of their profession over the next 2 years this is a decrease of 4% compared with 2017;
- More than two-fifths (42%) of dental professionals were pessimistic about the future of their profession over the next 2 years a 10% increase compared with the 2017 survey;
- The levels of pessimism are higher in dentists (60%) compared with dental care professionals (25%);
- Would you say you are optimistic or pessimistic about the future of your profession;
- Over the next two years, dental professionals were optimistic about 'the quality of learning and development available' (82%) and 'integration of technology into practice' (82%);
- The top professional challenges that dentists face in daily practice are; Meeting the demands of regulation (65%), Administration including record keeping (57%), Keeping up to date in guidance and law changes (56%) and Meeting patient expectations (56%);
- The top professional challenges that DCPs face in daily practice are; Finding time and opportunities to develop (50%), Keeping up to date in guidance and law changes (45%), Meeting patients expectations (44%).



## 9.1 Levels of optimism

## Dental Professional view of Future of their Profession over next 2 years



Dental professional optimism about the future has fallen from 35% in 2017 to 31% in 2019.

Over the same time period the proportion who were pessimistic about the next two years increased by 9% to 42%

## Sub-group

In the 2019 survey, dentists were more pessimistic (59%) about the future compared to DCPs (21%)

Dental Professionals Optimistic / Pessimistic (2012-2019)

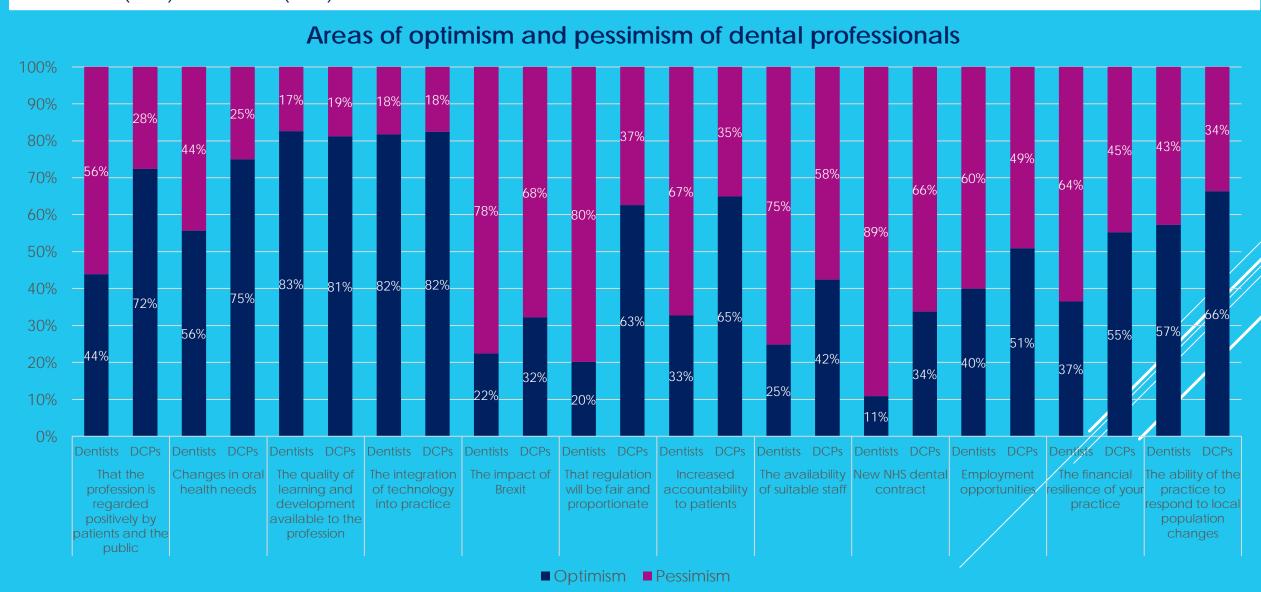




Base: Respondents were asked - Would you say you are optimistic or pessimistic about the future of your profession over the next two years? (single response) n=7848 (2019 results)

Overall, dental professionals were most optimistic about the quality of learning and development available (83%) and integration of technology into practice (82%). They were most pessimistic about the new NHS dental contract (78%) and Brexit (73%).



