

**Draft response to Consultation on the principles of specialist listing**

<p><b>Purpose of paper</b></p>	<p>This paper provides a draft response to the consultation on the principles of specialist listing.</p>
<p><b>Action</b></p>	<p>The Council is asked <b>to approve</b> the draft response to the consultation on the principles of specialist listing for publication.</p>
<p><b>Corporate Strategy 2020-22</b></p>	<p><b>Strategic aim 1:</b> Operate a regulatory system which protects patients and is fair to registrants, while being cost-effective and proportionate; which begins with education, supports career-long learning, promotes high standards of care and professional conduct and is developed in the light of emerging evidence and experience.</p>
<p><b>Decision Trail</b></p>	<ul style="list-style-type: none"> <li>• In December 2016, the Council approved the process for the revision of specialty curricula, including the generic framework which would serve as the basis for the various specialty curricula.</li> <li>• The Specialty Working Group was first convened in May 2017 to co-ordinate the work of stakeholders relating to specialty training and, to date, has met six times in total.</li> <li>• A rapid review of specialty curricula was undertaken in 2017.</li> <li>• In September 2018, the Policy and Research Board (PRB) considered the progress of the Specialty Working Group and noted the plan to consult on the principles of specialist listing in 2019.</li> <li>• The EMT reviewed the draft text of the consultation in October 2018 and, subject to minor amendments, approved it for consideration by the PRB and Council.</li> <li>• The PRB reviewed and approved the paper in November 2018 and the Council approved the consultation for publication in December 2018.</li> <li>• The consultation was launched on 31 January 2019 and closed on 25 April 2019.</li> </ul>

<b>Next stage</b>	Further to feedback from Council and approval to publish, any necessary amendments will be made and the response to the consultation will be published by the end of 2019.
<b>Recommendations</b>	The Council is asked <b>to approve</b> the draft response to the consultation on the principles of specialist listing for publication.
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<b>Appendices</b>	<b>Appendix 1:</b> Terms of reference of the Specialty Working Group (included with cover paper) <b>Appendix 2:</b> Draft response to the consultation on specialist listing.

## 1. Introduction

- 1.1. The Council are asked to approve the publication of the draft response to the consultation on specialist listing found at **Appendix 2**.

## 2. GDC consultation on specialist listing

### *Background*

- 2.1. In May 2017, the GDC established the Specialty Working Group (SWG), a group of key stakeholders in dental specialty training and education from across the UK to more efficiently co-ordinate and take forward policy developments in those areas. To date, there have been seven meetings of the Group, including workshops, which have been held approximately every three months, the most recent of which was on 3 July. **Appendix 1** shows the terms of reference of the SWG.

### *Consultation on the principles of specialist listing*

- 2.2. In January 2018, the GDC invited the SWG to consider the historical purposes and objectives for having specialist lists. The historical definition was sanctioned by the Council in March 2005 and serves as the current formal definition of the purpose and benefits of specialist listing in dentistry. It is as follows:
- to ensure high standards of training and assessment qualifying dentists to use a specialist title;
  - to indicate those dentists who possess recognised specialist knowledge, skills and attitudes;
  - to protect patients against unwarranted claims to be a specialist;

- to facilitate appropriate referrals of patients;
  - to promote high standards of care by dentists qualified to use a specialist title;
  - to encourage postgraduate education.
- 2.3. A 2014-2015 GDC review of the its role as regulator of the dental specialties concluded that the GDC should continue to regulate the specialties, but not make significant policy changes.
- 2.4. The consultation is an opportunity to consider and propose modern principles for specialist listing.
- 2.5. With the SWG's input, the GDC has developed a revised set of purposes and criteria for specialist listing, which, if adopted by Council post-consultation, would serve as a basis for making policy decisions on the dental specialties. With Council's approval, the GDC published this public consultation on 31 January for 12 weeks, and the consultation closed on 25 April 2019.
- 2.6. The consultation was also an opportunity to solicit views on other policy issues fundamental to the function of specialist listing. Therefore, the GDC also consulted upon:
- 2.6.1. draft principles for the process of the addition or removal of a new specialist list (which is the sole remit of the GDC; however, other stakeholders play a considerable role in training, education and assessing applications for dental specialties);
  - 2.6.2. fundamental questions and, potentially, early proposals about maintaining specialist list accreditation.
- 2.7. The consultation can be found here [www.gdc-uk.org/about/what-we-do/consultations](http://www.gdc-uk.org/about/what-we-do/consultations).
- 2.8. It should be noted that the GDC currently receives income from the administration of the specialists lists in the form of fees collected from those on the lists. This is collected by way of a specialist registration fee of £345 (per specialty) paid on registration, and an annual specialty retention fee of £72 per annum thereafter. Any developments which might impact on the GDC's income would require SLT and Council approval so would be discussed with SLT and Council well in advance of any proposed changes being made. In future fees policy development work, a separate piece of work will be needed to look specifically at specialist lists and the implications of any changes. In line with the fees policy agreed by Council, it is anticipated that any developments regarding specialist lists, would be paid for by specialists themselves as part of the specialty registration and retention fees. Further work is needed in this area.

