



GOC consultation on Covid-19 statements

1. What is your name?

Sue Silvester

2. What is your email address?

If you enter your email address then you will automatically receive an acknowledgement email when you submit your response.

healthpolicy@fodo.com

3. Are you responding on behalf of an organisation?

☒ Yes

☐ No

FODO, The Association for Eye Care Providers

Tell us who you are

4. Which category best describes you?

☒ Professional/representative body

Part 1: Framework for COVID-19 statements

We intend to use a framework that aligns with [The College of Optometrists' red/amber/green classification system](#), whereby we will clearly indicate for each individual COVID-19 statement when the statement will apply. These are as follows:

- **Red:** statement applies when an area is within the 'red' phase of The College of Optometrists' classification system – this will only apply to a (national or local) lockdown when only urgent or emergency and essential eye care may be delivered face to face, subject to local protocols;
- **Amber:** statement applies when an area is within the 'amber' phase of The College of Optometrists' classification system – this will only apply when an area is not in lockdown and when patients may be seen on a needs and symptoms led basis as

determined by a clinician (whether asymptomatic patients can be seen will depend upon capacity and local protocols); and

- **Green:** statement applies when an area is within the 'green' phase of The College of Optometrists' classification system – this will only apply when practices return to all eye care on an open access basis.

5. Do you agree that it is appropriate to align our COVID-19 statement framework with The College of Optometrists' red/amber/green classification system?

(Required)

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no, please explain why.

Yes, the College's RAG system makes sense and is widely consulted. The GOC's aligning with it will avoid confusion. That said, with UK governments, the NHS in England, Scotland and Wales and the health system in Northern Ireland regularly changing their definitions of national and local lockdowns, the terminology used in the College RAG model needs to be interpreted with care. It is in fact likely now, given experience and instructions from the NHS to date, that primary eye care settings will remain in the amber phase until the population is sufficiently protected through vaccination programmes to enable us to return to the green phase.

Part 2: Content and impact of COVID-19 statements

This part of the consultation (sections 2.1-2.12) contains questions on the content and impact of each COVID-19 statement. If you wish to, you can answer all of the questions for each statement or, if you prefer, you can choose only some of the statements to comment on (just click 'continue' at the bottom of the screen where you do not wish to answer the questions for that statement).

Section 2.1: Education provision and approach to quality assurance activity

Purpose: This statement sets out how we have responded to questions from education providers about changes to education delivery and the changes we have made to our quality assurance activity of GOC-approved education during the COVID-19 emergency.

Link to document: [GOC/COVID/01](https://www.gocopt.org.uk/COVID/01) (this link opens in a new window)

Categorisation: Red, amber and green

Rationale: This statement applies for all phases of the pandemic as the impact on the education sector and our quality assurance processes will continue for some time.

6. In the event of a similar emergency situation, should we apply the principles outlined in this statement again?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

[Click or tap here to enter text.](#)

7. What has been the impact of this statement on the following groups?

a) Education providers

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

b) Students

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

c) Business registrants/employers

☐ Very positive impact

☒ **Positive impact**

☐ No impact

- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

d) Patients and the public

- ☐ Very positive impact
- ☒ **Positive impact**
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

e) Any other groups

- ☐ Very positive impact
- ☒ **Positive impact**
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

Please provide details of any impacts and include examples or evidence where possible.

The flexibilities, including in the College of Optometrists Scheme for Registration, have greatly reassured both providers and students and enabled more students to continue with their education and vocational training and register as qualified practitioners. This statement has also reassured employers in offering and managing vocational training placements and meant not losing a generation of graduates. This in turn has benefited patients who have continued to have access to the next generation of highly qualified GOC registrants.

Section 2.2: Supply of spectacles and contact lenses

Purpose: This statement encourages use of professional judgement to allow supply of spectacles and contact lenses against an expired spectacle prescription/contact lens

specification when considering the risk of requiring the patient to attend a practice during the COVID-19 emergency.

Link to document: [GOC/COVID/02](#) (this link opens in a new window)

Categorisation: Red and amber

Rationale: This statement is required for the red and amber phases of the pandemic, as even in the amber phase some patients may still be shielding. This requires professional judgement to be applied.

8. Do you agree with the content of this statement?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no, please explain why.

Click or tap here to enter text.

