

## **Consultation responses on the revised Standards of Practice for Optometrists and Dispensing Opticians, Standards for Optical Students and Standards for Optical Businesses**

**December 2024**

We have redacted the participant data for anonymity in line with our GDPR obligations and consultation policy.

Respondent 1

## **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

**Optometrist**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Not sure**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

**No response**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Somewhat disagree**

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**Somewhat agree**

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Somewhat agree**

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Somewhat agree**

***The GOC need to crack down on rogue multiple stores that simply do not allow sufficient time or a workable environment for optometrists to conduct safe tests on vulnerable patients. Time and time no action is taken. There isn't much point to the new standards if the basic issues aren't being addressed. The GOC cannot expect safe tests being conducted in stores with 20 min testing and ghost clinics. It's completely unjust and yet the GOC continually fails to do anything to protect patients in this regard.***

Q13. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q15. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

***I would like to see a member of the GOC conduct a sight test on a patient with a pituitary tumour, explain their findings sympathetically and refer the patient in 20 minutes. Because that's what is happening to the registrants. It's shocking.***

Q17. To what extent do you agree that the revised standards are clear?

**No response**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q19. To what extent do you agree that the revised standards are clear?

**No response**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q21. To what extent do you agree that the addition to the business standard is clear?

**No response**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**No response**

Q23. To what extent do you agree the revised standards are clear?

**No response**

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q25. To what extent do you agree that the revised standards are clear?

**No response**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**No response**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**No response**

Q28. To what extent do you agree that the additional standard is clear?

**No response**

Q29. To what extent do you agree that the revised standards are clear?

**No response**

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**No response**

Q32. To what extent do you agree that the additional standard is clear?

**No response**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Somewhat agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

**Yes**

Respondent 2

**General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

**Optometrist**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Not sure**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Yes**

***Throughout the supporting documentation you have referenced the Equality Act 2010 & how you should not discriminate based upon any of the Protected Characteristics it contains. However, you have consistently failed to list the Protected Characteristics correctly throughout all the documentation. You list 'gender' amongst the protected characteristics and omit 'Sex'. Eg section 13.2 of the standards of practice, section 12.2 standards of practice for students and also in section 2.2 of the standards of practice for optical businesses. 'Sex' is the protected characteristic. Gender has no legal meaning within the Equalities Act and means different things to different people. You should not be using it.***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Yes**

***"Your failure to [REDACTED] cite the Equalities Act suggests you might inadvertently discriminate against [REDACTED] registrants. [REDACTED]***

***[REDACTED]***

***[REDACTED]***

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**No response**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**No response**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**No response**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No response**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No response**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**No response**

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**No response**

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**No response**

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?



**No response**

Q13. To what extent do you agree that the revised standards are clear?

**No response**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q15. To what extent do you agree that the revised standards are clear?

**No response**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q17. To what extent do you agree that the revised standards are clear?

**No response**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q19. To what extent do you agree that the revised standards are clear?

**Strongly disagree**

***You state in paragraph 81 that you have updated the language in relation to protected characteristics. You have deviated from the law. You have replaced 'Sex' with Gender. Gender has no legal basis here. The full list of protected characteristics are here:***

***<https://www.legislation.gov.uk/ukpga/2010/15/section/4>***

***I hope you are not receiving guidance from external sources who are well known to offer training and guidance which presents the law as they want it to be and not as it actually is. A brief internet search shows a recent example.***

***<https://www.personneltoday.com/hr/stonewalls-diversity-scheme-accused-of-being-unlawful/>***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q21. To what extent do you agree that the addition to the business standard is clear?

**No response**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**No response**

Q23. To what extent do you agree the revised standards are clear?

**No response**

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q25. To what extent do you agree that the revised standards are clear?

**No response**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**No response**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**No response**

Q28. To what extent do you agree that the additional standard is clear?

**No response**

Q29. To what extent do you agree that the revised standards are clear?

**No response**

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**No response**

Q32. To what extent do you agree that the additional standard is clear?

**No response**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**No response**

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

**No response**

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 3

## General Questions

Are you responding on behalf of an organisation?

**No**

Which category best describes you ?

**Optometrist**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***Different accountabilities, skills and experience. Students may make a mistake  
I. Their training that I would be less likely to forgive an experienced ECP***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Yes**

***Positive impact by raising awareness***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***Proposals are Common sense.***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Strongly agree***

***Critical that registrants see themselves as leaders***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Strongly agree***

***Essential mindset for a registrant***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Strongly agree***

***Sensible especially re domiciliary care***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Strongly agree***

***See above***

Q13. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q15. To what extent do you agree that the revised standards are clear?

***Strongly agree***

***Pragmatic developments***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q17. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***We need registrants to understand the technology does not dilute their accountability***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q19. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Somewhat agree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Strongly agree***

Q23. To what extent do you agree the revised standards are clear?

***Strongly agree***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

***Good development***

Q25. To what extent do you agree that the revised standards are clear?

***Strongly agree***

***Sensible***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

***We must also adequately protect registrants from vexatious complaints***

Q28. To what extent do you agree that the additional standard is clear?

***Somewhat agree***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

Q32. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

***Sensible***

Can we publish your response?

***Yes***



Respondent 4

## General Questions

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

***Therapeutic prescribing optometrist***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***I would have a little more leeway with students. The frontal cortex isn't fully developed until mid-20s and there is still time to learn from mistakes and they do not have much experience in any event to act as a reference point. This comes with time.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***We now receive multiple elements of advice from multiple organisations. People need time to catch up. Look at how long it takes for people to catch up to e.g., NICE guidance.***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat agree***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Strongly agree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Strongly agree***

Q13. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q15. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q17. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q19. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Somewhat agree***

***Lofty goals but how much will they be adhered to on the ground***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Somewhat agree***

Q23. To what extent do you agree the revised standards are clear?

***Somewhat disagree***

***Still looks wishy-washy. Can [REDACTED] be used or not. If there is end-to-end encryption and the other side is a registered professional this should be allowed and guidance should say so***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

Q25. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

Q32. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 5

### **General Questions**

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

**Other**

If other, please specify:

**Mediation service**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***Differing levels of maturity and experience. Ultimately students will always have another fully qualified registrant who is accountable for their actions***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

- (a) opportunities for persons to use the Welsh language, and
- (b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***The changes are not sufficient to warrant an implementation transition phase***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Strongly agree***

***Critical all registrants adopt a leadership mindset in their role. This will help in the resolution of complaints.***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Strongly agree***

***Aligns with public expectations of a registered practitioner***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Strongly agree***

***Paediatrics and domiciliary are the two areas of most concern to [REDACTED] The proposal will be hugely helpful in the resolution of concerns we deal with***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Strongly agree**

Q13. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q15. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q17. To what extent do you agree that the revised standards are clear?

**Strongly agree**

***pragmatic response to a key area***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

***really important that registrants understand their accountability is not diminished by reliance on emerging technology***

Q19. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q21. To what extent do you agree that the addition to the business standard is clear?



***Somewhat agree***

***We need to be careful not to create a pathway for registrants to simply blame their employer***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Neither agree nor disagree***

***We need to be careful not to create a pathway for registrants to simply blame their employer***

Q23. To what extent do you agree the revised standards are clear?

***Strongly agree***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

***Excellent evolution of standard in this arena***

Q25. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

Q32. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 6

### **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

**Contact lens optician**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Yes**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Yes**

**Positively**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No response**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***No less than a month and no more than three months***

***Changes in the Standards will need to be implemented into company policy which takes time, however for the benefit of registrants and the public, the time needs to be kept to a minimum***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat agree***

***I think that either the 'examples' sentence needs to be expanded or discarded. I would prefer an expansion to clarify expectations.***

***Although in the existing standards, the word 'contributing' would benefit by being updated to 'supporting'.***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat agree***

***See Above***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Strongly agree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Somewhat agree***

***Much more tricky with a remote consultation***

Q13. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q15. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q17. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q19. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Strongly agree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Strongly agree***

Q23. To what extent do you agree the revised standards are clear?

**Somewhat agree**

***Should there be limitation on who this data can be shared with?***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q25. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

***Addition of the word ALL, i.e., All your behaviours, actions etc***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**Somewhat agree**

***Again adding the word ALL, i.e., all your behaviours, actions etc***

Q28. To what extent do you agree that the additional standard is clear?

**Somewhat agree**

Q29. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

***During previous FtP, I understand a registrant that has demonstrated study into the subject relating to the case, showing a remorse and need to improve can have that taken into account. Absolutely the individual must stop practising and seek advice but should the standard specify no training?***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Neither agree nor disagree**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**Strongly agree**

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat agree***

***I think this will need reflecting in the Business Standards***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 7

### **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

**Contact lens optician**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***I wouldn't expect a student to show the same leadership skills as a qualified practitioner***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Yes**

***Only for the better***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**



Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

(a) opportunities for persons to use the Welsh language, and

(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***Allow a short period in order for practitioners to become accustomed to the changes***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Strongly agree***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Somewhat agree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Strongly agree***

Q13. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q15. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q17. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q19. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Strongly agree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Somewhat agree***

Q23. To what extent do you agree the revised standards are clear?

***Somewhat agree***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q25. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q29. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Neither agree nor disagree***

***Hard to define serious communicable disease?***

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat agree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

**Yes**

Respondent 8

## **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

***Optometrist***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***Young age, more likely unaware of consequences professionally***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

***Not sure***

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) No, (b) No***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) No, (b) No***

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) No, (b) No***

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat agree***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Strongly agree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q13. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q15. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q17. To what extent do you agree that the revised standards are clear?

**Neither agree nor disagree**

***Too vague and concerning that it suggests must use OCT etc to inform if available and could be penalised if hadn't done it and was available.***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Neither agree nor disagree**

Q19. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q21. To what extent do you agree that the addition to the business standard is clear?

**Somewhat agree**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Strongly agree**

Q23. To what extent do you agree the revised standards are clear?

**Strongly agree**

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q25. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q29. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly disagree***

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat agree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Somewhat agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

**Yes**



Respondent 9

## **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

***Contact lens optician***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

***The duty***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Yes**

***It should be better for those type of individuals***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Yes**

***It should be better for those type of individuals***

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**(a) No**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***Just in case it needs revising. 1 year***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat agree***

***Seems beneficial***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat agree***

***Seems beneficial***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**No response**

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**No response**

Q13. To what extent do you agree that the revised standards are clear?

**No response**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q15. To what extent do you agree that the revised standards are clear?

**No response**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q17. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***There is too much information***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

***In the main it does seem to tick the right boxes***

Q19. To what extent do you agree that the revised standards are clear?

**No response**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q21. To what extent do you agree that the addition to the business standard is clear?

**No response**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**No response**

Q23. To what extent do you agree the revised standards are clear?

**No response**

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q25. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***To much information***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

***Covers most things***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**No response**

Q28. To what extent do you agree that the additional standard is clear?

**No response**

Q29. To what extent do you agree that the revised standards are clear?

**No response**

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**No response**

Q32. To what extent do you agree that the additional standard is clear?

**No response**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**No response**

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

**No response**

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 10

### **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

***Student dispensing optician***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

***If you're learning then the standards should be the same to prepare you for your role***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

***(b) No***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

***(a) No***

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***The changes are reasonable to adapt to***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat disagree***

***Prefer the original it's clearer***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Strongly agree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Strongly agree***

Q13. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q15. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q17. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q19. To what extent do you agree that the revised standards are clear?

***Strongly agree***

***Strongly agree on refraining from comments made in front of patients and making the patient doubt the staffs skills***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Strongly agree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Strongly agree***

Q23. To what extent do you agree the revised standards are clear?

***Strongly agree***



Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q25. To what extent do you agree that the revised standards are clear?

***Strongly agree***

***Supervision is of utmost importance***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

***Strongly agree staff should not be in work with something that can spread to vulnerable patients***

Q32. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 11

## **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

***Optometrist***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***Students are younger, no less and should be given more leeway.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

**3 months**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Strongly agree**

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**Strongly agree**

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Strongly agree**

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Strongly agree**

Q13. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q15. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***Optometrists and dispensing opticians should declare to the patient any financial bonuses they get from recommending appliances.***

Q17. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q19. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Strongly agree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Strongly agree***

Q23. To what extent do you agree the revised standards are clear?

