

# performance review 2019/20

## GENERAL OPTICAL COUNCIL





# ABOUT THE PERFORMANCE REVIEW PROCESS

**We aim to protect the public by improving the regulation of people who work in health and care. This includes our oversight of 10 organisations that regulate health and care professionals in the UK. As described in our legislation, we have a statutory duty to report annually to Parliament on the performance of each of these 10 regulators.**

Our performance reviews look at the regulators' performance against our [Standards of Good Regulation](#), which describe the outcomes we expect regulators to achieve. They cover the key areas of the regulators' work, together with the more general expectations about the way in which we would expect the regulators to act.

In carrying out our reviews, we aim to take a proportionate approach based on the information that is available about the regulator. In doing so, we look at concerns and information available to us from other stakeholders and members of the public. The process is overseen by a panel of the Authority's senior staff. We initially assess the information that we have and which is publicly available about the regulator. We then identify matters on which we might require further information in order to determine whether a Standard is met. This further review might involve an audit of cases considered by the regulator or its processes for carrying out any of its activities. Once we have gathered this further information, we decide whether the individual Standards are met and set out any concerns or areas for improvement. [These decisions are published in a report on our website.](#)

Further information about our review process can be found in a [short guide, available on our website](#). We also have a [glossary of terms and abbreviations](#) we use as part of our performance review process available on our website.

## The regulators we oversee are:

General Chiropractic Council • General Dental Council •  
General Medical Council • General Optical Council • General  
Osteopathic Council • General Pharmaceutical Council • Health  
and Care Professions Council • Nursing and Midwifery Council •  
Pharmaceutical Society of Northern Ireland • Social Work England



Find out more about our work  
[www.professionalstandards.org.uk](http://www.professionalstandards.org.uk)

# General Optical Council

## performance review report 2019/20

At the heart  
of everything  
we do is  
one simple  
purpose:  
protection  
of the public  
from harm

## Contents

- 01** At a glance - key facts and statistics about how the General Optical Council is meeting the Standards for 2019/20

---

- 02** Executive summary

---

- 04** How the General Optical Council has performed against the Standards of Good Regulation
  - 04** General Standards Five Standards

---

  - 11** Guidance and Standards Two Standards

---

  - 12** Education and Training Two Standards

---

  - 15** Registration Four Standards

---

  - 19** Fitness to Practise Five Standards

---
- 24** Useful information and links



## The General Optical Council

# key facts & stats

The General Optical Council (GOC) regulates the optical professions in the United Kingdom.

As at 30 September 2020, the GOC was responsible for a register of:

**28,184 professionals and 2,759 optical businesses**

**Annual registration fee is: £360**

### The GOC's work includes:

- ▶ setting and maintaining standards of practice and conduct;
- ▶ assuring the quality of optical education and training;
- ▶ maintaining a register of students, qualified professionals and optical businesses;
- ▶ requiring optical professionals to keep their skills up to date through continued education and training; and
- ▶ acting to restrict or remove from practice registrants who are not considered to be fit to practise.

### Standards of Good Regulation met for 2019/20 performance review

|  |                               |            |
|--|-------------------------------|------------|
|  | <b>General Standards</b>      | <b>5/5</b> |
|  | <b>Guidance and Standards</b> | <b>2/2</b> |
|  | <b>Education and Training</b> | <b>2/2</b> |
|  | <b>Registration</b>           | <b>3/4</b> |
|  | <b>Fitness to Practise</b>    | <b>4/5</b> |

Meeting, or not meeting, a Standard is not the full story about how a regulator is performing. You can find out more in the full report.

# The General Optical Council

## Executive summary

How the GOC is protecting the public and meeting the Standards of Good Regulation



This report arises from our annual performance review of the General Optical Council (GOC) and covers the period from 1 October 2019 to 30 September 2020. The GOC is one of ten health and care professional regulatory organisations in the UK which we oversee. We assessed the GOC's performance against the [Standards of Good Regulation](#) which describe the outcomes we expect regulators to achieve in each of their four core functions. We revised our Standards in 2019; this is the first performance review of the GOC under the new Standards.

To carry out this review, we collated and analysed evidence from the GOC and other interested parties, including Council papers, performance reports and updates, committee reports and meeting minutes, policy, guidance and consultation documents, our statistical performance dataset and third-party feedback. We also utilised information available through our review of final fitness to practise decisions under the Section 29 process<sup>1</sup> and conducted a check of the accuracy of the GOC's register. We used this information to decide the type of performance review we should undertake. Further information about our review process can be found in our [Performance Review Process guide](#), which is available on our website.

## General Standards

When we revised the Standards, we introduced a new set of General Standards. There are five Standards covering a range of areas including: providing accurate, accessible information; clarity of purpose; equality, diversity and inclusion; reporting on performance and addressing organisational concerns; and consultation and engagement with stakeholders to manage risk.

We found that the GOC was clear about its purpose and provided information about its statutory duties, policies and processes. It has taken steps to improve the way it manages conflicts of interests. It has a good understanding of its registrants in terms of equality, diversity and inclusion, and has used this to inform key strategic priorities such as its Education Strategic Review. The GOC has committed to carrying out research into how EDI issues influence the way it handles fitness to practise cases.

<sup>1</sup> Each regulator we oversee has a 'fitness to practise' process for handling complaints about health and care professionals. The most serious cases are referred to formal hearings in front of fitness to practise panels. We review every final decision made by the regulators' fitness to practise panels. If we consider that a decision is insufficient to protect the public properly we can refer them to Court to be considered by a judge. Our power to do this comes from Section 29 of the [NHS Reform and Health Care Professions Act 2002 \(as amended\)](#).

## The GOC's performance during 2019/20

We conducted a targeted review of the GOC's performance against Standards 2, 3, 5, 9, 10, 12, 15, 17 and 18. Following our targeted review we concluded that the GOC had not met Standard 10 because of errors on its register, and had not met Standard 15 regarding the length of time taken to resolve its fitness to practise cases.

The GOC has processes in place to collect and act on feedback and recommendations arising from corporate complaints, external inquiries and relevant publications. For example, following the publication of the Gosport Independent Panel Report, the GOC convened a working group of staff across the organisation to look at the outcomes of healthcare inquiries and ensure their recommendations were properly embedded in GOC regulatory processes.

The GOC has consulted regularly and effectively with stakeholders to inform its work. It struck a good balance between speed and completeness when consulting on its guidance during the Covid-19 pandemic, and conducted a fuller consultation over a longer period when the situation had stabilised. The GOC has engaged constructively with the optical sector on its Education Strategic Review, consciously keeping the need to protect the public at the forefront of its work.

## Key developments and findings

### The GOC's response to the Covid-19 pandemic

The Covid-19 pandemic presented an unprecedented set of challenges for health professionals, including the optical sector, to which the GOC responded quickly and constructively. It issued guidance for registrants and businesses on a range of topics which has been well received by many stakeholders. It showed agility in adapting its core activities, making good use of technology to continue its work to approve and quality assure education providers and to hold remote fitness to practise hearings. The GOC consulted quickly and constructively with key stakeholders as it made these changes, and has consulted more widely and thoroughly as it considers making longer-term changes.

