

Annual report

2021

1 JANUARY TO 31 DECEMBER 2021



About us

The FODO Group comprises FODO, FODO Ireland and the National Community Hearing Association (NCHA).

FODO is the representative professional body for eye care providers across the UK, and FODO Ireland represents eye care providers across the Republic of Ireland. We lead positive change for the nations by influencing government, legislators, policymakers and opinion formers. With our members, patient groups, regulators and other professional associations we work to improve access to high-quality eye care for everyone in the UK and the Republic of Ireland.

The NCHA is the representative professional body for community hearing care providers across the UK. We work with the broader hearing sector, governments and decision-makers to lead and influence positive change. We are the voice of community hearing care and work with our members and stakeholders to improve access to high-quality hearing care for all.



Contents

Chair statement	4
Group managing director statement	5
Policy and influence	7
FODO	7
FODO Ireland	9
NCHA	10
Finances	11
Our team	13

Chair statement

The pandemic continued to present challenges for our members throughout 2021. We pulled out all the stops to ensure our members had all the guidance and support they needed to remain open and provide timely and safe access to eye and hearing care.

And, despite the Covid pandemic and sometimes because of it, strategic reforms were happening on all fronts. This meant we had to continue to fight hard to protect members' and patients' interests. We did this by tracking, analysing and responding to major consultations, including the future regulation of medical devices, the healthcare professions, and wider health and care systems reforms.

All our work has, as ever, focused on supporting members and helping sustain and advance the sector, so that eye and hearing care can continue to innovate and expand to meet patients' changing needs.

At the heart of our success is our close working relationship with members, unwavering focus on patients' and public health, keenness not to duplicate, and willingness to work through coalitions where this is the right approach. The benefits have been self-evident throughout the pandemic where members have had immediate access to all government, professional and sector advice tailored to their needs.

Working together, we kept primary eye care and audiology services open for patients. Members innovated and expanded the range of support patients can access close to home and out of hospital when GPs and hospitals were overwhelmed. As a result of our joint efforts, millions of people were able to continue accessing necessary eye and

hearing care throughout the pandemic, and today more patients than ever can access urgent eye care, earwax management and other essential care in primary care settings close to home across the UK.

As this will be my final annual report as FODO chair, I reflect on the progress made by FODO, FODO Ireland, the NCHA and all our members and am more optimistic than ever about the future.

To succeed, we must now continue to work together as we have throughout the pandemic, with an unwavering focus on serving patients, meeting public health needs, and doing so in an environmentally and economically sustainable way. This approach explains the strong recovery members made in 2021 and will be the reason why we all succeed in the future.

It has been an honour to serve you all as chair, to work with our excellent Board members and the small but dedicated team that supports FODO, FODO Ireland and the NCHA. I thank you all and look forward to remaining involved with the Association. I know the FODO Group is in a good place and in great hands and wish you every success in 2022 and beyond.



A handwritten signature in black ink that reads "Lynda Oliver".

Lynda Oliver
Chair

Group managing director statement

2021 was another challenging year for members, with Covid restrictions affecting capacity across the health system. Meanwhile, patient demand for primary eye care and audiology soared as patients could not access or did not want to access hospital-based care for fear of Covid infection.

We have been busy helping members respond to these pressures and opportunities. This includes undertaking clinical and economic research, which shows the benefits of using community audiology, and workforce research to help ensure members have the necessary workforce and flexibilities to meet current and future needs.

To this end, we have continued to play a leading role in the GOC's Education Strategic Review (ESR), ensured the voice of eye and hearing care members has been heard by government during the passage of the Health and Care Bill, and other strategically important policy workstreams for members.

In regulation, FODO led a sector response on the MHRA regulatory framework for medical devices post Brexit. This matters to all our members as it covers spectacles, contact lenses, fluorescein strips, hearing aids, and software used to diagnose conditions, and has direct effects on supply chains.

While maintaining our leadership role in health policy and strategy across eye and hearing care, we have also kept our first-class record in supporting members with regulatory issues with the GOC, HCPC, NHS and other regulators.

