

Continuing to explore and understand stakeholders' knowledge of and attitudes towards the GDC

A report by YouGov for the General Dental Council

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Executive summary

Objectives and methodology

Building on similar research from 2018 and 2020, the GDC commissioned YouGov to carry out a research project exploring stakeholder knowledge about, and current perceptions of the GDC. The research objectives were:

- Understanding how stakeholder perceptions have changed since 2020 and, if they have, or have not, what has caused this.
- Exploring whether the changes to the GDC's communications approach have had any impact on perceptions.
- Supporting the GDC to establish a framework of measures to gauge and over time evaluate progress against the GDC's external communication and engagement strategy.
- Understanding more about communication and engagement issues that might affect delivery of the GDC's Corporate Strategy.
- Evaluating and informing GDC activity to build positive, trusted relationships with stakeholders to meet the GDC's statutory objectives.
- Informing the GDC's approach now and in the future to their communications and engagement with stakeholders.

The research used a mix of qualitative and quantitative methods across three strands of work:

1. Strand 1 – an initial scoping phase to ensure that the study's aims and objectives were met, including a rapid assessment of the GDC's current channels and materials, a logic model workshop and scoping interviews with key stakeholders.
2. Strand 2 – an online survey with registrants, students, and other stakeholders, in addition to seven online focus groups and three in-depth interviews with these groups.
3. Strand 3 – the analysis and reporting phase.

Throughout the report we will refer to three key groups:

- Registrants: dentists, dental nurses, dental technicians, dental therapists, dental hygienists, orthodontic therapists and clinical dental technicians.
- Students: dental students.
- Other stakeholders: this included respondents from dental schools, healthcare professionals (including those working for healthcare regulators), and those working in professional associations, amongst others.

More detail on the methods and respondent groups is presented in Section 1.

Key findings

Perceptions of and attitudes towards the GDC

Overall, most of those surveyed felt negatively towards the GDC, though perceptions have improved since the last wave of research in 2020. Among registrants, positive perceptions increased from 16% in 2020 to 20% in 2023, and negative perceptions decreased from 65% in 2020 to 56% in 2023. The qualitative research revealed that remaining negative perceptions centred on the GDC being seen as punitive, out of touch, and disproportionately focused on enforcement over support. Registrants described a culture of fear and a lack of understanding from the regulator.

Overall, students tended to express more positive opinions towards the GDC than other groups, with slightly fewer saying their overall perception was negative (41%), though broadly their positivity was relatively low (26%). Among other stakeholders, 52% felt negatively towards the GDC, which was higher than the proportion who felt positively towards the GDC (25%).

Registrants who had been registered with the GDC for longer tended to feel more negatively about the GDC, with those who had registered within the past five years feeling more positively towards the GDC compared with those who had registered six or more years ago. For example, those who had registered within the past five years were more likely to agree that the GDC is professional (63% vs. 46%), relevant (59% vs. 39%) and focused (54% vs. 34%). This suggests there could be a 'tipping point' when opinions shift to become more negative, which could be driven by past experiences or legacy decisions. The qualitative findings indicated that long-serving registrants' views were heavily influenced by direct negative experiences of Fitness to Practise (FtP) cases as well as experiences of colleagues and accumulated frustrations with the GDC's tone and approach.

Whilst registrants associated the GDC with many of the terms linked to the GDC's corporate strategy (such as professional and relevant – 50% and 44% respectively), other common associations included 'fear' and 'unrepresentative' (both 46%). There was a positive shift, with registrants less likely to see the GDC as unrepresentative than in 2020 (down to 46% from 54%). Among students, fear was the most commonly associated word at just over half (53%) with knowledgeable second (41%). Other stakeholders most commonly associated the GDC with being unrepresentative (40%), followed by aggressive and defensive (both 34%).

The survey explored perceptions, knowledge and awareness of the GDC. Among registrants, there was generally high awareness of the GDC's core activities, with maintaining the register (87%), investigating concerns about impaired fitness to practise (78%), and setting and promoting professional standards (72%) accurately recalled by the majority of survey respondents. Registrants, students and other stakeholders were all more likely to correctly identify core functions of the GDC than select misconceptions. For example, 89% of other stakeholders and 85% of students knew that the GDC maintains the register. The most common misconception of the GDC among registrants was that it sets clinical standards (48%), which was also held by 66% of students, followed by the belief that the GDC represents the interests of dental professionals (30%). This was in line with 2020 findings.

To further explore what drives overall perceptions of the GDC among registrants, we conducted Key Driver Analysis (KDA) on the survey data.¹ This revealed that perceptions of the GDC being fair, respectful, and proportionate were most likely to have a positive impact on the overall perception of the GDC, although only just over one in four (27%) registrants associated the GDC with being fair in the survey. We also explored some of the negative perceptions that registrants held. Thinking that the GDC is unrepresentative (56% of registrants agreed), not believing that the GDC cares about their opinions (62% of registrants agreed) and thinking that the GDC overly penalises dental professionals (61% of registrants agreed) all negatively impacted overall perceptions. The qualitative findings reinforced the importance of empathy, clarity, and engagement in shaping registrants' overall view of their regulator.

Registrants' communication with the GDC

Most registrants (59%) found GDC communications useful, higher than the proportion saying that they were not useful (34%). Those who had been registered with the GDC for both the shortest (i.e. less than one year) and longest (i.e. over 30 years) time periods found GDC communications the most useful. Seven in ten (70%) registrants who were registered with the GDC for less than one year reported that they felt communications were useful, decreasing to about half (51%) of those registered for 11-15 years, and increasing again to 63% for those registered for over 30 years. When looking at usefulness by registrant role, a high proportion of dental nurses (63%), dental hygienists (63%), and dental therapists (66%) viewed communications as useful, compared with 39% of dental technicians. Reasons for not thinking that GDC communications were useful included thinking that communications were not aimed at them, as well as messages being overly long and having an authoritative tone. The qualitative research highlighted a desire for more concise, practically relevant, and empathetic communications that recognise the day-to-day pressures registrants face.

¹ KDA is designed to identify the strongest predictors of a dependent variable (in this case overall perceptions of the GDC) by assessing the simultaneous effect of many independent variables (in this case a number of component perception questions).

It was most common for registrants to read or hear about the GDC via email (76%), followed by the GDC website (41%). Compared with 2020, this represented a reduction in the proportion of registrants saying they typically read or hear about the GDC via email (92% in 2020) and an increase in those saying via the website (34% in 2020). These channels are also how registrants said they would prefer to read or hear about the GDC, with a majority favouring emails (81%), followed by the GDC website (43%). Dentists were most likely to have reported obtaining information about the GDC through dental journals or magazines (30% dentists, 16% dental nurses, 23% dental therapists), and Facebook (17% dentists, 6% dental nurses, 9% dental therapists). Dental therapists (55%) and dental hygienists (49%) were most likely to report using the GDC website (compared with 41% of dentists). The findings from the focus groups suggested a preference for interactive communication (e.g., webinars) and face-to-face events (e.g., regional events) to foster more meaningful engagement. Registrants expressed a desire for greater opportunities to engage in dialogue with the GDC and to share their concerns and feedback.

Most registrants (64%) found communications relevant, though just over one in four (28%) did not. They largely attributed it to their perception of the GDC as being detached from the day-to-day reality of clinical practice. This was also linked to the tone of communications and amount; just over half (56%) of those unhappy with the frequency of GDC communications (11% of registrants) said they would like to hear from the GDC more frequently.

The perceived relevance of GDC communications varied by dental professional role. Dental therapists and dental hygienists were more likely than average to find communications relevant (76% dental therapists and 70% dental hygienists), whilst dental technicians and dentists were more likely than average to find communications not relevant (55% dental technicians and 32% dentists).

When registrants were asked about what improvements, if any, they would like to see to GDC communications, five key themes emerged from the open survey responses and the qualitative research: ensuring clarity and accessibility, increasing the relevance of communications to registrants' specific roles, adopting a more empathetic and approachable tone in the way GDC communicates, providing registrants with opportunities to provide input and engage in meaningful dialogue with the GDC (e.g. seeking opinions of registrants), and ensuring GDC's communications are more transparent regarding the internal decision-making processes.

Facebook (36%) was the most commonly used form of social media to keep informed about their work and the profession in general - although a similar proportion (38%) of registrants said they did not use any social media sites for this purpose. Results varied by age, with 18–30-year-olds and 31-40-year-olds more likely to use Instagram (25% and 24% respectively) than their older counterparts, for example just three percent of those aged 65+ said they used Instagram. Older registrants were far more likely to say that they do not use any social media platforms (47% of 51–64-year-olds and 61% of those aged 65+). In terms of dental sector specific news and opinion outlets, the *British Dental Journal (BDJ)* (40%) and *Dentistry* (33%) were the most commonly used publications.

Students' communication with the GDC

Most students surveyed (74%) did not recall receiving communication from the GDC. It therefore followed that most did not know whether communications from the GDC were useful (61%) or relevant (53%). However, more students found GDC communications useful than not (26% vs. 13% not useful).

Students reported that email was their preferred channel of communication from the GDC (54%), however just four percent reported hearing or reading information about the GDC via email. For students, the GDC website was both a preferred channel of communication (51%) and a typical source of information about the GDC (53%).

Among students, it was common to use social media platforms to keep informed about dentistry. Just under half (48%) of students said they used Instagram for this purpose, 30% used YouTube, 14% used LinkedIn and 13% used X (formerly Twitter). About two in five (39%) said that they would like to learn more about the dental sector if this information was available on the channels they use / watch. This implies that Instagram and YouTube would be the most suitable social media platforms to target students. The qualitative findings reinforced the potential for more creative, multimedia communications (e.g. using YouTube and Instagram) tailored to students' preferences and behaviours.

Other stakeholders' communication with the GDC

Other stakeholders tended to feel positively towards GDC communications, finding them relevant (81%) and useful (68%). The qualitative research suggested this was linked to stakeholders' more frequent and direct engagement with the GDC, which provided opportunities to build relationships and influence the GDC's approach.

There was alignment between the typically used and preferred communication channels with the GDC. The majority of other stakeholders reported that email was both a typical source of information (78%) and their preferred channel of communication (69%). Similarly, about half of other stakeholders identified the GDC website as both a typical source of information (53%) and their preferred channel of communication (49%), whilst 41% of other stakeholders identified online meetings or webinars as a typical communication channel and 46% identified these as a preferred communication channel.

Thirty-seven percent of other stakeholders said they do not use social media to keep informed about work and the profession. Nonetheless, three in ten (30%) used LinkedIn, making it the most used platform followed by a quarter (25%) using Facebook and 16% using X (formerly Twitter).

A majority (54%) of other stakeholders said that they actively keep up to date with the latest trends in the dental sector by reading articles and attending events and conferences. Approximately six in ten (61%) said they read the *BDJ*, and just under half (47%) read *Dentistry*. These journals, and LinkedIn, could be the most effective outlets for GDC communication targeted towards other stakeholders.

Implications

Overall, the research findings suggested that while perceptions of the GDC have improved since 2020, there are many ways the GDC could improve its relationship with registrants, students and other stakeholders.

Firstly, the qualitative research with registrants indicated that the GDC should take more ownership of the dialogue around regulation. Taking ownership of these narratives could aid perceptions of the GDC being fair and proportionate, which in turn could positively impact overall perceptions of the GDC. Secondly, adopting a more personal and empathetic tone to GDC communications is a key area that could help shift portrayals of the GDC. This could work to improve perceptions of the GDC as unrepresentative, which the quantitative analysis showed has an impact on overall perceptions of the GDC. Lastly, there is a need for registrants to be 'heard' by the GDC given the survey findings revealed that not believing the GDC cares about their opinions has an important negative impact on overall perceptions of the GDC.

For dental students, there was a desire for more direct engagement from the GDC, such as interactive sessions, to help them understand the role of the regulator and feel more connected to it from the start of their careers. Other stakeholders also emphasised the importance of more regular, substantive dialogue with the GDC. There were suggestions that the GDC could hold more frequent meetings with these bodies to discuss issues affecting the profession and gather feedback.

Monitoring and evaluation

The GDC has collected three waves of data within this stakeholder research programme (2018, 2020 and 2023), with each wave including both quantitative and qualitative research.

Efforts to reach registrants are working well and going forward we would recommend using the same approach as in 2023: a large quantitative survey, followed by online focus groups and interviews. However, efforts to reach students could be reviewed, as the sample size for students this wave (n=106) was smaller than in the previous wave of research. Possible ways to boost engagement could include: a survey communications plan to build engagement, a warm-up email to let universities know the survey was coming and reviewing options for an attractive incentivisation scheme.

Similarly, given there is a relatively small pool of other stakeholders to speak to, quantitative survey responses for this group can be limited. This highlights the importance of conducting in-depth interviews with this group to allow for detailed exploration.

We would recommend conducting the research every two years, as has been done for the prior three waves of research. However, there could be value in conducting smaller 'dip-check' exercises between years of the main study. These could consist of short KPI focused registrants' surveys of around one-third the length of the 2023 questionnaire. KPIs could include fair, respectful, proportionate, respect for GDC's work, believing the GDC is unrepresentative and fear.

Alongside this regular monitoring, the GDC could also conduct periodic in-depth evaluations to assess the impact of its communication and engagement activities. Furthermore, we suggest that this research should be used not just to measure progress, but to enable continuous improvement, for example: regularly reviewing findings with senior leaders and Council to inform decision-making, using feedback to iterate and improve communication materials and channels, and sharing insights with the GDC communications team to help them refine their approach.

1 Introduction

1.1 Background and understanding

The UK market for dentistry and dental services has expanded during the last decade, from £5.7 billion in 2012² to an estimated value of £9.62 billion in 2022³. Despite the growth within the sector, the challenges and needs of the profession are constantly shifting and adapting to the different contexts of public protection, care, and regulation.

Some of the key challenges into and beyond 2023 include the residual impact of the COVID-19 pandemic on the public, dental professionals, and the General Dental Council (GDC), the Government plans to reform the health professional regulators, implications of the UK's departure from the EU, and the current economic uncertainty⁴. The UK is also facing an urgent crisis in dental care access. A 2023 YouGov survey revealed that one in ten Britons claim to have carried out their own dental work⁵.

Within this changing context, the purpose of the GDC, as the UK-wide statutory regulator, remains to protect dental patients and maintain public confidence in the dental professions. The GDC maintains the registers, sets standards for dental professionals, investigates complaints about dental professionals' fitness to practise, and works to ensure the quality of dental education. Building upon the strategic aims and objectives of 'Right time. Right place. Right touch' developed in 2019, the GDC's new Corporate Strategy for 2023-2025 seeks to drive improvements in the organisation's ability to respond to changing circumstances.

Considering this context, the GDC commissioned YouGov to carry out a research project exploring stakeholders' knowledge about, and current perceptions of the GDC. This builds on a continuing series of stakeholder research studies published by the GDC in 2019 and 2021. This study aims to inform GDC engagement activities with stakeholders and support the objectives of building trust and communicating its work effectively.

² YouGov. 2013. Market intelligence: Dentists and dental care. Available [here](#).

³ Mintel. 2022. UK Dentistry Market Report. Available [here](#).

⁴ GDC. 2023. Corporate strategy 2023-2025. Available [here](#).

⁵ YouGov. 2023. One in ten Britons have performed dentistry on themselves, half in the last two years. Available [here](#).

1.2 Objectives

In this project the GDC wanted to measure change in stakeholder perceptions over time, understand more about any issues that might affect delivery of its corporate strategy, and establish new benchmarks of early progress against the communication and engagement strategy. The research project has had several key research objectives. The table below sets out each of these objectives and at which stage of the research project they were addressed.

Figure 1. Objectives and stages

Objective	Strand 1: Scoping phase	Strand 2: Online survey	Strand 2: Qualitative interviews and focus groups	Strand 3: Analysis and reporting
Understand how stakeholder perceptions have changed since 2020 and, if they have, or have not, what has caused this		X	X	X
Explore whether the changes to the GDC’s communications approach have had any impact on perceptions	X	X	X	X
Support the GDC to establish a framework of measures to gauge and over time evaluate progress against their external communication and engagement strategy	X			X
Understand more about communication and engagement issues that might affect delivery of the GDC’s Corporate Strategy	X	X	X	X
Evaluate and inform GDC activity to build positive, trusted relationships with stakeholders to meet the GDC’s statutory objectives		X	X	X
Inform the GDC’s approach now and in the future to their communications and engagement with stakeholders				X

1.3 Research methods

The research objectives have been achieved using both qualitative and quantitative methods, with the research set out in three strands:

1. Strand 1 – an initial scoping phase to ensure that the study’s aims and objectives were met. This was composed of a rapid assessment of the GDC’s current channels and materials, conducting a logic model workshop, scoping interviews with key stakeholders both external (including corporate providers of dental care, education providers, NHS agencies, patient groups, professional associations) and internal, namely GDC staff, to refine the methods for Strands 2 and 3.
2. Strand 2 – the data collection phase, composed of an online survey with registrants, students, and other stakeholders, including follow up focus groups and interviews.
3. Strand 3 – the analysis and reporting phase, comprised of a full written report of the findings.

Throughout the report we will refer to three key groups:

- Registrants: dentists, dental nurses, dental technicians, dental therapists, dental hygienists, orthodontic therapists, and clinical dental technicians.
- Students: dental students.
- Other stakeholders: this included respondents from dental schools, healthcare professionals (including those working for healthcare regulators), and those working in professional associations, amongst others.

Strand 1 - scoping phase

The scoping phase involved a rapid assessment of the GDC’s current communication channels and materials by reading the documents and making note of key themes, figures, and information. The materials included newsletters, annual reports and information for dental professionals and students about the sector and profession.

A series of scoping interviews were also conducted with both GDC staff and external stakeholders to explore their perceptions and knowledge of the GDC and help guide the development of the next stage of the research. The findings from these scoping interviews helped shape the objectives and interview guides for the more in-depth Strand 2 interviews, ensuring that the main research phase addressed the most relevant issues identified during the scoping process.

This strand included six interviews with external stakeholders (including corporate providers of dental care, education providers, NHS agencies, patient groups, professional associations) and nine interviews with GDC staff. These interviews took place in September and October 2023

The discussions provided insights into what currently informs stakeholders' views of the GDC and what information or engagement would be useful going forward. The interviews covered a range of topics related to stakeholders' current understanding of the GDC, including its mission, activities, challenges, and opportunities, which provided context for the data collection phase and the development of research tools.

Strand 2 - quantitative survey

Quantitative fieldwork was undertaken between 29 November and 20 December 2023.

All dental professionals on the GDC registers, and other stakeholders were invited to take part in the survey via emails sent by the GDC. Students were contacted via their education providers following a request from the GDC.

A total of n=3,217 registrants fully completed the survey. A total of n=106 students fully or partially completed the survey. For other stakeholders, n=478 were emailed and a total of n=68 fully or partially completed the survey. Please see *Appendix III* for more detail on the breakdown of responses.

Typically, responses to the survey are considered fully complete when all survey questions have been answered. For students and other stakeholders, partial completes were also included in the sample once respondents had answered a meaningful question within the survey, in this instance Q02. Partial completes were included to boost the sample size of the student and other stakeholders' sample. Since a larger number of registrants answered the survey, this approach was not taken for the registrants' sample.

A breakdown of the registrants' sample by role type can be found below.

Figure 2. Registrants by role type⁶

Role	% of registrants	Unweighted n
Clinical dental technician	1%	20
Dental hygienist	13%	266
Dental nurse	39%	751
Dental technician	3%	106
Dental therapist	9%	170
Orthodontic therapist	1%	23
Dentist	38%	1,907

The registrants' sample had an error margin of 1.73% at the 95% confidence interval. This means that the true figure of a finding of 50% could lie between 48.27% and 51.73%⁷.

To ensure the registrant sample was representative of the GDC database, the final data was weighted by age, gender, dental professional role and region.

⁶ Registrants were able to select more than one role, so the unweighted total exceeds the total number of responses.

⁷ Margin of error is used on an indicative basis because the Registrants survey was a census where all had an equal chance of taking part rather than a random probability sample.

Strand 2 – focus groups and interviews

In the qualitative research component of the strand, a total of 64 participants were recruited from those in the online survey who expressed interest in doing follow-up activities. The qualitative research was conducted between 8-19 January 2024, and consisted of:

- 3 online focus groups with dentists (28 participants; segmented by length of time in the profession).
- 1 online focus group each with dental hygienists (9 participants), dental nurses (10 participants), and dental technicians (7 participants).
- 1 online focus group with dental students (7 participants).
- 3 in-depth telephone interviews with other stakeholders.

1.4 Interpretation of the research findings

Interpreting quantitative data

Analysis has been undertaken at a total level by respondent type (registrants, students, and other stakeholders). Registrants have also been analysed by key subgroups (i.e. role, length of time registered with the GDC, age, gender, region, ethnicity), which are noted throughout the report. Differences between these subgroups or by survey wave are only reported in the analysis if they are significant at a 95% confidence level and statistically significant differences are noted in tables and charts. In the charts, these differences are indicated with an asterisk (*). Analysis has not been conducted on subgroups with fewer than 50 respondents. Analysis of registrants has also been compared with data from the 2020 study. Due to smaller sample sizes, analysis of students and other stakeholders have not been compared with previous studies.

Key Driver Analysis

Using the survey data we conducted Key Driver Analysis (KDA) among registrants to understand what drives perceptions of the GDC. KDA is designed to identify the strongest predictors of a dependent variable (in this case overall perceptions of the GDC) by assessing the simultaneous effect of many independent variables (in this case component perceptions of GDC such as fair, effective etc.). Linear regressions created the two models shown in the report and with this analysis, we can understand which views and attitudes have the biggest impact on overall perceptions of the GDC.

The findings from the KDA can be found in Section 2.6.

Interpreting qualitative data

The findings from the interviews and focus groups add depth and further insight to the results. Verbatim quotations from interviewees are used throughout the report to provide context and illustrate key themes or findings. The research team approached the analysis thematically. This is an inductive technique that involved establishing categories and then identifying systematic links between them. The sampling for all elements of the study is based on self-selection. The terms 'participants' or 'interviewees' refer to those who took part in the focus groups and in-depth interviews.