***Strongly agree***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q25. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

Q32. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

**Yes**

Respondent 12

## General Questions

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

***Student optometrist***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

***Because students still have to maintain and uphold professional standards as they do see patients and this may have adverse effects on the healthcare and mental wellbeing of the patient especially if they are vulnerable.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Yes**

***Positively as it makes things far more clear, however there should also be more regulations needed e.g. testing people who are vulnerable. The only university to teach about special assessment is Cardiff University which means optometrists are often uncomfortable and unaware of what to do when they see someone with significant disabilities. This is why these patients often only feel comfortable in special select few testing areas which are sparse across the country. This means that they are not getting equal access to care when compared to their peers.***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Yes**

**Positively.**

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

**No effect**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

- (a) opportunities for persons to use the Welsh language, and
- (b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

**No effect.**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

- (a) opportunities for persons to use the Welsh language, and
- (b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**Yes**

***There should also be more regulations needed e.g. testing people who are vulnerable. The only university to teach about special assessment is Cardiff University which means optometrists are often uncomfortable and unaware of what to do when they see someone with significant disabilities. This is why these patients often only feel comfortable in special select few testing areas which are sparse across the country. This means that they are not getting equal access to care when compared to their peers. Finally, I think that they should receive extra level of care with glasses so should require the supervision of DO/OO or by them as this may impact their learning or comfort if done wrong.***

***Also, tele optometry are being rolled out which could compromise patient safety as they are not the one who is doing the sight test in person but rather someone abroad, and therefore not under the Opticians Act 1989 and registered with the GOC, is doing the sight test with an unregistered optical assistant operating the machines. This is not good as other countries do not follow the same level of expectations as the GOC does e.g. CPD, Pre-Reg, standards of practice. This could mean that something which is not of this standard here but of a standard abroad could impair the sight of a UK resident. People here have an expectation that they will be looked after under this country's regulation. Also, ■■■ stereoscopic view cannot be conducted thus impairing the ability to detect disease like Serous Retinopathy. Same with contact tonometry which is vital for the detection of glaucoma which requires a registered professional to do it as any mistake made done by the unregistered individual can lead to corneal abrasions and corneal scratches which can be detrimental to the eye. There is no clear wording of this standard and I would like this standard to be made very explicitly clear to avoid any discrepancies.***



***Lastly, I think that the NHS glasses should return to offer the patients the best lens but a limited amount of frames. This is because it offers the best vision, and vision should not be compromised just because someone cannot afford it, otherwise this would be a breach of acting in the best interest of the patients as set out in the Standards of Practice as e.g. a Varifocal Standard would limit field of view which is important in certain occupations whilst a more expensive Varifocal Extra Premium does not but is more expensive. Whilst frames are just for cosmetic purposes and are not important with regards to vision.***

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***No because they should be performing at that standard anyway as regulations only serve as a bare minimum expected level of care.***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat agree***

***Not all registrants will end up in a leadership position but it should be taught.***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat agree***

***Not all registrants will end up in a leadership position but it should be taught.***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Strongly agree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Strongly agree***

Q13. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q15. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q17. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q19. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***Reference Equality Act 2010***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

***Reference Equality Act 2010***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Somewhat agree***

***Reference Equality Act 2010***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Somewhat agree***

***Reference Equality Act 2010***

Q23. To what extent do you agree the revised standards are clear?

***Strongly agree***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q25. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***Make very clear what appropriate means so that it cannot be challenged.***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

***Make very clear what appropriate means so that it cannot be challenged.***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Somewhat agree***

***Needs to make clear that existing relationships need to have boundaries in the workplace.***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**Strongly agree**

Q32. To what extent do you agree that the additional standard is clear?

**Strongly agree**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**Strongly agree**

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

**Strongly agree**

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

***There should also be more regulations needed e.g. testing people who are vulnerable. The only university to teach about special assessment is Cardiff University which means optometrists are often uncomfortable and unaware of what to do when they see someone with significant disabilities. This is why these patients often only feel comfortable in special select few testing areas which are sparse across the country. This means that they are not getting equal access to care when compared to their peers. Finally, I think that they should receive extra level of care with glasses so should require the supervision of DO/OO or by them as this may impact their learning or comfort if done wrong.***

***Also, tele optometry are being rolled out which could compromise patient safety as they are not the one who is doing the sight test in person but rather someone abroad, and therefore not under the Opticians Act 1989 and registered with the GOC, is doing the sight test with an unregistered optical assistant operating the machines. This is not good as other countries do not follow the same level of expectations as the GOC does e.g. CPD, Pre-Reg, standards of practice. This could mean that something which is not of this standard here but of a standard abroad could impair the sight of a UK resident. People here have an expectation that they will be looked after under this country's regulation. Also, [REDACTED] stereoscopic view cannot be conducted thus impairing the ability to detect disease like Serous Retinopathy. Same with contact tonometry which is vital for the detection of glaucoma which requires a registered professional to do it as any mistake made done by the unregistered individual can lead to corneal abrasions and corneal scratches which can be detrimental to the eye. There***

***is no clear wording of this standard and I would like this standard to be made very explicitly clear to avoid any discrepancies.***

***Lastly, I think that the [REDACTED] glasses should return to offer the patients the best lens but a limited amount of frames. This is because it offers the best vision, and vision should not be compromised just because someone cannot afford it, otherwise this would be a breach of acting in the best interest of the patients as set out in the Standards of Practice as e.g. a Varifocal Standard would limit field of view which is important in certain occupations whilst a more expensive Varifocal Extra Premium does not but is more expensive. Whilst frames are just for cosmetic purposes and are not important with regards to vision.***

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 13

### **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

**Optometrist**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Not sure**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(b) Not sure, (a) Yes**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Yes , (b) Not sure**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat agree***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Somewhat disagree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Somewhat disagree***

Q13. To what extent do you agree that the revised standards are clear?

***Strongly disagree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly disagree***

Q15. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q17. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q19. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Somewhat agree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Somewhat agree***

Q23. To what extent do you agree the revised standards are clear?

***Somewhat agree***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q25. To what extent do you agree that the revised standards are clear?

***Neither agree nor disagree***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?



***Somewhat disagree***

Q28. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Somewhat agree***

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Somewhat disagree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 14

## General Questions

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

**Optometrist**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

***Patients (and their data), and colleagues, have to be safe with students as well as with qualified staff, though obviously those supervising students will have responsibility to ensure that they are.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Yes**

***Possibly better protection for those with a disability/vulnerability.***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Yes**

***General strong statement about respecting boundaries and not harassing colleagues should help.***

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

- (a) opportunities for persons to use the Welsh language, and
- (b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**Yes**

***I didn't read the whole document, i.e. the bits you aren't changing, but I hope there is something in there about handling patient data securely e.g. when referring via NHSmail, not sharing logins, secure access to digital systems etc.***

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Somewhat agree**

***I would like it to also include something about collaborating with allied professions to develop [redacted] services to patients in primary care (joining [redacted] for example).***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**Somewhat agree**

***As above. Need more people to engage with the challenges faced by primary and secondary care.***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Strongly agree**

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Strongly agree**

Q13. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q15. To what extent do you agree that the revised standards are clear?

**Strongly disagree**

***Throughout document, 6.4 onwards, what does "appliances" mean? I feel that it is too woolly a definition to be useful. At least give some examples of the scope you mean. It probably means "anything you might supply to the patient", in which case say that.***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

***Generally I agree with the changes.***

Q17. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

***Q64. Do you really need to tell people to use their professional judgement when utilising data from digital technologies. Even people now making unwise decisions/spurious referrals from it probably already think that they are using their professional judgement.***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q19. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q21. To what extent do you agree that the addition to the business standard is clear?

**Strongly agree**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Strongly agree**

Q23. To what extent do you agree the revised standards are clear?

**Somewhat disagree**

***I'd like to see use of social media actively discouraged. I don't think we should be using ██████████ for professional use (ditto politicians!). And the use of secure systems - e.g. NHSmail - encouraged. But then you'd have to get ██████████ to ensure all options have access to NHSmail, which they don't.***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q25. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**Strongly agree**

Q28. To what extent do you agree that the additional standard is clear?

**Strongly agree**

Q29. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**Strongly disagree**

***"Serious communicable disease" too vague. Would the definition be applied retrospectively in the case of an patient harm incident? Some optoms will be more conscientious than others applying that definition and some wouldn't bother.***

***Is it flu? Is it another CV-19 type virus? Is it ""a heavy cold"" that may be the former? If you leave the definition this wide, then please add that the GOC would send out communications in the event of a ""serious communicable disease"" becoming a threat so that everyone would know it applied to them at a given time. Advice would have to be prompt, learning from the COVID pandemic.***

***I fully support the intention but think this proposal unworkable as written.***

Q32. To what extent do you agree that the additional standard is clear?

**Strongly disagree**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**Strongly agree**

***You would hope it would be a given! Shame you have to spell it out.***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

**Strongly agree**

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 15

### **General Questions**

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

***Optical professional/representative body***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No response**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No response**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No response**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No response**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Somewhat disagree**

***Feel the wording specifically "leadership" can be easily misunderstood. Especially for students or newly qualified it may not be appropriate. Being responsible for their own influence is more appropriate and then a commitment to develop leadership in the future.***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**Strongly disagree**

***Not a standard, its an introduction. Concerned that this may be misinterpreted by commercial enterprises to encourage poor behaviour in practice. i.e. staff being forced to take on leadership roles when not appropriate.***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Somewhat agree**

***Should be "where possible". We can only judge situations based on what our patients tell us, in the restricted time that we have.***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Somewhat disagree**

***Too great a responsibility for the limited time we have with patients. Presuming the Standards are robust, this in introduction is not required.***



Q13. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***Clarity is needed between "must and "should" - quite different!***

Q15. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

***Registrants may be overwhelmed by this level of requirement and responsibility.***

Q17. To what extent do you agree that the revised standards are clear?

***Strongly disagree***

***Needs much greater clarification especially regarding new tech.***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly disagree***

Q19. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Strongly agree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Strongly agree**

Q23. To what extent do you agree the revised standards are clear?

**Strongly agree**

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q25. To what extent do you agree that the revised standards are clear?

**Neither agree nor disagree**

**Concerned that this is not specific enough - does this mean that staff members can never have a consensual relationship? How would this affect families working together?**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**Neither agree nor disagree**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**Strongly agree**

Q28. To what extent do you agree that the additional standard is clear?

**Strongly agree**

Q29. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**Somewhat disagree**

**This should be developed in the same way you have communicated your reasoning as above - it is not clear at present.**

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

***No response***

Can we publish your response?

***Yes***

Respondent 16

## General Questions

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

### **Optical professional/representative body**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Not sure**

***we suggest that not all vulnerabilities are visible, and a practitioner should make reasonable effort to become aware of any potential vulnerability and make reasonable adjustments to their practice. We have a concern if a practitioner missed something and it led to an FTP complaint. This could also include being reasonably aware of a patients' history (reading previous notes) so that a patient does not have to re-declare a vulnerability.***

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No response**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No response**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Somewhat agree**

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**Somewhat agree**

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Somewhat agree**

***We suggest that not all vulnerabilities are visible, and a practitioner should make reasonable effort to become aware of any potential vulnerability and make reasonable adjustments to their practice. We have a concern if a practitioner missed something and it led to an FTP complaint. This could also include being reasonably aware of a patients' history (reading previous notes) so that a patient does not have to re-declare a vulnerability.***

***We wonder if "conduct an adequate assessment reflecting the aim of the optical/ophthalmic consultation" would read better and incorporate enhanced services past a sight test?***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Strongly agree**

Q13. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q15. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

**2.2 This is something we should consider in Wales if partway through the examination the type of examination changes - we should inform px**

**6.7 /7.6 – it does reference developing skills – as long as we are judged against the standards of a reasonable “normal” optometrist.**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

**7.1: We wonder if “conduct an adequate assessment reflecting the aim of the optical/ophthalmic consultation” would read better and incorporate enhanced services past a sight test? 7.6: Wording like “Give patients information about reasonably widespread options available to them, being honest if you feel your information may not be comprehensive” may be more thorough and help registrants advising outside their area of expertise?**

**7.6 could be made more prescriptive, for example asking the registrant to check that a patient feels confident with the medium the information is given in. This may also help support illiterate patients who are given information leaflets or written in second languages.**

Q17. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

**AI / Digital Technologies – an example would be helpful – we already have this in a limited form as it relates to Glaucoma and the risk of Red or Green disease referral based on incorrect segmentation / alignment or in a practitioner overlooking a continued drop in GCC thickness from thick norm to low norm which would represent a missed opportunity for early intervention.**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

***Apply your informed professional judgement when utilising data generated by digital technologies to compliment your decision making” could better reflect the use of enhanced technology/AI/software in primary care.***

Q19. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Somewhat agree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Strongly agree***

Q23. To what extent do you agree the revised standards are clear?

***Strongly agree***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q25. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

**Strongly agree**

Q29. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**Somewhat agree**

**11.8 (New Standard): this is vague I am Not sure where the line between non serious and serious communicable disease is however any more specific might have to sound like “if you believe you are at risk of compromising public health during the course of your practice...”**

Q32. To what extent do you agree that the additional standard is clear?

**Somewhat agree**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**Strongly agree**

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

**Strongly agree**

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

**Yes, but please keep my name or my organisation's name private**



Respondent 17

### **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

***Dispensing optician***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

***Not sure***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

***Not sure***

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q7. Is there anything else you think we should consider as part of the proposed changes?

***Not sure***

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat agree***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**No response**

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**No response**

Q13. To what extent do you agree that the revised standards are clear?

**No response**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q15. To what extent do you agree that the revised standards are clear?

**No response**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q17. To what extent do you agree that the revised standards are clear?

**No response**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q19. To what extent do you agree that the revised standards are clear?

**No response**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q21. To what extent do you agree that the addition to the business standard is clear?

**No response**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**No response**

Q23. To what extent do you agree the revised standards are clear?

***Strongly agree***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q25. To what extent do you agree that the revised standards are clear?

**No response**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**No response**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**No response**

Q28. To what extent do you agree that the additional standard is clear?

**No response**

Q29. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**Somewhat agree**

Q32. To what extent do you agree that the additional standard is clear?

**Somewhat agree**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**Somewhat agree**

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

**Somewhat agree**

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 18

## **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

***Dispensing optician***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Yes**

***Positively***

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) No, (b) No***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q7. Is there anything else you think we should consider as part of the proposed changes?

***Not sure***

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

***Not sure***

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***To have all registrants be given time to read and understand the changes to their practice standards***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat agree***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat disagree***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Somewhat agree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Somewhat disagree***

Q13. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q15. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q17. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q19. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q21. To what extent do you agree that the addition to the business standard is clear?

**Strongly agree**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Strongly agree**

Q23. To what extent do you agree the revised standards are clear?

