

Shifting the
balance:

a better, fairer system
of dental regulation

General
Dental
Council

protecting patients,
regulating the dental team

Taking it seriously
Scottish Regulatory Conference
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General Dental Council



Presentation Structure

- Shifting the balance and Policy Context
- GDC Evidence Strategy and Research Programme
- Public and Patient Survey GDC 2017
- Literature review on seriousness
- Cross – regulatory work

Shifting the balance:

a better, fairer system
of dental regulation



4 areas:

- Promoting professionalism
- Better handling of complaints/feedback by the profession
- Joining-up with partners
- Refocusing fitness to practise

Shifting the Balance

- Current system “rules based”: can undermine ownership and personal responsibility
 - Lack of engagement with standards
 - Insufficient confidence to apply common sense/pragmatism
 - Does not set out the big picture: what is professionalism *for*? Why does it matter?

Shifting the Balance

- Emerging alternatives:
 - Regulator brokers conversation between public & profession about expectations, obligations & privileges
 - Reflects those in agreements that professions can own and promote
 - Underpins engagement, standards, education & development etc

Overall views

- Recognise the need for the debate at this time
- Generally very supportive of the GDC's premise and involvement
- Some strong views, but no firm definition or description of professionalism – often default to GDC requirements

GDC Research Plan

GDC Evidence Strategy and the Research Workplan

- Evidence Strategy: Robust evidence and actionable insight.
- Research plan: Programme of work to gather evidence from patients, registrants and future registrants aligned to the pillars of Shifting the Balance

GDC Research Plan

Shifting the Balance: a better fairer system of dental regulation

Upstream

Promoting professionalism

Improving Resolution

Accessibility of complaints processes, equality and diversity

Refocusing Fitness to Practise/Right touch regulation

Developing the concept of seriousness; cross regulatory research

Organisational sustainability/development

Impact of EU exit: Survey of European Qualified Dental Professionals

Research Digest

- Share updates on research findings in dentistry
- Improve accessibility to research findings and key reports for patients, the public, professionals and students
- Increase information sharing with external partners



Aims and objectives

- To develop a firm evidence base for policy development in this area through a programme of research
- To ensure that we take a proportionate approach to enforcement action and focus on serious misconduct.
- To develop a 'hierarchy of risk 'for decision makers supporting them to make proportionate decisions.

We presented the public and registrants with a range of scenarios

A dentist accidentally prescribes/a dental nurse accidentally gives the wrong medication to a patient, and there are serious side effects leading to the patient being admitted to hospital

A dentist removes the wrong tooth/a dental nurse reads notes out wrong, as a result, a dentist removes the wrong tooth

A dentist/dental nurse is charged for drunk and disorderly behaviour on a night out

A dentist/dental nurse posts racist comments on their personal Facebook page

A dentist/dental nurse gives a patient a rude response to a complaint the patient has made about them



...and a range of sanctions

No action

Reprimand – this is a statement of the General Dental Council's disapproval, but the dental professional is still fit to practise with no restrictions

Conditions – this is where restrictions are placed on the dental professional's registration for a set amount of time, for example that they must take further training and provide evidence to prove that they are taking steps to improve

Suspension – this means that the person cannot work as a dental professional for a set period of time, but may return to work after the suspension is completed

Strike off register – this is the most serious sanction as it removes a dental professional's name from the register. This means that they can no longer work in dentistry in the UK

Don't know

Background to the research

Quantitative

- Sixth survey of patients and public
- Representative sample of 1,232 UK adults (from all 4 countries)
- Fieldwork dates: 31st March – 9th April 2017
- Includes tracker questions from previous waves and new topical and policy questions

Qualitative

- 2 online discussion groups with the 9 members of the public following the quantitative survey
- Provide a more in-depth understanding of some of the topics

People suggest different sanctions for different scenarios

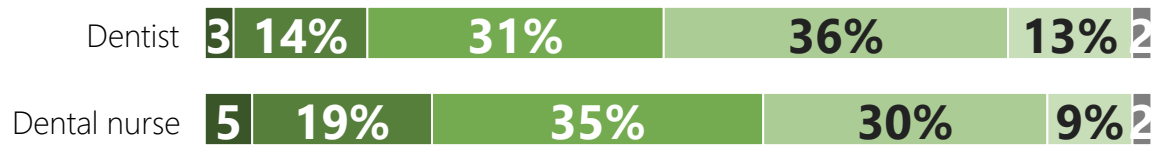
For each of these situations, please tell me what you think would be the most appropriate action, if any, for the dental regulator to take against the dentist/dental nurse? This action would be on top of any action other organisations, such as the police, may have taken.