2 Stakeholder perceptions

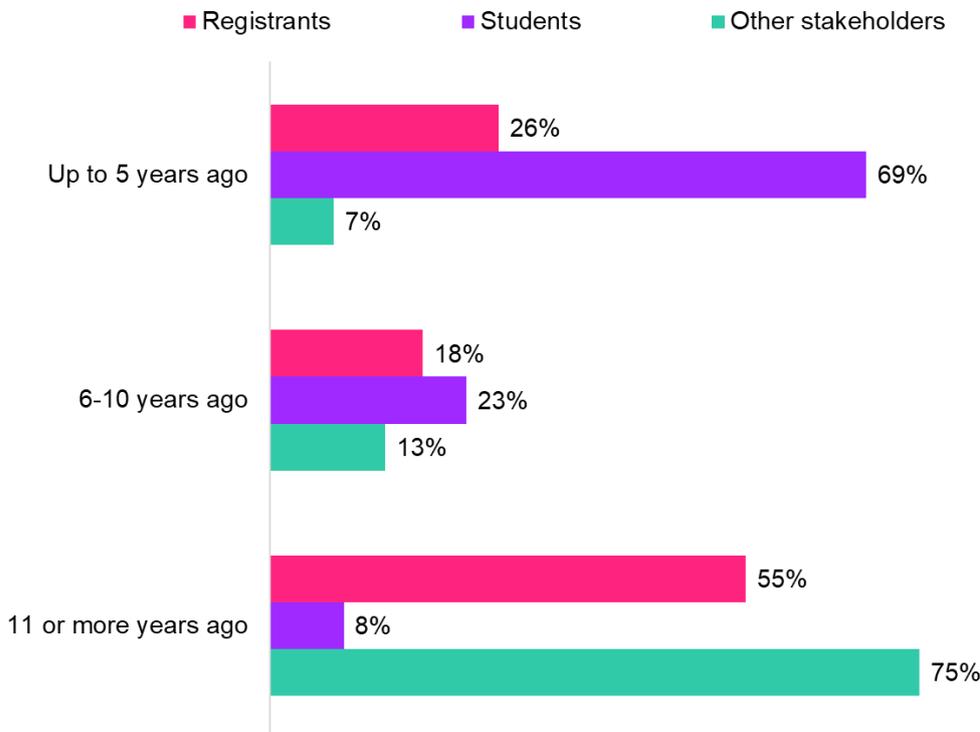
This section explores perceptions of, and attitudes towards, the GDC, including how these are formed. It also considers differences in opinions between groups (registrants, students, and other stakeholders) and what drives those differences.

2.1 Relationship with the GDC

To contextualise the research findings, survey respondents were asked about the duration of their relationship with the GDC. For dental professionals this included how long they had been registered, for students when they first heard about / came across the GDC, and for other stakeholders the length of time they had been involved with the GDC.

Students had encountered the GDC most recently, with just over two in three (69%) reporting that they had heard about the GDC within the past five years. Registrants and other stakeholders hold much longer relationships; for registrants, over half (55%) registered with the GDC over 10 years ago, whilst 75% of other stakeholders had been involved with the GDC for over 10 years.

Figure 3. When did you first become involved with/register with/come across or hear about the GDC?



Base: All registrants (n=3,217), students (n=106) and other stakeholders (n=68)

During the focus group, students reported that they initially learn about GDC's regulatory and disciplinary functions through a number of ways. They mentioned gaining awareness about the GDC during their dental school training, often in preparation for joining the register. Students also gained awareness through anecdotes from tutors and peers about the role of the GDC, which were often focused on negative experiences or punitive consequences.

“It didn't leave any impression on me when I first learnt about them, didn't fully understand what they did then.” (Student – focus group)

Dentists generally reported learning about the GDC during their school training, during lectures on professional standards and regulation, and developed greater awareness by directly engaging with GDC's processes through registration, renewals, and occasional FtP cases or complaints. Perceptions were heavily influenced by colleagues' stories and experiences, reinforcing perceptions of the GDC as punitive.

“Official information from their website, the rest from talking to colleagues / other dentists and hearing their stories.” (Dentist, less than 5 years in the profession – focus group)

Dental care professionals often had some awareness of the GDC early in their careers from their school training but gained more knowledge when they were required to join the register and complete Continuous Professional Development (CPD) courses. Increased knowledge about the GDC's remit often came from colleagues, experiencing registration issues, or FtP cases.

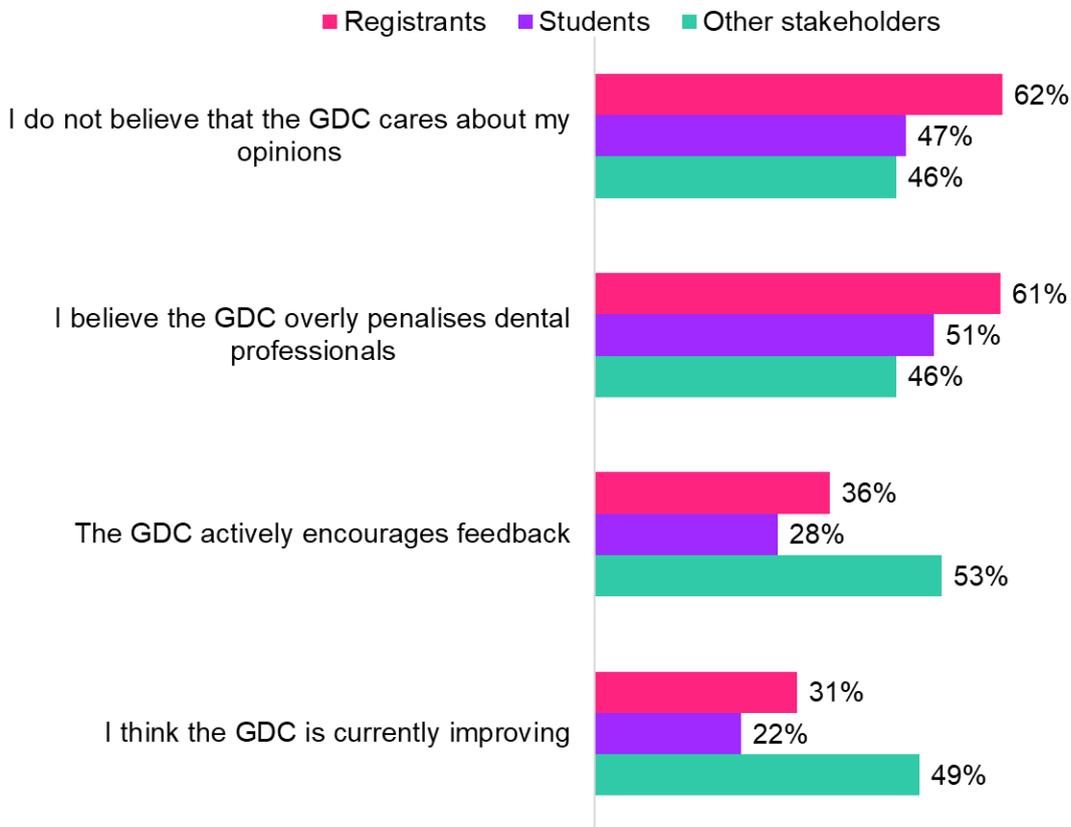
*“I have been inspected as part of an educational institution many times and found it a more pleasant experience if you ask for their guidance rather than treating them as the enemy.”
(Dental technician, over 30 years in the profession – focus group)*

Stakeholders representing professional bodies were often aware of the GDC from the start of their role with the professional body but developed a more detailed understanding through regular engagement and involvement in GDC policy consultations or working groups. For example, dental school leaders talked about engaging with GDC staff on curriculum development and quality assurance matters, while representatives of dental associations mentioned being involved in GDC working groups on issues such as specialty training or scope of practice.

2.2 Attitudes towards the GDC

This survey explored attitudes towards the GDC, including the GDC’s approach to feedback and collaboration. Registrants held largely negative attitudes towards the statements asked about in this question (see Figure 4), with just over three in five (62%) not believing the GDC cares about their opinions and (36%) reporting that the GDC encourages feedback. These figures are broadly comparable with 2020, though there were some positive shifts. For example, there has been a small but statistically significant decline in the proportion of registrants who said that they do not believe that the GDC cares about their opinions (from 66% to 62%).

Figure 4. To what extent do you agree or disagree with each of the following statements? (Net: Agree)



Base: All registrants (n=3,217), students (n=72) and other stakeholders (n=59)

For registrants, those who had been registered with the GDC the longest held more negative perceptions, highlighting the impact of time and experience on perceptions. For example, those who had registered with the GDC over 10 years ago were more likely than those who had registered in the last five years to say that the GDC does not care about their opinions (63% vs. 53%) and overly penalises dental professionals (63% vs. 54%). They were less likely to say the GDC actively encourages feedback (31% vs. 50%).

In the focus groups, many registrants saw the GDC as out of touch with the realities of dental practice and overly focused on punishment rather than on helping registrants with training and development. There was a sense within the profession that the GDC operates in an 'ivory tower', disconnected from the day-to-day realities and pressures facing dental professionals. Many felt the GDC did not understand or care about the pressures they face, with a persecutory rather than collaborative approach.

As indicated during the focus groups, the perceptions of those who had been registered with the GDC the longest were influenced both by personal experiences, stories and rumours they had heard along their professional journey, while more recent registrants had slightly more positive views. There were ingrained fears among registrants of career-ending consequences over small infractions.

Students, who had less direct experience to draw on, were more receptive to learning about the GDC's role in upholding standards.

There were some positive perceptions among other stakeholders with just over half who agreed that the GDC actively encourages feedback (53% vs. 32% who disagreed) and 49% who thought that the GDC is currently improving (compared with 24% who disagreed). Both metrics were higher for other stakeholders compared with registrants and students.

The interviews with other stakeholders spoke to these nuanced views, recognising the GDC's statutory responsibilities and seeing some efforts at improvement over time.

"The wider role that the GDC plays isn't well understood across the profession, and I think that's probably historic. I think the profession saw the GDC as being an ivory tower organisation, remote from what they did, which I know that they are not, but I think that this encouraged engagement has made them more relevant and that has benefited the public, the profession, and the GDC." (Other stakeholder - interview)

2.3 Awareness of GDC Corporate Strategy

Based on the focus group findings, awareness and familiarity with the GDC's current corporate strategy were low among registrants. Most participants could not recall ever hearing about the strategy before, with only a few vaguely remembering seeing a mention of it in a GDC newsletter. When asked what methods would work best for the GDC to communicate about its corporate strategy, participants suggested a range of approaches beyond emails, such as in-person presentations at dental schools for students, webinars, lunch and learn sessions, and concise summaries tailored to each registrant group highlighting the strategy's relevance to them.

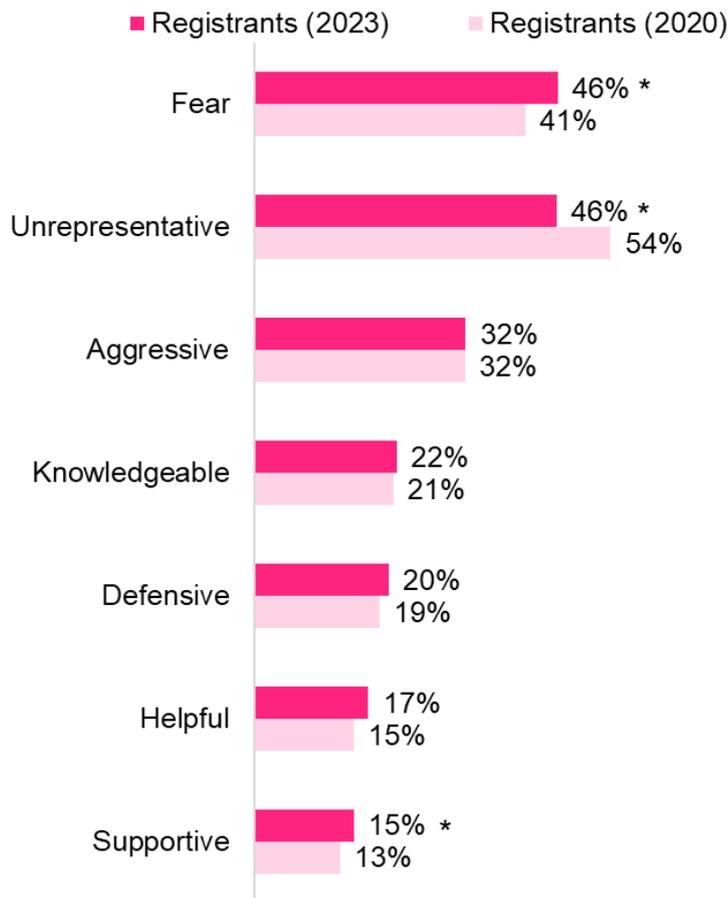
Engagement and interest in proactively seeking out information about the GDC's corporate strategy was limited. However, final year students showed comparatively more interest in understanding the strategy and its potential impact as they prepare to enter the workforce.

“Being in final year, I’m definitely more interested now than I would have been in earlier years. Just because [I’m] going into work etc., [I] think it’s important to be aware of [it].”
(Student – focus group)

2.4 Words associated with the GDC

The survey further explored views of the GDC by asking respondents which words they most associate with the organisation (allowing people to choose up to three). From this list, the words most associated with the GDC among registrants were fear (46%), unrepresentative (46%), and aggressive (32%). Positive terms were less commonly associated: knowledgeable (22%), helpful (17%), and supportive (15%). There was a positive shift for the word unrepresentative among registrants when compared with 2020, with registrants less likely to see the GDC as unrepresentative (down from 54%).

Figure 5. Which of the following words do you associate with the GDC? Please select up to three.



Base: All registrants (n=3,217 in 2023 and n=2,027 in 2020)

Among registrants, dentists were more likely than those in other roles to associate the GDC with fear, at just over seven in ten (72%), which is comparable with 2020 (70%). This is much higher than for dental therapists (46%), dental hygienists (41%), and dental nurses (25%). For dentists, fear was high regardless of how long they have been registered with the GDC. For example, it was 71% among those who had registered within the past five years compared to 72% among those who had registered six or more years ago.

“Since day one of dental school you are reminded that they are something to fear, or at least avoid any direct involvement, they're more of a word that means 'threat'. [It] worsens when you join the workforce.” (Dentist, less than 5 years in the profession – focus group)

Other stakeholders linked the GDC with predominantly negative associations. While 28% of other stakeholders associated the GDC with being knowledgeable, the most common descriptor was unrepresentative (40%), followed by aggressive and defensive (both 34%). Supportive was the word with the fewest mentions (12%). Students saw the GDC slightly more positively compared with registrants and other stakeholders. With students, although fear was also the word most associated with the GDC at just over half (53%), knowledgeable was second (41%).

“It could be possibly the understanding and possibly historically the fact that the GDC seemed to be very reactive and sensitive. So, one patient complaint could trigger a full investigation. It's the fear of the power of the regulator and whether or not the action they took was proportionate for the sort of case that was there.” (Other stakeholder – interview)

While these negative associations dominated, some more neutral or positive themes also emerged within the focus groups. Some participants, particularly students and other stakeholders, recognised the importance of an independent regulator to uphold standards and protect the public. A few registrants in the focus groups noted some positive developments in recent years, such as a more personable approach from the GDC. The introduction of case examiners for FtP cases and stricter rules for overseas dentists were also mentioned by registrants, particularly dentists, in a positive light.

“I agree that they do seem to be making more effort with communicating with the profession since I graduated, with regular emails and more updates given to us.” (Dentist, less than 5 years in the profession – focus group)

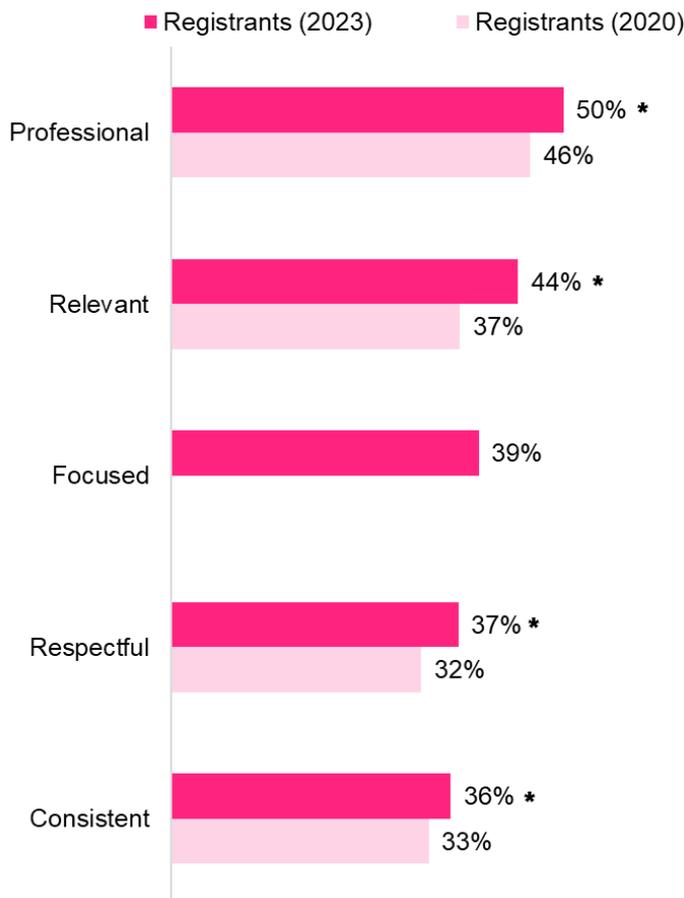
“Closing the loophole allowing overseas dentists to practice as DCPs without training / exams was positive.” (Dental hygienist, 6-10 years in the profession - focus group)

“Mine has actually improved, I do feel that their communication style is much more transparent and more in depth. I do feel that they are trying to overall change how they are viewed, more approachable.” (Dental hygienist, 21-25 years in the profession - focus group)

“S 60 Order and introduction of case examiners / a pilot scheme where complaints were sent back locally to resolve. I think that was successful / [and] undergrad roadshows to speak to students and show the 'face' of the GDC as engaging and not a feared organisation.” (Dentist, more than 21 years in the profession – focus group)

Survey respondents were then asked to what extent they agreed or disagreed that the GDC could be associated with a series of words originally drawn from the GDC Corporate Strategy 2020-2022 and retained to explore change over time. There was positive movement compared with results from the 2020 survey. Among registrants, the GDC was most associated with being professional (50%) and relevant (44%), both of which have increased since 2020 (from 46% and 37% respectively). Thirty-nine percent of registrants saw the GDC as ‘focused’ – a word that was added to this survey question for the first time in 2023.

Figure 6. To what extent do you agree or disagree that the GDC is... (Net: Agree) – Top 5 shown



Base: All registrants (n=3,217 in 2023 and n=2,027 in 2020).

Note: the “focused” attribute was new for the 2023 survey

Among registrants, dentists were more likely to disagree than agree that they associated the GDC with many of the words used. This includes fair (69% disagreed vs. 13% agreed), efficient (68% disagreed vs. 14% agreed) and effective (66% disagreed vs. 17% agreed). A similar pattern was evident among dental technicians: fair (48% agreed vs. 26% disagreed), efficient (47% agreed vs. 21% disagreed) and effective (51% agreed vs. 25% disagreed).

There were more mixed views among dental hygienists and dental therapists. Dental hygienists reported higher disagreement than agreement for some of the word associations (e.g. fair – 42% disagreed and 34% agreed, and efficient – 49% disagreed vs. 34% agreed), but were more likely to agree than disagree that the GDC was relevant (58% vs. 26%). Similar patterns were seen among dental therapists: fair (44% disagreed vs. 30% agreed), efficient (49% disagreed vs. 32% agreed) and relevant (54% agreed vs. 27% disagreed).

For dental nurses this pattern was reversed as they were more likely to agree than disagree with many of the statements: fair (39% agreed vs. 32% disagreed), efficient (45% agreed vs. 30% disagreed) and effective (47% agreed vs. 27% disagreed).

Highlighting the link between length of service and perceptions, those who had registered with the GDC within the past five years felt more positively towards the GDC than those who had registered six or more years ago. For example, those who had registered within the past five years were more likely to agree that the GDC is professional (63% vs. 46%), relevant (59% vs. 39%) and focused (54% vs. 34%). This suggests there could be a 'tipping point' where opinions shift to become more negative, which could be driven by their own past experiences, what they have heard from others over time or well-known legacy GDC decisions.

For students and other stakeholders, professional (82% and 59% respectively), relevant (80% and 58% respectively) and focused (58% and 55% respectively) were also the most associated words among those listed.

2.5 Understanding perceptions of the GDC

Overall perceptions of the GDC were more negative than positive; this was the case for registrants (56% negative vs. 20% positive), other stakeholders (52% negative vs. 25% positive) and students (41% negative vs. 26% positive). Levels of positive perceptions were broadly comparable across all three groups. A higher proportion of registrants in 2023 felt positively towards the GDC compared with 2020 (16% in 2020 to 20% in 2023), and fewer felt negatively (65% in 2020 to 56% in 2023).

Students felt the least negatively towards the GDC, but a higher proportion felt neutral (31%, compared with 22% for registrants and 19% for other stakeholders) and therefore students did not have significantly higher positivity towards the GDC than other stakeholders and students.

Figure 7. What are your perceptions of the GDC at present?

	Registrants	Other stakeholders	Students
Positive	20%	25%	26%
Neutral	22%	19%	31%
Negative	56%	52%	41%
Don't know	1%	5%	2%

Base: All registrants (n=3,217), other stakeholders (n=64) and students (n=88)

Among registrants, dentists' negative opinions of the GDC were evident, with about four in five (81%) reporting having negative perceptions of the GDC, with close to half (48%) feeling 'very negative' and about a third (32%) feeling 'fairly negative', (vs. 7% reporting having positive perceptions). By contrast, dental nurses and dental therapists were more likely to report feeling positively towards the GDC (30% and 26% respectively).

Within the focus groups, dentists held the most negative perceptions of the GDC, with many describing a culture of fear and persecution. They often felt that the GDC was disproportionately focused on punishing dentists for minor infractions. Dentists also mentioned that they were afraid of the GDC and perceive it as an intimidating, punitive body. For some, the GDC was seen as 'the big bad wolf' that is out to get registrants. In particular, the GDC's FtP process was widely feared. Dental nurses, dental hygienists, and dental technicians generally shared many of the same negative perceptions of the GDC, but often to a lesser degree. However, across all focus groups, some registrants acknowledged the importance of the GDC's role in maintaining standards and public trust.

Length of time since registrants had registered with the GDC was also linked to perceptions, with those having registered in the last year being the most positive (41%). This was considerably higher than those who had registered six or more years ago (16%). The focus groups also highlighted that more recently qualified registrants tended to have more positive perceptions of the GDC compared with their more experienced colleagues. In contrast, registrants with more than 10 years' experience were often the most critical of the GDC. They frequently drew on their own negative experiences or those of colleagues to support their view of the GDC as punitive and out of touch.

While negative perceptions within the focus groups were common across both NHS and private practitioners, those working primarily in the NHS tended to be particularly critical of the GDC. They often felt that the GDC did not understand the specific challenges of NHS dentistry, including time pressures, resource constraints, and complex patient needs.

“In some rare cases, I think some of the most extreme cases are justified for erasure from the register, but otherwise I feel it is unforgiving towards dentists, makes it even more difficult for dentists to work in the NHS and therefore on the whole, it is a negative result for the public.” (Dentist, less than 5 years in the profession – focus group)

Through the survey, personal or close experiences were also shown to strongly influence perceptions of the GDC. Experiences of colleagues and friends were influential for registrant, student, and other stakeholder perceptions of the GDC, with about half of registrants (53%) and other stakeholders (51%) and 39% of students reporting these experiences as being influential. This was reinforced during the focus groups with registrants, which revealed that a significant influence on perceptions of the GDC came from informal interactions and anecdotes shared within the dental community. These conversations often centred on negative experiences or ‘horror stories’, which although hearsay, tended to reinforce a collective sense of grievance and mistrust.