**Strongly agree**

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q25. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

Q32. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

**Yes**



Respondent 19

### **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

***Dispensing optician***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***This would depend on the competency of the supervisor involved***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) No, (b) Not sure***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) No, (b) No***

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) No, (b) No***

Q7. Is there anything else you think we should consider as part of the proposed changes?

**Yes**

***More guidance and competency checks on supervision for students***

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No response**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Strongly agree***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat disagree***

***Not clear what minimum expectations would be***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Strongly agree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Strongly agree***

Q13. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q15. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q17. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q19. To what extent do you agree that the revised standards are clear?

***Somewhat disagree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Somewhat disagree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Somewhat disagree***

Q23. To what extent do you agree the revised standards are clear?

***Somewhat agree***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q25. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

Q32. To what extent do you agree that the additional standard is clear?

***Strongly agree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 20

### **General Questions**

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

**Other**

If other, please specify:

***Optical Suppliers Association- a trade/industry association***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No response**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No response**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No response**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No response**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No response**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**No response**

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**No response**

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**No response**

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**No response**

Q13. To what extent do you agree that the revised standards are clear?

**No response**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q15. To what extent do you agree that the revised standards are clear?

**No response**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q17. To what extent do you agree that the revised standards are clear?

**No response**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q19. To what extent do you agree that the revised standards are clear?

**No response**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q21. To what extent do you agree that the addition to the business standard is clear?

**No response**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**No response**

Q23. To what extent do you agree the revised standards are clear?

**No response**

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q25. To what extent do you agree that the revised standards are clear?

**No response**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**No response**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**No response**

Q28. To what extent do you agree that the additional standard is clear?

**No response**

Q29. To what extent do you agree that the revised standards are clear?

**No response**

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**No response**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**No response**

Q32. To what extent do you agree that the additional standard is clear?

**No response**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**No response**

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

**No response**

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

***Firstly I wanted to highlight that the decision to replace medical devices throughout the standards with appliances seems odd to us. A medical device has a clear legal meaning; medical devices and their manufacturers and distributors are all subject to regulation by the MHRA. An appliance is a loose term with no clear definition. An optical practice, optometrist or optician may stock, recommend or sell a number of things that are not medical devices, including PPE (non-prescription sunglasses), spectacle cases, cleaning cloths and chains to hang your specs from, for example. These are not medical devices, and I have no idea if they are appliances. And I am not sure why you would want the standards of practice to cover such items.***



***In fact I think the bigger issue is for the GOC to ensure that optical practices, optometrists and opticians are aware of their responsibilities in relation to medical devices. The OSA frequently receives questions from practice owners or professionals who are unclear about the requirements for them to register with the MHRA if they manufacture or assemble spectacles, similarly their responsibilities as a distributor and potentially as an importer. It seems to us important to get this right, not to create confusion by referring to appliances rather than medical devices. The second issue we discussed is that of the standards for optical businesses. Our concern is that an optical business is not defined. While the standards only apply to those businesses that are required to register with the GOC, the draft states that the GOC would hope all optical businesses would choose to comply with them. Reading the standards it seems clear that what is meant by “optical businesses” is in fact an optical practice, that is, a business with direct contact with patients. However nowhere is this clarified. We appreciate that this has always been the case with the standards for business. This has always been a concern and we believe that the current consultation provides an opportunity to remedy this.***

***The OSA represents a variety of businesses that manufacture, import, and supply goods and services to optical practices. The majority would consider themselves to be optical businesses. But almost none would want to be, nor should be regulated by the GOC, nor fall within the ambit of the GOC standards. And I doubt that the GOC wishes this either. Our concern is that promoting the standards to “all optical businesses” will create unnecessary confusion and concern, not to mention work for both the GOC and OSA responding to concerned business owners. To avoid this we would strongly suggest that the standards should include a more precise definition of the optical businesses that the GOC would hope to see adopt the standards, for example to say by all optical practices/businesses that have a direct relationship with patients.***

Can we publish your response?

**Yes**

Respondent 21

### **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

**Other**

If other, please specify:

**Optical Consultant**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**(b) Yes, (a) Yes**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***I would suggest a 6mth lag time in full implementation mainly for those wishing to be able to offer training and guidance for staff members affected.***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Neither agree nor disagree***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Strongly agree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q13. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q15. To what extent do you agree that the revised standards are clear?

**Strongly agree**

***Communication is vital to facilitate the correct interactions and responses from the patient. It is also impart a matter of choice for the patient to be able to proceed with the professional if they feel uncomfortable in the abilities of professionalism or indeed understanding of the patients situation.***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q17. To what extent do you agree that the revised standards are clear?

**Somewhat disagree**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly disagree**

***Further work would be required on the understanding and capacity by which this should be rolled out. Expecting professionals to be able to make a sound judgement would greatly depend on their individual understandings of Data an AI.***

Q19. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q21. To what extent do you agree that the addition to the business standard is clear?

**Strongly agree**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Strongly agree**

Q23. To what extent do you agree the revised standards are clear?

**Strongly disagree**

**With [REDACTED] and [REDACTED] the boundaries are still a blur on what is acceptable usage on social media. Certainly there are conflicting views in a professional environment. An enclosed system where images are controlled by email direct to a consultant is perhaps the only acceptable way.**

**The use of [REDACTED] or any social media platform via a mobile device (owned by the practice or not) is, without question, not acceptable under the conditions of GDPR. It is because it is mobile that is the issue.**

**Practices and Multiples have to accept that in order to facilitate the most stringent of controls in Px's data (including retinal imaging) then the Optical advisors use of a mobile phone to check the accuracy of an image cannot be allowed and further financial investment must be made to network all equipment so data can be viewed securely and be protected by the abundance of software protections on the premises and thus negate liabilities to the profession.**

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly disagree**

Q25. To what extent do you agree that the revised standards are clear?

**Strongly disagree**

**Does not go far enough.**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**Strongly disagree**

**The professional etiquette has been but almost lost [REDACTED]**

**There is no standard by which they have an understanding of how to present themselves and to be truly professional in the eyes of the patient. Their interactions are almost as if they are in the presence of a mate/friend/buddy rather than in a professional situation.**

**Some of this is why the consumer of our services does not feel at ease or takes the advice seriously. 2nd opinions seem to be rife more than they were 20yrs ago.**

***A clearer set of expectations on the "standards of etiquette" really must be laid down within the principles of the profession."***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

***A 'cut n paste' from the guidelines of the GMC is what is required here. Let them investigate the full legal framework of how it should be written to be adhered to .***

Q28. To what extent do you agree that the additional standard is clear?

***Somewhat agree***

Q29. To what extent do you agree that the revised standards are clear?

***Somewhat disagree***

***Self judgement by asking if you have any concerns is too ambiguous. Direct responsibility and inability to be able to facilitate the standard of Care would liable to cost the licence to practice.***

***It really an EITHER you CAN or CANNOT perform your duties.***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly disagree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

***Should state "If in doubt, STOP practicing immediately and seek medical advice"***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Strongly agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 22

### **General Questions**

Are you responding on behalf of an organisation?

**No**

Which category best describes you ?

**Other**

If other, please specify:

████████████████████

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Not sure**

***Students should have the same standards of behaviour and professionalism but it would be expected that they would have less experience and knowledge than fully qualified registrants. Therefore in some of the questions regarding choice, managing vulnerable patients and leadership one might expect a different standard compared with their fully qualified colleagues.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Not sure**

***Don't think so but would need to keep an open mind until consultation complete and different groups have commented on the proposed changes.***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**



Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

- (a) opportunities for persons to use the Welsh language, and
- (b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

- (a) opportunities for persons to use the Welsh language, and
- (b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**Yes**

***It might be worth considering expanding the responsibilities of professionals once they have captured data to be in a position to share it for patient benefit e.g. as part of a minimum data set.***

***More emphasis on the importance of full patient choice and ensuring all information presented and clear articulation of any preferred pathways.***

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No response**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Somewhat agree**

***More practical examples, particularly for where students might show leadership.***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**Somewhat disagree**

***I am not clear what demonstrating leadership skills relevant to their scope of practice would look like and what would it look like to fall below the standard.***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Somewhat agree**

***What would be the expected change of behaviour/process in this circumstance. What is the minimum expectation for training in management of vulnerable patients.***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Somewhat disagree**

***Not sure I see what the minimum expectation is.***

Q13. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat disagree**

**See above**

Q15. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat disagree**

***If an appliance is used there should be an expectation that the data can be adequately interpreted and that if this is not the case that this information will be shared fully with someone who can, so that the patient does not need a repeat investigation. If the investigation is required to aid diagnosis then this should not be chargeable to the patient.***

Q17. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***If an appliance is used there should be an expectation that the data can be adequately interpreted and that if this is not the case that this information will be shared fully with someone who can, so that the patient does not need a repeat investigation. If the investigation is required to aid diagnosis then this should not be chargeable to the patient.***

Q19. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***Needs to have more focus on expectations for delivering equality to the communities they serve. At the moment the focus appears to be mostly on interactions between colleagues.***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Somewhat agree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Somewhat agree***

***More expansion on what support should be available.***

Q23. To what extent do you agree the revised standards are clear?

***Strongly disagree***

***Given concerns raised by stakeholders I would welcome much more clarity here on what is acceptable practice. Social media, in my view, is not an acceptable forum to share patient information. Expansion on how patient consent would be documented and kept up to date.***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly disagree***

**See above.**

Q25. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**Strongly agree**

Q28. To what extent do you agree that the additional standard is clear?

**Strongly agree**

Q29. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

***Perhaps should also include, if another colleague has expressed concerns about your fitness to practice you should seek advice. At the moment the onus is on the professional having insight which is not always the case.***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**Somewhat agree**

***What is the definition of serious?***

Q32. To what extent do you agree that the additional standard is clear?

**Somewhat agree**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**Strongly agree**

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Strongly agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 23

### **General Questions**

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

#### ***Optical professional/representative body***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Not sure**

***It is understandable for the profession and the public to expect that any student or clinician is working under the same set of professional standards. It is right that there should be a close alignment of student standards as those standards for optometrists and dispensing. We understand that students on day 1 will be unaware of the standards and professional standards and that it will take time to assimilate this new information as part of their training.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010

**No response**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No response**

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**No response**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**No response**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No response**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No response**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Somewhat agree**

***We support the messaging of leadership, compliance with the law, and awareness of vulnerabilities. It would be helpful to understand how a practitioner will be measured against these principles as it is not quite clear how any complaints against a practitioner would fit within the Fitness to Practice framework.***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**Somewhat disagree**

***As per our response to question 9, it would be helpful to understand how a practitioner will be measured against these principles as it is not quite clear how any complaints against a practitioner would fit within the Fitness to Practice framework. We feel that more specific examples would support practitioners to understand the expectations of the professions.***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Somewhat disagree**

***Not all vulnerabilities are evident and not all persons are aware of/will convey their vulnerabilities. It would be worth providing this advice to registrants.***

***We believe that the standard should be the same for all patients and 'a patient's vulnerabilities should be considered as part of each consultation.***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Somewhat disagree***

***Not all vulnerabilities are evident and not all persons are aware of/will convey their vulnerabilities. It would be worth providing this advice to registrants.***

***We believe that the standard should be the same for all patients and 'a patient's vulnerabilities should be considered as part of each consultation.***

Q13. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***We believe that the amendments to the relevant standards are appropriate. As per our response to Q11 we believe that the standard 15.1 and 15.2 should be the same for all patients.***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q15. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q17. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q19. To what extent do you agree that the revised standards are clear?

***Somewhat agree***



**Standard 13.4. We would suggest that the words 'social media' are added so that this is made explicit for registrants.**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q21. To what extent do you agree that the addition to the business standard is clear?

**Somewhat disagree**

**We completely support the principle of support being provided to staff who have experienced discrimination, bullying or harassment. Depending on individual circumstances, the employee might not seek/want this support from their employer. We would suggest that the standard is amended so that the employee is aware of all support available (which may be external if preferred by the employee).**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Somewhat disagree**

**We completely support the principle of support being provided to staff who have experienced discrimination, bullying or harassment. Depending on individual circumstances, the employee might not seek/want this support from their employer. We would suggest that the standard is amended so that the employee is aware of all support available (which may be external if preferred by the employee).**

Q23. To what extent do you agree the revised standards are clear?

**Strongly disagree**

**This is a complex area which we feel requires further consideration and consultation in its own right. There are legal aspects which require consideration e.g. we read the amended standard as the registrant being required to obtain explicit consent to transfer as part of a referral. We would seek further clarification around the consent to share images.**

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly disagree**

**This is a complex area which we feel requires further consideration and consultation in its own right. There are legal aspects which require**

***consideration e.g. we read the amended standard as the registrant being required to obtain explicit consent to transfer as part of a referral. We would seek further clarification around the consent to share images. It is unclear from the standards as to what are the legal requirements versus the minimum expectations.***

Q25. To what extent do you agree that the revised standards are clear?

