Introduction

The GOC has recently received suggestions for changes to the schedule of registration and retention fees, particularly a potential lower retention fee for dispensing opticians relative to optometrists. The Registration department has a project in its work plan for 2009/10 to consult on a range of proposals for changes to the fee schedule and advise Council on recommended options.

On 17 July 2009 a consultation document was published on the GOC website, with the consultation closing on 9 October 2009. A media release was issued, and the consultation was publicised through the optical bodies and GOC updates.

This document provides a summary of the feedback received during the consultation, and the Council’s response.

Consultation feedback

The GOC received a total of 85 responses to the consultation. Six of the responses were from representative organisations: the Association of British Dispensing Opticians (ABDO), the Federation of Ophthalmic and Dispensing Opticians (FODO), the Association of Optometrists (AOP), the College of Optometrists, Optometry Wales and the International Glaucoma Association (IGA). The largest group of submissions from individual GOC registrants were from dispensing opticians (32 of 55 responses to question 1).

The consultation paper sought input on a range of issues associated with the GOC’s schedule of registration and retention fees. Feedback received on each issue is set out in the subsections below.

Differential retention fees

Unlike the GOC, many other UK health regulatory bodies apply different registration fees to different groups of registrants, rather than a single flat fee. The paper sought input on whether some groups of GOC registrants should pay reduced retention fees. The groups discussed in the paper were dispensing opticians, new registrants, and low income earners.

The majority of submissions on this question (55 of 81) were supportive of some form of differential fee structure being established. The most common views were that either dispensing opticians alone should pay a lower retention fee relative to optometrists (30 of 58 submissions on this question, including from Optometry Wales and IGA), or that dispensing opticians and those on low incomes should pay a lower fee (11 submissions, including ABDO).

Dispensing opticians

The primary reasons given for supporting dispensing opticians paying a lower fee were the generally lower earning potential of dispensing opticians, and that
dispensing opticians do not receive CET funding. ABDO also noted that the clinical risks associated with dispensing opticians are much lower than for optometrists, and that dispensing is largely deregulated, making a full retention fee in its view disproportionate.

Twenty-six submissions, including from FODO, AOP, the College and Boots Opticians, were against the GOC introducing a differential fee structure. This was primarily on the basis that all registrants have the same professional rights, and pose similar levels of risk to the public, so should pay the same fee. Both the AOP and the College argued that retention fees should relate to the costs of administering the register; unless they are markedly different for a group of registrants, the existing flat fee should be retained.

Low income earners and new registrants
There was some support for reduced fee for low income earners. Many respondents noted that, however, that a low income reduction would be complex and time-consuming to administer, as it would require an assessment of evidence of low income. The proposal might also create division over the appropriate income threshold for eligibility for a fee reduction.

There was relatively little support for a fee reduction for new registrants, and it was noted that there is little evidence that new registrants receive substantially lower incomes than other registrants. It was also noted that new registrants transferring from the student register already benefit from a prorated fee in their first year on the full register.

Level of a discount
There was no clear view among respondents on the level of any potential reduction in fees. Of the 43 responses to this question, 12 supported a fee reduction of at least 50%, 11 supported a reduction of 30-40%, and 7 supported a reduction of 20-30%. These responses generally related to a reduced fee for dispensing opticians. ABDO’s response recommended a retention fee split of £150 for dispensing opticians and £200 for contact lens opticians.

Staged payments
Some other UK health regulators allow registrants the flexibility to spread the payments for their annual retention fee over a number of instalments, using Direct Debit instructions. In order for the GOC to offer staged payments, amendments would be required to the Registration Rules. There would also be other development and administration costs associated with this option.

Overall, there was support among respondents for the GOC providing a staged payment facility. The largest group of submissions (37 of 81, including ABDO, AOP and IGA) considered that the introduction of a staged payments option was very or extremely important. These submissions generally considered it important to provide flexibility especially for low income earners, and that it was unreasonable to expect registrants to pay a single fee up front.

