

Parliamentary Briefing - Protection of Freedoms Bill – Optometrists, Opticians and Pharmacists (Section 5)

Community optometrists, opticians and pharmacists work primarily in retail environments in the community and there is no clear evidence that they pose any threat to children or vulnerable adults. All three professions are already regulated by the General Pharmaceutical Council (GPhC) and the General Optical Council (GOC) and are bound by Codes of Conduct to make their patients' welfare their primary concern.

To provide for vetting and barring registration for anyone in a retail setting would be disproportionate. Especially given that the scope for registration could apply to pharmacy technicians and optical/pharmacy retail assistants, even though they work under supervision of the pharmacy/optical professionals on-site. Retail assistants, who do more than 'pure' retail, i.e. dispense medicine, give advice, carry-out cholesterol testing, might also unnecessarily fall under this scope.

We hope this briefing note helps to explain our shared position, as well as further improvements which could be made to the current system.

To bring these registered professions within additional vetting and barring regulation would be an unnecessary step. Nevertheless, we welcome changes which the Government propose in the Bill to the original 2006 Safeguarding Vulnerable Groups Act, in particular:

- the clarification that pharmacy and optical retail staff will not be brought within vetting & barring legislation - the cost of having the checks carried out on nearly 100,000 staff affected amount to at least £6million, with additional costs every time a new employee starts work¹;
- the abolition of continuous monitoring, which would have been disproportionate, expensive and out of relation to any possible theoretical benefit;
- that employers will only have to check the enhanced CRB status of practitioners, in order for them to be able to provide general pharmaceutical and ophthalmic services.

We would welcome the Government's confirmation of the above, during the Committee stage of the Bill.

Further improvements

¹ Office of National Statistics Labour Force Survey, Quarter 2 (Apr-Jun 2010)
http://www.statistics.gov.uk/downloads/theme_labour/uk-employby-soc-apr-jun10.xls

As previously mentioned, the proposed system can still be improved further. Given that:

- pharmacists and pharmacy technicians are already registered with the GPhC;
- optometrists have to be on the NHS Commissioning Board's (currently PCTs') approved list to provide NHS services;
- both processes involve prior clearance through the Enhanced CRB system.

We propose that:

- It should be sufficient for pharmacy and optical employers simply to check that a pharmacist, pharmacy technician or optometrist is GPhC or GOC registered (or potentially on the NHS Commissioning Board list), as the case may be, to discharge their duty under the Bill not to allow practitioners who have not been CRB checked to practise.
- This would avoid the additional, and in our view unnecessary, administrative burden on the retail sector of requiring employers separately to check the CRB status of these individuals.
- To simplify things still further, we propose that enhanced CRB clearance should be a condition of registration for *all* professionals, including pharmacists and pharmacy technicians through the GPhC and optometrists and dispensing opticians with the GOC.
- GPhC and GOC national registers are kept fully up-to-date and are available on line for employer checks and the public 24/7.
- Again we would argue that employers should be able to discharge their duties under the Protection of Freedoms legislation by checking that pharmacists, pharmacy technicians, optometrists and dispensing opticians are appropriately registered.
- If there were any problems with the registration status of an individual, the GPhC and GOC would be notified and would in turn inform an enquiring employer that the individual's status was being confirmed. In the meantime, that individual would not be employed in regulated activity.

By adopting these proposals, we believe that the whole scheme can be implemented in a more far more streamlined way, without duplication and unnecessary burdens on the pharmacy and optical front lines.

It would be helpful if, during the Committee stage of the Bill, the Government would confirm that it would be willing to examine these proposals in detail with the regulators - the GPhC and the GOC - and the representative bodies concerned.

About us:

Together the **Optical Confederation** represents the 12,000 optometrists, the 6,000 dispensing opticians and 7,000 optical businesses in the UK who provide high quality and accessible eye care services to the whole population. The Confederation is a coalition of the five optical bodies: the Association of British Dispensing Opticians (ABDO); the Association of Contact Lens Manufacturers (ACLM); the Association of Optometrists (AOP); the Federation of Manufacturing Opticians (FMO) and the Federation of Ophthalmic and Dispensing Opticians (FODO).

Pharmacy Voice (PV) represents community pharmacy owners. Its founder members are the Association of Independent Multiple pharmacies (AIMp), the Company Chemists' Association (CCA) and the National Pharmacy Association (NPA). The principal aim of Pharmacy Voice is to enable community pharmacy to fulfil its potential and play an expanded role as a healthcare provider of choice in the new NHS, offering unrivalled accessibility, value and quality for patients and driving forward the medicines optimisation, public health and long term conditions agendas. Pharmacy Voice creates a stronger, unified voice for community pharmacy.

For further information, please contact:

Optical Confederation

Federation of Ophthalmic and Dispensing Opticians
199 Gloucester Terrace St Albans, AL1 3NP
London W2 6LD
Email: bencook@aop.org.uk

Pharmacy Voice Limited

11-15 Betterton Street
London, WC2H 9BP
Email: Deirdre.doogan@thecca.org.uk