### Errors on the register

Three separate, unrelated errors on the GOC's register mean that the GOC has not met Standard 10. One error was the result of an administrative oversight, meaning that a registrant's suspension was not marked on the register. Another was caused by the GOC adding individuals to the register who had qualified from a degree course the GOC had not approved. The third was the result of the GOC's system being unable to distinguish between courses which it had either provisionally or fully approved. In each case, the GOC subsequently took appropriate action to correct the register and change its processes. Together, however, they indicate the GOC has not been able to maintain an accurate register during the performance review period.

### Fitness to practise processes and timeliness

This is the sixth year the GOC has not met our Standard relating to timeliness. It is implementing an improvement plan to tackle its longstanding issues, including the introduction of a new triage process to reduce the number of complaints entering the fitness to practise system unnecessarily. It is working to close its older, more complex cases, but this has had the result of further worsening its key timeliness measures. Because the GOC is still taking too long to resolve fitness to practise cases, we determined that Standard 15 was not met.

# How the General Optical Council has performed against the Standards of Good Regulation

## General Standards

**Standard 1: The regulator provides accurate, fully accessible information about its registrants, regulatory requirements, guidance, processes and decisions.**

- 1.1 The GOC publishes information about its role and activities on its website<sup>2</sup> and invites enquiries via telephone, email or letter. It launched a new website<sup>3</sup> dedicated to standards and guidance this year, which is discussed in more detail in Standard 6. It runs a separate online hub<sup>4</sup> for its consultations. It makes some use of Twitter, LinkedIn and YouTube to disseminate information, and plans to increase its social media activity.
- 1.2 The GOC register is available and easily searchable on the GOC website. Users can search for individual registrants by first name, surname, gender, postcode, registrant type and specialty. Business registrants can be searched for by company name, and all registrants can be searched for by GOC registration number. The website contains a guide to searching the register and provides email and telephone contact details for the GOC's registration team.
- 1.3 The 'Complaints' section of the website clearly explains the different options available to individuals considering whether to make a complaint, and includes a statement encouraging people to make complaints despite the Covid-19 pandemic. The website contains the outcomes of fitness to practise hearings conducted during the past year and details of future hearings.
- 1.4 The 'Registration' section contains guidance and forms to enable individuals or businesses to apply for registration, renew an existing registration or be restored to the register. There is additional guidance for international applicants as well as signposting to relevant organisations such as the Home Office and the NHS. The restricted 'MyGOC' section allows registrants to update their contact details, log Continuing Education and Training (CET) points and complete their annual renewal.
- 1.5 The 'Education' section contains the handbooks for the four areas of practice (Optometry, Dispensing Opticians, Contact Lenses and Independent Prescribing) which set out the standards used by the GOC to approve and quality assure education and training programmes. The GOC's quality assurance process is explained briefly, and the website clearly sets out the quality assurance schedule along with the latest report of the Education Visitor Panel and current status for each institution.

---

<sup>2</sup> <https://www.optical.org>

<sup>3</sup> <https://standards.optical.org>

<sup>4</sup> <https://consultation.optical.org>

- 1.6 The GOC's separate standards website for registrants clearly sets out the current standards for optical businesses, optometrists and dispensing opticians, and optical students, together with the GOC's guidance on a range of issues, such as obtaining valid consent, the duty of candour and whistleblowing.

### **Conclusion against this Standard**

- 1.7 The GOC uses its website to provide information about its registrants, regulatory requirements, guidance, processes and decisions in a way which appears to be accurate and accessible. We are satisfied that this Standard is met.

## **Standard 2: The regulator is clear about its purpose and ensures that its policies are applied appropriately across all its functions and that relevant learning from one area is applied to others.**

- 2.1 The GOC's mission is to 'protect the public by upholding high standards in the optical professions' through four core functions:
- Setting standards for optical education and training, performance and conduct
  - Approving qualifications leading to registration
  - Maintaining a register of individuals who are qualified and fit to practise, train or carry on business as optometrists and dispensing opticians
  - Investigating and acting where registrants' fitness to practise, train or carry on business is impaired.

These reflect the objectives and functions of the GOC as set out in the Opticians Act 1989<sup>5</sup>, namely the protection of the public by promoting high standards of professional education, conduct and performance among registrants.

- 2.2 The GOC published a new Strategic Plan, *Fit for the future*,<sup>6</sup> in March 2020, covering the five-year period from 1 April 2020 to 31 March 2025. This sets out three main strategic objectives, under which sit a number of priorities and actions:
- Delivering world-class regulatory practice
  - Transforming customer service
  - Building a culture of continuous improvement.

The GOC has kept its Strategic Plan under review in the months since publication to ensure it remains fit for purpose in light of the Covid-19 pandemic.

### **Conflicts of interests**

- 2.3 In our last two performance reviews we have set out our concerns regarding the GOC's approach to managing conflicts of interest. The GOC has acted to address our concerns and published an updated Management of Interests Policy in 2020. It has circulated this to all members and staff, and provided

---

<sup>5</sup> [www.legislation.gov.uk/ukpga/1989/44](http://www.legislation.gov.uk/ukpga/1989/44)

<sup>6</sup> [www.optical.org/en/about\\_us/strategic\\_plan/index.cfm](http://www.optical.org/en/about_us/strategic_plan/index.cfm)

training to Council members in September 2020. It plans to roll out mandatory training to all members during early 2021, and will consider whether further changes to the policy are required in light of the feedback it receives.

- 2.4 Despite this work, some registrants feel the GOC still has a problem with conflicts of interest. In June 2020, over 8,000 people signed a petition alleging (among other things) that large optical businesses were exerting undue influence over the GOC, specifically in regard to the guidance the GOC published during the Covid-19 pandemic. We examined the allegations at the time and found no evidence of undue influence by specific individual or business registrants.<sup>7</sup> We also noted the GOC's statement recognising that its guidance could have been clearer.

### Applying policies and sharing learning

- 2.5 The GOC gave us examples of how it had sought feedback from stakeholders as it developed and evaluated new policies. It engaged quickly and constructively with key stakeholders as it produced new guidance during the Covid-19 pandemic. It subsequently launched a full three-month consultation in October 2020 to help it evaluate the impact of the guidance and make any necessary changes.
- 2.6 We have seen evidence of how the GOC embeds new policies across the organisation through various internal communication channels, induction sessions and training courses. The GOC shares learning on fitness to practise cases from its Determination Review Group to different teams, committee members and legal advisers. It increased the frequency of its Policy Steering Group meetings to allow it to share learning more quickly during the Covid-19 pandemic.

### Conclusion against this Standard

- 2.7 We have seen evidence that the GOC is clear about its purpose and that its activities align with its statutory functions. The GOC has implemented a new conflicts of interests policy which addresses the concerns we had previously raised, although this is an area we will continue to monitor in light of the ongoing concerns of some registrants. It develops and embeds new policies effectively and has mechanisms in place to share learning across the organisation. We are satisfied that this Standard is met.