The Association continues to perform well and is in a strong financial position. We have invested in new systems and processes to remain efficient and keep long-term costs down, and therefore ensure members continue to access the best policy analysis, support and expertise on demand at the best possible value.

As we look ahead, we have two key strategic priorities. First, to ensure we have a stable eye and hearing care workforce that can meet needs in the future. Second, to help members expand the range of services delivered in primary care settings across the UK and Ireland. We will work with members, sector partners and all health systems to make this happen.

In 2022 the GOC in the UK is consulting on the Opticians Act. FODO will work with all members and the wider sector to support this work and ensure patient protections are maintained. The NCHA will advance its campaign to call for primary care audiology and a reduced rate of VAT on hearing aids. FODO Ireland will help members expand services in line with government plans and establish new courses to enable more Irish clinicians to qualify.

I would also like to thank Lynda on behalf of the Board and the HQ team for all she has done over the past seven years, including her support in restructuring the Association. We could not have wished for a more hard-working, constructive and supportive chair and everyone is delighted that Lynda plans to remain on the Board so we continue to have access to her knowledge, experience and expertise.



Harjit Sandhu
Managing Director

Policy and influence

2021 saw a welter of consultations, legislation and regulation in addition to Covid. The team responded to over 40 consultations throughout the year with the aims of protecting and advancing eye and hearing care across the UK and Ireland.

These have included the reform of professional regulation in the UK, the crucial Primary Ophthalmic Services (POS) delegation orders, new Provider Selection Regime (PSR) in England, new contract proposals from the Welsh Optometric Committee, the criminalisation of breaches of candour in Northern Ireland, and immigration policies for healthcare professionals in the Republic of Ireland. Our responses have been evidence-based and patient-focused with a view to enabling innovation in patients' interests and preventing unnecessary bureaucracy.

FODO

In England, a strategic priority was monitoring and responding to risks and opportunities in the Health and Care Bill as it progressed through many debates and amendments in Parliament. FODO played a leading role in influencing, monitoring and analysing the legislation and associated consultations throughout the year. This included meeting policymakers at the Department of Health and Social Care (DHSC) and NHS England to discuss planned reforms, to protect patient access to the national sight test and improve access to locally enhanced services.

In December, DHSC and NHS England confirmed that General Ophthalmic Services (GOS) in England would remain a national demand-led service under a nationally agreed GOS contract and nationally negotiated fees and grants, with no local variation. We also agreed that FODO, with other sector partners, would work with DHSC and NHS England to co-produce guidance on the new procurement regime (the PSR) to help Integrated Care Boards in England commission enhanced eye care services.

At the same time, we continued to work closely with NHS England and NHSX on developing solutions to enable primary eye care, GPs and hospital ophthalmology to share information electronically. This included coordinating IT specialists from across the sector to develop common APIs so that different IT systems could share information with each other more efficiently. We will continue to push for a solution to connectivity in 2022. This is critical to realising the full potential of clinical expertise and diagnostic capabilities in primary eye care settings and to meet growing need.

Throughout the year we worked closely with Optometry Northern Ireland and Optometry Scotland by flagging important consultations and supporting a sector response. And we continued to support Optometry Wales colleagues with GOS reforms, providing strategic advice and guidance on a wide range of issues.

In terms of fees, the OFNC successfully negotiated a 1.9% increase to the GOS sight test and associated payments and grants in England, the first increase in five years. In Scotland the government increased GOS fees by 3%, the first increase to fees in over a decade.



David Hewlett
Director

FODO Ireland

In 2021 we supported members access Covid vaccinations and worked with the HSE to develop a protocol to allow optometrists to become vaccinators.

There was a major cyberattack on the healthcare system, which led to delays in the HSE approving applications for sight tests and other operational issues. We engaged with the Department of Health, HSE and PCRS to ensure members were kept informed on developments.

We also continued to work with the Health Service Executive on the implementation of its plans to deliver more eye care in the community.

Our partnership with the Technical University Dublin resulted in a record number of optometry students enrolling. However, with chronic and severe workforce shortages in Ireland, we also put in place a strategy to expand the number of optometrists to ensure that Ireland has the workforce it needs to meet population needs in the future.