Direct contact with the GDC played a particular role in influencing perceptions of other stakeholders. At 60%, this was much higher than for registrants (23%) and students (2%).

The focus groups and interviews highlighted that participants’ interactions with the GDC take a variety of forms, which can influence perceptions in different ways:

- **Registration and annual renewal processes:** For many registrants, their primary interaction with the GDC is through the annual process of renewing their registration and submitting CPD records. While this was often seen as a straightforward administrative task, any difficulties or delays in the process can lead to frustration and negative perceptions. Some participants reported issues with the online registration system or with getting timely responses to queries, which reinforced a view of the GDC as inefficient and unresponsive.
- **FtP proceedings:** Registrants who had been through an FtP investigation or hearing tended to have the most negative perceptions of the GDC. Negative perceptions about GDC / FtP are both driven by personal lived experiences (in some cases), but more generally are the result of dental professionals hearing or reading about the experiences of peers.
- **Engaging with GDC consultations and events:** Other stakeholders and some registrants reported participating in GDC consultations, workshops or events. While these were often seen as positive opportunities for dialogue and influence, some stakeholders expressed frustration that the dialogue seemed ‘one way’ and their input did not always translate into tangible change.

The way the GDC communicates also played a key role in shaping perceptions for close to half (48%) of other stakeholders and one in three (33%) registrants. A few other stakeholders indicated during the interviews that there is still a significant need for greater transparency from the GDC, particularly in explaining the rationale behind decisions and making information more accessible. Some registrants, particularly those in educational or management roles, reported contacting the GDC for guidance on specific issues such as registration requirements for overseas qualified dental professionals or interpretation of standards. The quality of these interactions varied, with some describing helpful and informative conversations while others found the advice unclear or inconsistent. Where registrants felt that their concerns were not heard or addressed, this could reinforce negative perceptions of the GDC as distant and unhelpful.

Some qualitative participants reported constructive engagements that challenged their preconceptions. In one example, the participant had contacted the GDC for advice or guidance and found staff to be helpful, knowledgeable and responsive. These interactions challenged previous perceptions of the GDC as a faceless, bureaucratic organisation and showed the potential for more supportive engagement. However, the dominant theme was of interactions that left some registrants feeling unsupported, unheard and unfairly treated. Transforming these day-to-day experiences of dealing with the GDC will be key to building trust and confidence in the regulator over time.

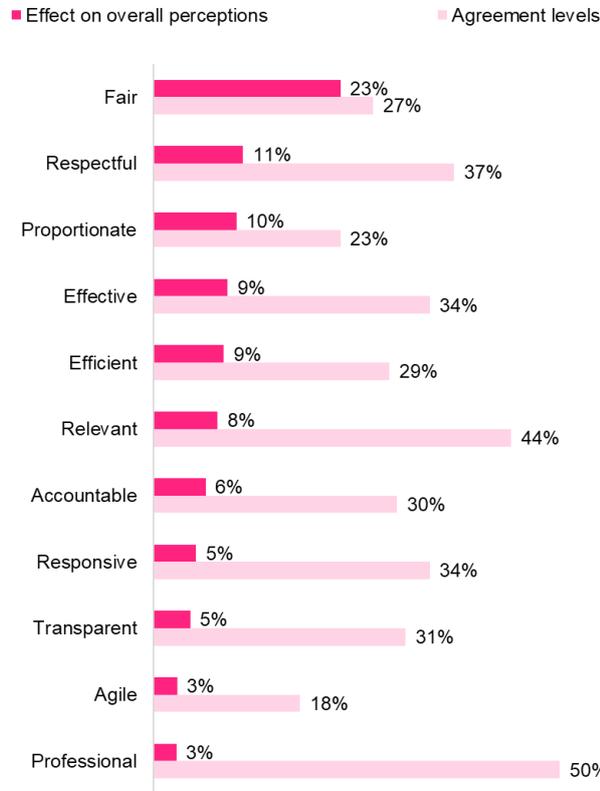
2.6 Drivers of perceptions among registrants

From the survey data, we conducted Key Driver Analysis (KDA) among registrants to understand what drives perceptions of the GDC.

Figure 8 shows the impact that each component (e.g. fair, effective) had on overall perceptions of the GDC in comparison to the proportion who associated the GDC with each word within the survey. Perceptions that the GDC is fair, respectful and proportionate were most likely to have an impact on overall perceptions. In contrast, the GDC being seen as agile and professional were less likely to have an impact. Therefore, whilst it is encouraging that being seen as professional is the most associated attribute of the GDC, the analysis revealed that this does not have a significant impact on overall perceptions.

The survey data showed that around one in four respondents agreed that the GDC is fair (27%) and proportionate (23%). Agreement was slightly higher when thinking about the GDC being respectful (37%), though still not a majority. Given the KDA revealed that these associations had a large impact on overall perceptions of the GDC, these are key metrics to focus on.

Figure 8. The impact of the components of perceptions on overall perceptions of the GDC in comparison to agreement levels



Base: All registrants in 2023 (n=3,217)

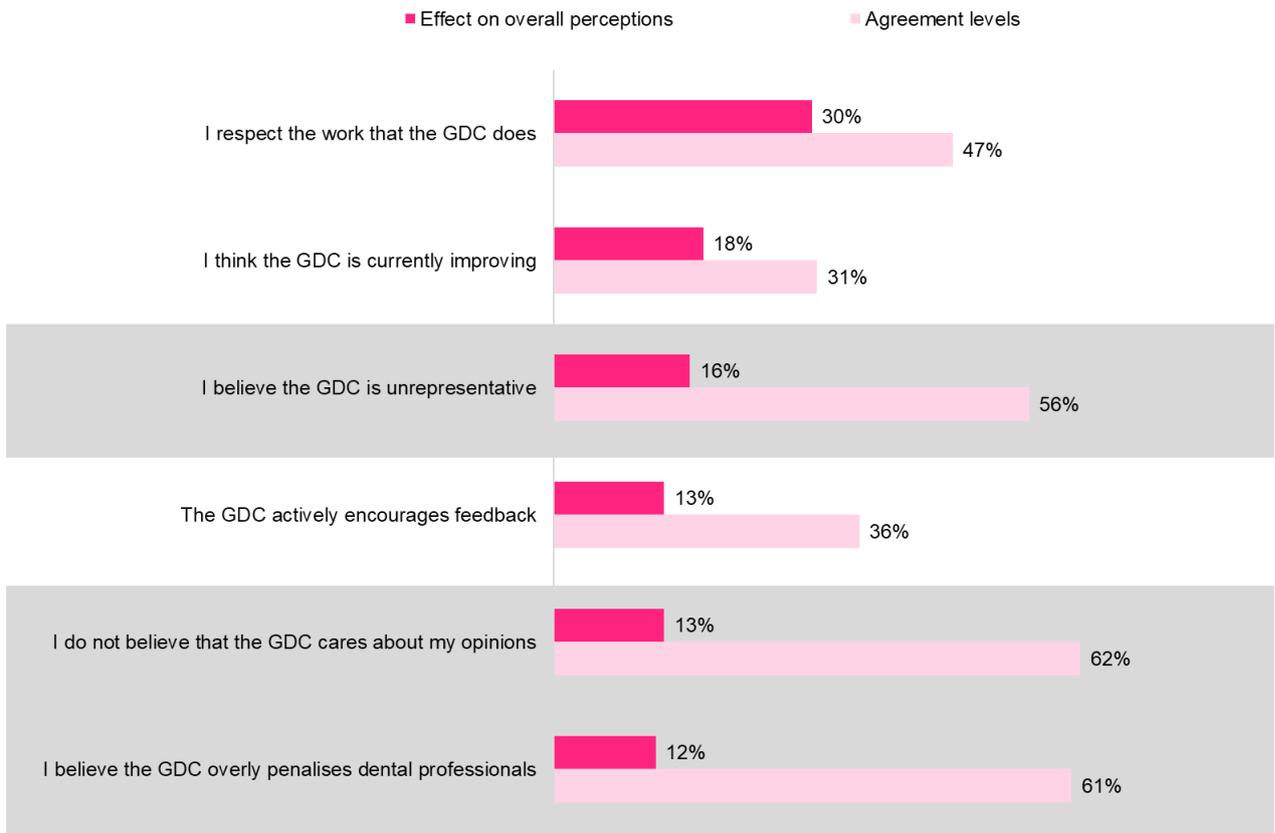
The groups of registrants least likely to associate the GDC with the most impactful perceptions (i.e. fair, respectful, proportionate) include:

- *Fair*: dentists (13% agreed vs. 69% who disagreed), registrants who identify as LGBTQ+ (23% agreed vs. 60% who disagreed) and men (13% vs. 71% who disagreed)
- *Respectful*: dentists (20% agreed vs. 59% who disagreed) and registrants who identify as LGBTQ+ (22% agreed vs. 56% who disagreed)
- *Proportionate*: dentists (12% agreed vs. 66% who disagreed), dental technicians (17% agreed vs. 44% who disagreed) and men (13% agreed vs. 68% disagreed)

A second KDA model was conducted using a series of perception statements, rather than word associations, which explored perceptions of the GDC. This revealed that “*I respect the work that the GDC does*” has the largest positive impact on overall perceptions of the GDC. Whilst close to half (47%) of registrants said that they respect the work the GDC does, a similar proportion (52%) either disagreed or were neutral. Those least likely to agree that they respect the work of the GDC included dentists (30% agreed vs. 48% disagreed), dental technicians (34% agreed vs. 40% disagreed), those who identify as LGBTQ+ (34% agreed vs. 50% disagreed) and men (26% agreed vs. 52% disagreed).

This model also revealed that believing that the GDC is unrepresentative is one of the perceptions most likely to have a negative impact on overall views. Not believing the GDC cares about their opinions and thinking that the GDC overly penalises dental professionals also negatively impact overall perceptions. Given the majority of registrants agreed with each of these three statements in the survey, this highlights the importance of working to shift some of these negative perceptions in order to improve overall perceptions.

Figure 9. The impact of perceptions on overall perceptions of the GDC in comparison to reported perceptions of the GDC.



Base: All registrants in 2023 (n=3,217). Note: statements that had a negative impact on overall perceptions are highlighted in grey in the figure

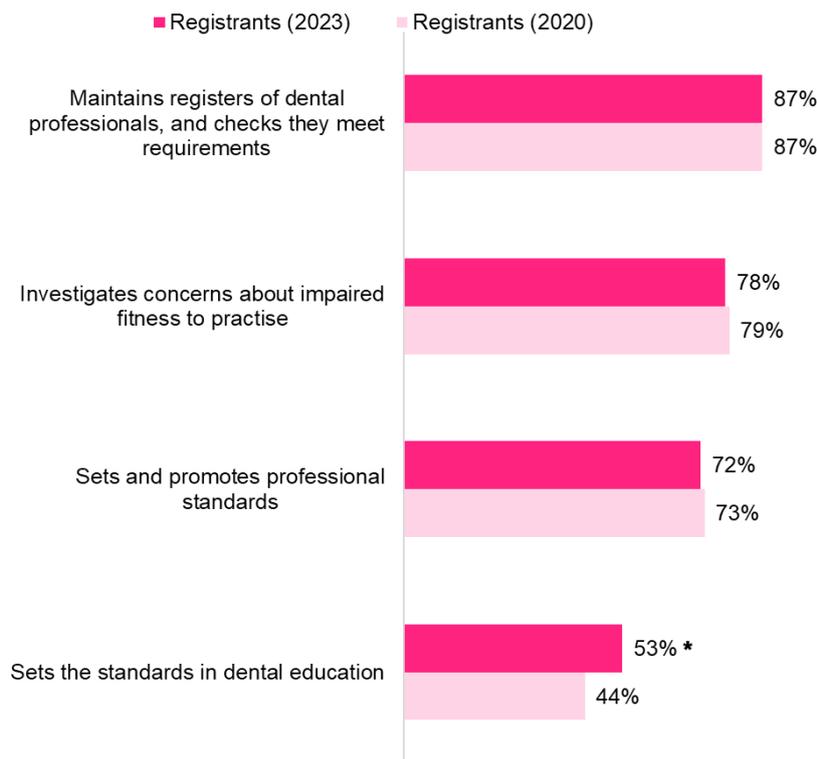
To improve perceptions of the GDC being unrepresentative, communications could have more personality and empathy to reflect the GDC as less of an austere organisation that exists to judge and discipline, and more of a listening organisation that promotes best practice.

The focus groups showed a need for registrants to be ‘heard’ by the GDC. Many mentioned that email correspondence with the organisation is generally one way – that it is set to ‘transmit’ rather than ‘receive’. This was also the case for listening events, which although helpful, could accommodate more of a two-way dialogue with the profession than they do currently which could contribute to shifting perceptions of the GDC caring about opinions.

2.7 Perceptions of the role and remit of the GDC

The research also explored what dental professionals, other stakeholders, and dental students understood to be the GDC’s core functions, and how well the GDC was performing in these areas. Survey respondents were asked to indicate what they considered the functions of the GDC to be, from a list of nine items, with the GDC’s four core functions contained within this list. Among registrants, there was generally high awareness of the core functions, with maintaining the register (87%), investigating concerns about impaired fitness to practise (78%), and setting and promoting professional standards (72%) most mentioned. The core function registrants were least likely to associate with the GDC was setting the standards in dental education (53%). Understandings of the GDC’s functions were relatively consistent with results from 2020, with the exception of setting standards in dental education where registrants were now more likely to recognise this as a function (rising from 44% to 53%).

Figure 10. Which of the following do you consider to be functions of the GDC? Please select as many as you feel apply. (Core functions shown).



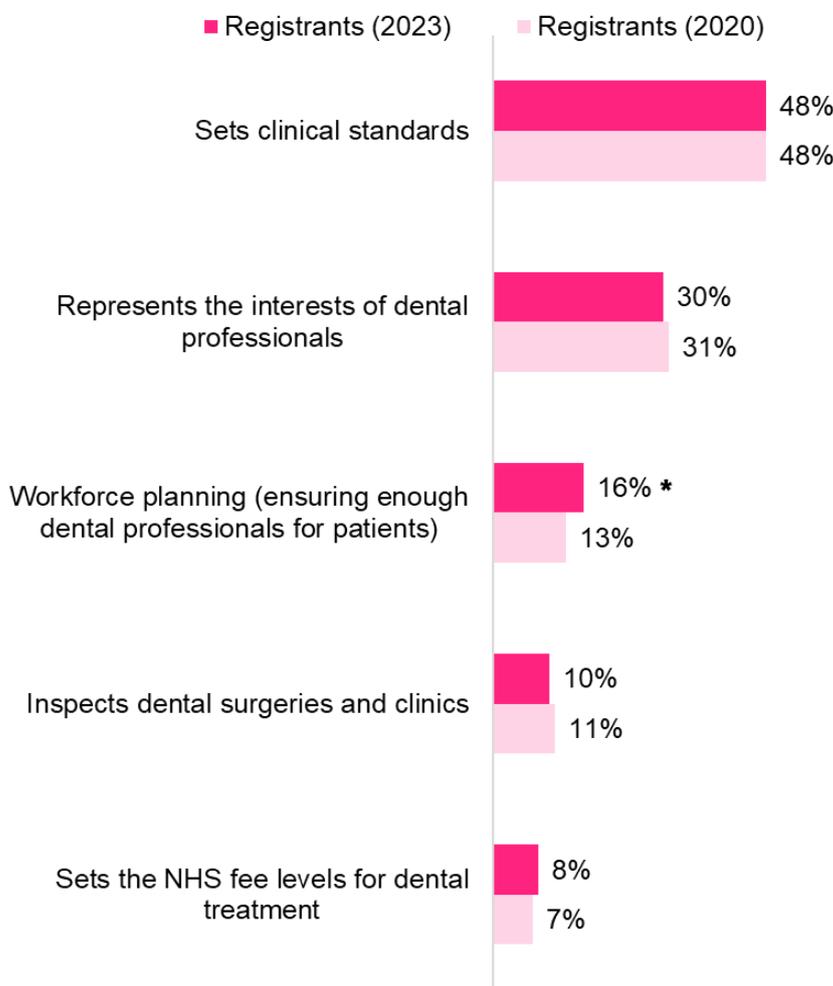
Base: All registrants (n=3,217 in 2023 and n=2,027 in 2020)

Students and other stakeholders were also more likely to correctly identify core functions than select the misconceptions. For example, 89% of other stakeholders and 85% of students knew that the GDC maintains the register.

The most common misconception about the GDC among registrants remained that it sets clinical standards (48% - the same proportion as 2020), followed by representing the interests of dental professionals (30%). The least common misconceptions about the GDC were that it sets NHS fee levels for dental treatment (8%) and that it inspects dental surgeries and clinics (10%). There was a small increase in the proportion who thought workforce planning was a function of the GDC (from 13% to 16%).

The proportion of students (66%) who thought that the GDC sets clinical standards was higher than for registrants and other stakeholders.

Figure 11. Which of the following do you consider to be functions of the GDC? Please select as many as you feel apply. Misconceptions shown.



Base: All registrants (n=3,217 in 2023 and n=2,027 in 2020)

Using their responses to the question above, all survey respondents were classified into those with a good or poor understanding of what the GDC does. This classification has been used for subsequent analysis of the data, for example looking at overall perceptions by knowledge. Those classified as having a good understanding correctly identified 3 or 4 (out of 4) of the GDC’s activities and either had no misconceptions or just 1 (of a possible 5). Those classified as having a poor understanding selected 2, 3, 4 or 5 (out of 5) of the misconceptions about GDC or responded with ‘don’t know’. It is worth noting that this classification does not include all respondents given it is those with the best and worst understanding.

Other stakeholders were most likely to have a good understanding of the GDC’s activities (41%), which is not surprising given that many of them have a remit to be engaged with the GDC and the profession and have spent significant time in their role. This was followed by registrants (24%) and students (15%). The proportion having a ‘poor understanding’ ranged from 25% (for other stakeholders) to 37% (for students).

Figure 12. Level of understanding of the GDC by group

	Registrants	Other stakeholders	Students
Good understanding	24%	41%	15%
Poor understanding	32%	25%	37%

Base: All registrants (n=3,217), other stakeholders (n=68) and students (n=106)

Respondents classified as having a good understanding of the GDC tended to hold more negative perceptions of it. For example, among registrants, just over two in three (69%) of those with a good understanding held negative perceptions of the GDC, higher than those with a poor understanding (43%). This follows on from the finding that those involved with the GDC for a longer time felt more negatively, as those with a good understanding were more likely than those with a poor understanding to have been registered with the GDC for six or more years (82% vs. 64%).

The survey also asked respondents how well they think the GDC currently performs across a variety of core activities. Students felt more positively about the GDC’s performance in comparison to registrants and other stakeholders. Figure 13 shows how well (either fairly or very) each group thought the GDC was performing in the areas covered.

Figure 13. How well does the GDC currently perform in the following core areas? (Net: Well).

	Registrants	Other stakeholders	Students
Completing the Annual Renewal process	81%	66%	n/a

	Registrants	Other stakeholders	Students
Monitoring dental professionals' CPD completion at cycle end (5-year cycle)	76%	58%	n/a
Setting Standards for the Dental Team	73%	81%	86%
Providing guidance on Standards to dental professionals	71%	78%	85%
Promoting professionalism with dental professionals	61%	66%	n/a
Setting learning outcomes	56%	49%	73%
Quality assuring dental education and training	52%	42%	63%
Reporting of fitness to practise outcomes	45%	68%	n/a
Processing applications to the Registers	45%	34%	n/a
Setting Standards for new or emerging practice	44%	42%	51%
Investigating concerns about registrants' fitness to practise	37%	44%	n/a
Investigating illegal practice in the UK	35%	32%	53%
Facilitation of fitness to practise hearings	32%	47%	n/a

	Registrants	Other stakeholders	Students
Promoting professionalism with students	n/a	n/a	84%

Base: All registrants (n=3,217), other stakeholders (n=59) and students (n=73)

The survey data suggests that the GDC was generally seen as performing well when it came to setting the standards in education (e.g. promoting professionalism, setting learning outcomes and quality assuring). This was particularly the case among students who felt the GDC was doing well at promoting professionalism with students (84%), setting learning outcomes (73%) and quality assuring dental education and training (63%).

The GDC was perceived as performing well at setting and promoting professional standards, as was the case in 2020. This was especially the case for setting standards for the dental team (from 73% to 86% across the groups) and providing guidance on standards to dental professionals (71% to 85% across the groups).

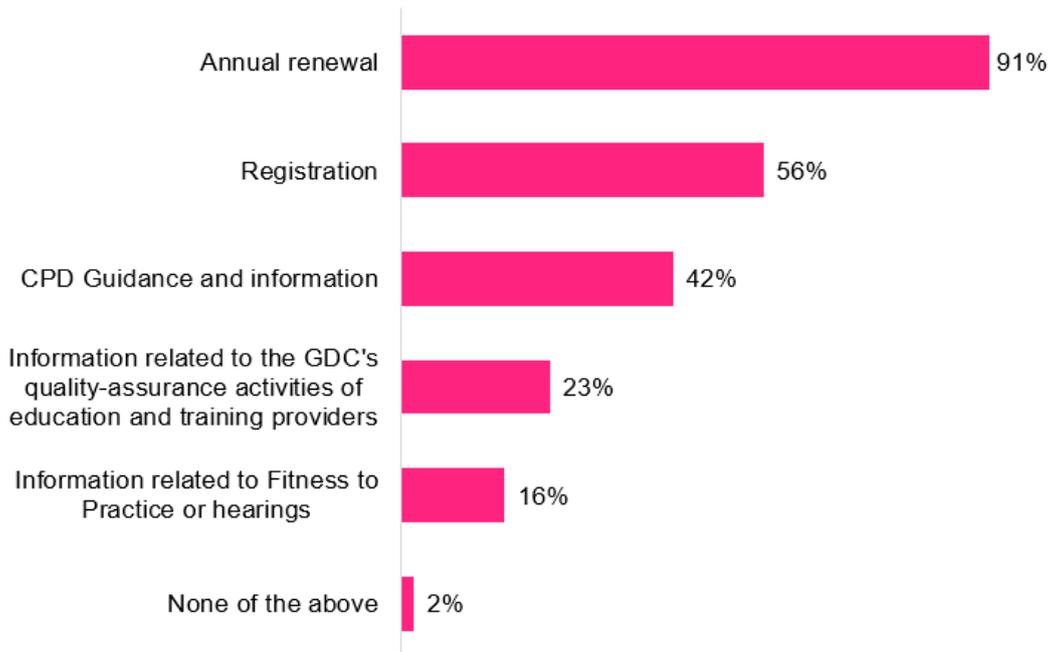
Two areas where the GDC was seen as doing less well were setting standards for new or emerging practice (42% to 51% across all groups) and investigating concerns about registrants' fitness to practise (37% for registrants and 44% for other stakeholders). The focus groups and interviews revealed that whilst the importance of investigating FtP cases was recognised, many participants felt that the GDC's approach was disproportionate and failed to strike the right balance between public protection and fairness to registrants. The GDC was also seen as doing less well at investigating illegal practice in the UK (32% to 53% across all groups) and facilitating fitness to practise hearings (32% for registrants and 47% for other stakeholders).