#### *Response to the consultation*

- 2.9. We have received 161 responses to the consultation and have drawn together a response, found at **Appendix 2**. The Council are asked to approve the publication of this response.
- 2.10. We have responded to the feedback received and included a GDC policy response for each of the three sections. This includes:
- 2.10.1. revisions to the purpose and criteria of specialist lists which, if approved, will

be published;

2.10.2. the development of a process for the addition or removal of specialists from the lists;

2.10.3. further exploratory work regarding the maintenance of accreditation of the specialist lists.

- 2.11. The follow up to this consultation can be supported within the present policy team resources. The proposed work is included in the costed corporate plan and aligned with the corporate strategy.
- 2.12. Other comments were made during the course of the consultation not specifically related to the questions posed. This feedback has been useful to demonstrate areas of interest by a number of groups, and where relevant, will be discussed with the SWG.
- 2.13. No discussion has been included as to any changes and their impact on fees as this would pre-empt policy developments.
- 2.14. It is anticipated that any changes made to the accreditation of those on the specialist list, would be retrospective.
- 2.15. It appears from the feedback gathered that clarity might be useful to patients and the public around what holding a specialist title means and, accordingly, have tried to be more explicit about this in the purpose and criteria as well as any ongoing communication in this area. We can also explore this further in future patient and public surveys.

#### *Other specialty developments*

- 2.16. A full update in relation to specialty developments was given to the SLT, including the quality assurance of specialty training, the revision of specialty curricula and a comprehensive review of mediated entry which are all currently under way and will be shared with SLT, PRB and Council in due course.

### **3. Actions and next steps**

- 3.1. Council is asked to approve for publication the consultation response in **Appendix 2**.
- 3.2. Should Council be happy to approve the consultation response, we would like to publish the response by the end of 2019. This timing would enable us to link this work (particularly the revision of the purpose and criteria) with the revision of specialty curricula, which (further to Council approval in December), is potentially due to commence in January 2020.
- 3.3. Further development work will be undertaken regarding maintenance of accreditation on specialist lists, utilising feedback received from this consultation and updates will be given as the work progresses.
- 3.4. The GDC remains committed to working closely with profession, patients and the public on future developments related to the specialist lists, continuing to be transparent in how we work.

## Appendix 1

### Specialty Working Group Terms of reference

**Aim:** The Specialty Working Group is a forum to collaboratively take forward decisions and actions regarding specialty training across the UK, with a view to:

1. identify areas of mutual interest relating to specialty training in the UK;
2. establish joint enterprise and aim to ensure that current and future projects are aligned to support coordinated and timely development;
3. ensure that the specialist lists remain current, relevant and are aligned with initiatives such as *Shifting the Balance* as well as within the wider regulatory reform landscape;
4. explore how to support the administration of the specialist lists on an ongoing basis.

#### Objectives:

- to review and clarify the criteria for the specialist lists;
- to gain clarity on areas of uncertainty and discuss the development of solutions going forward;
- to work together collaboratively with relevant stakeholders across the four nations involved in the development and delivery of specialty education;
- to inform any significant work relating to the specialties, and to share expertise for the benefit of that work.

#### Membership:

Membership includes representation from organisations across the four nations of the UK with a significant stake in specialty membership and training. That includes representation from:

- the General Dental Council;
- the Chief Dental Officers;
- education bodies with a significant role in the commissioning, delivery, development or assessment of specialty training;
- organisations with a significant interest in the delivery of specialist dental care; and
- organisations whose primary focus is the support of general dental practice.

**Meetings:** To be identified by the group.

**Secretariat:** This will be provided by the GDC, although it is important to note that this is a collaborative initiative, with leadership provided by the membership.