In addition, we continued to help members respond to the pandemic and remain open and offer care safely close to home.

In 2022 we will expand the FODO Ireland team and increase our work with policymakers and decision-makers, so that they recognise optometrists and dispensing opticians as a key primary eye care service.



Garvan Mulligan
FODO Ireland Chair

NCHA

This year we continued to support members in responding to the pandemic and also restarted work on policy priorities beyond the immediate Covid pressures.

The pandemic highlighted just how vital ear and hearing care is and the urgent need to transform how care is delivered across the UK. We published our priorities for reform in [new position statements](#). Our priorities include every patient having the right to access care directly from an audiologist without the need to see a GP first and providing more ear and hearing care closer to home.

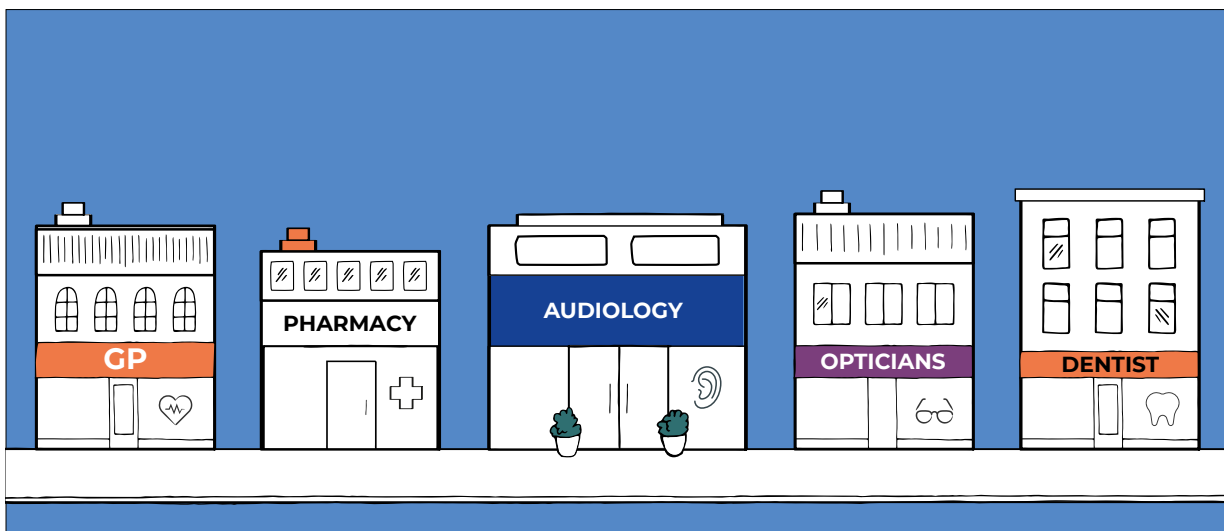
To improve equality in access to ear and hearing care, the NCHA is calling for audiology to be formally recognised as the [fifth primary care service](#) and commissioned accordingly.

The NCHA has also undertaken extensive research into VAT on hearing aids, and the injustice of this regressive tax on individuals with a hearing loss. We have formally started work on a campaign to call for a reduced rate of VAT on hearing aids and will progress this in 2022 with sector partners.

The NCHA continues to shape the future of ear and hearing care in the UK, and by working in partnership with the NHS and UK governments will continue to advocate for improved access to care for all patients. Only then can everybody get timely access to ear and hearing care where and when they need it.



Peter Ormerod
NCHA Chair



Finances

Before the pandemic, FODO held minimal liquid reserves and its main form of security was investment in its head office building. The economic uncertainty caused by the pandemic led to our freezing recruitment, pausing key projects, and cutting costs to ensure we held sufficient reserves to weather a potentially prolonged pandemic while continuing to be able to support members. As we reported in the 2020 annual report, as part of this planning we, together with our ABDO and OSA partners, decided to sell our head office building in London, downsize our physical footprint, and move to a hybrid working model.