***Somewhat disagree***

***We would appreciate more detail in the wording around the proposed Standard 15 around acting in a 'sexual way'.***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***We would appreciate more detail in the wording around the proposed Standard 15 around acting in a 'sexual way'.***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

***Please see response to Q25***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

***We feel that the term 'serious communicable disease' could be interpreted differently by different people. We would welcome an addition to this sentence which includes reference to public health guidance around serious communicable diseases.***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Somewhat agree***

***We suggest the removal of the examples and for the standard to refer only to the legal requirements that apply in the professional capacity of the person.***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

**Yes**

Respondent 24

## General Questions

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

### **Optical professional/representative body**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***While all students are rightly expected to ensure the care and safety of their patients and the public and to uphold professional standards, all new statements, new standards and revised standards throughout should recognise the evolution of learning, development and acquisition of knowledge, skills and professional judgment over the period of students' training.***

***See our response to Q10.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

***Not sure***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Yes**

***See our response to Q16 - Standard 2.2.***

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**Yes**

***Standards of Practice for Optometrists and Dispensing Opticians: additional focus on education and leadership.***

***Whilst we welcome the mention of education as an example of leadership in the introduction, we feel that as regulated healthcare professionals, optometrists and dispensing opticians should be under a specific obligation to contribute to sharing good practice through education. We think it should be a standard, and accordingly be associated with specific obligations or a domain in CPD.***

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***We agree that there should be a short implementation period before the new standards come into effect and recommend it to be of a minimum of 8 months, as it was when the GOC last consulted on these standards in 2015; they came into effect 8 months (1 April 2016) after publication on 28 July 2015. This would give enough time for registrants, practice owners and businesses to adapt and adjust to the new standards, and to the optical sector bodies, including The [REDACTED], to review their resources and make the necessary amendments to practice, policy, guidance, and training materials.***

***We also recommend that the GOC delivers appropriate education and promotional activity to help registrants become familiar with the new standards before they come into effect.***

***In addition, we recommend aligning the implementation dates for the three sets of Standards, so they all come into effect once the revision of the Standards for optical businesses is completed. As mentioned by the GOC, business owners and employers have a role in creating a culture and environment in which registrants feel comfortable to “step up” and lead. They set standards of performance and create protocols to be followed within their practices by their***

**employees. Although optical businesses are required to support registrants to meet their professional requirements, registrants should not be expected to comply with new individual standards that would be different or stricter to those expected from optical businesses while the business standards are being updated. This would add a disproportionate burden for registrants and put them in a difficult position where they would be required by their employer to behave in one way while the GOC standards require them to behave in a different manner.**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Somewhat disagree**

**See our response to Q10.**

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**Somewhat disagree**

**Standards for Optical Students: Addition to the introduction on leadership. While we support the development of leadership skills for students, the College would recommend amending this statement as below:**

**“All registrants are expected to demonstrate emerging leadership skills, attributes and behaviours, relevant to their scope of practice”.**

**The Standards for Optical Students should set a realistic expectation for students and give trainees the scope to learn, develop and practice these skills throughout their student experience. As it currently stands, this statement implies that students would need to develop these leadership skills prior to the start of their study which sets an unrealistic expectation and does not ensure trainees will be able to develop and hone these skills throughout their student experience.**

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Somewhat disagree**

**Standards of Practice for Optometrists and Dispensing Opticians and Standards for Optical Students: Addition to the introduction on patient vulnerabilities.**

**We welcome the addition of this new statement as it will help reducing eye health inequalities. However, we recommend clarifying this statement as below:**

**“You must exercise particular care when providing services to patients who, due to their personal circumstances, are in need of special care, support or**

***protection or are at risk of abuse or neglect and make all reasonable attempts to accommodate the person's needs during the examination"***

***In addition, we recommend that the GOC should develop further guidance on vulnerabilities to help registrants identify patients who may be vulnerable. Since vulnerability is not restricted to ill health or disability, or have visible signs, registrants may struggle to identify those patients who may be vulnerable, for example because they are handling a difficult set of life circumstances, without any visible sign of their vulnerabilities.***

***We suggest using the following introductory text as a footnote under Standard 7.1 (6.1):***

***"Patients may be vulnerable for a range of reasons, including physical or mental health conditions, capability in managing their health, or handling a difficult set of life events. Levels of vulnerability may vary between contexts, and change over time, so a patient's vulnerabilities should be considered as part of each consultation."***

***Standards for Optical Businesses:***

***We recommend that the GOC ensures patients' vulnerabilities are also considered when revising the standards for optical businesses, as they have a greater role to play in supporting registrants to accommodate patients' needs during the examination."***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Somewhat disagree***

***See our response to Q11.***

Q13. To what extent do you agree that the revised standards are clear?

***Somewhat disagree***

***"Standards of Practice for Optometrists and Dispensing Opticians and Standards for Optical Students:***

***1. Standard 7.1 (6.1)***

***See our response to Q11. We recommend adding the following sentences from the introductory text as a footnote to clarify what vulnerabilities are:***

***"Patients may be vulnerable for a range of reasons, including physical or mental health conditions, capability in managing their health, or handling a difficult set of life events. Levels of vulnerability may vary between contexts,***

***and change over time, so a patient's vulnerabilities should be considered as part of each consultation."***

**2. Standard 13.8 (12.6), Standard 15.1 (14.1) and Standard 15.2 (14.2)The wording "vulnerable circumstances" is unclear. There cannot be vulnerable circumstances, but certain circumstances can make a person vulnerable.**

***We recommend amending Standard 13.8 (12.6) as below:***

***Consider and respond to the needs of patients with a disability or who may be considered vulnerable. and patients in vulnerable circumstances and make reasonable adjustments to your practice to accommodate these and improve access to optical care.***

***We recommend amending Standard 15.1 (14.1) as below:***

***"Maintain appropriate boundaries with your patients, students, colleagues and others with whom you have a professional relationship and take special care when dealing with people who may be considered vulnerable in vulnerable circumstances. Maintaining appropriate boundaries applies to your behaviours, actions, and communications"***

***We recommend amending Standard 15.2 (14.2) as below:***

***"Never abuse your professional position to exploit or unduly influence your patients or the public, whether politically, financially, sexually or by other means which serve your own interest. Take particular care when dealing with people in vulnerable circumstances who may be considered vulnerable."***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***See our responses to Q11, Q12 and Q13.***

Q15. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***Standards of Practice for Optometrists and Dispensing Opticians:***

***•Standard 2.5, Standard 3.1.4, Standard 6.4 (6.3). Standards for Optical Students: Standard 5.3***

***For all of the above standards, we support the GOC's proposed revision but would suggest including a definition of "appliances" for clarity as the Optician Act refers to "optical appliances".***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?



**Strongly disagree**

**"Standards of Practice for Optometrists and Dispensing Opticians and Standards for Optical Students:**

**1. Standard 2.2**

**We support the proposed revision as it is aligned with the longstanding 'Hello, my name is' campaign, which has a strong track history of improving compassionate care delivery through the use of an introduction at the start of every clinical interaction.**

**However, this revised standard has the potential to result in some unintended consequences. Service users may decline to be seen by a student or a non-registrant, making delegating some tasks more difficult and possibly creating tensions between service users and support staff. Staff on the front line are increasingly subject to verbal abuse from service users and this proposed revision may contribute to a further increase in verbal abuse for trainees and non-registrants. Employers and all practice staff need additional support and signposting to help manage and respond to any such abuse or discrimination.**

**2. Standard 7.6 (6.6)**

**We recommend amending this standard as below**

**"Only provide or recommend examinations, treatments, drugs or appliances if these are clinically justified and in the best interests of the patient. Give patients information about all the options available to them, including declining further choosing the option of no treatment or intervention, in a way they can understand."**

**As part of the consent process for any treatment, the clinician should provide service users with the option of choosing no treatment or intervention and provide sufficient information about the outcomes and material risk of no treatment or intervention to support a service user make an informed decision.**

**Supporting people to consider the "option of no treatment or intervention" implies maintaining an ongoing professional relationship between the service user and clinician working in partnership to deliver evidence-based patient centred care. Using the wording "declining" may imply a termination of this professional relationship."**

Q17. To what extent do you agree that the revised standards are clear?

**Somewhat disagree**

**See our response to Q18.**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat disagree**

**"Standards of Practice for Optometrists and Dispensing Opticians and Standards for Optical Students:**

**1.New sub-standard under standard 7 (6)**

**We recommend amending this sub-standard as below for clarification:**

**"Be aware of the limitations of digital technologies and apply your professional judgement when utilising data generated by digital technologies to inform decision- making."**

Q19. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q21. To what extent do you agree that the addition to the business standard is clear?

**Somewhat disagree**

**See our response to Q22.**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Somewhat disagree**

**"Standard for Optical Business**

**1.New sub-standard under 3.3.**

**While we welcome this new proposed standard requiring optical businesses to provide support for staff who have experienced discrimination, bullying and/or harassment in the workplace, we recommend that this standard requires optical businesses to have clear policies in place, and ensure that staff know what they are and where to find them. All staff should have clear information on how to raise a concern and/or make a complaint if needed as well as what's expected of them in terms of their own behaviour."**

Q23. To what extent do you agree the revised standards are clear?

**Strongly disagree**

**"Standards of Practice for Optometrists and Dispensing Opticians and Standards for Optical Students:**

**1. Standard 14.3 (13.2) The proposed change to this standard may result in registrants believing it is acceptable to share medical information online and on social media without the patient's explicit consent, even if the identifiable information has apparently been removed. This includes special category data, which is unique and could be processed to become biometric in future, such as retinal and iris images. As highlighted in a recently published review by Nakayama et al [1], retinal scans are considered personal data under GDPR because they can lead to either direct or indirect identification of an individual. Although not currently possible, it is highly likely that in future an individual can be identified via a retinal scan as large datasets of retinal images linked to personal information become more available through the development of AI and other machine learning systems.**

**Nakayama et al recommend that explicit patient consent is "a valid solution to data collection and secondary use for medical, scientific, and educational purposes". In addition, they recommend data sharing, including retinal scans, should only be performed in a "trusted research environment where there are data use agreements and credentialing of researchers, including requirements of responsible data use training" to reduce the risk of data reidentification.**

**We believe the policy intention (as set out in paragraph 94 of the GOC consultation document) is that consent must be specific and valid when sharing patient data with others, but this is not clear.**

**The standard conflates the consent that a member of the public may give to registrants to provide direct patient care, or to share via agreed local pathways for advice and guidance or referral, with consent for clinicians to share medical images for various other reasons, including education, reflective practice, research or even curiosity (i.e. sharing an "interesting" case) on social media.**

**We agree that written consent is not required to obtain and share images for the purpose of providing clinical care, or in order to use the images for quality or governance purposes, such as clinical audit or when sharing images via NHS.net (<https://portal.nhs.net/>) from one registered clinician to another.**

**However, as set out in our Guidance for Professional Practice (<https://www.college-optometrists.org/clinical-guidance/guidance/communication,-partnership-and-teamwork/social-media-and-online-behaviour#Aboutsocialmedia>) and clinical file on sharing ophthalmic imaging on forums (<https://www.college-optometrists.org/clinical-guidance/clinical-files/march-2021-case-on-sharing-ophthalmic-imaging-on-f>), we recommend registrants ensure they have gained written, informed and explicit patient consent before sharing anonymised images online, via social media or in a professional forum, be that for education, marketing, or to share for reflective practice, even if it is on a site for practitioners and is not accessible to the public. This would protect them from future claims of a breach of patient confidentiality where anonymised images could become identifiable due to their unique nature or processed in a way that was not originally intended.**

**We recognise that online professional communities are an increasingly common and valuable way to participate in reflective practice and develop clinical decision-making skills. As people are increasingly using online forums, including [REDACTED] groups that are not public, to communicate and share clinical matters, we have created a consent form template (PDF) that registrants can use in practice.**

**We recommend amending standard 14.3 (13.2) as below to set clearer expectations of registrants in this area by ensuring that an image can only be shared if it is both anonymised and specific, written and informed consent has been given:**

**“Maintain confidentiality when communicating publicly, including speaking to or writing in the media, when writing and sharing images online, including on social media. Ensure appropriate and explicit consent has been given before sharing images online or on social media.”**

**Standard 3.3 on consent refers especially to the examination or treatment when sharing patient data, whereas standard 14.3 (13.2) is much broader and not limited to this. This is why explicit consent should be sought and needs to be specifically mentioned in standard 14.3 (13.2), as acknowledged by the GOC in paragraph 94 of the consultation document.**

**Furthermore, image sharing on social media is governed by GDPR and the law on consent.**

#### **References:**

**1. Luis Filipe Nakayama et al., Retinal Scans and Data Sharing: The Privacy and Scientific Development Equilibrium, Mayo Clinic Proceedings: Digital Health, Volume 1, Issue 2, 2023, Pages 67-74, ISSN 2949-7612, <https://doi.org/10.1016/j.mcpdig.2023.02.003>**

#### **Other useful sources:**

- The College of Optometrists, Clinical files. March 2021: Case on sharing ophthalmic imaging on forums - College of Optometrists ([college-optometrists.org](https://college-optometrists.org))**
- The College of Optometrists, Guidance for Professional Practice. Social media and online behaviour - College of Optometrists ([college-optometrists.org](https://college-optometrists.org))**
- Dr Carol Chu, Medico-legal - Sharing medical images, GPonline, 6 December 2013. <https://www.gponline.com/medico-legal-sharing-medical-images/article/1223633>**
- Information Commissioner’s Office (ICO), Biometrics: insight, 26 October**

2022, Version 1.0 <https://ico.org.uk/media/about-the-ico/documents/4021972/biometrics-insight-report.pdf>

•ICO, *Guidance on special category data*, 9 April 2024. *What is special category data?* | ICO

•Segal, J.P., Hansen, R. *Medical images, social media and consent*. *Nat Rev Gastroenterol Hepatol* 18, 517–518 (2021) <https://doi.org/10.1038/s41575-021-00453-1>

•The Society and College of Radiographers, *Guidance for the radiography workforce on the professional use of Social Media some\_guidelines\_finalv5\_1.pdf\_1* (sor.org)

•The Society of Radiographers (SoR), *The dangers of using medical images on social media*, 13 July 2020. *The dangers of using medical images on social media*. SoR