3 Registrants’ communication with the GDC

3.1 Communications received

When asked which subjects respondents received GDC communications about, it was most common for registrants to recall receiving information relating to annual renewal (91%), followed by information relating to registration (56%). Just over four in ten (42%) registrants recalled receiving communication on CPD guidance and information, whilst just over one in five (23%) recalled receiving information related to the GDC’s quality-assurance activities of education and training providers, and 16% reported receiving information related to FtP or hearings. A minority (2%) could not recall receiving any communications from GDC.

Figure 14. Which, if any, of the following subjects do you currently receive communications from the GDC about? Please select as many as apply.



Base: All registrants (n=3,217)

Registrants aged 18-30 were less likely than registrants aged over 51 to report having received communications on almost every subject. For example, 38% of registrants aged 18-30 mentioned receiving communications relating to CPD guidance and information compared with 50% of those aged 51-64 and 57% of registrants aged 65+. The exception was information related to the GDC’s quality-assurance activities, where 23% of all registrants reported receiving information on this topic and there were no notable differences by age groups. These findings imply a disconnect between younger registrants and GDC communications, where younger registrants are either not receiving relevant communications, or are not engaging with / remembering the communications they do receive.

The types of GDC communications remembered varied by registrant role. Dental nurses and dental hygienists were more likely than dentists to recall having received information about the GDC’s quality-assurance activities (26% for both dental nurses and dental hygienists vs. 19% dentists). On the other hand, dentists were more likely than dental nurses and dental hygienists to report having received communications about annual renewal (97% vs. 87% dental nurses and 88% dental hygienists).

Qualitative findings reflected this, as most registrants said they received email communications about annual renewal and registration as expected, with some participants noting that they also received CPD updates. The majority also recalled receiving email newsletters and those they remembered included news items, regulatory updates, policy announcements, and seasonal reminders (e.g. about ARF payments or CPD deadlines).

3.2 Usefulness of communications

The survey also asked respondents how useful they found GDC communications. The majority (59%) of registrants found GDC communications useful: 13% found them very useful and 46% found them fairly useful. About one in three (34%) registrants did not find GDC communications useful.

Figure 15. In general, how useful do you find communication from the GDC?

All registrants	
Very useful	13%
Fairly useful	46%
Not very useful	22%
Not at all useful	11%
Net: Useful	59%
Net: Not useful	34%
Don't know	7%

Base: All registrants (n=3,217)

Seven in ten (70%) of those who had been registered with the GDC for less than one year reported that they felt communications were useful, compared with about half (51%) of those who had been registered for 11-15 years and 63% of those who had been registered for over 30 years. This dip in the perceived usefulness suggests that GDC communications are considered most useful for those less familiar with and those with a long history and familiarity with the GDC

In the focus groups, dentists who had joined the profession in the last five years said that whilst they felt that the information was not always relevant to them, they would still look through any email communications to ensure that they stayed informed. However, it was dentists who had been registered for over six years who most frequently mentioned feeling that the communications were not useful or relevant to them and were therefore less likely to read them. This lack of engagement from more established dentists could be influenced by the prevailing negative sentiment towards the GDC within this group. Among dentists who have been on the register the longest, there was also a perception that communications served mostly to promote the work of the GDC. Some noted feeling that communications did not tackle the concerns of dental professionals and were ‘out of touch.’

“Depends on what it says, [I] have a quick scroll and see if anything stands out.” (Dentist, less than 5 years in the profession – focus group)

“Not that useful... [it is] not tackling dental professionals’ concerns.” (Dentist, between 6-20 years in the profession – focus group)

“As an NHS Dentist there is no content that they share that is relevant to a dentist struggling in the NHS.” (Dentist, more than 21 years in the profession – focus group)

Perceived usefulness of communications varied slightly by registrant age. Registrants aged 18-30 were more likely than registrants aged 51-64 to find GDC communications not at all useful (15% vs. 8% 51-64). Some younger registrants attributed this perceived lack of usefulness to its lack of relatability for them.

“The text is often boring and not catered to younger audiences.” (Registrant, 11-15 years in the profession – online survey)

A high proportion of dental nurses (63%), dental hygienists (63%), and dental therapists (66%) viewed communications as useful, compared with 39% of dental technicians. For registrants who did not find communications useful, the findings showed that a primary reason for this was because respondents felt that communications were overly aimed at dentists rather than at a range of dental professionals.

“It all relates to dentists.” (Registrant, 11-15 years in the profession - online survey)

During the focus groups, dental hygienists and dental nurses tended to report feeling that the information communicated by the GDC was useful, as they preferred to be kept up to date and to be informed about any news or changes that may impact them. Despite this greater appetite for information, there tended to be little in communications that specifically addressed their professional interests.

“I sometimes read them but most of the time they seem more for the likes of dentists, therapists and employers rather than for nurses.” (Dental nurse, 16-20 years in the profession – focus group)

“I find it useful, it can be lengthy, but I would rather be informed than not!” (Dental hygienist, 20-25 years in the profession – focus group)

Another reason given among registrants for the lack of usefulness of GDC communications was the long length of messages, which made it difficult to find time to read them during a working day.

*“Email updates often aren’t concise enough for me to read during my busy working day. Would be better to provide summaries with a way to then access further information.”
(Registrant, 11-15 years in the profession - online survey)*

Some registrants who did not find GDC communications useful also attributed this to the impersonal tone of messages or that they are a political means of promoting the GDC.

“Very authoritative messages, not friendly” (Registrant, over 30 years in the profession - online survey)

“Most communications feel like political spin to justify the GDCs shortcomings” (Registrant, 11-15 years in the profession - online survey)

“They are normally blowing their own trumpet.” (Registrant, over 30 years in the profession - online survey)

These sentiments were further brought to life in the focus groups, where views were expressed that GDC communications were sometimes exercises in self-promotion, did not address the concerns and issues of professionals, were not relevant for their specific professional group, or felt too lengthy.

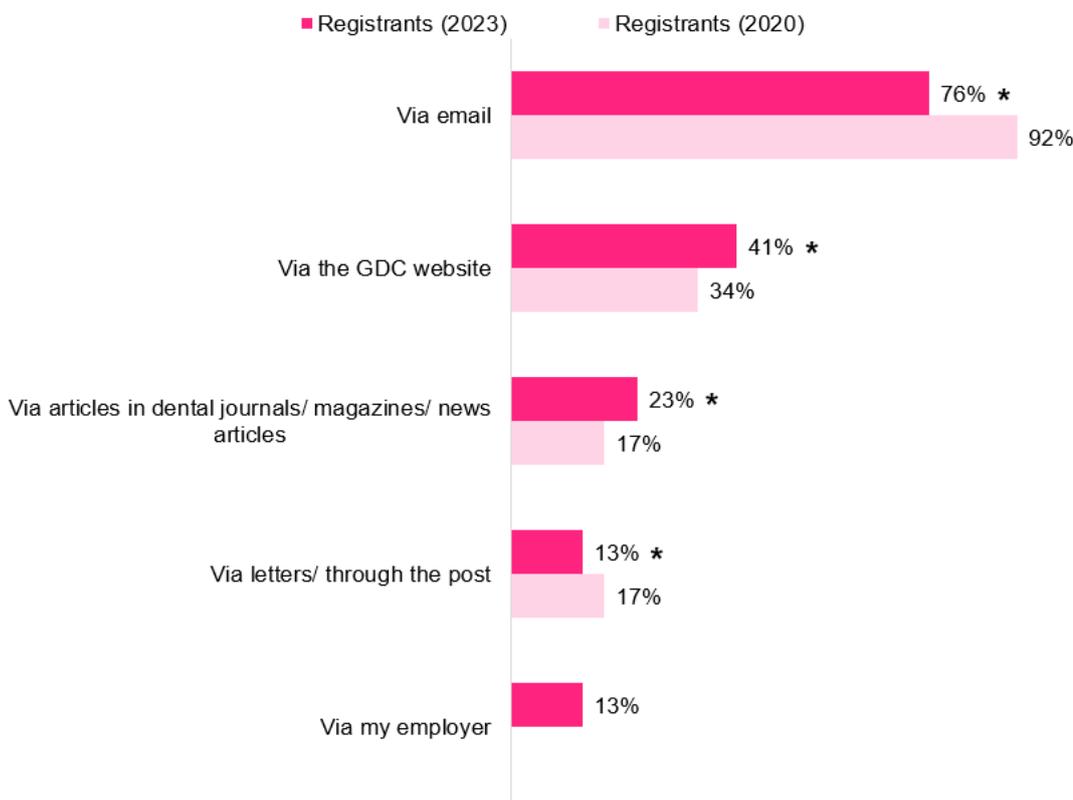
“It just contains things that do not interest me and [are] irrelevant to my practice as a dentist.” (Dentist, less than 5 years in the profession – focus group)

“In terms of GDC content shared, there isn’t much relevant material for dentists except various stats on FtP hearings / [numbers] of registrants etc.” (Dentist, more than 21 years in the profession – focus group)

3.3 Communication format and preferences

The survey asked respondents how they typically heard or read about the GDC. The most common source for registrants was email (76%), although this has decreased by 16 percentage points from 92% in 2020. Approximately four in ten (41%) registrants typically heard about the GDC through the GDC website, an increase compared with 34% in 2020. The proportion of registrants hearing about the GDC through articles in dental journals / magazines / news articles also increased compared with 2020, from 17% to 23%. However, fewer registrants typically heard about the GDC through letters, with only 13% reporting this source in 2023, down from 17% in 2020.

Figure 16. How do you typically hear or read about the GDC? Please select all that apply.



Base: All registrants (n=3,217 in 2023 and n=2,027 in 2020)

Registrants aged 18-30 were more likely than others to hear about the GDC through their employer (20%, decreasing to 10% for those aged 51-64) and Facebook (13%, decreasing to 6% for those aged 51-64). Conversely, registrants aged over 51 were more likely than their younger colleagues to hear about the GDC via articles in dental journals or magazines (38% of those aged 65+ and 31% of those aged 51-64, decreasing to 20% for those aged 18-30), and through the chair’s blog posts (15% of those aged 65+, 8% of those aged 51-64, decreasing to 2% for those aged 18-30).

Similarly, length of registration was linked to what communication channels were used. Those who had been registered with the GDC for more than 30 years were more likely than those who had recently registered to typically receive information about the GDC through formal communication channels including conferences and workshops (14% vs. 3% of those who had been registered for less than one year), articles in dental journals or magazines (38% vs. 16% of those who had been registered for less than one year), press releases (14% vs. 3% of those who had been registered for less than one year) and the Chair's blog post (13% vs. 3% of those who had been registered for less than one year).

Dentists were the group most likely to have reported typically receiving information about the GDC in dental journals or magazines (30% dentists, 16% dental nurses, 23% dental therapists), and Facebook (17% dentists, 6% dental nurses, 9% dental therapists). Conversely, dental therapists (55%) and dental hygienists (49%) were most likely to have reported using the GDC website (compared with 41% of dentists).

In the focus groups, many participants, particularly dentists, reported reading about the GDC in dental trade publications such as the *BDJ*, *Dentistry* and *The Probe*, which often featured articles on GDC policy changes, FtP cases and opinion pieces on regulatory issues. Some registrants also followed dental news websites and blogs for updates and commentary on GDC matters. Registrants thought that the coverage often highlighted perceived shortcomings of the GDC, such as lack of engagement on key issues, ineffective enforcement of standards, and problems with the FtP and CPD processes. The focus on negative stories and opinions may contribute to the generally poor perception of the GDC within the profession.

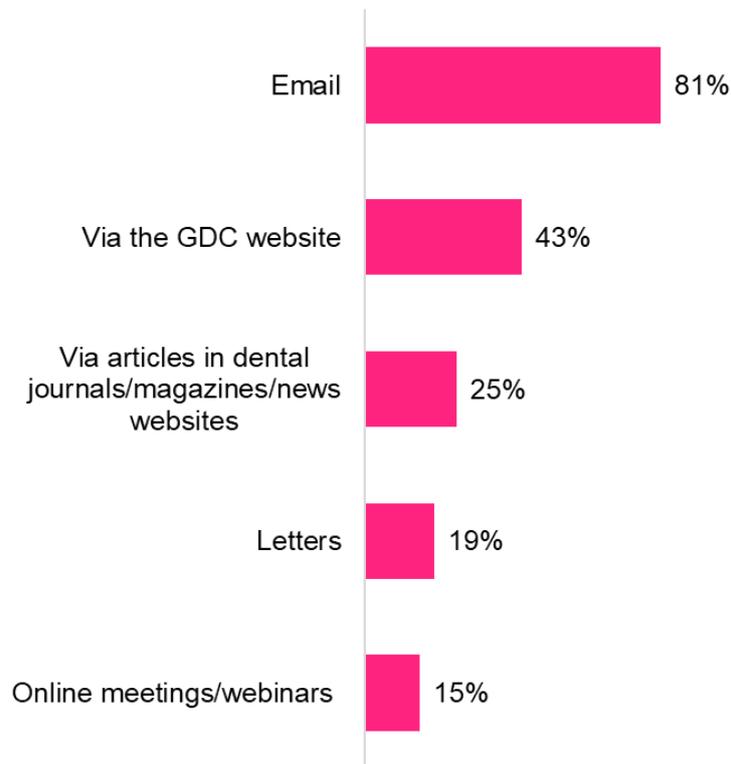
“There are some forums that delight in knocking the GDC, so I always like to get information from the horse's mouth instead, even if it tends to be self-congratulatory.” (Dentist, more than 21 years in the profession – focus group)

Registrants often heard about the GDC through their professional associations and trade unions, such as the British Dental Association (BDA), British Association of Dental Nurses (BADN) and British Association of Dental Therapists (BADT). These organisations provided regular updates on GDC developments, as well as guidance and support for members on regulatory matters.

Registrants were also asked what their preferred ways of hearing about the GDC were, and these aligned closely with how respondents typically heard about the GDC. The majority (81%) of registrants chose email as their preferred method of communication. Other preferred channels of communication included the GDC website (43%), articles in dental journals, magazines, or news articles (25%), and letters (19%), all of which were among the top five typical sources of information about the GDC.

Fifteen percent of registrants identified online meetings or webinars as a preferred channel of communication, but fewer (8%) identified these as a typical source of hearing information about the GDC. This therefore offers a potential opportunity to align communication channels with registrant preferences in the future.

Figure 17. Which, if any, of the following are your preferred ways of hearing or reading about the GDC? Please select a maximum of 5.



Base: All registrants (n=3,217)

Younger registrants (aged 18-30) were less likely than their older colleagues to prefer reading about the GDC through emails (76% vs. 84% of those aged 51-64 and 83% of those aged 65+) and articles in dental journals or magazines (21% vs. 32% of those aged 51-64 and 31% of those aged 65+). Conversely, younger registrants were more likely to prefer receiving communications via their employer (18% vs. 7% of those aged 51-64 and 3% of those aged 65+).

Email was the preferred channel of communication among all registrant groups, with between 71% (dental technicians) and 85% (dental therapists) selecting this as their preferred way of hearing or reading about the GDC. Following this was the GDC website, which was particularly favoured among dental therapists (53%), who were also more likely than average to cite dental journals, magazines and news articles (34%) as a preference. Dentists were the registrant group most likely to prefer hearing / reading about the GDC through online meetings and webinars (17%), whilst dental nurses were the group most likely to prefer hearing / reading about the GDC through their employer (21%).

3.4 Relevance of communications

The survey asked respondents how relevant they found GDC communications. The majority (64%) of registrants found communications relevant.

Figure 18. In general, how relevant, if at all, do you find communications from the GDC?

All registrants	
Very relevant	15%
Fairly relevant	49%
Not very relevant	19%
Not at all relevant	8%
Net: Relevant	64%
Net: Not relevant	28%
Don't know	8%

Base: All registrants (n=3,217)

In the survey, registrants who did not find GDC communications relevant largely attributed this to their perceptions of the GDC as being detached from the routine reality of clinical practice. Registrants felt that the GDC's communications did not address their primary concerns and that the organisation lacked an understanding of the challenges they face in their clinical work.

*“Completely removed from day-to-day practice - no idea of what it’s like to work in the NHS.”
(Registrant, 26-30 years in the profession - online survey)*

“I just feel the subject matter which the GDC chooses does not get to the heart of our concerns as dental professionals. The GDC is aware we want our regulator to be run by dental professionals again, but this is never discussed.” (Registrant, 21-25 years in the profession - online survey)

“I find the GDC communication is not useful at all for my day-to-day clinical practice. Many promises for improvements but no actual actions seen.” (Registrant, 1-5 years in the profession - online survey)

Furthermore, some registrants who did not find GDC communications relevant also reflected that the current format of communications and volume of annual retention notifications made it difficult to highlight changes related to the dental profession and the GDC.

*“When things change, how you tell us gets lost in the annual retention notification.”
(Registrant, 21-25 years in the profession - online survey)*

Some respondents also attributed the perceived lack of engagement with GDC communications to their formal, authoritative tone, which was also cited as a reason why communications are not useful.

“They’re hugely formal, generally boring as hell and come across as quite threatening at times.” (Registrant, 26-30 years in the profession - online survey)

The perceived relevance of GDC communications varied by dental professional role. Dental therapists and dental hygienists were more likely than average to find communications relevant (76% dental therapists and 70% dental hygienists), whilst dental technicians and dentists were more likely than average to find communications not relevant (55% dental technicians and 32% dentists).

Notably, the less time respondents had been registered with the GDC, the more relevant they were likely to find GDC communications. About three in four (74%) of those who had been registered with the GDC for less than one year found communications relevant. Those who had been registered with the GDC for less than one year were also the least likely group to find communications not relevant (12%, rising to 34% for those registered for 6-10 years).

In the focus groups, registrants expanded on the perception of GDC communications lacking relevance to their everyday work. This was particularly prominent among dental hygienists, dental nurses and dental technicians who felt that the communications were mostly aimed at dentists. Despite this, there was still dissatisfaction among dentists, who also felt that GDC communications lacked relevance to them, were not effective in addressing the concerns of professionals and were often centred around promoting the work of the GDC.

“I’m very likely to read the content of their newsletters, and the links contained within them. Having said that, I wouldn’t say much or any of what I read is relevant to me in the context of my daily practice.” (Dental nurse, 1-5 years in the profession – focus group)

“[The communications are] saying what a great job the GDC is doing and irrelevant considerations.” (Dentist, more than 21 years in the profession – focus group)

3.5 Frequency of communications

When asked to what extent respondents were happy with the frequency, timeliness and format of communications, about half (49%) of registrants were happy about the format, whilst 40% were neutral. Happiness with the timeliness of communications was lower (43%) amongst registrants, with a further 42% neutral. Meanwhile for the frequency of communications, it was most common for registrants to feel neutral (46%), with 39% saying they were happy. Of the 11% who indicated that they were unhappy with the frequency of receiving communications from the GDC, 56% said they would like to hear more often, with 31% saying less often.

Among registrant groups, dental nurses were most likely to feel happy about the frequency of communication (43%), whilst dental therapists were most likely to feel happy about communications' format (58%).

Figure 19. To what extent are you happy with the frequency, timeliness and format of communications from the GDC in general?

All registrants	Frequency	Timeliness	Format
Very happy	12%	13%	16%
Quite happy	28%	29%	33%
Neutral	46%	42%	40%
Not very happy	7%	6%	4%
Not at all happy	4%	5%	3%
Net: Happy	39%	43%	49%
Net: Unhappy	11%	11%	7%
Don't know	4%	5%	3%

Base: All registrants (n=3,217)

Respondents were also asked about the frequency at which they opened various types of emails from the GDC. It was most common for registrants to report always opening their Annual Retention Fee (ARF) reminders, with 71% doing so, followed by just over half (52%) saying that they always open the CPD reminders and about three in ten (31%) registrants always opening the GDC monthly newsletter. Finally, a quarter (25%) said they always open other emails they receive from the GDC, while 10% of registrants said that they never do.

Notably, dental hygienists were most likely to say that they always opened all emails from the GDC. For example, 75% of dental hygienists reported always opening ARF reminders (compared with 71% of all registrants), 57% always opened CPD reminders (compared with 52% of all registrants) and 39% always opened the monthly newsletter (compared with 31% of all registrants).

Figure 20. How often do you open the emails you receive from the GDC?

All registrants	Never	Occasionally	Sometimes	Often	Always	Don't know	Not applicable
Monthly email newsletter	9%	15%	18%	20%	31%	4%	3%
Annual Retention Fee (ARF) reminders	2%	6%	6%	13%	71%	1%	2%

Continuing Professional Development (CPD) reminders	6%	9%	10%	16%	52%	3%	4%
Other email	10%	15%	16%	17%	25%	9%	9%

Base: All registrants (n=3,217)

3.6 Improvements to communications

When registrants were asked about what improvements, if any, they would like to see to the GDC communications, several key themes emerged from the open-ended responses to the survey and from the focus groups.

Ensuring clarity and accessibility

Registrants asked for the GDC to improve the clarity and accessibility of its communications by using plain English, providing concise summaries, and ensuring key messages are easy to find across a range of formats and channels. There was a sense that communications would benefit from being more concise and relevant.

“Communications from the GDC need to be more relevant and key information needs to be made clearer.” (Registrant, 6-10 years in the profession - online survey)

“Format - communications always seems to be overly complicated rather than getting to the point in an easy-to-understand way.” (Registrant, 1-5 years in the profession - online survey)

Increasing relevance

Registrants wanted GDC communications to be more relevant and targeted to their specific roles, career stages and professional contexts. The suggestions from registrants included greater targeting of email communications, more role-specific guidance and case studies, and reduced frequency of generic messages.

Registrants were keen to see information that is inclusive and relevant to all professions on the register. These views were particularly prominent among dental nurses, dental technicians and dental hygienists.

“Make communication relevant to each of the roles within the register.” (Dental technician, unknown length of time in the profession – focus group)

“Short and relevant to our industry sector. Updates that talk to us as professionals.” (Dental technician, over 30 years in the profession – focus group)

“[I would like] if it was more inclusive for dental nurses and they provided support and information to help us in our jobs.” (Dental nurse, 16-20 years in the profession – focus group)

Seeking input from registrants could also help produce more relevant communications, another key theme that came from the survey.

“I think emails about relevant subjects to your scope of practice. Or reminders on what topics should be covered for your sector.” (Registrant, 11-15 years in the profession - online survey)

“A monthly update on recent GDC developments. Topical articles that are actually of importance to dentists, interesting learning points or outcomes to help protect patients.” (Registrant, 6-10 years in the profession - online survey)

Tone and empathy

In the focus groups, the need for empathy and understanding was particularly strong. Registrants frequently mentioned that they would like to see a less intimidating and more approachable tone in GDC communications, creating a more supportive environment for the professionals.