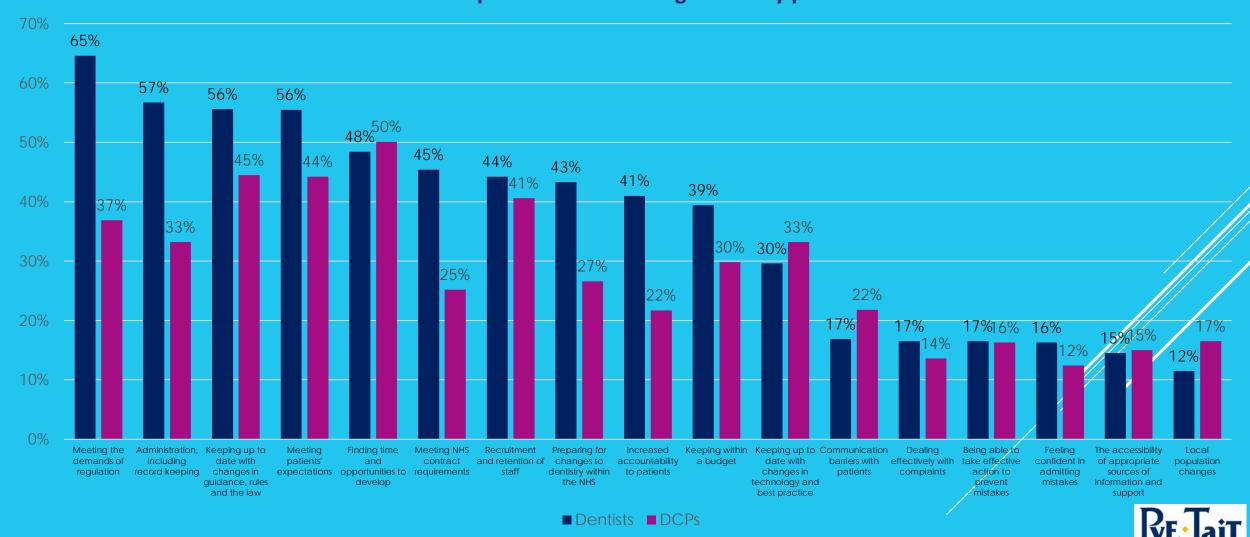


Base: Respondents were asked: Would you say you are optimistic or pessimistic about the future of your profession over the next two years (single response)n=7789

Meeting regulatory demands, keeping up to date with changes, guidance, rules and law along with meeting patients' expectations are the top three greatest challenges for dental professionals.



### **Greatest professional challenges in daily practice**



Base: Respondents were asked: What are the greatest professional challenges in your current daily practice (Please select all that apply) (multi response) n=varied

# 10. FINAL CONCLUSIONS

## **10.1 Final Conclusions**

The 2019 Dental Professional Survey, focus groups and interviews produced some key conclusions.

#### **Public confidence**

- A range of incidents portrayed in the media were discussed in the dental professional focus groups, and in summary, it was felt that the public would see them as a "one-off" and public confidence in the dental profession would be largely unaffected. Public confidence is built at a local level through dental professional-patient relationships;
- In the focus groups, some dental professionals thought more could be done at a national level by the GDC to promote the positives of the dental profession and, perhaps, alleviate their perception that the public do not understand how dentistry works (see things in very black and white terms).

#### Regulatory purpose

- Around two-thirds (64%) of dental professional agreed or strongly agreed that the GDC 'promotes and maintains confidence in the dental profession'. Dentists were less likely to agree to this compared to dental care practitioners. The proportion did vary considerably by age, length of time on the register, ethnicity and gender further investigation is required;
- 75% agreed that GDC protects, promotes and maintains the health, safety and well-being of the public, and 73% agreed that it promotes and maintains proper professional standards;
- Further clarity may be required on activities that the GDC is required to perform to 'promote' the profession. This suggests some confusion among dental professionals as to the role and remit of the GDC and reflect an underlying feeling among dental professionals that they would appreciate such support from the GDC;
- Regarding the theme of the regulatory focus and role of the GDC, 61% of dental professionals felt that equal focus should be placed on preventing bad practice and taking action against dental professionals who have serious complaints raised against them.