•Rahmani, G. (2023), *Sharing images on social media without patient consent*. *J Med Imaging Radiat Oncol*, 67: 653-655. <https://doi.org/10.1111/1754-9485.13582>

2. Standard 16.6 (15.6) *The College of Optometrists fully support this revised standard; however, we are of the opinion that this standard could be reinforced by adding a reference to the relevant Advertising Standards Authority (ASA) guidance in the new statement on legal requirements added to the introductory wording.*

### 3. Standard 3.3

*The College of Optometrists recommends clarifying this standard as below:*

*“Ensure that the patient's consent remains valid at each stage of the examination, or treatment or subsequent use or processing of the patient's data. For example, when sharing patient data with others for invasive procedures, post examination analysis and during any research in which they are participating.”*

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly disagree**

**See our response to Q23.**

Q25. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

**"Standards of Practice for Optometrists and Dispensing Opticians and**

**Standards for  
Optical Students:**

**1. Standard 15.1 (14.1)**

***We support this revised standard and recommend that the GOC develops further guidance on maintaining appropriate boundaries. As acknowledged by the GOC in paragraph 109 of the consultation document, some registrants are already in relationships with their colleagues or others with whom they have a professional relationship, which may make this standard more challenging to implement and scrutinise in some instances.***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***See our response to Q25.***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

***We welcome the inclusion of this standard. All forms of sexual misconduct, including all forms of sexual harassment, are unacceptable. All forms of alleged harassment must be taken seriously, and complaints should be investigated and acted on swiftly, with a clear message that this behaviour will not be tolerated.***

***The College of Optometrists has published various resources to support registrants who may be harassed by a patient or colleague, or who may be aware of sexual misconduct of a patient or colleague. These includes:***

***•The College of Optometrists, Guidance for Professional Practice. Maintaining boundaries - College of Optometrists (college-optometrists.org))***

***•Abi Millar, Don't put up with pests, 2022. Don't put up with pests - College of Optometrists (college-optometrists.org)***

***•The College of Optometrists, Clinical file on bullying and harassment in the workplace, August 2023. August 2023: Case on bullying and harassment in the workplace - College of Optometrists (college-optometrists.org)***

***•The College of Optometrists, Podcast on dealing with bullying and harassment in the workplace, January 2024. Dealing with bullying and harassment in the workplace - College of Optometrists (college-optometrists.org)***

***In addition, as mentioned in our response to Q22, we recommend that optical businesses and practice owners have clear policies in place, and make sure that staff know what they are and where to find them. Practice owners and managers have an important role to play to create the right working environment and reinforce the message regarding what is and is not acceptable. Organisations must have a culture that promotes dignity and respect for all at work and takes a zero-tolerance approach against any form of inappropriate behaviour.***

Q28. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

***We recommend adding a statement in the introductory text of the Standards of Practice for Optometrists and Dispensing Opticians, and the Standards for Optical Students to set out the GOC's interpretation of 'acting in a sexual way'***

***The statement will make clear that all registrants are expected to maintain proper professional boundaries with patients, students and others. 'Acting in a sexual way' can include – but is not limited to – verbal or written comments, displaying or sharing images, as well as unwelcome physical contact.***

***We recommend adding examples of unacceptable sexual behaviours as listed in the GMC Guidance on Maintaining personal and professional boundaries (maintaining-personal-and-professional-boundaries-final-version\_pdf-105395766.pdf (gmc- uk.org)).***

Q29. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly disagree***

***See our response to Q32.***

Q32. To what extent do you agree that the additional standard is clear?

***Strongly disagree***

***While we acknowledge that the GOC has not defined 'serious communicable disease' as this could change in response to emerging public health diseases, the lack of any definition may leave some ambiguity for registrants.***

**We recommend using the term ‘high consequence infectious diseases’ as defined and set out by the UKHSA (High consequence infectious diseases (HCID) - GOV.UK (www.gov.uk)).**

**The GMC guidance on Good medical practice (good-medical-practice-2024---english-102607294.pdf (gmc-uk.org) ) uses the term ‘serious communicable diseases’ in relation to immunisation, and the term ‘serious condition that you can pass onto patients’ in terms of seeking independent professional advice about registrants’ ability to work. As such it is confusing for registrants that the GOC is using the term ‘serious communicable diseases’, with a different meaning and policy intention to how the GMC have used the very same term.**

**COVID and influenza are prevalent conditions which many registrants will be affected by each year, however none of these are listed by the UKHSA as a high consequence infectious disease. NB. COVID was removed from the list in 2023.**

**In addition, we recommend updating the relevant Standards for Optical Businesses, as occupational health responsibilities of employers and services users sit with each individual member of staff and the organisation. An undue burden would be placed on individual registrants without a commensurate change to the Standards for Optical Businesses.**

**We recommend including supporting guidance, examples and case studies to help registrants understand this new standard and determine what may and may not be included in the ‘serious communicable disease’ category."**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**Somewhat disagree**

**See our response to Q34.**

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

**Somewhat disagree**

**Standards of Practice for Optometrists and Dispensing Opticians and Standards for Optical Students:**

**1.Addition to the introduction on legal requirement.**

**While we understand the list of legal requirements is not exhaustive, we recommend adding to this list as a minimum the following examples of legal requirements that specifically applies to clinicians’ professional practice:**

- The Human Medicines Regulations 2012**
- Advertising Standards Authority codes of practice**



***Health and Safety legal requirements are very important and affect all businesses and employees, whether they are registrants or not, while the two examples provided above specifically apply to clinicians and therefore may be more relevant.***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

***No further comment.***

Can we publish your response?

**Yes**

Respondent 25

## **General Questions**

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

***Optical professional/representative body***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

***I have answered this question on the assumption the standards for students will remain as a separate document.***

***If student registration is to remain, they should be treated the same. The caveat here is that the GOC considers the differing scope of practice.***

***Students need to adhere to the expected behaviours etc of a healthcare professional***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**No**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Yes, (b) Yes**

***The recognition of Welsh language standards by the regulator is a positive effect.***

***The number of Welsh speaking optometrists is small compared to the overall population. There is also a paucity of Welsh speaking academics.***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

- (a) opportunities for persons to use the Welsh language, and
- (b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

- Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:
- (a) opportunities for persons to use the Welsh language, and
  - (b) treating the Welsh language no less favourably than the English language?

**(a) Not sure, (b) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***Registrants should already be adhering to the revised standards. These are not radical changes.***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat agree***

***Leadership can be hard to demonstrate with students or newly qualified registrants, because of the working environment.***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Neither agree nor disagree***

***See above***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Strongly agree**

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Strongly agree**

Q13. To what extent do you agree that the revised standards are clear?

**Strongly agree**

***Vulnerability is variable and patient specific, this is articulated clearly. Additional guidance, with examples, may be useful.***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q15. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q17. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q19. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q21. To what extent do you agree that the addition to the business standard is clear?

**Somewhat agree**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Somewhat agree**

Q23. To what extent do you agree the revised standards are clear?

**Somewhat agree**

***It may be worth clarifying use of shared 'chat' groups as well as social media. It may also be prudent to include how data might be shared in 3.3. Px may assume it is only via their patient record.***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q25. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**Strongly agree**

Q28. To what extent do you agree that the additional standard is clear?

**Somewhat agree**

***Sadly this is an inclusion that is needed.***

Q29. To what extent do you agree that the revised standards are clear?

**Somewhat disagree**

***The standards need to be clearer. In some cases people may not be aware that they pose a risk and should heed the advice of a suitably qualified professional.***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

***There needs to be clearer guidance regarding medical fitness to practice as well as medical fitness to train for students, e.g., Students are suffering significant mental health crises or requesting significant adjustments to study and there is no clear guidance from the regulator***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat agree***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Somewhat agree***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Somewhat agree***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 26

## **General Questions**

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

***Optical professional/representative body***

If you have read the consultation document you may wish to skip to section three.

***Skip to section three***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***On a fundamental level, the standards harbour an assumption that student registrants understand what it means to be “professional”. Grasping the concept of being a professional is often only afforded following a level of lived experience in working for an organisation or in operating a direct business. As such, we are concerned that the student registrants may be set up to fail around the “Your Role as a Professional” section. We suggest that a softening of the language be used in the students’ standards to better reflect the role of supervisors in terms of their essential mentorship in the initial stages of training.***

***Additionally, we wish to note that many other regulators do not have students as registrants at all. While it can and does provide an advantage for a small number of students when FTP issues arise, we feel that this should be kept open for wider debate. Especially considering that optometry is a comparatively low-risk health profession.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Yes**

***As explained in greater detail in our subsequent responses, we welcome the move by the GOC in more overtly harnessing the standards to help arm the profession in recognising and treating patients with protected characteristics. However, we have noted a few suggested enhancements/tweaks.***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Not sure**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**No response**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**No**

***Our general opinion is that most of the proposed revisions to the existing standards are uncontentious. They mainly serve as a welcome culturally sensitive update to both patient needs, and to wider principles of Equality, Diversity and Inclusion (EDI). There is a clear enhancement of a professionals' duty to care for more vulnerable patients and to ensure that mode of practice is accessible to all who need it.***

***Further comment on small suggestions to definitions, clarity of wording and finer detail of interpretation are featured in the subsequent sections of this survey.***

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Not sure**

If you consider a short implementation period is necessary, please say how long this should be for, and why.



***As most revisions are light touch enough that they do not require any substantial systemic adjustments, we are not certain that an implementation period is necessary. Perhaps rather than a formal implementation period, you could publish the revised standards, and schedule them to take effect three months following that date?***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat agree***

***As a principle, there is no quibble with embedding the concept of leadership into everyday practice, but there is potential for ambiguity without clear elaboration on the traits and attributes of leadership. See our response to Q1 which outlays our concerns around the expectation of students to adhere to the same standards around professionalism and leadership. We would urge that specific learning outcomes around the whole concept of professionalism are prioritised for students, and that some advance provision is made for standards that are relevant to the introduction of the Clinical Learning in Practice (CLiP) scheme.***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat agree***

***See answer to Q9, the behavioural traits around leadership may need to be more explicitly conveyed.***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Somewhat agree***

***We feel that the changes are a positive step towards being more inclusive for patients who may need extra care - ensuring that optometry is accessible to all. Further, the proposals offer clearer guidance for how to operate humanely and safely within the confines of the Equality Act.***

***The GOC taking these positive steps to protect registrants in accommodating all their patients, whatever their needs, is welcome. However, the concept of vulnerability as it relates to humans is often subjective (except maybe in more extreme circumstances). People may not identify with other people's opinions on their own level of vulnerability, either to the positive or the negative and this may cause a practitioner to inadvertently cause offence. For example, the professional assuming a person is vulnerable and acting accordingly when they do not view themselves as such.***

***Potentially, there is some degree of ambiguity for practitioners that could arise with the prevalence of the term "vulnerable" which is used throughout the***

**revised standards. The Office for Health Improvements and Disparities (OHID), defines the term ‘vulnerable’ as being ‘in need of special care, support, or protection because of age, disability, risk of abuse or neglect.’ However, there are further definitions dependent on whether a patient is a child or an adult as well as risk of vulnerability.**

**(<https://www.gov.uk/government/organisations/office-for-health-improvement-and-disparities>)**

**When considering protected characteristics and unconscious bias, this potential for assumptions could be litigiously dangerous. We appreciate that the standards do try to spell out what is meant by “vulnerable” and who could potentially fall into that category, but this could be strengthened by directly referencing standard 13.2. Further, we suggest offering more training for practitioners to build their confidence in recognising patients who are considered vulnerable. Also, an additional line to the newly suggested standard on adherence to legal responsibility that includes the protected characteristics of the Equality Act could be helpful for even more clarity.**

**In this same context, while the standard itself is not up for express review - we do have some concerns around the second sentence in standard 13.3 “Ensure that your own religious, moral, political or personal beliefs and values do not prejudice patients’ care. If these prevent you from providing a service, ensure that you refer patients to other appropriate providers”. As written, this standard suggests that prejudice is acceptable as long as the practitioner recommends an alternative practitioner – contravening the core EDI ethos. As in other areas of the proposed revisions, we would urge guidance for registrants in this area to provide clarity.**

**Lastly, for standard 7.1, the term “adequate assessment” is open to differing interpretation and should be elaborated on in guidance materials.**

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Somewhat agree**

Q13. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q15. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q17. To what extent do you agree that the revised standards are clear?

**Neither agree nor disagree**

***As you state, the substantive changes will be addressed in the forthcoming review of the Business Standards – so it is difficult to respond to the adequacy of these standards for the individual when the use and implementation will in many regards be made at a head office level.***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Neither agree nor disagree**

***The use and implementation of digital technologies will in many instances be taken at a head office level and will therefore be outside of the control of individual registrants. However, where new technology is implemented, we think it is reasonable to expect registrants to maintain their competence by undertaking targeted training when it is appropriate to do so.***

***More widely, there are still significant basic connectivity challenges within the sector and the use of advice and guidance, either with a person, or an AI is hamstrung by these limitations. Although it cannot sit within the standards, it is our view that all registrants should have access to real-time information and be able to communicate easily and effectively with other eye care providers. Without NHS email addresses or electronic referral systems in place across all areas of the UK, many optometrists must rely on bespoke local arrangements and relationships to be able to communicate effectively for the patient's benefit. This lack of standardisation introduces unnecessary variation and risk.***

***Additionally, the duty to discuss and explain the implications of digital technologies may not be realistic as their fast pace of progress can be difficult to keep track of. To illustrate, in the GOC engagement sessions we spoke of the challenge of the black box, where technology and algorithms that underpin it may be beyond challenge for normal clinicians. We note the GOC reference to digital technologies as medical devices but reiterate our concerns in this regard.***

***We would suggest that to attempt to tackle this, consideration should be given to guidance or learning and support hubs to aid busy clinicians in this time of significant change.***

Q19. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q21. To what extent do you agree that the addition to the business standard is clear?