■ No action
 ■ Reprimand
 ■ Conditions
 ■ Suspension
 ■ Strike off register
 ■ Don't know

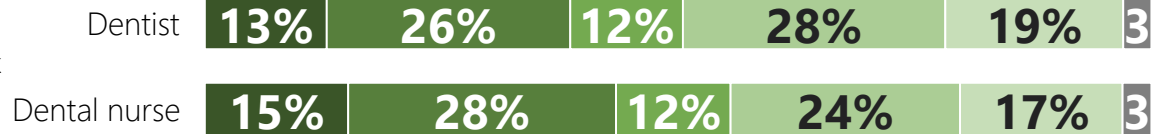
A dentist accidentally prescribes/a dental nurse accidentally gives the wrong medication to a patient, and there are serious side effects leading to the patient being admitted to hospital



A dentist removes the wrong tooth/a dental nurse reads notes out wrong, as a result, a dentist removes the wrong tooth



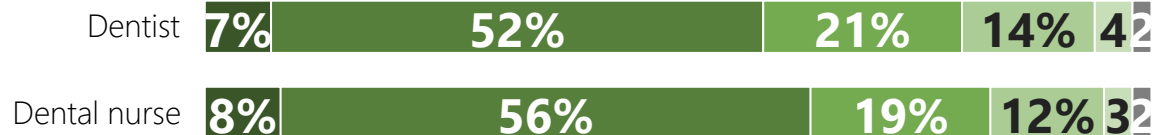
A dentist/dental nurse posts racist comments on their personal Facebook page



A dentist/dental nurse is charged for drunk and disorderly behaviour on a night out



A dentist/dental nurse gives a patient a rude response to a complaint the patient has made about them



Base: All respondents: (1,232)

The public expect more severe sanctions when wrongdoing occurs during treatment than during personal time



Base: All respondents: (1,232)

...as the distinction between professional and public life is clear



Their behaviour in their personal time has no bearing on their professional performance I would hope, and I would not really be likely to know what they get up to anyway.

(Male, 60-64, social grade C2)



I would prefer not to know what they do in their private lives as long as they do a good professional job in their work.

(Male, 60-64, social grade C2)



Suspension for being convicted...the private behaviour reflects on their professional judgement. The GDC need to be aware of any issues that could directly affect the welfare of patients."

(Female, 45-54, social grade C1)



An exception is if a dental professional is racist

No action Strike off register

A dentist accidentally prescribes the wrong medication to a patient, and there are serious side effects leading to the patient being admitted to hospital

3%

21%

A dentist removes the wrong tooth

3%

13%

Professional time

A dentist gives a patient a rude response to a complaint the patient has made about them

7%

4%

A dentist posts racist comments on their personal Facebook page

13%

19%

Personal time

A dentist is charged for drunk and disorderly behaviour on a night out

42%

6%

Base: All respondents: (1,232)



Suspension, I am tough on this one. As a trusted professional you need to be unbiased and have all your patients' best interests at heart. How can anyone of that race have any confidence in you to treat them to the best of your ability if you openly discriminate against them? The practice and profession will also be impacted by such behaviour."



(Female, 25-34, social grade B)

People think *slightly* more lenient sanctions

should be given to dental nurses than dentists

Hierarchy of
accountability in
practice

Dentists are
perceived as:

**more senior,
with more
responsibility**



A dentist has more responsibility than a nurse and is more likely to bring the practice into disrepute.

(Female, 65-74, social grade B)



The nurse would be under the dentist's supervision so he should be the first to reprimand.

(Male, 60-64, social grade C2)



No, if the standard is set then it should be set across the board. Why give different levels per role? It would be more likely to be affected by the choice of comment, or method it's given.

