

Your name or the name of your organisation:

Optical Confederation

Which category of respondent best describes you?

- Member of the public
- Optical patient
- Optometrist
- Dispensing optician
- Student – optometry
- Student – dispensing
- Optical business
- Education or training provider
- Optical professional body
- Other optical employer
- Healthcare regulator
- Other (please specify below)

Consultation Questions

1. **Strategic Analysis (pages 14 to 16):**

Are there any changes in the external environment that we have not identified or to which we have given insufficient weight?

The Optical Confederation welcomes the GOC's draft Strategic Plan for 2017-2020. We broadly agree with the analysis across the four strategic themes and with the objectives and priorities identified for the next 3 years.

We fully agree that we are at a pivotal moment for the optical sector. We need to ensure that our professions are able to respond to the major challenges and opportunities that the eye health sector, and indeed the health sector and society more widely, are facing, and that the regulator supports registrants to be able to take up these opportunities and does nothing that blocks or hinders the development of the optical professions. This Strategic Plan and the priorities it identifies will therefore need to shape not only what is accomplished in the next 3 years but the environment and the ways in which the optical professions develop and operate for the next ten years and beyond.

There is widespread recognition that the role of optical professionals is going to change in the coming years, with optometrists and dispensing opticians taking on new roles and delivering far more primary eye care in the community. While this is recognised in the GOC's draft strategic analysis, we do have some concerns that this has been presented in places in a rather negative way, as set out below.

As the GOC identifies, technological innovation and increased automation will have a significant impact on the way that optical professionals work and the ways in which care is provided to patients. While we are now on the threshold of a period of rapid innovation, which will require flexibility on the part of the professions and the regulator, it is equally true that the optical professions and optical practices have a history of successfully altering their practice in response to technological change and of purchasing new equipment to enable them to deliver the highest quality of care to their patients. Properly managed, this step-change will free optical practitioners to take on new and expanded roles. We would therefore be concerned if the Strategic Plan were to simply suggest that technological change was a threat or negative factor. It brings many opportunities for the

whole of the optical sector.

We are also concerned at the tone of comments that refer to registrants “upskilling to higher risk work”. Firstly, many of the roles that registrants will take on, as they move to deliver more primary eye care services in the community, are already within their core competences, although we agree that others may require registrants to acquire different or additional skills. Secondly we cannot agree that applying professional judgment will be novel or more challenging for registrants, since this is something most already do on a daily basis. Finally, we are concerned at the statement that registrants will be taking on higher risk work. Registrants may well be taking on a wider range of roles, operating at their full scope of practice, and in some cases broadening their skills and scope of practice, but this does not necessarily make their work higher risk. Indeed, in many areas across the UK registrants are already delivering a wide range of primary and community eye health services, which effectively reduce the unsustainable burden on primary and secondary care whilst providing high quality clinical care and customer service at excellent value.

This negative tone is repeated in the section headed “sector challenges”. We would argue that the internet and new models of care provide new ways of working and opportunities for eye health professionals.

Finally, in terms of changing demands, the draft Strategic Plan notes that many members of the public continue to have an incomplete understanding of the role that optical professionals are able to play. This is true but there is a substantial public education task to be done to increase patient understanding of the scope of care delivered by registrants in the community and the risks of bypassing this safety net, whether by delaying sight test or by buying optical appliances from unregulated providers such as online retailers. Also important from the point of view of professionals, commissioners and regulators, is the changing expectation that patients and the wider public have as to what services they want to receive and how and where they expect to be able to access them. Old models of acute care are outdated and much more can be done in community settings by community based optometrists and dispensing opticians (sometimes working autonomously and sometimes with secondary care colleagues).

We would argue that this driver – providing services that better meet the

needs of patients in ways that are more convenient to the patient, such as by bringing care closer to home to support independent living and ageing in a time of austerity and changing social expectations – is the most significant factor affecting the external operating environment. Registrants will not be delivering services in different ways simply because technology will enable them to do so, or because public funding cuts necessitate new approaches, but because the expectations of the public about how they receive services, including health services, are changing.

2. What we want to achieve by 2020 (pages 17 to 20):

2.1 What are your views on our proposed strategic objectives?

We support the proposed strategic objectives. In particular we agree that the emphasis in the next three years must be on undertaking the strategic review of education.

In terms of the “targeted approach to regulation” objective, we would strongly suggest that this should not just take account of the needs and perspectives of the public, but also their expectations. It would be possible to regulate optical services in such a way that while they might meet the needs of the public, they would not meet the expectations or preferences of the public – but this clearly would not be desirable. We also have some reservations at the suggestion that standards should “comprehensively address risks”. We suggest that it would be better to adopt an approach that ensures that standards are set and applied in ways that appropriately and proportionately address risks.

Given the changing roles of optical professionals, it will also be important that the GOC considers commissioners and other health professions (and their regulators) as stakeholders. It will be increasingly likely that optical professionals will work alongside other health and social care professionals in multi-professional teams, and regulation (and indeed education) will need to take account of that.

2.2 What are your views on the outcomes we hope to achieve? Are there any important outcomes that you would wish to see but which we have not included?

We agree with the proposed outcomes for 2017/18. Given the likelihood of

significant change in the regulatory environment in the next few we believe it would be helpful if the GOC were able to provide an indication of planned outcomes further ahead.

We fully agree that the education review must be the strategic priority, and that it will require careful thought and full consultation. However, given that the call for evidence closes in March 2017, we would hope that the GOC will be aiming to have consulted on and agreed proposals for change by April 2018, not simply developed proposals, as the draft outcomes suggest.

So far as the substantial public education task to be carried out there needs to be measurement not only of improvements in public understanding but also how effectively changing expectations are being met.

Similarly, with regard to changes to the Optician's Act, we would hope that by April 2018 the GOC would have produced agreed proposals for reform, not simply completed an analysis of changes required.

2.3 What are your views on the priorities we have identified for the three year life of our strategic plan?

We agree with the priorities identified by the GOC. We would reiterate the importance that we attach to prioritising completing and implementing the education review.

The closing date for responses is:

23 January 2017.

Responses should be sent to:

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