

Mr Martin Smith
Primary Care Strategies
NHS England
Room 4E56 Quarry House
Leeds
LS2 7UE

11 September 2014

Dear Mr Smith,

NHS England: *Improving eye health and reducing sight loss – a call to action*

The General Optical Council (GOC) is the regulator for the optical professions in the UK and our role is to protect and promote the health and safety of the public. We welcome the opportunity to respond to *Improving eye health and reducing sight loss – a call to action* by NHS England. We think this is a positive step forward in helping to improve eye care services for patients and the public.

We agree that the NHS in England is facing significant challenges. A growing and ageing population is likely to lead to an increase in demand for optical services and will squeeze the demand on NHS resources. In order to meet these challenges, it is important to have an open debate with stakeholders on the future provision of eye care services. From our perspective, we must understand the changes that are occurring in the NHS and in optics in order to ensure that we have a system of regulation that protects the public and enables developments that will benefit patients and the public in the future.

In this letter we have set out our views on some of the key areas outlined in the call to action.

About the General Optical Council

The General Optical Council (GOC) is one of 12 organisations in the UK known as health and social care regulators. We are the regulator for the optical professions in the UK. We currently register around 26,000 optometrists, dispensing opticians, student opticians and optical businesses.

Our statutory duty is to protect and promote the health and safety of the public. We have four core functions:

- setting standards for optical education and training, performance and conduct;
- approving qualifications leading to registration;
- maintaining a register of individuals who are qualified and fit to practise, train or carry on business as optometrists and dispensing opticians; and
- investigating and acting where registrants' fitness to practise, train or carry on business is impaired.

Improving eye care services

We support this call to action in its aim to improve optical services and we welcome any developments that would benefit patients and the public and help improve health outcomes.

We agree with NHS England that it is important to consider how primary, secondary and specialist services can work together to help improve patient experiences and patient outcomes. We think optometrists and dispensing opticians can play an important role working alongside other healthcare professionals to deliver enhanced services in the community and helping to relieve pressure on overstretched areas such as hospital ophthalmology departments and GPs' practices. In many cases optometrists could be the first port of call for non-sight-threatening eye complaints rather than GPs. Optometrists, with the appropriate training and clinical governance arrangements, can also play a valuable role in the identification and management of chronic and acute disease alongside ophthalmologists. Dispensing opticians can also play a valuable role in delivering low vision services to the increasing number of patients who need them.

We know from engagement with our stakeholders, however, that optometry is not always viewed by the public and other health care practitioners as part of the primary care system. This is partly due to the way eye care is generally delivered in a commercial high street environment. As a result, there can be a tension between opticians providing a health care service while also operating as a high street business that aims to make a profit.

The concern between clinical and commercial incentives was highlighted to us by stakeholders in their response to a public consultation we launched last year on the GOC's system of business regulation. At the moment not all optical businesses are required to register with the GOC which means we have limited regulatory oversight over some high street opticians. From a regulatory perspective, a key part of improving eye care services for patients

and the public is to require all businesses providing restricted functions (under the Opticians Act 1989 and related legislation) to register with the GOC. This would enable us to take action against any business providing sub-standard care as a result of poor business practices. However, any change to our system of business regulation will require legislative change. This is one reason why we are keen to see the early introduction to Parliament of the healthcare regulation bill that the Department of Health is now developing, building on the draft bill produced by Law Commission following its review.

Professional standards for GOC registrants

In terms of enhancing eye care services, an increasing number of optometrists and dispensing opticians across the UK are gaining additional qualifications in areas such as glaucoma management, low vision care and independent prescribing. We must ensure that the regulatory framework is flexible enough to enable changes in scopes of practice that benefit patients and the public. The professional standards we set for GOC registrants must be forward looking and keep pace with the changes in optical practice and public expectations.

We are currently undertaking a strategic review of the professional standards, of competence, performance and ethics, we set for GOC registrants. As part of the review, we will be considering how the external environment is changing, including how the optical professions are evolving across the UK. We will consider the implications for our legal framework, our continuing professional development and training scheme and our system of registration.

In terms of reviewing the current scopes of practice, we will consider a recommendation from the Francis Inquiry as to whether we should, alongside our core standards, also set aspirational standards to encourage registrants to expand their skills for the benefit of patients and the public. These aspirational standards could include, for example, specialising in managing patients with particular needs such as glaucoma or patients with learning disabilities or dementia. We will also consider how our registrants could play a greater role in promoting public health and signposting patients to other services. Messages around good eye health could, for example, be linked to other public health campaigns such as smoking and obesity.

GOC's call for evidence

As part of our review, on 31 July we launched a call for evidence (*Standards Strategic Review: Call for Evidence – Protecting and promoting the public's health and safety in a changing healthcare environment*). We asked stakeholders to consider how optometrists and dispensing opticians' scopes of practice may evolve in the future, and how our standards should adapt to ensure continuing patient safety.

The call for evidence can be found on our website:

<http://www.optical.org/en/get-involved/consultations/index.cfm>

We will be summarising the responses to our Call for Evidence and will be happy to share the summary with NHS England.

Commissioning

In terms of commissioning, it is important for us to understand how the changes to the commissioning process will impact on optometrists and dispensing opticians so we can ensure that the system of regulation enables developments that would be good for patients and the public.

We support the aims of NHS England in creating a commissioning process that improves quality, patient experiences and patient outcomes. We recognise that there are already mechanisms in place, such as the Clinical Council for Eye Health Commissioning and the Local Eye Health Networks, to facilitate clinical input from the optical sector into the local commissioning process. We support these developments and hope that the optical sector will be able to play an increasing part in the commissioning process alongside other primary, secondary and specialist services. We think that both optometrists and dispensing opticians have an important role in helping to design services that meet the needs of local communities and help improve patient outcomes.

Access to eye care services

We support NHS England's aim to take a more preventative approach to eye health and increase the uptake of regular sight tests. We are currently commissioning a public perception research project which will include a UK wide survey. One of the areas we will be exploring is how often people get their eyes tested and why. This will include looking at why some members of the public might be deterred from seeing an optician or might not understand the benefits of having their eyes examined at appropriate intervals. We intend to share the research findings with stakeholders to help inform discussions around optical services and how they should be regulated. We are also happy to share the findings of our research with NHS England.

Our research is in line with our equality, diversity and inclusion objective to ensure that our approach to regulation improves the impact of EDI policies on service delivery. We will support and encourage registrants to meet their own EDI obligations in delivering services and address the needs of all parts of the community, providing equal access to eye care taking account of people's disabilities and any other protected characteristics

Finally, we would like to reiterate our support for this call to action in helping to improve eye health and reduce sight loss. The demand for eye care is likely to increase with a growing and ageing population and we think it is important for the sector to have an open and constructive debate about how to meet these challenges. Our focus as the regulator is on protecting and promoting the health and safety of the public and creating a regulatory framework that enables such developments to take place.

I think it would be useful to arrange a meeting between our policy leads. This would be a good opportunity to update you on the results of our call for evidence and public perceptions research project and discuss the implications from these two projects. Alistair Bridge is our Director of Policy and Communications and his contact details are abridge@optical.org or 020 7580 3898.

We hope you will find our response useful. Please do not hesitate to contact us if you would like further information on any of the points mentioned.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'SPe 2', written in a cursive style.

Samantha Peters
Chief Executive and Registrar