**Strongly agree**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Strongly agree**

Q23. To what extent do you agree the revised standards are clear?

**Somewhat disagree**

***The standard as drafted could lead to confusion, as it appears to conflate the consent process and the data sharing process. Generally, within healthcare, processing of patient data will be conducted under the remit of “legitimate interest” or as special category data with regard to health and social care or public health. It is our view that if this standard is to include data-sharing then it should make it clear that consent only applies when you wish to share the data for reasons other than in relation to the patient’s care. It should also only apply where data is defined as personal data, and we would draw attention to the ICO definition in that regard.***

***We agree that patient confidentiality must be maintained when sharing patient images online or via social media and welcome the suggestion of further GOC guidance to help registrants understand what is safe.***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

***With the clarifications as suggested above and with subsequent GOC guidance, the appropriate expectations of registrants will be better understood.***

Q25. To what extent do you agree that the revised standards are clear?

**Strongly agree**

***All of these boundaries should be inherently understood by the basic practice of being a “professional”, but the more explicit additions to the standards remove any scope for grey areas and are welcomed.***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**Strongly agree**

***The inclusion of such a standard could offer a better mechanism of protection for victims of sexual harassment or abuse, no matter what form it presents itself.***

Q28. To what extent do you agree that the additional standard is clear?

**Somewhat disagree**

***The wording of the new standard is not particularly clear, and we would urge that the GOC mirror the existing UK legal definitions of sexual harassment. Again, the suggestion of GOC guidance on this potentially fraught area is welcomed.***

Q29. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

***The additional patient focus is welcome and clear.***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**Neither agree nor disagree**

***While the necessity for more plainly stated measures in a post-COVID world is understandable, the inclusion of this standard feels arguably superfluous for individual registrants. These measures should be basic common sense, be a part of wider public health measures, or the responsibility for optical businesses to enforce. The forthcoming substantial review of GOC Business Standards would be the more sensible place to fully address this.***

Q32. To what extent do you agree that the additional standard is clear?

**No response**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**Somewhat agree**

**Considering the added focus of EDI matters on this review of the standards, we feel that specific mention of the legal requirements from the Equality Act (protected characteristics) would help to protect registrants further.**

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

**Somewhat agree**

**see answer above**

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**One area where we harbour mild concern is with how this revision of the standards will apply as the CLiP scheme is implemented over the coming months. Will the standards be flexible enough to evolve with the scheme, or is the intention to conduct a greater overhaul as the new education requirements bed in? Will those people who are undertaking their training through CLiP be measured against a standard that is appropriate to the stage of their training?**

**As training and experience will be staggered and vary between universities, we must be sure that the student standards will be suitable for the new mix of training. If a practice were to take students from two separate universities where the training differs, how will variations in knowledge be assessed against the standards? Currently pre-reg students have all completed an optometry degree before they see patients, but the new system will introduce a level of variation on acquired knowledge, and it will be important to manage expectations and be sure that all students are protected and guided by the standards.**

Can we publish your response?

**Yes**

Respondent 27

## General Questions

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

### **Optical professional/representative body**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***The GOC is clear that student registrants must “use your own professional judgement, with the support of your training provider or supervisor, to determine how to achieve these standards”. They also add in the standards for optical students “As you become more competent and experienced you will be required to take on increased responsibility for your decisions and professional judgements.***

***Professional judgment is a crucial aspect of eyecare, particularly for those registrants caring for patients with complex or nuanced requirements. It is something that is developed over time through experience, exposure to various clinical and non-clinical situations, personal and professional maturity and ongoing learning.***

***For students or those early in their careers, it's vital to recognize that they won't have the same depth of experience or “professional judgement” as someone involved in the profession for decades. That's why mentorship, guidance, and structured learning opportunities are so important during the early stages of an optometrist or dispensing optician's career. It is only through learning experience (which is a big focus on education programmes under the ETR) that students can begin to build and form their professional judgment, under the guidance of fellow registrants and other members of the wider practice team.***

***It is important for organisations, businesses and our regulatory body to recognise this developmental stage. There should be an expectation to provide appropriate support and resources as well as to apply the standards of practice in a way that takes into account the registrant's experience and their progression with developing the necessary expertise and judgment to practice independently and be accountable for their decisions. Therefore, it is important to make allowances for registrants at different stages of their professional development and our expectations of how students, new graduates and established registrants meet, adhere to, and interpret the standards, should reflect this.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Not sure**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Yes**

**The opportunities for our Welsh-speaking members and their patients will be welcomed.**

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Yes**

***The opportunities for our Welsh-speaking members and their patients will be welcomed.***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**Yes**

***There needs to be clearer guidance to show what student decisions fall under the supervisor's responsibility and what do not- this is especially pertinent to the intended guidance regarding social media guidelines. It would be helpful when making reference/alignment to the learning outcomes that the SPOKE guidance on supervision is also linked at this point.***



Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

If you consider a short implementation period is necessary, please say how long this should be for, and why.

***It would seem perfectly reasonable to allow a period of time, three months minimum, to allow students, practitioners, employers, businesses, professional bodies etc to reflect and review any changes and to deliver updated advice, guidance, training and support. We would also suggest the GOC consider producing a mandatory CPD piece to support any changes. This would be possible by the GOC instigating the speciality domain that has been used previously.***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Somewhat disagree**

***We feel there is more work to be done on defining leadership, leadership behaviours and leadership/emerging leadership skills within a practice before we add any new statement to the introductory wording. We have concerns that students/newly qualified registrants will not have the necessary experience to understand the nuances of leadership in this context and whether their position and experience within in practice will allow this to take place in conjunction with the more established view of leaders/practice owners within an optical business who may not support a “multiple leadership” model in their practices.***

***There also needs to be recognition that there may not have been an opportunity for leadership training and therefore skills may not be in place. Whilst recognising that there is a complete section on leadership in the new “learning outcomes” we have concerns regarding registrants who have previously qualified and not had the opportunity to receive this training.***

***Leadership has not been well defined within the consultation documents beyond an ambition for registrants to “demonstrate leadership skills” and this may need to be looked at in relation to the new outcomes for registration and how these will include leadership training as well as newly qualified registrants graduating on the old syllabus and model.***

***We are concerned that there has not been recognition that with leadership comes responsibilities and accountabilities that may well be outside of the skill set (and employment contract) of the registrants involved and this could lead to unforeseen challenges in practices.***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**Strongly disagree**

***The consultation has not provided enough evidence of how this would work within a practice nor in our view considered the potential implications or consequences of what appears to be a broad ambition for registrant behaviour. We are also concerned that the standard will seek to redefine “leadership” as traditionally viewed in practice and will create confusion to other team members in regard to accountability etc. The consultation documents do not make a clear distinction between “clinical leadership” and established “commercial leadership” and these risk causing confusion for practice teams.***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Somewhat disagree**

***We do not feel the introductory wording delivers an “interpretation of ‘vulnerability’” as advised in the consultation document albeit we welcome and agree that it is right to flag that vulnerable patients may require extra care in practice. However identifying vulnerable patients, understanding their perception of their vulnerability and taking this into account, raises a degree of challenge. Registrants do not necessarily receive adequate training in this area and therefore if we are suggesting this new introduction, opportunities for training need to be provided.***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Neither agree nor disagree**

***Without a clearer interpretation of “vulnerability” from the GOC perspective, it is difficult to comment here.***

***However there needs to be recognition around the limits of registrants abilities: “it is vital that they can identify, support and treat these patients appropriately” relies heavily on a registrants skill in recognizing vulnerabilities/vulnerable circumstances if they are not shared by the patient/patients carer.***

***Often there is a presumption by patients that registrants have access to data that they do not, such as GP or hospital eye service records and therefore they (patients and carers) presume a level of knowledge of their vulnerabilities/vulnerable circumstances that does not necessarily exist.***

Q13. To what extent do you agree that the revised standards are clear?

**Somewhat disagree**

**See above comments in reply to Q12- we do feel these revised standards are very open to interpretation and are not overly clear.**

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat disagree**

**Please see our response to Q12- It is difficult to set a minimum standard without more detailed guidance.**

Q15. To what extent do you agree that the revised standards are clear?

**Somewhat disagree**

**Regarding Standard 2.2 and Standard 4.2 we agree with the suggested revisions. However in regard to Standard 7.6 we are concerned that the obligation to “Give patients information about all the options available to them...” may place an unreasonable burden on registrants and perhaps would be better worded as “Give patients information about relevant options available to them without prejudice”.**

**We are also concerned that there is a suggestion (Point 48) that these options include communication around “clinical outcomes” for “non-eye related diseases”. It may be that we are introducing a key principle which embraces factors that fall outside many registrant's scope of practice.**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat disagree**

**See earlier comment to Q15 regarding Standard 7.6**

Q17. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

**This seems a logical update to the standards however it will be the businesses and their interpretation which will possibly have more effect on individual registrants and therefore it is difficult to comment until the consequential changes to the business standards have been agreed.**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

***These seem logical updates to the standards however see response to Q17.***

Q19. To what extent do you agree that the revised standards are clear?

***Somewhat disagree***

***Please see detailed response to Q21***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***Please see detailed response to Q21***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Somewhat disagree***

***Whilst welcoming the GOC's recognition of the findings from the 2023 registrant survey, we are concerned that the standard is too "high level" to have a meaningful impact for registrants. We suggest the standard is amended to specifically include "internal and/or external support for staff who have experienced bullying etc.." to address the fact that the issue may well be within the optical business itself and staff have a right to seek external support and guidance.***

***Including such provisions would not only demonstrate a commitment to the well-being of all of the practice team but also provide a tangible framework for businesses to work towards in supporting their employees. Recognising that workplace issues can arise internally and that staff should have a right to seek external support is crucial for creating a safe and supportive working environment.***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Somewhat disagree***

***Please see the response to Q21.***

Q23. To what extent do you agree the revised standards are clear?

***Somewhat disagree***

***These revisions are somewhat confusing- in regard to Standard 3.3 it may be more appropriate to state "obtain patients permission" rather than "consent" however this must align with individual employers' policies on obtaining consent and permission to share data. We are not sure that the changes as suggested would add sufficient clarity to a registrant's understanding around***

***this issue at the present time nor offer any useful guidance that may future-proof dealing with technology changes that may arise in the future.***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***These suggested changes highlight/reinforce ambiguity around consent and its definition when used in a practice setting. This is an issue that needs clearer guidance.***

***We have received feedback from members questioning the approach that may be taken in regard to social media posts made prior to someone joining the register and would welcome clarification.***

Q25. To what extent do you agree that the revised standards are clear?

***Somewhat disagree***

***Whilst welcoming the update to (15.1)( 14.1) we do find the wording around “effect” and “purpose” odd in the way it is used, as it seems to add a limitation to the standard which is probably unintended.***

***We feel that the standard should also recognise that work colleagues do have personal relationships that, whilst mutually acceptable and appropriate, may exceed the normal boundaries registrants would have with patients, students and others with whom they have professional (not personal) relationships. This would apply to behaviours, actions and communications.***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***See above comment on Q25.***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Somewhat agree***

***See suggested rewording below***

Q28. To what extent do you agree that the additional standard is clear?

***Somewhat agree***

***The wording in this new standard could be clearer.***

***The phrase “you must not act in a sexual way” is confusing and ill defined. We suggest that “act in a sexualised manner towards patients” is simpler to understand.***

***Also (as per our response to q25) the inclusion of the wording “with the effect or purpose of” etc seems odd as surely we would not expect this behaviour whatever the effect or purpose?***

***Therefore, we would suggest rewording this new standard to: “You must not act in a sexualised manner towards patients, students, colleagues, or others with whom you have a professional relationship. Maintaining sexual boundaries applies to your behaviours, actions and communications.”***

Q29. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***This seems a sensible addition to the standards. Regarding the student standard 10.3 we suggest inclusion of “employer/training provider” rather than just “training provider”.***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Somewhat disagree***

***It would seem a sensible inclusion to suggest that registrants follow their nation's public health advice rather than introduce another additional standard.***

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

***See Q31 response***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Somewhat agree***

***As per responses to previous questions it would be useful to have clearer guidance on how this will work in a practice setting including any effect on the wider workforce (non-clinical).***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

**Somewhat agree**

***It seems appropriate to expect registrants to comply, where appropriate, with the legal requirements of any contract etc the practice they are based in holds.***

***However, we should recognise that it is the contractor who has the ultimate responsibility to deliver the terms of any contract and registrants should not be held accountable where delivery of aspects of the service are beyond their control.***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

***Yes. Supervision and delegation- you have (Point 66) noted that registrants would like further clarity on the interpretation of "in a position to intervene". You have further noted in Point 68 that you have received queries on this issue which "suggest that there is an increased interest in this area". However, in point 74 you state "we have not proposed any amendments to the standards of supervision and delegation at present" based on further research that is going to be undertaken in regard to the testing of sight.***

***This appears to completely miss the point that many of the issues regarding "intervention" are not around the sight test element of a patient's visit to a practice, but around the unsupervised dispensing of restricted groups including children.***

***This new research will not address this issue so therefore at what point will more clarity and focus be forthcoming on the specific matter and the real concerns of the supervision of dispensing to children, sight impaired or severely sight impaired people being undertaken by registrants who are in a position to observe and intervene if necessary?***

Can we publish your response?