(Female, 25-34, social grade B)



Background and research aims

- GDC's Registrant Survey previously conducted annually between 2011 and 2013 - significant gap between this survey (2017) and the most recent wave (2013)
- Provide statistically reliable data and qualitative evidence on registrants' views to inform future policy and performance
- Provide benchmarking data and track views
- Gain insight and understanding of current topics and issues
- 'Horizon scan' and identify emerging policy issues with registrants
- Full report will be published – this presentation focuses on two specific areas – **seriousness, misconduct and regulatory action** and **perceptions of fitness to practise**

Methodology

Mixed methodology - quantitative and qualitative



Quantitative

- Online survey
- Questionnaire designed – repeated tracking questions and strategic/topical policy issue questions
- Sent to a representative sample of 36,000 registrants
- 1,489 responses received between 13 October and 13 November 2017 (17% response rate)
- Results weighted to be representative of GDC registrant population

Qualitative

- 4 focus groups
- 26 in depth telephone interviews
- Stratified to be broadly representative of GDC registrant population
- Explore survey topics in greater depth
- Tailored discussion guide



Appropriate actions for the GDC to take

Possible actions the GDC can take:

Reprimand - This is a statement of the GDC's disapproval, but the dental professional is still fit to practise with no restrictions

Conditions - This is where restrictions are placed on the dental professional's registration for a set amount of time, for example that they must take further training and provide evidence that they are taking steps to improve

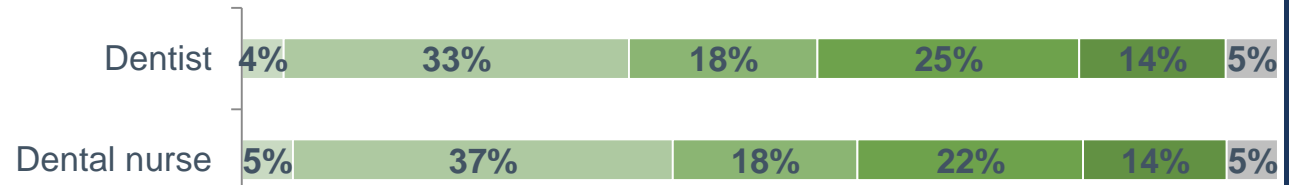
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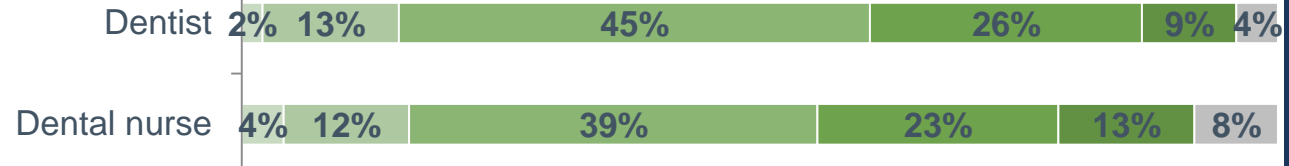
No action

Appropriate actions for the GDC to take

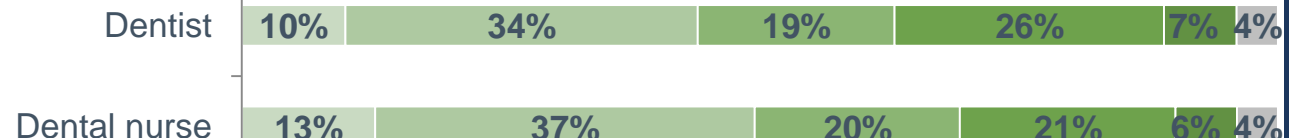
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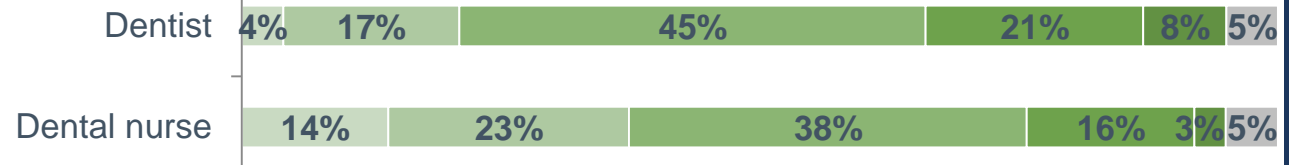
A dentist accidentally prescribes/a dental nurse accidentally gives the wrong medication to a patient, and there are serious side effects



