

**First meeting in 2024 of the Council held in PUBLIC  
on Wednesday 13 March 2024 at 10am via Microsoft Teams**

**AGENDA**

Item no.	Item	Reference	Lead	Page No.	Finish time
1.	<b>Welcome, apologies and Chair's introduction</b>	Oral	Chair	-	10am-10.05am (5mins)
2.	<b>Declaration of interests</b>	C01(24)	Chair	3-7	
3.	<b>Minutes, actions and matters arising</b>				
3.1	<b>Minutes – 13 December 2023</b> For approval	C02(24)	Chair	8-13	10.05am-10.10am (5mins)
3.2	<b>Updated actions</b> For noting	C03(24)		14-15	
3.3	<b>Matters arising</b>				
<b>FOR DECISION</b>					
4.	<b>GOC strategy 2025-30: proposed vision, mission, values and strategic objectives</b> For approval	C04(24)	Director of Regulatory Strategy	16-50	10.10am-10.40am (30mins)
5.	<b>Member fees 2024/25</b> For decision	C05(24)	Head of Governance	51-66	10.40am-10.50am (10mins)
6.	<b>EDI action plan 2024-25</b> For approval	C06(24)	Head of Governance	67-76	10.50am-11.20am (30mins)
<b>Tea/coffee break 11.20am – 11.30am (10 mins)</b>					
7.	<b>External business plan and budget 2024/25</b> For approval	C07(24)	Chief Executive and Registrar/Chief Financial Officer	77-96	11.30am-12.15pm (45 mins)
8.	<b>Consultation response - removing gender from the register</b> For approval	C08(24)	Director of Regulatory Strategy	97-122	12.15pm-12.45pm (30 mins)
<b>FOR DISCUSSION</b>					
9.	<b>PSA GOC performance review 2022/23</b> For discussion	C09(24)	Chief Executive and Registrar	123-131	12.45pm-12.55pm (10 mins)

**Lunch break 12.55pm – 1.30pm (35 mins)**

**FOR ASSURANCE**

<b>10.</b>	<b>Q3 2023/24 Financial performance report</b> For noting	C10(24)	Chief Finance Officer	132-145	1.30pm-1.40pm (10 mins)
<b>11.</b>	<b>Q3 2023/24 Business performance dashboard</b> For noting	C11(24)	Head of Governance	146-149	1.40pm-1.50pm (10 mins)
<b>12.</b>	<b>Q3 2023/24 Business plan assurance report</b> For noting	C12(24)	Head of Governance	150-152	1.50pm-2pm (10 mins)
<b>13.</b>	<b>Chair's report</b> For noting	C13(24)	Chair	153-158	2pm-2.10pm (10 mins)
<b>14.</b>	<b>Chief Executive and Registrar's report</b> For noting	C14(24)	Chief Executive and Registrar	159-171	2.10pm-2.30pm (20 mins)

**FOR NOTING (Council Members are asked to advise the Chair in advance if they wish to discuss any of these items)**

<b>15.</b>	<b>Council forward plan</b> For noting	C15(24)	Head of Governance	172-174	2.30pm-2.35pm (5 mins)
<b>16.</b>	<b>Any other business</b> (Items must be notified to the Chair 24 hours before the meeting)	-	Chair	-	2.35pm-2.40pm (5 mins)

**Meeting Close – 2.40pm**

**Date of next meeting – Wednesday 26 June 2024**

**GENERAL OPTICAL COUNCIL – COUNCIL REGISTER OF INTERESTS (UPDATED 06 March 2024)**

	Own interests				Connected Persons interests
	Current interests	Professional memberships	Previous interests	GOC committee memberships	
Sinead <b>BURNS</b> Lay Member	<ul style="list-style-type: none"> <li>Registered Psychologist: Health and Care Professions Council</li> <li>Registrant Member: Fitness to Practice Panel, Health and Care Professions Council</li> <li>Board Member with Public Appointments Service, Republic of Ireland</li> </ul>	<ul style="list-style-type: none"> <li>Registered Fellow: Chartered Institute of Personnel and Development</li> </ul>	<ul style="list-style-type: none"> <li>Former Vice President Pharmaceutical Society Northern Ireland</li> </ul>	<ul style="list-style-type: none"> <li>Lay Member: Council</li> <li>Chair: Audit, Risk and Finance Committee</li> </ul>	<ul style="list-style-type: none"> <li>None</li> </ul>
Dr Josie <b>FORTE</b> Registrant (OO)	<ul style="list-style-type: none"> <li>Employed optometrist and director (with shareholding): Specsavers (Plymouth Armada Way; Plymstock; and Plymouth Marsh Mills)</li> <li>Consultant: Specsavers Optical Superstores</li> <li>Lead assessor: Wales Optometry Postgraduate Education Centre, Cardiff University</li> <li>Lecturer (occasional, visiting): Plymouth University</li> <li>Lecturer (occasional, visiting): University of the West of England</li> <li>Vice chair (acting): Devon Local Eye Health Network</li> <li>Vice chair (acting): Cornwall Local Eye Health Network</li> <li>VisionForte Ltd (50% shareholding)</li> </ul>	<ul style="list-style-type: none"> <li>Member: College of Optometrists</li> <li>Registered with the Optometrists and Dispensing Opticians Board of New Zealand</li> <li>Liveryman: Worshipful Company of Spectacle Makers</li> <li>Member: Clinical Committee at FODO</li> <li>Member: The Royal College of Ophthalmologists</li> </ul>	<ul style="list-style-type: none"> <li>Member: Devon Local Optical Committee (end May 2017)</li> <li>Optometrist: Specsavers Torquay (end Apr 2014)</li> <li>Optometrist: Lascelles Opticians Plymouth (end Jun 2006)</li> <li>Specsavers Plymouth Cornwall Street Ltd (ended April 2020)</li> <li>Specsavers Saltash Ltd (ended April 2020)</li> <li>Specsavers Devon2 Domiciliary (ended January 2020)</li> <li>Board trustee: Inspiring Schools Partnership, Plymouth</li> <li>Member: AOP<sup>6</sup></li> <li>Board member: Federation of Ophthalmic and Dispensing Opticians (until 29th December)</li> </ul>	<ul style="list-style-type: none"> <li>Registrant Council Member</li> <li>Chair: Standards Committee</li> <li>Member: Remuneration Committee</li> </ul>	<ul style="list-style-type: none"> <li>None</li> </ul>

	Own interests				Connected Persons interests
	Current interests	Professional memberships	Previous interests	GOC committee memberships	
			2022)		
Mike <b>GALVIN</b> Lay Member	<ul style="list-style-type: none"> <li>• Non-executive Director: Martello Technologies Group Inc</li> <li>• Non-executive Director: ThinkRF</li> </ul>	<ul style="list-style-type: none"> <li>• Member: Institution of Engineering and Technology</li> <li>• Fellow: Institute of Telecom Professionals.</li> </ul>	<ul style="list-style-type: none"> <li>• Director of Streetwave Ltd (a company registered in the UK)</li> </ul>	<ul style="list-style-type: none"> <li>• Lay member: Council</li> <li>• Chair: Education Committee</li> <li>• Member: Audit, Risk and Finance Committee</li> <li>• Council Lead: GOC Refresh</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>
Lisa <b>GERSON</b> Registrant (OO)	<ul style="list-style-type: none"> <li>• Clinic Tutor: Cardiff University</li> <li>• Has observer status on Regional Optical Committee (ROC) meetings across Wales</li> </ul>	<ul style="list-style-type: none"> <li>• Member of AOP</li> <li>• Member of College of Optometry</li> </ul>	<ul style="list-style-type: none"> <li>• Chair: Optometry Wales</li> <li>• Member: GOC Hearings Panel</li> <li>• Member/Acting Chair: GOC Investigation Panel</li> <li>• Member: GOC Education Visitor Panel</li> <li>• College Counsellor: College of Optometrists</li> <li>• Trustee: College of Optometrists</li> <li>• Trustee: AOP</li> <li>• Employee: Ronald Brown Group</li> <li>• Employee: Boots Optician</li> <li>• Primary Care Supervisor: Cardiff University</li> </ul>	<ul style="list-style-type: none"> <li>• Registration Committee Chair</li> <li>• Nominations Committee Member</li> <li>• Council lead for FtP</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>
Ken <b>GILL</b>	<ul style="list-style-type: none"> <li>• Study Portals. UK Advisory Board member.</li> <li>• Independent Management Board member of the Council of the Inns of Court.</li> <li>• Main Board Non-Executive Member and Chair: Audit and Risk Assurance Committee at the Legal Aid Agency.</li> </ul>	<ul style="list-style-type: none"> <li>• Chartered Accountant Member of the Chartered Institute of Public Finance and Accountancy.</li> <li>• Chartered Member of the Chartered Institute of Personnel and Development</li> <li>• Fellow of the Royal Society of Arts</li> </ul>	<ul style="list-style-type: none"> <li>• Independent member of the Audit and Risk Committee of the General Medical Council</li> <li>• Independent member of the Audit and Risk Committee of the Royal College of Veterinary Surgeons.</li> </ul>	<ul style="list-style-type: none"> <li>• Member: Lay Council member</li> <li>• Member: Audit, Risk &amp; Finance Committee</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>

	Own interests				Connected Persons interests
	Current interests	Professional memberships	Previous interests	GOC committee memberships	
			<ul style="list-style-type: none"> <li>Vice Chair of Board and Chair of Audit Committee at the Countess of Chester NHS Foundation Trust.</li> <li>Professional working relationship with FTP auditors Weightmans and Stewart Duffy (in role with Countess of Chester NHS Foundation Trust).</li> </ul>		
Clare <b>MINCHINGTON</b> Lay Member	<ul style="list-style-type: none"> <li>Board member and Chair of Audit and Risk Committee for the Government Internal Audit Agency</li> <li>Independent Member of the Nomination Committee for the Public Relations and Communications Association</li> <li>Independent Chair of the Audit and Risk Committee for the Institute of Physics. Starting 1 March 2024</li> </ul>	<ul style="list-style-type: none"> <li>Fellow: Association of Chartered Certified Accountants</li> </ul>	<ul style="list-style-type: none"> <li>Senior Independent Board Member for the College of Policing (until Dec 2021)</li> <li>Chair of Academic Council for BPP University (until Oct 2021)</li> </ul>	<ul style="list-style-type: none"> <li>Lay Member: Senior Council Member</li> <li>Chair: Remuneration Committee</li> </ul>	<ul style="list-style-type: none"> <li>None</li> </ul>
Frank <b>MUNRO</b> Registrant (OO)	<ul style="list-style-type: none"> <li>Director Munro Eyecare Limited (T/A Munro Optometrists)</li> <li>Clinical Adviser, Optometry Scotland</li> <li>Optometric Advisor, NHS Lanarkshire</li> <li>Lead Optometrist, Glasgow City Health &amp; Social care Partnership</li> <li>Visiting Lecturer, Glasgow Caledonian University</li> <li>Visiting Lecturer, Edinburgh University (MSc Ophthalmology programme)</li> <li>Chair, NHS Lanarkshire Optometric Advisory Committee</li> <li>Member, Greater Glasgow &amp; Clyde Prescribing Review Board</li> </ul>	<ul style="list-style-type: none"> <li>Past President and Honorary Life Fellow, College of Optometrists</li> <li>Member, Association of Optometrists</li> <li>Member, Optometry Scotland</li> <li>Hon Fellow, Association of Dispensing Opticians</li> <li>Member, British Contact Lens Association</li> </ul>	<ul style="list-style-type: none"> <li>Past President, College of Optometrists</li> <li>Past Chair, Optometry Scotland</li> <li>Past Chair, Scottish Committee of Optometrists</li> <li>Past Chair, NHS Education for Scotland Optometry Advisory Board</li> </ul>	<ul style="list-style-type: none"> <li>Registrant Member: Council</li> <li>Member: Education Committee</li> </ul>	<ul style="list-style-type: none"> <li>None</li> </ul>

	Own interests				Connected Persons interests
	Current interests	Professional memberships	Previous interests	GOC committee memberships	
Dr David <b>PARKINS</b> Registrant (OO)	<ul style="list-style-type: none"> <li>• Chair of Trustees: The Spectacle Makers Charity</li> <li>• Chair: London Eye Health Network (NHS England)</li> <li>• Member: London Clinical Senate Council</li> <li>• Director: BP Eyecare Ltd</li> <li>• Provided short informal feedback (22 March 2022) to MOptom Programme Director, Cardiff University on high level course structure (no financials involved)</li> </ul>	<ul style="list-style-type: none"> <li>• Life Fellow: College of Optometrists</li> <li>• Fellow, European Academy of Optometry and Optics</li> <li>• Life Member: Vision Aid Overseas</li> <li>• Liveryman: Worshipful Company of Spectacle Makers</li> </ul>	<ul style="list-style-type: none"> <li>• President: College of Optometrists (end Mar 2016)</li> <li>• Board Trustee: College of Optometrists (end Mar 2018)</li> <li>• Previous CET provider (ended 2015)</li> <li>• Chair: Clinical Council for Eye Health Commissioning (2015-2017)</li> <li>• Vice Chair: Clinical Council for Eye Health Commissioning (2017-2021)</li> <li>• Member: British Contact Lens Association</li> <li>• Trustee: Spectacle Makers Charity</li> </ul>	<ul style="list-style-type: none"> <li>• Member: Council</li> <li>• Member: Audit, Risk and Finance Committee</li> <li>• Member: Investment Committee</li> <li>• Council Lead: Legislative Reform</li> </ul>	<ul style="list-style-type: none"> <li>• Close Relative: General Optical Council Case Examiner</li> <li>• Close Relative: Member, College of Optometrists</li> <li>• Spouse: Director - BP Eyecare Ltd</li> </ul>
Tim <b>PARKINSON</b> Lay Member	<ul style="list-style-type: none"> <li>• Director: Tim Parkinson Limited (consultancy not to optical sector or organisations linked to optical sector)</li> </ul>	<ul style="list-style-type: none"> <li>• Fellow: Chartered Management Institute</li> <li>• Membership of the Institute of Water</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>	<ul style="list-style-type: none"> <li>• Lay member: Council</li> <li>• Chair: Investment Committee</li> <li>• Chair: Companies Committee</li> <li>• Council Lead: FTP</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>
Roshni <b>SAMRA</b> Registrant (OO)	<ul style="list-style-type: none"> <li>• Locum optometrist (occasional): various high street or independent practices</li> <li>• Professional Clinic Manager: City Sight, City University</li> <li>• Student: City University (MSc in Clinical Optometry)</li> <li>• Global Medical Advisor, Medical and Professional Affairs, at EssilorLuxottica.</li> </ul>	<ul style="list-style-type: none"> <li>• Member of the College of Optometrists</li> <li>• Member of AOP</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>	<ul style="list-style-type: none"> <li>• Member: Council</li> <li>• Member: Registration Committee</li> <li>• Council Lead: GOC Refresh (People Plan)</li> </ul>	<ul style="list-style-type: none"> <li>• Works with a current General Optical Council Case Examiner</li> </ul>

<p>William <b>STOCKDALE</b></p>	<ul style="list-style-type: none"> <li>• Own an organisation in the Optical Sector - Optomise Ltd 50% Shareholding.</li> <li>• Own an organisation in the Optical Sector - Telford Opticians 50% Stake.</li> </ul>	<ul style="list-style-type: none"> <li>• Member of ABDO</li> <li>• Member of FODO</li> <li>• Member of ONI</li> </ul>	<ul style="list-style-type: none"> <li>• Chair: Optometry Northern Ireland</li> <li>• Member of a consultative body in the Optical Sector Member BSO Ophthalmic Committee.</li> <li>• Non-Executive Director FODO</li> </ul>	<ul style="list-style-type: none"> <li>• Member: Registrant Council Member</li> <li>• Member: Nominations Committee</li> <li>• Member: Advisory Panel - Standards Committee.</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>
<p>Dr Anne <b>WRIGHT</b> CBE Lay Chair</p>	<ul style="list-style-type: none"> <li>• None</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>	<ul style="list-style-type: none"> <li>• Committee member: The Shaw Society</li> <li>• Director of Circa management company</li> </ul>	<ul style="list-style-type: none"> <li>• Chair: Council</li> <li>• Chair: Nominations Committee</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>

**GENERAL OPTICAL COUNCIL  
DRAFT Minutes of the public Council  
meeting held on Wednesday 13 December 2023 at 10am via Microsoft Teams**

Present:	Dr Anne Wright CBE (Chair), Josie Forte, Mike Galvin, Lisa Gerson, Ken Gill, Clare Minchington, Frank Munro, David Parkins, Tim Parkinson and William Stockdale.  Jamie Douglas and Harry Singh (Council Associates).
GOC attendees:	Kayleigh Allen (Head of Case Progression), Carole Auchterlonie (Director of Regulatory Operations), Steve Brooker (Director of Regulatory Strategy), Marie Bunby (Policy Manager), Rebecca Chamberlain (Standards Manager), Nicole Fitzgerald (Communications Manager), Yeslin Gearty (Director of Corporate Services), Kiran Gill (Chief Legal Officer), Philipsia Greenway (Director of Change), Angharad Jones (Policy Manager), Vikki Julian (Head of Communications), Nazia Khanom (Governance Officer) (Minutes), Lorene Miller (Diary Administrator), Leonie Milliner (Chief Executive Officer and Registrar), Jem Nash (EDI Manager), Vikram Saklani (Communications Officer), Andy Spragg (Head of Governance), Charlotte Urwin (Head of Strategy, Policy and Standards), Catherine Walker (Communications and Public Affairs Officer) and Manori Wickremasinghe (Chief Finance Officer).
External attendees	Siobhan Carson (Professional Standards Authority), Olivier Deneve (College of Optometry), Dan Hodgson (FODO Head of Policy and Public Affairs), Selina Powell (Optometry Today) and Alan Tinger (FODO Director of Regulatory Affairs).
	<b>Welcome and apologies</b>
1.	The Chair welcomed those in attendance.
2.	Apologies were received from Rukaiya Anwar (Council Associate), Deepali Modha (Council Associate) and Sinead Burns.
	<b>Declarations of interests C49(23)</b>
3.	Updates were noted as follows: <ul style="list-style-type: none"> <li>It was noted all registrant Council members had an interest in the registrant fees 2024/25 item. The interest was managed by ensuring that the composition of Council included both lay and registrant members, and therefore no further action was required.</li> </ul>
	<b>Minutes of the meeting held on 27 September 2023 C50(23)</b>
4.	The minutes were approved as an accurate record of the meeting.
	<b>Action points update C51(23)</b>

5.	Council noted updates on previous actions.
	<b>Matters arising</b>
6.	<b>Action: Governance and Compliance Manager to correct EDI annual report 2022/23 C38(23) action deadline to March 2024.</b>
	<b>Standards Review C52(23)</b>
7.	The Director of Regulatory Strategy introduced the item. It was noted that desk-based analysis, advice from Council committees and stakeholder engagement had suggested that the structure and content of the current GOC standards worked well and that significant changes to the standards were not required. However, revisions and additions to strengthen existing standards were proposed and these were now ready to go to public consultation. Proposed additions to the standards, on communicable diseases and sexual conduct, were noted.
8.	The Standards Manager presented the proposed revisions to the standards, the draft consultation document and the draft equality impact assessment. It was noted that the proposed revisions had been thoroughly discussed at various stakeholder engagements and by the Advisory Panel and Standards Committee.
9.	Council commended the very high standard of the documents produced. It was suggested that the use of AI, technology and digital technology should be referred to under a single umbrella term of 'digital technology' to ensure consistency throughout the document. Council discussed some of the language proposed in the standards and advised to try to avoid using specific examples. It was suggested question 8 of the consultation should be reworded to avoid using the word 'transition' and describe the period between Council approval of the new Standards and the date they would come into effect, to ensure clarity. Further clarity was also suggested for questions 9 and 11, as it was unclear which statement they related to. Council also suggested that an explanatory paragraph be included on GOC requirements regarding the Welsh language, as it relates to the standards.
10.	Council: <b>approved</b> the proposal to consult on the proposed draft revisions to the standards and the draft equality impact assessment. <b>delegated</b> approval of the consultation document, equality impact assessment and revisions to the standards to the Chief Executive and Registrar in consultation with the Chair of Council and the Chair of Standards Committee.
	<b>Registrant fees 2024/2025 and future fee strategy C53(23)</b>
11.	Council was advised the Audit, Finance and Risk Committee (ARC) had already considered the proposal, and Ken Gill would represent ARC in the absence of the Committee Chair. The Director of Corporate Services presented the item. A registrant fee increase of 6.6%, in line with the rate of Consumer Price Index (CPI) was proposed, following the direction of Council at its meeting in December 2022. Council approval to raise ancillary registration fees by £5.00 was also sought. It was proposed the low-income discount remained at its present level and would be reconsidered next year.
12.	It was reported that the proposed updated reserves policy and financial performance review illustrated planned spend from reserves for the next five-years. The fee increase would allow GOC to meet the Charity Commission guidelines in maintaining minimum

	levels of reserves. The GOC anticipated moving towards a longer-term fee strategy as part of its 2025-30 strategy, to ensure businesses and registrants have more certainty about future registrant fee levels. It was noted ARC had supported the recommendations, noting the importance of strategic long-term planning within the context of the corporate and financial strategy whilst maintaining strong stakeholder engagement.
13.	Council supported the proposal and suggested clear communications would be necessary to explain the reason for the fee increase. It was confirmed there was no current data available on the proportion registrant fees paid for by their employers. Council noted the threshold for the low-income fee was based on the threshold for government means tested benefits. Council asked if registrants could be given the option of paying their fees by direct debit to help with their cashflow. The Director of Corporate Services explained that under the registration rules, if a single monthly payment was missed, this could result in registrants being taken off the Register and pose a risk to the integrity of the Register.
14.	Council: <b>agreed</b> to increase the main registration fee and ancillary registration fees for 2024-25, whilst maintaining the low-income fee discount and non-UK fees at their current levels; and agreed with the approach of raising fees in line with inflation over the short term, in advance of agreeing a new financial strategy from 2025-30, including a new fees strategy. <b>considered</b> and <b>approved</b> the draft fee rules, as set out in annex one.
	<b>Reserves policy C54(23)</b>
15.	The Chief Finance Officer presented the item. The current reserves policy was last updated on November 2020. Changes included removing the Covid19 reserve, providing a more detailed analysis on the criteria for complex legal cases and proposing to change the total range of reserves from the bottom range of £4.8 million to £3.9 million and the top range of £9.55 million to £9.25 million, ensuring Charity Commission guidelines are followed.
16.	It was noted that the Working Capital Statement had not changed as it was linked to the Investment Policy and would be further considered alongside the five-year strategic plan. ARC confirmed that it supported the recommendation and would consider strategic financial plans and policies in future meetings.
17.	Council: <b>approved</b> the proposed, updated Reserves Policy and Working Capital Statement; and <b>delegated</b> any minor revisions to the Chief Executive and Registrar
	<b>Committee appointments for Council members C55(23)</b>
18.	The Head of Governance presented the item. There were no material changes or questions raised by Council.  <b>Action: Council members to submit corrections on Companies and Registration committee membership to the Head of Governance.</b>
19.	Council: <b>appointed</b> the named Council members to the committees listed in annex one.

	<b>Health &amp; Safety assurance report C56(23)</b>
20.	The Director of Corporate Services introduced the annual Health and Safety compliance survey, undertaken by independent specialists' consultants Stallard Kane in May 2023. A gold standard had been achieved. It was highlighted that a driving policy was being developed for consultation in the new year. A summary of the compliance report was included in the papers, as requested in a previous Council meeting.
21.	Council noted that it was an encouraging report and congratulated the Facilities team on the gold standard achieved and thanked them for their ongoing work and dedication. Council was pleased to see the report included a summary of compliance, as presented to ARC, as this included a broader view.  <b>Action: The Director of Corporate Services to include data on the four quarters rather than only two in future reports, as well as include the number of accident reports and RIDDOR reports.</b>
22.	Council discussed whether the GOC were happy with the service provided by Stallard Kane. The Director of Corporate Services confirmed there were plans to test the market for alternative consultants next year. Council discussed the GOC's responsibility for health and safety of staff working from home and was assured the Facilities team carried out regular assessments which included the home working environment.
23.	Council: <b>Noted</b> the contents of the reports.
	<b>Council's self-assessment against the Charity Governance Code C57(23)</b>
24.	The Head of Governance presented the item. This was the second self-assessment conducted under the current charity governance code. It was noted an internal audit carried out in 2023 had resulted in one recommendation to develop a clear action plan of what areas of improvement were being considered in the context of the governance review. Some areas of improvement in the annex were left blank. This did not mean that the GOC do not believe improvements could be made there but rather ensured proportionate responses, prioritising resources and ability to implement those changes.
25.	Council commended such a comprehensive report. The Head of Governance advised that safeguarding policy was an area for development which would be picked up in 2024/25. Council discussed the GOC approach to measuring its environmental, social and governance (ESG) impact. The Head of Governance assured this was an area under development with the Investment Committee holding discussions about ESG in the context of the investment strategy. Council suggested regular board discussions reflecting on performance needed to be prioritised, especially with new Council members joining. The Head of Governance would implement this in the schedule.
26.	Council: <b>approved</b> the self-assessment against the charity governance code, as set out in annex one.
	<b>Q2 2023/24 Financial performance report and forecast report C58(23)</b>
27.	The Chief Finance Officer presented the report. Business as usual surplus was highlighted, and variants were within acceptable limits. Performance across all teams

	was analysed on a monthly basis and considered for reforecasting. Long term solutions for unplanned external legal and hearing costs were being considered and would be included into the 2024/25 budget.
28.	Council congratulated the team on providing a comprehensive report. The Chief Finance Officer assured Council that the number of staff vacancies were being monitored regularly and were within industry average. Council discussed potential impact from an office move on finances. This was being considered alongside the future office accommodation project. Council was assured any rent review, reduced carbon footprint, rent free periods, would also be considered and fed into future forecasting.
29.	Council: <b>noted</b> the financial performance for the six months ending 30 September 2023 in annex one. <b>noted</b> the Q2 forecast for the current 2023-24 financial year in annex two.
	<b>Q2 2023/24 Business performance dashboard C59(23)</b>
30.	Council <b>noted</b> the report. The Head of Governance presented the Business performance dashboard report for Q2 ending on 30 September 2023. Council suggested more information on registrant engagement with the current Continuing Professional Development (CPD) cycle would be useful. Council noted that customer service excellence accreditation was received and requested an update on thinking around the customer satisfaction measure. The Head of Governance confirmed there was ongoing work to understand what compliance could look like in the future.  <b>Action: Head of Governance to amend typo under for Q2 under ‘hearings concluded first time’ to read “88%” rather than “70%”.</b>  <b>Action: Director of Regulatory Strategy to consider additional measure for registrant engagement with CPD.</b>  <b>Action: Head of Governance to consider updates to the customer satisfaction measures</b>
	<b>Q2 2023/24 Business plan assurance report C60(23)</b>
31.	The Head of Governance introduced the report. This included critical and essential activities, which included a commentary for Council. It was noted that the majority of the business was on track.  Council <b>noted</b> the report.
	<b>Chair’s report C61(23)</b>
32.	The Chair of Council introduced the report. As this was the last Council meeting for two Council Associates, Rukaiya Anwar and Harry Singh, they were thanked for their excellent contributions to Council. Recruitment for the next Council Associates cohort would begin in 2024. The Chair congratulated William Stockdale for his award for domiciliary care. The Chair congratulated Helen Tilly, previous Council Member, who was awarded optician of the year for Optometry Wales. The Chair congratulated Tim Parkinson on his GOC Council reappointment by the Privy council. The Chair expressed her appreciation to all staff involved in recent staff engagement activities.