## 10.1 Final Conclusions / continued

#### **Complaints**

- Dental professionals suggested that good communication, preventative initiatives, and quick resolution are key to preventing and resolving complaints;
- A higher proportion of dental professionals in 2019 (93%) than in 2017(87%) strongly agreed or agreed that their place of work encourages patients to provide feedback;
- Where complaints are made by patients, dental professionals suggest it is preferable to resolve complaints locally or in-house whenever possible so they can learn from the feedback;
- They felt that complaints should only be dealt with by the GDC if the patient goes to them directly, when harm has come to the patient, or, if misconduct was intentional.

#### Advocacy

- 57% of dental professionals did not signpost patients to advocacy. The most frequently mentioned reason for this was 'they did not need to (58% of those not signposting said this);
- The focus groups and qualitative research, showed that not all dental professionals were aware of the service, and in some cases, were wary of it (did not want to bring GDC's attention on their practice).



## 10.1 Final Conclusions / continued

#### **Fitness to Practise**

- Dental professionals believe their knowledge of fitness to practise (89%) and understanding of the process (74%) is relatively high;
- Dental professionals were concerned over the mental health of dental professionals involved in FtP cases (it is a high-pressured environment), and that more should be done by the GDC in respect of the mental health of dental professionals in general.

#### **Consumers v Patients**

- Dental professionals recognise there may be an overlap between the role of patient and consumer but say they always see members of the public first as 'patients' and would rather maintain this perception;
- The rise of the consumer in dentistry is thought to be linked to the increase in demand for cosmetic dentistry and a great deal of negativity was expressed by dental professionals toward the practice of dental surgeries offering fillers and botox, for example;
- Focus group feedback highlighted the view that cosmetic treatments were commercialising a predominantly healthcare-focused profession.



## 10.1 Final Conclusions / continued

#### Scope of Practice (SoP)

- More than two-thirds of dental professionals referred to the SoP guidance at least once a year;
- There were, however, some perceived problems with SoP documents with dental professionals arguing that there is ambiguity, and a lack of specificity for dental practitioners (other than dentists);
- The research suggests that the GDC should continue to regularly review the content of SoP documents and align this to different roles within the dental team.

#### **Continuing Professional Development**

- The new CPD scheme was generally welcomed;
- Personal development plan is a useful tool for personalising learning activities, reflecting on learning and the transfer knowledge into day to day roles;
- Finding time to develop can be challenging for dental professionals due to their busy work schedules;
- Access to courses, cost of courses, travel and the onerous additional paperwork were all cited as challenges (as they were in the 2017 results).

#### **Future of the Profession**

- Dental professionals are more pessimistic about the future (next two years) then they were in 2017;
- Dental professionals were optimistic about 'the quality of learning and development available' (82%) and 'integration of technology into practice' (82%);
- Meeting the demands of regulation and administration / record keeping were the main challenges that dentists are facing on a daily basis. DCPs main challenge was finding time and opportunities to develop.



## 11. ADDITIONAL SAMPLE DATA

#### 1.2 Respondent Profile – Dental Professional Survey<sup>5</sup>

| Role <sup>6</sup>     | Total | % of<br>total |
|-----------------------|-------|---------------|
| Clinical dental       |       |               |
| technician            | 45    | 1%            |
| Dental hygienist      | 569   | 7%            |
| Dental nurse          | 2612  | 32%           |
| Dental technician     | 242   | 3%            |
| Dental therapist      | 252   | 3%            |
| Dentist               | 3980  | 48%           |
| Orthodontic therapist | 56    | 1%            |
| Specialist            | 479   | 6%            |
| TOTAL                 | 8235  |               |

| Nation           | Total | % of<br>total |
|------------------|-------|---------------|
| England          | 6158  | 78%           |
| Northern Ireland | 308   | 4%            |
| Scotland         | 879   | 11%           |
| Wales            | 348   | 4%            |
| n/a              | 122   | 2%            |
| Other            | 33    | 0%            |
| TOTAL            | 7848  |               |