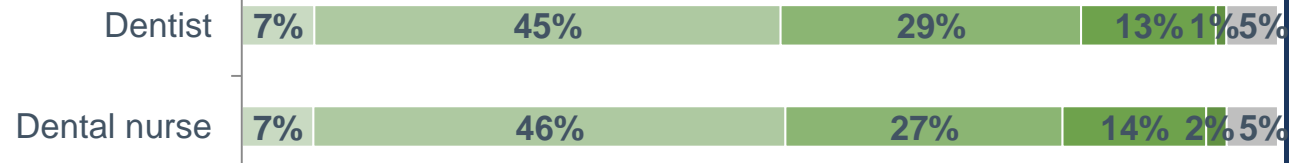
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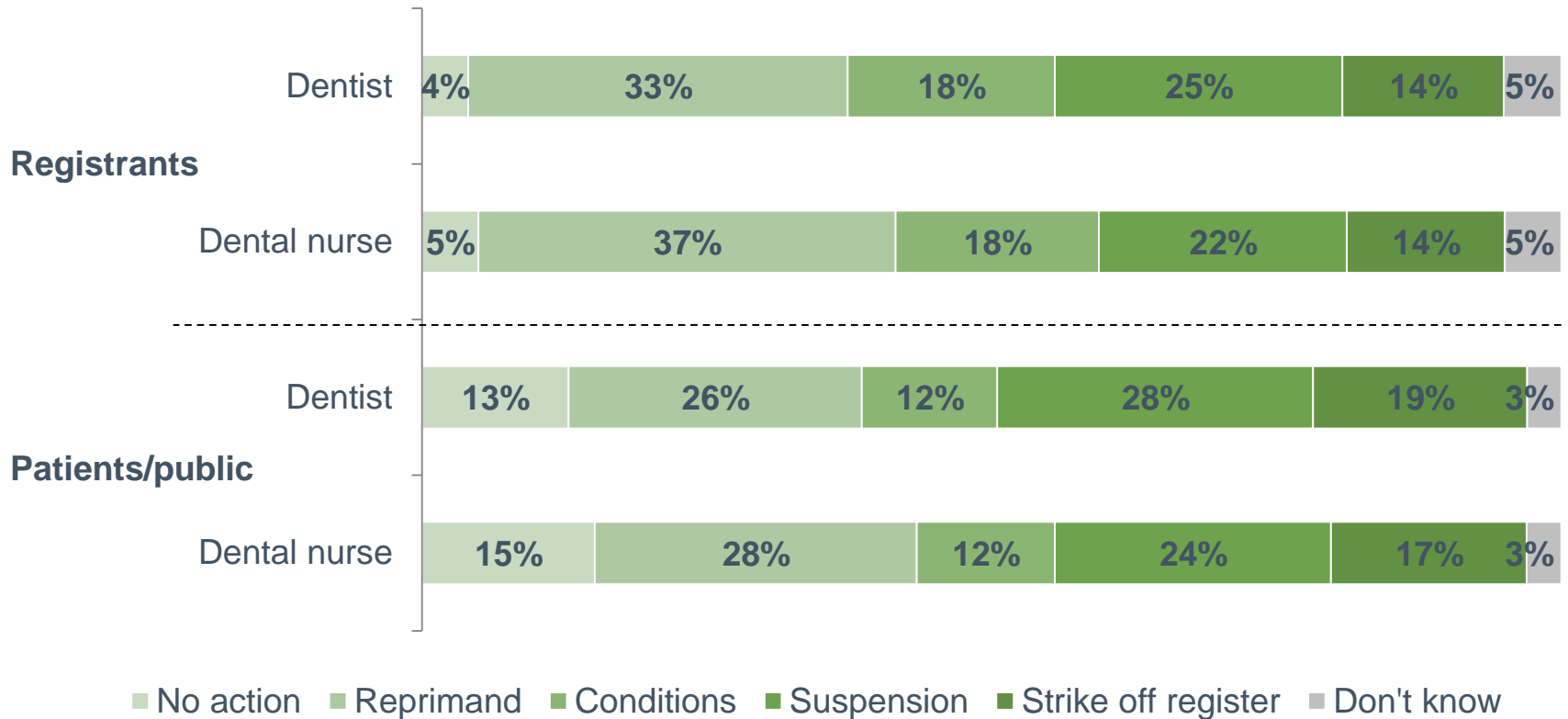


