EDITORIAL

Who regulates the regulator?

Peter Ward

Chief Executive, BDA

The BDJ Upfront section includes editorials, letters, news, book reviews and interviews. Please direct your correspondence to the News Editor, Kate Quinlan at BDJNews@nature.com. Press releases or articles may be edited, and should include a colour photograph if possible.

On the wall of my office is a portrait of Sir Wilfred Fish CBE, a dentist – but no ordinary dentist. His biography reveals a career and achievements that would leave most of us in awe.¹ What is beyond doubt is that Sir Wilfred knew a lot about dentistry. Respected by his peers, highly regarded by both the lay and professional communities, he was appointed as the founding President of the General Dental Council (GDC) in 1956. The GDC, 61 years on, has changed a lot and the composition of the Council bears no resemblance to the 50 or so informed professionals that it once included. Stephen Hancocks has recently questioned the modern GDC's ability to truly understand the profession it is charged with regulating.² Even the GDC itself is acknowledging its existential crisis and has just closed its 'conversation' with the profession seeking a view about what should happen next. The BDA's member survey on the subject revealed an alarming level of distrust of, and anxiety about, the current entity.

My conclusion is that the pendulum has swung too far. We are now at a point where the push for independence and freedom of professional bias has translated into remoteness and ignorance. The move away from a respected and informed dental professional chair and the dilution of expertise and insight on the Council means that the GDC now has no intrinsic understanding of what dentistry is or what practice should look like. This ignorance sits central to the GDC's chronic inability to understand what is serious and what is not. The Council has demonstrated a dependency upon some expert witnesses whose currency and relevance is seriously open to question. The financial rewards for long-retired practitioners to act as witnesses are substantial. One can, perhaps, understand their, probably well-intentioned, motivations, but who is there at the GDC to give a view on appropriateness? No one. And the result of this lack of insight frequently results in years

of anguish and stress for respondents before the fallibility of the opinions are revealed and the case fails. The most significant difficulty flowing from this corporate ignorance is fundamental to the whole *raison d'être* of the GDC. In the recent 'conversation' document there is much talk about 'upstreaming'. But despite examining the content of undergraduate training, postgraduate education and standards, nowhere does the GDC reflect upon the headspring of what dentists actually are or what should be expected of them?

These may sound like facile questions but disease profiles change, technologies change, expectations change and so the definition must surely change as well? In the old model, this redefinition was incremental and informed by those at the centre. In the new model there is

'The BDA's member survey revealed an alarming level of distrust of the GDC...'

no one there to inform that regeneration. A truly insightful organisation might have spotted that and asked for help. But the meticulous creation of a reflective document that omits this central consideration tells the real story of the yawning vacuum. This would be a very worrying story if no-one had done any work on this vital issue. The fact is that there has actually been extensive work in this area. The Association of Dental Education in Europe (ADEE) is the expert body; an association of European university dental schools, specialist societies or other national dental bodies concerned with or related to dental education. Its content is informed by leading educators from all over Europe and significantly by leading UK academics. ADEE's work is a standard reference

document for the vast majority of countries in the European Economic Area. It is highly respected and is regarded by many as a bible. The notable exception to the deployment of and reference to this work is, of course, the UK. We can only hope that the regulator is fully aware of this forward-thinking work which is just about to go out for consultation to be updated again, and will contribute to and listen to the outcome of that consultation.

Without linking all this work together, the impact of any lack of clarity will continue to be profound in the context of UK dentistry. Uncertainty about what is to be expected already leads to tensions between undergraduate educators and postgraduate trainers and the creation of artifices like 'satisfactory completion'. Students and graduates express

dissatisfaction at the content of their courses. Indeed the only true definition of what is to be expected is currently achieved in the negative in the context of the anathematised fitness to practise process. The situation where you only find out what the rules are when you have broken them is not simply palpably unfair, this lack of specification must surely be contrary to the interests of both patients and the profession. Given the GDC's stated purpose this failure is fundamental. I wonder what Sir Wilfred would make of it all? ■

DOI: 10.1038/sj.bdj.2017.379

1. Oxford Reference. Sir Wilfred Fish. Available at <http://www.oxfordreference.com/view/10.1093/oi/authority.20110803095820421> (accessed 2 May 2017).
2. Hancocks S. Professionalism in spite of it all (Editorial). *Br Dent J* 2017; **222**: 561.