	Council <b>noted</b> the report.
	<b>Chief Executive and Registrar’s report C62(23)</b>
33.	The Chief Executive and Registrar presented the report which set out her principal activities since the last Council meeting. Council commended the hard work carried out. It was noted that the internship planned with the Thomas Pocklington Trust was welcomed, though the language used in respect to sight impairment may need revision to align with terminology used in clinical practice.  <b>Action: The Chief Executive and Registrar to review use of language in the internship advertisement.</b>
34.	Council <b>noted</b> the report.
	<b>Advisory Panel minutes – 6 November 2023 C63(23)</b>
35.	The Chair of the Advisory Panel provided an update on discussions at the last meeting, including the standards review, leadership and social media and shaping the future. Advisory Panel members had raised a query regarding how the advice of the panel was considered by Council.
36.	Council <b>noted</b> the report.  <b>Action: Head of Governance to meet with Advisory Panel chair and Chair of Council to discuss how feedback from the Panel and Council can be formalised.</b>
	<b>Council forward plan C64(23)</b>
37.	The Head of Governance confirmed an item on Budget and Business plan would be presented at the next Council meeting. This would be reviewed by ARC before being referred to Council. Council was advised the forward plan for the year ahead was currently being finalised and would be brought to the next Council Meeting.
	Council <b>noted</b> the Council forward plan.
	<b>Any other business</b>
38.	There was none.  The Chair of Council thanked all staff for their contributions and production of an excellent set of meeting papers.
	<b>Date of the next meeting</b>
39.	Council noted the date of the next public meeting as <b>Wednesday 13 March 2024.</b>
	<b>Close</b>
40.	The meeting closed at 1.42pm.

**COUNCIL**

**Actions arising from Public Council meetings**

**Meeting Date:** 13 March 2024

**Status:** For noting

**Lead Responsibility and Paper Author:** Andy Mackay-Sim, Head of Governance

**Purpose**

This paper provides Council with progress made on actions from the last public meeting along with any other actions which are outstanding from previous meetings.

The paper is broken down into 3 parts: (1) action points relating to the last meeting, (2) action points from previous meetings which remain outstanding, and (3) action points previously outstanding but now completed. Once actions are complete and have been reported to Council they will be removed from the list.

**Part 1: Action Points from the Council meeting held on 13 December 2023**

Reference	By	Description	Deadline	Notes
<b>Matters arising</b>	Governance and Compliance Manager	Governance and Compliance Manager to correct EDI annual report 2022/23 C38(23) action deadline to March 2024.	March 2024	<b>Complete</b>
<b>Committee appointments for Council members C55(23)</b>	Head of Governance	Council members to submit corrections on Companies and Registration committee membership to the Head of Governance.	March 2024	<b>Complete</b>
<b>Health &amp; Safety assurance report C56(23)</b>	The Director of Corporate Services	The Director of Corporate Services to include data on the four quarters rather than only two in future reports, as well as include the number of accident reports and RIDDOR reports.	March 2024	<b>Complete</b> Future reports will contain additional data
<b>Q2 2023/24 Business performance dashboard C59(23)</b>	Head of Governance	Head of Governance to amend typo under for Q2 under 'hearings concluded first time' to	March 2024	<b>Complete</b> – typo noted in the minutes. No further action required.

		read “88%” rather than “70%”.		
<b>Q2 2023/24 Business performance dashboard C59(23)</b>	Director of Regulatory Strategy	Director of Regulatory Strategy to consider additional measure for registrant engagement with CPD.	March 2024	<b>Complete</b> a template for regular reporting of statistics to Council and external stakeholders has been agreed.
<b>Q2 2023/24 Business performance dashboard C59(23)</b>	Head of Governance	Head of Governance to consider updates to the customer satisfaction measures.	June 2024	<b>Ongoing</b> – due for revision in 2024/25.
<b>Chief Executive and Registrar’s report C62(23)</b>	The Chief Executive and Registrar	The Chief Executive and Registrar to review use of language in the internship advertisement.	March 2024	<b>Complete</b> – language was consistent with guidance from Thomas Pocklington Trust.
<b>Advisory Panel minutes – 6 November 2023 C63(23)</b>	Head of Governance	Head of Governance to meet with Advisory Panel chair and Chair of Council to discuss how feedback from the Panel and Council can be formalised.	June 2024	<b>Ongoing</b> – This will be organised for Q1` 2024/25.

**Part 2: Action points from previous meetings which remain outstanding.**

Reference	By	Description	Deadline	Notes
<b>NONE</b>				

**Part 3: Action points previously outstanding but now completed.**

Reference	By	Description	Deadline	Notes
<b>EDI annual report 2022/23 C38(23) 27.09.2023</b>	Head of Governance	Head of Governance to review EDI reporting to Council for 2024-25.	<b>March 2024</b>	<b>Complete</b> Subject to approval, the progress of the EDI action plan will be the basis for EDI reporting throughout 2024/25.

**Council  
C04(24)**

## **Consultation on draft strategy**

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**Meeting:** 13 March 2024

**Status:** For decision

**Lead responsibility:** Leonie Milliner, Chief Executive and Registrar

**Paper Author(s):** Charlotte Urwin (Head of Strategy, Policy and Standards)  
Steve Brooker (Director of Regulatory Strategy)

**Council lead(s):** Clare Minchington (Senior Council Member)

## **Purpose**

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1. To seek Council approval of the draft consultation document and equality impact assessment for the proposed GOC corporate strategy 2025-30 ahead of public consultation.

## **Recommendations**

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2. Council is asked to:
  - **approve** the draft consultation document and equality impact assessment on the GOC corporate strategy 2025-30; and
  - **delegate** approval of the consultation document and equality impact assessment to the Chief Executive and Registrar in consultation with the Chair of Council, if Council request minor changes to the documents at the meeting.

## **Strategic objective**

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3. This work lays the foundations for agreeing the strategic objectives for 2025-30.

## **Background**

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4. Council noted the approach to development of the 2025-30 corporate strategy at its public meeting in June 2023. Council has discussed the vision, mission and strategic objectives elements of the strategy at two separate Council strategy days in November 2023 and January 2024, as well as at private Council in December 2023.
5. In December 2024 Council will be asked to approve the proposed vision, mission, values, and strategic objectives for 2025-30; associated equality, diversity and inclusion, financial, digital and people sub-strategies; as well as a report summarising the feedback from the consultation. We expect to publish the final strategy in January/February 2025.

## Analysis

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6. We have carried out several activities to support the development of our new strategy. To inform our horizon scanning activities we engaged with Council, Advisory Panel, professional and representative bodies, charities interested in eye care and others. We supplemented those conversations by looking at research in the sector, news articles of relevance and reviewing other regulators' and sector bodies' strategies to see what we could learn. We also conducted Strengths, Weaknesses, Opportunities and Threats (SWOT) sessions with Council, Senior Management Team (SMT) and Leadership Team. We have fed all this engagement and research into the three strategic objectives we have identified.
7. Our new strategy is deliberately written at a more high-level than our current strategy. We will provide more detailed information on how we will achieve each objective in our annual business plans. The strategy will also be supported by the following documents:
  - Equality, diversity and inclusion strategy
  - Financial strategy and reserves policy
  - Digital strategy
  - People plan
  - Business performance reporting framework
8. In its discussions Council asked for a new vision statement which is concise and focused on what the GOC is seeking to achieve for the purpose of public protection. Although we will continue to work towards our ambition to become a world-class regulator, after five years of organisational transformation, it is important to signal our change in emphasis to a more external focus.
9. The draft mission statement is mostly unchanged, but the language has been updated to shift from 'optical' to 'eye care' and 'professions' to 'services'.
10. Therefore, the core elements of the draft strategy are as follows:

**Proposed Vision:**

Safe and effective eye care for all

**Proposed Mission:**

To protect the public by upholding high standards in eye care services

**Proposed Strategic Objectives:**

Creating fairer and more inclusive eye care services

Supporting responsible innovation and protecting the public

Preventing harm through agile regulation

## **Finance**

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11. An associated financial strategy and reserves policy to support the effective realisation of the proposed financial strategy is in development. Key proposals arising from the consultation will be assessed as part of the ongoing strategy development.

## **Risks**

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12. The main risk is that stakeholders do not support the draft strategy. This has been mitigated by horizon scanning and stakeholder engagement in preparing the consultation. Council will approve a final strategy incorporating feedback received.

## **Equality Impacts**

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13. We have prepared a draft equality impact assessment as per our usual consultation processes, although this is more challenging for a draft strategy because the impact assessment tool is more appropriate for assessing individual projects.
14. The draft equality impact assessment is separate from the equality, diversity and inclusion strategy, which is currently under development.

## **Devolved nations**

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15. We have engaged with the national optometric advisers and their equivalents in all four nations as part of our strategy development and will engage with stakeholders across the four nations during the consultation.
16. We will translate the consultation document and draft equality impact assessment into Welsh, to ensure that we comply with the Welsh Language Standards.

## **Communications**

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### **External communications**

17. Council has previously considered a communications plan for developing the strategy. We will publicise the draft strategy consultation launch through a press release and information on social media.

### **Internal communications**

18. We will hold a consultation and engagement session for all GOC staff on the draft strategy during the public consultation.

## **Next steps**

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19. Subject to Council approval, we will arrange for translation of the consultation document into Welsh and build the consultation platform. We anticipate that we will launch the consultation in May for a period of twelve weeks.

## **Attachments**

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Annex one: Draft consultation document

Annex two: Draft equality impact assessment

Annex one: Draft consultation document

## Consultation on draft General Optical Council strategy for 2025 - 2030

**[DATE]**

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**Overview..... 3**

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**Section 3: The foundations of our strategy, our vision and mission..... Error!**  
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**Section 6 How to respond to the consultation..... Error!** Bookmark not defined.

## Overview

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### What we're doing

1. The General Optical Council (GOC) is the regulator for the optical professions in the UK. We currently register around 33,000 optometrists, dispensing opticians, student optometrists, student dispensing opticians and optical businesses. The groups on our register are called registrants. For more information, please visit our website: <https://www.optical.org/>
2. We have 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 fit to practise or train as optometrists or dispensing opticians, and bodies corporate who are fit to carry on business as optometrists or dispensing opticians; and
  - investigating and acting where registrants' fitness to practise, train or carry on business may be impaired.
3. This consultation seeks views on our draft strategy for the period 1 April 2025 – 31 March 2030.
4. This consultation will be open from **INSERT** to **INSERT**, and you can respond either using our [online consultation platform](#) or by emailing [consultations@optical.org](mailto:consultations@optical.org)

### Why we're doing this now

5. Our current strategy 'Fit for the future' covers the period 1 April 2020 to 31 March 2025. <sup>1</sup>
6. We consulted on our last strategy before finalising it and are grateful for all the comments we received. We are consulting on our new strategy now, so that stakeholders can shape the plan as it develops and so that we can finalise the plan in good time for the new strategic period, starting April 2025.

### What will happen next?

7. The public consultation will be open for 12 weeks.
8. Once the consultation has closed, we will analyse all the comments we have received and identify whether we need to make changes to our strategy. We will ask our Council to approve the final strategy, along with a document summarising the responses we received to the consultation and the changes we are making in response.

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<sup>1</sup> [Fit for the future - strategy 1 April 2020 to 31 March 2025 | GeneralOpticalCouncil](#)

9. We expect to publish our new strategy in early 2025, accompanied by an equality, diversity and inclusion strategy.

### **Section 1: Fit for the Future – reflections on our current strategy**

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10. Our 'Fit for the future' strategy for 1 April 2020 to 31 March 2025 described what we planned to do over those five years to achieve our vision of being recognised for delivering world-class regulation and excellent customer service.
11. In 2023 the Professional Standards Authority (PSA) assessed that, for the first time in just under a decade, the GOC met all 18 of the PSA's Standards of Good Regulation.<sup>2</sup> In their assessment, the PSA particularly highlighted the improvements made to the time it takes to progress cases through our fitness to practise system. They also highlighted our strong performance on equality, diversity and inclusion.
12. Under our current strategy we have achieved the following:
- Completed our strategic review of education and published updated Education and Training Requirements (ETR). These ensure that the qualifications we approve are fit for purpose and meet patient and service-user needs. They also ensure optical professionals have the expected level of knowledge, skills and behaviours and the confidence and capability to keep pace with changes to future roles, scopes of practice and service redesign in a rapidly changing landscape across all four nations of the UK.
  - Supported the sector in its journey to implement the ETR, including facilitating knowledge-led collaborations within the optical sector.
  - Delivered a new Continuing Professional Development (CPD) scheme, which gives greater flexibility and scope for the professional development for optometrists and dispensing opticians.
  - Carried out one of our most substantial engagement activities across the sector, with our call for evidence on the Opticians Act 1989 and associated policies. This brought forward several critical considerations for the future of the professions regulated by the GOC and eye health more broadly.
  - Recruited new Council Associates to give registrants at an early stage in their careers an opportunity to gain insight and experience of working with the Council, and Council the benefit of fresh and diverse perspectives.
  - Made significant improvements to the timeliness of fitness to practise cases, so that we have now achieved the PSA's Standards of Good Regulation and introduced a new illegal practice protocol.
  - Published an anti-racism statement as part of our wider commitment to embed anti-racism in our policies and practices, and used the substantially improved data we collect to embed Equality, Diversity and Inclusion (EDI) in everything we do.

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<sup>2</sup> [PSA review concludes that the General Optical Council meets all Standards of Good Regulation | GeneralOpticalCouncil](#)

- Invested in our digital transformation, to ensure our regulatory, communication and internal operations are supported by efficient and effective utilisation of technology, including the launch of a new website.
- Made improvements to our Customer Service and achieved the Customer Excellence Standard
- Implemented a new Directorate structure and updated operating model, including investing in our people and processes.

## Section 2: The strategic context

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13. 2020 proved to be an unprecedented time for the eye care professions and services. We could not have anticipated that our 2020-2025 strategy would have been published during such extraordinary circumstances. The pandemic accelerated changes already happening, for example the increased use of digital technologies and changing workforce patterns.
14. We wanted to ensure we fully understood the context in which we are setting our new strategy. We engaged with our Council, Advisory Panel, professional and representative bodies, charities which represent patients with eye care needs, and others. We are grateful to all those who provided their feedback and engaged with us during the process of developing our strategy. We supplemented those conversations by looking at research in the sector, news articles of relevance and reviewing other regulators' and sector bodies' strategies to see what we could learn.
15. We have identified the following external influences as being particularly relevant to our work.

### **Changes in patient needs and delivery of eye care**

16. An ageing population will lead to increased comorbidities and eye health concerns and be more likely to need domiciliary care, at home services or more complex care.<sup>3</sup> At the same time, patients will continue to expect high quality care, with a move towards increased partnership and joint decision making with eye care professionals to maintain their eye health and correct refractive error. A continued cost of living crisis could lead to increased health inequalities because patients are unable to afford appropriate eye care or a lack of transparency on cost of care prevents patients accessing care.
17. Ophthalmology continues to be the highest outpatient attendance of any recorded speciality but there continue to be concerns about the capacity of the ophthalmology workforce to continue deliver hospital-based care given predicted future volume.<sup>4</sup> We are already seeing increased management of eye conditions in the community setting, at home or other locations away from hospital and this trend is likely to continue.

### **Changes in the workforce, skill acquisition and utilisation**

18. We will continue to see changes to professionals' scope of practice and opportunities for the greater utilisation of advanced post-registration professional and clinical skills to support the delivery of service redesign, to support patients to make shared care decisions, or to be able to use innovative technologies. This offers opportunities for professionals to undertake additional post-registration qualifications and apply advanced skills such as independent prescribing to support patient care and service

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<sup>3</sup> [Living longer - Office for National Statistics \(ons.gov.uk\)](https://www.ons.gov.uk)

<sup>4</sup> [Summary Report - Treatment Specialities - NHS Digital](#)

redesign. This could also raise challenges for employers, professional bodies and regulators in maintaining oversight, reducing risk, and ensuring standards are met.

19. Workforce shortages may become more acute at a time of increasing demand. A continued shift in working patterns, such as more locums and part-time working, and choice of geographical location may reduce the effective size of the workforce, even if registrant numbers grow steadily. The wellbeing of the workforce will remain a priority, in the context of GOC survey data showing considerable burnout and disillusionment in the profession, as well as alarming levels of harassment, bullying, abuse and discrimination by patients, colleagues and managers.<sup>5</sup>

### **Innovation and technology**

20. Scientific advances like DNA sequencing at birth, gene therapy and editing, nanomedicine, stem-cell medicine, and smart bodies are expected to enable more personalised care and should improve prevention, early detection, and treatment of many common eye conditions.
21. Technology will continue to enable changes in eye care, enabling more digital, virtual, or remote eyecare, which could result in increased competition or international delivery of services into the UK. Increasing use of AI, particularly in the diagnosis of conditions or in the screening or triaging of patients, could see conditions diagnosed at an earlier stage but requires a workforce which understands that technology. We also expect to see increased automation, taking on some tasks undertaken by professionals or for chatbot style patient engagement and advice.
22. We will continue to see changes in the eye care market. Independent practices may change business models and move to join larger networks or franchises. We may also see a greater number of practices choosing to no longer deliver NHS services. On the other hand, more practices may get involved in the delivery of enhanced eye care, with a range of schemes available in all four nations.

### **Regulatory, political and international developments**

23. An overhaul of the Opticians Act promises to expand and develop business regulation, give GOC greater freedoms to make rules and move GOC's governance model to a unitary board.<sup>6</sup> The timetable for that is still unknown, although we expect it to happen in the lifetime of this strategy. We will continue to deliver our four main statutory functions but increase our role in proactive regulation, preventing harm before it happens, through improved evidence gathering, analysis and identification of appropriate responses.
24. The Covid-19 Public Inquiry could trigger reforms to specific aspects of healthcare regulation. The Government's response to previous independent inquiries is ongoing, which could lead to changes in areas like clinical indemnity cover and declaring

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<sup>5</sup> [GOC Registrant Survey 2023](#)

<sup>6</sup> [Call for evidence on the Opticians Act and consultation on associated GOC policies](#)

professionals' conflicts of interest. Other Government reviews, for example on DBS (Disclosure and Barring Service) checks, could also prompt reform.

25. Trade deals negotiated by government may impact on international registration processes. Meanwhile, review of EU-derived laws in areas like data protection and consumer rights may lead to legislative reforms that may impact on eye care services and the GOC's operations.

### **Section 3: The foundations of our strategy: our vision and mission**

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26. Our proposed strategy outlines our vision, mission, and strategic objectives for the next five years, sustaining our success as a high performing regulator, building on our strengths and addressing the areas where we wish to improve, and setting out our vision for change. Our ambition remains to be a world-class regulator; agile, robust and effective in the deployment of our regulatory responsibilities, well regarded by stakeholders and continuing to meet all the PSA standards of good regulation.
27. The proposed strategy will be supported by the following documents:
  - Equality, diversity and inclusion strategy
  - Financial strategy
  - Digital strategy
  - People plan and
  - Business performance reporting framework
28. For the purposes of our proposed new strategy, we have decided that we will describe our proposed strategic direction for the purpose of public consultation at a high-level. Once agreed by Council, post consultation, we will provide more detailed information on how we will achieve each objective in our annual business plans.
29. We expect to begin the next strategy from a strong position, with positive stakeholder relationships, sound finances, including healthy reserves, and having delivered major investment in digital transformation that promises to improve our customer service. We will continue to develop our internal capacity to deliver the ambition and shift in approach contained in this corporate strategy, by implementing financial, people, digital and EDI sub-strategies to support the achievement of our proposed mission, vision and strategic objectives by 2030.
30. The focus of this strategy is on areas of change, but we are committed to continuous improvement across our core statutory functions such as maintaining the registers, approving qualifications, and managing our fitness to practise operations. Also, the effective realisation of major reforms delivered in the current strategy period, such as in education and training, updated professional standards and digital transformation, will be supported and adjustments made as necessary.

#### **Proposed Vision**

31. Safe and effective eye care for all

#### **Proposed Mission**

32. To protect the public by upholding high standards in eye care services

## Section 4: Proposed strategic objectives

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33. We have identified three key objectives which we propose will underpin our strategy. We recognise that the objectives are intersecting and will naturally overlap. For example, addressing inequalities in the first objective gives this due prominence but these issues will cut across all our work.
34. In identifying these objectives, we have considered both external and internal aspects of our work. The first two objectives are externally focused, and the third is more internally focused.

### **Creating fairer and more inclusive eye care services**

35. There is much to celebrate about the last five years. Despite the challenges of COVID-19, public trust in registrants and satisfaction with service remains high. People are increasingly turning to registrants for eye issues as their first port of call instead of GPs. Registrants are upskilling and taking on more clinical roles, enabling patients to access a wider range of eye care services in their communities.
36. Even so, there remains significant preventable sight loss. And there is evidence to suggest that the successes of the last five years are not equally shared, with some groups of patients facing higher barriers to accessing services and getting worse outcomes. For example, our public perceptions survey shows that people from ethnic minorities are less likely to get their sight tested. Also, people with disabilities are more likely to report things going wrong during their visit. External surveys have highlighted the impact of the cost-of-living crisis as a barrier to accessing eye care. Availability of enhanced services differs both between nations and within nations.
37. While our equalities data shows the registrant base is more diverse than ever before, our registrant survey shows that experiences of working in the sector are unequal. Abusive behaviour, harassment and discrimination are higher in this sector than elsewhere in the NHS and more likely to be experienced by some population groups. We risk losing good professionals when demand for their services is rising, and the unsafe working environments these behaviours create puts patient safety at risk.
38. Such problems are not unique to this sector. Other healthcare regulators are giving these issues more attention, while the PSA is enhancing its scrutiny of regulators on EDI issues and encouraging greater involvement in addressing health inequalities. EDI will be embedded across our work and throughout the professional lifecycle from education and training through registration, setting standards and fitness to practise. However, while regulation can positively contribute to this arena it cannot provide all the solutions. Since these issues are structural and multifaceted addressing them will require a sector-wide effort with partnership and collaboration across many actors.
39. Priorities in 2025-30 under this theme will include:

- using research insight and data to highlight inequalities facing the public, patients and professionals.
- deploying our regulatory levers to help reduce barriers to people accessing services, support those in vulnerable circumstances to receive high quality care and tackle negative working environments.
- monitoring for and addressing any disproportionate representation of groups with protected characteristics in the GOC's regulatory processes.

### **Supporting responsible innovation and protecting the public**

40. Developments in technology, service delivery, business models, commissioning and working patterns are changing the face of eye care. These changes present both opportunities and challenges which regulation must respond to.
41. There are growing concerns about workforce shortages in some geographic areas. By realising the full benefits of our education and training reforms, thinking strategically about post-registration qualifications and delivering a more flexible system of CPD, regulation can support the professions to both grow in size and develop their roles to meet more patient eye care needs.
42. Striking the right balance between supporting responsible innovation, protecting the public and maintaining public confidence in the professions and businesses we regulate is likely to be a recurring theme during a period of potentially rapid change. Innovation has transformed eye care in recent decades and future developments promise to reduce barriers to access and deliver better outcomes. Balanced with this, as registrants undertake more complex clinical work, regulation must respond to a changing risk profile. Our focus will be on creating a flexible, agile regulatory framework that supports innovation while maintaining the necessary safeguards.
43. Reform of the Opticians Act will modernise our approach to business regulation and plug important gaps in public protection. Updating our business standards will be an early priority in the strategy period. Legislative reform will also give us freedom to make and amend our own rules, some of which are unchanged for many years, making us better able to support the sector to adapt to a changing environment.
44. Priorities in 2025-30 under this theme will include:
  - supporting registrants to deliver more clinical eye care by realising the full benefits of our education and training reforms and taking a more strategic approach to post-registration qualifications.
  - reforming our CPD system so that it focuses on the quality rather than quantity of professional development and supports the expanded clinical roles registrants will perform within service redesign.
  - extending regulation to all businesses carrying out restricted activities underpinned by updated standards of conduct for business registrants.

### **Preventing harm through agile regulation**

45. Our style of regulation will evolve to meet modern expectations of regulators and face current challenges. As in healthcare so in regulation, preventing harm before it arises is better than treating problems after the fact. This focus on prevention will cut across our work underpinned by strengthening our approach to data and insight and translating this into effective action. Linked to this, we will exercise proactive leadership on topical issues and collaborate on solutions to issues facing the sector.
46. We will exploit opportunities to share our registration and survey data to better support commissioners to plan services and for patients to locate and benefit from the wider range of services now delivered by registrants in their communities.
47. Inquiries into poor patient care often highlight a failure to listen to the concerns of patients or service users. The GOC ultimately exists to protect the public, so we wish to strengthen the user voice across our work, enabling us to put the interests of the public and patients at the heart of regulation. This includes better understanding the views and experiences of the public and patients through the research we commission, building our relationships with organisations representing these groups, and ensuring these interests are at the forefront in shaping the decisions we take.
48. We will continue to actively prepare for legislative reform to the Opticians Act, although the timing is unknown. Further, Charity Commission requirements, revised PSA standards and other external drivers, may require changes to our governance, financial management and operating model. While often invisible to stakeholders these arrangements provide the firm foundations underpinning all our activities.
49. Priorities in 2025-30 under this theme will include:
  - putting the public and patients at the heart of our regulatory approach by investing more in our research activities, engaging better with patient groups and strengthening the user voice in our decision-making structures.
  - shifting to a more anticipatory model of regulation that seeks to prevent harm based on a risk-based, data-driven approach that joins up our intelligence and insight and translates this into effective action.
  - supporting workforce planning and patient choice by collecting better data about registrants and improving how we publish and share this with others.
  - changing our governance arrangements and other internal processes in response to legislative reform, including through the creation of a unitary board and reviewing our advisory committee structure.

## Section 5: Seeking your views

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50. Below we have set out some questions for you to consider.
51. We have asked questions 9 – 11 to test our compliance with the Welsh language standards, which aim to promote and facilitate use of the Welsh language and ensure that the Welsh language is not treated less favourably than the English language.<sup>7</sup>

**Q1. Do you agree with our vision ‘safe and effective eye care for all’**

Yes

No

Not sure

Please explain your reasoning.

**Q2. Do you agree with our mission ‘to protect the public by upholding high standards in eye care services’**

Yes

No

Not sure

Please explain your reasoning.

**Q3. Are there any other developments we have missed from our analysis of the strategic context in section 2?**

Yes

No

Not sure

If yes, please explain the missing developments.