9. Do you agree with our view that this statement should only apply to the red and amber phases of the pandemic?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

10. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

b) Business registrants/employers

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

c) Patients and the public

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

d) Any other groups

☐ Very positive impact

☐ Positive impact

☐ No impact

☐ Negative impact

☐ Very negative impact

☒ **Don't know**

Please provide details of any impacts and include examples or evidence where possible.

For reasons the GOC has set out in its impact assessment, this easement during the pandemic has been in the public interest. It has also boosted morale by acknowledging that optometrists and dispensing opticians are highly-skilled, autonomous health professionals who can be entrusted to make the right decisions with each patient.

With limited capacity in clinics, the need to prioritise patients and customers based on need and complex and changing Covid threat levels, this has been important in

enabling practitioners and practices to put patients first in line with GOC standards and meet needs whilst responding to complex Covid and non Covid related risks.

Section 2.3: Contact lens aftercare

Purpose: This statement sets out the legal position in relation to the provision of contact lens aftercare and advice for registrants on how to exercise their professional judgement during the COVID-19 emergency.

Link to document: [GOC/COVID/03](#) (this link opens in a new window)

Categorisation: Red, amber and green

Rationale: This statement is relevant to all phases of the pandemic as it explains what our current legal framework already allows in terms of contact lens aftercare delivery.

11. Do you agree with the content of this statement?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

12. Do you agree with our view that this statement should continue to apply in all phases of the pandemic?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

13. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

☐ Very positive impact

☒ **Positive impact**

☐ No impact

- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

b) Business registrants/employers

- ☐ Very positive impact
- ☐ Positive impact
- ☒ **No impact**
- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

c) Patients and the public

- ☐ Very positive impact
- ☒ **Positive impact**
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

d) Any other groups

- ☐ Very positive impact
- ☐ Positive impact
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact
- ☒ **Don't know**

Please provide details of any impacts and include examples or evidence where possible.

The flexibility in the primary legislation is helpful here and helpfully reiterated by the GOC in the wider context of appropriate care in Covid times – e.g., remote care where

this is appropriate. It may well be that this signal from the GOC has been helpful in enabling registrants to deliver more routine aftercare than would have been possible under traditional models.

Research is needed, too, on whether remote and other options encourage more patients to return for and continue with, regular aftercare with a registrant which they may not have been able to make time for, had this required a practice visit. Evidence on outcomes, rapid access in emergencies without attending A&E, risk and patient satisfaction, with alternative models of aftercare, would be useful in helping the sector genuinely respond to patients' needs

Section 2.4: Our approach in fitness to practise for the service of documents and facilitating hearings

Purpose: This statement sets out our approach for the service of notifications and notices in fitness to practise proceedings and the holding of fitness to practise hearings during the COVID-19 emergency.

Link to document: [GOC/COVID/05](#) (this link opens in a new window)

Categorisation: Red, amber and green

Rationale: This statement will be required through all phases of the pandemic to support effective and timely delivery of fitness to practise processes.

14. Do you agree with the content of this statement?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

15. Do you agree with our view that this statement should continue to apply in all phases of the pandemic?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

16. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

- ☐ Very positive impact
- ☐ Positive impact
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact

☒ **Don't know**

b) Business registrants/employers

- ☐ Very positive impact
- ☐ **Positive impact**
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact

☒ **Don't know**

c) Patients and the public

- ☐ Very positive impact
- ☐ **Positive impact**
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact

☒ **Don't know**

d) Other participants in the fitness to practise process

- ☐ Very positive impact
- ☐ Positive impact
- ☐ No impact

- ☐ Negative impact
- ☐ Very negative impact
- ☒ **Don't know**

Please provide details of any impacts and include examples or evidence where possible.

For reasons set out in the GOC impact assessment, the fitness to practise regime had to be adapted. Overall, this has had a positive effect, including reducing avoidable delays and a worse bottleneck of cases in the future.

The GOS rightly acknowledges in its impact assessment that more work still needs to be done to better understand the impacts of these measures. For example, at this stage there is no evidence available of the effects of remote hearings on participants, particularly on the mental wellbeing of registrants who may feel isolated and lacking the support they would normally have at an in-person hearing or on the behaviour of witnesses. Body language (both individual and collective, e.g. a Panel) is also much harder to read on screen.

For other people, who are nervous in-person, remote may be easier for them. It may be that the best solution is to offer both options to registrants to be agreed through procedural submissions.