A dentist/dental nurse gives a patient a rude response to a complaint a patient has made about them



No action
 Reprimand
 Conditions
 Suspension
 Strike off register
 Don't know

A dentist/dental nurse posts racist comments on their personal Facebook page

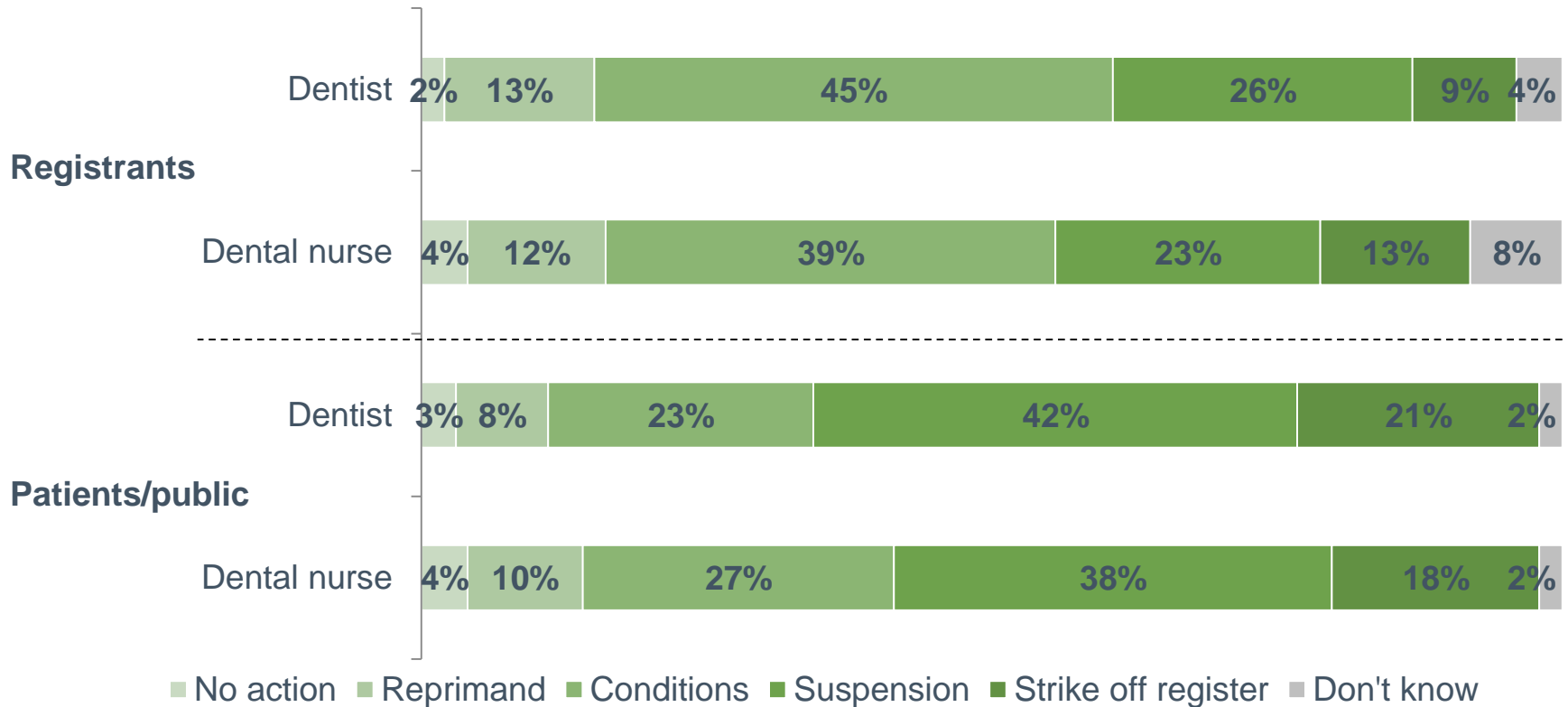


I'd suggest conditions. There may be more training that's needed.

If that person's judgement is affecting the way they are treating patients then that's relevant to the GDC.

It would depend on the level of the comment. If that person is exhibiting real, genuine hatred for a group of people then maybe it is a patient safety issue. If it's an off-colour joke then it probably isn't. So any of those actions could be appropriate.

