

GDC Patient and Public Survey 2018/19 – For Publication

Purpose of paper	This paper requests approval to publish the Patient and Public Survey 2018/2019.
Action	The Council is requested to approve publication of the Ipsos Mori independent Patient and Public Survey 2018-2019 and the Ipsos Mori technical report. (Appendix 1 and 3), in line with the proposed publication plan at Appendix 2 .
Corporate Strategy 2016-19	Patients - Objective 1: To gain a full understanding of patients' needs and expectations so these can be reflected in all the work we do.
Costed Corporate Plan 2019-2021	Costed Corporate Plan 2019-2021: Theme: Using research and intelligence to understand the dental environment. Data and Intelligence Strategy and Action Plan: Implementation.
Decision Trail	<ul style="list-style-type: none"> • The Patient and Public Survey 2018-9 was included in the Policy and Research Plan approved by Policy and Research Board in November 2018 • On 3 September 2019, the SLT agreed that the report and proposals for its publication should be recommended to the Policy and Research Board (PRB). • On 12 September 2019, the PRB agreed to recommend to the Council the publication of the report and appendices, subject to amendments, which have now been incorporated.
Next step	Subject to the Council's approval, publication of the public and patients survey will go ahead as detailed in appendix 2 .
Recommendations	Council is asked to approve the publication of the Patient and Public Survey Research Report 2018/19 (Appendix 1) and Technical Report (Appendix 3) according to the Communications and Engagement Plan (Appendix 2).

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<p>Appendices</p>	<p>Appendix 1: Patient and Public Survey Research Report (Ipsos Mori)</p> <p>Appendix 2: Communications and Engagement Plan for the Patient and Public Survey report.</p> <p>Appendix 3: Patient and Public Survey Technical Report (Ipsos Mori)</p>

Executive summary

1. This paper is submitted in compliance with the Research Publication Protocol. On 3 September 2019, the SLT agreed that the paper and its proposals for publication should be presented to the Policy and Research Board (PRB). On 12 September 2019, the PRB recommended to Council that the report be published, subject to minor amendments, which have now been made.
2. The Council is, accordingly, requested to **approve** publication of Ipsos Mori's independent Patient and Public Survey 2018-19 Research Report (**Appendix 1**) and Technical Report (**Appendix 3**) according to our publication plan (Appendix 2).

Introduction and background

3. The GDC Patient and Public Survey has been conducted since 2011 and captures patient and public perceptions of the GDC and insights into dental regulation and policy.
4. The 2018/9 survey comprises a representative sample of patients and the public **n=1589** adults aged 15+ from across the UK and qualitative research through telephone depth interviews and a deliberative workshop.
5. This paper summarises the survey's development and fieldwork completed, key findings and their implications for the GDC with particular reference to Moving Upstream and for future research.
6. An brief 6 slide executive summary of key findings is provided at the beginning of Ipsos Mori's full report (Appendix 1). Overall, headline findings are in line with previous years, high levels of confidence in dentists (95% are satisfied with their dental care and treatment) and in dental regulation (74% were confident in the GDC's regulation of dentistry) and relatively low levels of complaints (7% had ever complained about a dental professional). Hence, while the publication

of the current survey is generally considered low risk, risks have been identified and are presented in paragraph 21, along with plans for mitigation.

7. The GDC has carried out an annual Patient and Public Survey since 2011. The survey is designed to capture patient and public awareness and perceptions of the GDC, and to provide insight into attitudes toward dental regulation and policy. The survey uses mixed methods research, comprising a representative survey of patients and the public aged 15 and over, drawn from across the four nations of the United Kingdom and qualitative research which allows for more in depth deliberative exploration of some of the issues included in the quantitative survey. The survey, analysis and reporting were provided by our independent contractor Ipsos Mori.

Survey development and fieldwork

8. **Coproduct**. To identify evidence needs and the issues to be included in the survey, content was produced in dialogue with staff from across the GDC and Ipsos Mori. Questions were cognitively tested with patients and the public and the final survey was amended in the light of this feedback. A workshop was held in July, bringing together members of the public, GDC staff and stakeholders to discuss key survey findings.
9. **Research instrument content**. The survey featured a series of question on patient satisfaction, healthcare and dental regulation which are repeated to allow for the results to be tracked over time. This years' survey has focused on generating evidence for the key Shifting the Balance and Moving Upstream workstreams. The content of the survey and qualitative instruments are included in the technical report produced by Ipsos Mori (see Appendix 3).
10. **Survey fieldwork**. The 2018/19 quantitative survey was carried out with a representative sample of 1586 adults drawn from across the UK in November and December 2018. The survey is stratified to allow for analysis of subgroups based on age, gender, UK nation and socio-economic status. Significance testing was completed at these subgroup levels and all significant results are presented. Analysis is fully explained in Ipsos's reports (Appendices 1 and 3).
11. **Qualitative fieldwork**. Research was carried out in February and March 2019 and comprised 10 in depth interviews and a deliberative workshop. Further details of the methodology can be found in the Ipsos's reports (Appendices 1 and 3).