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<sup>7</sup> Welsh Language Commissioner, 2023, Welsh Language Standards, [Welsh language standards \(welshlanguagecommissioner.wales\)](https://welshlanguagecommissioner.wales)

**Q4. Do you agree with strategic objective one 'Creating fairer and more inclusive eye care services'**

**Yes**

**No**

**Not sure**

**Please explain your reasoning.**

**Q5. Do you agree with strategic objective two 'supporting responsible innovation and protecting the public'**

**Yes**

**No**

**Not sure**

**Please explain your reasoning.**

**Q6. Do you agree with strategic objective three 'preventing harm through agile regulation'?**

**Yes**

**No**

**Not sure**

**Please explain your reasoning.**

**Q7. Do you think any of our strategic themes could affect any individuals or groups with one or more of the protected characteristics defined in the Equality Act 2010?**

**Yes**

**No**

**Not sure**

**If yes, please explain how.**

**Q8. Do you think any of the strategic themes could affect any other individuals or groups, either positively or negatively?**

**Yes**

**No**

**Not sure**

**If yes, please explain how.**

**Q9. 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?**

**Yes**

**No**

**Not sure**

**If yes, please explain your reasoning.**

**Q10. 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?**

**Yes**

**No**

**Not sure**

**If yes, please explain how.**

**Q11. 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?**

**Yes**

**No**

**Not sure**

**If yes, please explain your reasoning.**

**Q12. Is there anything else you think we should consider as part of the development of our strategy?**

**Yes**

**No**

**Not sure**

**If yes, please explain your reasoning.**

## **Section 6 How to respond to the consultation**

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52. This consultation will be open from INSERT to INSERT.
53. We would be grateful if you could input your responses into our consultation hub so that we can collect information about you or your organisation and whether your response can be published.
54. However, if that is not possible, you can respond to the consultation by emailing [consultations@optical.org](mailto:consultations@optical.org)

**Annex two: Draft equality impact assessment**

**Impact Assessment Screening Tool**

<b>Name of policy or process</b>	GOC Strategy 2025 – 2030
<b>Purpose of policy or process</b>	To set out the GOC’s strategic direction for the period 2025-2030 and identify key strategic themes within that period
<b>Team/Department</b>	Policy and Standards
<b>Date</b>	25/01/2024
<b>Screen undertaken by</b>	Charlotte Urwin, Head of Strategy, Policy and Standards
<b>Approved by</b>	Steve Brooker, Director of Regulatory Strategy
<b>Date approved</b>	22 February 2024
<b>Instructions:</b>	<ul style="list-style-type: none"> <li>• Circle or colour in the current status of the project or policy for each row.</li> <li>• <b>Do not miss out any rows.</b> If it is not applicable – put N/A, if you do not know put a question mark in that column.</li> <li>• This is a live tool, you will be able to update it further as you have completed more actions.</li> <li>• Make sure your selections are accurate at the time of completion.</li> <li>• Decide whether you think a <b>full</b> impact assessment is required to list the risks and the mitigating/strengthening actions.</li> <li>• If you think that a full impact assessment is <b>not</b> required, put your reasoning in the blank spaces under each section.</li> <li>• You can include comments in the boxes or in the space below.</li> <li>• Submit the completed form to the Compliance Manager for approval.</li> </ul>

A) Impacts	High risk	Medium risk		Low risk	? or N/A
1. Reserves	It is likely that reserves may be required	It is possible that reserves may be required		No impact on the reserves / not used	
2. Budget	No budget has been allocated or agreed, but will be required	Budget has not been allocated, but is agreed to be transferred shortly	Budget has been allocated, but more may be required (including in future years)	No budget is required OR budget has been allocated and it is unlikely more will be required	
3. Legislation, Guidelines or Regulations	Not sure of the relevant legislation	Aware of all the legislation but not yet included within project/process	Aware of the legislation, it is included in the process/project, but we are not yet compliant	Aware of all the legislation, it is included in the project/process, and we are compliant	
4. Future legislation changes	Legislation is due to be changed within the next 12 months	Legislation is due to be changed within the next 24 months	Legislation may be changed at some point in the near future	There are no plans for legislation to be changed	
5. Reputation and media	This topic has high media focus at present or in last 12 months	This topic has growing focus in the media in the last 12 months	This topic has little focus in the media in the last 12 months	This topic has very little or no focus in the media in the last 12 months	
6. Resources (people and equipment)	Requires new resource	Likely to complete with current resource, or by sharing resource	Likely to complete with current resource	Able to complete with current resource	
7. Sustainability	Less than 5 people are aware of the process/project, and it is not recorded centrally nor fully	Less than 5 people are aware of the project/process, but it is recorded centrally and fully	More than 5 people are aware of the process/project, but it is not fully recorded and/or centrally	More than 5 people are aware of the process/project and it is clearly recorded centrally	
	No plans are in place for training, and/or no date set for completion of training	Training material not created, but training plan and owner identified and completion dates set	Training material and plan created, owner identified and completion dates set	Training completed and recorded with HR	N/A
8. Communication (Comms) / raising awareness	No comms plan is in place, and no owner or timeline identified	External comms plan is in place (including all relevant stakeholders) but not completed, an owner and completion dates are identified	Internal comms plan is in place (for all relevant levels and departments) but not completed, and owner and completion dates are identified	Both internal and external comms plan is in place and completed, owner and completion dates are identified	
	Not sure if needs to be published in Welsh	Must be published in Welsh; Comms Team aware		Does not need to be published in Welsh	

Please put commentary below about your impacts ratings above:

1 and 2. The new strategy will be supported by a financial strategy and reserves policy. We will also continue with our annual budgeting process and ongoing financial management. It is expected that some of the work undertaken under the new strategy, for example, improvements to MyGOC to support new CPD requirements, may need to be funded by drawing on our reserves.

3 and 4. We anticipate that the GOC's legislation will be updated within the period covered by the new strategy, as part of the Government's regulatory reform agenda.

6. Shifting to a more anticipatory model of regulation that seeks to prevent harm based on a risk-based, data-driven approach that joins up our intelligence and insight and translates this into effective action may well require additional resource to deliver this new model of regulation. This may be funded by savings elsewhere in the business, e.g. a potential office move.

8. We have a stakeholder engagement plan to support the strategy development and consultation. We will translate the consultation document into Welsh.

B) Information governance	High risk	Medium risk		Low risk	? or N/A
1. What data is involved?	Sensitive personal data	Personal data	Private / closed business data	Confidential / open business data	N/A
2. Will the data be anonymised?	No	Sometimes, in shared documents	Yes, immediately, and the original retained	Yes, immediately, and the original deleted	N/A
3. Will someone be identifiable from the data?	Yes	Yes, but their name is already in the public domain(SMT/Council)	Not from this data alone, but possibly when data is merged with other source	No – all anonymised and cannot be merged with other information	N/A
4. Is <b>all</b> of the data collected going to be used?	No, maybe in future	Yes, but this is the first time we collect and use it	Yes, but it hasn't previously been used in full before	Yes, already being used in full	N/A
5. What is the volume of data handled per year?	Large – over 4,000 records	Medium – between 1,000-3,999 records		Less than 1,000 records	N/A
6. Do you have consent from data subjects?	No	Possibly, it is explained on our website (About Us)	Yes, explicitly obtained, not always recorded	Yes, explicitly obtained and recorded/or part of statutory duty/contractual	N/A
7. Do you know how long the data will be held?	No – it is not yet on retention schedule	Yes – it is on retention schedule	Yes – but it is not on the retention schedule	On retention schedule <b>and</b> the relevant employees are aware	N/A
8. Where and in what format would the data be held? (delete as appropriate)	Paper; at home/off site; new IT system or provider; Survey Monkey; personal laptop	Paper; archive room; office storage (locked)	GOC shared drive; personal drive	other IT system (in use); online portal; CRM; Scanned in & held on H: drive team/dept folder	N/A
9. Is it on the information asset register?	No	Not yet, I've submitted to Information Asset Owner (IAO)	Yes, but it has not been reviewed by IAO	Yes, and has been reviewed by IAO <b>and</b> approved by Gov. dept.	N/A
10. Will data be shared or disclosed with third parties?	Yes, but no agreements are in place	Yes, agreement in place	Possibly under Freedom of Information Act	No, all internal use	N/A
11. Will data be handled by anyone outside the EU?	Yes	-	-	No	N/A
12. Will personal or identifiable data be published?	Yes – not yet approved by Compliance	Yes- been agreed with Compliance	No, personal and identifiable data will be redacted	None - no personal or identifiable data will be published	N/A

B) Information governance	High risk	Medium risk		Low risk	? or N/A
13. Individuals handling the data have been appropriately trained	Some people have never trained by GOC in IG	All trained in IG but over 12 months ago		Yes, all trained in IG in the last 12 months	N/A

Please put commentary below about reasons for information governance ratings:

We will follow our standard approach to public consultations in line with our consultation policy and privacy notice.

Not applicable has been selected for this section because the impact assessment should focus on substantive policy issues rather than our standard consultation processes.

Information governance impacts will vary across the projects delivered under the strategy and will be assessed on a project-by-project basis as appropriate.

<b>C) Human rights, equality and inclusion</b>	<b>High risk</b>	<b>Medium risk</b>		<b>Low risk</b>	<b>? or N/A</b>
1. Main audience/policy user	Public			Registrants, employees or members	
2. Participation in a process (right to be treated fairly, right for freedom of expression)	Yes, the policy, process or activity restricts an individual's inclusion, interaction or participation in a process			No, the policy, process or activity does not restrict an individual's inclusion, interaction or participation in a process	
3. The policy, process or activity includes decision-making which gives outcomes for individuals (right to a fair trial, right to be treated fairly)	Yes, the decision is made by one person, who may or may not review all cases	Yes, the decision is made by one person, who reviews all cases	Yes, the decision is made by an panel which is randomly selected; which may or may not review all cases	Yes, the decision is made by a representative panel (specifically selected) OR No, no decisions are required	
	There is limited decision criteria; decisions are made on personal view	There is some set decision criteria; decisions are made on 'case-by-case' consideration	There is clear decision criteria, but no form to record the decision	There is clear decision criteria and a form to record the decision	
	There is no internal review or independent appeal process	There is a way to appeal independently, but there is no internal review process	There is an internal review process, but there is no way to appeal independently	There is a clear process to appeal or submit a grievance to have the outcome internally reviewed and independently reviewed	
	The decision-makers have not received EDI and unconscious bias training, and there are no plans for this in the next 3 months	The decision-makers are due to receive EDI and unconscious bias training in the next 3 months, which is booked	The decision-makers are not involved before receiving EDI and unconscious bias training	The decision-makers have received EDI and unconscious bias training within the last 12 months, which is recorded	
4. Training for all involved	Less than 50% of those involved have received EDI training in the last 12	Over 50% of those involved have received EDI training, and the training are booked in for all others involved in the next 3 months.		Over 80% of those involved have received EDI training in the last 12	

C) Human rights, equality and inclusion	High risk	Medium risk		Low risk	? or N/A
	months; and there is no further training planned			months, which is recorded	
5. Alternative forms – electronic / written available?	No alternative formats available – just one option	Yes, primarily internet/computer-based but paper versions can be used		Alternative formats available and users can discuss and complete with the team	
6. Venue where activity takes place	Building accessibility not considered	Building accessibility sometimes considered		Building accessibility always considered	N/A
	Non-accessible building;	Partially accessible buildings;	Accessible buildings, although not all sites have been surveyed	All accessible buildings and sites have been surveyed	N/A
7. Attendance	Short notice of dates/places to attend	Medium notice (5-14 days) of dates/places to attend		Planned well in advance	N/A
	Change in arrangements is very often	Change in arrangements is quite often		Change in arrangements is rare	N/A
	Only can attend in person	Mostly required to attend in person		Able to attend remotely	N/A
	Unequal attendance / involvement of attendees	Unequal attendance/ involvement of attendees, but this is monitored and managed		Attendance/involvement is equal, and monitored per attendee	N/A
	No religious holidays considered; only Christian holidays considered	Main UK religious holidays considered	Main UK religious holidays considered, and advice sought from affected individuals if there are no alternative dates	Religious holidays considered, and ability to be flexible (on dates, or flexible expectations if no alternative dates)	N/A
8. Associated costs	Potential expenses are not included in our expenses policy	Certain people, evidencing their need, can claim for potential expenses, case by case decisions		Most users can claim for potential expenses, and this is included in our expenses policy; freepost available	
9. Fair for individual's needs	Contact not listed to discuss reasonable adjustments, employees not aware of reasonable adjustment advisors	Most employees know who to contact with queries about reasonable adjustments		Contact listed for reasonable adjustment discussion	

<b>C) Human rights, equality and inclusion</b>	<b>High risk</b>	<b>Medium risk</b>		<b>Low risk</b>	<b>? or N/A</b>
10. Consultation and Inclusion	No consultation; consultation with internal employees only	Consultation with employees and members	Consultation with employees, members, and wider groups	Consultation with policy users, employees, members and wider groups	

Please put commentary below for human rights, equalities and inclusion ratings above:

1 As a regulator focussed on public protection, the main audience/policy user is the public.

Protected characteristic	Type of potential impact: positive, neutral, negative?	Explanations (including examples or evidence/data used) and actions to address negative impact
Age	Positive	<p>The strategic theme of creating fairer and more inclusive eye care services will include work to highlight inequalities facing the public, patients and professionals as well as helping to reduce barriers to people accessing services, support those in vulnerable circumstances to receive high quality care and tackle negative working environments.</p> <p>Our annual registrant survey shows that younger registrants are more likely to experience bullying, harassment or discrimination. Addressing this issue will therefore have a positive effect on younger registrants.</p>
Disability	Positive	<p>The strategic theme of creating fairer and more inclusive eye care services will include work to highlight inequalities facing the public, patients and professionals as well as helping to reduce barriers to people accessing services, support those in vulnerable circumstances to receive high quality care and tackle negative working environments.</p> <p>Our annual registrant survey shows that registrants with a disability are more likely to experience bullying, harassment or discrimination. Addressing this issue will therefore have a positive effect on registrants.</p> <p>Our public perceptions research shows that people with a disability are less satisfied with the quality of the service they receive at an optometrists/opticians. A poor experience of eye care may discourage people with a disability from seeking further care, possibly leading to worse health outcomes. As such, addressing barriers and ensuring vulnerable people are supported to access care would have a positive impact on people with a disability.</p>
Sex	Positive	<p>The strategic theme of creating fairer and more inclusive eye care services will include work to highlight inequalities facing the public, patients and professionals as well as helping to reduce barriers to people accessing services, support those in vulnerable circumstances to receive high quality care and tackle negative working environments.</p> <p>Our annual registrant survey shows that female registrants are more likely to experience bullying, harassment or discrimination. Addressing this issue will therefore have a positive effect on female registrants.</p>
Gender reassignment (trans and non-binary)	Neutral	

Protected characteristic	Type of potential impact: positive, neutral, negative?	Explanations (including examples or evidence/data used) and actions to address negative impact
Marriage and civil partnership	Neutral	
Pregnancy/ maternity	Neutral	
Race		<p>The strategic theme of creating fairer and more inclusive eye care services will include work to highlight inequalities facing the public, patients and professionals as well as helping to reduce barriers to people accessing services, support those in vulnerable circumstances to receive high quality care and tackle negative working environments.</p> <p>Our annual registrant survey shows that registrants from ethnic minority backgrounds are more likely to experience bullying, harassment or discrimination. Addressing this issue will therefore have a positive effect on registrants.</p> <p>Our 2023 public perceptions research shows that 7.9 per cent of ethnic minority respondents have never had their sight tested compared to 2.6 per cent of white respondents. 28.6 per cent of ethnic minority respondents cite the cost of the sight test as the factor which makes them feel uncomfortable visiting an optometrists/optician's compared to 14.8 per cent of white respondents. Reducing barriers to accessing services and continuing to highlight inequalities will have a positive impact on patients from minority ethnic backgrounds.</p>
Religion/belief	Neutral	<p>The strategic theme of creating fairer and more inclusive eye care services will include work to highlight inequalities facing the public, patients and professionals as well as helping to reduce barriers to people accessing services, support those in vulnerable circumstances to receive high quality care and tackle negative working environments.</p> <p>Our annual registrant survey shows that those of Muslim and Sikh belief were more likely to report experience of harassment, bullying or abuse. Addressing this issue will therefore have a positive effect on registrants.</p>
Sexual orientation	Neutral	
Other groups (e.g. carers, people from	Neutral	

<b>Protected characteristic</b>	<b>Type of potential impact: positive, neutral, negative?</b>	<b>Explanations (including examples or evidence/data used) and actions to address negative impact</b>
different socio-economic groups)		

## Full Impact Assessment (to be completed if required)

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### Step 1: Scoping the impact assessment (IA)

<b>Name of the policy/function</b>	
<b>Assessor</b>	
<b>Date IA started</b>	
<b>Date IA completed</b>	
<b>Date of next IA review</b>	
<b>Purpose of IA</b>	
<b>Approver</b>	
<b>Date approved</b>	

### Q1. Screening assessment

Has a screening assessment been used to identify the potential relevant risks and impacts? Tick all that have been completed:

- Impacts
- Information governance (privacy)
- Human rights, equality and inclusion
- None have been completed

### Q2. About the policy, process or project

What are the main aims, purpose and outcomes of the policy or project?

You should be clear about the policy proposal: what do you hope to achieve by it? Who will benefit from it?

<b>Aims</b>
<b>Purpose and outcome</b>
<b>Who will benefit</b>

### Q3. Activities or areas of risk or impact of the policy or process

Which aspects/activities of the policy are particularly relevant to impact or risk? At this stage you do not have to list possible impacts, just identify the areas.

<b>Activity/aspect</b>
•

•
•
•

**Q4. Gathering the evidence**

List below available data and research that will be used to determine impact of the policy, project or process.

Consider each part of the process or policy and identify where risks or implications might be found for: 1) Impacts; 2) Information governance and privacy implications; and 3) Human rights, equality and inclusion.

Available evidence – used to scope and identify impact

**Q5. Evidence gaps**

Do you require further information to gauge the probability and/or extent of impact?

Make sure you consider:

- 1) Impacts;
- 2) Information governance and privacy implications; and
- 3) Human rights, equality and inclusion implications.

If yes, note them here:

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**Q6. Involvement and consultation**

Consultation has taken place, who with, when and how
Summary of the feedback from consultation
Link to any written record of the consultation to be published alongside this assessment
How engagement with stakeholders will continue



## Member fees 2024-25

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**Meeting:** 13 March 2024

**Status:** For approval

**Lead responsibility:** Leonie Milliner, Chief Executive and Registrar

**Paper Author(s):** Andy Mackay-Sim, Head of Governance

### Purpose

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1. To approve the proposed member fee schedule for 2024-25.

### Recommendations

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Council is asked to:

- **note** that Remuneration Committee reviewed benchmark data at its meeting on 5 February 2024 and recommended:
  - that no general increase in member fees is being proposed for 2024/25: and
  - that, for members who do not receive an annual rate, induction, learning and development activities are remunerated at day rate of £319, pro-rata for shorter periods of time, including for training that is less than two hours;
- **approve** the member fee schedule for 24-25 (annex 2); and
- **approve** consequential amendments to the member fee policy (annex 1).

### Strategic objective

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2. The work to review member fees supports delivery of all strategic objectives, given the oversight role of Council and the fact that members contribute to delivery of all our regulatory functions.

### Background

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3. The terms of reference for the Remuneration Committee require it to review and recommend to Council fees and expenses to be paid to members. It met on 5 February 2024 to review the fee schedule alongside benchmarking data.
4. The fee schedule was last reviewed in 2023 and approved by Council on 28 June 2023.
5. The Governance team undertakes an annual benchmarking activity with other health regulators, coordinated by the Nursing and Midwifery Council (NMC). The most recent dataset was collected in December 2023.
6. Following its review of this information, the Committee recommended no general increase to member fees for 2024/25. However, it did recommend that the remuneration of member induction, learning and development activities (for members

who do not receive an annual rate) should be aligned to the daily fee a member receives for attending a committee meeting.

7. The minutes of the Committee are included in the papers for the strictly confidential meeting of Council on 12 March 2024.

## **Analysis**

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8. The proposed 2024/25 budget includes an increase in member fees to accommodate the proposed amendments.
9. As part of its considerations, Remuneration Committee asked that future proposals considered the number of days Council members were working a month, different responsibilities allowances (such as being a chair of a committee) and any potential barriers presented for early career applicants for registrant and lay members.

## **Finance**

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9. All costs for member fees are met through an annual budget. The current five-year forecast includes a provisional 3% increase in member fees in 2025/26 and outer years' budgets. This is to accommodate a potential recommendation from the Remuneration Committee in 2025 to increase members fees from 2025/26, should the inter-regulatory member fee benchmarking indicate that the median member fee paid by regulators has increased.

## **Risks**

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10. The risk of not being able to attract and retain members with the required level of skills and experience is managed by having clear and transparent member fees and expenses policies. Assurance is provided by reviewing member fees against external benchmarking information. This risk is not high as the GOC is either over the median rate or in line with it. The high volumes of applications for member roles demonstrate that remuneration is not a deterrent for interested, high-quality applicants.
11. There is a risk that Council, in setting its own fees gives rise to a conflict of interests. This risk is mitigated by Council delegating the review and recommendation of members' fees to the Remuneration Committee, which includes an independent member.

## **Equality Impacts**

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11. Having an agreed policy and fee schedule for member fees enables the Council to demonstrate the equitability of member remuneration for specified activities. It supports transparency and while the proposal carries no explicit new equality impacts, an assessment of equality, diversity and inclusion impacts will be undertaken when the policy is next reviewed in 2025.

## **Devolved nations**

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12. There are no explicit impacts for devolved nations.

## **Other Impacts**

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13. There are no significant impacts identified.

## **Communications**

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### **External communications**

14. The member fee schedule for the year is published on the GOC website.  
Remuneration for Council members is also included as part of the annual report.

### **Internal communications**

15. The new schedule will be circulated to all members and shared with the relevant departments.

## **Next steps**

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16. If Council approves the recommendations, the new member fee schedule will be published on the GOC website.

## **Attachments**

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Annex 1: Proposed member fee policy 2024

Annex 2: Proposed member fee schedule 2024/25

# Member Fees Policy

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Status of document:	DRAFT
Version:	4
Date of approval:	March 2024
Effective from:	1 April 2024
Owner:	Head of Governance
Author:	Head of Governance
Planned next review date:	March 2027
	<p>March 2024</p> <ul style="list-style-type: none"> <li>- section 5 updated to align development and induction fees to committee attendance fee. --</li> <li>Remuneration for development and induction activity lasting less than two hours is now permitted.</li> <li>- latest benchmarking data (December 2023) included.</li> </ul>

## 1. Introduction

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- 1.1 This policy outlines how members' fees are set, how fees and expenses are paid, and how and when fees are reviewed, to ensure that members are paid appropriate fees for the work they undertake for the GOC. It also provides guidance on who is entitled to additional fees beyond the fees paid for attending meetings.
- 1.2 As a registered charity there is a need to ensure that the monies of the charity are only used to further the GOC charitable objects and, in keeping with other public bodies, we are expected to demonstrate best value for money in all that we do.
- 1.3 In addition, fees paid to Council members (trustees) are subject to review by the Charities Commission.
- 1.4 Our approach is consistent with our values – acting with integrity, pursuing excellence, respecting other people and ideas, showing empathy, behaving fairly and being agile and responsive to change.

## 2. Purpose

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- 2.1 The purpose of this policy is to ensure that member fees remain current, are fairly applied and are in line with comparable data from similar organisations from within the regulatory and healthcare public body sector.
- 2.2 This policy also provides information on how fees are reviewed every three years against comparable data and how fees for all members are set at a day rate in line with the median benchmarked fee level.

## 3. Scope

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- 3.1 This policy applies to all our members. This includes members who hold more than one appointment with the GOC (such as being a member of more than one committee). This policy does not apply to GOC employees (such as case examiners) or workers (such as education visitors).
- 3.2 The payment of additional member fees for member development, induction, and training, participating in working groups and/or selection panels, undertaking member performance assessment and other activities only applies to members who are not paid an annual fee. This means that Council members are not paid for any additional activity such as preparation for meetings, induction, training and development, undertaking member performance assessment and performance appraisal activities along with membership on Council committees, working groups and/or selection panels.

## 4. How member fees are set and reviewed

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- 4.1 Member fees will be reviewed at least every three years in accordance with the review method described below. Recommendations for changes to members fees and/or changes to this policy are considered by Remuneration Committee for approval by Council.
- 4.2 The review will include consideration of the mean time commitment of all members over a three-year timeframe. Where the time commitment for the role may have changed, the views of members will be gathered to inform the analysis of the data collection.
- 4.3 For roles remunerated by an annual fee the mean time commitment will be calculated to include chairing duties, preparation for and attendance at meetings, induction, training and development, undertaking member performance assessment and performance review activities as well as membership on Council committees, working groups and/or selection panels.
- 4.4 If there is a reason to change the time commitment of members outside of the review period, for example, because of a change in responsibilities, the Remuneration Committee and Council will take this into account in reviewing whether to change the fee payable.
- 4.5 Member fees and day rates will be benchmarked against comparable data, which will include data from other healthcare regulators and at least eight non-healthcare public sector bodies, for which comparable fee data is available, as agreed by the Remuneration Committee (see Annex A).
- 4.6 A median day rate for Council Chair and members is multiplied by the mean annual time commitment to identify an annual fee (and paid on a monthly basis).
- 4.7 An allowance for the Senior Council member is identified by adding a supplement of £2,500 to the annual fee agreed for Council members (and paid on a monthly basis). The supplement includes payment for undertaking a range of activities as detailed in the role description, including undertaking the performance appraisal of the Chair and chairing committee and other meetings as required.
- 4.8 The Chair of the Investigation Committee will be paid for each day they work. This includes when they undertake the performance appraisal of Investigation Committee members. Hearing Panel members acting as a Chair of a Fitness to Practise Panel or Registration Appeals Committee will be paid the chair day rate for each day they work. This includes when they undertake the performance reviews of Hearing Panel members.
- 4.9 Where Investigation Committee members or the Chair of Investigation Committee are undertaking work as a Case Examiner, this will be aligned to the current rate for Case Examiners as set out in the Case Examiner Fees Policy.
- 4.10 A rate for all other members is paid for each day they work, with the exception of their own performance appraisal, which is unpaid.

## 5. Fees for induction, learning and development

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- 5.1 For members who are not paid an annual fee, additional fees for induction, learning and development will be paid for:
- 5.1.1 attendance at induction learning and development which have been arranged by the GOC;
  - 5.1.2 attendance as an observer at GOC meetings/hearings as part of a planned induction or as part of agreed learning and development; and
  - 5.1.3 attendance for development which is directly related to the role and arranged by the GOC.
- 5.2 The day rate for induction, learning and development fees will be the same regardless of the member's substantive role. All activity incurring an induction and development fee should be agreed with the relevant head of department in advance.
- 5.3 We will not pay additional development or induction fees for the following:
- 5.3.1 attendance at a Council meeting or a committee meeting at which you are not an appointed member (unless it is part of a planned induction (see point 5.1.2 above);
  - 5.3.2 any development which is not directly related to the role and not arranged by the GOC;
  - 5.3.3 attendance at optical conferences or trade exhibitions, consultation events or stakeholder meetings;
  - 5.3.4 where the member is already being paid for attendance at a meeting on the same day the development or induction was delivered; and
  - 5.3.5 attendance to speak at a GOC meeting, conference or event for the purposes of development or induction, on behalf of the GOC – the payment of speaking fees are dealt with separately in the GOC Gifts and Hospitality policy<sup>2</sup>.

## 6. Fees for meetings held by teleconference/videoconference

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6.1 Member fees for meetings held via teleconference/videoconference or in a hybrid format are paid at the same rate as meetings attended in-person. Members travelling for in-person meetings or to attend hybrid meetings are not paid an additional fee for time spent travelling. GOC will pay any additional travel or subsistence expenses incurred which relate to in-person attendance, in accordance with the GOC Expenses Policy.

## 7. Reading fees

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7.1 Hearing Panel and Investigation Committee members required to read papers in excess of 500 pages may be paid an additional reading fee. Payment of additional reading fees will require authorisation by the Director of Regulatory Operations or the relevant head of department and only applies to Hearing Panel or Investigation Committee members.

7.2 Reading and preparation fees for other committee members are included in the fees paid for attending meetings.

## 8. Cancellation fees

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8.1 Hearing Panel members may have a hearing cancelled at short notice. As Hearing Panel members are required to commit to attendance at a hearing which can be a number of days or weeks long, if a hearing is cancelled the following terms will apply:

8.1.1 Half a day fee will be paid for each hearing day cancelled within five calendar days of the scheduled hearing commencement date [capped at seven calendar days];

8.1.2 A full day fee will be paid for events that conclude earlier than anticipated [capped at full fee for day 1-2; half a fee for days 3-5; no fee thereafter];

8.1.3 Half a day fee will be paid for split event days that are within 28 calendar days of an early finish. [no fee thereafter]. Split events are defined as events scheduled over non-consecutive days.

## 9. Fees for other activities

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9.1 Members may be asked to undertake other activities for the GOC to discharge the responsibilities of the role they have been appointed to. For example, members may be asked to act as selection panel members for the appointment of other members, undertake a desk-based review, fill another member role on a temporary basis or participate in a Council workshop or working group.

9.2. For members who are not paid an annual fee, fees for such activity will be communicated with the member in advance and if the agreed activity will take less than a day (for example, two hours), the fee paid will be pro-rata the agreed and published daily fee (based on a 7-hour working-day).