“I feel they can be quite intimidating and out of touch... I feel the GDC need to work on their approachability.” (Dental nurse, 16-20 years in the profession – focus group)

“Be more supportive to dentists, create less fear and practically understand the work environment.” (Dentist, less than 5 years in the profession – focus group)

This need for empathy was also linked to a keen interest in how the GDC is staffed because of the perception that very few GDC employees have been practitioners themselves, therefore are neither attuned to, nor qualified to speak about, the pressures of the front line and how they, as a regulator, can help.

Registrants in the survey urged the GDC to adopt a more supportive, empowering, and collaborative tone in its communications, acknowledging the challenges faced by registrants and showing greater empathy for the human impact of regulatory processes. Some registrants felt that the GDC's tone of communications needed to be more positive and collaborative.

“As a dentist, I think the main improvement would be a change of tone by the GDC: from persecutory to cooperative.” (Registrant, 11-15 years in the profession - online survey)

“A general tone of a positive force to work with dentists to improve standards, both individually and collectively.” (Registrant, 26-30 years in the profession - online survey)

Engagement and dialogue

In the survey, registrants expressed a strong desire for more opportunities to engage in meaningful dialogue with the GDC, whether through face-to-face events, interactive webinars, or regional networks. Similarly, there was also a sense that seeking input from registrants across the country would benefit the GDC's communications.

“Forum for nurses and other dental professionals to join and contribute ideas / opinions so that we could all share.” (Registrant, 11-15 years in the profession - online survey)

“I would like GDC to hold webinars or face to face meetings to share FtP cases and educate dental professionals.” (Registrant, 6-10 years in the profession - online survey)

In the focus groups, registrants expanded on how they would like to see the GDC being more engaged with the profession, more involved in addressing and listening to the concerns and feedback of professionals, as well as showing clearly what steps they are taking to improve the profession.

“The GDC could have more of a rapport with its registrants... It would be very beneficial to both patients and professionals if the GDC had direct contact with every dental practice and their registered staff on a regular basis, allowing for the sharing of concerns and ideas, building rapport and creating a more team-based approach to the dental profession as a whole.” (Dental nurse, 1-5 years in the profession – focus group)

“Really listening to the profession and showing examples of their actions.” (Dentist, over 21 years in the profession – focus group)

“They need to focus on building a relationship with the profession, particularly putting a face to the organisation, so that we can then engage meaningfully with their communication.” (Dentist, less than 5 years in the profession – focus group)

Improving transparency

In the focus groups, registrants emphasised the importance of transparency and accountability in the GDC's communications, calling for greater openness about decision-making processes, clearer reporting on performance and impact, and a willingness to acknowledge and learn from mistakes. Inviting external scrutiny and input into the GDC's communications approach was also seen as key to building trust and credibility. Greater transparency around how the GDC is staffed, their experience and relevant qualifications could help build trust in the GDC among the registrants.

Furthermore, most registrants wanted to see more transparency around the GDC's priorities, finances and decision-making processes.

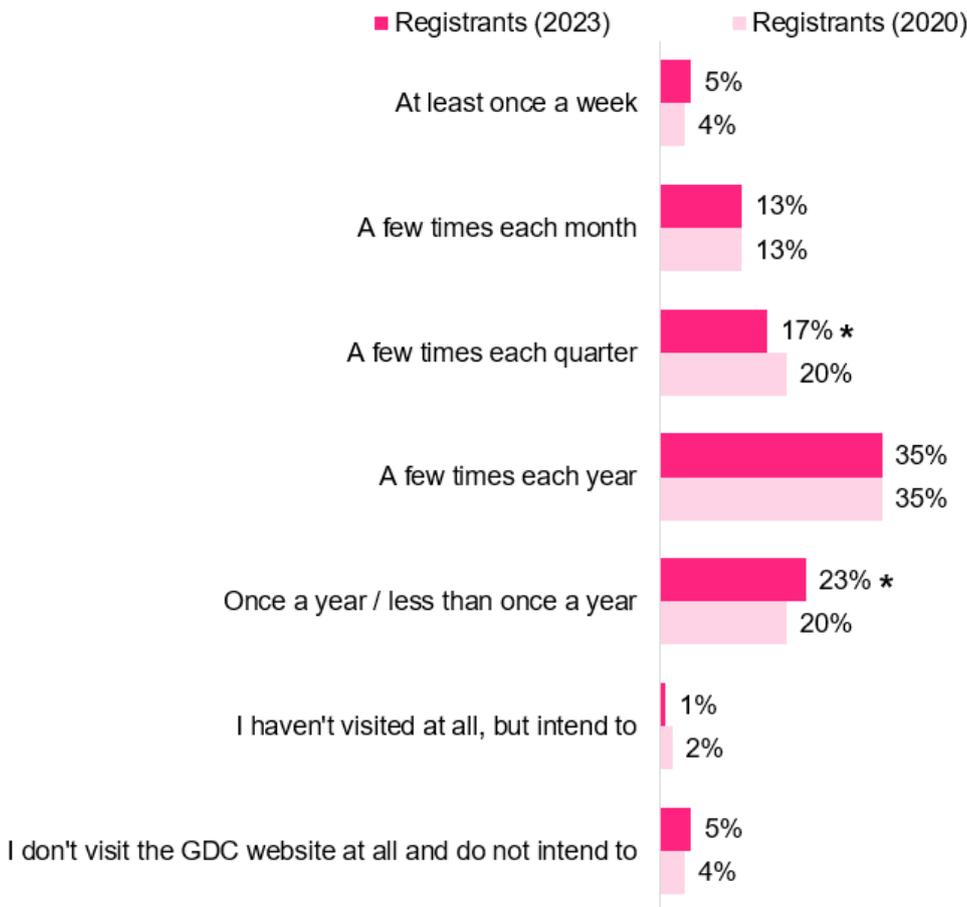
“Transparency in what their priorities are as the regulatory body.” (Dentist, less than 5 years in the profession – focus group)

“Transparency around finances, improvement towards attitude towards dentists, who is involved within the GDC, their process of investigating a complaint and how it is fair.” (Dentist, less than 5 years in the profession – focus group)

3.7 The GDC website

When asked how frequently they visit the GDC website (excluding eGDC), it was most common for registrants to say a few times a year, with just over one in three (35%) doing so. Just under a fifth (18%) said they visited the website monthly or more, with dental therapists (33%), dental hygienists (28%), and dental nurses (23%) most likely to have reported doing so. Younger registrants were more likely than their older counterparts to report visiting the website monthly or more (23% of 18–30-year-olds vs. 18% of those aged 65+).

Figure 21. How often do you visit the GDC website?

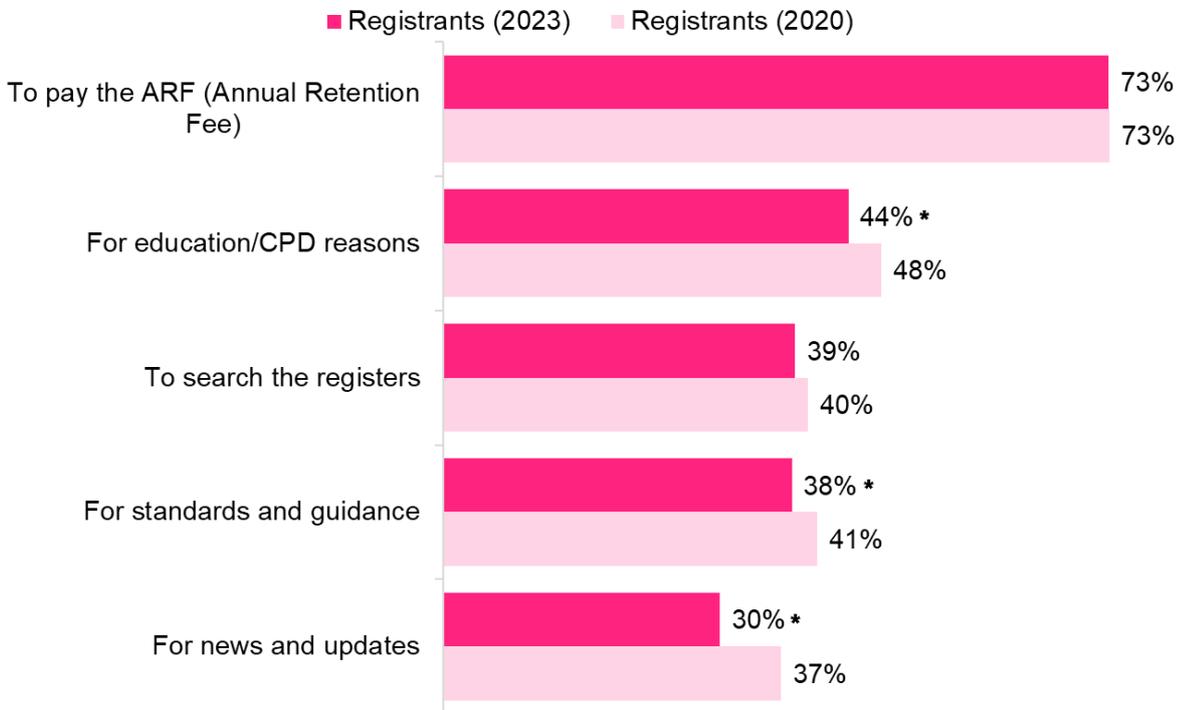


Base: All registrants (n=3,217 in 2023 and n=2,027 in 2020)

Of the registrants who have visited the GDC website, just under three quarters (73%) reported doing so to pay the ARF, making it the most common reason. The next most common reason was 44% doing so for education / CPD reasons, a decrease from the proportion who did so in 2020 (48%). Additionally, compared with 2020, fewer registrants said they use the GDC website for news and updates (30% vs. 37% in 2020). However, compared with 2020 more registrants reported using the GDC website for scope of practice queries (20% vs. 16%) and to read the latest blogs (11% vs. 8%).

All registrant groups were most likely to use the website to pay the ARF fee. Younger registrants (18-30) were more likely to use the website to contact the GDC than their older counterparts (18% compared with 7% of 65+).

Figure 22. Why do you visit the GDC website? Top five reasons shown.



Base: All registrants who visit the GDC website (n=2,975 in 2023 and n=1,886 in 2020)

Eighty one percent of registrants felt the GDC’s website was useful – an increase from 70% in 2020. Just 14% of registrants felt that it was not useful, a decline from 22% who did so in 2020. Of those registrants who had not visited the website, the most common reason, selected by just under half (47%) of registrants, was not knowing what it could be used for, followed by 38% of registrants who said that they have not needed to use the website as they can access all the information they need elsewhere.

3.8 Media usage

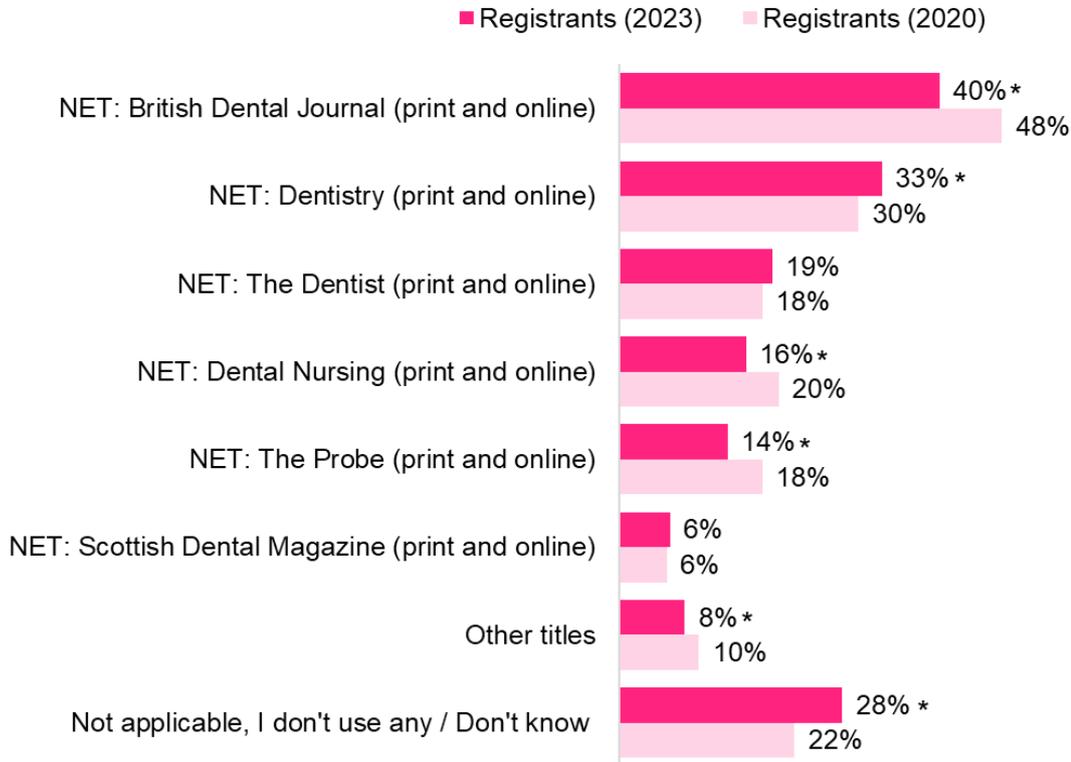
When asked which social media platforms they use to keep informed about their work and profession in general, the most common source was Facebook (36%), with a similar proportion (38%) saying they did not use any social media platforms. Results varied by age, with 18–30-year-olds and 31–40 year olds more likely to use Instagram (25% and 24% respectively) than their older counterparts, for example just three percent of those aged 65+ said they used Instagram. Older registrants were far more likely to say that they do not use any social media platforms (47% of 51–64-year-olds and 61% of those aged 65+).

Results also differed by role. Dentists were more likely than other registrant groups to use Facebook (43%), Instagram (23%), YouTube (16%), and X (formerly Twitter) (7%) to keep informed about their work and profession. By comparison, dental hygienists were more likely than other registrant groups to use LinkedIn (18%), and dental nurses were more likely than other registrant groups to say they did not use any platforms (46%).

The most used dental sector news and opinion source was the *BDJ*, which 40% of registrants reported using regularly, a notable decline from 48% in 2020. This was followed by a third (33%) of registrants who said *Dentistry*, a slight increase from 30% in 2020. Whilst the most common sources have remained stable compared with 2020, there have been some notable differences in engagement, with fewer registrants also now regularly turning to *Dental Nursing* (16% vs. 20%), and *The Probe* (14% vs. 18%).

There were notable differences between roles. Dental technicians (47%) and dental hygienists (41%) were most likely to read *Dentistry*, and dental nurses *Dental Nursing* (38%). Dentists were more likely to regularly read *Dentistry* (38%), along with the *BDJ* (58%) than other sources.

**Figure 23. Which of the following dental sector news and opinion outlets do you regularly use?
Please select as many as you feel apply.**



Base: All registrants (n=3,217 in 2023 and n=2,027 in 2020)

3.9 Media usage and interest in the dental sector

In the survey respondents were asked to select a statement that best represented their views about updates on the dental sector from a predefined list. About three in ten (31%) registrants selected from this list that they would like to learn more about the dental sector if this information was available on the channels they use / watch. Younger registrants (18-30) were most likely (37%) to select this statement, which suggests that they are open to receiving more information. Since they were more likely to use Instagram to keep up to date with their work sector and profession, and least likely to use dental sector news and publications sources, it indicates that Instagram would be a useful platform to drive engagement with younger registrants.

A quarter (25%) of all registrants said that they do not actively seek out updates in the dental sector, but they do hear anecdotes from others. The same proportion (25%) said that they actively keep up to date with the latest trends in the sector; this was more likely to be selected by dental hygienists (32%) and dentists (31%). These figures are comparable to 2020.

The focus groups emphasised the point that unofficial sources (such as webinars, online forums and social media) played as crucial a role as official sources (such as publications, journals and professional associations), in providing information related to dental practice. The latter sources were felt to be helpful in getting specific advice, particularly for any information that was not available directly from the GDC.

“Dentistry magazine is quite informative, otherwise I find the professional Facebook page very useful [and] webinars.” (Dental hygienist, 11-15 years in the profession – focus group)

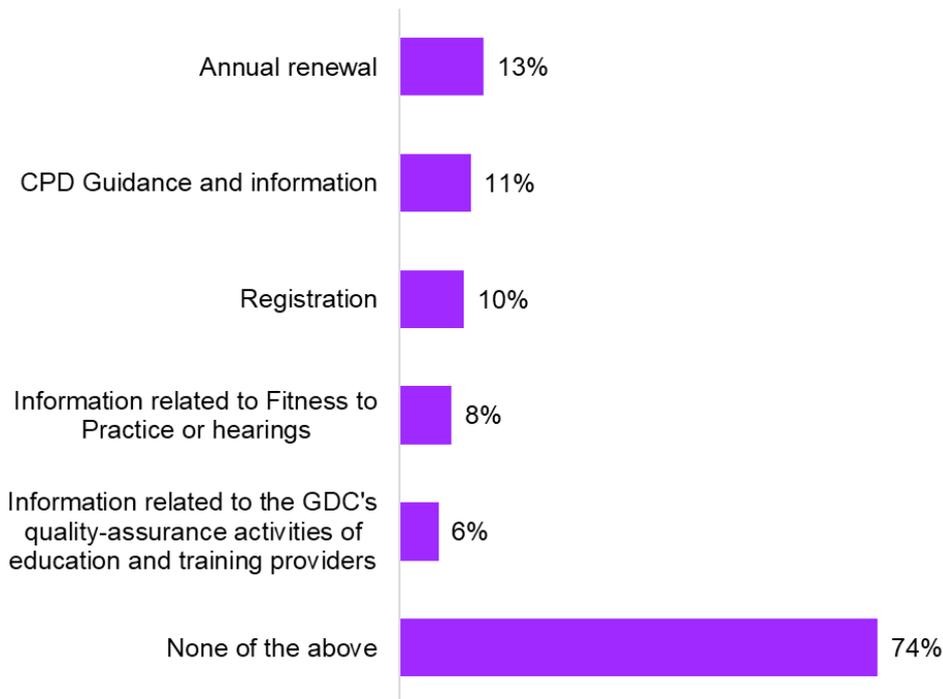
“Forums and chats on Facebook - literally to find out info that you can't seem to find from the GDC.” (Dental nurse, 16-20 years in the profession – focus group)

4 Students' communication with the GDC

4.1 Communications received

Most students (74%) surveyed said they had received no communications about subjects including annual renewal, registration, CPD guidance and information, or information related to Fitness to Practice hearings, or GDC's quality assurance activities. About one in eight (13%) had received communications concerning annual renewal, whilst 11% had received communication relating to CPD guidance and information, and 10% about registration.

Figure 24. Which, if any, of the following subjects do you currently receive communications from the GDC about? Please select as many as apply.



Base: All students (n=72)

4.2 Usefulness of communications

A majority (61%) of students reported that they did not know whether GDC communications were useful or not. While the vast majority of students reported not receiving communications from the GDC, about a quarter stated that they found these communications useful (26% vs. 13% not useful), this may imply that there is an appetite for more communication from the GDC to students.

Figure 25. In general, how useful do you find communication from the GDC?

Students	
Very useful	4%
Fairly useful	22%
Not very useful	8%
Not at all useful	4%
Net: Useful	26%
Net: Not useful	13%
Don't know	61%

Base: All students (n=72)

4.3 Communication format and preferences

Students reported that email was their preferred channel of communication from the GDC (54%), however just four percent reported hearing or reading information about the GDC via email. The GDC website was both a typical source of information (53%) and their preferred channel of communication (51%). Similarly, students identified articles in dental journals, magazines, or news articles as both a typical source of information (33%) and their preferred channel of communication (44%). However, whilst about a third of students preferred to hear information on the GDC through conferences or workshops (32%), just 13% reported hearing from the GDC in this way.

It is worth noting that a quarter (25%) either did not know how the GDC typically communicated with them or reported that they did not read or hear about the GDC at all, indicating that a closer alignment between communication channels with students' preferences could raise their awareness of and knowledge about the GDC.

Figure 26. How do you typically hear or read about the GDC? Please select all that apply. & Which, if any, of the following are your preferred ways of hearing or reading about the GDC? Please select a maximum of 5. (Top 5 shown)

Typical Source	Students	Preferred Source	Students
Via the GDC website	53%	Via email	54%
Via articles in dental journals / magazines / news articles	33%	Via the GDC website	51%
Via conferences / events / workshops	13%	Via articles in dental journals / magazines / news articles	44%

Don't know	10%	Via conferences / workshops / events	32%
None of the above, I don't hear or read about the GDC	15%	Via online meetings / webinars	24%

Base: All students (n=72)

The insights from the focus group with students outlined how important it is to students that the information they receive is relevant to them and their level of qualification.

Some mentioned that they would like to receive free resources, which may be a way of getting students' attention. Several students suggested that a comprehensive handbook or guide about the GDC's role, standards, and expectations would be a valuable resource. Other participants suggested that case studies or scenario-based learning resources would help them better understand how to apply GDC standards in real-world situations.

*“Yes, if [the communication is] appropriate and relevant to current level of training / job role.”
(Student – focus group)*

“[I would like] more targeted information, especially as a CDT when there's so little information available.” (Student – focus group)

“I would [read the communications] if it was occasional; not like a typical subscribed newsletter.” (Student – focus group)

A few students mentioned that, instead of receiving direct communications from the GDC, they would prefer to access important information through *BDJ* or other journals, as well as lectures. Many also noted that they would find handbooks especially useful, provided they were engaging and contained information that was relevant to them. Others noted that they would prefer webinars, pre-recorded videos and in-person events, as opposed to written communication.

*“I wouldn't want direct communications, but if they do post in the *BDJ* every now and then it would be interesting to read and know they are making an effort to talk to us.” (Student – focus group)*

“[On what would be helpful] more interaction with students.” (Student – focus group)

“I think the companies / governing bodies that I have positive perceptions of, really engage with students with coming in for talks, giving out free resources for revision.” (Student – focus group)

“Pre-recorded videos are definitely helpful and a handbook as well as it could be reviewed multiple times.” (Student – focus group)

4.4 Relevance of communications

Just over a half (53%) of students reported that they did not know whether GDC communications were relevant or not, again implying a lack of engagement for this group with GDC communications.

Nonetheless, more students found GDC communications relevant than not. Approximately two in five students (39%) found communications relevant, compared with 8% who found them not relevant.

Figure 27. In general, how relevant, if at all, do you find communications from the GDC?

Students	
Very relevant	8%
Fairly relevant	31%
Not very relevant	6%
Not at all relevant	3%
Net: Relevant	39%
Net: Not relevant	8%
Don't know	53%

Base: All students (n=72)

4.5 Frequency of communications

When asked about whether they were happy with various aspects of communications from the GDC, approximately half of students said they 'did not know' how they felt about the timeliness (50%), format (49%), or frequency (46%) of communications from the GDC. In comparison, during the focus group many said that they would expect to be contacted less frequently, for example, quarterly or every few months.

Figure 28. To what extent are you happy with the frequency, timeliness and format of communications from the GDC in general?