## **Standard 3: The regulator understands the diversity of its registrants and their patients and service users and of others who interact with the regulator and ensures that its processes do not impose inappropriate barriers or otherwise disadvantage people with protected characteristics.**

- 3.1 The GOC sets out its commitment to Equality, Diversity and Inclusion (EDI) on its website under four headings: 'promoting equality; valuing diversity; being inclusive; and meeting our equality duties'. The GOC has chosen to integrate its EDI Strategy within its new five-year Strategic Plan rather than publish it as a stand-alone document.

---

<sup>7</sup> [www.professionalstandards.org.uk/news-and-blog/latest-news/detail/2020/07/10/update-on-petition-to-investigate-alleged-conflicts-of-interest-in-goc-s-governance-structure](http://www.professionalstandards.org.uk/news-and-blog/latest-news/detail/2020/07/10/update-on-petition-to-investigate-alleged-conflicts-of-interest-in-goc-s-governance-structure)

- 3.2 The GOC gave us examples of work it has carried out following its 2019 EDI Review project, including the recruitment of an EDI Partner in September 2020, roll-out of an inclusive leadership and management workshop for all staff, and a review of its HR policies. The GOC told us that it wants this work to lead to a better awareness of EDI issues and an improved and more consistent style of management and leadership which will empower all of its staff. It may wish to establish clearer measures of success to help it understand its progress towards these goals and drive activity.

### Equality Impact Assessments

- 3.3 The GOC uses an impact screening tool to help staff decide whether a full Equality Impact Assessment (EIA) is needed for a process or policy change, taking into account the number of high or medium risk factors involved. The GOC prepared an impact assessment at pace for the introduction of remote fitness to practise hearings in May 2020 following an initial impact screening exercise. The GOC considered feedback from stakeholders and staff, including the impact of the change on participants with visual impairments or learning difficulties. The final EIA detailed the actions the GOC would need to take to reduce these impacts to an acceptable level.

### EDI data

- 3.4 The GOC has a good understanding of the diversity of its registrants. By collecting EDI data through its annual online renewal process, the GOC has increased the completeness of its registrant data to 98% in its latest annual EDI monitoring report for 2018/19.
- 3.5 The GOC uses its EDI data to produce analysis of registrants subject to fitness to practise complaints. It recognises that male and/or BAME registrants are subject to a disproportionate number of complaints, and has committed to carrying out research into why this is happening.
- 3.6 The GOC has very little information about the EDI characteristics of fitness to practise complainants. It uses voluntary EDI monitoring forms to collect data from complainants, but this has a very low completion rate – around 6% of complainants in 2018/19. The GOC has increased the response rate by adding an online survey option, and is hoping that its new online complaint form, due to be rolled out in early 2021, will significantly increase the response rate.
- 3.7 Although the GOC also collects EDI data of its student registrants, it does not use this data to monitor attainment differences. It told us that it is the responsibility of education providers to comply with the Equality Act 2010 and meet the Office for Students' regulatory processes. The GOC said it might consider looking at attainment differences as a thematic review following the completion of the Education Strategic Review. We think the GOC could make more use of the data it collects and that it might be missing an opportunity to gain a better understanding of EDI issues affecting its student registrants.
- 3.8 The GOC has used the EDI data that it collects from education providers through its Annual Monitoring and Reporting process to help shape its Education Strategic Review work. For example, it has found that alternative approaches to delivering courses, such as part-time or blended approaches, are more successful in attracting older candidates. This has been a factor in the

GOC's decision to integrate professional and clinical experience within approved qualifications.

### **Conclusion against this Standard**

- 3.9 The GOC is clearly taking action in this area, for example using its EDI data to inform its policy work such as its Education Strategic Review. It recognises that there is more to do, such as increasing its ability to collect EDI data from complainants, and has plans in place to improve its performance. We are therefore satisfied that this Standard is met, and encourage the GOC to push ahead with this important work.

### **Standard 4: The regulator reports on its performance and addresses concerns identified about it and considers the implications for it of findings of public inquiries and other relevant reports about healthcare regulatory issues.**

- 4.1 As required by the Opticians Act 1989, the GOC publishes three key corporate documents: an annual report of its equality, diversity and inclusion arrangements; an annual fitness to practise report (contained within its annual report and accounts); and a strategic plan. The GOC holds four Council meetings per year at which organisational reports are presented including a summary of fitness to practise performance. Since July 2020, the GOC has changed the way it reports performance at its Council meetings. It now publishes a balanced scorecard of 12 indicators covering four sections: finance; people; performance; and customer.
- 4.2 Last year we noted that the GOC had made changes to its governance arrangements, effectively replacing four committees (Education, Standards, Registration and Companies) with a single Advisory Panel. We considered these changes to be appropriate, and noted that, according to the Advisory Panel's terms of reference, notes of each meeting would be circulated to the next Council meeting. However, no such notes have been published this year. We consider that the notes should be published in accordance with the terms of reference, to ensure that the new system is appropriately transparent.
- 4.3 The GOC's Corporate Complaints and Feedback Policy sets out the process for dealing with complaints against the GOC. Complaints are reported to the Senior Management Team each month and to the Audit and Risk Committee via a quarterly significant incidents report. The Council receives quarterly reports from the Audit and Risk Committee as part of its confidential meetings. The GOC told us that it had received 15 emails/letters that it considered to be corporate complaints during the performance review period and provided evidence of action it had taken in response.
- 4.4 The GOC takes a structured approach to responding to the findings of inquiries and reports with relevance for the healthcare sector. Following the publication of the Gosport Independent Panel Report, the GOC convened a working group of staff across the organisation to look at the outcomes of healthcare inquiries and ensure their recommendations were properly embedded in GOC regulatory processes. One action arising was to prioritise development of new guidance for individual and business registrants alike on whistleblowing and their responsibilities in relation to it. The GOC has produced draft guidance on this

topic and launched a consultation exercise<sup>8</sup> in December 2020, after the end of our review period, with a view to publishing the final guidance later in 2021. We will consider the GOC's revised guidance in our next performance review.

### **Conclusion against this Standard**

- 4.5 The GOC provides regular performance reports to Council and has refreshed its balanced scorecard during the last year to reflect feedback from Council and the Audit and Risk Committee. It has processes in place to collect and act on feedback and recommendations arising from corporate complaints, external inquiries and relevant publications. We are satisfied that this Standard is met.

## **Standard 5: The regulator consults and works with all relevant stakeholders across all its functions to identify and manage risks to the public in respect of its registrants.**

### **The GOC's response to the Covid-19 pandemic**

- 5.1 The Covid-19 pandemic presented an unprecedented set of challenges for health professionals, including the optical sector, to which the GOC responded quickly and constructively. It swiftly set up weekly meetings for key optical sector stakeholders to discuss workforce issues where gaps in guidance were affecting delivery of effective care. The GOC used these meetings to seek feedback on its draft Covid-19 statements and generally understand the issues affecting the sector. It also established a wider consultative framework including all optical and NHS bodies across the four nations of the UK, which allowed it to consult stakeholders quickly and issue guidance in a timely way, as discussed below in Standard 7.
- 5.2 The GOC engaged with defence bodies, other regulators, staff, committee members and legal advisers to produce a draft protocol on remote hearings before conducting a targeted two-week consultation exercise in June 2020 and publishing the protocol in July. It also carried out a two-week consultation in July/August 2020 on proposed changes to its Optometry Handbook and Supervision Policy to take effect from 1 September for the 2020/21 academic year. We saw that the GOC sought feedback from stakeholders and took their comments into account as it developed and finalised policy during the pandemic.
- 5.3 Some stakeholders told us that the GOC's consultations during the pandemic have been too short, but we think this has to be balanced against the need for action. The GOC launched a three-month consultation on all its Covid-19 statements in October 2020, in recognition of the need to widen its consultation out to more stakeholders and give them more time to consider their responses. We think the GOC has struck a fair balance between speed and completeness during a particularly challenging period.