## 10. Payment of fees

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10.1 Fees will be authorised and paid to members via payroll within six weeks of attendance at a meeting or completion of an activity. Payments are normally made on the last working day of the month. For meetings held after the 20th day of the month payment will be made the following month.

10.2. For member attendance and/or activity which does not relate to a meeting, workshop or hearing (for example, fees paid for sifting and shortlisting of applications or a desk-based review) the fees for such activity will be communicated with the member in advance and if the agreed activity is less than a day, paid pro-rata in accordance with the agreed and published daily fee.

10.3. Once authorised and the agreed activity is completed, the fee will be paid to members via payroll on the next available occasion, normally within six weeks

## 11. Payment of expenses

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11.1 Members are encouraged to use the GOC reception travel and accommodation booking service wherever possible, so that payment for travel and accommodation can be made directly to the provider and benefits of centralised bookings can be realised. Information on how to use this service will be provided on appointment.

11.2. Whilst attendance at such events as listed in 5.3 will not be additionally remunerated, the GOC will pay any authorised additional expenses incurred which relate to attendance as a member, such as travel or subsistence, in accordance with the [GOC Expenses Policy](#)

11.3. Expenses booked and paid for by members directly, such as travel, accommodation or subsistence, will be separately reimbursed in accordance with the [GOC Expenses Policy](#), within six weeks of receipt of a valid claim. Claims are normally paid monthly on the last working day of the month. Claims submitted after the 20th day of the month will be reimbursed the following month.

11.4. All expense claims should be submitted using the GOC expenses claim form (available from the GOC Finance Team) and submitted to the [GOC Finance Team](#) within two calendar months of attendance or completion of the work, and at the year-end (31 March) no later than 15 April. In order for a claim to be valid it must be made in accordance with the expenses policy and

accompanied by receipts. Any claims made not in accordance with the expenses policy will require approval by the Director of Corporate Services. Claims received more than two months after the event will not be paid.

## 12. Transparency

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- 12.1 Member fees will be circulated to members and published on the GOC website.
- 12.2 In accordance with our information disclosure policy, the fees and expenses paid to Council members are published on our website on a quarterly basis and disclosed in our annual report.

## 13. Questions regarding this policy

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- 13.1 Any questions regarding this policy and its application should be directed to the Head of Governance in the first instance.

## Annex A: Benchmarking data sets

### Allowance rates for Comparator organisations as at December 2023

The below tables provide data on comparator organisations, including median and mean figure. The numbers in bold are the method by which the organisation remunerates i.e. where the organisation pays an annual allowance the annual allowance figure has been bolded, where the organisation pays on the basis of days worked the daily rate has been bolded.

#### Health and social care regulators

Health and social care regulator	Total income pa staff numbers registrant numbers	Chair			Council member			Additional responsibility		Associate			Partner member		Fitness to Practise Panel		
		Annual time commitment	Annual allowance	Equivalent day rate	Council member annual time commitment	Council member annual allowance	Council member day rate	Role/ time commitment	Annual allowance	Annual time commitment	Annual allowance	Day rate	Annual time commitment	Day rate	Member day rate	Chair day rate	
<u>Nursing &amp; Midwifery Council (NMC)</u>	£100.4m; 1,060 staff; 808,000 registrants Fee: £120	156 days pa (3 days per week)	<b>£78,000</b> (since May 2018)	£500	36 days pa (3 days per month)	<b>£15,166</b> (last increased in January 2022)	£442	Audit Committee Chair £2,000 Remuneration Committee Chair £2,000 Investment Committee Chair £250 Accommodation Committee Chair £250 (As of 1 April 2023)	36 days pa (3 days per month)	<b>£10,605</b>	£295	Varies according to Committee.	<b>£295</b>	£310	£340	Reading day fee: £100 (where applicable) Training day attendance fee: £260 per day or £130 per half day	Reading day fee: £100 (where applicable) Training day attendance fee: £260 per day or £130 per half-day

<u>General Dental Council (GDC)</u>	£38.5m 364 staff 115,000 registrants Fee: £680	104-156 days (2-3 days a week)	<b>£55,000</b> (last reviewed in Feb 2017)	£352-£508	Minimum 35 days. 6 Council meetings	<b>£15,000</b> (last reviewed in Feb 2017)	£428	Committee Chair	Total: £15,000  Additional: £3,000	No equivalent role				£353	£353	
<u>General Medical Council (GMC)</u>	£135.2m 1,587 staff; 335,694 registrants ; Fee: £433 (discounted fee for newly qualified doctors = £166)	156 days (3 days a week)	<b>£110,000</b>	£705	36-48 days (3-4 days per month) 7 Council meetings and Council meetings.	<b>£18,000</b>	£375-500	No additional fee		No equivalent role			Co-opted Committee members  £325	£325		
<u>Health &amp; Care Professions Council (HCPC)</u>	£36.2m; 282 staff; 320,438 registrants ; Fee: £116.36	156 days pa (3 days per week)	<b>£65,000</b> (March 2019)	£416	9 Council meetings pa (and Committee meetings)	<b>£12,000</b> (from 2019/20)	Up to 2018/19 – daily fee rate of £341 per day was paid	Committee Chair	Total: £14,000  Additional: £2,000	9 Council meetings (and Committee meetings)		<b>£341</b> (not for seminars or training)	Four Committee meetings pa	£341	£206	£348
<u>General Chiropractic Council (GCC)</u>	£2.8m; 16 staff; 3,341 registrants ; Fee: £800	No info on Chair's time commitment	<b>£27,000</b> (since Jan 2023)		4 Council meetings - some 2 days (+ Committee meetings)	<b>£7,800</b> (since Jan 2023) <u>Plus:</u> £2,000 each for Chairs of Audit & Risk Committee and Remuneration and HR				No equivalent role			£300	£300	£350	

						Committee; and £2,500 for Chair of Education Committee										
<u>General Optical Council (GOC)</u>	£10m; 87 staff FTE; 33,174 registrants; Fee: £380	130 days (2.5 days per week)	<b>£50,000</b>	£423	8 Council meetings pa (+ Committee meetings)	<b>£13,962</b> pa (since April 2019)		Senior Council Member	Total: £16,462 Additional: £2,500	8 Council meetings pa	Unremunerated.		£421	£319	£372	
<u>General Osteopaths Council (GOsC)</u>	£2.9m 27 staff; 5,427 registrants; Fee: £570	78 days pa (1.5 days per week)	£30,000 pa from 1 April 2024 when new Chair takes office	£346	18 days	<b>£7,500</b>	£417	Chair of the Policy and Education Committee, Audit Committee and People Committee	Total: £10,000 Additional: £2,250	18 days	£3,600	£200 (paid per meeting attended)	£306	£330 per day from 1 April 2024)	£330 + Chairing allowance of £50 per day.	
<u>General Pharmaceutical Council (GPhC)</u>	£23.1m 270 staff 56,851 pharmacists; Fee: £365	156 (3 days a week)	<b>£60,000</b> pa (with effect from 1 April 2022)	£384	Up to 10 Council meetings pa + 10 Council workshops pa (+ Committee meetings)	<b>£15,000</b> pa (last reviewed in June 2022)		Committee Chair	Total: £17,500 Additional: £2,500 pa	No equivalent role						
<u>Pharmaceutical Society of Northern Ireland (PSNI)</u>	£1.4m 15 staff 2,893 pharmacists; Fee: £398	30 days pa	£10,000 pa Remuneration based on attendance	<b>£336</b>	Up to 6 Council meetings pa + up to 12 working groups (+ Committee meetings)	Remuneration based on attendance at meetings	<b>£236</b>	Committee Chair	Remuneration based on attendance. <b>£286</b> day rate	No equivalent role			£250	£500		



**Proposed Member fee schedule 2024/25 (effective from 1 April 2024)**

<b>Role</b>	<b>Fee (£)</b>	
<b>COUNCIL</b>		
Council Chair	annual, paid monthly	50,000
Senior Council Member	annual, paid monthly	16,462
Other Council members	annual, paid monthly	13,962
<b>COMMITTEE CHAIRS</b>		
Chairs of the Hearings Panel and 13962 Investigation Committee	daily fee	372
<b>COMMITTEE MEMBERS</b>		
Committee members (other than Council members who receive an annual fee): Investigation; Education; Standards; Registration; Companies; Audit, Risk and Finance; Nominations; and Remuneration Committees and Hearings Panel members	daily fee	319
	fee for meeting or activity between two and four hours*	185
	fee for meeting or activity of two hours or less**	95
<b>OTHER</b>		
Members of the Investigation Committee (when acting as a Case Examiner)	per registrant decision fee	Aligned to Case Examiner fees
Investigation Committee	per case fee	103
Independent panel members (for members who sit on selection/member appointment panels and have no other GOC member role). Includes reading, preparation and follow-up.	daily fee	421
<b>READING FEES</b>		
Hearing Panel and Investigation Committee members only. (Paid on an ad hoc basis and authorised in advance.)	500 - 1499 pages	50
	1500 - 2499 pages	75
	2500+ pages	100
Investigation committee members when acting as a Case Examiner only. (Authorised by the Head of Casework Operations.)	Aligned to Case Examiner Fees.	
<b>CANCELLATION FEES</b>		
Chairs of the Investigation Committee (if cancelled at five days' notice or less)	half of the daily fee	186

Hearing Panel members will be paid half a day fee for each hearing day cancelled within five calendar days of the scheduled hearing commencement date [capped at seven calendar days].	half of the daily fee	159.50
Hearing Panel members will be paid a full fee for events that conclude earlier than anticipated [capped at full fee for day 1-2; half a fee for days 3-5; no fee thereafter]	daily fee	319
Pay half a day fee for split event days that are within 28 calendar days of an early finish [no fee thereafter]. Split events are defined as events scheduled over non-consecutive days.		
All other members who are not paid an annual fee (if cancelled at five days' notice or less)	half of the daily fee	159
<b>INDUCTION, LEARNING AND DEVELOPMENT</b>		
For members who are not paid an annual fee, including chairs.	daily fee	319
	fee for an induction or development activity between two and four hours*	185*
	fee for induction or development activity of two hours or less**	95*

\*4/7<sup>th</sup> of the daily fee

\*\*2/7<sup>th</sup> of the daily fee

## Equality, Diversity and Inclusion (EDI) Action Plan 2024-2025

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**Meeting:** 13 March 2024

**Status:** To approve

**Lead responsibility:** Andy Mackay-Sim (Head of Governance)

**Paper Author(s):** Jem Nash (EDI Manager)

**Council Lead(s):** Anne Wright, Chair of Council

### Purpose

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1. To enable Council to approve the 2024-2025 EDI Action Plan.

### Recommendations

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2. Council is asked to:
  - approve the 2024-2025 EDI action plan (annex 1);
  - approve allocation of up to £20,000 from strategic reserves to meet the cost of external research into unfair outcomes, subject to the business case being approved; and
  - delegate approval of the business case to the Chief Executive and Registrar.

### Strategic objective

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3. This work contributes towards the achievement of the following strategic objective: Building a culture of continuous improvement. This work is captured in our internal business plan for 2024/25.

### Background

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4. The Equality Act 2010 requires the GOC, as a public body, to publish equality objectives at least every four years. These objectives should outline how we will meet the Public Service Equality Duty (PSED) and must be both specific and measurable. The GOC last published its equality objectives in the 2020-2024 EDI action plan and is now due to publish again this year to be compliant with the Act.
5. An EDI review was undertaken in 2019 by independent EDI consultant, Derek Hooper. The recommendations from this review formed the foundations of the GOC's EDI action plan 2020-24. Progress has been reported publicly through the EDI annual report for the previous two years, and a final report summarising the outcome of the previous EDI action plan will be considered at Council in September 2024.
6. We are preparing to consult on the GOC's next five-year corporate plan for 2025-2030, and it is intended that an EDI sub-strategy and accompanying action plan will be produced for approval alongside the final five-year strategy, which will be

considered by Council in December 2024. On these grounds, 2024-25 marks a key transitional year in the GOC's EDI ambitions and the proposed plan included at annex one is intended to reflect this.

7. Derek Hooper was commissioned in the autumn of 2023 to conduct an internally focussed EDI review. This review assessed the GOC's progress since 2019 and made several recommendations to continue improving within this space. This report was shared with staff on 4 March 2024. Senior Management Team (SMT) is now engaged in working with staff to identify a number of longer-term responses to the report's recommendations and will consider how these feed into the development of the EDI Strategy 2025-30. A series of shorter-term actions have been captured in the proposed EDI Action Plan 2024-25.
8. The GOC is assessed against standard 3 of the Professional Standards Authority (PSA) Standards for Good Regulation, which requires "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." The PSA introduced a new evidence matrix to support achievement of standard 3 in May 2023, against which regulator performance will be assessed, with the GOC's assessment due in October 2024 as part of our performance review process.
9. An analysis has been undertaken internally to identify gaps between our current EDI action plan and progress to date, and the requirements of standard 3 and accompanying evidence matrix. Recommendations and actions to address the small number of gaps identified have been captured in the proposed EDI Action Plan 2024-25.

## **Analysis**

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### **2023 EDI review**

10. The 2023 EDI review acknowledged the significant progress made since 2019. This included:
  - Our increased investment in EDI (including investment in a new EDI Manager post);
  - Launch of the Council Associate scheme;
  - Successful staff wellbeing, engagement and network groups;
  - Development of our Speaking Up policy (due for review in 2024);
  - Substantial revisions to all our HR policies; and
  - Greater confidence and leadership in EDI matters
11. The review also identified actions that would continue to support our efforts to becoming a leader within this space. The recommendations and the additional

actions required to progress the review's findings are included in the proposed EDI Action Plan 2024-2025 (annex 1).

12. The priority actions for the next few months include commissioning organisation-wide learning and development to extend our collective understanding and confidence in EDI, including that of concepts of structural discrimination and cultural safety. This will give our workforce (our members, workers and staff) greater confidence in developing and shaping the EDI strategy for 2025-30 and our longer-term aspirations, as well as help our workforce develop the practical skills required to ensure the plan's effective realisation.

### **PSA Standard 3 gap analysis**

13. PSA Standard 3 specifies three outcomes:
  - The regulator has appropriate governance, structures and processes in place to embed EDI across its regulatory activities;
  - In terms of EDI, the regulator ensures that students and registrants are equipped to provide appropriate care to all patients and service users, and have appropriate EDI knowledge and skills; and
  - In terms of EDI, the regulator makes fair decisions across all regulatory functions.
14. Within each outcome, a set of measures and timelines has been produced by the PSA in its [Standard 3 evidence matrix](#), stratified by year of expected attainment by regulators (either 23/24 or 25/26).
15. Our gap analysis identified a small number of indicators within the PSA's standard 3 evidence matrix where additional effort is required to ensure we can confidently evidence attainment, specifically in relation to indicators which reference "unfair outcomes" and in relation to benchmarking our EDI data against the "diversity of the community." Actions required on this front are described further in paragraphs 18-24 below.
16. In addition, existing planned activity, such as the revision of relevant governance policies, reviews of CPD, implementation of the ETR, and review of our Hearings and Indicative Sanctions Guidance, will assist in demonstrating compliance with Standard 3 and its associated evidence framework.

### **Unfair Outcomes**

17. Five of the PSA's standard 3 evidence matrix indicators relate to identifying and reducing unfair outcomes in fitness to practise referrals, and unfair differential attainment in training. We have identified that we will need to take further action to address four out of five of these indicators and seek Council's approval to use up to £20,000 from £150k strategic reserves earmarked in the 2024-25 budget for future projects to support this work.

18. A working group, led by the Head of Governance, has been established with members of the Leadership Team, and with input from relevant departments, to develop a methodology to address gaps in terms of data collection and analysis. The working group will also develop a consistent definition of “unfairness” in decision-making, which will assist us in demonstrating how we reduce disproportionate and unfair referrals, and in the implementation of consequential action plans to reduce unfair differential attainment where the data shows this exists.
19. Members of this working group have been identified and terms of reference are being drafted. This working group will also scope options for the commissioning of external research into this area. A business case will be developed, and it is proposed that approval is delegated to the Chief Executive as a one-off investment. This will ensure we have a clear understanding of the issues and identified next steps to develop work in this area.
20. The Policy and Standards Team are planning to undertake a research project to investigate barriers members of the public face to accessing optical care. This will focus on lived experience, with the intention of producing good qualitative data in this area, which can be used to support the GOC’s future strategy. This will also feed into the working group’s analysis, thereby influencing potential plans to address unfairness.

### **EDI Data collection**

21. An additional gap in the evidence matrix was regarding EDI data collection. While the GOC collects and publishes its own EDI data, the data is not necessarily collected in such a way that it can be used for effective analysis or comparison.
22. The EDI Manager has been commissioned to develop a standardised approach to EDI collection across the GOC and is consulting with relevant departments to ensure this aligns with different business needs. They will also identify best practice around EDI data use, which should allow us to better understand the nature of EDI issues across the remit of the GOC, and hopefully aid in the identification of possible solutions.
23. This body of work will assist us to evidence achievement of specific indicators within the PSA evidence matrix regarding data collection, as well as increase alignment, in terms of ensuring being able to better assess the volume and nature of unfair outcomes, differential attainment, and how reflective GOC senior leadership and membership are of the diversity of the community.

### **Finance**

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24. Amending data collection practices may incur a small cost, which is included within existing IT budgets. The costs of additional commissioned training will be met from the proposed 2024-25 People and Culture learning and development budget.
25. The research proposed to support the unfair outcomes working group will incur a cost which it is proposed will be funded from reserves.
26. The research into lived experiences will be funded by the Policy and Standards team's budget.

## **Risks**

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27. Failure to meet our responsibilities as a public authority in respect to EDI can have multiple significant impacts on reputation, integrity, staff morale, registrant confidence, and public protection. In addition, failure to meet the PSA standards carries a significant reputational risk. The EDI action plan is part of the internal controls we have in place to mitigate this risk. By ensuring this is reported in a public way, we underline our commitment to transparency and accountability with respect to our moral, ethical and statutory duties around EDI.

## **Equality Impacts**

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28. An EIA has not been completed for the action plan overall. Any significant changes proposed by the individual actions set out in the plan will require an impact assessment.

## **Devolved nations**

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29. There are no specific implications for the devolved nations. The 2024-2025 EDI Action Plan, and our EDI annual report, which will report progress against the proposed plan, will be translated into Welsh once approved.

## **Other Impacts**

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30. No other impacts have been identified.

## **Communications**

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### **External communications**

31. The 2024-2025 EDI Action Plan will be published on the GOC website, to ensure compliance with the PSED. No other external communications are planned.

### **Internal communications**

32. There is a timeline for internal communications regarding the EDI review and proposed 2024-25 EDI Action Plan. This timeline was shared with GOC staff at the 4 March all-staff meeting.

33. Internal discussion regarding the unfair outcomes working group has already begun and will continue as necessary. The findings of the group will be published in a report and actions that impact other teams will be communicated to the relevant leads.

### **Next steps**

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34. Should the EDI Action Plan 2024-2025 be approved by Council, its progress will be monitored by SMT moving forward. The outcome of the unfair outcomes working group and commissioned research will be communicated to Council in due course.

### **Attachments**

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Annex 1: EDI Action Plan 2024-2025

## GOC EDI Action Plan 1 April 2024 - 31 March 2025

This plan draws on the previous EDI action plan from 2020-2024, the evidence requirements to ensure attainment of the PSA Standard 3, and recommendations arising from the 2023 Hooper EDI review. It is designed to bridge the end of the 2020-24 action plan and the commencement of the GOC EDI strategy for 2025-2030. The action plan represents work that is new or different; continuing/existing EDI activity is described in our annual business plan.

### Themes

Our 2024-25 EDI Action Plan is organised under six themes:

1. Data
2. People, learning and development
3. Recruitment
4. Policies and procedures
5. Community and support
6. Leadership and accountability

**1. Data** We will develop our data practice, improving the use of data to direct our work, progressing EDI and removing barriers based on characteristics.

Programme of work:	To address:	Owner:	Target for completion:
1.1 Develop a standardised approach to EDI data collection; how and why it is collected, stored, managed and used, with a comms plan to ensure engagement.	PSA Standard 3 Gap Analysis Hooper EDI Review recommendation	EDI Manager	December 2024
1.2 Explore how we use EDI data to make meaningful comparisons.	PSA Standard 3 Gap Analysis	EDI Manager	December 2024
1.3 Expand evidence collection to include lived experience.	EDI Review	Regulatory Strategy	March 2025
1.4 Collect EDI complainant data for Corporate Complaints.	PSA Standard 3 Gap Analysis	Governance	April 2024
1.5 Expand data collection and analysis to facilitate exploration of intersectional evidence.	Outstanding action from 2020-2024 EDI plan	EDI Manager	December 2024

**2. People learning and development** We will develop and embed a culture where learning about EDI is encouraged, providing a good understanding of EDI to facilitate inclusiveness for our employees, workers, members, registrants, and the public.

Programme of work:	To address:	Owner:	Target for completion:
2.1 Member, employee and worker EDI induction and development to include concept of	EDI Review recommendation	EDI Manager (Members, workers)	November 2024

	organisational discrimination and its impact, including practical skill-based sessions.		People and Culture (employees)	September 2024
2.2	Incorporate active EDI language (focused on effects and outcomes) and measurable outcomes within the proposed KSBF.	EDI Review recommendation	People and Culture	January 2025
2.3	Develop manager training in making reasonable adjustments.	EDI Review recommendation	EDI Manager	May 2024
2.4	Development opportunities for managers on managing a diverse workforce, including practical skill-based sessions.	EDI Review recommendation	People and Culture	December 2024
2.5	Quality assurance of all externally procured learning & development to ensure progressive, sensitive and inclusive style of delivery.	EDI Review recommendation	EDI Manager	June 2024
2.6	Workshop with employees and members on meanings of relevant terms, such as fairness, equity and the importance of knowing when to treat people the same or differently.	EDI Review recommendation	EDI Manager	March 2025
2.7	CPD Guidance for Registrants to be reviewed to ensure registrants maintain their EDI knowledge and skills.	PSA Standard 3 Gap Analysis	Education/CPD	January 2025

**3. Recruitment and retention** We will develop our recruitment practice so that EDI is embedded into all processes, to ensure we are inclusive to all.

	Programme of work:	To address:	Owner:	Target for completion:
3.1	Analyse EDI data from employee and member recruitment campaigns to highlight and analyse inequality and barriers.	Outstanding action from 2020-2024 EDI plan	EDI Manager	January 2025
3.2	Implement the 2023 Member Recruitment Report to ensure member recruitment is more representative of the diversity of the community.	PSA Standard 3 Gap Analysis	EDI Manager	November 2024

**4. Policies and procedures** We will adopt an approach that is inclusive and equitable and supports both managers and employees. in ensuring fairness and accountability.

Programme of work:		To address:	Owner:	Target for completion;
4.1	Review EIA method to include an analysis of organisational discrimination, for use in policy review.	EDI Review recommendation	EDI Manager	March 2025
4.2	Co-produce with staff a consistently applied GOC 'management style.'	EDI Review recommendation	People & Culture	January 2025
4.3	Co-produce with staff specific and measurable EDI objectives for use by managers and employees.	PSA Standard 3 Gap Analysis	People & Culture	October 2024
4.4	References to bias and discrimination included in revised Speaking Up guidance and the Raising Concerns pages.	PSA Standard 3 Gap Analysis	Governance	October 2024

**5. Community Engagement and Support** We will nurture a supportive community where employees, members and workers feel they belong, building mutual trust and openness.

Programme of work:		To address:	Owner:	Target for completion:
5.1	Review staff networks terms of reference and support, including links to organisational decision-making.	EDI Review recommendation	People and Culture	October 2024
5.2	Formalise resourcing and 'protected time' for those responsible for running Staff Networks.	EDI Review recommendation	People and Culture	October 2024
5.3	Training on structural discrimination to be extended to Staff Networks.	EDI Review recommendation	EDI Manager	September 2024

**6. Leadership and accountability** We will create clear and define actions to reinforce accountability as a world-class regulator.

Programme of work:		To address:	Owner:	Target for completion:
6.1	Draft and seek approval of 2025-2030 EDI strategy.	-	SMT/EDI Manager	December 2025

6.2	Ensure future EDI strategy includes active language and measurable outcomes.	EDI Review recommendation	EDI Manager	June 2024
6.3	Establish a working group to ensure there are plans in place to address unfair outcomes in FtP and unfair differential attainment in training.	PSA Standard 3 Gap Analysis	Head of Governance	May 2024

## Budget and external business plan 2024/25

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**Meeting:** 13 March 2024

**Status:** For decision

**Lead responsibility:** Leonie Milliner, Chief Executive and Registrar

**Paper Author(s):** Vikki Julian, Head of Communications / Andy Mackay-Sim, Head of Governance/ Manori Wickremasinghe, Chief Finance Officer

### Purpose

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1. To seek Council approval for the proposed budget and external business plan for 2024/25.

### Recommendations

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Council is asked to:

- approve the proposed budget 2024/25;
- approve of the proposed external business plan 2024/25; and
- delegate any minor corrections to the external business plan to the Chief Executive and Registrar, in consultation with the Chair of Council.

### Strategic objective

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2. The business plans and budget for 2024/25 sets out how the GOC will deliver its strategic objectives for the year ahead.

### Background

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3. The proposed budget 2024/25 is included as **annex 1**. The external business plan is included as **annex 2**.
4. The five-year forecast 2024/25 and internal business plan are being considered as part of the Strictly Confidential session of Council on 12 March 2024.
5. The external business plan and budget plan are approved annually by Council, in accordance with the GOC scheme of delegation. As part of fulfilling its terms of reference, ARC is required to: “review and challenge as appropriate the proposed budget in advance of each financial year and report its opinion to Council prior to the budget being considered by Council”. It is also required to provide Council ongoing assurances in respect to the management of performance, finance and risk.
6. The internal business plan and budget have been produced by departments and reviewed by the Chief Finance Officer, individual directors and Chief Executive, and approved by SMT. The Head of Governance and Chief Finance Officer have supported these sessions and provided additional advice and guidance where

required. The external business plan has been drafted by the Head of Communications in consultation with SMT.

7. The internal business plan and proposed performance monitoring framework for 2024/25 was reported to ARC on 27 February 2024. No substantive changes to the internal business plan or how performance is reported to Council were raised. ARC has also been engaged throughout the budget and business planning process in regular updates via the Director report.
8. ARC considered the proposed budget on 27 February 2024. The Committee minutes will be included in the papers for the Strictly Confidential meeting of Council on 12 March 2024. As part of its discussions, the Committee agreed to recommend the proposed 2024/25 budget to Council.

## **Analysis**

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11. Our focus is continuing to achieve financial stability (breakeven or better) in our business-as-usual (BAU) operations and to utilise our healthy reserves to support both planned strategic project expenditure and unexpected legal costs arising from complex FtP cases. Both the 2024-25 budget and the five-year forecast have achieved this objective and show that we can continue to invest from the strategic reserve for the next five-year period without replenishing reserves.
12. This is a solid start for our next corporate planning period 2025-30, as we develop and fine tune our next five-year financial and other strategies. A potential office relocation (subject to development of a costed business proposal and Council approval) may release additional revenue into the BAU budget over and above the current forecast to support achievement of our longer-term plans.
13. The proposed budget and five-year forecast have been developed through the work undertaken since November 2023. It takes account of:
  - a review of the progress made in delivery of the current business plan;
  - review of financial performance and the Q3 (2023/24) forecast;
  - planning by managers responsible for delivery; and
  - direction from SMT about priority activities to achieve our strategic and regulatory objectives.

### Accuracy of forecasting

14. As set out above, there are detailed considerations involved in the construction of the budget, with assumptions and risks tested. These assumptions are summarised in annex 1, and should be considered alongside the variance explanations in Q3 financial performance report.
15. Larger variances tend to occur in operational areas exposed to external factors, such as in case progression and hearings where caseload is harder to forecast accurately, and in education, where timing of notifications for qualification adaptations is

uncertain and the scheduling of education visits are dependent on external factors. Similarly, IT project costs have proven difficult to predict accurately within the course of the year due to the complex nature of their procurement and delivery. Staff vacancies and recruitment gaps throughout the year also contributed to high variance.