A dentist accidentally prescribes/a dental nurse accidentally gives the wrong medication to a patient, and there are serious side effects

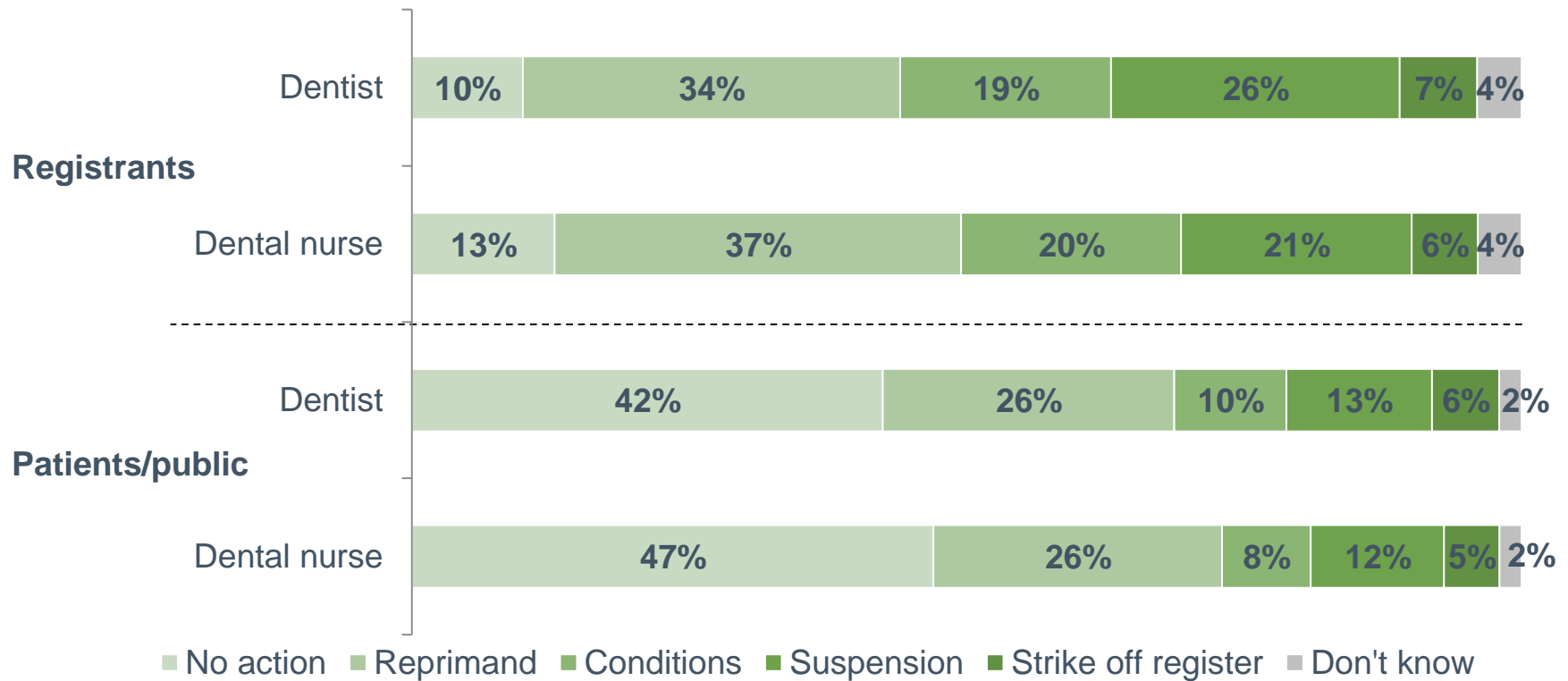


If it was a mistake then it should be a reprimand but maybe with some training.

If it happened it would be a learning point to know that you can't just rely on their medical history and you need to ask them every time.

One in five thinks that if you make a mistake that's it, your career is over...Do they think, in their jobs, that if they make one mistake they should be sacked?