### **Other consultations**

- 5.4 The GOC ran consultations on a number of other issues, including its draft Strategic Plan for 2020-2025 and its CET scheme proposals. It publishes comprehensive reports on its consultation exercises (which can include focus

---

<sup>8</sup> <https://consultation.optical.org/standards-and-cet/speaking-up/>

groups and interviews as well as online surveys) including how it intends to respond to the issues raised. It publishes clear summaries of each exercise in a 'we asked – you said – we did' format.

- 5.5 The GOC has been criticised by many stakeholders for the way it has consulted on its Education Strategic Review (ESR), a complex and controversial set of proposals which we discuss further in Standard 8 below. It had originally planned to carry out a four-week consultation on its proposals during summer 2020. In February 2020, however, the GOC agreed to extend the length of the consultation period to 12 weeks following feedback from stakeholders who said they needed more time to consult their own members and/or patients properly. The Covid-19 pandemic delayed the GOC's work to finalise its proposals by three months and stakeholders asked the GOC to delay its consultation to avoid a direct clash with the GOC's CET consultation exercise which ran from May to August 2020.
- 5.6 The GOC's position was that, despite the Covid-19 pandemic, further significant delay would not be acceptable; that its current handbooks, both for dispensing optics and optometry, were no longer fit for purpose and needed replacing. The GOC went ahead with the consultation exercise on 27 July 2020. It received 187 responses, which included many comments criticising the timing of the consultation process. On balance, we determined that the GOC has taken a reasonable approach to the ESR over the last year and has balanced the need for detailed consultation with the need to prioritise its statutory duties to protect the public. It would be prudent, however, for the GOC to plan for full 12-week consultations on any similarly complex and/or controversial issues in future.

### **Working with other organisations**

- 5.7 The GOC has worked with a range of other organisations this year. We note the important role it has played in bringing together professional and policy leads from the four nations during the Covid-19 pandemic, and the way it has proactively sought to understand and respond to the different needs of the sector across the UK.
- 5.8 As we discuss further in Standard 7 below, the GOC has worked with the Driver and Vehicle Licensing Authority (DVLA) to develop new guidance for registrants on when and how to disclose confidential information, which was published in February 2020. The GOC worked with the Office for Students during its assessment of the University of Portsmouth's Masters of Optometry course. It has also worked with Trading Standards to stop the illegal sale of contact lenses by online and high street retailers. It continues to work closely with the Optical Consumer Complaints Service (OCCS), holding monthly meetings to discuss complaints that are unlikely to progress as fitness to practise cases.

### **Conclusion against this Standard**

- 5.9 The GOC has engaged constructively with a wide range of stakeholders during this performance review period, much of it during the challenging context of the Covid-19 pandemic. It has struck a fair balance between speed and completeness in consulting on new guidance during the pandemic, and has properly prioritised the need to protect the public when consulting on its ESR. We are therefore satisfied that this Standard is met.

## Guidance and Standards

**Standard 6: The regulator maintains up-to-date standards for registrants which are kept under review and prioritise patient and service user centred care and safety.**

- 6.1 The GOC introduced new Standards for Optical Businesses on 1 October 2019, replacing the previous Code of Conduct for Business Registrants. These standards, and the existing Standards of Practice for Optometrists and Dispensing Opticians and Standards for Optical Students, are available on a new, dedicated, website which also provides supporting information and answers to frequently asked questions.<sup>9</sup>
- 6.2 While the GOC issued a number of guidance statements in response to the Covid-19 pandemic (see Standard 7, below), it did not deem it necessary to amend its standards in response to the crisis and was able to refer to appropriate Standards which were relevant to its guidance.
- 6.3 The GOC's Covid-19 information page<sup>10</sup> highlighted three standards that optical businesses needed to particularly bear in mind during the pandemic (and noted there were similar standards applicable to registrants):
- Standard 1.1 – Patients can expect to be safe in your care
  - Standard 1.2 – Patient care is delivered in a suitable environment
  - Standard 3.1 – Your staff are able to exercise their professional judgement.

### Conclusion against this Standard

- 6.4 The GOC's standards have proved sufficiently robust and flexible to stay relevant during the unprecedented challenge of the Covid-19 pandemic. The new Standards for Optical Businesses, which took effect at the start of this review period, demonstrate that the GOC keeps its standards under review and prioritise patient safety. We received no concerns regarding the GOC's standards during the performance review period and we are satisfied that this Standard is met.

**Standard 7: The regulator provides guidance to help registrants apply the standards and ensures this guidance is up to date, addresses emerging areas of risk, and prioritises patient and service user centred care and safety.**

- 7.1 The GOC publishes guidance and position statements to support registrants to apply its standards. During this review period, the GOC published guidance on disclosing confidential information<sup>11</sup> in February 2020 and a position statement on the use of lissamine green<sup>12</sup> in March 2020. It also published a report on

---

<sup>9</sup> <https://standards.optical.org/>

<sup>10</sup> [www.optical.org/en/news\\_publications/Publications/joint-statement-and-guidance-on-coronavirus-covid19/index.cfm](http://www.optical.org/en/news_publications/Publications/joint-statement-and-guidance-on-coronavirus-covid19/index.cfm)

<sup>11</sup> [standards.optical.org/disclosing-confidential-information/](http://standards.optical.org/disclosing-confidential-information/)

<sup>12</sup> [standards.optical.org/lissamine-green/](http://standards.optical.org/lissamine-green/)

risks in the optical professions<sup>13</sup> in October 2019, based on extensive research involving a large number of registrants and sector bodies. This report should be a valuable source of evidence for future policy work; there is evidence of the GOC acting on its findings and recommendations in the ESR and its review of CET. However, we note that much of the GOC's guidance does not specify the date from which the guidance is effective or when it should be reviewed. It is not clear what process the GOC has to ensure its guidance is systematically reviewed so that it remains accurate over time.

- 7.2 The GOC has responded to the challenges of the Covid-19 pandemic by producing and updating guidance for registrants and businesses on a range of topics. This has been well received by many stakeholders. The GOC increased the variety and frequency of its communications to registrants to raise awareness of this guidance. Stakeholders have responded positively to the GOC's efforts and there is evidence of early engagement in the process of developing new guidance.
- 7.3 The GOC's guidance on the re-opening of optical practices in June 2020 was criticised as unclear. The GOC responded by reviewing and reissuing its guidance and apologising for the fact that its initial guidance may have been unclear. As we noted in Standard 2 above, we considered concerns about alleged conflicts of interest over the drafting of the guidance at the time and found no evidence that the GOC had been unduly influenced by specific individual or business registrants in drawing up this guidance. We have seen no evidence to indicate that our assessment at the time was inaccurate.