There are still security issues which need to be fully assessed and addressed if remote hearings are to become a permanent feature of the regulatory landscape.

What is an acceptable risk in a crisis and when systems are new may not be acceptable when arrangements are standardised and more widely known about. These would include covert recording of hearings, off-screen prompting/coercion of witnesses or registrants.

Legislative change

We are currently in discussion with the Department of Health and Social Care to underpin this statement with emergency legal powers that:

- allow fitness to practise notices to be served by email;
- clarify that hearing 'venue' includes audio and/or video-conferencing details; and
- enable the Hearings Manager to postpone or adjourn hearings.

We also believe that further powers relating to the size and composition of fitness to practise committees for substantive hearings are required on a permanent basis to be able to effectively deal with emergencies. This would align us with other healthcare regulators, including the General Medical Council (GMC) and Nursing and Midwifery Council (NMC), by having the option to convene fitness to practise committees of not less than three members with a quorum of two members (one lay and one registrant) for substantive hearings.

The Department of Health and Social Care has been in discussion with us about securing these powers as part of emergency legislation.

We are interested to understand any impacts that may result from obtaining and implementing these powers.

17. We are currently in discussion with the Department of Health and Social Care to underpin this statement with emergency legal powers that: a) allow fitness to practise notices to be served by email; b) clarify that hearing 'venue' includes audio and/or video-conferencing details; and c) enable the Hearings Manager to postpone or adjourn hearings. What would be the impact of the GOC securing these powers?

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

Please supply any evidence or reasoning to support this.

Click or tap here to enter text.

18. Should the GOC have further powers to start substantive hearings with three Fitness to Practise Committee members (rather than five as we currently do)?

☐ Yes

☒ **No**

☐ Don't know

Please give reasons.

We understand and empathise with the need to make contingency plans due to the pandemic and increased levels of sickness. However, it does not yet justify this proposal. There is a cost and logistics-driven school of thought in favour of having smaller panels for fitness-to-practise hearings. Our experience is that a five-person panel (with at least two registrants) includes more perspectives on evidence, guards against 'small group think' and invariably reaches fair and balanced conclusions. It is also unclear whether or how this might be affected by remote hearings. More research is needed (perhaps reviewing those regulators that have already adopted smaller panel models) before smaller panels become standardised for either remote or in-person hearings at the GOC.

19. We currently have to start substantive fitness to practise hearings with five committee members. What would be the impact of the GOC securing the powers to start substantive fitness to practise hearings with three committee members?

☐ Very positive impact

☐ Positive impact

☐ No impact

☒ **Negative impact**

☐ Very negative impact

☐ Don't know

Please supply any evidence or reasoning to support this.

Please see our response to question 18

Section 2.5: Continuing Education and Training (CET)

Purpose: This statement confirmed our decision to remove the six-point annual expectation for 2020 for registrants completing CET.

Link to document: [GOC/COVID/06](#) (this link opens in a new window)

Categorisation: Red, amber and green

Rationale: This is a permanent statement of fact to confirm our decision to remove the six-point annual expectation for 2020. It therefore applies regardless of which phase of the pandemic we are in.

20. Do you agree with the content of this statement?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

21. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

b) Business registrants/employers

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

c) CET providers

☐ Very positive impact

☐ Positive impact

☒ **No impact**

☐ Negative impact

☐ Very negative impact

☐ Don't know

d) Patients and the public

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

e) Any other groups

- ☐ Very positive impact
- ☐ Positive impact
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact

☒ **Don't know**

Please provide details of any impacts and include examples or evidence where possible.

Registrants have rightly focused on meeting patient needs safely throughout the pandemic. They have had accelerated learning in enhanced infection prevention and control measures, managing patient needs and risks remotely and transforming how they meet local needs. If the CET system reflected this learning, every registrant would have far exceeded six points in any case.

Being flexible has enabled those registrants, who were able to find space for CET, to continue to refresh, enhance and develop their skills. All of which have benefits for employers and patients.

22. The three-year CET cycle offers sufficient flexibility for registrants to complete their overall CET requirements for 2019-21. We are not intending to reduce the overall requirements for the cycle or remove the annual six-point expectation for the year 2021 as the CET scheme ensures patient safety and public protection. Do you agree?

- ☐ Yes
- ☒ **No**
- ☐ Don't know

Please explain why.