A smaller number of submissions (24, including the College) considered a staged payments option useful, or quite important for some registrants, but not vital. Another group (20 submissions) considered the option relatively unimportant or impractical.
FODO and Optometry Wales were in this group, expressing concerns about the cost implications of a staged payments system for the GOC and therefore registrants.

Most submissions (52 of 70, including ABDO, FODO, the College and Boots Opticians) felt that those taking up the staged payments option should pay any associated administrative costs, rather than the cost being spread across other registrants.

**Online retention**

The consultation document asked whether the GOC should continue to retain a paper-based retention option once a proposed online retention system is in place, or whether all registrants should be required to apply online.

There was very strong support for the GOC introducing an online retention system as soon as possible. A slight majority of respondents supported retaining the current paper-based retention option for the foreseeable future alongside the proposed online system (36 of 64 submissions, including ABDO, AOP, FODO and IGA). These submissions argued that it is important to retain a paper-based option to provide for those unable to access an online system.

A large group of submissions, however, felt that the paper-based option should be phased out (23 submissions, including the College, ABDO, Optometry Wales and Boots Opticians). These responses argued that all registrants should now have the ability to access the internet to fill out their application. Many of these respondents also noted that CET points are already required to be filed online, so making the retention process online-only should not be a burden. Of those supporting phasing out the paper system, most felt that five years was an appropriate transitional period. There was little support for the immediate replacement of the paper system with an online system, with no transition.

The document also sought views on whether an additional charge should be applied to those using a paper form, once the online system was operational. The majority of responses (54 of 79 responses, including ABDO, FODO, AOP, the College and Boots Opticians) felt that there should be an additional charge for those using paper-based retention, principally as an incentive to registrants to adopt the online retention system. Those against (25 responses) felt that an additional charge for paper retention would be unfair or impractical.

**Non-EEA qualified practitioners**

The consultation sought views on whether the GOC should charge non-EEA qualified practitioners a one-off £20 administration fee, for registration during the time that they are sitting the UK qualifying exam.

Under the approach set out in the consultation document, non-EEA qualified practitioners will only be entered on the student register for the brief period that they sit the exam, after which they will be automatically removed. At present these practitioners should contact the GOC following the exam to either transfer to the full registers or to be removed.
This would remove the opportunity for non-EEA qualified practitioners to remain on the student register simply as a result of failing to contact the GOC, despite having failed their UK qualifying exam. The £20 fee, which is the same as these practitioners currently pay for regular student registration, would cover the administration costs of entering and removing them from the registers.

Most submissions on this question (43 of 60, including ABDO and FODO) were in favour of the proposed £20 administration fee, on the basis that the cost of processing the applications justified the fee. Those against the proposal (17 submissions, including AOP and the College) considered that the fee seemed unfair or impractical to administer, or did not accept that the fee was justified by the processing required.

**Specialty registrations**

At present, the GOC does not require an additional fee to be paid for entry of a specialty on the registers. This means that costs associated with processing applications and maintaining specialty entries are currently borne by all registrants. The consultation document sought feedback on whether registrants applying for registration of a specialty should pay a separate fee. As noted in the consultation document, most other relevant regulators charge a fee for the entry of a specialty on the professional registers, of about 10% of the annual retention fee.

In most cases this fee would be a one-off fee. However, in the case of an independent prescribing specialty, practitioners will be required to provide additional information as part of the annual retention process to renew their specialty. The document requested feedback as to whether practitioners registering this specialty should be required to pay an annual retention fee, in light of this ongoing administrative requirement.

A small majority (40 of 72 submissions, including ABDO, FODO, IGA, Optometry Wales and Boots Opticians) felt that a one-off fee seemed reasonable and justified by the processing required. A large group, however (32 submissions, including the College), did not accept that the specialty registration would require additional processing, or argued that the proposed fee seemed petty.

The majority of submissions (40 of 68, including AOP, the College, and Optometry Wales) were opposed to the proposed annual fee for an independent prescribing specialty. Reasons given included that the fee was not necessary (particularly if online retention were introduced), that those with the specialty did not necessarily receive much benefit from it, and that the GOC should not discourage registrants from pursuing a specialty.