#### **Conclusion against this Standard**

- 7.4 On balance, we conclude that the GOC has effectively provided guidance for registrants during the review period. In particular, it has responded to the challenges posed by the Covid-19 pandemic to protect patients from risk and we are therefore satisfied that this Standard is met.

## **Education and Training**

**Standard 8: The regulator maintains up-to-date standards for education and training which are kept under review, and prioritise patient and service user centred care and safety.**

- 8.1 The GOC sets out the standards it uses to approve and quality assure education providers in four Education Handbooks covering optometry (2015), dispensing opticians (2011), contact lenses (2007) and independent prescribing (2008).<sup>14</sup>

#### **Education Strategic Review**

- 8.2 As discussed within Standard 5 above, the GOC is conducting a major, multi-year ESR, which will see it replace the existing handbooks for optometrists and dispensing opticians with three new products:

---

<sup>13</sup> [www.optical.org/download.cfm?docid=9C3A4787-BB26-47AF-B47CFAF5ADCD6840](http://www.optical.org/download.cfm?docid=9C3A4787-BB26-47AF-B47CFAF5ADCD6840)

<sup>14</sup> <https://standards.optical.org/>

- Outcomes for Registration (the knowledge, skill and behaviour individuals must meet)
  - Standards for Approved Qualifications (six standards that providers must meet to deliver an approved qualification)
  - Assurance Method for Approved Qualifications (how the GOC will gather evidence to decide whether qualifications meet its outcomes and standards).
- 8.3 This is a set of fundamental reforms designed to equip registrants with the skills required to meet the changing needs of patients. The reforms will have major consequences for the sector. For new, currently unapproved qualifications, providers will be able seek qualification approval under the new Standards for Approved Qualifications and Outcomes for Registration from March 2021. Providers of currently GOC approved or provisionally approved qualifications will work with the GOC to agree at what pace providers will adapt existing qualifications. The aim is that most providers will work towards admitting students to adapted qualifications which meet the new requirements in either the 2023/24 or 2024/25 academic year.
- 8.4 In October 2019, the GOC launched two Expert Advisory Groups (EAGs) for the ESR: one for optometrists and another for dispensing opticians. We note that these groups provide advice to the GOC and do not have any decision-making powers. However, in view of the significance of the ESR for the sector and the criticisms expressed by some stakeholders, the transparency of the EAGs could have been better; for example, we note that agendas and minutes of EAG meetings are not published. The GOC may wish to consider how it could increase transparency about the EAGs' work.
- 8.5 As discussed in Standard 5 above, the GOC consulted stakeholders on the ESR proposals between July and October 2020, and it continues its engagement activity as it further develops its proposals. We note the GOC is carrying out, or plans to carry out, a number of other workstreams as part of the ESR, including co-commissioning research with key industry stakeholders.

### **Conclusion against this Standard**

- 8.6 The GOC's ESR is a complex and controversial programme. We note the GOC's desire to take this work forward at pace to ensure its standards are fit for purpose. We also recognise the strength of feeling among many key industry stakeholders, exacerbated by the Covid-19 pandemic which has made it harder for stakeholders to engage and added to the uncertainty faced by education providers. It is clear, however, that the GOC has kept its standards for education and training under review in a way that prioritises patient safety. We are therefore satisfied that this Standard is met.

**Standard 9: The regulator has a proportionate and transparent mechanism for assuring itself that the educational providers and programmes it oversees are delivering students and trainees that meet the regulator's requirements for registration, and takes action where its assurance activities identify concerns either about training or wider patient safety concerns.**

### **Approval of new programmes**

- 9.1 The GOC has a clear process for approving new education programmes, and granted provisional approval to two courses during the review period: BSc (Hons) Clinical Optometry at Teesside University and BSc (Hons) Optometry at the University of the Highlands and Islands. The GOC's visit reports are available on its website, and set out the conditions imposed by the GOC, the actions required by the institutions and the relevant deadlines.<sup>15</sup>
- 9.2 In February 2020, the GOC gave *retrospective* approval to the BSc Ophthalmic Dispensing Management programme at Glasgow Caledonian University (GCU), which had been running since 2017. The GOC had failed to recognise that GCU had started to offer this alternative exit award alongside its BSc in Ophthalmic Dispensing, which it had approved in 2015. There was inadequate cross-checking between the GOC's Education and Registration teams, meaning that the GOC's customer relationship management system did not have an accurate list of qualifications. A review by the GOC identified several missed opportunities to address the problem sooner.
- 9.3 These errors predate the performance review period, and the GOC has now taken action to correct them. It has put in place steps to improve information sharing between its Education and Registration teams, and has checked its records against provider websites, which has not shown any other discrepancies. It has also corrected the register entries for the ten graduates who have qualified with the BSc in Ophthalmic Dispensing Management. As the course has now been approved, we can take assurance that there was not a significant risk to the public arising from these registrants joining the register; however, the incident indicated weaknesses in the GOC's registration system, which we discuss further at Standard 10 below.

### **Quality assurance**

- 9.4 The GOC's approach to quality assuring existing courses is set out in its Education handbooks. The GOC carries out periodic quality assurance visits to providers and publishes its findings on its website. Providers are required to inform the GOC of significant planned or actual changes to programmes, and to submit an annual monitoring return to the GOC. The GOC uses these annual returns to identify issues and risks facing the education providers and the wider optical sector and publishes its analysis in a sector report each year.
- 9.5 As we noted in our review last year, the GOC identified a number of issues with the University of Portsmouth's Master of Optometry programme and carried out a Serious Concerns Review. As a result, it imposed a condition on the University to suspend the recruitment of new students to the course in September 2019. The GOC conducted a follow-up visit in November 2019 and

---

<sup>15</sup> [www.optical.org/en/Education/Approving\\_courses/accredited-training-providers--visit-schedule1.cfm](http://www.optical.org/en/Education/Approving_courses/accredited-training-providers--visit-schedule1.cfm)

found that its concerns had not been sufficiently addressed. As a result, in December 2019 the GOC gave the University notice of its intention to withdraw provisional approval for the programme. The University chose not to appeal the decision, and the withdrawal took effect on 10 January 2020.

### **Approval and quality assurance during the Covid-19 pandemic**

- 9.6 The GOC has told us that the Covid-19 pandemic has had minimal impact on its approval and quality assurance work. In its Education Covid-19 Action Plan (created in March 2020 and updated in August 2020), the GOC assessed the risks associated with each provider and programme. It also set out the practical changes needed to conduct remote visits, such as spreading visits over more days to reduce fatigue, taking video tours of clinic space and attending remote lectures including phone calls and video conferences.
- 9.7 In its remote visit guidelines document, the GOC states that ‘Education Visitor Panels should not make recommendations on whether GOC requirements are met if they have not had the opportunity to assess it remotely’. The guidance says that the GOC should then work with the provider to agree an appropriate date and format to assess the outstanding requirements. The GOC appears to be taking a proportionate approach to its quality assurance work during the pandemic, and there is no indication that the GOC has inappropriately approved any courses during the performance review period.
- 9.8 The GOC told us that feedback from education providers on these temporary changes has been positive. This is consistent with the evidence we have collected ourselves. The GOC plans to consider which elements of remote visits it will retain after the pandemic. We would expect the GOC to ensure it has a thorough understanding of the advantages and risks before making any permanent changes.