Owing to ongoing financial stringency, we ended the year to 31 December 2021, with an operating surplus of £148,000 on an income £1.1 million. This compares with a surplus of £219,000 on turnover of £1.2 million in 2020.

For actual comparative purposes, expenditure was £970,000 in 2021 compared with £980,000 in 2020. However, as we disposed of shares in the company which held our head office building, accounting convention means this is presented in the accounts as a £317,000 cost on disposal of fixed assets. Total administrative expenses are therefore recorded as £1.2 million. The proceeds of the sale are then shown as £499,000 income from fixed asset investments. This is set out in the financial report.

As far as cash at the bank is concerned, including the proceeds of the sale of our investment in our head office, our total liquid assets are now £1.45 million which exceeds our planned six-month reserves safety net. The Board has therefore established a finance and risk management working group, which is reviewing FODO's reserves and assets management policy and will make recommendations to the Board to manage these funds in the best interests of members.

In recent years the main cost savings have been the result of freezing recruitment to fill vacant positions, mothballing key investments and reduced travel costs owing to the pandemic. In 2022 we will rebuild the team and return to office-based working better to serve members post-pandemic needs, which will see us moving back to operating a balanced budget over time.

Overall membership has continued to grow, we continue to operate efficiently and keep tight control of all costs, all of which means members continue to benefit from one of the most cost-efficient, streamlined, and effective membership bodies in healthcare.



Alan Tinger
Director

Financial report

Income and expenditure account 31 December 2021		2021 £000	2020 £000
Turnover		1,124	1,199
Administrative expenses*		(1,292)	(980)
Operating (deficit)/surplus		(168)	219
Income from fixed asset investment*		499	-
Net surplus		331	219

Balance sheet – 31 December 2021		2021 £000	2020 £000
Fixed assets			
Tangible assets		5	326
Investments		-	500
		5	826
Current assets			
Debtors	44		33
Cash at bank and in hand	1,688		571
	1,733		604
Creditors: amounts falling due within one year	289		(312)
Net current assets		1,443	292
Total net current assets less current liabilities		1,449	1,118
Members' funds		1,449	1,118

L S Oliver
Chair

H Sandhu
Managing Director

* Eusebius Ltd was the company that owned our head office building. FODO held one third share capital of Eusebius Ltd. Our share of improvements to the building were held in the FODO balance sheet. On sale of the building, our one third share of the net proceeds of sale were received by way of a dividend from Eusebius Ltd and return of the share capital when it was liquidated. To comply with accounting conventions for purposes of the audited accounts, the dividend is shown as a separate item in the accounts rather than offsetting in part against the improvements. The improvements are shown as written off. The accounting presentation is therefore to show a trading deficit and a surplus post the dividend.

These summarised accounts are an extract from the statutory financial statements for the year ended 31 December 2021. They have been audited by Menzies Chartered Accountants and Registered Auditors, who gave an unqualified audit report on 9 May 2022. The auditors have confirmed to the Directors that these summarised accounts are consistent with the statutory financial statements.

Our team

Head Office team

- Harjit Sandhu, Group Managing Director
- David Hewlett, Group Director
- Alan Tinger, Group Director
- Giusy Maniscalchi, PA to Managing Director
- Sue Silvester, PA to Group Director
- Damian Testa, Head of Policy and Public Affairs FODO
- Rajan Verma, Membership Officer

FODO non-executive directors

- Lynda Oliver, Chair
- Paul Carroll
- Josie Forte
- Stephen Hannan
- Hayley Holford
- John Hopcroft
- Sarah Joyce
- Dan McGhee
- Claire Slade
- William Stockdale
- Glenn Tomison

FODO Ireland executive members

- Garvan Mulligan, Chair
- Owen Blee
- Marie Keating
- Desmond Mackey
- Peter McGrath

NCHA Board members

- Peter Ormerod, Chair
- Richard Boyd
- Paula Cave
- Mark Georgevic
- Stephen McAndrew
- Diane Newman
- Rob Skedge
- Steve Witts

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www.fodo.com

fodoireland.ie

www.the-ncha.com