A dentist/dental nurse is charged for drunk and disorderly behaviour on a night out



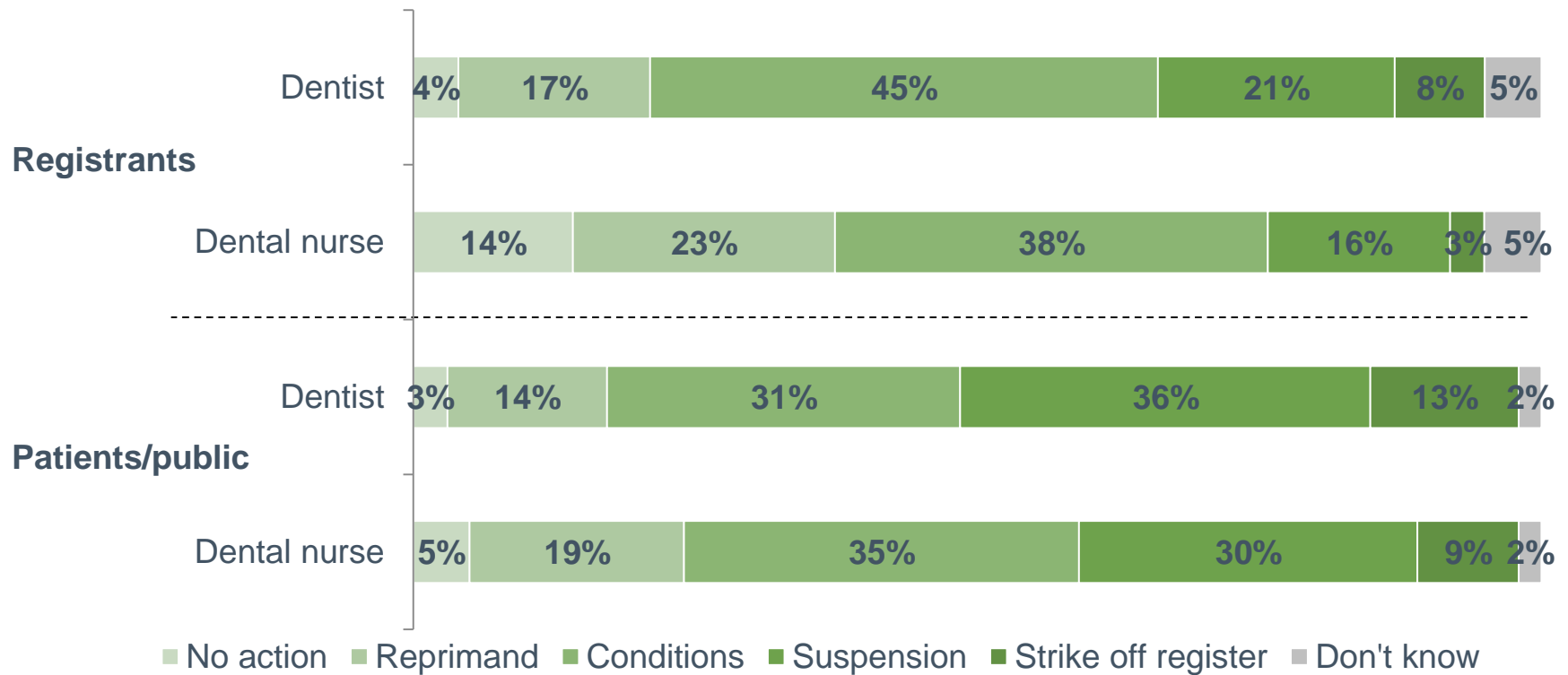
Unless they're actually found guilty there should be no action.

Since the GDC's remit is to deal with patient safety, why would being drunk and disorderly affect a patient's safety?

Are they bringing the profession into disrepute?

It may need to be investigated for alcohol abuse.

A dentist removes the wrong tooth/a dental nurse reads notes out wrong and, as a result, a dentist removes the wrong tooth