All students	Not at all happy	Not very happy	Neutral	Quite happy	Very happy	Don't know
Frequency (how often you receive communications)	9%	1%	23%	16%	6%	46%
Timeliness (receiving communications at the right time)	6%	3%	20%	19%	3%	50%
Format (how you receive the communications e.g. newsletters, emails)	4%	0%	23%	19%	6%	49%

Base: All students (n=70)

4.6 The GDC website

About three in ten (31%) students said they visited the GDC website a few times each year, with 19% using it monthly or more, and a further 13% said they have not visited it yet, but they intended to. Of those who had used the website, the vast majority of students (95%) said they found it useful (of which 37% said very useful).

The main reasons for visiting the website amongst students included for standards and guidance (74%), followed by education / CPD reasons (56%), and for scope of practice queries (40%). A third (33%) of students said they used the website to learn more about the GDC.

The focus group highlighted that the GDC website is among the key sources of information for students when it comes to accessing information related to dental practice and regulations. Other key sources were publications like *BDJ*, and the content of their course delivered through lectures. The majority of students considered the GDC website to be a trustworthy source of information.

“[I’m visiting] the GDC website when revising for exams or OSCEs.” (Student – focus group)

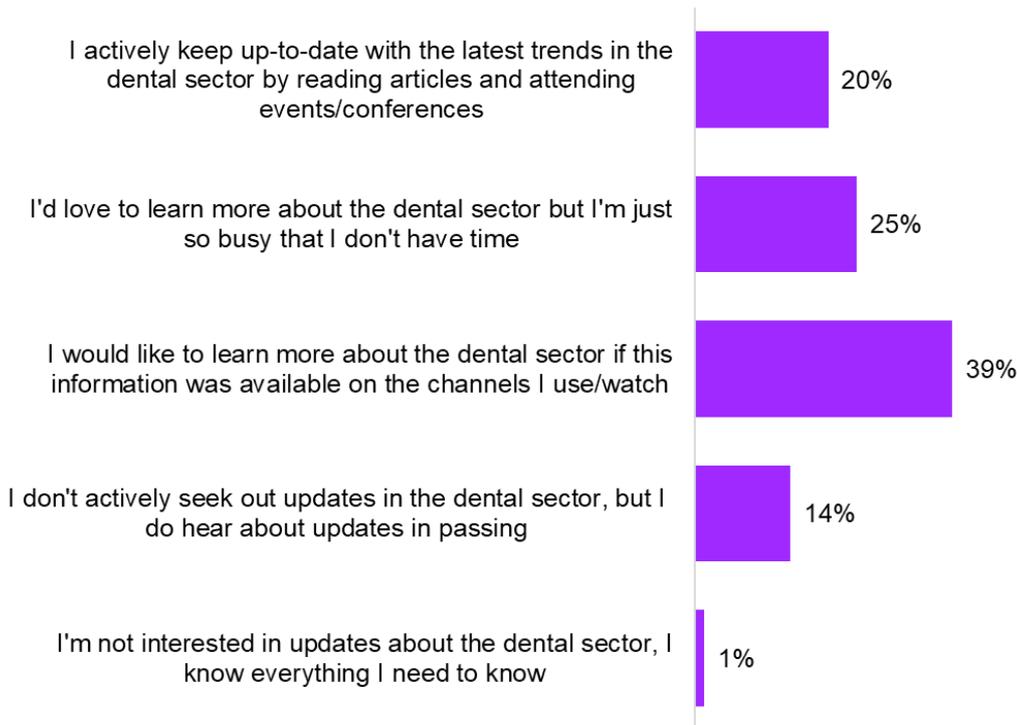
“Website is the most trustworthy surely because it is straight from the GDC.” (Student – focus group)

4.7 Media usage and interest in the dental sector

When asked which social media platforms they used to keep informed about their work and sector, just under half (48%) of students said they used Instagram, 30% said they use YouTube, 14% LinkedIn, and 13% X (formerly Twitter). A fifth (20%) said that they did not use any social media platform to keep informed about their work and sector.

About two in five students (39%) said that they would like to learn more about the dental sector if this information was available on the channels they use / watch. As students were most likely to report using Instagram and YouTube, this implies that these would be the most effective platforms for the GDC to target students who would like to be more engaged with the sector.

Figure 29. Which of the following statements best describes your views? Please select one answer only.



Base: All students (n=69)

In the focus groups, some students noted that, whilst they might be less likely to engage with GDC email communications, they would be interested in seeing social media posts from the GDC. Others suggested that posts on the social media pages of university dental societies would be particularly helpful, as they are very likely to engage with those accounts.

The qualitative findings also reinforced the potential for more creative, multimedia communications tailored to students' preferences and behaviours. Students expressed particular interest in seeing this type of content on platforms they frequently use, such as YouTube and Instagram. They suggested that engaging, visually oriented content on these platforms could be more effective in capturing their attention and conveying important information about professional standards and regulations. This aligns with the quantitative findings showing higher preference for these platforms among students.

“[On what would be helpful] Instagram posts from [University] dental societies.” (Student – focus group)

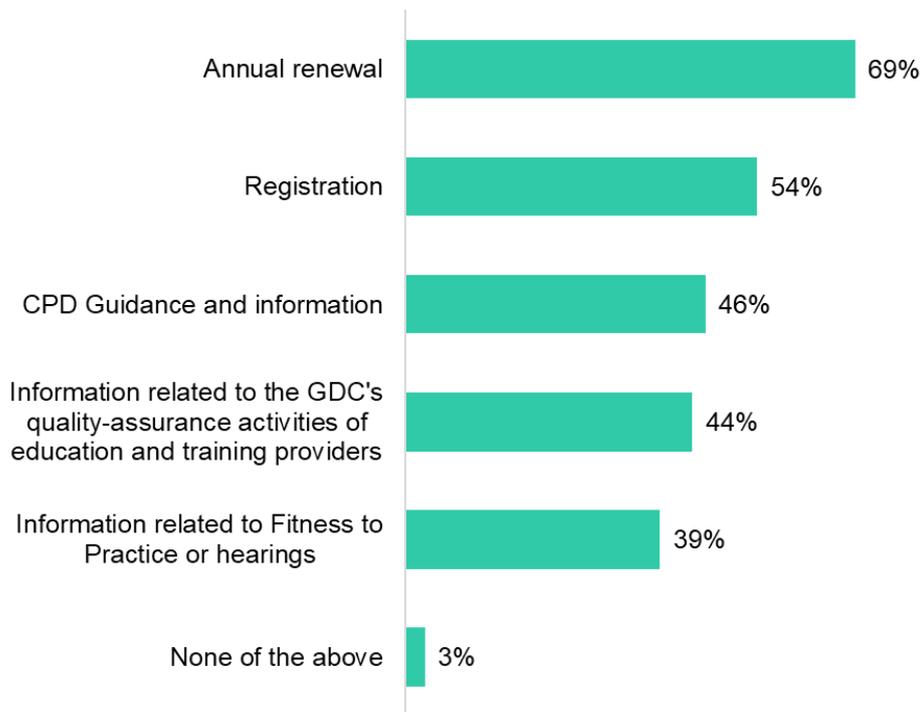
“The website already has everything but think [the] GDC could have a better social media strategy to ensure correct information is getting to the right people.” (Student – focus group)

5 Other stakeholders' communication with the GDC

5.1 Communications received

Almost seven in ten (69%) of the other stakeholders group reported receiving communications relating to annual renewal, whilst 54% reported receiving communications relating to registration. Just under half (46%) recalled receiving communication on CPD guidance and information and 44% reported receiving communication about information related to the GDC's quality-assurance activities of education and training providers. Similarly, about four in ten (39%) recalled receiving communication about information related to FtP or hearings. A minority (3%) reported receiving no communications concerning any of these subjects.

Figure 30. Which, if any, of the following subjects do you currently receive communications from the GDC about? Please select as many as apply.



Base: All other stakeholders (n=59)

5.2 Usefulness of communications

About two-thirds (68%) found communications useful, with 49% finding communications fairly useful and 19% finding communications very useful. One in four (25%) found communications not very useful, and no other stakeholders reported finding them not useful at all. The high proportion of other stakeholders finding GDC communications useful positively indicates a broad alignment between the needs and preferences of this group with current communication strategies.

Figure 31. In general, how useful do you find communication from the GDC?

Other stakeholders	
Very useful	19%
Fairly useful	49%
Not very useful	25%
Not at all useful	0%
Net: Useful	68%
Net: Not useful	25%
Don't know	7%

Base: All other stakeholders (n=59)

Among other stakeholders who did not find GDC communications useful some cited a general lack of relevance as the reason why, while others, similar to registrants, felt that messaging often had a political undertone which appears to focus largely on promoting the GDC rather than acknowledging past mistakes.

“Most of the communication is all about how well the GDC are doing, rather than how much they need to improve and publicly admit when they have got it wrong (i.e. the Williams Case)” (Other stakeholder - online survey)

Whilst most of the other stakeholders found GDC information helpful to their role in the survey, those in the focus groups felt that the GDC was not doing enough to engage widely with dental professionals in their communications. Some noted that the communications can often feel too formal and disconnected from the profession. Others highlighted that there needs to be more ways of supporting professionals with their queries and concerns, as well as giving opportunities for individuals to engage with the GDC and provide feedback.

“With people who are coming from other countries, they're sort of left on their own to find out the requirements of the GDC. It's written down somewhere, but these people need support coming in.” (Other stakeholder – interview)

“I think they could probably offer more ways to feedback to them because you can get lots of information but sometimes you just want to have a two-way process so that you can give feedback on certain things.” (Other stakeholder – interview)

“[The GDC] could write their emails and their communications in a less formal and more ordinary way.” (Other stakeholder – interview)

5.3 Communication format and preferences

There was alignment between the typical and preferred communication channels for the GDC for the other stakeholders group. The majority reported that email was both a typical source of information (78%) and their preferred channel of communication (69%). Similarly, around half identified the GDC website as both a typical source of information (53%) and their preferred channel of communication (49%), whilst 41% identified online meetings or webinars as a typical communication channel and 46% as a preferred communication channel.

Although about four in ten other stakeholders identified face-to-face meetings (39%) and articles in dental journals or magazines (37%) as typical communication channels for the GDC, fewer identified them as preferred options (25% face-to-face meetings, 27% dental journals or magazines). Instead, other stakeholders slightly favoured the dental leadership network (31%) and conferences or workshops (29%).

Figure 32. How do you typically hear or read about the GDC? Please select all that apply. & Which, if any, of the following are your preferred ways of hearing or reading about the GDC? Please select a maximum of 5 (Top 5 shown).

Typical Source	Other stakeholders	Preferred Source	Other stakeholders
Via email	78%	Via email	69%
Via the GDC website	53%	Via the GDC website	49%
Via online meetings/ webinars	41%	Via online meetings/ webinars	46%
Through face-to-face meetings	39%	Via the Dental Leadership Network	31%
Via articles in dental journals/ magazines/ news articles	37%	Via conferences/ workshops/ events	29%

Base: All other stakeholders (n=59)

5.4 Relevance of communications

About four in five (81%) of the other stakeholder group found communications relevant, with just over half (54%) finding communications fairly relevant and 27% finding communications very relevant. Only 14% found communications not very relevant and 2% found them not relevant at all.

Figure 33. In general, how relevant, if at all, do you find communications from the GDC?

Other stakeholders	
Very relevant	27%
Fairly relevant	54%
Not very relevant	14%
Not at all relevant	2%
Net: Relevant	81%
Net: Not relevant	15%
Don't know	3%

Base: All other stakeholders (n=59)

In the survey, some of the other stakeholder group who did not find GDC communications relevant cited a general lack of clarity in the communications they received.

“A clear heading & topic would be useful.” (Other stakeholder - online survey)

This perceived lack of clarity could also contribute to feelings among other stakeholders that many communications were sent without apparent purpose.

“Often feels like emails are sent for the sake of sending emails.” (Other stakeholder - online survey)

Findings from interviews showed that communications received from the GDC were felt to be relevant to most other stakeholders, as they provided helpful updates and information. This was linked to stakeholders' more frequent and direct engagement with the GDC, which provided opportunities to build relationships and influence the GDC's approach. However, some felt that the information communicated was often only relevant to them or other industry bodies and less relevant to most registrants. They highlighted that there needed to be more information that is applicable to all registrants in their day-to-day practice to meet their information needs.

“[What would be useful] I think things like the scope of practice and dental nurses want more practical information, so they want to know what I can do and what can I not do.” (Other stakeholder – interview)

5.5 Frequency of communications

Other stakeholders were on balance happy with various aspects of GDC communications. They were most likely to be happy with the format (64%), followed by 59% who were happy with the frequency and 55% who were happy with the timeliness of communications from the GDC.

Figure 34. To what extent are you happy with the frequency, timeliness and format of communications from the GDC in general?

Other stakeholders	Not at all happy	Not very happy	Neutral	Quite happy	Very happy	Don't know
Frequency (how often you receive communications)	2%	2%	34%	45%	14%	3%
Timeliness (receiving communications at the right time)	2%	5%	33%	45%	10%	5%
Format (how you receive the communications e.g. newsletters, emails)	2%	5%	28%	50%	14%	2%

Base: All other stakeholders (n=58)

5.6 The GDC website

When asked how frequently they visited the GDC website (excluding use of eGDC), 45% of the other stakeholder group said monthly or more, with 17% saying weekly or more. The vast majority (91%) of those who used the GDC website found it useful.

The most common reason for using the GDC website amongst other stakeholders was to search the registers (72%), followed by 65% for standards and guidance. Just under half (48%) used it to pay the ARF. Sizeable groups also used the GDC website for education / CPD reasons (39%), for FtP information and advice (37%) and for scope of practice queries (35%).

In the interviews, most other stakeholders said that they usually consulted the GDC website to keep track of important updates, to look at information about standards, requirements and guidance and the latest feedback on education providers. The majority found the website useful, however, many felt that it was often difficult to navigate and find the information they needed.

“It’s very difficult to find anything. There seems to be an awful lot of information that’s, that’s hidden away in unspecific areas.” (Other stakeholder – interview)

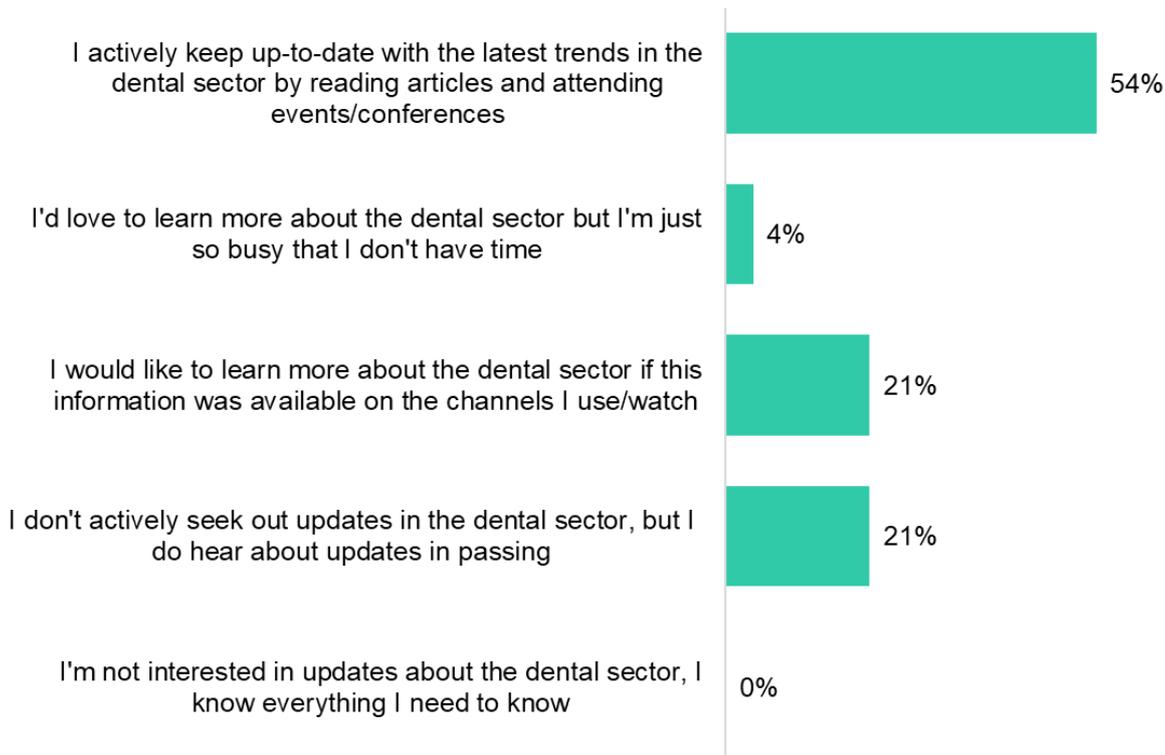
5.7 Media usage and interest in the dental sector

Thirty-seven percent of other stakeholders said they do not use social media to keep informed about work and the profession. Nonetheless, three in ten (30%) used LinkedIn, making it the most used platform followed by a quarter (25%) using Facebook and 16% using X (formerly Twitter).

More than half (54%) of the other stakeholder group said that they actively keep up to date with the latest trends in the dental sector by reading articles and attending events / conferences. Around six in ten (61%) said they read the *BDJ*, just under half (47%) read *Dentistry*, and 22% read *The Dentist*.

About one in five (21%) of the other stakeholder group said that they would like to learn more about the dental sector if this information was available on the channels they use / watch. Since LinkedIn, the *BDJ* and *Dentistry* were most used amongst other stakeholders, it implies that these would be the most appropriate outlets to target those who would like to learn more.

Figure 35. Which of the following statements best describes your views? Please select one answer only.



Base: All other stakeholders (n=57)

6 Implications

The survey highlighted some positive shifts in perceptions since 2020, with a higher proportion of registrants associating the GDC with terms such as fair, respectful, and proportionate compared with 2020. Additionally, slightly fewer associated the GDC with being unrepresentative. This finding is particularly encouraging because the KDA revealed that perceptions of fairness and respect have the most significant impact on overall perceptions of the GDC.

However, compared with 2020, a slightly higher proportion associated the GDC with 'fear', and the research suggests that there are many ways the GDC could improve its relationship with registrants, students, and other stakeholders. The focus groups revealed the strength of negative feelings towards the GDC, often quite strongly expressed, and what the means to address these negative feelings might be.

Firstly, the research indicated that the GDC should take more ownership of the dialogue around regulation. Many registrants reported getting news about the GDC second hand, explaining how their opinion of the organisation and the work it does is often formed via a mixture of anecdotes, hearsay and outdated perceptions. For example, in the focus groups, participants recounted stories of punitive disciplinary action. Taking ownership of these narratives could aid perceptions of the GDC being fair and proportionate, which in turn could positively impact overall perceptions of the GDC.

Though negative perceptions of the GDC appear to be embedded in the minds of longer serving registrants, providing more information on what regulatory protocol looks like could help boost the GDC's reputation as a trusted regulator. This could be addressed through Q&A sessions, which might contribute to the need for improved transparency around how the GDC makes decisions and comes to conclusions.

In addition to building transparency and educating registrants on regulatory protocol, acknowledging the wider concerns within the dentistry sector and advocating for the profession could help build trust and credibility with registrants. For example, several participants in the focus groups expressed a desire for the GDC to take a more proactive role in addressing systemic issues in the sector, including the challenges facing NHS dentistry and the pressures on dental professionals.

Secondly, adopting a more personal and empathetic tone to GDC communications is another key area that could help shift portrayals of the GDC as an austere organisation that exists to judge and discipline. This could work to improve perceptions of the GDC as unrepresentative, which the KDA showed has an impact on overall perceptions of the GDC. There was also a sense among more senior dentists that the organisation is staffed by those who do not know enough about dentistry, therefore have a disconnect with registrants' roles. The need for empathy cannot be overstated; there was an appetite for the GDC to demonstrate that it understands the pressures that registrants are facing and has, even to some extent, 'walked in their shoes' at some point. Initiatives such as 'meet the staff' may help to address this.

There is also a diminished appetite to engage with GDC communication. Registrants said that they do not always read GDC emails due to a belief that they are not tailored to their needs and professional practice and are therefore irrelevant to them. As such, the GDC could look at other ways to engage registrants, for example linking in with trade publications and unions, rather than relying on email communication, or increasing the use of social media communications targeted towards students and newly qualified registrants.

Furthermore, the research highlighted a perception among some registrants that the GDC favours patients over dental professionals. To address this, the GDC could emphasise in its communications how it balances the interests of both groups and supports registrants in providing high-quality care.

The focus groups also revealed a lack of awareness and engagement with the GDC's corporate strategy among registrants. To address this, the GDC should consider more targeted and engaging ways to communicate its strategic priorities, such as through interactive webinars, videos, or in-person events.

Lastly, there is a need for registrants to be 'heard' by the GDC. Many mentioned that email correspondence with the organisation is generally one way – set to 'transmit' rather than 'receive'. This was also the case for listening events. Although initiatives like these are helpful, they should accommodate more of a two-way dialogue with the profession than they do currently. This is particularly important given the KDA revealed that not believing the GDC cares about their opinions has an important negative impact on overall perceptions of the GDC.

For dental students, there was a desire for more direct engagement from the GDC, such as interactive sessions, to help them understand the role of the regulator and feel more connected to it from the start of their careers. Dental students expressed interest in having more practical, relatable information about GDC standards and how they apply to their future practice.

Other stakeholders, such as professional associations, also emphasised the importance of more regular, substantive dialogue with the GDC. There were suggestions that the GDC could hold more frequent meetings with these bodies to discuss issues affecting the profession and gather feedback.

It is important to recognise that there will always be a tension between what is desirable and what is realistic, but this research indicates that some of these measures are 'quick wins' in the form of small initiatives that may pay large dividends in terms of reputational management.

7 Monitoring and evaluation

7.1 Overview of the GDC's current approach

The GDC has collected three waves of data within this stakeholder research programme (2018, 2020 and 2023), with each wave including both quantitative and qualitative research.

This includes hearing from registrants, students, and other stakeholders through surveys, focus groups and interviews. Registrants and other stakeholders were contacted directly by the GDC (based on the register / list of contacts), whilst students were contacted via a 3rd party (dentistry schools).

7.2 What is working well?

Reaching registrants

For registrants, we suggest using the same approach as in 2023 including a large quantitative survey and follow up focus groups and interviews. YouGov achieved a large and robust sample, allowing analysis by variables such as role, length of time, age, gender and sexuality.

The frequency of the research

With previous waves conducted in 2018, 2020 and 2023, we would recommend a similar approach in running the survey every two years. This would allow the GDC to act upon the findings, explore new ideas and capture change over time whilst ensuring that stakeholders have adequate time between surveys.

7.3 What are the evaluative gaps in the current approach?

Evaluating impact

Alongside regular monitoring, the GDC could conduct periodic in-depth evaluations to assess the impact of its communication and engagement activities. These could include:

- Independent audits of key communication channels and materials with regards to the tone (e.g. ensuring they are empathetic), relevance (e.g. ensuring they are aimed at the right professional group and using the right channels for that group) and conciseness.
- Case studies or deep dives into the effectiveness of specific stakeholder engagement events or initiatives (e.g. the use of co-creation and a two-way dialogue at listening events) to improve perceptions of the GDC caring about opinions.
- Comparative analysis with other regulators or professional bodies to understand what engagement strategies have worked elsewhere (e.g. how social media is used).