### **Conclusion against this Standard**

- 9.9 The GOC’s failure to grant approval to GCU’s BSc in Ophthalmic Dispensing Management in 2017 has had implications for the accuracy of its register, which we discuss further under Standard 10. The GOC adapted its approval and quality assurance processes sensibly during the Covid-19 pandemic, particularly the way it assessed the risks involved for each provider/programme and made appropriate use of remote visits for the unique circumstances. We are satisfied that this Standard is met.

## **Registration**

**Standard 10: The regulator maintains and publishes an accurate register of those who meet its requirements including any restrictions on their practice.**

- 10.1 The GOC register is clear and readily accessible on the GOC website.<sup>16</sup> Individual registrants can be searched for by first name, surname, gender, postcode, registrant type and specialty. Business registrants can be searched

---

<sup>16</sup> [www.optical.org/en/utilities/online-registers.cfm](http://www.optical.org/en/utilities/online-registers.cfm)

for by company name, and all registrants can be searched for by GOC registration number. In terms of registration status, registrants are listed as either registered, registered with conditions, or suspended. Where applicable, entries should disclose current fitness to practise warnings, conditions or suspensions and provide links to the relevant determination papers.

### **Registration status error**

- 10.2 During our check of the GOC's register we identified one individual who was listed as registered despite being suspended at the time. Although the relevant fitness to practise determination was correctly attached to the registrant's entry, their registration status was incorrect. When we alerted the GOC to this discrepancy it quickly corrected the register and launched an urgent investigation which concluded that the error was the result of an administrative oversight.
- 10.3 The GOC has made changes to its processes to reduce the risk of this kind of error being repeated, including greater use of checks, a fortnightly review of all open cases, and monthly reporting to the Chief Executive and Director of Casework & Resolutions. It plans to provide additional training for staff as well as improving its customer relationship management (CRM) system to automate some steps in the process. Together, these different measures should reduce the risk of this kind of error.

### **Register errors from unapproved qualifications**

- 10.4 As discussed above in relation to Standard 9, in February 2020 the GOC retrospectively granted full approval to a BSc Ophthalmic Dispensing Management programme which had been running since 2017. During that period, the GOC added ten individuals to the register who had graduated with a qualification that the GOC had not approved. We note the action the GOC has taken to improve its processes to reduce the risk of a similar incident, the fact that the GOC has not identified any other discrepancies from its checks, and that it has corrected the register entries for the ten registrants concerned.
- 10.5 The GOC told us about another registration error. In October 2020, it added a registrant to its contact lens specialty register in error. The registrant – who clearly did nothing wrong themselves – had completed a postgraduate contact lens course which the GOC had provisionally approved, with a follow-up visit scheduled for February 2021. Because the course was only provisionally approved, the GOC should not have added the registrant to the specialist register. However, its CRM system was unable to distinguish between applicants holding provisionally- and fully-approved qualifications. Although this erroneous register entry was made just after the end of our performance review period, it was made possible by vulnerabilities that existed throughout that period. The GOC took appropriate action to correct its error and switched to manually checking all applications to ensure that only individuals with fully approved qualifications were entered onto the register. It told us that its new CRM system should reduce the risk of similar errors in future.

### **Conclusion against this Standard**

- 10.6 There were errors in different parts of the GOC's registration processes. The GOC took prompt and sensible action to correct these errors and reduce the risk of similar problems in future. However, taken together, these three issues

indicate that the GOC has not been able to maintain an accurate register during this performance review period. There appeared to be a combination of systemic flaws, such as the limitations of the CRM, and individual errors. Holding an accurate list of approved courses is a basic aspect of maintaining an accurate register. We conclude that this Standard is not met.

**Standard 11: The process for registration, including appeals, operates proportionately, fairly and efficiently, with decisions clearly explained.**

- 11.1 The GOC website sets out the process for applying for registration and contains online application forms and relevant guidance, including an online form for low income applicants.
- 11.2 As the table below shows, the number of new registration applications fell significantly during the second half of our performance review period, which corresponds with the outbreak of the Covid-19 pandemic.

|                                     | 2018/19 performance review period |     |     |     | 2019/20 performance review period |     |     |    |
|-------------------------------------|-----------------------------------|-----|-----|-----|-----------------------------------|-----|-----|----|
|                                     | Q3                                | Q4  | Q1  | Q2  | Q3                                | Q4  | Q1  | Q2 |
| Number of new applications received | 351                               | 251 | 247 | 341 | 339                               | 200 | 130 | 92 |

- 11.3 In light of the Covid-19 pandemic, the GOC has flexed its usual requirement that student applications need to be certified by someone who has known the applicant for two years; instead, the application can be accompanied by student identification certified by the university or college. This seems a reasonable and proportionate response.
- 11.4 The GOC has a service commitment to process correctly completed applications within five working days of receipt (10 working days during its busiest period between August and October). As it did last year, the GOC has maintained a steady median processing time of five days throughout the year. It only received two registration appeals, compared to 12 in the previous year.

**Conclusion against this Standard**

- 11.5 We discussed the impact of errors on the GOC’s register in relation to Standard 10, above. However, the GOC’s performance in processing registration applications has been consistently good over the year, and we are satisfied that this Standard is met.

**Standard 12: Risk of harm to the public and of damage to public confidence in the profession related to non-registrants using a protected title or undertaking a protected act is managed in a proportionate and risk-based manner.**

- 12.1 The GOC has a clear process for investigating concerns raised about non-registrants misusing a protected title or carrying out restricted optical activities. We have seen evidence of the GOC taking action to stop illegal activity, including joint working with Trading Standards.

- 12.2 The GOC was due to review its protocol for criminal prosecutions during 2020 but this was delayed due to the Covid-19 pandemic. The GOC will now incorporate this into a broader review of its strategy for tackling illegal practices, scheduled for completion during Q1 of 2021/22. We are pleased to note that its review seeks to ensure that its future work remains within the GOC’s statutory remit and focuses on practices that pose the highest risk to the health and safety of the public.
- 12.3 The GOC provided us with its illegal practice caseload data, which it no longer routinely publishes in its quarterly reports to Council. As the table below shows, the GOC handled an increase in illegal practice activity compared to the previous performance review period. Despite this increase, it was able to close a larger proportion of cases within six months.

| Illegal practise caseload                    | Performance review period |         |
|--|---------------------------|---------|
|  | 2018/19                   | 2019/20 |
| New cases opened                             | 75                        | 118     |
| Cases closed                                 | 77                        | 129     |
| Cases closed within six months               | 65                        | 120     |
| Percentage of cases closed within six months | 84%                       | 93%     |

### Conclusion against this Standard

- 12.4 We have seen evidence of the GOC taking action to stop illegal activity during this performance review period and have not received any concerns about the GOC’s performance in this regard. We are satisfied that this Standard is met. We note the work the GOC has planned to review its strategy for tackling illegal practice and we will consider this in future performance reviews.