16. To a lesser extent, market volatility also contributes to variances, as dividend income and unrealised gains or losses impact the bottom line, along with inflationary pressures that influence supplier costs and salaries.
17. As ever, we will work regularly throughout the forthcoming financial year to refine and reforecast, with updates to ARC and Council, including ensuring the impact of any variances BAU expenditure and future forecasts.
18. The proposed 2024/25 budget maintains a small BAU surplus of £16k and a projected outturn after unrealised investment gains of -£944k. Council's decision to increase the registration fee by £25, whilst maintaining the low-income discount of £120, has increased total income and enabled increased investment in key areas of BAU to support delivery of the business plan, as summarised below.

#### New or reallocated activity included in the proposed 2024/25 budget and business plan

19. The proposed budget and business plan includes additional investment in several key operational areas including additional research to inform the development of policy; development of a revised operating model for legal support for Fitness to Practise (FtP) in Regulatory Operations; a temporary increase in staff resource in Registration and CPD operations; investment to sustain our journey to become a learning and development organisation; and to maintain progress implementing our new reward and recognition policy and revised pay bands.

#### *Revised FtP legal support operating model*

20. During 2024/25 we will be moving to a revised model of legal support for FtP, with less reliance on externally procured legal services and an enhanced role for in-house lawyers experienced in advocacy. When fully implemented, by 2025/26, this model will enable more timely, good quality, and cost-effective case progression and decision-making within FtP.
21. However, as we transition to the new model during 2024/25 we will be temporarily more reliant on external legal services whilst recruit, resulting in an increase in the Case Progression budget for 2024/25, a significant decrease in costs for 2025/26 and a stabilising of costs thereafter.

### Impact from Review of Legal Support

	Year 1 2023-24 £'000	Year 2 2024-25 £'000	Year 3 2025-26 £'000	Year 4 2026-27 £'000	Year 5 2027-28 £'000
Legal Charges	451	538	207	195	193
Staff cost (adjusted only for review)	1,309	1,527	1,527	1,522	1,542
	1,760	2,065	1,734	1,717	1,735
Change (£'000)		(305)	331	17	(19)
Change (%)		-17%	16%	1%	-1%

### Research to support policy development

22. We will continue to invest in research to support our policy, public affairs and regulatory activity during 2024-25. This will additionally include lived experience research with registrants to understand the impact of workplace harassment, bullying victimisation and negative working conditions in more detail. We also plan to undertake additional lived experience research with people with disabilities and from minority ethnic backgrounds to help us understand better barriers to care. We have also included £10k for additional research (if required) to support next strategy development. We may also use some of this £10k if we need to do further engagement or research to help us to finalise our standards after the consultation closes.

2024-25 Policy research -	£
Public perceptions survey	15,780
Individual registrant survey	20,000
Business registrant survey	11,800
Retainer for research to support next strategy development <i>NEW</i>	10,000
Lived experience research - people with disabilities or those from minority ethnic backgrounds <i>NEW</i>	30,000
Lived experience research – registrants <i>NEW</i>	30,000
Research on testing of sight statement (from strategic reserve)	50,000
<b>Total</b>	<b>157,580</b>

### Learning and Development

23. To support our continued journey to support the learning and development of our workforce our People and Culture budget includes an enhanced sum of (£86k) for externally commissioned training for all who are engaged in our work (employees, members and workers.) This in in addition to in-house led induction, learning and development for specific groups of employees, members and workers, such as member training and induction (e.g. Hearing Panel member training and Council member induction) or GDPR on-line refresher training.

### Additional staffing requirements

24. Included in the budget are the following additional posts (all FTC) to align with the business plan objectives:

- Continuation of archiving assistant support to complete the review of boxes held in storage;
- Temporary additional post in Education Operations in Q3-Q4 to assist with 2024 CPD end of cycle administration and management of CPD exceptions;
- Additional temporary support in the registration team in Q1 to Q3 to backfill registration team as they support the MyGOC project, and to assist with increased volume of international registration applications;
- Temporary support for Case Management System for data transfer;

25. Any further additional staffing requirements for BAU budget and project support will be considered after reviewing the Q1 forecast in July 2024.

#### Investment from reserves

26. The use of reserves in 2023/24 is forecast to be less than expected, representing of an improvement of £1,067k. This will be distributed through designated reserves: strategic projects, dilapidation requirements, and complex legal cases including hearings. The current forecast sees us aiming at mid-level reserve levels of the current reserve policy range. This will enable us to absorb any market volatility in the investment portfolio. It will also help us achieve our strategic objectives and provide flexibility for the new five-year corporate strategy and sub-strategies.

#### Areas where the budgetary impact has not yet been assessed

27. The five-year forecast and proposed budget have three areas where the impact is not yet known and are subject to further development and decision. These will be reflected in the 2024/25 Q1 forecast. The three areas are:

- a. The future office accommodation project;
- b. The next five-year corporate strategy and sub-strategies (including the development of the 2025-2023 EDI strategy and associated one year EDI action plan to March 2025); and
- c. Continued future investment in our Change Team capability beyond March 2025, including potentially (and subject to Council approval) retention of a 4 Director operating model.

28. As with last year we have also included £150k for potential future projects within the strategic reserves (which will be subject to future Council approval). Council is being asked to approve £20k from this £150k for potential future projects to meet the cost of external research into unfair outcomes (subject to delegated approval of the business case by the Chief Executive and Registrar). The recommendation and supporting rationale are set out in the related report about the EDI review in this meeting's agenda.

#### **Finance**

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29. The paper sets out in detail the financial implications of this work.

#### **Risks**

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30. The following risks are associated with finance, as identified in the corporate risk register with an additional linked risk around retention/capability:
- The GOC fails to deliver value for money.
  - The GOC is unable to deliver its strategic plans, programme of change, and business as usual either sufficiently quickly or effectively.
  - Capability and resilience: Small teams leads to over reliance on particular individuals, causing burnout and errors and/or impacts organisational delivery if absent or on departure
31. Reporting and monitoring financial performance against budgets and forecasts is a fundamental part of managing and mitigating these risks.

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### **Equality Impacts**

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32. The actions required to fulfil the GOC's equality duties and commitments in 2024/25 are set out in the proposed internal business plan. Impact assessments will be undertaken for individual pieces of work set out in the internal business plan when and if required.

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### **Devolved nations**

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33. The internal business plan sets out the proposed activity relating to devolved nations, including ongoing compliance with the Welsh Language Standard in 2024/25.

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### **Other Impacts**

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34. Other impacts are set out in the body of the proposed budget.

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### **Communications**

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#### **External communications**

35. A full external communications campaign will accompany publication of the external business plan.

#### **Internal communications**

36. We have engaged Directors and service heads while producing the draft external business plan. The final versions of the internal and external plans will be communicated to all staff.

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### **Next steps**

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37. Subject to Council approval, the external business plan will be published via the GOC website. The performance monitoring framework will mean that Council and ARC will regularly review the organisations progress in respect to its business plan and finances in 2024/25.

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### **Attachments**

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Annex 1 – proposed GOC external business plan 2024/25

Annex 2 – proposed GOC budget 2024/25

## **Foreword by Leonie Milliner, Chief Executive**

This business plan, for the financial year 2024-25, marks the final year of our “Fit for the Future” strategy. It represents the culmination of work and activities which aim to achieve our vision of being recognised for delivering world-class regulation and excellent customer service.

“Fit for the Future” has included several important pieces of work, some of which have spanned years, designed to protect the public and uphold public confidence in the professions and businesses we regulate. This includes introducing new requirements for qualifications we approve to ensure that the skills and abilities of our registrants remain up to date and in line with the needs of the patients and service delivery; a new continuing professional development (CPD) scheme; investing in our digital transformation; and developing and improving our customer service, including achieving the Customer Excellence Standard (CSE), an independent quality mark for customer focus, in 2023.

We have also worked hard to address long-standing issues with timeliness in fitness to practise, which was recognised by the Professional Standards Authority’s (PSA) review of our performance in 2021-2022, which concluded we had met all 18 Standards of Good Regulation for the first time in almost a decade.

There is still more to do to meet the ambitious goals we set for ourselves in the “Fit for the Future” strategic plan.

This business plan highlights some of the key work programmes for the coming year, including planning for prospective reforms to business regulation and revising our standards for optometrists, dispensing opticians, and students to ensure continued public protection. Our investment in our digital transformation continues, with a new case management system to support the effective management of fitness to practice, and improvements to our internal HR, payroll and finance systems.

The research we commission provides useful data and insights to inform the development of our policies and regulatory operations. In 2024-25 we intend to commission additional lived experience research to understand in more detail the impact of harassment, bullying victimisation, and negative working conditions upon registrants in the workplace. We also plan to undertake additional lived experience research with people with disabilities and from minority ethnic backgrounds to help us understand better barriers to care.

We will also develop a new corporate strategy to guide us through the next five years of our work, so we can continue to protect the public and support eyecare professionals to contribute to their full professional capability in the best interests of patients.

As always, we will continue to put GOC values and our public duty to progress equality, diversity and inclusion at the heart of all we do.

To deliver this ambitious plan, working with all our stakeholders will be crucial. I thank you for your support so far and look forward to engaging with you in the year ahead. Together we can make sure that the GOC is truly “Fit for the Future”.

## **About us**

We are the UK-wide regulator for optometrists and dispensing opticians, student optometrists and dispensing opticians, and optical businesses.

Our mission is to protect the public by upholding high standards in the optical professions. Our vision is to be recognised for delivering world-class regulation and excellent customer service.

We protect the public and uphold high standards and public confidence in the optical professions by:

- setting standards for the performance and conduct of our registrants
- maintaining a register of individuals who are fit to practise or train as optometrists or dispensing opticians, and bodies corporate who are fit to carry on business as optometrists or dispensing opticians
- approving qualifications leading to registration
- investigating and acting where registrants’ fitness to practise, train or carry on business may be impaired.

This business plan for 2024-25 demonstrates how we will continue to protect the public and ensure registrants can continue to utilise their full professional capabilities within service redesign across each part of the UK. It represents the final year of delivery of our current strategic plan and sets us up for future work as we look towards our next five year strategy for 2025-30.

### **1. Public protection at the heart of what we do**

The public must have confidence in our ability to protect them, and our registrants must consider that we are fair and proportionate in the decisions we make.

We achieve this by maintaining a register of individuals who are fit to practise or train, and bodies corporate who are fit to carry on business. This includes managing annual registrant and student renewal processes.

We will continue to maintain fair, proportionate, and efficient processes for investigating fitness to practise concerns, including:

- continuing to embed improvements in our triage and casework processes to speed up investigations
- undertaking a review of the efficiency of hearings operations to identify opportunities to be more cost effective whilst maintaining public protection
- updating our guidance on a range of topics including indicative sanctions guidance
- launching our new electronic case management system to support the robust management of our end-to-end casework process

- sharing learning from FTP outcomes with registrants through our FTP bulletin to embed good practice.

## **2. Upholding the highest professional standards**

We will update our existing standards for fully-qualified and student registrants to ensure they are fit for purpose, and reflect the current context within which registrants practice, students are trained, and businesses operate.

This process began last year, where we engaged extensively with stakeholders, including professionals, patients and the public, on a range of topics related to our standards including social media and online conduct, maintaining professional boundaries, leadership and delegation and supervision.

We launched a public consultation in February 2024 on the proposed new Standards of Practice for Optometrists and Dispensing Opticians, the Standards for Optical Students and consequential amendments to the Standards for Optical Businesses.

Once the consultation closes, we will consider all responses thoroughly, before drafting the final sets of standards. We plan to publish the revised standards in autumn 2024.

Separately, we will continue to progress work on reviewing our 2013 statement on the testing of sight following stakeholder concern that some sight test models which are separated by time, place or person may not adequately protect the public.

## **3. Developing business regulation**

Only around half of optical businesses operating in the UK are registered with the GOC, creating a regulatory gap where patients may be protected when using one business on their local high street but not the one next door. There is broad consensus among sector bodies that all businesses carrying out restricted activities should be registered with us.

We are currently in the process of developing a new model of regulation of optical businesses to extend regulation to all optical businesses providing restricted functions (such as sight testing, fitting of contact lenses, selling optical appliances to children under 16 and those registered visually impaired, and selling zero powered contact lenses).

The issues that we need to consider include business and ownership structures; regulatory supervision (including assessing the effectiveness and cost of any potential assurance or compliance activity); enforcement approach and sanctions; access to consumer redress; and registration fees charged to optical businesses.

Any model that we implement will be consulted upon and will likely require legislative change to the Opticians Act 1989. We will proactively develop a draft framework for business regulation ahead of public consultation, which will allow us to move at pace when working with the Department of Health and Social Care to modernise our legislative framework and close this regulatory gap.

#### **4. Education and CPD**

This year sees the final year in the first three-year cycle of our new, more flexible CPD scheme, which gives registrants more control over their learning and development and the ability to tailor their own personal scope of practice. This year registrants will be required for the first time to complete a reflective exercise, which we will support by sharing a range of resources.

Following the introduction of our new education and training requirements (ETR), providers of GOC-approved qualifications will continue to submit their plans to meet our new requirements, which we will review and note. Whilst providers are adapting their qualifications to meet our new requirements, we will continue to quality assure GOC-approved qualifications against the handbooks and prepare for the introduction of our new Quality Assurance and Enhancement Method for those who have adapted. We will continue to support the sector to organise and respond to the changes we've made to qualifications we approve through our continued financial support of SPOKE, and we will continue to chair and provide administrative support for the Sector Strategic Implementation Steering Group.

We also expect to agree new processes for international routes to registration under the ETR following our public consultation last year.

#### **5. Looking to the future and a new strategy for 2025-30**

Our new strategy will outline our mission and strategic objectives for the next five years, aiming to sustain our success as a high performing regulator, building on our strengths and the areas where we wish to improve, and setting out our vision for change. Our ambition remains to be a world-class regulator; agile, robust and effective in the deployment of our regulatory responsibilities, well regarded by stakeholders and continuing to meet all the PSA standards of good regulation.

The new strategy will be supported by an equality, diversity and inclusion strategy, financial strategy, digital strategy, people plan and a business performance reporting framework.

We have engaged with stakeholders over the course of last year, and this year, we will consult on our proposed strategy.

We will continue work to make our organisation fit for the future, including delivering a new electronic case management system to improve how we share information, investing in our staff with a new people plan and opportunities for learning.

We will maintain strong governance procedures, including implementing the recommendations from our Governance review, undertaking all member appointments and supporting the work of our Council and committees to ensure they inform decision-making and identify and manage any risk appropriately.

We will continue our public duty and commitment to progress equality, diversity, and inclusion, which underpins all our work, including delivering our EDI strategy and annual report about how EDI is embedded across the organisation.

#### **Accountability**

By protecting the public, we are also protecting the reputation of the optical professions. Public confidence in the professions we regulate is already strong and we expect this to be maintained. We will continue to run our annual survey measuring public perceptions of the professions and experience using optical services , as well as our survey of all GOC registrants, exploring their attitudes to work and career plans.

We should also be rated highly by the Professional Standards Authority, aiming to maintain meeting 18 out of 18 of the Standards for Good Regulation.

We will measure and track success on a business-as-usual basis quarterly reporting to our leadership team and Council.

### **Our finances**

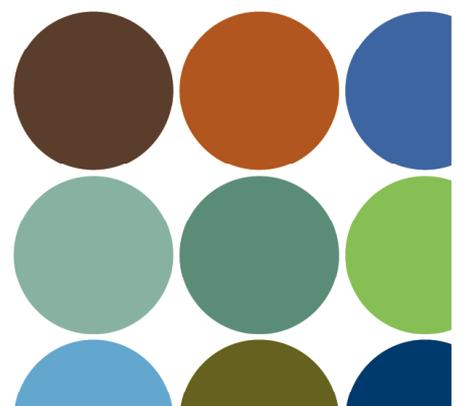
Most of our income comes from fees set for our registrants, which we use to deliver our core functions, strategic objectives and mission.

For the 2024/25 budget, our focus is to deliver value in our business-as-usual (BAU) operations, planning for a better than break-even position for BAU and achieving a surplus before reserve expenditure.

Where necessary, we will use our reserves for the successful completion of strategic projects and other Council-approved designated operations. We will ensure we maintain reserve levels within our Reserves Policy limits, while investing effectively and appropriately in achieving our strategic aims.

<b>Budget 2024/2025</b>	<b>000 (thousands)</b>
Income	£12,341
Expenditure (business as usual)	£12,325
Surplus / (Deficit) before reserve expenditure	£16
Reserve expenditure	£1,181
Surplus / (Deficit) after reserve expenditure	(£1,165)
Unrealised investment gains	£221
Surplus / (Deficit)	(£944)

# Budget for Year ending 31 March 2025



## General Optical Council Budget – 2024-25

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## General Optical Council Budget – 2024-25

GOC Summary P&L Budget 2024-25					
	Current Year 2023-24		Budget 2024-25		
	Budget	Jan.'24 (Q3) forecast	Oct.'23 Forecast	Budget	Variance to Oct.'23 Forecast
	£'000	£'000	£'000	£'000	£'000
Income	11,012	11,141	12,105	12,341	236
Expenditure (BAU)	10,952	10,733	12,132	12,325	(193)
<b>Surplus / (Deficit) before reserve expenditure</b>	<b>60</b>	<b>408</b>	<b>(27)</b>	<b>16</b>	<b>43</b>
Reserve (Strategic & legal) Expenditure	1,814	1,172	1,247	1,181	66
Surplus / (Deficit) after project expenditure	(1,754)	(764)	(1,274)	(1,165)	109
Unrealised Investment gains	275	351	188	221	33
<b>Surplus / (Deficit)</b>	<b>(1,479)</b>	<b>(413)</b>	<b>(1,086)</b>	<b>(944)</b>	<b>142</b>

### Highlights

The surplus before strategic expenditure for the budget is £16k (2023-24 budget £60k). The results after the strategic expenditure, but before the investment gains is a deficit of £1,165k (2023-24 budget deficit of £1,754k). The final surplus/(deficit) for the budget year is a deficit of £944k (2023-24 budget deficit of £1,479k).

The budget is planned to continue our focus on achieving financial stability (breakeven or better) in our business-as-usual (BAU) operations and utilise our healthy reserves to support both planned strategic project expenditure and unexpected legal costs arising from complex FtP cases.

The increased registration income by incorporating the Council decision to increase the registration fee by £25, whilst maintaining the low-income discount of £120, has enabled increased investment in key areas of BAU to support the delivery of the business plan. The additional funds were utilised in transition costs to the revised FtP legal support operating model, continuing to invest in research to support our policy, public affairs, and regulatory activity, supporting our learning and development of employees, members, and workers and on additional fixed-term staffing requirements.

# General Optical Council

## Budget – 2024-25

**Table A**  
**Budget 2024-25 analysis according to departments and projects**  
**Income and Expenditure Accounts**

	Year 1	Year 2				
	2023-24	2024-25				
	Q3 23-24 Forecast	Feb.'23 Forecast	July'23 Forecast	Oct.'23 Forecast	BUDGET	Variance
	£'000	£'000	£'000	£'000	£'000	£'000
<b>Income</b>						
Registration	10,788	11,217	11,284	11,737	11,980	243
Dividend Income	238	275	265	265	265	0
Bank & Deposit Interest	101	1	93	93	86	(7)
Other Income	14	10	10	10	10	0
<b>Total Income</b>	<b>11,141</b>	<b>11,503</b>	<b>11,652</b>	<b>12,105</b>	<b>12,341</b>	<b>236</b>
<b>Expenditure</b>						
<b>CEO's Office</b>						
CEO	245	316	393	351	360	(9)
Governance	633	756	697	704	729	(25)
<b>Total CEO's Office</b>	<b>878</b>	<b>1,072</b>	<b>1,090</b>	<b>1,055</b>	<b>1,089</b>	<b>(34)</b>
<b>Regulatory Strategy</b>						
Director of Regulatory Strategy	114	116	116	129	129	0
Policy & Standards	452	477	522	507	499	8
Communications	264	323	325	301	309	(8)
Education & CPD Operations	658	907	884	868	810	58
Education & CPD Development	216	446	497	503	530	(27)
<b>Total Regulatory Strategy</b>	<b>1,704</b>	<b>2,270</b>	<b>2,344</b>	<b>2,308</b>	<b>2,276</b>	<b>31</b>
<b>Regulatory Operations</b>						
Director of Regulatory Operation	204	143	138	144	144	(0)
Case Progression	2,242	2,259	2,298	2,430	2,572	(142)
Legal	203	234	232	236	239	(2)
Hearings	1,502	926	1,157	1,347	1,341	6
<b>Total regulatory Operations</b>	<b>4,150</b>	<b>3,560</b>	<b>3,823</b>	<b>4,157</b>	<b>4,296</b>	<b>(138)</b>
<b>Corporate Services</b>						
Director of Corporate Services	126	122	123	154	153	1
Facilities	1,127	1,129	1,136	1,134	1,144	(10)
Human Resources	485	505	505	500	593	(93)
Finance	538	515	591	635	628	7
Registration	723	588	634	679	705	(26)
<b>Total Corporate Services</b>	<b>2,999</b>	<b>2,858</b>	<b>2,987</b>	<b>3,101</b>	<b>3,224</b>	<b>(122)</b>

# General Optical Council Budget – 2024-25

**Table A (Contd.) -Income and Expenditure Accounts (Contd.)**

	Year 1	Year 2				
	2023-24	2024-25				
	Q3 23-24 Forecast	Feb.'23 Forecast	July'23 Forecast	Oct.'23 Forecast	BUDGET	Variance
	£'000	£'000	£'000	£'000	£'000	£'000
IT (BAU)	876	1,159	1,235	1,315	1,268	47
Depreciation & Amortisation	126	199	207	197	172	25
Unplanned BAU expenses						
<b>Total Expenditure</b>	<b>10,733</b>	<b>11,118</b>	<b>11,687</b>	<b>12,132</b>	<b>12,325</b>	<b>(191)</b>
<b>Surplus / (Deficit) before reserve expenditure</b>	<b>408</b>	<b>385</b>	<b>(35)</b>	<b>(27)</b>	<b>16</b>	<b>45</b>
<b>Reserve Expenditure</b>						
Education Strategic Review project	254	147	147	147	62	85
IT Strategy Project	140	0	0	0	0	0
Change	517	353	362	412	399	13
Research on the Testing of Sight	0	0	0	50	50	0
Potential Projects*	100	320	320	150	150	0
Complex Legal Cases	87	200	200	301	232	69
Project Depreciation & Amortisation	32	158	178	178	136	42
Case Management System	9	10	9	9	107	(98)
Future Office Project*	33				45	(45)
<b>Total Project expenditure</b>	<b>1,172</b>	<b>1,188</b>	<b>1,216</b>	<b>1,247</b>	<b>1,181</b>	<b>66</b>
<b>Surplus / (Deficit) after project expenditure</b>	<b>(764)</b>	<b>(802)</b>	<b>(1,251)</b>	<b>(1,274)</b>	<b>(1,165)</b>	<b>111</b>
Unrealised Investment gains	351	275	203	188	221	33
<b>Surplus / (Deficit)</b>	<b>(413)</b>	<b>(527)</b>	<b>(1,048)</b>	<b>(1,086)</b>	<b>(944)</b>	<b>144</b>

\* Not yet approved.

## General Optical Council Budget – 2024-25

**Table B**  
**Budget - Including Project Expenditure**

	2023-24		2024-25
	Budget	Q3 Forecast	Budget 2024-25
	£'000	£'000	£'000
<b>Income</b>			
Registration	10,729	10,788	11,980
Dividend Income	263	238	265
Bank & Deposit Interest	10	101	86
Other Income	10	14	10
<b>Total Income</b>	<b>11,012</b>	<b>11,141</b>	<b>12,341</b>
<b>Expenditure</b>			
Staff Salaries Costs	6,180	6,036	6,695
Other Staff Costs	318	369	410
Staff Benefits	49	21	20
Members Costs	1,315	1,406	1,386
Professional Fees	708	665	777
Finance Costs	94	95	105
Case Progression	994	949	865
Hearings	286	258	581
CPD & Standards	114	128	115
Communications	54	27	74
Registration	19	12	13
IT Costs	1,039	632	784
Office Services	1,040	975	1,055
Other Costs	162	73	169
Depreciation & Amortisation	244	158	308
Potential Projects	150	100	150
<b>Total Expenditure</b>	<b>12,766</b>	<b>11,905</b>	<b>13,506</b>
<b>Surplus / Deficit</b>	<b>(1,754)</b>	<b>(764)</b>	<b>(1,165)</b>
Unrealised Investment gains	275	351	221
<b>Surplus / (Deficit)</b>	<b>(1,479)</b>	<b>(413)</b>	<b>(944)</b>
Staff cost to total expenditure ratio	51%	54%	53%

## General Optical Council Budget – 2024-25

### Risks not covered in the budget

- Extra cost (holiday pay, Employer NI and PAYE, pension) related to worker/member classification of Hearings panel. This may cost about £73k p.a. We are observing the Somerville vs NMC before deciding.
- The holiday pay and pension may get backdated. CFO is closely monitoring the decisions other regulators are taking. None had yet decided to provide these costs.
- The bank charges of renewal fee income made through card payments may increase by 20% (£14k). We are in discussions with the bank on whether this could be waived as they have done in the past.

### Assumptions

#### Income

- Registration fee for FC & BC registrants will be increased +£25 p.a. in Yr. 2 (2024-25) and +£10 thereafter. Council's advice is to increase to match inflation. The fees will be set annually.
- Student income will stay the same.
- Low-income fee would be £120 less than normal renewal fee instead of £100 that was the pre-pandemic norm.
- Student numbers increase by 3%.
- All ancillary fees other than non-UK fees will increase by £5 in Yr. 2.
- 80% of new registrants would be transfers and 20% would be direct.
- Non-UK assessments will continue for a further 3 years until the end of 2025-26.
- There will be 2% registrant removals due to CPD-related disqualifications in Yr 3. There will be a 2.4% registrant number of general removals including retirements in addition to CPD removals. These will affect the annual renewals.
- Changes in registrant numbers including students and Body Corporates will be within trends of the past three years.
- There will be no unusual shift due to retirement. Age analysis reports show that 4% of the registrants are over 65 years of age and this is stable over the past 4 years.
- Dividend income will generate a similar ratio to portfolio value in the past three years. Estimated total returns (dividend income + unrealised gains) will be at 5.2%.
- There is a risk of volatility of 9.2% of investment valuation.
- We have assumed that the portfolio will grow during the 5yr period at similar levels to long-term growth. But the short-term volatility could be very high, as experienced in 2020 and 2022.

#### Expenditure

- There will be no new strategic projects costing more than the potential £150k earmarked within the strategic reserve for future projects.
- IT developments will be carried out as planned.
- There will be no high-value fixed asset purchases over the forecast values.
- Total of general and performance-related pay increases for 24-25 will be 6% of payroll, 25/26 – 4%, and 2% thereafter.
- Flexible/ agile working will continue for staff, members, and panels.
- ESR Project staffing cost will transfer to BAU.
- Transition to revised FtP legal support operating model will take place successfully.

## General Optical Council Budget – 2024-25

### Cash Drawdown Plan

In the event of us exhausting the annual renewal income received at the beginning of the year before the next renewal cycle, we will be drawing down cash from investments. These will happen if and when there is a large expenditure planned during Q3 and early Q4 before the renewal cycles bring the next batch of funds.

At the end of each renewal cycle, the CFO places a series of fixed deposits, maturing monthly and enabling the carrying out the operations while investing funds to obtain optimal interest income.

The budget doesn't require any additional investment drawdowns. The table below shows the history of drawdown plans. The plans/ forecasts get refined and more accurate over the time.