Embedding learning and improvement

Crucially, this research and its learnings should be used not just to measure progress, but to enable continuous improvement. This means:

- Regularly reviewing findings with senior leaders and Council to inform decision-making to improve perceptions of transparency.
- Using feedback to iterate and improve communication materials and channels to ensure that the perceptions of registrants, students and other stakeholders within this research are taken on board.
- Sharing insights with the GDC communications team to help them refine their approach.

Reporting and transparency

Finally, the GDC could commit to openly reporting on the progress and impact of its communication and engagement strategy, in line with its wider commitment to transparency. This could include:

- Publishing an annual communication and engagement report showcasing developments and initiatives, for example publicising Q&A sessions.
- Providing regular updates to Council and stakeholder groups on key findings.
- Sharing case studies and learnings through the dental profession media and at industry events.

7.4 What could the GDC do going forwards?

Introduce a smaller 'dip check' between waves

There would be an argument for smaller 'dip-check' exercises between the years of the main study, an approach that some similar organisations follow. These could consist of short KPI focused registrants' surveys of around one-third the length of the 2023 questionnaire. They could be disseminated to all registrants and advertised as a quick monitoring check, accompanied by a summary of the actions the GDC has taken following the previous survey. Alongside the dip-check exercises, could be two focus groups with registrants and a small set of five in-depth interviews with other stakeholders.

Boost students' responses

The sample size for students was smaller (n=106) than in the previous wave of research and is likely to continue to be affected by relying on a 3rd party (dentistry schools) to disseminate invitations to take part in the research. Whilst we think a survey is still a good way of reaching this group, we would propose a number of ways of boosting responses including:

- A survey communications plan to build engagement from those who would disseminate.
- A 'warm up' email letting universities know that the survey was coming with a strong 'call to action.'
- Reviewing the options for an attractive incentivisation scheme.

- Other ways of promoting the survey, such as inclusion in newsletters and / or social media.

Maximise the value of research with other stakeholders

Given there is a relatively small pool of other stakeholders to speak to, this will limit the numbers responding to the survey. This increases the importance of qualitative research for this group in the form of in-depth interviews. Many of these stakeholders have high levels of engagement and knowledge of the GDC, in some cases, as trusted industry partners. In-depth interviews respect the depth of that relationship allowing for detailed exploration.

The GDC could conduct stakeholder mapping, making a choice about who and how many other stakeholders should be included. This could maximise the value of speaking to this group.

Set clear Key Performance Indicators (KPIs)

The KDA revealed that improving perceptions of the GDC being fair, respectful and proportionate would have the largest potential positive impact on overall perceptions of the GDC, along with respecting the work that the GDC does. The KDA also revealed that believing that the GDC is unrepresentative is one of the perceptions most likely to have a negative impact on overall views.

This research also suggests that ‘fear’ could be a KPI, given it was a common association in both the quantitative and qualitative phases. The proportion of registrants who associated the GDC with fear increased from 41% in 2020 to 46% in 2023, suggesting the need to monitor perceptions of fear with the aim of reducing this. All of the measures in Figure 36 (excluding fear) have seen a positive uplift since 2020, suggesting a positive direction of travel for the GDC. There is a need to continue to monitor these going forwards, along with overall perceptions, to understand whether these shifts indicate a long-term trend.

Figure 36. Potential KPIs

	2020	2023
Fair	24%	27%
Respectful	32%	37%
Proportionate	20%	23%
Respect for GDC’s work	42%	47%
Believe the GDC is unrepresentative	59%	56%

Fear	41%	46%
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Appendix I: Survey questionnaire

The General Dental Council (GDC) is the UK regulator of dental professionals. The GDC has commissioned YouGov, an independent market research company, to carry out a survey to understand your views and perceptions of them and why you hold those views. This will help the GDC to improve the way in which they communicate and engage with you in the future.

The survey will take around ****15 minutes**** and we'd really appreciate your input.

YouGov abides by the Market Research Society Code of Conduct which means that all of your responses will remain confidential and will not be attributed to you personally. Your details will be stored securely and will not be passed to any third parties. All details will be automatically deleted after 6 months. The MRS Code of Conduct can be accessed <https://www.mrs.org.uk/pdf/MRS-Code-of-Conduct-2019.pdf>

Base: All registrants

Question type: **Single**

[S05a] Please let us know where you most commonly work using the options below.

Please select ****one**** answer only.

- | | | | |
|-----|--------------------------|------|-------------------|
| <1> | North East | <8> | South East |
| <2> | North West | <9> | South West |
| <3> | Yorkshire and the Humber | <10> | Wales |
| <4> | East Midlands | <11> | Scotland |
| <5> | West Midlands | <12> | Northern Ireland |
| <6> | East of England | <13> | Channel Islands |
| <7> | London | <14> | Prefer not to say |

Base: All registrants

Question type: **Multiple**

#max number of choices: 2

[S06a_m] Which of the following best describes your current role? If you have dual registration, please select both roles.

- | | |
|----------|----------------------------|
| <1> | Clinical dental technician |
| <2> | Dental hygienist |
| <3> | Dental nurse |
| <4> | Dental technician |
| <5> | Dental therapist |
| <6> | Dentist |
| <7> | Orthodontic therapist |
| <80> | Other [open] |
| <86 xor> | Prefer not to say |

Base: All other stakeholders

Question type: Single

[S06b] Which of the following best describes the type of organisation that you work for? Please rest assured that your answers will be reported at an aggregate-level and nothing will be personally attributed to you or your place of work.

Please select ****one**** answer only.

- <1> ****Dental Corporate Groups**** e.g. Bupa Dental, Rodericks Dental, Smile Together, MyDentist, Portman Dental Care
- <2> ****Dental Schools, Education providers, Awarding bodies or academics**** e.g. College of General Dentistry, Royal Colleges, Dental Schools Council, UK Committee of Postgraduate Dental Deans and Directors (COPDEND), NEBDN, City and Guilds, Scottish Qualification Authority etc.
- <3> ****Government officials**** e.g. Department of Health and Social Care (DHSC), the Scottish Government, the Welsh Government etc.
- <4> ****Health Professional Regulators**** e.g. Professional Standards Authority (PSA), General Medical Council (GMC), Nursing and Midwifery Council (NMC), General Osteopathy Council (GOC) etc.
- <5> ****Indemnifiers/Insurers**** e.g. DDU, MDU, MDDUS etc.
- <6> ****NHS, Health boards, commissioners and agencies**** e.g. NHS Business Services Authority, NHS England, Health Education England, NHS National Services Scotland, Local Health Boards (e.g. Aneurin Bevan University Health Board) etc.
- <7> ****Patient representative groups**** e.g. Oral Health Foundation, Age UK, HealthWatch, National Voices, Healthcare Improvement Scotland, Healthcare Inspectorate Wales etc.
- <8> ****Professional Associations**** e.g. British Dental Association (BDA), British Association of Dental Therapists (BADT), British Association of Dental Hygienists and Therapists (BSDHT), British Association of Dental Nurses (BADN), Society of British Dental Nurses (SBDN), Dental Technologists Association (DTA) etc.
- <9> ****System Regulators**** e.g. Care Quality Commission (CQC), Healthcare Improvement Scotland (HIS), Healthcare Inspectorate Wales (HIW), Regulation and Quality Improvement Authority (RQIA), Parliamentary and Health Service Ombudsman (PHSO), Medicine and Healthcare Products Regulatory Agency (MHRA)
- <80> Other [open]
- <86> Prefer not to say

Base: All other stakeholders

Question type: Single

[S05c] Which of the following does your organisation represent?

Please select ****one**** answer only.

- <1> England
- <2> Scotland

- <3> Wales
 - <4> Northern Ireland
 - <5> Channel Islands
 - <6> All of the UK
 - <80> Other [open]
 - <86> Prefer not to say
-

Base: All other stakeholders

Question type: **Single**

[S06c] Are you also a registered dental professional?

- <1> Yes
 - <2> No
 - <86> Prefer not to say
-

Base: All students

Question type: **Single**

[S06d] Which of the following best describes the role you are studying or training for?

Please select ****one**** answer only.

- <1> Clinical dental technician
 - <2> Dental hygienist
 - <3> Dental nurse
 - <4> Dental technician
 - <5> Dental therapist
 - <6> Dentist
 - <7> Orthodontic therapist
 - <80> Other [open]
 - <86> Prefer not to say
-

Base: All students who are clinical dental technicians, hygienists, nurse, therapists or technicians

Question type: **Single**

#Question display logic:

If [S06d] - Clinical dental technician or Dental hygienist or Dental nurse or Dental technician or Dental therapist or Orthodontic therapist or Other or Prefer not to say, is selected [if S06d in [1,2,3,4,5,7,80,86]]

[S07a] Are you in your final year of training?

- <1> Yes
 - <2> No
 - <86> Prefer not to say
-

Base: All student dentists

Question type: **Single**

#Question display logic:

If [S06d] - Dentist is selected [if S06d == 6]

[S07b] Which year are you in at university?

- | | |
|------|-------------------|
| <1> | First year |
| <2> | Second year |
| <3> | Third year |
| <4> | Fourth year |
| <5> | Fifth year |
| <80> | Other |
| <86> | Prefer not to say |
-

Base: All students

Question type: **Single**

[S04] Where are you currently studying?

Please select ****one**** answer only.

- | | |
|------|-------------------|
| <1> | England |
| <2> | Scotland |
| <3> | Wales |
| <4> | Northern Ireland |
| <5> | Channel Islands |
| <96> | Other [open] |
| <99> | Prefer not to say |
-

Base: All

Question type: **Single**

[Q01_1] When did you first register with/become involved with/hear about the GDC?

- | | |
|------|---------------------------|
| <1> | Less than 1 year ago |
| <2> | 1-5 years ago |
| <3> | 6-10 years ago |
| <4> | 11-15 years ago |
| <5> | 16-20 years ago |
| <6> | 21-25 years ago |
| <7> | 26-30 years ago |
| <8> | Over 30 years |
| <85> | Don't know/can't remember |
-

Base: All

Question type: **Multiple**

#row order: randomize #max number of choices: 3

[Q02] Which of the following words do you associate with the GDC?

Please select up to three words.

- | | |
|----------------|--|
| <1> | Helpful |
| <2> | Supportive |
| <3> | Knowledgeable |
| <4> | Unrepresentative |
| <5> | Aggressive |
| <6> | Defensive |
| <7> | Fear |
| <85 fixed xor> | I don't know enough about the GDC to comment |

Base: All

Question type: **Grid**

#row order: randomize

[Q03] To what extent do you agree that the GDC is:

- | | | | |
|----------|-------------------|-----------|---------------|
| -[Q03_1] | Fair | -[Q03_8] | Agile |
| -[Q03_2] | Transparent | -[Q03_9] | Relevant |
| -[Q03_3] | Responsive | -[Q03_10] | Effective |
| -[Q03_4] | Respectful | -[Q03_11] | Proportionate |
| -[Q03_5] | Professional | -[Q03_12] | Consistent |
| -[Q03_6] | Focused | -[Q03_13] | Accountable |
| -[Q03_7] | Efficient | | |
| <1> | Strongly disagree | | |
| <2> | Slightly disagree | | |
| <3> | Neither | | |
| <4> | Slightly agree | | |
| <5> | Strongly agree | | |
| <85> | Don't know | | |

Base: All

Question type: **Single**

[Q04a] What are your perceptions of the GDC _at present_?

- | | |
|-----|---------------|
| <1> | Very negative |
|-----|---------------|

- <2> Fairly negative
- <3> Neutral
- <4> Fairly positive
- <5> Very positive
- <85> Don't know

Base: All

Question type: **Multiple**

#row order: randomize #max number of choices: 3 #Columns: 2

[Q04b] Out of the following, what three things have been most influential in shaping your perceptions of the GDC?

Please select up to three options.

- | | | | |
|-----|-----------------------------------|------------|--------------------------------------|
| <1> | Direct contact with the GDC | <10> | The way I've been treated by the GDC |
| <2> | Experiences of colleagues/friends | <11> | The GDC website |
| <4> | Articles online | <12> | GDC response to COVID-19 |
| <5> | Comments on social media | <13> | The way the GDC communicates |
| <6> | Opinions of dental professionals | <80 fixed> | Other [open] |
| <7> | Opinions of trade unions | <87 fixed> | None of the above |
| | | xor> | |
| <8> | Opinions of professional bodies | <85 fixed> | Don't know |
| | | xor> | |
| <9> | Opinions of tutors/professors | | |

Base: All

Question type: **Multiple**

#row order: randomize

[Q05] Which of the following do you consider to be functions of the GDC?

Please select as many as you feel apply.

- <1> Sets the standards in dental education
- <2> Maintains registers of dental professionals, and checks they meet requirements
- <3> Sets and promotes professional standards
- <4> Investigates concerns about impaired fitness to practise
- <5> Sets the NHS fee levels for dental treatment
- <6> Inspects dental surgeries and clinics
- <7> Represents the interests of dental professionals
- <8> Sets clinical standards
- <9> Workforce planning (ensuring enough dental professionals for patients)
- <85 fixed xor> Don't know

Base: All (Q06_3 – students only, Q06_8 to Q06_14 registrants and other stakeholders only)

Question type: **Grid**

[Q06] How does the GDC **currently** perform in the following core areas?

-[Q06_1]	Setting learning outcomes	-[Q06_9]	Investigating concerns about registrants' fitness to practise
-[Q06_2]	Quality assuring dental education and training	-[Q06_10]	Facilitation of fitness to practise hearings
-[Q06_3]	Promoting professionalism with students	-[Q06_11]	Reporting of fitness to practise outcomes
-[Q06_4]	Setting Standards for the Dental Team	-[Q06_12]	Processing applications to the Registers
-[Q06_5]	Providing guidance on Standards to dental professionals	-[Q06_13]	Completing the Annual Renewal process
-[Q06_6]	Setting Standards for new or emerging practice	-[Q06_14]	Monitoring dental professionals' CPD completion at cycle end (5 year cycle)
-[Q06_7]	Investigating illegal practice in the UK		
-[Q06_8]	Promoting professionalism with dental professionals		
<1>	Not at all well		
<2>	Not very well		
<3>	Quite well		
<4>	Very well		
<85>	Don't know		

Base: All

Question type: **Grid**

#row order: randomize

[Q09] To what extent do you agree or disagree with each of the following statements?

-[Q09_1]	I respect the work that the GDC does
-[Q09_2]	I believe the GDC overly penalises dental professionals
-[Q09_3]	I think the GDC is currently improving
-[Q09_4]	I believe the GDC is unrepresentative
-[Q09_5]	I do not believe that the GDC cares about my opinions
-[Q09_6]	The GDC actively encourages feedback
<1>	Strongly disagree
<2>	Slightly disagree
<3>	Neither
<4>	Slightly agree
<5>	Strongly agree
<85>	Don't know

Base: All

Question type: **Multiple**

#row order: randomize

[Q10] Which, if any, of the following subjects do you currently receive communications from the GDC about?

Please select as many as apply.

- | | |
|----------------|---|
| <2> | CPD guidance and information |
| <3> | Information related to the GDC's quality-assurance activities of education and training providers |
| <4> | Registration |
| <5> | Annual Renewal |
| <6> | Information related to Fitness to Practice or hearings |
| <80 fixed> | Other [open] |
| <87 fixed xor> | None of the above |
| <85 fixed xor> | Don't know |

Base: All

Question type: **Single**

[Q11] In general, how useful do you find communication from the GDC?

- | | |
|-----|-------------------|
| <1> | Not at all useful |
| <2> | Not very useful |
| <3> | Fairly useful |
| <4> | Very useful |
| <5> | Don't know |

Base: All who don't find communications useful

Question type: **Open**

#any

#Question display logic:

If [Q11] - Not at all useful or Not very useful, is selected [if Q11 in [1,2]]

[q11_notuseful] You indicated that you don't find the communications from the GDC very useful. Why is that? Please explain in as much detail as you can.

Base: All

Question type: **Multiple**

#row order: randomize #Columns: 2

[Q12] How do you typically hear or read about the GDC?

Please select all that apply.

- | | | | |
|-----|---------------------|------|-----------------|
| <1> | Via email | <11> | Via text |
| <2> | Via the GDC website | <12> | Industry events |
| <3> | LinkedIn | <13> | Press releases |

- | | | | |
|------|---|----------------|---|
| <4> | Facebook | <14> | Chair's blog post |
| <5> | X (formerly Twitter) | <15> | Dental Leadership Network |
| <6> | Via conferences/events/workshops | <16> | My employer |
| <7> | Via articles in dental journals/magazines/news websites | <80 fixed> | Other [open] |
| <8> | Via letters/through the post | <87 fixed xor> | None of the above, I don't hear or read about the GDC |
| <9> | Through face-to-face meetings | <85 fixed xor> | Don't know |
| <10> | Via online meetings/webinars | | |

Base: All

Question type: **Single**

[Q12b] In general, how relevant, if at all, do you find communications from the GDC?

- | | |
|------|---------------------|
| <1> | Not at all relevant |
| <2> | Not very relevant |
| <3> | Fairly relevant |
| <4> | Very relevant |
| <85> | Don't know |

Base: All who don't find communications relevant

Question type: **Open**

#any

#Question display logic:

If [Q12b] - Not at all relevant or Not very relevant, is selected [if Q12b in [1,2]]

[q12c_notrelevant] You indicated that you don't find the communications from the GDC very relevant. Why is that? Please explain in as much detail as you can.

Base: All

Question type: **Multiple**

#max number of choices: 5 #Columns: 2

[Q13] Which, if any, of the following are your preferred ways of hearing or reading about the GDC

Please select a maximum of 5.

- | | | | |
|-----|---|------------|---------------------------|
| <1> | Email | <11> | Text |
| <2> | The GDC website | <12> | Industry events |
| <3> | LinkedIn | <13> | Press releases |
| <4> | Facebook | <14> | Chair's blog post |
| <5> | X (formerly Twitter) | <15> | Dental Leadership Network |
| <6> | Conferences/workshops/events | <16> | My employer |
| <7> | Dental journals/magazines/news websites | <80 fixed> | Other [open] |

<8>	Letters	<87 fixed xor>	None of these
<9>	Face-to-face meetings	<85 fixed xor>	Don't know
<10>	Online meetings/webinars		

Base: All

Question type: **Grid**

#row order: *randomize*

[Q14] To what extent are you happy with the frequency, timeliness and format of communications from the GDC ****in general****?

-[Q14_1]	Frequency (how often you receive communications)
-[Q14_2]	Timeliness (receiving communications at the right time)
-[Q14_3]	Format (how you receive the communications e.g. newsletters, emails)
<1>	Not at all happy
<2>	Not very happy
<3>	Neutral
<4>	Quite happy
<5>	Very happy
<6>	Don't know

Base: All not happy with frequency

Question type: **Single**

#Question display logic:

if Q14_1 in [1,2]

[Q14c] Would you like to hear from the GDC more frequently or less frequently?

<1>	Less frequently
<2>	More frequently
<3>	Don't know

Base: All registrants

Question type: **Grid**

#row order: *randomize*

[Q15] How often do you open the emails you receive from the GDC?

- [Q15_1] Monthly email newsletter
- [Q15_2] Annual Retention Fee (ARF) reminders
- [Q15_3] Continuing professional development (CPD) reminders
- [Q15_4 fixed] Other email
- <1> Never
- <2> Occasionally
- <3> Sometimes
- <4> Often
- <5> Always
- <6> Don't know
- <7> Not applicable

Base: All

Question type: Single

[Q16] How often do you visit the GDC website? Excluding use of eGDC for managing registration / annual renewal

- <1> On a daily basis
- <2> A couple of times each week
- <3> Once a week
- <4> A few times each month
- <5> A few times each quarter
- <6> A few times each year
- <7> Once a year
- <8> Less than once a year
- <9> I haven't visited at all, but intend to
- <10> I don't visit the GDC website at all and do not intend to
- <85> Don't know

Base: All who visit the website

Question type: Multiple

#row order: randomize

#Question display logic:

If [Q16] - On a daily basis or A couple of times each week or Once a week or A few times each month or A few times each quarter or A few times each year or Once a year or Less than once a year, is selected [if Q16 in [1,2,3,4,5,6,7,8]]

[Q17] Why do you visit the GDC website?

Please select as many as you feel apply.

- <1> For news and updates
- <2> To contact the GDC
- <3> For education/CPD reasons
- <8> Scope of practice queries
- <9> To read about the latest blogs
- <10> To learn more about the GDC

- | | | | |
|-----|--|----------------|---------------------------------------|
| <4> | For standards and guidance | <11> | To pay the ARF (Annual Retention Fee) |
| <5> | To raise a concern/make a complaint | <80 fixed> | Other [open] |
| <6> | To search the registers | <85 fixed xor> | Don't know |
| <7> | For fitness to practise information and advice | | |

Base: All who don't visit the website

Question type: **Multiple**

#row order: randomize

#Question display logic:

If [Q16] - I haven't visited at all, but intend to or I don't visit the GDC website at all and do not intend to, is selected [if Q16 in [9,10]]

[Q18] Why don't you visit the GDC website?

Please select as many as you feel apply.

- | | |
|----------------|---|
| <1> | I haven't needed to use it as I am able to access all of the information I need elsewhere |
| <2> | I didn't know that the GDC has a website |
| <3> | I know that the GDC has a website but I don't know what I would be able to use it for |
| <80 fixed> | Other [open] |
| <85 fixed xor> | Don't know |

Base: All who visit website

Question type: **Single**

#Question display logic:

If [Q16] - On a daily basis or A couple of times each week or Once a week or A few times each month or A few times each quarter or A few times each year or Once a year or Less than once a year, is selected [if Q16 in [1,2,3,4,5,6,7,8]]

[Q19] How useful do you find the website?

- | | |
|-----|-------------------|
| <1> | Not at all useful |
| <2> | Not very useful |
| <3> | Fairly useful |

<4> Very useful
<5> Don't know

Base: All

Question type: **Multiple**
#row order: randomize

[Q26] Which, if any, of the following do you use to keep informed about your work and the profession in general?

Please select as many as you feel apply.

<1> LinkedIn
<2> Facebook
<3> X (formerly Twitter)
<4> Instagram
<8> YouTube
<80 fixed> Other [open]
<87 fixed xor> None of the above
<85 fixed xor> Don't know

Base: All registrants and other stakeholders

Question type: **Multiple**
#row order: randomize

[Q27] Which of the following dental sector news and opinion outlets do you regularly use?

Please select as many as you feel apply.

<1>	British Dental Journal (online)	<10>	Scottish Dental Magazine (online)
<2>	British Dental Journal (print edition)	<11>	Scottish Dental Magazine (print edition)
<3>	Dentistry (online)	<12>	The Dentist (online)
<4>	Dentistry (print edition)	<13>	The Dentist (print edition)
<5>	Dental Nursing (online)	<14>	The Probe (online)
<6>	Dental Nursing (print edition)	<15>	The Probe (print edition)
<7>	Dental Review (online)	<80 fixed>	Other titles [open]
<8>	Dental Tribune (online)	<87 fixed xor>	Not applicable, I don't use any
<9>	GDP UK (online)	<85 fixed xor>	Don't know

Base: All

Question type: **Single**

[Q28] Which of the following statements best describes your views? Please select ****one**** answer only.