Key findings and implications

Dental regulation and the GDC

12. **Confidence**. Almost three-quarters (74%) of public were confident in the GDC's regulation of registrants with respondents more likely to be fairly confident (52%) than very confident (21%). Patients that are from a (BAME) background were less likely to be confident (64% compared to 74%). Ipsos Mori suggest that this could be linked to another finding in the survey which found less confidence in the way dental care is delivered. This was 74% for BAME patients, compared with 84% for white patients. We intend to conduct further specific research to ascertain what lies behind these findings and, importantly, within our remit what we and what others can do to address these variations of experience and to determine the extent to which this is dentistry specific or part of a wider trend in healthcare regulation. One option under consideration, is to conduct research with the GDC patient and public panel; a boosted sample of BAME patients could be recruited for a mixed-method focused study.
13. **Priorities for dental regulation**. This year's survey featured questions designed to provide evidence relevant to our Shifting the Balance and the Moving Upstream agenda. Respondents were asked what we should be focusing on, out of three options they were asked to select the most important to them:
 - 13.1 **Prevention and FTP**. Nearly two-thirds (65%) thought that the focus should be equally on preventing bad practice and taking action against registrants that have serious complaints raised against them;

- 13.2 **Prevention.** Just over a fifth (22%) thought that the focus should be mainly on preventing bad practice;
- 13.3 **FtP.** Less than one in ten (7%) thought that the focus should be mainly on taking action against registrants that have serious complaints against them.

Promoting and maintaining public confidence in the dental profession

- 14. Via a workshop with public and patients, factors affecting confidence and GDC's role in maintaining confidence were explored; responses suggest that:
 - 14.1 confidence would be more negatively affected the **higher the number of people that were involved in an incident** (either as victims or as professionals) and the **longer its duration**;
 - 14.2 when the **risk to the public was greater**, confidence would be more negatively affected;
 - 14.3 confidence would be more negatively affected where **system-wide risks** were involved (as in the Bawa-Garba case), although this was related to public confidence in the system of health, rather than in the individual professional;
 - 14.4 public confidence was linked to the level of **trust in the profession as a whole**. Public confidence is linked to a **presupposition of trust in health professionals**, including dental professionals (unlike other professional such as journalists and politicians). As a result, patients felt that **individual incidents** would be **less likely to impact on wider public confidence** in the profession.
 - 14.5 the public see a **role for the regulators** in monitoring and **identifying early warning signs before an incident escalated** and had an impact on public confidence.
- 15. Survey analysis informs our consideration about the extent to which (and how) **regulation balances system wide and individual risk**. The focus on **early intervention** to identify risk aligns with the GDC's focus on **prevention and in developing a risk profile** that picks up early signs of performance and behaviour that may indicated enhanced risk.

Professionalism in dentistry

- 16. The qualitative and quantitative research explored what was most important to the public when thinking about professionals and professionalism in general and, specifically, in dentistry:
 - 16.1 Survey responses show that **Knowledge and expertise** are associated with defining professionalism (47%), while communication was seen as particularly relevant to healthcare, compared with other professions given the vulnerability of some patients.
 - 16.2 The evidence about the ethical underpinnings of professionalism was mixed. Although **honesty** was only identified by 13% of survey respondents as **key characteristic**, the qualitative research found that putting **patients ahead of profit** and being trusted to do so were key to participants' **definitions of dental professionalism**.
- 17. Survey analysis will **contribute to the evidence base** informing the Shifting the Balance workstream on **Professionalism**. Questions about professionalism also feature in the Dental Professional Survey which is currently being conducted with a sample of GDC registrants. A rapid assessment of evidence (RAE) looking at professionalism in dentistry is currently being conducted and further in-depth research with patients and registrants is planned as part of the professionalism workstream.