28 submissions considered the proposal for an annual fee reasonable, including FODO, IGA and Boots Opticians.
Response to the consultation

At its meeting on Wednesday 18 November, the Council considered the registration fees issues discussed in the consultation paper, and the feedback received. Council made the following decisions:

Differential fees

Following a discussion on the draft budget and business plan, members set the retention fee for 2010-11. The annual retention fee for 2010-11 has increased for all registrants. In response to support from practitioners, optometrists and dispensing opticians will not pay the same flat fee in 2010-11:

- The annual retention fee for optometrists has increased from £219 to £325.
- The annual retention fee for dispensing opticians has increased from £219 to £280.

The new fee structure applies to the next retention period, which runs from 1 April 2010 – 31 March 2011. There was no commitment to maintaining a reduction in the fee for dispensing opticians beyond 2010-11. Further work on fees will be undertaken next year to determine the long term policy for our fee structure.

Council agreed an interim reduction in the fee for DOs in response to feedback from registrants and optical bodies. Some of the arguments noted by Council in favour of a lower retention fee for dispensing opticians included:

- The policy would recognise the differences between the professions, including the partial deregulation of dispensing and generally lower incomes of dispensing opticians than optometrists. Other comparable regulators responsible for regulating multiple professions apply differential fees.
- Clinical risks associated with DOs are lower than for optometrists, and optometrists account for a proportionally higher number of FTP cases.
- In the context of rising fees, some DOs may choose not to be registered, which would not be in the public interest.

Staged payments

It has been agreed that a full impact assessment will be carried out on the possibility of introducing a staged payment facility for registrants.

As explained in the consultation paper, a change would be required to the Registration Rules to enable payment by instalments. This is due to the drafting of the Rules, which are expressed in terms of a single ‘application fee’ and which require a notice to be sent out by 15 March in the event of non-payment. Legislative change is a costly, complex and time-consuming process. The minimum time to achieve such a change would be around 18 months, but could be longer.

The GOC has a number of concerns about the possible costs and unintended consequences of such a change to the rules. Missing a payment would mean that a practitioner was removed from the register. This could mean that those registrants experiencing the most severe financial difficulties were unable to work. The additional
costs of adapting our systems, following up missed instalments, and dealing with removals and restorations throughout the year would place a further burden on the fee.

We explored the possibility of working with a finance company as a way to provide this facility without the need for legislative change. However, we were not able to pursue this option, as the fee charged to provide the facility would have been unacceptably high in relation to the registration fee. In addition, due to the credit checks required, this approach would have been unlikely to have benefited those in the most stretched financial circumstances.

As a result, Council agreed that it needs to spend more time looking at the full costs and potential risks and benefits of introducing staged payments, before a final decision is taken. An impact assessment will be carried out next year to support this work.

**Online retention**

Council decided that that the current paper-based retention system be retained for a year after the online retention system was fully functional, to ensure that the online system is operating fully. After that, consideration will be given to phasing out the paper system.

Council decided that there would be an additional administration fee for those wishing to use the paper forms once the online retention system is in place, to encourage take-up of the online system and help cover administrative costs associated with maintaining parallel paper and online systems.

**Non-EEA qualified practitioners**

Council decided that a £20 administration fee will be charged for non-EEA qualified practitioners being entered on the student register for the brief period that they sit the exam, after which they will be automatically removed.

As noted in the consultation paper, this approach will remove the possibility of non-EEA qualified practitioners remaining on the student register simply as a result of failing to contact the GOC, despite having failed their UK qualifying exam.

**Specialty registrations**

Council decided that a one-off administration fee of £30 will be charged for the entry of a specialty on the GOC registers. This level of fee was considered appropriate to cover the administrative costs associated with registering specialties. Council accepted the view of the majority of responses received in the consultation that an annual fee for registering an independent prescribing speciality would not be appropriate.