	2023-24	2024-25
	£'000	£'000
Feb'23 Forecast	100	950
July'23 Forecast	-	850
Oct'23 Forecast	-	750
<b>Budget</b>	-	-

**COUNCIL  
C08(24)**

**Removing information about a registrant's gender from the public register**

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**Meeting:** 13 March 2024

**Status:** For decision

**Lead responsibility:** Steve Brooker (Director of Regulatory Strategy)

**Paper Author(s):** Steve Brooker (Director of Regulatory Strategy)

**Council Lead(s):** None

**Purpose**

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1. To seek Council approval to remove reference to a registrant's gender from the public register following public consultation.

**Recommendations**

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2. Council is asked to:
  - **approve** our proposed response to the consultation (annex 1);
  - **approve** the updated Impact Screening Assessment (annex 2); and
  - **note** the proposed next steps.

**Strategic objective**

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3. This work contributes towards the achievement of the following strategic objective:  
Building a culture of continuous improvement

**Background**

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4. Section 11(2) of the Opticians Act 1989 and rule 21 of the Registration Rules 2005 set out the information that we must publish on our register. These do not include a specific requirement to publish a registrant's sex or gender. Under the Scheme of delegation, "To make rules regarding the form and keeping of the registers, and making of entries and alteration in them" is a decision retained by Council, hence the need for Council approval to agree to remove information about a registrant's gender from the public register.
5. The work was prompted by responses to the GOC consultation on a draft policy to support registrants who wish to update information about their gender on our register. Some respondents to this consultation, including the PSA, questioned why we provide information on gender on the register at all. At its meeting in September 2023 Council approved a recommendation to consult on a proposal to remove references to information about a registrant's gender from the public register.
6. We undertook a full public consultation on our proposal, which was open for 12 weeks from 29 September to 22 December 2023. We received 96 written

consultation responses, mostly from individual registrants. One optical representative organisation and two patient/charity organisations responded. Alongside the public consultation, we ran a short poll on the search the register pages of the GOC website asking visitors about their reasons for using the tool, the information they looked for and whether they found what they were looking for. This received 100 responses and only two respondents reported searching for information about a registrant's gender.

## **Analysis**

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7. Our overall conclusions are set out at paragraphs 26-28 of annex 1. In summary, we recommend removing reference to a registrant's gender from the public register. The main justifications are that the information is not necessary to deliver public protection, the information can be easily accessed from other sources and only a small minority of register users appear to access information about gender. We also wish to safeguard against outing trans registrants and inadvertently enabling discrimination against women by publishing this information.
8. We will continue to hold information internally on our CRM system about the gender of our registrants (and other protected characteristics) so that we can carry out equality and diversity data analysis and so that we can share appropriately anonymised information with commissioners and others. We will also continue to operate our policy for managing requests from registrants to change their gender recorded within our internal CRM system.

## **Finance**

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9. Website development costs associated with removing reference to information about a registrant's gender from the public register are estimated to be nominal.

## **Risks**

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10. Policy development relating to gender identity can be contentious and attract adverse publicity, so there are potential reputational risks. However, there are also equalities and other risks if we do not change our approach.

## **Equality Impacts**

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11. A draft impact assessment was included in the original consultation and has been updated based on consultation feedback. Paragraphs 22-25 of the draft response document summarise EDI issues raised by respondents to the consultation.

## **Devolved nations**

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12. There are no specific issues for the devolved nations.

## **Communications**

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### **External communications**

13. The finalised consultation response will be published on our website.

### **Internal communications**

14. We will keep staff informed through updates on IRIS.

### **Next steps**

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15. Subject to Council's agreement, removing reference to a registrant's gender on the public register will involve some website redevelopment work by external suppliers, which will be completed as soon as practicable.

### **Attachments**

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Annex 1: Proposed response to the consultation

Annex 2: Updated Impact Screening Assessment

# **GOC response to our consultation to remove reference to a registrant's gender from the public register**

**[MONTH] 2024**

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## Executive summary

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1. Our proposal to remove reference to a registrant's gender from the GOC's public register followed the outcome of our consultation on a draft policy to support registrants who wish to update information about their gender on our register. Some respondents to this consultation, including the Professional Standards Authority (PSA), questioned why we provide information on gender on the register at all.
2. We undertook a full public consultation on our proposal, which was open for 12 weeks from 29 September to 22 December 2023. We received 96 written consultation responses, mostly from individual registrants. One optical representative organisation and two patient/charity organisations responded.
3. We have decided to remove reference to a registrant's gender from the public register. The main justifications are that the information is not necessary to deliver public protection, the information can be easily accessed from other sources and only a small minority of register users appear to access this information. We also wish to safeguard against outing trans registrants and inadvertently enabling discrimination against women by publishing this information.
4. We will continue to hold information internally on our CRM system about the gender of our registrants (and other protected characteristics) so that we can carry out equality and diversity data analysis and so that we can share appropriately anonymised information with commissioners and others. We will also continue to operate our policy for managing requests from registrants to change their gender recorded within our internal CRM system.

## Introduction

5. The General Optical Council (GOC) is one of 13 organisations in the UK known as health and social care regulators. We are the regulator for the optical professions in the UK and currently register around 33,000 optometrists, dispensing opticians, student opticians and optical businesses.
6. We have four primary functions:
  - setting standards for optical education and training, performance and conduct;
  - approving qualifications leading to registration;
  - maintaining a register of those who are qualified and fit to practise, train or carry on business as optometrists and dispensing opticians; and
  - investigating and acting where registrants' fitness to practise, train or carry on business may be impaired.

## The issue

7. As part of our statutory duty to maintain and publish a register of all those who are fit to practise, we publish certain information about our registrants, which currently includes their gender. Section 11(2) of the Opticians Act 1989 and rule 21 of the Registration Rules 2005 set out the information that we must publish on our register. These do not include a specific requirement to publish a registrant's sex or gender.
8. Between December 2022 and March 2023, we ran a public consultation on a draft policy to support registrants who wish to update information about their gender on our register and ensure compliance with the Gender Recognition Act 2004 and the Equality Act 2010. Our response to that consultation was published in September 2023 and the new policy is being put into operation. Some stakeholders responding to this consultation, including the PSA questioned why we provide information on gender on the register at all.
9. In the consultation, we highlighted that among the healthcare regulators, the GOC is in the minority in providing information on gender on the public register. We outlined the likely arguments for and against retaining this information. Arguments for retaining the information included that people may use gender as a proxy for a registrant's sex as part of seeking same-sex care, so may use this information to decide which optical professional they want to see. Balanced against this, members of the public may use other means to secure same-sex care, such as asking for this when making an appointment. Our proposal was to no longer reference a registrant's gender on the public register because we considered it was not necessary for public protection purposes, we believed there is little use of this information by the public and members of the public have alternative means to obtain this information.

### **Consultation process**

10. We undertook a full public consultation on our proposed statement, which was open for 12 weeks from 29 September to 22 December 2023.
11. We received 96 written consultation responses from a range of stakeholders. These were made up of:
  - 55 optometrists;
  - 16 dispensing opticians;
  - six contact lens opticians;
  - seven optical students;
  - two members of the public;
  - two patient representative charities/organisations;
  - one optical professional/representative body; and
  - two others including a GP and an academic.
12. The organisations who were willing to be named were:

- Federation of Optometrists and Dispensing Opticians (FODO)
- LGBT Foundation
- TransActual

13. We are grateful for all the feedback we received and have taken this into account in deciding how to proceed.

### **Quantitative findings**

14. Key findings from the consultation were:

- 42% of respondents considered that reference to a registrant's gender should be removed from the public register. 49% considered this information should not be removed and 9% were neutral;
- 54% thought that no aspects of the statement would have a negative impact against stakeholders with specific characteristics. 21% of consultation responses were either don't know or gave no answer;
- 19% of responses thought the proposal would have a negative impact against stakeholders based on sex. Other protected characteristics mentioned were religion or belief (13%), gender reassignment (13%), race (7%), pregnancy or maternity (7%), age (6%), sexual orientation (6%), disability (5%), and marriage and civil partnership (4%).
- 35% of responses thought the proposal would benefit stakeholders based on gender reassignment. Other protected characteristics mentioned were sex (22%), sexual orientation (16%), pregnancy and maternity (9%), marriage and civil partnership (4%), religion or belief (3%), disability (3%) and age (1%). 39% considered the proposal would have no benefits for stakeholders sharing protected characteristics. 24% of consultation responses were either don't know or gave no answer; and
- 72% considered we had identified and captured the impact accurately within the impact assessment.

15. We consider these results are inconclusive with largely equal numbers for and against the proposal and respondents identifying positive and negative impacts based on protected characteristics. It is possible the individuals who responded are more likely to have strong views about these matters than the average person and so the results may not reflect the overall views of registrants or society more broadly. All three representative bodies supported the proposal.

16. Alongside the public consultation, we ran a short poll on the search the register pages of the GOC website asking visitors about their reasons for using the tool, the information they looked for and whether they found what they were looking for. There were 100 responses, as follows:

- 44 were registrants, 21 employers, 15 the public and 2 commissioners. 18 respondents selected the 'other' option;
- 59 searched the register to check whether a person or business was registered with the GOC, 15 to check their own registrant record, 5 to help choose an eye health service and 5 to check for any disciplinary sanctions relating to a registrant. 16 responses identified other reasons;
- types of information looked for included name (63), type of registrant, such as optometrist, dispensing optician or student (39), date of most recent registration (39), location (36), qualifications (30), specialist areas of practise, such as contact lens or prescribing (19) and gender (2); and
- 83 found the information they were looking for and 17 did not.

17. Although a small sample size, the poll indicates that stakeholders are likely to rarely use the public register to find information about a registrant's gender.

### **Analysis of consultation comments**

#### *The proposal*

18. Respondents in support of removing reference to a registrant's gender from the public register largely echoed the rationale in the GOC's consultation. The main reasons were that the information was unnecessary, it could be easily obtained from the business instead, there were risks of outing trans registrants and that it could reduce unconscious bias against women. Comments included:

- it is not relevant to the purpose of the register to protect the public since gender has no bearing on a practitioner's abilities to carry out their role;
- patients can easily, and are more likely to, access information about a registrant's gender from the practice's website, via a phone enquiry or by personal recommendation before they book an appointment. While patients may legitimately seek same sex care for a range of reasons, in practice the GOC register is not used for this purpose;
- it would increase the risk of outing trans registrants, which would be legally and ethically wrong. In a climate of transphobia, there are actors who would use this information to target and out a transgender registrant;
- the Equality Act makes it clear that it is prejudice and potentially discriminatory for a service user to request to not see a person who is transgender (of either or both genders);
- gender identification has the potential to introduce discriminatory information rather than factual evidence on a person's ability to practice.

Removing this information from the register would remove a source of potential unconscious bias against women in the industry;

- GOC is one of few remaining regulators who continue to publish this information, which is indicative of a general move away from public disclosure of this information in professional services; and
- it could remove a barrier to honest registration for registrants who are transitioning and do not wish this information to be public knowledge.

19. A sample of comments is available in the box below.

Removal of reference to information about gender – in favour

*“There is no need for practitioners to disclose their gender identity on the public register to be able to practice in a safe and professional manner.”* Dispensing optician

*“As stated in the discussion, it is not necessary information. If a patient is concerned about the gender of their optometrist, they can, and most likely will, ask at the local level. In addition, there is a strong likelihood of outing trans members of the GOC, which is both legally and ethically wrong.”* Student dispensing optician

*“I am aware there are lobby groups who wish to force the disclosure of my birth sex in many situations, which I would consider a gross invasion of my human right to privacy concerning my medical history under Article 8 of the European Convention. My medical history is only of concern to 3 parties: myself, my partner and my doctors. I am certain transgender opticians and optometrists feel the same...”*

*Currently because of an uptick in transphobia and the recent development of a transphobic culture war from right wing commentators and some government ministers, there are actors who would use this information, if they could, to target and out a transgender registrant. This would inevitably result in huge stress to them the registrant, harming their mental and physical health. It could even result in right wing extremists assaulting them, as has happened in the past.”* Other

*“As identified in the impact assessment, the GOC is one of few remaining professional bodies who continue to publish information about their registrant's sex, which is indicative of a general move away from public disclosure of this information in professional services. We support the assertion that information about the birth sex of registrants cannot be demonstrated to be within the public interest to an adequate degree and support its removal for this reason...”*

*While we recognise that patients are entitled to request single sex care, in practice, these requests are not fulfilled by referencing the GOC register; they will be completed at the point at which the patient is accessing the service they*

*require, in nearly all instances. The GOC register is therefore irrelevant for the purpose of delivering single sex care.” LGBT Foundation*

*“There is no need to have a registrant's gender on the public register. If an individual has a preference about the gender of their optical professional, they're not going to look for it on the register but will ask about it when booking their appointment.” TransActual*

*“We have no evidence that the public searches the register to find an eye care clinician or to be able to find one of a specific gender. In some communities, patients do prefer to see a professional of the same sex/gender for cultural reasons and they have the right to exercise this choice when selecting a practice and practitioners. However, they can easily do this from a website, via a phone enquiry or by personal recommendation, before they book an appointment.” FODO*

20. Respondents against removing reference to a registrant’s gender from the public register argued that gender can be an important part of someone’s identity and highlighted preferences for same-sex care, a need to make it easy and discrete to find this information and the role of transparency in maintaining public confidence in the professions. Comments included:

- gender is an important part of someone’s identity; the removal of gender in society is taking something away from women. A trans registrant who was neutral on the proposal commented that they felt a sense of validation when they first saw their gender correctly noted on the register;
- patients may want to receive same-sex care for a variety of legitimate reasons and this should be a choice they can make without prejudice. These reasons include patients who have suffered domestic abuse, those with specific medical conditions, for religious or cultural reasons given the service includes proximity and physical contact, or simply due to feeling more comfortable with someone of the same sex or gender;
- gender and gender identity are emotive and those looking to see a professional of a specific gender can be judged if they ask these questions over the phone or in person. It is much safer and more discrete for them to be able to look online than to have to ask these questions and it is leaving people who could be vulnerable in a position where they may feel forced to reveal their reasoning;
- individuals may decide not to present themselves for care if they are concerned about wanting to be treated by a practitioner of the same sex or gender and cannot easily access this information;

- it is more important to protect the public and make them feel safe and confident in us as professional staff, that we are not 'hiding' anything; and
- it is not always possible to determine gender by name. When someone needs to complain about a registrant, if they can search the register by gender, they will have a better chance of identifying who treated them.

21. A sample of comments is available in the box below.

Removal of reference to information about gender – against

*“I disagree as when patients are in a small dark room with a professional, they may feel more comfortable knowing who that professional is. Same sex care should be a choice the public can make without prejudice. Members of the public should feel comfortable during their eye examination and if they were to feel vulnerable this could lead to a difficult situation for the professional.”* Optometrist

*“I think it’s an important part of a person’s identity. Practitioners can decline to specify their gender, but I proudly and confidently believe it’s an integral part of my identity.”* Optometrist

*“I worry that it will prevent some individuals to present themselves for care if they are concerned about wanting to be treated by a practitioner of the same sex.”*  
Student optometrist

*“For some individuals, seeing someone from the same sex as themselves might be important for personal or cultural reasons. Removing references to gender will make it difficult to determine this.”* Member of the public

*“Expecting the patient to have to make the extra effort to ask the right questions at local level flies in the face of patient-first care.”* Member of the public

*“When a member of the public needs to make a complaint about a registrant, they can search by name. Many names are gender neutral, and whole communities (such as Sikhs) use the same names for both men and women, so it is helpful for the public to be able to differentiate by gender, so they have a better chance of identifying who treated them.”* Dispensing optician

*“Some sectors of society prefer to be seen by a female professional for religious reasons. The public have a right to choose their professional. Whilst it is incorrect to discriminate against professionals based on gender it is important that we also respect people’s religious beliefs. As a professional body we should embrace diversity not run from it nor hide from it.”* Optometrist

*“Some patients wish to know our gender. Some are more comfortable with a man others with a woman. Quite often this is associated with their past experiences or culture.”* Therapeutic prescribing optometrist

### *Negative impacts on stakeholders with specific characteristics*

22. We asked whether the proposal would have a negative impact on certain individuals or groups who share any of the protected characteristics from the Equality Act 2010. The comments largely focused on preferences for same-sex care, as highlighted in previous section. Comments included:

- Gender – reasons related to same-sex care, removal of identity and wrong assumptions about gender being made based on names
- Gender reassignment – reasons related to a climate of transphobia and the risks of outing registrants. Patients who had gender reassignment may have experienced discrimination in the past and have a preference over which sex they would like to see.
- Religion or belief – people with a specific religion or belief may only wish to receive same-sex care or the religion or belief system may only allow certain genders or people to come into physical contact with each other.
- Age – patients receiving domiciliary care may want same-sex care and would feel uncomfortable not knowing who they will see. Young girls may feel more comfortable being treated by a female.
- Pregnancy or maternity – some women may feel more comfortable with a professional of the same gender due to the difficult nature of pregnancy, while some pregnant women may prefer to be seen by male professional if they fear being judged by another woman.

23. A sample of comments is available in the box below.

*“This does not fall under the umbrella of discrimination, but I felt a great sense of validation when I first saw my gender correctly noted on the register. Transitioning while working as a healthcare professional was incredibly challenging. Seeing my governing body acknowledge who I am was an important milestone. I would feel a little sad if I didn't have that.”* Dispensing optician

*“Gender reassignment - patients who have had gender reassignment have maybe experienced discrimination in the past and have a preference over which sex they would like to see - this will make the patient more comfortable and open... Sex - someone may want to see someone of the same sex as them as it makes them more comfortable for whatever reason, i.e previous abuse.”* Student optometrist

*“...there is currently a strong current of transphobia in the UK, and putting gender on the register can end up outing trans members of the GOC. In addition, genders such as non-binary are made invisible, which can be distressing to non-binary individuals.”* Student dispensing optician

*“A Muslim or Jewish woman may only wish to be see a female optometrist and would not be accepting of non binary or gender neutral professional. It would be very uncomfortable for the professional. Therefore, I believe again we need to embrace diversity celebrate it but allow the public to choose.”* Optometrist

*“Relating to optics it’s quite a personal and up-close profession where the optometrist looks at a patient’s eyes and the dispenser checks adjustments and takes PD measurements so patients should have the right to see the genders of professionals in order to grant them ease and to make them happy.”* Student dispensing optician

#### *Positive impacts on stakeholders with specific characteristics*

24. We asked whether the proposal would have a positive impact on certain individuals or groups who share any of the protected characteristics from the Equality Act 2010. Again, comments largely echoed those made in responses to the first question and mostly focused on gender and gender reassignment. Other comments focused on the public register inadvertently introducing information that could be used for potentially discriminatory purposes.

25. A sample of comments is available in the box below.

*“This proposal will undoubtedly have a beneficial impact for trans, non-binary, gender diverse and intersex practitioners, who will no longer have to choose a binary sex category to fit their identity. It will also help protect practitioners whose gender expression does not match their assigned sex at birth from potential abuse from patients who may have expected a practitioner with a different gender expression based on their listed details.”* LGBT Foundation

*“This change will benefit trans people in that it will result in there being less publicly available information for a trans registrant to change when they first start transitioning.”* TransActual

*“The register provides public protection by highlighting qualified registrants. Gender identification has the potential to introduce discriminatory information rather than factual evidence on a person’s ability to practice.”* Optometrist

*“Removes the need to identify as any gender and removes a barrier to clear and honest registration.”* Optometrist

*“Removing gender (sex) from the register will also remove a source of potential unconscious bias against women in the industry.”* Other

*“Removing it as displayed data makes it less of a focus and could make the register feel more inclusive. That could make individuals feel more comfortable.”* Optometrist

*“There is no reason for a registrant’s gender to be included on a public register when this is irrelevant to their registered role. We feel that including this information may unfairly categorise or stereotype individuals. In addition, colleagues who are trans, intersex, non-binary, gender fluid or undergoing ‘gender reassignment’ may be uncomfortable being labelled with a gender on a public register when it has no relevance to their professional role. Removing this requirement will therefore support and advance our shared sector DEI goals.”*

FODO

## **Our response**

26. We are grateful for the responses received and note these issues are emotive and have prominence in public debate. As a regulator, the GOC must approach this through the lens of our overarching statutory objective of public protection and having regard to wider equalities and data protection legislation.
27. We remain of the view that reference to information about a registrant’s gender should be removed from the public register. The public register should only contain information necessary to deliver our public protection functions and a registrant’s gender has no bearing on their ability to deliver safe and effective care. We are mindful that patients may wish to receive same-sex care for a variety of reasons and may be reluctant to ask the business about this directly. However, our website survey indicates that patients are likely to use the public register to find information about a registrant’s gender only rarely. Businesses have a role to support patients to make informed choice without prejudice. There were also persuasive arguments that including this information on the register risks outing trans registrants and inadvertently enabling discrimination.
28. The GOC will shortly consult on a new five-year corporate strategy. Creating fairer and more inclusive eye care services is proposed as one of our three strategic themes and this will sit alongside a dedicated EDI strategy. Collecting data on registrants covering all the protected characteristics and sharing this in anonymised formats through our publications and with stakeholders will be an important contribution to helping the sector to achieve shared EDI goals. Therefore, we will continue to hold information internally on our CRM system about the gender of our registrants (and other protected characteristics) so that we can carry out equality and diversity data analysis and use this positively.

## **Next steps**

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29. Removing reference to a registrant’s gender on the public register will involve some website redevelopment work by external suppliers, which will be completed as soon as practicable.

## Annex A: Impact Screening Assessment

<b>Name of policy or process</b>	Removing information about a registrant's gender from the public register.
<b>Purpose of policy or process</b>	To consult on removing information about a registrant's gender from the public register.
<b>Team/Department</b>	Policy and Registration teams
<b>Date</b>	14.09.23, updated 19.02.24 following public consultation
<b>Screen undertaken by</b>	Steve Brooker, Director of Regulatory Strategy
<b>Approved by</b>	Jem Nash, EDI Manager
<b>Date approved</b>	14.09.23, 19.02.24 (with amendments)
<b>Instructions:</b>	<ul style="list-style-type: none"> <li>• Circle or colour in the current status of the project or policy for each row.</li> <li>• <b>Do not miss out any rows.</b> If it is not applicable – put N/A, if you do not know put a question mark in that column.</li> <li>• This is a live tool, you will be able to update it further as you have completed more actions.</li> <li>• Make sure your selections are accurate at the time of completion.</li> <li>• Decide whether you think a <b>full</b> impact assessment is required to list the risks and the mitigating/strengthening actions.</li> <li>• If you think that a full impact assessment is <b>not</b> required, put your reasoning in the blank spaces under each section.</li> <li>• You can include comments in the boxes or in the space below.</li> <li>• Submit the completed form to the Compliance Manager for approval.</li> </ul>

A) Impacts	High risk	Medium risk		Low risk	? or N/A
1. Reserves	It is likely that reserves may be required	It is possible that reserves may be required		No impact on the reserves / not used	
2. Budget	No budget has been allocated or agreed, but will be required	Budget has not been allocated, but is agreed to be transferred shortly	Budget has been allocated, but more may be required (including in future years)	No budget is required OR budget has been allocated and it is unlikely more will be required	
3. Legislation, Guidelines or Regulations	Not sure of the relevant legislation	Aware of all the legislation but not yet included within project/process	Aware of the legislation, it is included in the process/project, but we are not yet compliant	Aware of all the legislation, it is included in the project/process, and we are compliant	
4. Future legislation changes	Legislation is due to be changed within the next 12 months	Legislation is due to be changed within the next 24 months	Legislation may be changed at some point in the near future	There are no plans for legislation to be changed	
5. Reputation and media	This topic has high media focus at present or in last 12 months	This topic has growing focus in the media in the last 12 months	This topic has little focus in the media in the last 12 months	This topic has very little or no focus in the media in the last 12 months	
6. Resources (people and equipment)	Requires new resource	Likely to complete with current resource, or by sharing resource	Likely to complete with current resource	Able to complete with current resource	
7. Sustainability	Less than 5 people are aware of the process/project, and it is not recorded centrally nor fully	Less than 5 people are aware of the project/process, but it is recorded centrally and fully	More than 5 people are aware of the process/project, but it is not fully recorded and/or centrally	More than 5 people are aware of the process/project and it is clearly recorded centrally	
	No plans are in place for training, and/or no date set for completion of training	Training material not created, but training plan and owner identified and completion dates set	Training material and plan created, owner identified and completion dates set	Training completed and recorded with HR	N/A
8. Communication (Comms) / raising awareness	No comms plan is in place, and no owner or timeline identified	External comms plan is in place (including all relevant stakeholders) but not completed, an owner and completion dates are identified	Internal comms plan is in place (for all relevant levels and departments) but not completed, and owner and completion dates are identified	Both internal and external comms plan is in place and completed, owner and completion dates are identified	
	Not sure if needs to be published in Welsh	Must be published in Welsh; Comms Team aware		Does not need to be published in Welsh	

Please put commentary below about your impacts ratings above:

The consultation affects all registrants since gender is currently a mandatory field on the searchable GOC public register.

The proposal we consulted on has low impact i) because a consultation on updating gender on the register has taken place and laid the foreground for this work; ii) a website poll confirmed there is little use of this information by the public and there are alternative means for people to obtain this information; iii) we would still collect this information for EDI monitoring purposes.

The proposal carries some reputational risk since gender identity has been a prominent issue in society generally, and our consultation identified mixed views on removing gender from the register.

Planned changes to the Opticians Act should mean little change to the current legislative framework on this issue. Our interpretation of the most recent draft Order is that we could record gender data if we wanted to, but we would not be able to publish it unless we decided that doing so would be in the interest of public protection.

B) Information governance	High risk	Medium risk		Low risk	? or N/A
1. What data is involved?	Sensitive personal data	Personal data	Private / closed business data	Confidential / open business data	
2. Will the data be anonymised?	No	Sometimes, in shared documents	Yes, immediately, and the original retained	Yes, immediately, and the original deleted	
3. Will someone be identifiable from the data?	Yes	Yes, but their name is already in the public domain(SMT/Council)	Not from this data alone, but possibly when data is merged with other source	No – all anonymised and cannot be merged with other information	
4. Is <b>all</b> of the data collected going to be used?	No, maybe in future	Yes, but this is the first time we collect and use it	Yes, but it hasn't previously been used in full before	Yes, already being used in full	
5. What is the volume of data handled per year?	Large – over 4,000 records	Medium – between 1,000-3,999 records		Less than 1,000 records	
6. Do you have consent from data subjects?	No	Possibly, it is explained on our website (About Us)	Yes, explicitly obtained, not always recorded	Yes, explicitly obtained and recorded/or part of statutory duty/contractual	
7. Do you know how long the data will be held?	No – it is not yet on retention schedule	Yes – it is on retention schedule	Yes – but it is not on the retention schedule	On retention schedule and the relevant employees are aware	
8. Where and in what format would the data be held? (delete as appropriate)	Paper; at home/off site; new IT system or provider; Survey Monkey; personal laptop	Paper; archive room; office storage (locked)	GOC shared drive; personal drive	other IT system (in use); online portal; CRM; Scanned in & held on H: drive team/dept folder	
9. Is it on the information asset register?	No	Not yet, I've submitted to Information Asset Owner (IAO)	Yes, but it has not been reviewed by IAO	Yes, and has been reviewed by IAO and approved by Gov. dept.	
10. Will data be shared or disclosed with third parties?	Yes, but no agreements are in place	Yes, agreement in place	Possibly under Freedom of Information Act	No, all internal use	
11. Will data be handled by anyone outside the EU?	Yes	-	-	No	
12. Will personal or identifiable data be published?	Yes – not yet approved by Compliance	Yes - been agreed with Compliance	No, personal and identifiable data will be redacted	None - no personal or identifiable data will be published	

B) Information governance	High risk	Medium risk		Low risk	? or N/A
13. Individuals handling the data have been appropriately trained	Some people have never trained by GOC in IG	All trained in IG but over 12 months ago		Yes, all trained in IG in the last 12 months	

Please put commentary below about reasons for information governance ratings:

The information handled will be consultation response data. All respondents will be asked permission for anonymised personal data and responses to questions to be used. No individuals will be identified in their responses, and all EDI information will be fully anonymised.