| Years registered | Total | % of<br>total |
|------------------|-------|---------------|
| Less than a year | 253   | 3%            |
| 1 to 2           | 546   | 7%            |
| 3 to 5           | 999   | 13%           |
| 6 to 10          | 1481  | 19%           |
| 11 to 15         | 1480  | 19%           |
| 16 to 20         | 736   | 9%            |
| 21 to 25         | 553   | 7%            |
| 26 to 30         | 548   | 7%            |
| 31 to 35         | 599   | 8%            |
| 36 to 40         | 378   | 5%            |
| 41 to 45         | 177   | 2%            |
| 46+              | 82    | 1%            |
| TOTAL            | 7832  |               |

| Gender <sup>7</sup>     | Total | % of<br>total |
|-------------------------|-------|---------------|
| Female                  | 5015  | 65%           |
| Male                    | 2463  | 32%           |
| Prefer not to say       | 267   | 3%            |
| Prefer to self-describe | 19    | 0%            |
| TOTAL                   | 7764  |               |



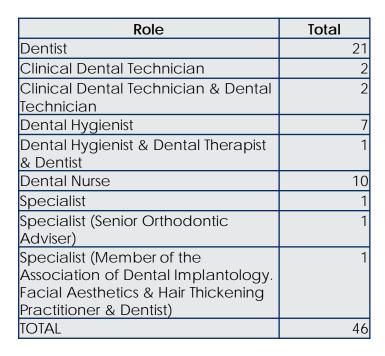


<sup>5</sup> The totals differ because response to all questions was not mandatory and not every respondent answered every question.

<sup>&</sup>lt;sup>6</sup> Some dental professionals had multiple roles.

<sup>&</sup>lt;sup>7</sup> Responses were weighted to ensure that they aligned as closely to the profile of registrants as possible.

#### 1.2 Respondent Profile - Depth Interviews



| Nation                       | Total |
|------------------------------|-------|
| Scotland                     | 7     |
| England                      | 30    |
| Wales                        | 5     |
| Unknown & Unknown (Referral) | 4     |
| TOTAL                        | 46    |

| Years Registered  | Total |
|---|-------|
| 1 to 2 years  | 0     |
| 3 to 5 years  | 5     |
| 6 to 10 years   | 8     |
| 11 to 15 years  | 8     |
| 16 to 20 years  | 2     |
| 21 to 25 years  | 3     |
| 26 to 30 years  | 3     |
| 31 to 35 years  | 9     |
| 36 to 40 years  | 2     |
| 41 to 45 years  | 4     |
| 46 years or over. (NB Recently retired, but involved on 2 GDC | 1     |
| Panels etc)   |       |
| Unknown as was a Referral.                                    | 1     |
| TOTAL   | 46    |

| al |
|----|
| 28 |
| 18 |
| 46 |
|    |





#### 1.2 Respondent Profile – Focus Group attendees<sup>8</sup>



| D-I-                             | T-1-1 |
|----------------------------------|-------|
| Role                             | Total |
| Clinical Dental Technician       | 1     |
| Dental Hygienist                 |       |
| Dental Nurse                     | 5     |
| Dental Technician                | 1     |
| Dental Therapist                 | 1     |
| Dentist                          | 23    |
| Orthodontic Therapist            |       |
| Specialist                       | 1     |
| Dental Hygienist &               | 1     |
| Dental Therapist                 |       |
| Clinical Dental Technician &     |       |
| Dental Technician                |       |
| TOTAL (some dental professionals | 33    |
| held multiple roles)             |       |

| Years registered | Total |
|------------------|-------|
| Less than 1 year | 0     |
| 1-2 year         | 2     |
| 3-5 year         | 3     |
| 6-10 year        | 6     |
| 11-15 year       | 3     |
| 16-20 year       | 1     |
| 21-25 year       | 4     |
| 26 -30 year      | 1     |
| 31-35 year       | 7     |
| 36-40 year       | 2     |
| 41-45 years      | 0     |
| 46 plus          | 1     |
| TOTAL:           | 30    |

| Gender | Total |
|--------|-------|
| Female | 16    |
| Male   | 14    |
| TOTAL  | 30    |