## Standard 13: The regulator has proportionate requirements to satisfy itself that registrants continue to be fit to practise.

- 13.1 CET is a statutory requirement for all fully-qualified optometrists and dispensing opticians, set out in the Opticians Act 1989 and the GOC’s CET Rules 2005. Registrants must demonstrate they have met the GOC’s CET requirements, currently those in place for the three-year period from 1 January 2019 to 31 December 2021.
- 13.2 CET uptake among registrants is high, with 95% of registrants meeting their annual points target during the first year of the current cycle up to 31 December 2019. It has remained high during the Covid-19 pandemic, as registrants make greater use of online learning. The GOC has taken sensible measures to flex its CET requirements during the Covid-19 pandemic. In April 2020, the GOC waived its requirement to complete a minimum of six CET points during the year, and allowed all registrant-led peer reviews to be conducted using videoconferencing. The requirement to complete at least 36 CET points over the three-year cycle (54 for therapeutic prescribers) remains in place.

- 13.3 The GOC is currently conducting a major review of its CET scheme, which was introduced in 2013. It carried out a full consultation between May and August 2020. The consultation responses were largely positive, and the GOC has made a number of amendments in light of the feedback it received. The GOC intends to implement the changes at the start of the next three-year CET cycle which begins on 1 January 2022.

#### **Conclusion against this Standard**

- 13.4 The GOC has clear CET requirements for registrants. It has made appropriate temporary adjustments to its CET requirements during the Covid-19 pandemic, and CET uptake remains consistent with previous years. There has been a positive response from stakeholders to the GOC's proposed changes to its CET arrangements from 2022. We are satisfied that this Standard is met.

## **Fitness to Practise**

### **Standard 14: The regulator enables anyone to raise a concern about a registrant.**

- 14.1 Through its website, the GOC provides information for anyone considering making a complaint about a registrant and provides email and telephone contact details for anyone requiring additional support. It includes a booklet explaining the fitness to practise process in relatively simple terms. There is also a more technical document setting out the acceptance criteria which the GOC uses to decide whether to proceed with a complaint against a registrant; this was updated in February 2020 following the pilot of a new triage process for complaints. The website includes a referral form for individuals to submit their complaints. It also has links to the OCCS and a copy of the GOC-OCCS Working Together Policy, which explains the roles and remits of the two organisations.
- 14.2 The GOC's website does not tailor its content particularly well according to the type of individual raising the concern (public/patient, colleague, manager, or self-referral). The delayed update to the GOC website should mean that content will be presented in a different way and we will reflect on this in our next performance review.
- 14.3 The number of referrals received during the performance review period fell by 22%, from 353 to 274. This reduction appears reasonable in view of the impact of the Covid-19 pandemic during the second half of our performance review period. The GOC's website carries the clear message that it is continuing to process fitness to practise complaints despite the Covid-19 pandemic, and that anyone wishing to raise a concern should do so.

#### **Conclusion against this Standard**

- 14.4 The GOC has appropriate processes in place to enable individuals to raise concerns about registrants and we are satisfied that this Standard is met.

**Standard 15: The regulator’s process for examining and investigating cases is fair, proportionate, deals with cases as quickly as is consistent with a fair resolution of the case and ensures that appropriate evidence is available to support decision-makers to reach a fair decision that protects the public at each stage of the process.**

15.1 The GOC continues to take too long to conclude its fitness to practise casework and this is the sixth year in a row it has not met our Standard relating to timeliness. Its performance, in terms of the length of time it takes for a case to be decided, remains the worst of the 10 regulators we oversee. The GOC, however, has shown a firm commitment to tackling the issue and is implementing an improvement plan that is starting to make an impact.

**Reducing the number of new fitness to practise cases**

15.2 The GOC found that 84% of cases were closed by case examiners in 2018/19. It reasonably concluded that too many cases were entering the formal fitness to practise process inappropriately, that is, where there was no risk to the public and no prospect of finding impairment. In response, it revised its acceptance criteria for opening new cases in June 2019 and began a trial for a new triage process in September 2019. As part of this new triage process, the GOC can make additional enquiries before making its decision whether to open a case or not. These can include reviewing patient records and/or getting input from the registrant, their employer and the GOC’s legal or clinical experts. After reviewing the results of the pilot, the GOC implemented the new triage process permanently in January 2020.

15.3 We have seen no evidence that these changes have resulted in the GOC inappropriately stopping complaints from entering the fitness to practise process. The GOC has a number of review points and checks in place to ensure that cases are subject to an appropriate level of quality assurance. It holds case clinics to promote consistency in decision-making and to help share learning points among staff. It also holds monthly meetings with the OCCS to discuss cases that are unlikely to reach the threshold for entering the fitness to practise process.

15.4 The GOC allows either party to a complaint to ask the Director of Casework and Resolution to review decisions made at the triage stage. This provides an additional check on the quality of decisions and further reduces the risk of cases being closed inappropriately. The GOC received 13 such requests during the performance review period, of which one led to a decision being overturned. The GOC was able to demonstrate that learning from the case was shared with the triage team.

15.5 The independent audit of the GOC’s fitness to practise work for 2019-20 considered 28 triage decisions and found them to be ‘typically appropriate and sufficiently reasoned’. The GOC intends to increase the number of decisions to be reviewed in the next annual audit.

15.6 The number of cases progressing to a fitness to practise committee remains broadly in line with previous years, suggesting that the GOC is not prematurely closing down its most serious cases. However, with the small numbers of cases and the time lag involved it is too early to draw firm conclusions and we will continue to monitor this area of the GOC’s work.

## Improving the fitness to practise process

- 15.7 The GOC has sought to speed up the progression of cases where registrants have been convicted of serious offences. Whereas previously the GOC had waited to obtain documents from the police, it now proceeds using the certificate of conviction and a transcript of the court's sentencing remarks. Where a registrant has multiple cases in the system, the GOC will now progress the serious conviction case to conclusion rather than wait for the other cases to continue. These changes seem reasonable and show the GOC is prioritising its most serious cases.
- 15.8 The GOC has almost doubled the number of hearings panel members available to serve on its fitness to practise committees during the performance review period, from 40 to 79. This was made possible by a change to its legal rules,<sup>17</sup> which removed the previous cap of members. This should allow the GOC to list more hearings and reduce the likelihood of hearings being delayed.