All data will be processed and stored in line with our [information governance policies](#), and individuals will be provided with a privacy notice.

The proposal would remove information about gender from the public register and should therefore reduce information governance risk. We will keep information internally on the gender of our registrants, so that we can carry out equality and diversity monitoring and so that we can share appropriately anonymised information on the gender of registrants with commissioners and other stakeholders.

<b>C) Human rights, equality and inclusion</b>	<b>High risk</b>	<b>Medium risk</b>		<b>Low risk</b>	<b>? or N/A</b>
1. Main audience/policy user	Public			Registrants, employees or members	
2. Participation in a process (right to be treated fairly, right for freedom of expression)	Yes, the policy, process or activity restricts an individual's inclusion, interaction or participation in a process			No, the policy, process or activity does not restrict an individual's inclusion, interaction or participation in a process	
3. The policy, process or activity includes decision-making which gives outcomes for individuals (right to a fair trial, right to be treated fairly)	Yes, the decision is made by one person, who may or may not review all cases	Yes, the decision is made by one person, who reviews all cases	Yes, the decision is made by an panel which is randomly selected; which may or may not review all cases	Yes, the decision is made by a representative panel (specifically selected) OR No, no decisions are required	N/A
	There is limited decision criteria; decisions are made on personal view	There is some set decision criteria; decisions are made on 'case-by-case' consideration	There is clear decision criteria, but no form to record the decision	There is clear decision criteria and a form to record the decision	N/A
	There is no internal review or independent appeal process	There is a way to appeal independently, but there is no internal review process	There is an internal review process, but there is no way to appeal independently	There is a clear process to appeal or submit a grievance to have the outcome internally reviewed and independently reviewed	N/A
	The decision-makers have not received EDI and unconscious bias training, and there are no plans for this in the next 3 months	The decision-makers are due to receive EDI and unconscious bias training in the next 3 months, which is booked	The decision-makers are not involved before receiving EDI and unconscious bias training	The decision-makers have received EDI and unconscious bias training within the last 12 months, which is recorded	
4. Training for all involved	Less than 50% of those involved have received EDI training in the last 12	Over 50% of those involved have received EDI training, and the training are booked in for all others involved in the next 3 months.		Over 80% of those involved have received EDI training in the last 12	

C) Human rights, equality and inclusion	High risk	Medium risk		Low risk	? or N/A
	months; and there is no further training planned			months, which is recorded	
5. Alternative forms – electronic / written available?	No alternative formats available – just one option	Yes, primarily internet/computer-based but paper versions can be used		Alternative formats available and users can discuss and complete with the team	N/A
6. Venue where activity takes place	Building accessibility not considered	Building accessibility sometimes considered		Building accessibility always considered	N/A
	Non-accessible building;	Partially accessible buildings;	Accessible buildings, although not all sites have been surveyed	All accessible buildings and sites have been surveyed	N/A
7. Attendance	Short notice of dates/places to attend	Medium notice (5-14 days) of dates/places to attend		Planned well in advance	N/A
	Change in arrangements is very often	Change in arrangements is quite often		Change in arrangements is rare	N/A
	Only can attend in person	Mostly required to attend in person		Able to attend remotely	N/A
	Unequal attendance / involvement of attendees	Unequal attendance/ involvement of attendees, but this is monitored and managed		Attendance/involvement is equal, and monitored per attendee	N/A
	No religious holidays considered; only Christian holidays considered	Main UK religious holidays considered	Main UK religious holidays considered, and advice sought from affected individuals if there are no alternative dates	Religious holidays considered, and ability to be flexible (on dates, or flexible expectations if no alternative dates)	N/A
8. Associated costs	Potential expenses are not included in our expenses policy	Certain people, evidencing their need, can claim for potential expenses, case by case decisions		Most users can claim for potential expenses, and this is included in our expenses policy; freepost available	N/A
9. Fair for individual's needs	Contact not listed to discuss reasonable adjustments, employees not aware of reasonable adjustment advisors	Most employees know who to contact with queries about reasonable adjustments		Contact listed for reasonable adjustment discussion	N/A

<b>C) Human rights, equality and inclusion</b>	<b>High risk</b>	<b>Medium risk</b>		<b>Low risk</b>	<b>? or N/A</b>
10. Consultation and Inclusion	No consultation; consultation with internal employees only	Consultation with employees and members	Consultation with employees, members, and wider groups	Consultation with policy users, employees, members and wider groups	

Please put commentary below for human rights, equalities and inclusion ratings above:

The consultation helped us to identify whether the proposal would have a positive/negative/neutral impact.

The consultation considered whether there is a legitimate expectation for patients to be able to choose to be treated by a healthcare professional of a particular sex and, if so, whether the relevant regulator has a role in enabling this. While some patients may wish to obtain this information, alternatives are available, and the public register is not the best place for patients to locate this information.

<b>Protected characteristic</b>	<b>Type of potential impact: positive, neutral, negative?</b>	<b>Explanations (including examples or evidence/data used) and actions to address negative impact</b>
Age	Neutral	Patients receiving domiciliary care may want same-sex care and would feel uncomfortable not knowing who they will see. Young girls may feel more comfortable being treated by a woman. However, alternative sources of information are available, and the public register is not the best place for patients to locate this information. We will continue to keep information internally on all protected characteristics, so that we can carry out equality and diversity monitoring and so that we can share appropriately anonymised information with commissioners and other stakeholders.
Disability	Neutral	People with certain medical conditions may prefer same-sex care, but alternative sources of information are available, and the public register is not the best place for patients to locate this information. We will continue to keep information internally on all protected characteristics, so that we can carry out equality and diversity monitoring and so that we can share appropriately anonymised information with commissioners and other stakeholders.

Protected characteristic	Type of potential impact: positive, neutral, negative?	Explanations (including examples or evidence/data used) and actions to address negative impact
Sex	Neutral	The proposal would remove this information about gender from the public register. Consultation responses suggested this could remove a potential source of unconscious bias against women in the industry and prevent assumptions about someone's gender based on their name. Others felt that gender on the register was an important part of their identity. We will continue to keep information internally on all protected characteristics, so that we can carry out equality and diversity monitoring and so that we can share appropriately anonymised information with commissioners and other stakeholders.
Gender reassignment (trans and non-binary)	Positive	The proposal would remove this information about gender from the public register. This would mitigate risks of the GOC inadvertently outing trans registrants. We will continue to keep information internally on all protected characteristics, so that we can carry out equality and diversity monitoring and so that we can share appropriately anonymised information with commissioners and other stakeholders.
Marriage and civil partnership	Neutral	The protected characteristic is not impacted by the proposal.
Pregnancy/ maternity	Neutral	People who are pregnant may have a preference about the gender of the person from whom they received care. Some may feel more comfortable with a professional of the same gender due to the difficult nature of pregnancy, while some pregnant women may prefer to be seen by male professional if they fear being judged by another woman. However, alternative sources of information are available, and the public register is not the best place for patients to locate this information. We will continue to keep information internally on all protected characteristics, so that we can carry out equality and diversity monitoring and so that we can share appropriately anonymised information with commissioners and other stakeholders.
Race	Neutral	The protected characteristic is not impacted by the proposal.
Religion/belief	Neutral	People with a specific religion or belief may only wish to receive same-sex care or the religion or belief system may only allow certain genders or people to come into physical contact with each other. However, alternative sources of information are available, and the

Protected characteristic	Type of potential impact: positive, neutral, negative?	Explanations (including examples or evidence/data used) and actions to address negative impact
		public register is not the best place for patients to locate this information. We will continue to keep information internally on all protected characteristics, so that we can carry out equality and diversity monitoring and so that we can share appropriately anonymised information with commissioners and other stakeholders.
Sexual orientation	Neutral	The protected characteristic is not impacted by the proposal.
Other groups (e.g. carers, people from different socio-economic groups)	Neutral	Vulnerable adults may prefer to receive same-sex care, but alternative sources of information are available, and the public register is not the best place for patients to locate this information. We will continue to keep information internally on all protected characteristics, so that we can carry out equality and diversity monitoring and so that we can share appropriately anonymised information with commissioners and other stakeholders.



## COUNCIL

**Professional Standards Authority performance review 2023**

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**Meeting:** 13 March 2024**Status:** For noting**Lead responsibility:** Leonie Milliner (Chief Executive and Registrar)**Paper author(s):** Marie Bunby (Policy Manager)**Council Lead(s):** There is no Council lead for this work.**Purpose**

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1. To enable Council to discuss the outcome of the Professional Standard Authority for Health and Social Care's (PSA) review of our performance for the period 1 January to 31 December 2023 (our [2023 performance report](#)).

**Recommendations**

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2. Council is asked to note the PSA's assessment of our performance and our work in engaging with the review process.

**Strategic objective**

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3. The PSA's review of our performance helps us to assess whether we are achieving our strategic objectives and fulfilling our overarching duty to protect the public.

**Background**

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4. The PSA oversees our work and that of the other UK health and social care professional regulators. Every three years the PSA conducts a 'periodic review' of the regulators it oversees against its 18 [Standards of Good Regulation](#) ('standards'), with less intensive 'monitoring' reviews in the intervening period. The PSA published its monitoring review report of our 2023 performance on 5 March 2024 (annex 1).

**Analysis**

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5. This year we met all 18 of the PSA's standards (covering general, guidance and standards, education and training, registration and fitness to practise). We were delighted to meet all of the standards for the second year in a row, and were particularly pleased to have maintained our performance in meeting the standard on fitness to practise timeliness.
6. We were pleased to note that the PSA highlighted our:
  - sustained improvement in the timeliness of fitness to practise investigations, including our work to further build on our improvements;
  - approach to consultation and commitment to engagement with stakeholders, with largely positive feedback such as our openness and proactivity;

- responsiveness in dealing with feedback from the PSA, including publication of decisions and how we handle complaints about education programmes/providers;
  - working with stakeholders and acting on feedback to improve the implementation of our new continuing professional development (CPD) scheme;
  - good progress against our equality, diversity and inclusion (EDI) action plan and our use of data, such as producing a joint statement with stakeholders on zero tolerance to bullying, harassment, abuse and discrimination following the findings of our registrant survey; and
  - quality assurance of adaptations of half of our education providers since updating our new education and training requirements (ETR).
7. We recognise that we need to work to continue to maintain and improve the timeliness of our fitness to practise cases, in line with our commitment in our [Strategic Plan 2020-25](#) and through our fitness to practise improvement programme. We are pleased that median timeframes continued to fall in the first three quarters of the year (with recognition that our overall median timeframe is one of the shortest amongst the regulators) and that the number of older cases in the caseload remained stable.
8. We note the PSA's suggestions for areas that they will keep under review or that we are already reflecting upon, and will ensure these are considered and kept under review. These include:
- the consistency and transparency of the quality assurance process of education providers and how complaints relating to education and training are dealt with;
  - monitoring the illegal practice data for trends following implementation of the updated protocol in June 2022 and the timeliness of illegal practice investigations;
  - acting on the findings of our rapid review into our new continuing professional development (CPD) scheme; and
  - continuing to monitor the fitness to practise investigations data.

## Finance

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9. We do not currently require any additional resources to enable us to meet the PSA's Standards of Good Regulation.

## Risks

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10. The performance review process can help to highlight areas where we need to improve to better protect the public. However, failing standards does carry a reputational risk and can undermine stakeholders' confidence in us. We mitigate this risk by clearly explaining how we plan to improve in these areas. On the other hand, a positive review creates an opportunity to boost confidence in our work.

## Equality Impacts

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11. We do not consider there to be any impacts related to equality in this area of work.

## Devolved nations

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12. The PSA's remit is UK-wide and we have shared with them the good work we are doing to engage with stakeholders in, and take account of issues specific to, the devolved nations.

## Communications

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### External communications

13. We issued a [press release](#) about the review to our stakeholders and the trade press welcoming the review.

### Internal communications

14. We have drawn the attention of our staff to the report on our intranet.

## Next steps

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15. The next year will be another 'monitoring' review of our performance, since the PSA moved to a [new approach](#) to its performance review process.
16. We will continue to liaise with the PSA, meeting with them regularly and providing information about our performance, including data on a quarterly basis.
17. We will also engage in the PSA's review of its Standards of Good Regulation in the coming year.

## Attachments

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Annex 1: [PSA Performance review: monitoring review 2023](#)

### Our performance review process

We have a statutory duty to report annually to Parliament on the performance of the 10 regulators we oversee. We do this by reviewing each regulator's performance against our Standards of Good Regulation and reporting what we find. Our performance reviews are carried out on a three-year cycle; every three years, we carry out a more intensive 'periodic review' and in the other two years we monitor performance and produce shorter monitoring reports. Find out more about our review process [here](#).

This monitoring report covers the period 1 January 2023 to 31 December 2023.

### Key findings

- We are pleased to report that the GOC has sustained the improvements in the timeliness of its fitness to practise investigations. (Last year, it met our Standard relating to fitness to practise timeliness for the first time in seven years.) The GOC is now carrying out a further programme of work to build on its improvements.
- The GOC carried out multiple consultations and engagements. We have seen clear evidence of the GOC's commitment to working with its stakeholders and their approach has been, on the whole, very well-received.
- The GOC continues to make good progress against its EDI Action Plan 2020-2024 and remains on track to achieve its objectives. It continues to use data and other evidence to identify areas for further work, such as producing a joint statement with stakeholders on zero tolerance to bullying, harassment, abuse and discrimination following the findings of its registrant survey.
- Since updating its Education and Training Requirements in March 2021, the GOC has quality assured adaptations for more than half of existing providers. It also commissioned the Sector Partnership for Optical Knowledge and Education (SPOKE) to establish a Knowledge Hub designed to support providers in meeting the updated requirements.

### Standards met 2022/23



General Standards	5 out of 5
Guidance and Standards	2 out of 2
Education and Training	2 out of 2
Registration	4 out of 4
Fitness to Practise	5 out of 5
<b>Total</b>	<b>18 out of 18</b>

### GOC standards met 2019-22

2021/22	18
2020/21	17
2019/20	16



30,837<sup>1</sup>

professionals on the register  
(as at 31 December 2023)

2,917

bodies corporate on the register  
(as at 31 December 2023)

## General Standards

The GOC met all five General Standards this year.

These five Standards cover 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 to the public.

### Information published by the GOC

The GOC provides information about its work through a variety of channels and this year, it launched a new blog. We noted two issues related to the publication of information:

- ▶ **Fitness to practise decisions published in error:** The GOC was alerted to two decisions that were published on its website when they should not have been. In response, the GOC promptly removed the decisions, apologised to the registrants involved, investigated the causes and extent of the breaches,<sup>2</sup> introduced additional checks and developed an action plan to implement further preventive measures.
- ▶ **Disclosure policy:** The GOC publishes erasure decisions for one year, and is the only regulator that publishes these important decisions for less than five years. It had started reviewing its *Disclosure policy* prior to the publication errors mentioned above and committed to taking account of learning from the errors and also our recommendation that erasure decisions should be published for at least five years.<sup>3 4</sup>

We considered the above in our assessment but decided that Standard 1 was met overall because the GOC continues to publish and publicise a wide range of information about its work in various ways and we saw no instances of inaccurate information being published.

## Equality, Diversity and Inclusion (EDI)

The GOC continues to make good progress against its EDI Action Plan 2020-2024 and remains on track to complete its stated objectives. It published its second annual EDI report this year and continues to hold good levels of diversity data, which it uses to identify areas for further work. EDI remains a focus across the GOC's functions, including its quality assurance of education programmes and the review of its standards for registrants, which started in 2022.

The GOC's annual surveys produced useful EDI insights, which the GOC is using to inform the review of its Standards and other work:

- ▶ its Public Perceptions Survey 2023 highlighted inequalities such as: 7.9% of ethnic minority respondents have never had their sight tested compared to 2.6% of white respondents and respondents with a disability are less satisfied with the service they receive; and
- ▶ its Registrant Workforce and Perceptions Survey 2023 found that high numbers of optical professionals are experiencing bullying, harassment, abuse, or discrimination in the workplace. In response to these findings, the GOC convened stakeholders and issued a joint statement committing to a zero-tolerance approach to bullying, harassment, abuse, and discrimination across all working environments.

### Stakeholder engagement

We have seen clear evidence of the GOC's commitment to working with its stakeholders and their approach has been, on the whole, very well-received. Examples of consultations and engagements from this year include:

- ▶ consultations on: a draft statement on verification of contact lens specifications and definition of aftercare; removing gender from the public register; the international registration process;
- ▶ engaging with stakeholders to develop its Strategic Plan for 2025-2030. A formal consultation is planned for April/May 2024; and

- sharing information about its plans to review its Standards at the Optical Sector Policy Forum, the Sector Education Forum and Business Registrants Day.

The GOC also published its response to the call for evidence it issued last year on the need for changes to the Opticians Act and associated policies.



[In respect of the GOC’s call for evidence] **“We appreciate the GOC’s open approach in responding publicly to our recommendations with a clear and evidence-based rationale...We welcome the GOC’s new approach in consulting widely and separately on each key topic, taking the time to get these issues right for our profession. However, in order to provide a more informed view, we expect more clarity on the GOC’s proposed changes in due time, as regulatory change will affect our sector for many years.”**

**“It also seems that the GOC is thinking carefully about business regulation...is aware of the range of ways this could be implemented, and is interested in the views of the sector...We particularly welcomed the GOC being pro-active in engagement in this space, attending one of [our] full council meetings delivering a presentation and workshop on the scoping and framing of business regulation policy.”**

Feedback from different stakeholders

## Guidance and Standards

**The GOC met both Standards for Guidance and Standards this year.**

In April 2023, the GOC launched a review of its standards for optometrists and dispensing opticians and its standards for optical students. Both sets have been in place since April 2016.

The GOC is developing the new standards using evidence from various sources, including the response to its call for evidence and views obtained through stakeholder events. It plans to consult on the draft revised standards in early 2024 and expects to publish the new standards in autumn 2024. Stakeholders have been positive about the GOC’s approach so far.



**“The GOC has commenced its work on the review of its Standards of Practice for Optometrists and Dispensing Opticians, and its engagement so far with stakeholders has been very open including a series of roundtables to discuss various aspects including those that have come to the forefront since the standards first came into effect in April 2016 such as the extent of use of social media and technology.”**

**“we are so far impressed with the approach the GOC is taking to [the standards review].”**

Feedback from different stakeholders

## Education and Training

**The GOC met both Standards for Education and Training this year.**

The GOC updated its Education and Training Requirements (ETR) in March 2021. The GOC has assessed the adaptations of more than half of the existing providers and found they meet the new ETR. The GOC is regularly convening and talking to stakeholders to identify and address key risks arising from the changes and it commissioned the Sector Partnership for Optical Knowledge and Education (SPOKE) to establish a Knowledge Hub designed to support providers in meeting the updated requirements.

We received no concerns about the ETR themselves and mostly positive feedback about their implementation.

Some stakeholders were unhappy with their experience of the quality assurance process and the timeliness of the different stages. One stakeholder said its concerns from last year about the consistency and transparency of the process still remained this year. Another stakeholder felt the GOC's decision-making about complaints related to education and training had been inconsistent.

The GOC publishes information about its quality assurance processes, but we noted it published limited information about how it manages complaints about education providers. Shortly after we highlighted this, the GOC published a new webpage on how it handles complaints about education programmes or providers and the possible outcomes. The GOC was also already exploring solutions to the other points raised by its stakeholders, including how it can share more timely feedback with providers. Overall, we were satisfied that the GOC has risk-based and proportionate quality assurance processes in place, and we welcome the promptness with which it acted on our feedback.

## Registration

**The GOC met all four Standards for Registration this year.**

### Accuracy of the Register

The GOC continued to publish an accurate register and to process registration applications efficiently; the median time taken to register applicants from receipt of a completed application form was less than a week for both UK and international graduates.

### Illegal Practice investigations

After the GOC updated its Illegal Practice Protocol in June 2022, it received more referrals about illegal practice and closed a greater proportion of cases for not meeting its test for prosecution. It is too early to say whether these changes are directly linked to the new protocol so we will continue to monitor the data for trends.

The GOC appears to be taking longer to progress illegal practice cases; only 56% were closed within six months during the period July 2022 to June 2023 compared to 90% or more in each of the three previous years. We note that challenges with staff resourcing will have impacted timeliness, as the GOC temporarily redirected resources from illegal practice cases to fitness to practise casework. We are satisfied that the GOC has a proportionate and risk-based approach for managing illegal practice cases. However, we will be closely monitoring the timeliness of these investigations.

### Continuing Professional Development (CPD)

This is the second year of the GOC's new CPD scheme, which is on a three-year cycle from 2022-24. The GOC is closely monitoring completion rates and wrote to registrants who had not logged a personal development plan at the start of the cycle. It published new

Personal Development Plan guidance and resources to help registrants and is looking at producing similar documents on self-directed learning and peer review.

Three CPD providers told us about their experience of the new CPD scheme and reported:

- technical issues that took several months to resolve;
- a lack of clarity in relation to the new requirements;
- the need to review the new requirements in relation to peer review; and
- a lack of responsiveness from the GOC when these issues were raised.

The GOC included the feedback in a rapid review of the scheme so far. It shared the review with stakeholders and committed to acting on the findings.

It is clear from the feedback that there were challenges in implementing the new scheme. We are satisfied that the GOC is working with, and listening to, its stakeholders to make improvements and we have not seen any evidence that raises concerns about the proportionality of the GOC's requirements.

## Fitness to Practise

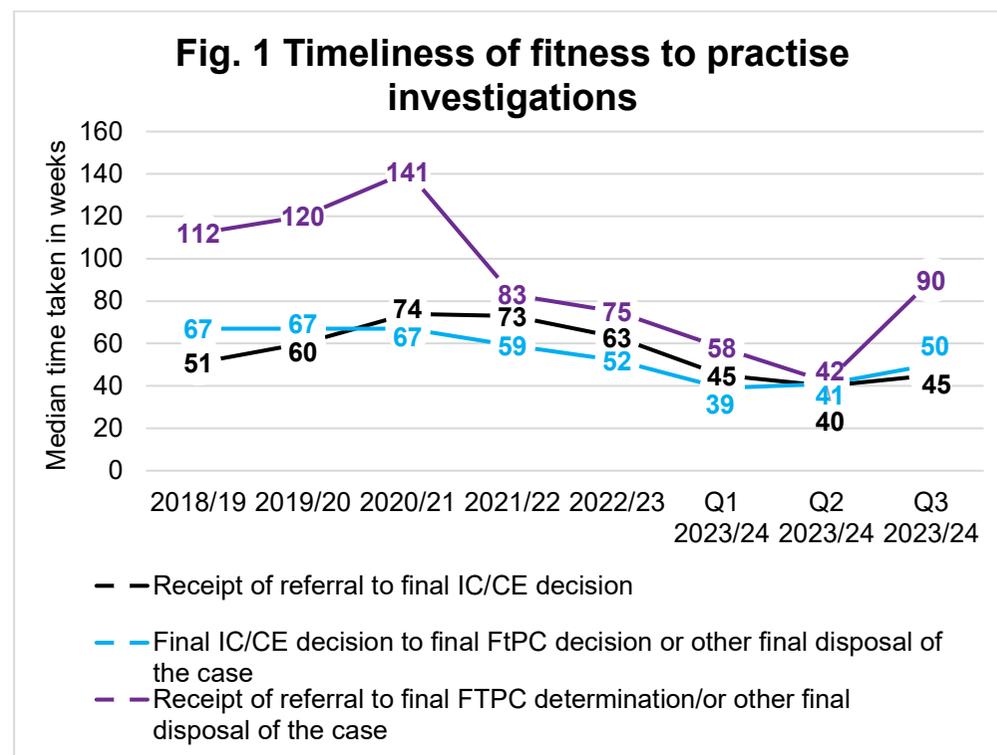
**The GOC met all five Standards for Fitness to Practise this year.**

### Timeliness of fitness to practise investigations

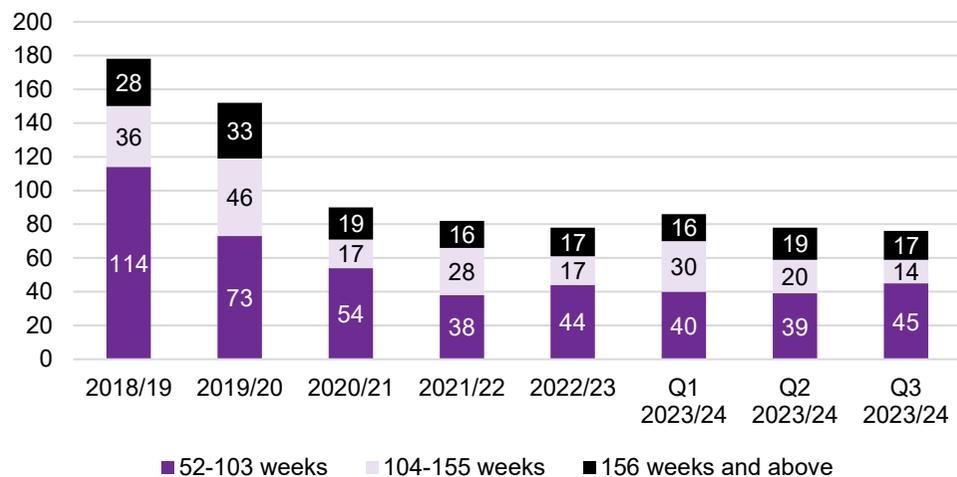
The GOC met Standard 15 last year (after not meeting it<sup>5</sup> for seven years) as it significantly improved the time taken to progress fitness to practise investigations through its 2019-21 FTP Improvement Programme.

We are pleased to report that the GOC has sustained those improvements, with median timeframes continuing to fall in the first three quarters of the review period (Figure 1)<sup>6</sup> and the number of older cases in its caseload remaining stable (Figure 2). We noted the increase in timeliness in the last quarter of the review period, but the GOC's median end-to-end timeframe remains one of the shortest amongst the regulators. We were satisfied that timeliness was reasonable across the review period as a whole.

The GOC is now implementing its FTP Improvement Programme 2022-25 to further build on its improvements and ensure they are sustained. We will continue to monitor the data closely.



**Fig. 2 Number of older cases**



### Fitness to practise decisions

We saw no evidence of significant concerns about the GOC’s fitness to practise decisions and one stakeholder described the GOC’s outcomes as ‘*invariably honest, fair and appropriate.*’

We sent the GOC learning points about a small number of final hearing decisions and we noted a case where the registrant successfully appealed the decision to the High Court. There were no

<sup>1</sup> This figure includes 6,204 students.

<sup>2</sup> It found there were five breaches (including the initial two) out of all the 227 decisions published between July 2021 and July 2023. The breaches were limited to 2022/23.

<sup>3</sup> [https://www.professionalstandards.org.uk/docs/default-source/publications/policy-advice/health-professional-regulators-registers-2010.pdf?sfvrsn=99c77f20\\_10](https://www.professionalstandards.org.uk/docs/default-source/publications/policy-advice/health-professional-regulators-registers-2010.pdf?sfvrsn=99c77f20_10)

themes within the issues identified so we are satisfied they do not indicate systemic issues in the GOC’s decision-making.

The GOC routinely discusses learning from its fitness to practise decisions at internal forums, including its Decision Review Group. We will monitor how it responds to the feedback it received about final hearing decisions this year.

### Quick links/find out more

- ▶ Find out more about our performance review process
- ▶ Read the GOC’s 2021/22 performance review
- ▶ Read our Standards of Good Regulation

### Professional Standards Authority for Health and Social Care

Telephone: 020 7389 8030

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

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

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March 2024

<sup>4</sup> Shortly after the 2022/23 review period ended, the GOC published its revised disclosure policy, which confirms it will publish erasure decisions for five years unless the registrant is restored within five years.