- <1> I'm not interested in updates about the dental sector, I know everything I need to know
- <2> I don't actively seek out updates in the dental sector, but I do hear about updates in passing (e.g. updates through work/university, conversations with colleagues/friends etc.)
- <3> I would like to learn more about the dental sector if this information was available on the channels I use/watch
- <4> I'd love to learn more about the dental sector but I'm just so busy that I don't have time
- <5> I actively keep up-to-date with the latest trends in the dental sector by reading articles and attending events/conferences

Base: All

Question type: **Open**

[Q29] What improvements, if any, would you like to see to GDC communications? This could include the content, format (e.g. emails, newsletters) or frequency for example. Please type in the box below.

Not Sure

Base: All registrants and students

Question type: **Text**

Finally, we'd like to ask you some important questions about you. This is so we can learn more about answers across the range of personal backgrounds within the dental profession, to make sure that we are taking the views of different types of respondents into account and for analysis purposes. We will not use this information to identify any individual.

Base: All registrants

Question type: **Multiple**

#Columns: 2

[C01m] Which dental setting/s do you work in?

Please select all that apply.

- | | | | |
|-----|----------------------------|------|------------------------------------|
| <1> | General dental practice | <9> | Armed forces |
| <2> | Specialist dental practice | <10> | In education/training as a student |

- | | | | |
|-----|--|------------|--|
| <3> | Community dental service | <11> | In education/training as a member of staff |
| <4> | Dental hospital | <12> | Researcher/Academic |
| <5> | Other hospital settings | <80 fixed> | Other [open] |
| <6> | Laboratory | <87 fixed> | Not applicable |
| | | xor> | |
| <7> | Oral public health | <86 fixed> | Prefer not to say |
| | | xor> | |
| <8> | Non-clinical (e.g., local authority, regulator, professional body, national/regional body) | | |

Base: All registrants who work

Question type: **Single**

#Question display logic:

if C01m.has_any([1,2,3,4,5,6,7,8,9,11,12,80])

[C02] What type of care is provided at your work setting?

*Please select ****one**** of the following options.*

- | | |
|----------------|--|
| <1> | Predominantly NHS treatment with some private |
| <2> | Predominantly private treatment with some NHS |
| <3> | NHS only |
| <4> | Private only |
| <87> | Not applicable – non-clinical/laboratory environment |
| <86 fixed xor> | Prefer not to say |

Base: All registrants who work

Question type: **Single**

#Question display logic:

if C01m.has_any([1,2,3,4,5,6,7,8,9,11,12,80])

[C03] How many clinicians provide dental treatment at your work setting?

*Please select ****one**** of the following options.*

- | | |
|------|--|
| <1> | 1-4 |
| <2> | 5-10 |
| <3> | More than 10 |
| <4> | Not applicable – non-clinical/laboratory environment |
| <80> | Other [open] |

<86 fixed xor>

Prefer not to say

Base: All registrants and students

Question type: **Single**

[d03] What is your age?

Please select ****one**** answer only.

- | | |
|------|-------------------|
| <1> | 18-21 |
| <2> | 22-30 |
| <3> | 31-40 |
| <4> | 41-50 |
| <5> | 51-60 |
| <6> | 61-64 |
| <7> | 65+ |
| <86> | Prefer not to say |
-

Base: All registrants and students

Question type: **Single**

[d06] What is your marital status?

Please select ****one**** of the following options.

- | | |
|------|--|
| <1> | Never married and never registered in a civil partnership |
| <2> | Married |
| <3> | In a registered civil partnership |
| <4> | Separated, but still legally married |
| <5> | Separated, but still legally in a civil partnership |
| <6> | Divorced |
| <7> | Formerly in a civil partnership which is now legally dissolved |
| <8> | Widowed |
| <9> | Surviving partner from a registered civil partnership |
| <99> | Prefer not to say |
-

Base: All registrants and students

Question type: **Single**

[d07] What is your sexual orientation?

Please select ****one**** of the following options.

- | | |
|-----|--------------------------|
| <1> | Straight or Heterosexual |
| <2> | Gay or Lesbian |
-

- <3> Bisexual
 - <4> Other sexual orientation [open]
 - <99> Prefer not to say
-

Base: All registrants and students

Question type: **Single**

[d01] What is your sex?

Please select ****one**** of the following options.

- <1> Female
 - <2> Male
 - <99> Prefer not to say
-

Base: All registrants and students

Question type: **Single**

[d02] Is the gender you identify with the same as your sex registered at birth?

Please select ****one**** of the following options.

- <1> Yes
 - <2> No, please specify [open]
 - <99> Prefer not to say
-

Base: All registrants and students

Question type: **Single**

[d04] What is your ethnic group?

Please select ****one**** of the following options.

- | | | | |
|-----|---|------|-----------------------------------|
| <1> | English, Welsh, Scottish, Northern Irish or British | <11> | Pakistani |
| <2> | Irish | <12> | Bangladeshi |
| <3> | Gypsy or Irish Traveller | <13> | Chinese |
| <4> | Roma | <14> | Any other Asian background [open] |
| <5> | Any other white background [open] | <15> | Caribbean |
| <6> | White and Black Caribbean | <16> | African background [open] |
-

<7>	White and Black African	<17>	Any other Black, Black British or Caribbean background [open]
<8>	White and Asian	<18>	Arab
<9>	Any other Mixed or Multiple background [open]	<19>	Any other ethnic group [open]
<10>	Indian	<99>	Prefer not to say

Base: All registrants and students

Question type: Single

[d05] What is your religion?

Please select ****one**** of the following options.

<1>	No religion
<2>	Christian (all denominations)
<3>	Buddhist
<4>	Hindu
<5>	Jewish
<6>	Muslim
<7>	Sikh
<8>	Any other religion/faith [open]
<99>	Prefer not to say

Base: All

Question type: Text

You've now reached the end of the survey – on behalf of the GDC and YouGov, thank you for your time!

Appendix II: Qualitative discussion guides

Discussion guide – GDC registrants

Text-based focus groups

Introduction

Good evening and thanks for joining us this evening. My name is [insert name] and I will be moderating the session for the next 90 minutes. YouGov is conducting a research study on behalf of the General Dental Council (GDC) to understand current perceptions of the GDC, its communications approach and inform current and future communications and engagement activities.

I am here to hear your thoughts and opinions, so please be as open and honest as possible, and the more you have to say, the better! Also, please do respect other people's opinions if they differ from your own.

The discussion tonight is on a secure website. Everything you share with us will be confidential. At no point will we share your contact information with the GDC, or any third party. YouGov strictly follow the MRS Code of Conduct and the relevant data protection regulations, including GDPR. We might use comments and quotes from the focus group, but these will not be directly attributed to you, and the transcript will not be shared with the GDC.

There are no right or wrong answers, it's your honest feedback that I'm hoping for today.

- Do you have any questions for me before we start?
- Could you please confirm you have read and understood the information sheet and consent to participate in the focus group?

Background

To start with, could you please tell me a bit about yourself: role, place of work, how long you've been in that role, etc.?

What is your primary field of work?

What type of organisation do you work for? <PROMPT: NHS, private, setting>

Understanding the role and remit of the GDC

Based on your understanding, what is the role of the GDC?

What or who has informed your knowledge of the GDC?

What are the GDC's core functions? <PROMPT: its purposes or activities set out in legislation>

How does the GDC work to deliver its core functions?

- What specific GDC activities are you familiar with? <Moderator to probe on register qualified dental professionals / set standards for the dental team / investigate complaints about dental professionals' fitness to practise / set and ensure the quality of dental education.>

Can you recall coming across GDC's current corporate strategy?

- If yes – How did you learn about the corporate strategy? <PROMPT: Channels>

What would work best for you in GDC's communicating about its strategy? Have you seen this done well elsewhere?

Perceptions of the GDC

What are the first words or thoughts that come to mind when you think of the GDC?

When and how did you first become aware of the GDC?

What are your current perceptions of GDC? Why do you say this?

- Moderator to probe for both negative and positive aspects regarding:
<PROMPT: trust/ efficiency/ effectiveness/ fairness/ transparency/ accountability/ relevancy/ responsiveness/ proportionality>

Has your knowledge and perception of the GDC changed over time / specifically in the last three years?

What has influenced this change? <If not covered, moderator to probe on personal experiences, views or experiences of people they know, things they have seen or read about.>

Have the GDC's actions influenced your views or knowledge of the organisation? In what ways? Can you give examples?

What interactions, if any, have you had directly with the GDC? How did those interactions affect your perceptions or attitudes?

Can you recall any actions or initiatives the GDC has undertaken? Are there any that stand out to you? Can you explain why?

Are you aware of any actions or initiatives undertaken by the GDC in the last three years that positively impacted your perceptions or attitudes towards them?

Engagement with the GDC

How would you describe your interactions with the GDC? How have these changed over time?

In what ways do you currently engage with the GDC?

- Have you participated in any GDC consultations, events or calls for feedback? What prompted you to provide input? What was your experience?
- How do you engage with the GDC when it comes to the dental regulatory requirements (Registration, Annual Renewal, Continuous Professional Development (CPD), Fitness to practise (FtP))? Can you walk me through? How has been your experience of that process?

How do communications and interactions with the GDC impact your perception of the organisation?

- Has the experience made you more or less likely to engage in the future? Why?

Are there any types of information or interactions that would encourage you to engage more with the GDC?

Have GDC communications, guidelines or decisions influenced how you approach your day-to-day practice? If so, how?

What, if anything, gets in the way, of you engaging more fully with GDC communications and initiatives?

<Prompt: Lack of time/resources/knowledge of how to/relevance/ access?>

Views on information channels and GDC communications

What communications do you receive from the GDC? What are the main channels used?

How often do you receive any communications from the GDC?

- How likely are you to read the information sent to you? Why do you say this?
- Is there anything working well/less well in the way the GDC communicates with you?

In general, how useful do you find the content shared by the GDC?

- Overall, do the GDC's communications meet your needs? *<Prompt: accessibility, timeliness, subject matter, channels>* Can you explain why?
- What is the type of content shared by the GDC that is most important to your area of the dental sector?
- Is there anything in particular that you find more/less useful? Why?

Do GDC emails/letters clearly explain what you need to do and why? If not, what is unclear?

Where do you typically get information related to dental practice, regulations, etc.?

- Including face to face engagement, what are the main channels used?

What drives your choices in what dental industry information you consume or engage with? How do you decide what is relevant or a priority?

- What factors make you more likely to trust certain sources?
- Are there any circumstances where you look for specific information? If so, how often?
- What are the topics you'd be interested in?
- Where do you have the most questions related to regulations, standards, etc?

How much influence do GDC communications have in shaping your knowledge and perceptions of the GDC compared to other channels? E.g. web search, word of mouth, etc.

Do you feel that GDC guidance and standards impact either positively or negatively how you deliver patient care? Can you please explain your answer?

Improvements and recommendations

What works well and what doesn't in the way the GDC communicates with you?

What improvements, if any, could be made in the way the GDC communicates with you? *<Moderator to probe regarding preferred channels, content, timing, formats, when communicating requirements, about how the GDC works, about improvements/changes.>*

What more could the GDC do to meet your needs for practice guidance, regulations, etc?

What information do you think is missing or insufficient?

Where do you think there are opportunities for the GDC to better connect with and be relevant to dental professionals?

What works well and what doesn't in the way GDC communicates with dental professionals from diverse backgrounds?

Do you think GDC communications and guidance are accessible and inclusive to all dental professionals?

What suggestions, if any, do you have to improve accessibility and inclusivity?

How well, or not, does the GDC communicate its strategic priorities and the reasons behind organisational decisions? Why do you say this?

- Do you want to know more about how decisions are made? Why?

Summary and conclusions



Do you have any other suggestions to the GDC regarding the way it has been communicating with you?

Do you have any final reflections?

Thank you. We have now come to the end of the focus group. I really appreciate you taking the time to share your views with us today. The insights from tonight's group will feed into a final report that will be published on the GDC website.

If you have any questions, please do not hesitate to get in touch with us. Have a lovely evening and rest of your week!

Discussion guide – Dental students

Text-based focus groups

Introduction

Good evening and thanks for joining us this evening. My name is [insert name] and I will be moderating the session for the next 90 minutes. YouGov is conducting a research study on behalf of the General Dental Council (GDC) to understand current perceptions of the GDC, its communications approach and inform current and future communications and engagement activities.

I am here to hear your thoughts and opinions, so please be as open and honest as possible, and the more you have to say, the better! Also, please do respect other people's opinions if they differ from your own.

The discussion tonight is on a secure website. Everything you share with us will be confidential. At no point will we share your contact information with the GDC, or any third party. YouGov strictly follow the MRS Code of Conduct and the relevant data protection regulations, including GDPR. We might use comments and quotes from the focus group, but these will not be directly attributed to you, and the transcript will not be shared with the GDC.

There are no right or wrong answers, it's your honest feedback that I'm hoping for today.

- Do you have any questions for me before we start?
- Could you please confirm you have read and understood the information sheet and consent to participate in the focus group?

Background

To start, please tell me about yourself:

- Where are you studying?
- What year of study are you in currently?
- What speciality interests you the most?

Understanding the role and remit of the GDC

What do you know or understand about what the GDC does?

What or who has informed your knowledge of the GDC?

What are the GDC's core functions? <PROMPT: its purposes or activities set out in legislation>

How does the GDC work to deliver its core functions?

- What specific GDC activities are you familiar with? <Moderator to probe on register qualified dental professionals, set standards for the dental team, investigate complaints about dental professionals' fitness to practise, and set and ensure the quality of dental education.>

Can you recall coming across GDC's current corporate strategy?

- If yes – How did you learn about the corporate strategy? <PROMPT: Channels>

What would work best for you in GDC's communicating about its strategy? Have you seen this done well elsewhere?

What works best to share information about what the GDC does?

Perceptions of the GDC

What are the first words or thoughts that come to mind when you think of the GDC?

When and how did you first become aware of the GDC?

What impressions did you have of the GDC when you first learned about them?

What, if anything, have your professors or mentors shared with you so far about the role and purpose of the GDC?

What are your current perceptions of or attitudes toward the GDC? Why do you feel that way?

Has anything you've heard influenced your views positively or negatively? What and how?

Have you had any direct interactions with the GDC yet through registration, fitness to practice issues, or anything else?

- **If minimal experience**, what types of interactions would you expect to have in the future? How might those interactions impact your views?

Are you aware of any key GDC initiatives undertaken recently that affect dental education? Which stand out?

How could the GDC connect with students to establish positive perceptions of the dental profession regulator?

Engagement with the GDC

As a student, have you had opportunities to engage with any GDC consultations, events, or other initiatives which included/involved dental students?

- If yes: What made you decide to participate? What was your experience?
- If yes: How did communications and interactions with the GDC impact your perception of the organisation?
- If no, would you participate if you were given the opportunity?

How familiar are you so far with things like registration, annual renewal, CPD requirements, Fitness to Practise (FtP), etc., that will apply to you after graduation?

What has your education provider communicated to you about meeting regulatory compliance in practice?

- What questions do you still have about this process?

How, if at all, could the GDC better engage with students to increase understanding of and preparation for working in a regulated profession?

What kind of information or future interactions could impact your likelihood to participate and engage when you become a registrant?

Views on information channels and GDC communications

Where do you currently get most of your information about dental regulations, practice standards, etc?

Which sources are the most and least trustworthy?

What makes you trust certain sources more than others?

What dental industry topics or practice questions, if any, generate the most confusion or need for clarity among students?

How, if at all, do you decide what information is most relevant or a priority for you right now?

What GDC communications, if any, have you received or accessed as a student so far? Were the channels and frequency appropriate?

Have you received GDC emails/letters? If yes, how likely are you to open and read them? What makes you more inclined to engage?

Improvements and recommendations

What suggestions, if any, do you have for how the GDC could increase the usefulness and relevance of their communications to students?

Is there anything you'd suggest could improve how the GDC communicates with students?

What, if anything, could the GDC do to meet your future needs for practice guidance, regulations, etc?

Where do you think there are opportunities for the GDC to better connect with and be relevant to you as a dental student?

Summary and conclusions

Do you have any other suggestions to the GDC regarding the way it has been communicating with you or should communicate with you going forward?

Do you have any final reflections?

Thank you. We have now come to the end of the focus group. I really appreciate you taking the time to share your views with us today. The insights from tonight's group will feed into a final report that will be published on the GDC website.

If you have any questions, please do not hesitate to get in touch with us. Have a lovely evening and rest of your week!

Discussion guide – GDC stakeholder interviews

Introduction

Thank you for agreeing to take part in this interview. My name is [insert name]. YouGov is conducting a research study on behalf of the General Dental Council (GDC) to understand current perceptions of the GDC, its communications approach and inform current and future communications and engagement activities.

We would like to record the interview for note taking purposes. Everything you share with us will be confidential. The anonymised notes from the interview will be used for analysis and reporting, and in line with GDPR requirements the recordings will also be deleted at the end of the project. We might use comments and quotes from the interview, but these will not be directly attributed to you, and the recording will not be shared with our client.

There are no right or wrong answers, it's your honest feedback that I'm hoping for today.

- Do you have any questions for me before we start?
- Could you please confirm you have read and understood the information sheet and consent to participate in the interview?

Background

To start with, could you please tell me a bit about yourself: current role, place of work, how long you've been in that role, etc.?

What is your primary field of work?

What type of organisation do you work for (e.g., Health, private/public, what type of setting)?

Understanding the role and remit of the GDC

Based on your understanding, what is the role of the GDC?

What or who has informed your knowledge of the GDC?

What are the GDC's core functions? <PROMPT: its purposes or activities set out in legislation>

How does the GDC work to deliver its core functions?

- What specific GDC activities are you familiar with? <Moderator to probe on register qualified dental professionals, set standards for the dental team, investigate complaints about dental professionals' fitness to practise, and set and ensure the quality of dental education.>

To what extent do legislative policies constrain or impact how the GDC executes its mandate? How, if at all, could this be improved from your perspective?

Are you familiar with the GDC's current corporate strategy?

IF YES – How did you learn about the corporate strategy? <PROMPT: Channels>

- What are your views on its content? <PROMPT: Priorities, Relevance>

What would work best for you in GDC's communicating about its strategy? Have you seen this done well elsewhere?

How would you describe the levels of awareness about what GDC does? What is best/least known?

- What works best to share information about what the GDC does?

Perceptions of the GDC

What are the first words or thoughts that come to mind when you think of the GDC?

When and how did you first become aware of the GDC?

What is your relationship with the GDC? How has this evolved over time?

What are your current perceptions of GDC? Why do you say this?

- Moderator to probe for positive and negative aspects regarding the following:
<PROMPT: trust/ efficiency/ effectiveness/ fairness/ transparency/ accountability/ relevancy/ responsiveness/ proportionality>

Has your knowledge and perception of the GDC changed over time / specifically in the last three years?

What has influenced this change? <If not covered, moderator to probe on personal experiences, views or experiences of people they know, views or experiences they have read about.>

Have the GDC's actions influenced your views or knowledge of the organisation? In what ways? Can you give examples?

What interactions, if any, have you had directly with the GDC? How did those interactions affect your perceptions or attitudes?

Are you aware of the different actions and initiatives the GDC has undertaken over time? Which stand out to you and why?

Are you aware of any actions or initiatives undertaken by the GDC in the last three years that positively impacted your perceptions or attitudes towards them?

Engagement with the GDC

In what ways do you currently engage with GDC initiatives?

- Have you participated in any GDC consultations, events or calls for feedback? What prompted you to provide input? What was your experience?

How do communications and interactions with the GDC impact your perception of the organisation?

- Has the experience made you more or less likely to engage in the future?

Are there any types of information or interactions that would encourage you to engage more with the GDC?

Have any GDC communications, guidelines or decisions influenced your organisation? If so, how?

What, if anything, gets in the way, of you engaging more fully with GDC communications and initiatives?

<Prompt: Lack of time/resources/relevance, access?>

Views on information channels and GDC communications

Thinking about your area of the dental sector, how do you keep up to date with what you need to know?

- What information channels do you use?>
- <PROBE - Why do you choose these channels?>
- <PROBE - What type of information do you normally search for? In what format?>

What communications do you receive from the GDC? What are the main channels used?

What GDC practice guidance or resources are you aware of or have you accessed before? How did you use them?

How often do you receive any communications from the GDC?

- How likely are you to read the information sent to you? Why do you say this?
- Is there anything working well/less well in the way the GDC communicates with you?

In general, how useful do you find the content shared by the GDC?

- Overall, do the GDC's communications meet your needs? *<Prompt: accessibility, timeliness, subject matter, channels.>* Can you explain why?
- What is the type of content shared by the GDC that is most important to your area of the dental sector? What about least important?
- Is there anything in particular that you find more/less useful? Why?

How much influence do GDC communications have in shaping your knowledge and perceptions compared to other channels?

How clearly communicated and accessible is GDC guidance around key issues affecting dental professionals?

What additional guidance or support offerings from the GDC would be valuable for stakeholders like yourself?

Improvements and recommendations

What works well and what doesn't in the way the GDC communicates with you?

What improvements, if any, could be made in the way the GDC communicates with you? *<Moderator to probe regarding preferred channels, content, timing, formats, etc.>*

What more, if anything, could the GDC do to make its communications more relevant for you?

What information do you think is missing or insufficient?

Could there be opportunities for the GDC to better connect with and be relevant to external stakeholders?

In your opinion, what works well and what doesn't in the way GDC communicates with dental professionals from diverse backgrounds?

Do you think GDC communications and guidance are accessible and inclusive to all dental professionals? Why/why not?

What suggestions do you have to improve accessibility and inclusivity?

How well does the GDC communicate its strategic priorities and the reasons behind organisational decisions? Why do you say this?

Summary and conclusions

Do you have any other suggestions to the GDC regarding the way it has been communicating with you?

Do you have any final reflections?

Is there anything else you would like to add that I have not covered yet?

Appendix III: Response breakdown

Registrants: Stages of participant recruitment	
Opened survey	9,909
- Exited at introduction page	(4,292)
- Exited during early contextual questions	(739)
- Incomplete data	(1,501)
- Data quality cleaning	(160)
- Full completes	3,217
Number of participants included in the analysis	3,217

Students: Stages of participant recruitment	
Opened survey	259
- Exited out at introduction page	(131)
- Exited during early contextual / screening questions	(16)
- Data quality cleaning	(6)
- Incomplete data after Q02	(37)
- Full completes	69
- Including those who completed at least Q02	+37
Number of participants included in the analysis	106

Other stakeholders: Stages of participant recruitment	
Opened survey	410
- Exited at introduction page	(314)
- Exited during early contextual / screening questions	(25)
- Data quality cleaning	(3)
- Incomplete data after Q02	(11)
- Full completes	57
- Including those who completed at least Q02	+11
Number of participants included in the analysis	68