**Yes**

Respondent 28

## General Questions

Are you responding on behalf of an organisation?

**No**

Which category best describes you?

**Other**

If other, please specify:

***I had refractive lens exchange surgery at ██████████ in 2018. I raised a court action against them and settled it. I am therefore a patient. I now regularly attend another optical firm. For the past 5 years I have dealt exclusively with refractive surgery cases. I am a clinical negligence solicitor. I often have occasion to refer to the GOC standards in litigations.***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**No**

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Yes**

***It ensures compliance with said Act***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Not sure**

Q4. Will the proposed changes have effects, whether positive or negative, on:

- (a) opportunities for persons to use the Welsh language, and
- (b) treating the Welsh language no less favourably than the English language?

**(a) Not sure**

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

- (a) opportunities for persons to use the Welsh language, and
- (b) treating the Welsh language no less favourably than the English language?

**(a) Not sure**



Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and

(b) treating the Welsh language no less favourably than the English language?

**(a) Not sure**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**Yes**

***I think the complaints procedure is inherently unfair and in breach of natural justice because (a) the complainer is not made privy to the optometrist's evidence provided to the GOC that is subsequently provided to the expert and (b) thereafter the complainer does not get to see the GOC expert report and is therefore unable to make comments on it. It is impossible to appeal if the complainer does not know what to complain about. The current system is the antithesis of equality of arms.***

***Another issue arises where the GOC passes concerns on to the [REDACTED] That happened in one of my cases. The [REDACTED] subsequently turned down the complaint. I was not able to obtain details of the nature of the GOC concerns that had been passed [REDACTED] to he [REDACTED] and nor was I able to find out for the reason the complaint was rejected. This is grossly unfair as my client was left in the dark and the whole thing was on the topic of her and her treatment.***

***Another important point is that the GOC do not seem to take into account multiple complaints against the same individual optometrist. They should in light of the scandals that have arisen over the past 20 years regarding nurses and doctors who have been found to have been engaged in criminal conduct involving multiple patients. Whilst I am not suggesting for a second that any optometrist commits any criminal act, in my submission the approach to be adopted should be one that takes into account previous similar fact evidence rather than considering each complaint on an individual basis.***

***Similar fact evidence can be used as corroboration and it should be. I am aware of one case where the patient submitted her own complaint to the effect that the optometrist had lied to her when he told her she had [REDACTED] cataracts. The regulator was under the false impression that this was a one off event as was the expert witness and Counsel. That was erroneous because I had submitted a complaint regarding exactly the same issue, involving the same optometrist.***

***A further key issue is that the GOC do not require optometry businesses that perform refractive surgery to adhere to [REDACTED]***

**Professional Standards for Refractive Surgery despite the fact that the surgeons who are employed by the registered OC are themselves members of the and the said Professional Standards state explicitly that they apply to all healthcare providers engaged in provision of refractive surgery. Moreover the GOC does not require refractive surgery providers to comply with the Guidance in respect of Cosmetic procedures which the specifically state applies refractive surgery. In terms of both the Standards and Guidance, the surgeon performing surgery should meet the patient prior to the day of surgery do not adhere to that. Patients only meet the surgeon on the day of surgery itself. This has given rise to many instances where the patient has only received certain information on the threshold of surgery which is too late for proper informed consent. I can provide evidence of that if required, including clients and also an email from the confirming their view on the requirement for the surgeon to meet the patient before the day of surgery. Another issue is the system of bonuses that exists at - in terms of which optometrists are paid bonuses based on sales of refractive surgery. I can provide evidence of the bonus system that has been in force at various dates over the years. It is in breach of the Joint Statement signed by all healthcare regulators in respect of potential conflicts of interest because there is a potential for an optometrist to recommend surgery rather than a non-surgical solution where the latter would be in the best interests of the patient. I can provide many examples of e.g., clients of mine who were emmetropic presbyopes who underwent clear lens exchange although a risk/benefit analysis would reveal that not to be in the patient's best interests.**

**I also consider the Standards should expressly state that where an alternative procedure or product ( e.g., multifocal contact lenses, non-lineal spherical ablation, SMILE or lenticule extraction surgery, or monofocal monovision) would be a reasonable alternative for the patient, there should be an express duty on the optometrist to tell the patient that even if their clinic does not provide it. This is in Standards. I have multiple examples of failing to advise the patient that there is an alternative procedure for which they are suitable but which they do not provide. In fact, it is essential for the GOC to consider the issue of Standards specifically related to refractive surgery given the plethora of clinics now offering refractive surgery, in which optometrists always have a co- management role."**

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**No**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Strongly agree**

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Strongly agree***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Strongly agree***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Strongly agree***

Q13. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q15. To what extent do you agree that the revised standards are clear?

***Strongly agree***

***Some of my clients are under the impression they are speaking to a surgeon when it is an optometrist because they describe themselves as a "clinician"***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q17. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q19. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q21. To what extent do you agree that the addition to the business standard is clear?

**Strongly agree**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Strongly agree**

Q23. To what extent do you agree the revised standards are clear?

**Somewhat agree**

***Need to clarify that it is essential to comply with the ASA and Advertising and Marketing Standards published by the [REDACTED] in respect of refractive surgery. I have seen adverts on social media saying eg [REDACTED] " when it is neither new nor revolutionary. Also need to make clear advertising and marketing form part of the consent process and must not differ materially from the consent form ie should not make claims about "freedom from glasses" - the consent form says may still need glasses after surgery. Also use of the term "20/20" vision is misunderstood by a lay person as they think it means "perfect in every way" because it sounds like getting full marks on a test. Also some advertising is scaremongering about the risks of contact lenses when in fact with proper use and hygiene the risk of infection is very low and can be easily managed, unlike refractive surgery side effects and complications.***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat disagree**

**Do not go far enough**

Q25. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

**Strongly agree**

Q28. To what extent do you agree that the additional standard is clear?

**Strongly agree**

Q29. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

**Strongly agree**

Q32. To what extent do you agree that the additional standard is clear?

**Strongly agree**

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

**Somewhat agree**

***A bit needs to be added regarding consumer Protection Act 2015 which states that liability for personal injury cannot be waived. The previous relevant legislation was the Unfair Contract Terms Act 1977. I have in the past written to the GOC about the [REDACTED] practice of requiring patients to sign a waiver of legal liability and waive their right to pursue a compensation claim as a prerequisite to performing lens explant and exchange surgery. (As well as an NDA) The GOC advised me this was not their function, to address this. I think it does need to be addressed because in my opinion requiring signature of said document is a breach of the relevant consumer protection legislation. I can provide details of a case where my client had to sign this NDA and waiver on a Saturday without legal advice in order to have surgery that he regarded as necessary to save his sight by a vitreoretinal surgeon on the following day. I also think the [REDACTED] Terms and Conditions are breach of consumer protection [REDACTED] legislation because they bear to be binding upon payment of a deposit and before they are signed. However, according tot he evidence provided by my clients, they are not provided to the patient until after they have paid a***

***deposit. That is almost Kafkaesque in its unfairness because one cannot be bound by the terms of something one has not seen.***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Somewhat disagree***

***Does not go far enough. Also need to state explicitly that breach will be regarded as substandard conduct.***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

**No response**

Can we publish your response?

***Yes, but please keep my name or my organisation's name private***

Respondent 29

## General Questions

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

**Education provider**

If other, please specify:

**NHS National Board**

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Yes**

***With the undergraduate course becoming an MOptom degree, students will be incorporating significant placement in their degree programme, so increased patient engagement. In the interest of the patients and the public these students should adhere to the standards of practice expected of a health care practitioner. We would hope that an early adoption of clinical leadership as a student would help encourage a sense of agency.***

***The standards may benefit from a clearly defined role for qualified registrants in supervision or mentorship. There should be clearer requirements around the importance of education and training within a registrant's remit. The current standards do not capture the expected behaviours when undertaking supervision and mentorship. This point would therefore point to an argument for a difference in qualified registrants standards.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**Not sure**

***Although we recognise the moves by the regulator around the importance of EDI, there seems to be a lack of terms such as inequality and inclusion. We would hope the regulator would look to rely on Equality and Diversity experts, and those with lived experience, ensuring appropriate professional standards.***

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Yes**

***Yes, we believe the proposed changes will be of benefit to patients, the general public and eyecare teams, as overall they are positive.***

Q4. Will the proposed changes have effects, whether positive or negative, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:  
(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

***(a) Not sure, (b) Not sure***

Q7. Is there anything else you think we should consider as part of the proposed changes?

**Yes**

***We see this revision of standards as an opportunity to align with other healthcare professions in relation to the culture of leadership and management in relation to supervision and/or mentorship of colleagues. This does not need to be a formalised relationship, but the opportunity to contribute to the education, training and development of the wider team or others. We feel this focus is missing from the revised standards.***

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

***If you consider a short implementation period is necessary, please say how long this should be for, and why. To enable scoping, resource attainment, followed by planning, design and delivery of support and education, we would***



***propose a minimum twelve-month implementation period for HEIs, industry and other stakeholders.***

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

***Somewhat disagree***

***We feel the reference to leadership throughout the standards is too narrow and does not reflect wider skills. In the proposed change to the role as a professional there is reference to examples of demonstrating leadership which includes role modelling professional behaviours and contributing to the education and training of others. However, we feel this is not reflected in the standards themselves with enough focus or importance.***

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

***Somewhat disagree***

***We feel the reference to leadership throughout the standards is too narrow and does not reflect wider skills. In the proposed change to the role as a professional there is reference to examples of demonstrating leadership which includes role modelling professional behaviours and contributing to the education and training of others. However, we feel this is not reflected in the standards themselves with enough focus or importance.***

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

***Somewhat agree***

***The revised wording proposal seems an appropriate improvement for care of individuals, and one that can be used as a prompt for education and training in this area.***

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

***Somewhat agree***

***The revised wording proposal seems an appropriate improvement for care of individuals - although review by experts and those with lived experience is essential if to be accepted as a minimum.***

Q13. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***We would expect clearer reference to not just abuse, but harm of any type, being something to protect against.***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q15. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***As an education and training provider that understands the value of good communication, we welcome the changes to the standards and believe they are clear.***

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

***As an education and training provider that understands the value of good communication, we welcome the changes to the standards and support the minimum standard.***

Q17. To what extent do you agree that the revised standards are clear?

***Neither agree nor disagree***

***As an education and training provider we are not equipped to respond regarding clarity.***

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Neither agree nor disagree***

***By the use of education, evidence-base and collaboration we promote the safe use of digital technologies.***

Q19. To what extent do you agree that the revised standards are clear?

***Neither agree nor disagree***

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q21. To what extent do you agree that the addition to the business standard is clear?

***Neither agree nor disagree***

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

***Neither agree nor disagree***

Q23. To what extent do you agree the revised standards are clear?

***Strongly agree***

***As an education provider we find the standard clear and supportive of the minimum behaviour we would require from professions/students engaged in sharing images etc***

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

***As an education provider we find the standard clear and supportive of the minimum behaviour we would require from professions/students engaged in sharing images etc***

Q25. To what extent do you agree that the revised standards are clear?

***Neither agree nor disagree***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Neither agree nor disagree***

Q28. To what extent do you agree that the additional standard is clear?

***Neither agree nor disagree***

Q29. To what extent do you agree that the revised standards are clear?

***Neither agree nor disagree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Neither agree nor disagree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Somewhat agree***

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

***We considered the scenario where someone had a communicable disease but was not aware of it, was not addressed specifically, yet there was risk that it would be encompassed in the standard term “If you have a serious communicable disease, or have been exposed to a serious communicable disease, and believe you could be a carrier, you should not practise until you have sought appropriate medical advice”.***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Somewhat agree***

***We did not feel the range of example legislation was sufficiently directed at areas impacting clinical care – we felt a benefit in including the areas of say disability law, or law around adults with incapacity.***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Somewhat disagree***

***We did not feel the range of example legislation was sufficiently directed at areas impacting clinical care – we felt a benefit in including the areas of say disability law, or law around adults with incapacity.***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

***We are mindful that there is now a very significant level of enhanced service delivery amongst community practitioners in Scotland and consider performance around the professional pillars of facilitating learning, leadership, and research and development are essential for maintaining safe patient care delivery: we did not feel there was adequate consideration of these professional pillars in the proposed and existing professional standards.***

Can we publish your response?

**Yes**

Respondent 30

## General Questions

Are you responding on behalf of an organisation?

**Yes**

Which category best describes your organisation?

### ***Optical professional/representative body***

Q1. Do you think there should be any difference in our expectations of students and fully qualified registrants?

**Not sure**

***As the association for eye care providers, we and our members have considered this question in detail. As long as there is a requirement for students to be GOC registered, we would argue that it is right that student standards should mirror as closely as possible the standards for optometrists and dispensing opticians on the grounds that students will be seeing patients during their undergraduate training; patients who altruistically allow their time and healthcare to be used for this public benefit deserve to know that any clinician or student involved in their care is bound by a common set of published professional standards students will have more and earlier exposure to patients under the ETR a common set of standards arguably provides greater protection and reassurance for patients than differing university standards.***

***We take the point that newly enrolled students may initially be unaccustomed to the issue of professional standards and the laws governing their chosen professions. However, they have applied to train to join a clinical profession and to be in a position of trust, and the standards are not hard to understand and assimilate as guiding principles throughout their training. They also build in an awareness of professional behaviours from day one irrespective of where and how they train, and this will stand them in good stead for a lifetime of practice and continuing professional development. We do however propose two amendments. Please see our responses to Q.9 and Q.13.***

Q2. Do you think any of the proposed changes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?

