



Association of British Dispensing Opticians
Association of Optometrists
British Medical Association
Federation of Ophthalmic and Dispensing Opticians

Optometric Fees Negotiating Committee

16 Upper Woburn Place, London, WC1H 0BS

Chair: Gordon Ilett

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Secretary: David Hewlett

Sharon Egan
Dental & Eye Care Services
Department of Health & Social Care
4th Floor
39 Victoria Street
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By email

18 February 2022

Dear Sharon

GOS fees and grants 2022/23

Thank you for your letter of 15 February proposing a 2% uplift to GOS sight test fees, the Continuing Education and Training allowance and the pre-registration supervisors grant in 2022/23. Thank you also for confirming the draft Directions on sight test fees and CET allowances will be shared with the OFNC in due course.

In our submission to NHS England in November 2021, we set out how the Bank of England forecast inflation to peak at 5% in 2022 before returning to 2% in 2024. We explained how this, on top of historical underfunding of GOS sight tests in England, put significant cost pressures on primary eye care practices.

In this context, news of a 2% uplift to NHS sight test fees will be disappointing to primary eye care, and more so now that inflation is expected to exceed original Bank of England forecasts. Primary eye care will also be concerned and frustrated that our pragmatic proposal to pay £23.26 for a test in 2022/23 has been declined.

As set out in our bid, had funding kept up with inflation a GOS test would cost £25.58, even before adjusting for the latest inflation data. The news that DHSC has proposed £22.14 for the NHS sight test fee for 2022/23 will leave primary eye care providers with significant losses, in real terms, when providing this vital front-line NHS service. This also comes at a time when the NHS is asking for ever more support and flexibility to ease pressures on secondary care services and GPs.

We acknowledge however that the Government and NHS England have taken a further small step towards addressing the structural underfunding of the sight test fee. The challenge is that more practices will still struggle to deliver NHS sight tests and be less willing to offer additional capacity exactly at a time when the NHS needs it most. This is regrettable, especially given how so many primary eye care practices remained open throughout the pandemic, responded to all-comers when hospitals closed and reduced

pressures on secondary care, ensuring patients could access timely care based on their clinical need.

In recent discussions with the NHS England negotiating team, we have agreed to work together to obtain better data on the underlying costs drivers of a sight test to inform future negotiations. We would flag too that undergraduate clinical placements throughout the undergraduate programme are going to replace pre-registration training under the strategic review of optometric education and training, which will increase costs.

In the meantime, we will communicate the fee proposed by DHSC to the sector.

Copies of this letter go to Carol Reece, Richard Everitt and Nik Thoren and NHS England.

Yours sincerely

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

Gordon Ilett
Chair