The Covid-19 pandemic is far from over and again flexibility will be key in enabling the greatest number of registrants to continue to achieve relevant education and training. Most will want to do this. Whether it is right to insist on 18 points by December 2021 and whether this will ensure patient safety and public protection is less clear. Registrants have undertaken huge amounts of learning and development over the last year, more of which would have not attracted GOC points (see our response to question 21).

The GOC might consider other approaches. For example, it could automatically allocate every registrant who has practised from March 2020 to March 2021 (however much or little) 6 points for 2020. This would reflect the new skills they will have had to acquire in remote care, risk assessment, advice and guidance-seeking and application and enhanced infection prevention and control. The old requirements for 'disinfection' etc., pale in comparison. This would also give registrants whose

employment, home life, PDP and mental health may have been severely disrupted, the flexibility they might need over the next 12 next months.

Section 2.6: Optometrists, dispensing opticians and students working in different settings

Purpose: This statement sets out advice for registrants on the factors they should take into account when working in different settings during the COVID-19 emergency.

Link to document: [GOC/COVID/07](#) (this link opens in a new window)

Categorisation: Red, amber and green

Rationale: This statement applies in all phases of the pandemic and supports our registrants to work in different settings where necessary or to support a career change. It explains what registrants are already able to do under the existing legal framework.

23. Do you agree with the content of this statement?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

24. Do you agree with our view that this statement should continue to apply in all phases of the pandemic?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

25. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

b) Business registrants/employers

☐ Very positive impact

☐ Positive impact

☒ **No impact**

☐ Negative impact

☐ Very negative impact

☐ Don't know

c) Patients and the public

☐ Very positive impact

☐ Positive impact

☒ **No impact**

☐ Negative impact

☐ Very negative impact

☐ Don't know

d) Any other groups

☐ Very positive impact

☐ Positive impact

☐ No impact

☐ Negative impact

☐ Very negative impact

☒ Don't know

Please provide details of any impacts and include examples or evidence where possible.

This was an important statement to have in place, especially when the country was preparing for redeployment in the event of a shortage of frontline doctors to manage Covid-19 patients. This however did not happen on the scale expected during phase one of the pandemic, with many medical staff still having excess capacity due to the cancellation of routine clinics.

This statement has been helpful where registrants could work as part of NHS Test and Trace, the testing programmes and other areas of health and care such as volunteering in Nightingale hospitals. In particular, registrants have welcomed clarity on the status of their medical malpractice insurance and UK governments' underwriting Covid-19 related risks for work outside their current indemnity cover.

26. Should this statement become a permanent GOC policy position independent of the COVID-19 emergency?

☐ Yes

☒ No

☐ Don't know

If you answered 'no', please explain why.

On balance, and beneficial though this has been short-term, our answer is no. This is because national emergencies are one thing, but clinical care as normal is quite another and the balance of risk changes between the two.

There is a general principle which will hold true beyond the pandemic (and which is a made clear by the GOC in paragraph 9 of GOC/COVID/07) that registrants should only identify by a registered title when they are working in that capacity.

The CQC, for example, explains:

“Use of professional titles is protected by law. Where a professional title is used, the assumption will be that the service is being carried out by someone acting in their capacity as a registered health care professional and directly using their professional qualification. This means that if the profession is one of those on the list in the regulations, registration will usually be required.” (Reference: <https://www.cqc.org.uk/guidance-providers/registration/treatment-disease-disorder-or-injury>)

The CQC goes on to explain that if the service does not involve the professional qualification, then there is a risk of confusion among other professionals and patients. It says anomalies in expectations and liability have arisen, for instance where care homes have employed nurses or other health professionals as care workers when they do not hold a licence to provide nursing or other services.

It goes on to state the “key question to consider is whether the person providing the service is using their professional qualification in the job they are employed to do” and where “the person’s qualification is coincidental or only relevant as background knowledge, it will not trigger the need for registration. However, in this case the health

professional should not be using their professional registration status, or presenting themselves as that health professional.” (ibid)

We therefore feel, on balance, that it would not be appropriate or safe for the GOC to seek to guide or suggest what a registrant may do outside the scope of their professional practice in normal times. Also, registrants must be aware that they should not use their titles where these are not relevant for any specific role.

Section 2.7: CET providers on CET provision

Purpose: This statement confirms which approved CET activities can be carried out remotely, standards that must be applied and changes to requirements during the COVID-19 emergency.

