

Submission to accompany publication of PSA Performance Review

The GDC is meeting the PSA's Standards for Guidance and Standards function and its Education and Training work. The GDC has met all but one of the PSA's Standards for Registration.

The GDC has undertaken a considerable programme of improvement and reform of its Fitness to Practise area since the PSA Performance Review published in June 2014. This has led to a significant improvement in the performance of our Fitness to Practise function which does not show through in the latest Performance Review due to the historical nature of the PSA's audit methodology. We are very positive about the direction of travel of our Fitness to Practise function although we accept that there is still more to be done.

As the footnotes in the Performance Review make clear, much of the evidence used in arriving at the conclusions on whether a Fitness to Practise standard is met or not, was identified from a review of our work between November 2014 and April 2014. Since that point, in addition to a number of reforms, the GDC has:

- Invested £620,000 during 2014 to provide two additional casework teams to clear a backlog of 750 Fitness to Practise cases through the investigation stage. At the end of 2014, this work was practically complete; most of the cases had completed the investigation stage and the small number remaining will have been fully investigated and assessed by end-July 2015.
- During the same period, we have increased the number of Investigating Committee meetings by 33% and Practice Committee meetings by 60% to enable the GDC to handle the increase in investigations and subsequent prosecutions ; and
- Implemented new induction, focussed training, targeted quality assurance and performance management to ensure that staff at all levels, understand the importance of meeting the standards required by the PSA in relation to timeliness, accuracy, compliance with procedures and decision making.

As a result of this concerted action, we have seen the following improvements in our performance:

Triage stage

- a) This is the initial screening stage of our FTP process. The performance at triage stage impacts on PSA Standards 3, 4 and 6.
- b) At the end of May 2015, we had received on average 240 new cases into our Triage stage each month.
- c) In May 2015, our staff were completing the triage of 94 % of these cases within our 10 day KPI. Compared with the same period in 2014, only 49% of cases were triaged within our KPI.
- d) A new dedicated triage team is due to be introduced on 29th June with a 3 day KPI for processing triage cases.
- e) So far in 2015, we have closed approximately 31% of cases received at the triage stage.

Investigation and Assessment stage

- a) The GDC has progressively reduced its investigation caseload throughout 2014/15 by improving the timeliness and quality of its investigations. In May 2014, there were 1,297 cases in the investigation and assessment stage, with only 62% of these cases being less than 6 months old (our key

performance indicator for this stage in our process). As at May 2015, the investigation caseload comprised 743 cases of which 85% of cases are within the 6 month key performance indicator.

- b) There has also been a significant improvement in our own internal audit scores compared to this period last year. The GDC has an Internal Compliance Team, independent of the FTP directorate, which audits the casework of the Fitness to Practise teams, using a similar methodology to the PSA. In June 2014 our internal Compliance Team started to conduct audits of the management of live FTP cases. The table below shows our audit scores for June 2014 compared to May 2015:

Audit heading	June 2014	May 2015
Accuracy	84%	94%
Compliance with procedure	88%	98%
Customer Service	47%	83%
Decision making	85%	98%
Timeliness	30%	80%
Overall average pass rate	80%	92%

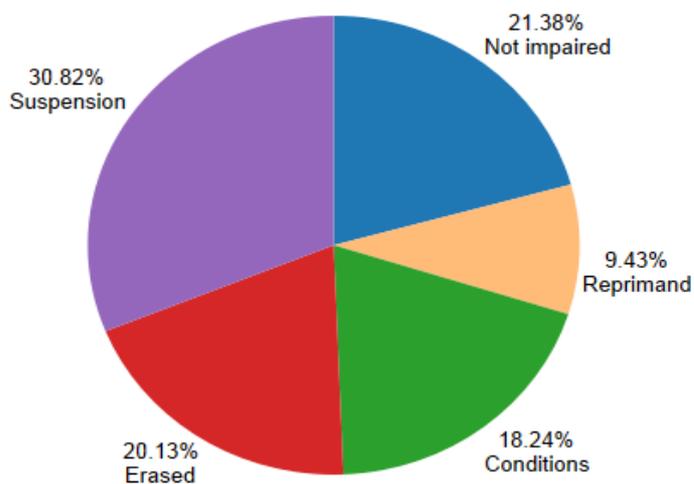
- c) At the end of May 2015, our Casework Managers closed approximately 60% of cases referred by the Triage team at this stage as the clinical or other evidence indicates that these cases were assessed as not meeting our statutory test (of impairment of fitness to practise).