**No**

Q3. Do you think any of the proposed changes could affect any other individuals or groups, either positively or negatively?

**Yes**

**Welsh language speakers (see response to Q.4).**

Q4. Will the proposed changes have effects, whether positive or negative, on: (a) opportunities for persons to use the Welsh language, and (b) treating the Welsh language no less favourably than the English language?

**(a) Yes, (b) Yes**

***Publishing the standards in the Welsh language will have positive effects for Welsh speakers (and hence patients) in that they will be able to apply, consider and reflect on the standards in their native language. We do not anticipate the changes themselves will have any impact on opportunities for persons to use the Welsh language and should ensure equal treatment for Welsh and English speakers for the first time.***

Q5. Could the proposed changes be revised so that they would have positive effects, or increased positive effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

Q6. Could the proposed changes be revised so that they would not have negative effects, or so that they would have decreased negative effects, on:

(a) opportunities for persons to use the Welsh language, and  
(b) treating the Welsh language no less favourably than the English language?

**(a) No, (b) No**

Q7. Is there anything else you think we should consider as part of the proposed changes?

**Yes**

***Please see our answers to Q.9 and Q.13.***

Q8. Do you think there should be a short implementation period after the new standards are published and before they come into effect? The purpose of an implementation period would be to give registrants time to adapt; to adjust their conduct and enable stakeholders to review the standards and make any necessary amendments to practice, policy, guidance, or training material?

**Yes**

***If you consider a short implementation period is necessary, please say how long this should be for, and why. The changes broadly reflect what is already good practice, so we do not believe a long implementation period is necessary.***

***Nevertheless, registrants will need time to familiarise themselves with the updates and optical businesses similarly. Given there has been wide***

**consultation, we believe that three months following finalisation should be sufficient for this. Consideration should be given to how these changes are communicated to individual registrants, especially those who practise outside employment training structures, so that they are fully aware of the changes and their implications.**

Q9. To what extent do you agree that the addition to the introduction on leadership is clear?

**Somewhat agree**

**We support overarching messaging about leadership, compliance with the law and the need to be aware of vulnerabilities, being included in an introduction as proposed. We understand however, and agree, that these specific statements will not be used in Fitness to Practise cases where allegations are articulated against the standards themselves on grounds of fairness and clarity. It would be helpful for the GOC to confirm this in writing.**

**We continue to believe that there should also be specific reference to supporting the next generation of practitioners in the Standards themselves - as there is for compliance with the law (Standard 6) and vulnerabilities (Standards 6 and 12). This will have a long-term positive impact in the interests of patients and should therefore be included under Standard 10 (optometrists and dispensing opticians) and Standard 9 (students). The GOC's ETR expectations are about widening learning and experience in practice at all stages of undergraduate optometric education and training and for this to be at level 7 rather than level 6. This will require significantly more input from teams of supervisors and multidisciplinary colleagues than has been the case to date and will require many more practitioners to consider taking on these roles. We would suggest therefore that the Standards include detail along the following lines:**

**•Standard 10.6: Support colleagues in developing their own skills, scope of practice and reflective practice, especially by supervising undergraduates and trainees, where you have the operational capacity and employer support to do so.**

**•Standard 9.4: Support fellow students and other colleagues in developing their own skills, scope of practice and reflective practice where you have the space and time and support from the university, supervisor or employer to do so.**

**We also believe standard 6.2 should be amended to be clearer and more supportive to registrants:**

**•Standard 6.2: Seek appropriate supervision or mentorship, and ensure a personal development plan is in place, if you are doubtful or feel unconfident about any aspect of your practice. This is particularly likely to be the case when you first enter practice, change work or area of practice, or are returning after a period away from practice.**



**Be able to identify when you need to refer a patient in the interests of the patient's health and safety and make appropriate referrals.  
And a consequential change to the standards for optical businesses.**

**•Standard 3.3: we suggest amending the title to 'Staff are adequately supervised, mentored and supported' to reflect the changes we propose to Optometrists and Dispensing Opticians Standard 6."**

Q10. To what extent do you agree that the addition to the introduction on leadership sets appropriate minimum expectations of registrants?

**Strongly disagree**

**We feel that the examples are too vague to be meaningful and that a specific example should be added about leadership in supporting the education and training of the next generation of professionals given the GOC's increased expectations of the professions in this area. Please see our response to Q.9.**

Q11. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances is clear?

**Somewhat disagree**

**As the consultation document recognises, not all vulnerabilities are evident. Equally not all persons who are vulnerable or potentially vulnerable are aware of, acknowledging of, or willing or able to articulate their vulnerabilities. The standard should therefore be the same for all patients and the draft introductory section is correct to say that "a patient's vulnerabilities should be considered as part of each consultation". This however seems to be in contradiction with the advice to "exercise particular care etc.**

**We suggest amending the introductory section to:**

**"Patients may be vulnerable for a range of reasons, including physical or mental health conditions, capability in managing their health, or handling a difficult set of life events. Not all vulnerabilities, and potential vulnerabilities, are evident, sometimes even to the patient or carer themselves. Levels of vulnerability may vary between contexts, and change over time, so a patient's vulnerabilities should be considered as part of each consultation. Where you identify a vulnerability, you will adjust your practice accordingly based on the needs of the patient."**

Q12. To what extent do you agree that the addition to the introduction on providing care for patients in vulnerable circumstances sets appropriate minimum expectations of registrants?

**Somewhat disagree**

**Please see response to Q.11.**

Q13. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***The amendments to the relevant standards appear to be appropriate, with the following suggested amendments for Optometrists and Dispensing Opticians:***

- ***Standard 15.1: in order to be absolutely clear, add ‘at all times and in all circumstances’ to the end.***
- ***Standard 15.1 and 15.2: the standard should be the same for all patients. We do not believe that the reference to taking special or particular care when dealing with people in vulnerable or potentially vulnerable circumstances is appropriate (see our response to Q.11).***

Q14. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Somewhat agree***

***We consider that the standards should be strengthened as suggested in our responses to Q.9, Q.10, Q.11, Q.15.***

Q15. To what extent do you agree that the revised standards are clear?

***Somewhat agree***

***The amendments to the relevant standards appear to be appropriate with the following suggested amendments:***

***Individual Optometrists and Dispensing Opticians***

- ***Standard 7.6: ‘referrals’ should be included in addition to examinations, treatments, drugs and appliances (notwithstanding the reference to referrals in Standards 10.2). The proposed new second sentence should also be clear that all appropriate options are discussed with patients. The amended standard should therefore read:***

***“Provide or recommend examinations, treatments, referrals, drugs or appliances if these are clinically justified and in the best interests of the patient. Give patients information about the appropriate options available to them, including where appropriate declining further treatment or intervention, in a way they can understand.”***

***Students***

- ***Standard 2.2 - we suggest adding the words ‘including that you are in training’ after ‘your role’ so that this is clear to patients.***

• **Standard 6.6 - as per above (standard 7.6) for individual optometrist and dispensing opticians.**

Q16. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Somewhat agree**

Q17. To what extent do you agree that the revised standards are clear?

**Strongly agree**

Q18. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q19. To what extent do you agree that the revised standards are clear?

**Somewhat agree**

**The amendments to the relevant standards appear to be appropriate, with the following suggested amendments:**

**Standards 13.2: the language of 'protected characteristics' might have a different definition or no definition in Northern Ireland which does not have the Equality Act 2010. This will also need to be considered for the consequential change proposed for 2.2.5 of the Standards for Optical Businesses.**

**Standard 13.4 - given the perceived difference between 'online communications' and 'social media' we would suggest specifically adding 'and social media' after 'online communications' to align with proposals regarding use of social media."**

Q20. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly agree**

Q21. To what extent do you agree that the addition to the business standard is clear?

**Somewhat disagree**

**There is no place for discrimination, bullying, or harassment in the workplace. It is also right for employers to provide access to support throughout any review/investigation.**

**Managing this from a human resources (HR)/employment law perspective however can be complex – with complaints and disciplinary procedures**

**needing to be undertaken to assess whether inappropriate behaviour has occurred. An employee might also not wish to receive certain types of support (or may not want to receive it from their employer) therefore the business should provide access to support (whereas the currently drafted Standard sets a requirement to provide support). Given these complexities and to ensure processes remain compliant with employment and health and safety regulations, we believe the new standard under 3.3 in the Standards for Optical Businesses should be re-written to:**

**“Ensure support is available for staff who may have experienced or who report discrimination, bullying, or harassment in the workplace”.**

**This would allow for support to be provided from outside the employer, its being optional for the staff member to take up, and its being available outside of HR processes determining whether discrimination, bullying, or harassment has taken place.**

Q22. To what extent do you agree that the addition to the business standards sets appropriate minimum expectations of business registrants?

**Somewhat disagree**

**See response to Q.21.**

Q23. To what extent do you agree the revised standards are clear?

**Strongly disagree**

**We agree with the amendments to standard 14.3 and 16.6. We Strongly disagree with the proposed amendments to 3.3 because it confuses two different definitions of consent.**

**The existing standard 3.3 specifically relates to patients’ consent to care, and it is correct.**

**The proposed revised wording inserts a clause with respect to sharing patient data. The Data Protection Act 2018 and GDPR requires healthcare providers to specify an appropriate lawful basis for processing data. In data protection legislation the term ‘consent’ is one lawful basis, but not an appropriate lawful basis for processing patient data.**

**As a result, inserting the wording “when sharing patient data with others” into 3.3 is problematic but also unnecessary.**

**Eye care providers (data controllers) have data protection policies in place which will set out the lawful basis for processing data and other systems and controls for safeguarding this data.**

**Registrants should simply be advised to comply with their organisation's data protection and privacy policies (which is already covered by the new**

**introduction under ‘your role as a professional’). This policy might for example prohibit using any personal device, or removing data even if anonymised etc, or might have specific references to use of anonymised data for use in education and research.**

**The ICO has published some guidance on transparency in health and social care, which sets out the complexity with regards to processing data.<sup>1</sup>**

**We would be happy to discuss this further if that would be helpful."**

Q24. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

**Strongly disagree**

**See our answer to Q23**

Q25. To what extent do you agree that the revised standards are clear?

**Somewhat disagree**

**Standard 15 new proposed standard: this refers to acting in a ‘sexual way towards patients, students, colleagues, or others with whom you have a professional relationship, with the effect or purpose of causing offence, embarrassment, humiliation, or distress’. This is based on the GMC standards which uses similar wording (GMC Standards, Maintaining personal and professional boundaries 342). However, this particular GMC standard refers only to colleagues, and not to patients.**

**The GMC also has an additional and stronger standard (243) which relates to sexual behaviour toward patients, which does not refer to effect or purpose and is therefore clearer about the prohibition.**

**The GOC standard should therefore, like the GMC, make clear that sexual behaviour toward a patient is not appropriate in any circumstances.**

**Given the differences in relationships between registrants and patients versus with colleagues, we believe this standard, as is the case for the GMC standards, should be split into two: one which relates solely to patients/carers, and one that relates to colleagues.**

**It would also be clearer to expand ‘sexual’ to ‘sexual, sexualised or sexually suggestive’. We therefore propose the following two standards:**

**“You must not act in a sexual, sexualised or sexually suggestive way towards patients or use your professional position to pursue a sexual or improper emotional relationship with a patient or someone close to them. Maintaining sexual boundaries applies to your behaviours, actions, and communications.”**

***“You must not act in a sexual, sexualised or sexually suggestive way towards students, colleagues, or others with whom you have a professional relationship with the effect or purpose of causing offence, embarrassment, humiliation, or distress. Maintaining sexual boundaries applies to your behaviours, actions, and communications.”***

***Also see response to Q.13 and Q.21.”***

Q26. To what extent do you agree the revised standards set appropriate minimum expectations of registrants?

***Somewhat disagree***

***See response to Q.25.***

Q27. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of sexual harassment?

***Strongly agree***

Q28. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

***Please see our response to Q.25.***

Q29. To what extent do you agree that the revised standards are clear?

***Strongly agree***

Q30. To what extent do you agree that the revised standards set appropriate minimum expectations of registrants?

***Strongly agree***

Q31. To what extent do you agree with the inclusion of an additional standard that specifically addresses the issue of serious communicable diseases?

***Strongly agree***

Q32. To what extent do you agree that the additional standard is clear?

***Somewhat disagree***

***As suggested in the consultation document, there is ambiguity in the term ‘serious communicable disease’ which largely centres around what is serious or not. The suggestion from the consultation document is for registrants to follow public health guidance available at the time, however this is not reflected in the new standard.***

***We therefore suggest adding the following sentence at the start of the new standard: "Follow public health guidance regarding communicable diseases".***

Q33. To what extent do you agree that the addition to the introduction on compliance with legislation is clear?

***Somewhat agree***

***It is necessary to remind registrants that they are expected to comply with all applicable legal and contractual requirements. A more generic/high level overview might be more beneficial/less confusing than including a small number of examples.***

***The new wording also refers to the "NHS". Northern Ireland uses the term Health Service as opposed to NHS, which the GOC might wish to consider.***

Q34. To what extent do you agree that the addition to the introduction on compliance with legislation sets appropriate minimum expectations of registrants?

***Somewhat agree***

***See response to Q.33.***

Q35. Do you have any other comments about the proposed revisions or additions to the standards?

***"Regarding Standard 14.6, see response to Q.23. Typos for correction:***

- 9.7 'in' rather than 'on' the patient record – these are increasingly electronic rather than card-based***
- 10.1 extraneous 'done'***
- 12.1.6 'appropriate infection controls' - the accepted public health term in all four nations is now 'infection prevention and control'. "***

Can we publish your response?

***Yes***