Link to document: [GOC/COVID/08](#) (this link opens in a new window)

Categorisation: Red, amber and green

Rationale: This statement applies in all phases of the pandemic and potentially beyond. There is a move toward more online CET provision in the current climate and we feel it is appropriate to support that given social distancing advice is likely to continue for some time.

27. Do you agree with the content of this statement?

☒ Yes

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

28. Do you agree with our view that this statement should continue to apply in all phases of the pandemic?

☒ Yes

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

29. Do you agree that we should continue to allow online CET provision until the end of the current CET cycle (31 December 2021)?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

[Click or tap here to enter text.](#)

30. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

☒ **Very positive impact**

☐ Positive impact

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

b) Business registrants/employers

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

c) CET providers

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

d) Patients and the public

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

e) Any other groups

☐ Very positive impact

☐ Positive impact

☐ No impact

☐ Negative impact

☐ Very negative impact

☒ **Don't know**

Please provide details of any impacts and include examples or evidence where possible.

This has allowed those registrants, who were able to, to continue their education and training in new and innovative ways, as well as reducing the risk of professional isolation. All of which have benefits for employers and patients.

Online training should be supported into the future but more needs to be done to allow the use of a wider range of online platforms so that financial barriers do not indirectly limit the range of education and training to which GOC registrants have access and from which the public will ultimately benefit.

Section 2.8: Verification of contact lens specifications

Purpose: This statement relaxes enforcement of our legislation and allows a registrant to supply contact lenses without verification of the contact lens specification during the COVID-19 emergency where attempts to verify have not been successful and they have used their professional judgement.

Link to document: [GOC/COVID/09](#) (this link opens in a new window)

Categorisation: Red

Rationale: We propose that subject to the outcome of this consultation, this statement will apply in the red phase of the pandemic only. This is because it is linked to accessibility of information from optical practices, which may not be available during the red phase. Our understanding is that the vast majority of optical practices are now open during the amber phase, so this statement is not necessary in the current environment.

31. Do you agree with the content of this statement?

☐ Yes

☒ No

☐ Don't know

If you answered 'no', please explain why.

As important as the College RAG model is (see our response to question 5), there must be some flexibility for clinicians between red and amber so they can meet patients' needs in the safest way. There is often no hard start/stop for red and amber in the real world.

For example, at the time of writing, all four UK countries have advised opticians to continue working in amber while closing other parts of society because of Covid-19 risks. This is because healthcare is prioritised and defined as essential and has IPC measures in place to reduce infections within the practice. It does not mean healthcare workers are at less risk of getting an infection when outside work. Some practices are having to work on skeleton staffing and more practices may have to close intermittently because staff are in high-risk groups or because of staff sickness. That being the case, it might not always be possible to verify a prescription or appropriate to see a patient in person. Patient care must come first, delivered by registrants operating within GOC standards and some practices may not have the staff to verify contact lens specifications for other practices.

It would therefore be sensible, in our view, to continue this professional easement for the duration of the pandemic or at least until the four nations are far closer to Green.

32. Do you agree with our view that this statement should continue to apply in only the red phase of the pandemic?

☐ Yes

☒ No

☐ Don't know

If you answered 'no', please explain why.

Please see our response to question 31.

33. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

- ☐ Very positive impact
- ☒ **Positive impact**
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

b) Business registrants/employers

- ☐ Very positive impact
- ☒ **Positive impact**
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

c) Patients and the public

- ☐ Very positive impact
- ☒ **Positive impact**
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

d) Any other groups

- ☐ Very positive impact
- ☐ Positive impact
- ☐ No impact

- ☐ Negative impact
- ☐ Very negative impact
- ☒ Don't know

Please provide details of any impacts and include examples or evidence where possible.

It has allowed scarce clinical capacity and professional time to be optimised during the pandemic, benefiting all patients. It has allowed patients to access optical appliances and fresh supplies when it might otherwise not have been possible and which might have encouraged unsafe wear. It has also reduced unnecessary travel during the pandemic.

Section 2.9: Infection prevention and control

Purpose: This statement sets out the factors that registrants should take into account when considering infection prevention and control during the COVID-19 emergency.