Investigating Committee stage

- a) We have held more Investigating Committee meetings in 2014/15 to consider the backlog of cases and our current referrals, but we have also been able to improve efficiency overall at the Investigating Committee stage of the process. Delays had occurred historically here when cases were adjourned for further information or due to inadequate time to consider the case at an allotted meeting. As at May 2015, our data showed that the Investigating Committee had operated its most productive month in the last three years, with 82% of listed cases securing an outcome, rather than being adjourned.
- b) The Investigating Committee members are independent dental practitioners and lay members. They are required to consider the evidence in support of a case and to apply our statutory test, in deciding whether a case should be closed, whether a warning or advice should be issued or whether the case should be referred to a hearing before a Practice Committee. In May 2015, our Investigating Committee closed 56% of cases referred to them.
- c) We believe that the GDC Internal Compliance team's audits show an improvement in the quality of the decision making of our Investigating Committee (and final Practice Committee panels) with the latest audit (May 2015) recording 98% compliance.
- d) Compliance with Guidance and Procedure audit scores (which includes the performance of our independent IC members) were also at 98% in May 2015, compared to 88% twelve months earlier.

Hearing and adjudication stage

- a) In 2014, we heard 194 initial Conduct Committee meetings compared to 133 in 2013.
- b) We have made arrangements to hear 375 hearings in 2015; an increase of 93%.
- c) 2014 saw the lowest number of wasted/lost days in six years (18%). This is a reduction of 10% in lost or wasted days from 2013 and 23% on 2012. Wasted/lost hearing days remained at approximately 21% over the first quarter of 2015.
- d) As the PSA report confirms, no Panel decisions were appealed by the PSA in 2014.
- e) The figure below shows that we take public protection seriously. It sets out the sanctions issued by our Professional Conduct Panels in 2014:



Customer Service feedback

- a) PSA Standard 7 requires a regulator to ensure that all “parties to a fitness to practise case are kept updated on the progress of their case and supported to participate effectively in the process”. Our Internal Audit scores in May 2015, this area show an increase of 35% in our compliance with this area since 2014 (from 47% to 83%).
- b) In addition to the PSA’s Standard 7, the GDC acknowledges how stressful being involved in a Fitness to Practise case can be for dental practitioners and patients. Therefore the GDC monitors the level of satisfaction of members of the public using the GDC’s Fitness to Practise process.
- c) Between 1st October 2014 and 31st December 2014, the percentage of those satisfied or very satisfied with the overall service they received from the GDC increased from 51% to 57%.
- d) In January 2015 we introduced an online satisfaction feedback service to gather feedback on the satisfaction levels of both the public and the registrants who had been involved in the FTP process.

- e) The first quarter's data for the new system is being collated but the initial figures suggest that 48% of registrants considered that the level of customer service they received throughout the FTP process was very satisfactory or satisfactory.
- f) We accept that we have further improvements to make in relation to our customer service standards and we are committed to doing this. We will continue to listen to the feedback of the public and dental practitioners in this important area.

Overall Performance against key KPIs

The PSA Performance Review records:

- The median time taken from receipt of initial complaint to final hearing determination decreased from 100 weeks to 93 weeks.
- The median time from final Investigating Committee decision to final hearings decision decreased from 46 weeks to 39 weeks.

Amongst other things, this progressive improvement has resulted from holding more scheduled hearings, fewer wasted days and creation of the In-house Legal Team. We are confident that a number of other steps and reforms we are taking (the proposed introduction of Case Examiners with powers to dispose of more cases at an earlier stage and an "end to end efficiency review" of the complete Fitness to Practise process, will result in further, greater improvements in these key performance indicators.

We expect that future reviews by the PSA will fully reflect the changes and outcomes set out above and show that the GDC is meeting the standards for fitness to practise.