Providing feedback to a dental professional

- 18. **More** survey respondents said that they were very likely to **feed back in a negative scenario** (44%) than in a positive one (37%). The likelihood of feeding back **varies according to age and social grade**. Older people, 65+ (78%) and those in social grades AB (80%) were more likely to provide negative feedback than was the case for their counterparts aged 15-25 (66%) and for those in the DE social category (66%).

19. Survey analysis will inform the evidence base for the Shifting the Balance workstream on developing a model for complaints handling for first tier complaints and the profession wide complaints handling initiative.

Patients or consumers

20. Qualitative research considered in what circumstances patients considered themselves a patient or a consumer in relation to dentistry. Participants in the workshop thought that they could be **both consumers and patients**, and that their 'identity' was a continuum based on whether treatment resulted from **choice or need**.

Risks and considerations

21. Risk and considerations relating to the survey are outlined below.

<p>Communications</p> <p><i>The answers to the questions have been developed in collaboration with the communications team.</i></p> <p>1. <i>Could the matter discussed in this paper have a potential impact on our reputation and/or our relationship(s) with patients, dental professionals and/or our partners?</i></p> <p>All communications activity comes with a degree of risk in terms of impact on GDC reputation and our relationship with stakeholders, this project represents a low risk.</p> <p>2. <i>Will the matter discussed in this paper have to be communicated? Who to and when?</i></p> <p>Yes. Please refer to communications and engagement plan (Appendix 2)</p>
<p>Equality and Diversity</p> <p>1. The sampling for the Patient and Public Survey includes representative quotas for age, gender and ethnicity. This allows for analysis and comparison of responses between different subgroups in the population and evidence of significant differences in responses on issues relevant to dental and regulatory policy. For example, BAME respondents (64%) were significantly less likely to be confident than white respondents (74%) that the GDC was regulating dentists and dental care professionals effectively.</p> <p>2. There are a number of significant 'negative findings in the subgroup analysis by age, social grade and ethnicity. These include that that social grades C2, D and E were significantly less likely to be satisfied with their dental care and fewer participants aged 15-24 said they were likely to provide feedback. There are lower levels of confidence among Black and Minority Ethnic respondents (BAME) that the GDC is regulating dentists and dental care professionals effectively. The risk is that we are currently unable explain and work to address these findings (or decide if we need to) and therefore more specific research is needed.</p> <p>3. No EIA was been carried out. The invitation to tender required contractors propose sampling and methods which enabled subgroup analysis and that provided for accessibility in methods and fieldwork. Reporting of the survey highlights all significant variations in responses by age, ethnicity, gender and social group.</p>
<p>Legal</p>

1. The paper refers research conducted as part of the Patient and Public survey which refers to the duty to maintain and promote public confidence which is specified in the Dentists Act 1984.

Policy

How does this proposal impact GDC policy decision-making?

The survey has been designed to generate robust evidence on patient and public attitudes to the GDC and regulatory policy, particularly in relation to Moving Upstream workstreams. The research report is made available to the policy leads for the workstreams and findings drawn upon in developing policy. A risk could arise, if relevant evidence of patient and public perceptions and attitudes from the survey is not drawn upon in developing policy for the workstreams. This risk will be mitigated by our plan for disseminating the research to the policy leads for the relevant workstreams, and ensuring that the key findings and their implications for policy are understood and influence policy making. The Communication and Engagement plan set out how internal communication channels can be used to disseminate and embed knowledge of the key findings from the survey.

Resources

The cost for the annual Patient and Public Survey are included in the Research and Intelligence budget for 2019 and on into 2022.

National

The Quantitative survey is conducted with a representative sample of the public drawn from across four nations. This allows for comparative analysis between each nation and for statistically significant differences to be highlighted. We intend to review the scenarios used for qualitative research going forward and the terminology used in survey questions (i.e. dentists v dental professionals)

Recommendations

22. The Council is, accordingly, requested to **approve** publication of Ipsos Mori's independent Patient and Public Survey 2018-19 Research Report (**Appendix 1**) and Technical Report (**Appendix 3**) according to our publication plan (Appendix 2).

Appendices

23. **Appendix 1.** GDC Patient and Public Survey Research Report 2018-19 (Ipsos Mori).

24. **Appendix 2.** Communications and Engagement Plan for the GDC Patient and Public Survey.

25. **Appendix 3.** GDC Patient and Public Survey Technical Report 2018-19 (Ipsos Mori).