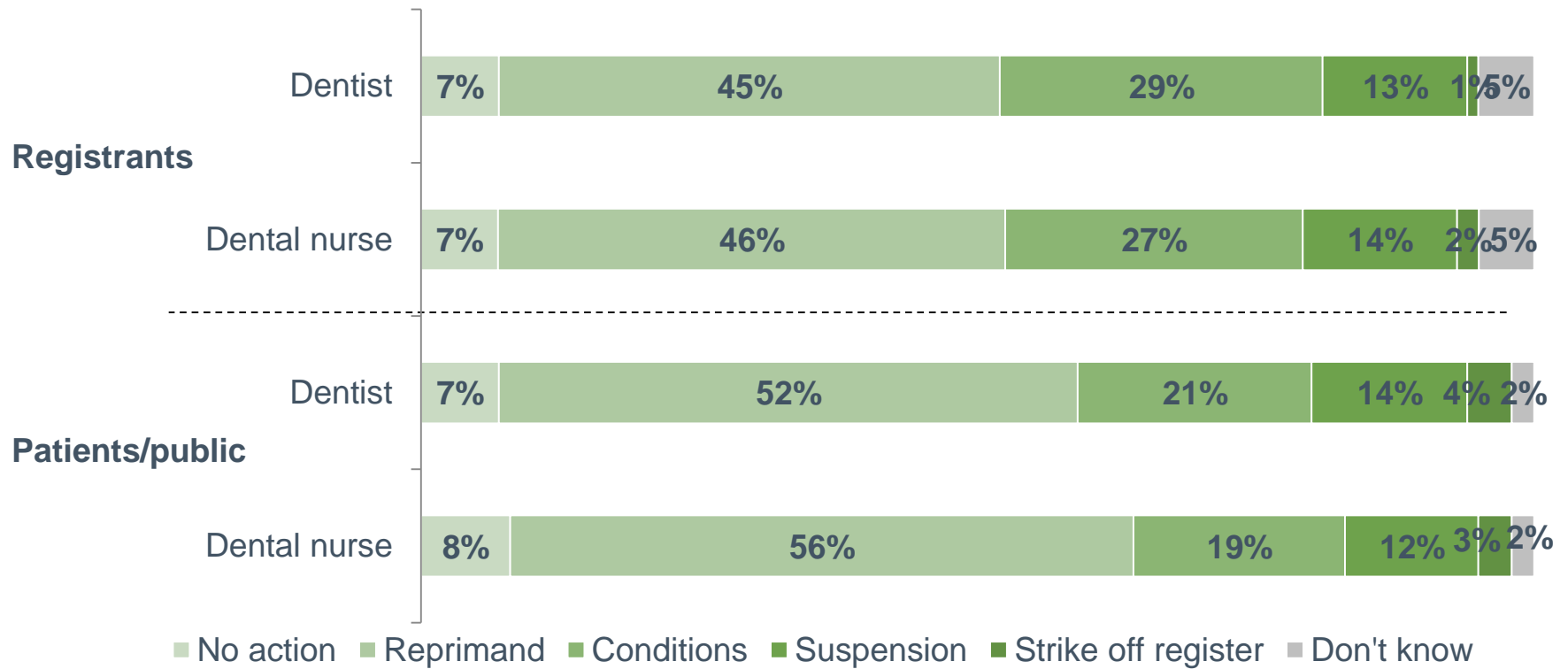


If it's a consistent event then the dentist needs training

It's a training issue potentially

I think conditions if it's multiple.

A dentist/dental nurse gives a patient a rude response to a complaint a patient has made about them



Just a little bit of extra training would resolve that, wouldn't it?

I think it should be done in-house. It shouldn't reach the GDC.

A rude reply doesn't necessarily affect the care of the patient.

Registrant survey - attitudes to misconduct

A dentist posts racist comments on their personal Facebook page

No Action 4%

Strike off register 14%

A dentist is charged for drunk and disorderly behaviour on a night out

No action 10%

Strike off register 7%

A dental nurse posts racist comments on their personal Facebook page

No action 5%

Strike off register 14%

A dental nurse is charged with drunk and disorderly behaviour on a night out

No action 13%

Strike off register 6%

Literature Review

- Literature review carried for the GDC by
CAMERA/Plymouth University Schools of Medicine and Dentistry
- Synthesises the relevant available evidence about how regulators use their Fitness to Practise powers and processes to sanction serious misconduct.
 - Includes published and grey literature that covers both health and other selected professions and covers literatures in the UK and professional regulation internationally.

Literature Review

Emerging Findings

- Defining (serious) Misconduct
- Nexus
- Factors informing decision-making around serious misconduct
- Aggravating and mitigating factors.

Cross - regulatory work

- A cross-regulatory picture of how serious misconduct is dealt with. Is it proportionate?
- Scoping and working with other regulators to develop a research project that will examine their approaches
- Project aims and objectives include:
 - Relative and absolute concept of seriousness
 - Differences and similarities in approaches to seriousness
 - Link between public confidence and enforcement action

Next Steps

End

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