## Timeliness

- 15.9 The GOC has resolved more of its older, more complex cases during this performance review period. As the table below shows, it has significantly reduced the number of cases aged between one and two years, and made a marginal impact on cases older than two years.

| Number of open referrals and cases at the end of the performance review period: | Performance review period |         |
|---|---------------------------|---------|
|   | 2018/19                   | 2019/20 |
| 52-103 weeks  | 133                       | 53      |
| 104-155 weeks   | 36                        | 40      |
| 156 weeks and above   | 32                        | 24      |

- 15.10 One of the consequences of closing older cases is that this tends to increase the median timeliness measures, and this has been reflected in the data, as shown in the table below. The annual median measure for the end-to-end fitness to practise process increased from 112 weeks in 2018/19 to 120 in 2019/20. In the last two quarters of our performance review period, it increased to 185 weeks and 176 weeks respectively. Although this coincided with the first six months of the Covid-19 pandemic, the GOC had already forecast the median figure to increase to 130 weeks in the third quarter of our performance review period *before* the outbreak had started.

| Median time (in weeks) from:   | 2018/19<br>Annual | 2019/20<br>Annual |
|--|-------------------|-------------------|
| Receipt of referral to case examiner decision  | 51                | 60                |
| Case examiner decision to final hearing  | 67                | 67                |
| Receipt of referral to final fitness to practise committee determination/or other final disposal of the case | 112               | 120               |

<sup>17</sup> The General Optical Council (Committee Constitution) (Amendment) Rules Order of Council 2019.

15.11 This is a very high figure and the highest of all the regulators and, even without the Covid outbreak, the forecast figure would have been of serious concern. We recognise that this, to an extent, is distorted by the fact that the GOC is closing its older cases, but it will be important to see a significant improvement in performance over the coming periods.

#### **Conclusion against this Standard**

15.12 The GOC has taken steps to improve the way it progresses complaints and fitness to practise cases during this performance review period. The revised acceptance criteria, new triage process and changes to the way it handles cases involving criminal convictions are designed to help it tackle cases involving public protection issues more effectively. The GOC expects its performance to improve once it has reduced the number of new cases entering the system and brought its oldest cases to conclusion.

15.13 We are pleased to see that the GOC has started to make some progress to address its performance in this area, such as by reducing the number of open old cases. However, at present it is still taking too long to resolve fitness to practise cases. We therefore conclude that this Standard is not met.

### **Standard 16: The regulator ensures that all decisions are made in accordance with its processes, are proportionate, consistent and fair, take account of the statutory objectives, the regulator's standards and the relevant case law and prioritise patient and service user safety.**

16.1 The GOC made 223 decisions at case examiner stage during the performance review period, compared to 272 the previous year, in part due to the impact of the Covid-19 pandemic in the final quarter. Despite this, the number of cases referred to a fitness to practise committee was almost unchanged (49 in 2019/20 compared to 52 in 2018/19), which suggests that the GOC is continuing to progress the most serious cases despite the pandemic.

16.2 The GOC told us that the latest independent audit of fitness to practise decisions for 2018-19 found compliance with the GOC's statutory obligations, procedures and guidance, and no material errors in decision-making. All the relevant action points raised by the auditors have been addressed by the GOC. No appeals were made by registrants against final fitness to practise decisions during the performance review period, and we received no complaints about either the process or specific decisions that the GOC has made. We did not refer any of the GOC's decisions to the High Court, nor did we raise any learning points with the GOC in relation to its decisions.

#### **Conclusion against this Standard**

16.3 We have not seen any evidence that the GOC's fitness to practise work is failing to protect the public and we are satisfied that this Standard is met.

**Standard 17: The regulator identifies and prioritises all cases which suggest a serious risk to the safety of patients or service users and seeks interim orders where appropriate.**

- 17.1 As we have noted above regarding Standard 16, the audit of fitness to practise decisions for 2018-19 found compliance with the GOC's statutory obligations, procedures and guidance, and no material errors in decision-making. Since that audit was conducted, the GOC has piloted and implemented new triage processes which should help identify higher-risk cases at an earlier stage in the process, for example by expanding initial enquiries to include input from employers, clinical staff and the registrant.
- 17.2 The GOC holds interim order hearings promptly, indicating that it effectively prioritises cases to protect the public. We sought further information from the GOC about a case where it appeared the interim order might have expired, allowing the registrant to practise again when it may not have been appropriate. The GOC explained that the case had been adjourned three times for various reasons, but that the interim order had been extended by the High Court on each occasion. The GOC had therefore taken appropriate action to ensure there had been no risk to the public.

**Conclusion against this Standard**

- 17.3 The GOC continues to use interim orders effectively to protect the public and we are satisfied that this Standard is met.

**Standard 18: All parties to a complaint are supported to participate effectively in the process.**

- 18.1 As set out above at Standard 14, the GOC provides clear guidance for anyone who wishes to raise a complaint. Its website explains the process and provides links to guidance documents for more detailed information, including new guidance on remote hearings that are being held due to the ongoing Covid-19 pandemic. The website also invites witnesses to contact the GOC's Witness Care Manager if they require further assistance or are worried about giving evidence, and provides a contact telephone number and dedicated email address for witness support. The GOC also launched a new quarterly bulletin for registrants in December 2020 to try to demystify the fitness to practise process, with the first issue focusing on the triage stage.
- 18.2 The GOC is taking steps to improve the support it provides to people involved in fitness to practise cases. Since January 2019, it has started assessing the risks of each case in a structured way to decide whether additional support would be appropriate in the form of individual care plans. These could involve a range of adaptations, such as adjusting the format and frequency of communication, holding case management conferences and involving relevant third-party agencies. The GOC has also created a virtual tour of its hearing suite to help people familiarise themselves before attending a hearing. It has also increased the frequency of its contact with parties (and its monitoring and reporting on this), and created a Witness Care Manager contact point.
- 18.3 The GOC meets with registrant representatives on a quarterly basis through its Defence Stakeholder Group. This dialogue has resulted in changes to various

elements of the fitness to practise process over the past year, including the GOC's acceptance criteria, the new triage process, the use of agreed panel disposal, case management meetings, and hearings on the papers.

- 18.4 The GOC recognises that it has been able to collect only limited feedback from either complainants or registrants. It has work planned to address this problem, such as introducing an online feedback form. It also intends to focus more on unrepresented registrants, who are likely to feel less supported through the process and from whom the GOC would not hear through its engagement with the Defence Stakeholder Group.

### **Conclusion against this Standard**

- 18.5 The GOC provides guidance to complainants and registrants about the fitness to practise process on its website. It has a system for providing tailored support plans to those who might need additional help. It regularly engages with registrant representatives and takes action on their feedback. It has plans to improve how it collects feedback from individuals. We are satisfied that this Standard is met.

## **Useful information**

The nature of our work means that we often use acronyms and abbreviations. We also use technical language and terminology related to legislation or regulatory processes. We have compiled a glossary, spelling out abbreviations, but also adding some explanations. You can find it on our website [here](#).

You will also find some helpful links below where you can find out more about our work with the 10 health and care regulators.

### **Useful links**

Find out more about:

- [the 10 regulators we oversee](#)
- [the evidence framework we use as part of our performance review process](#)
- [the most recent performance review reports published](#)
- [our scrutiny of the regulators' fitness to practise processes, including latest appeals](#)

**Professional Standards Authority for Health and Social Care**

157-197 Buckingham Palace Road  
London SW1W 9SP

Telephone: **020 7389 8030**

Fax: **020 7389 8040**

Email: **[info@professionalstandards.org.uk](mailto:info@professionalstandards.org.uk)**

Web: **[www.professionalstandards.org.uk](http://www.professionalstandards.org.uk)**

© Professional Standards Authority  
for Health and Social Care March 2021