Link to document: [GOC/COVID/11](#) (this link opens in a new window)

Categorisation: Red, amber and green

Rationale: This statement is supplemental guidance to our *Standards of Practice for Optometrists and Dispensing Opticians*, *Standards for Optical Students* and *Standards for Optical Businesses*. It is applicable throughout all phases of the pandemic as infection prevention and control is required as part of our standards of practice.

34. Do you agree with the content of this statement?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

35. Do you agree with our view that this statement should continue to apply in all phases of the pandemic?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

36. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

☐ Very positive impact

☐ Positive impact

☒ **No impact**

☐ Negative impact

☐ Very negative impact

☐ Don't know

b) Business registrants/employers

☐ Very positive impact

☐ Positive impact

☒ **No impact**

☐ Negative impact

☐ Very negative impact

☐ Don't know

c) Patients and the public

☐ Very positive impact

☐ Positive impact

☒ **No impact**

☐ Negative impact

☐ Very negative impact

☐ Don't know

d) Any other groups

☐ Very positive impact

- ☐ Positive impact
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact
- ☒ Don't know

Please provide details of any impacts and include examples or evidence where possible.

The GOC published this statement relatively late in the pandemic response. Practices were already following new public health guidance and adapting quickly to new IPC advice as it emerged. The GOC statement completed a loop but did not add value to it in this regard.

37. We propose to make this statement a permanent GOC policy position to apply in the event of any future pandemics/emergencies to support our standards. Do you agree?

- ☒ Yes
- ☐ No
- ☐ Don't know

If you answered 'no', please explain why.

Please see our response to question 36. There is no issue with the GOC publishing this statement, it simply repeats what is widely known and covers an area with already high compliance.

Section 2.10: Redeployment of optometrists or dispensing opticians within pharmacy practice

Purpose: This statement describes how optical professionals might be utilised to support the delivery of pharmacy services, to relieve pressures on the pharmacy workforce due to the COVID-19 emergency and to provide a platform for future interdisciplinary interaction and support, post COVID-19.

Link to document: [GOC/COVID/12](#) (this link opens in a new window)

Categorisation: Red, amber and green

Rationale: This statement applies in all phases of the pandemic supporting our registrants to work in different settings where necessary to support professional colleagues. It clarifies what registrants are already able to do under the existing legal framework.

38. Do you agree with the content of this statement?

☐ Yes

☒ **No**

☐ Don't know

If you answered 'no', please explain why.

It is true that some eye care and pharmacy services operate from the same healthcare premises and under common ultimate ownership. However, given general redeployment guidance issued by the NHS, the value of a pharmacy specific set of guidance for GOC registrants is not clear.

39. Do you agree with our view that this statement should continue to apply in all phases of the pandemic?

☐ Yes

☒ **No**

☐ Don't know

If you answered 'no', please explain why.

Given general redeployment guidance issued by the NHS, the value of a pharmacy specific set of guidance is not clear. It will not be needed during an amber phase. Please see our response to question 38.

40. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

☐ Very positive impact

☐ Positive impact

☒ **No impact**

☐ Negative impact

☐ Very negative impact

☐ Don't know

b) Business registrants/employers

☐ Very positive impact

- ☐ Positive impact
- ☒ **No impact**
- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

c) Patients and the public

- ☐ Very positive impact
- ☐ Positive impact
- ☒ **No impact**
- ☐ Negative impact
- ☐ Very negative impact
- ☐ Don't know

d) Any other groups

- ☐ Very positive impact
- ☐ Positive impact
- ☐ No impact
- ☐ Negative impact
- ☐ Very negative impact
- ☒ Don't know

Please provide details of any impacts and include examples or evidence where possible.

The sector had already supported pharmacy during phase one of the pandemic when colleagues were under significant pressure. This GOC statement was published after those pressures eased and when opticians themselves had significant demand pressures. The sector was very much ahead of the GOC in doing the right thing for the right reasons at the right time.

Section 2.11: Use of technology

Purpose: This statement sets out the legal position in respect of the use of technology by registrants.

Link to document: [GOC/COVID/13](#) (this link opens in a new window)

Categorisation: Red, amber and green

Rationale: This statement applies in all phases of the pandemic as it clarifies what registrants are already able to do under the existing legal framework.

41. Do you agree with the content of this statement?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

42. Do you agree with our view that this statement should continue to apply in all phases of the pandemic?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

Click or tap here to enter text.

43. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

☐ Very positive impact

☐ Positive impact

☒ **No impact**

☐ Negative impact

☐ Very negative impact

☐ Don't know

b) Business registrants/employers

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

c) Patients and the public

☐ Very positive impact

☐ Positive impact

☒ **No impact**

☐ Negative impact

☐ Very negative impact

☐ Don't know

d) Any other groups

☐ Very positive impact

☐ Positive impact

☐ No impact

☐ Negative impact

☐ Very negative impact

☒ Don't know

Please provide details of any impacts and include examples or evidence where possible.

This statement is helpful. It reassures registrants, particularly business registrants, that they can invest in technologies for a longer period than the unknown duration of the pandemic. These technologies are likely to reduce the risk of infection and help inform more effective and efficient decision-making. In the long run this is likely to benefit patients, practices, practitioners and wider society.

44. Should this statement become a permanent GOC policy position independent of the COVID-19 emergency to support our standards?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

[Click or tap here to enter text.](#)

Section 2.12: Service of registration notifications

Purpose: This statement sets out our move to a process of serving registration notifications and other communications electronically during the COVID-19 emergency.

Link to document: [GOC/COVID/14](#) (this link opens in a new window)

Categorisation: Red, amber and green

Rationale: This statement applies in all phases of the pandemic, as the impact on our Registration team is likely to continue for some time.

45. Do you agree with the content of this statement?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

[Click or tap here to enter text.](#)

46. Do you agree with our view that this statement should continue to apply in all phases of the pandemic?

☒ **Yes**

☐ No

☐ Don't know

If you answered 'no', please explain why.

[Click or tap here to enter text.](#)

47. What has been the impact of this statement on the following groups?

a) Optometrists and dispensing opticians

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

b) Business registrants/employers

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

c) Patients and the public

☐ Very positive impact

☐ Positive impact

☒ **No impact**

☐ Negative impact

☐ Very negative impact

☐ Don't know

d) Any other groups

☐ Very positive impact

☐ Positive impact

☐ No impact

☐ Negative impact

☐ Very negative impact

☒ **Don't know**

Please provide details of any impacts and include examples or evidence where possible.

It is sensible to move to electronic rather than paper-based statutory communications (where an email address for this purpose has provided by the registrant). The General Optical Council is already moving to make this permanent. However, the position is less clear regarding electronic bundles of papers for hearings. Some people find these digital documents much harder to navigate, assimilate and process than paper bundles and, if electronic bundles are to stay, it is likely both will have to continue as options for registrants for the foreseeable future. There may be diversity and equality issues to address as well.

48. We are currently in discussion with the Department of Health and Social Care to underpin this statement with emergency legal powers to enable us to issue registration notices by email if the registrant has provided us with an email address. What would be the impact of the GOC securing these powers?

☐ Very positive impact

☒ **Positive impact**

☐ No impact

☐ Negative impact

☐ Very negative impact

☐ Don't know

Please supply any evidence or reasoning to support this.

Our understanding is that this was completed as of 14 December 2020. However, it should always be made clear to registrants that, when providing an email address, it will be used by the GOC as the primary method of communication for important registration communications. So, if it's not a home address, it should be private, secure and should not be left live when the registrant no longer uses that address.

Part 3: Learning from our response to COVID-19

49. Are there any other areas that the sector requires specific guidance on or any legislative changes to support care during the COVID-19 pandemic or any future similar pandemics/emergencies?

☐ Yes

☒ **No**

☐ Don't know

If you answered 'yes', please give further details.

Click or tap here to enter text.

50. The main route we have used in supporting registrants through the COVID-19 pandemic is signposting to guidance and production of our COVID-19 statements. Do you feel our approach to supporting registrants during COVID-19 has been effective?

☒ **Yes**

☐ No

☐ Don't know

Please explain why.

Click or tap here to enter text.

51. Do you have any other comments relevant to our [draft impact assessment](#)?

☒ **Yes**

☐ No

If you answered 'yes', please give further details.

In the context of the pandemic, it was right and proper of the GOC “to consult [only] a small number of key stakeholders in the sector and healthcare commissioners prior to implementation” provided, as was the case, that these included the major representative, professional and indemnity bodies which represent most registrants. To - which, now re-established, will continue beyond the pandemic for the good of all.

Further information

52. Can we publish your response?

(Required)

☒ **Yes**

☐ Yes, but please keep my name and my organisation's name private

☐ No