<sup>5</sup> Or equivalent Standard in the previous version of our Standards (FTP Standard 6).

<sup>6</sup> In Q4 2022/23 (the first quarter of the review period), the median time from receipt of referral to IC was 63 weeks and to final hearing 67 weeks and the median time from IC to final hearing was 49 weeks.

**Council**

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**Financial performance report for the period ending 31 December 2024**

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**Meeting:** March 2024

**Status:** for noting

**Lead responsibility:** Yeslin Gearty  
(Director of Corporate Services)

**Paper author:** Manori Wickremasinghe  
(Chief Financial Officer)

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**Purpose**

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1. To provide a summary of the financial reports for the period ending 31 December 2024 presented to ARC at its meeting on 27 February 2024.

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**Recommendations**

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2. Council is asked to:
  - **note** the financial performance for the nine months ending 31 December 2024 in annex one

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**Strategic objective**

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3. This report is relevant to delivery of all our strategic objectives.

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**Background**

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4. The financial performance report of 31 December 2024 relates to year 4 of the current 'Fit for the Future' strategic plan and is consistent with delivery of the current year's business plan.

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**Analysis**

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5. The results of the 31 December 2023 Financial performance report (FPR) (annex one) continues to show surplus for both BAU and for strategic expenditure. BAU surplus of £747k and the surplus before unrealised portfolio gains/losses show positive variances to both budget and the Q2 forecast. The report includes highlights, key performance indicators, risks, and future impacts. The financial performance for the period is achieved within the KPI levels set by the Council.
6. The report highlights the high volatility of external facing departments, whilst assuring other areas are managed within smaller variances. The 2024-25 budget is prepared providing solutions to the key drivers found in Regulatory Operations directorate, as highlighted in this report.
7. Further analysis is included in the report (annexe one).

## **PUBLIC**

### **Finance**

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8. There are no additional financial implications of this work.

### **Risks**

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9. The following risks are associated with finance, as identified in the finance risk register:
- The GOC fails to deliver value for money
  - The GOC is unable to deliver its strategic plans, programme of change, and business as usual either sufficiently quickly or effectively
  - Capability and resilience: Small teams lead to over-reliance on particular individuals, causing burnout, errors and/or impacting organisational delivery if absent or on departure.
10. Reporting and monitoring financial performance against budgets and forecasts are a fundamental part of managing and mitigating these risks.

### **Equality Impacts**

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11. No equality impact has been undertaken.

### **Devolved nations**

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12. There are no implications for the devolved nations.

### **Communications**

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#### **External communications**

13. None planned.

#### **Internal communications**

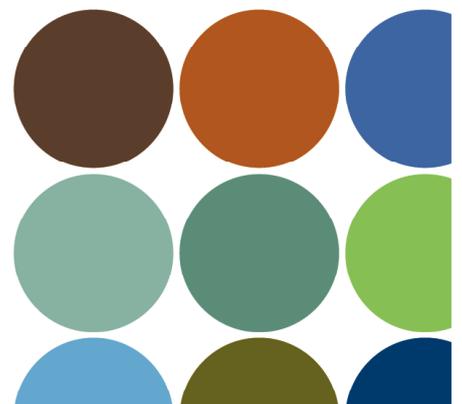
14. The financial report and the forecast are shared with the Leadership Team and SMT as part of the regular financial reporting process.

### **Attachments**

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Annex one: Financial performance report for the period ending 31 December 2024.

# Financial Performance Report for the Period ending 31 December 2023



**General Optical Council  
Financial Performance Report for the 09 months ending 31 December  
2023**

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**General Optical Council**  
**Financial Performance Report for the 09 months ending 31 December**  
**2023**

**G O C :- Summary P & L to 31 Dec 2023**

	<b>Actual</b>	<b>Budget</b>	<b>Variance</b>	<b>Q2 Forecast</b>	<b>Variance</b>
	£000's	£000's	£000's	£000's	£000's
Registrant Income	8,163	8,123	40	8,183	(20)
Other Income	322	211	111	310	12
Expenses - BAU	(7,738)	(8,250)	512	(8,074)	336
<b>Surplus / (Deficit) -BAU</b>	<b>747</b>	<b>84</b>	<b>663</b>	<b>419</b>	<b>328</b>
Project expenditure	(717)	(1,261)	544	(776)	59
Surplus / (Deficit) -before portfolio Gains/Losses	29	(1,176)	1,205	(357)	386

<b>KPI</b>	<b>Actual</b>	<b>Forecast</b>	<b>Variance*</b>
Net Profit Margin	0.49%	-4.20%	4.69%
* Acceptable KPI = +/-10%			

**Highlights**

The results before unrealised portfolio gains/losses for the period ending 31 December 2023 show a positive variance of £1,205k against the budget and £386k against the Q2 forecast. The business as usual (BAU) results before strategic projects show a positive variance of £663k against the budget and £328k against the forecast.

The total registrant income of £8,163k is £40k favourable to the budget and £20k overspent against the forecast. The total expenditure (including projects) of £8,455k is £1,056k favourable to the budget and £395k against the forecast.

**Key drivers of the improved financial performance**

Key drivers for positive variance continue to be a combination of delayed expenses, savings, and staff vacancies/recruitment gaps. (ref. Tables 3-4 – page 8)

The most volatile part of the operations is in Regulatory Operations. Costs related to externally procured legal services continue to be volatile. As described in the proposed budget, we are taking corrective steps and moving towards an alternative operating model. The Q1 forecast anticipated that externally procured legal services would be significantly higher than budget as chambers did not provide the stability we expected. However, the forecast was higher than the actual spend at the end of Q3. The surplus identified as delays in the accounts will enable the directorate to spend more on external legal costs in Q4. This high level of planned spend is partly due to staffing shortages.

Hearings is reducing the number of days listed per case where possible. This resulted in the high savings shown in the report.

# **General Optical Council**

## **Financial Performance Report for the 09 months ending 31 December 2023**

Staff vacancies and recruitment gaps continue to contribute to the surplus. (Table 2 page 7)

There was a high variance under the reserve (strategic projects and legal) expenditure due to delays in IT strategic expenditure (MyGOC and other IT development projects) and lower than expected draw on complex legal expenses reserve.

### **Risks for achieving the forecast.**

The key risks in achieving the BAU forecast are associated with external legal costs under case progression and accurately predicting and managing hearings costs.

There is a long-term risk in not identifying solutions to address both case progression legal costs and hearings issues. Regulatory Operations is planning to bring in-house lawyers experienced in advocacy can case progression under the guidance of the interim director. In the meantime, surpluses in Case Progression in this financial year will enable us to continue to rely on external legal firm expertise whilst we recruit to the team.

There is a continuing risk of unrealised investment gains/losses due to high market volatility. But as per the meeting we had with Brewin Dolphin on 9<sup>th</sup> February, the risk seems minimal with higher projections for capital growth.

### **Future Impacts (So what?)**

We expect that the new processes for FtP will be introduced soon to resolve the issue of high legal costs, although we may have to increase our spend in the medium term. Any complex legal costs not identified will increase this current year's costs.

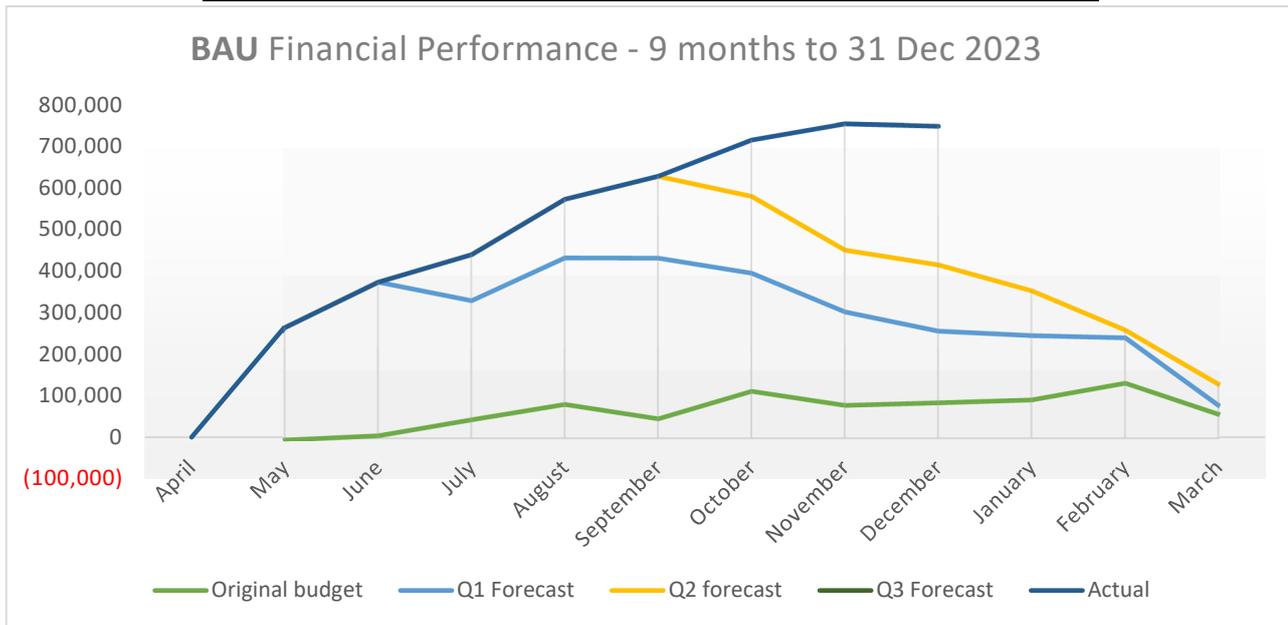
At this time of the year, given there is only three more months of accounts to review before year end, there is a high surplus in the BAU and reserve expenditure areas. The majority of this variance lies in Regulatory Operations where it is difficult to accurately predict caseload and hearing days, changes. High volatility in FtP may be an area we need to learn to expect.

The staffing resources currently cost 56% of the total expenditure. Any material staffing vacancies will impact achieving our current business plan. GOC is a relatively small organisation and depends heavily on small teams and individuals with specialist expertise. The risk of vacancies can cause the loss of knowledge and delays to projects. The new Reward and Recognition policy is designed to address this issue.

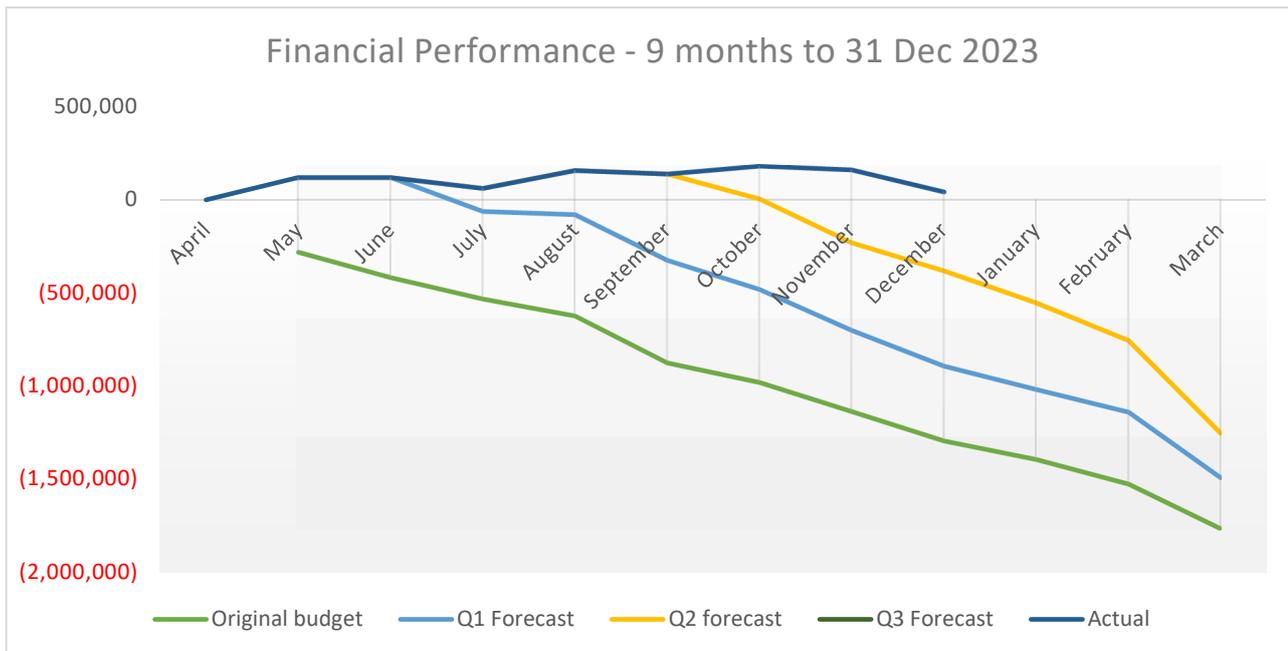
Some of the delayed operations will slip to the year 2 (2024/25). The 2024/25 budgeting process included identifying delayed operations/slippage to ensure these were captured in the 2024/25 draft budget (and outer years.)

**General Optical Council  
Financial Performance Report for the 09 months ending 31 December  
2023**

**Graphical analysis on Financial Performance and Variance**



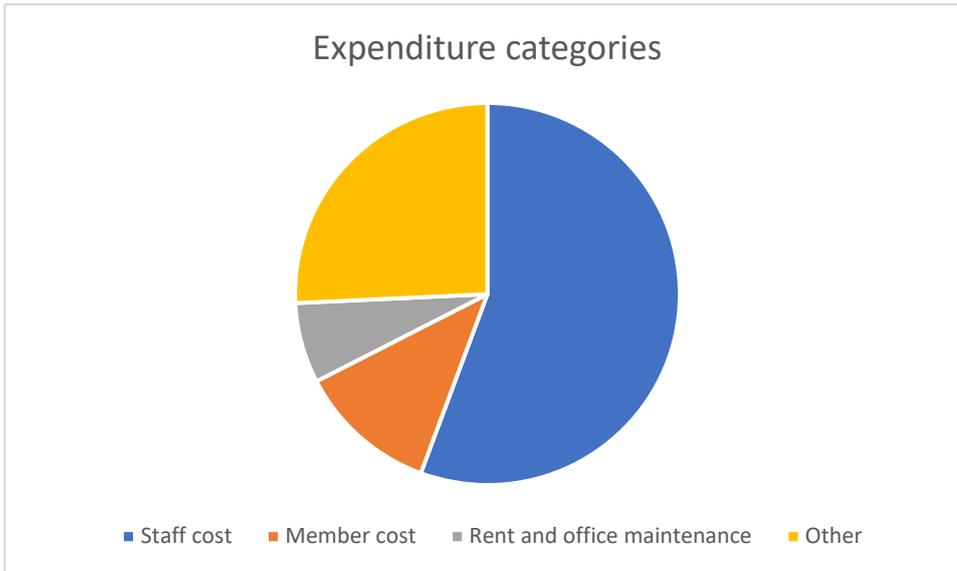
Graph 1



Graph 2

**General Optical Council  
Financial Performance Report for the 09 months ending 31 December  
2023**

**Analysis of Expenditure**

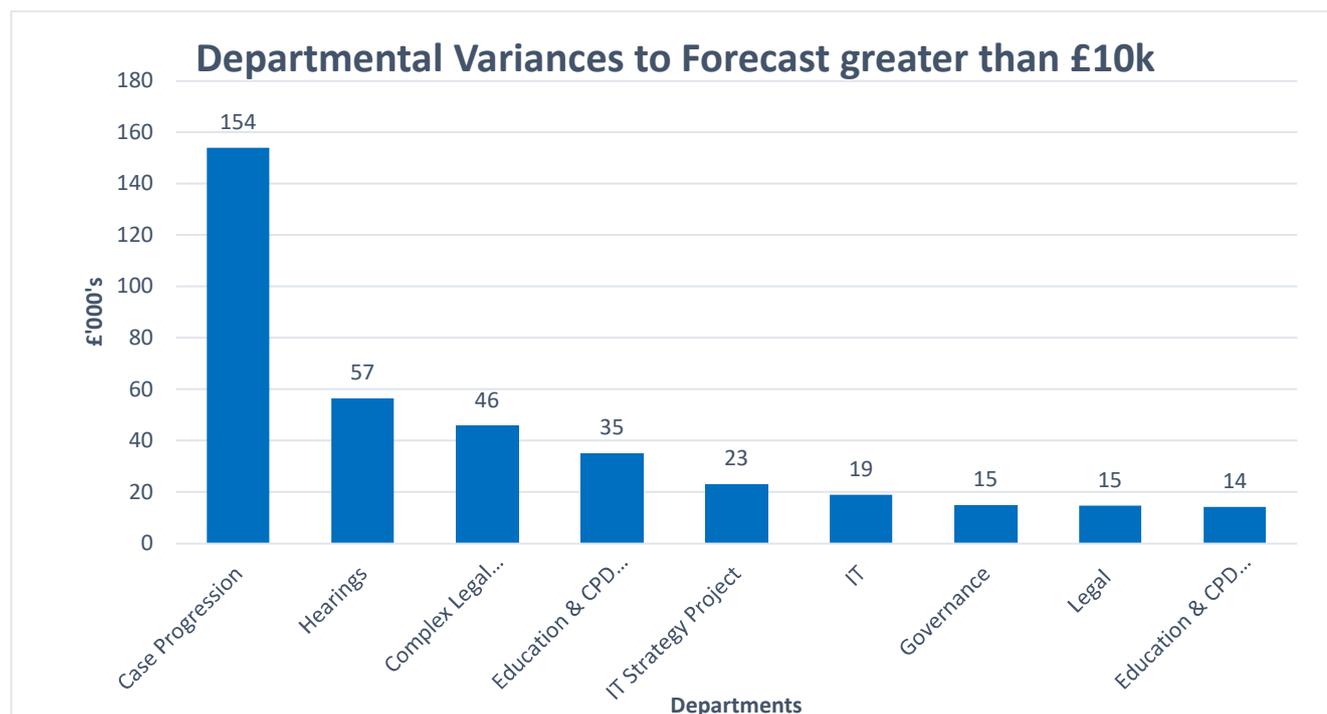


*Chart 1*



*Chart 2*

**General Optical Council  
Financial Performance Report for the 09 months ending 31 December  
2023**



Graph 3

**Cash and Cash Equivalent Summary - 31 Dec 2023**

	Actual £'000	Budget £'000	Variance £'000	Q2 Forecast £'000	Variance £'000
Cash at Bank	1,140	258	882	400	740
Short term Investments	1,650	750	900	1,650	0
<b>Working Capital</b>	<b>2,790</b>	<b>1,008</b>	<b>1,782</b>	<b>2,050</b>	<b>740</b>
Investments	8,957	8,780	177	8,585	372
<b>Total</b>	<b>11,747</b>	<b>9,788</b>	<b>1,959</b>	<b>10,635</b>	<b>1,112</b>

Table 1

**Headcount Dec 2023 (F T E's)**

	Actual FTC* Dec-23	Actual Perm. Dec-23	Actual Total Dec-23	Budget Dec-23	Q2 Forecast Dec-23
Chief Executive Office	-	9.0	9.0	9.0	9.0
Regulatory Strategy	-	21.8	21.8	24.9	23.6
Regulatory Operations	6.0	27.8	33.8	39.0	41.0
Corporate Services	3.0	18.4	21.4	20.4	23.4
Change	5.8	7.4	13.2	16.0	15.0
<b>Total Headcount</b>	<b>14.8</b>	<b>84.4</b>	<b>99.2</b>	<b>109.3</b>	<b>112.0</b>

Table 2

**General Optical Council  
Financial Performance Report for the 09 months ending 31 December  
2023**

<b>Analysis of BAU expense variance December</b>	
<b>Savings</b>	<b>£'000</b>
Efficiency Savings	8
Staff vacancy gaps (excluding efficiency measures)	154
Delays and timing (uncertain)	60
Others	141
Additional expenses	17
Additions	380
Accounting, PO, coding errors	(31)
	(10)
<b>Total Expense Variance</b>	<b>339</b>

Table 3

<b>Analysis of net savings over past quarters (BAU exp.)</b>					
Savings	Q1	Q2	Q3	Q4	Total
	£'000	£'000	£'000	£'000	£'000
Efficiency	9	-	8		17
Savings	158	90	154		402
Staff vacancy gaps	67	52	60		179
Additions	(180)	(104)	(31)		(315)
<b>Net savings/(overspent) from approved budget</b>	<b>54</b>	<b>38</b>	<b>191</b>	<b>0</b>	<b>283</b>

Table 4

**General Optical Council**  
**Financial Performance Report for the 09 months ending 31 December**  
**2023**

**Table A**  
**Income and Expenditure Accounts**

	April - December			April - December		
	Actual £'000	Budget £'000	Variance £'000	Actual £'000	Forecast £'000	Variance £'000
<b>Income</b>						
Registration	8,163	8,123	40	8,163	8,183	(20)
Dividend Income	176	197	(22)	176	191	(15)
Bank & Deposit Interest	132	7	124	132	111	21
Other Income	14	7	7	14	8	6
<b>Total Income</b>	<b>8,485</b>	<b>8,335</b>	<b>149</b>	<b>8,485</b>	<b>8,494</b>	<b>(9)</b>
<b>Expenditure</b>						
<b>Executive Office</b>						
CEO's Office	174	248	74	174	176	2
Governance	465	538	73	465	480	15
<b>Total Executive</b>	<b>640</b>	<b>786</b>	<b>147</b>	<b>640</b>	<b>657</b>	<b>17</b>
<b>Regulatory Strategy</b>						
Director of Regulatory Strategy	86	85	(2)	86	86	(0)
Policy	300	376	76	300	306	6
Communications	203	235	32	203	204	0
Education & CPD Operations	477	558	80	477	510	32
Education & CPD Development	137	216	79	137	151	14
<b>Total Regulatory Strategy</b>	<b>1,204</b>	<b>1,470</b>	<b>265</b>	<b>1,204</b>	<b>1,257</b>	<b>52</b>
<b>Regulatory Operations</b>						
Director of Regulatory Operations	168	99	(69)	168	168	(0)
Case Progression	1,592	1,675	83	1,592	1,746	154
Legal	151	160	9	151	166	15
Hearings	1,110	1,009	(101)	1,110	1,167	57
<b>Total Regulatory Operations</b>	<b>3,021</b>	<b>2,943</b>	<b>(78)</b>	<b>3,021</b>	<b>3,246</b>	<b>225</b>
<b>Corporate Services</b>						
Director of Corporate Services	92	95	3	92	92	(0)
Facilities	837	858	21	837	845	9
Human Resources	303	383	80	303	306	2
Finance	351	341	(11)	351	357	5
Registration	555	479	(76)	555	560	4
<b>Total Corporate Services</b>	<b>2,139</b>	<b>2,155</b>	<b>17</b>	<b>2,139</b>	<b>2,159</b>	<b>21</b>

**General Optical Council**  
**Financial Performance Report for the 09 months ending 31 December**  
**2023**

**Table A (Contd.)**

	April - December			April - December		
	Actual £'000	Budget £'000	Variance £'000	Actual £'000	Forecast £'000	Variance £'000
IT (BAU)	644	788	144	644	663	19
Depreciation	91	107	17	91	93	2
<b>Total Expenditure</b>	<b>7,738</b>	<b>8,250</b>	<b>511</b>	<b>7,738</b>	<b>8,074</b>	<b>336</b>
<b>Surplus / (Deficit) before project expenditure</b>	<b>746</b>	<b>85</b>	<b>661</b>	<b>746</b>	<b>420</b>	<b>327</b>
<b>Project Expenditure</b>						
Education Strategic Review project	181	299	118	181	181	0
IT Strategy Project	99	288	189	99	123	23
Change	397	447	50	397	395	(2)
Complex Legal Cases	12	151	139	12	58	46
Call for Evidence Research Potential Projects	0	0	0	0	0	0
Project Depreciation & Amortisation	18	76	58	18	20	2
Case Management Project	0	0	0	0	0	0
Fit for Future	10	0	(10)	10	0	(10)
<b>Total Project expenditure</b>	<b>717</b>	<b>1,261</b>	<b>544</b>	<b>717</b>	<b>776</b>	<b>59</b>
<b>Surplus / (Deficit) after project expenditure</b>	<b>29</b>	<b>(1,176)</b>	<b>1,205</b>	<b>29</b>	<b>(357)</b>	<b>386</b>
Investment gains	296	206	90	296	(80)	376
<b>Surplus / Deficit</b>	<b>325</b>	<b>(969)</b>	<b>1,295</b>	<b>325</b>	<b>(437)</b>	<b>762</b>

**General Optical Council**  
**Financial Performance Report for the 09 months ending 31 December**  
**2023**

**Table B**  
**Income and Expenditure Accounts Including Project Expenditure**

	April - December			April - December		
	Actual £'000	Budget £'000	Variance £'000	Actual £'000	Forecast £'000	Variance £'000
<b>Income</b>						
Registration	8,163	8,123	40	8,163	8,183	(20)
Dividend Income	176	197	(22)	176	191	(15)
Bank & Deposit Interest	132	7	124	132	111	21
Other Income	14	7	7	14	8	6
<b>Total Income</b>	<b>8,485</b>	<b>8,335</b>	<b>149</b>	<b>8,485</b>	<b>8,494</b>	<b>(9)</b>
<b>Expenditure</b>						
Staff Salaries Costs	4,492	4,693	200	4,492	4,550	58
Other Staff Costs	129	186	57	129	127	(1)
Staff Benefits	82	95	13	82	82	0
Members Costs	998	999	1	998	1,070	72
Professional Fees	377	556	179	377	411	34
Finance Costs	94	87	(7)	94	94	0
Case Progression	611	739	128	611	759	148
Hearings	220	212	(8)	220	249	29
CPD & Standards	75	59	(17)	75	75	0
Communication	21	46	25	21	22	1
Registration	6	9	2	6	6	0
IT Costs	456	741	285	456	491	36
Office Services	737	762	25	737	749	12
Other Costs	48	144	96	48	51	3
Depreciation & Amortisation	109	183	74	109	113	4
<b>Total Expenditure</b>	<b>8,455</b>	<b>9,511</b>	<b>1,056</b>	<b>8,455</b>	<b>8,850</b>	<b>395</b>
<b>Surplus / Deficit</b>	<b>29</b>	<b>(1,176)</b>	<b>1,205</b>	<b>29</b>	<b>(357)</b>	<b>386</b>
Unrealised Investment gains	296	206	90	296	(80)	376
<b>Surplus / (Deficit)</b>	<b>326</b>	<b>(969)</b>	<b>1,295</b>	<b>326</b>	<b>(437)</b>	<b>762</b>
<b>Staff cost to total expenditure ratio</b>	56%	52%		56%	54%	

**General Optical Council**  
**Financial Performance Report for the 09 months ending 31 December**  
**2023**

**Balance Sheet as at 31 December 2023**

	<b>2023-24</b>	<b>2022-23</b>	
	<b>31 December</b>	<b>31-Mar-23</b>	<b>Variance</b>
	<b>2023</b>	<b>£'000</b>	<b>£'000</b>
	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
<b>Fixed Assets</b>			
Refurbishment	461	517	(56)
Furniture & Equipment	64	87	(23)
IT Hardware	29	32	(3)
<b>Total Tangible Fixed Assets</b>	<b>724</b>	<b>742</b>	<b>45</b>
Investment	8,957	8,694	263
<b>Total Fixed Assets</b>	<b>9,681</b>	<b>9,436</b>	<b>245</b>
<b>Current Assets</b>			
Debtors, Prepayments & Other Receivable	349	433	(84)
Short term deposits	1,650	8,950	(7,300)
Cash and monies at Bank	1,140	1,253	(113)
<b>Total Current assets</b>	<b>3,138</b>	<b>10,637</b>	<b>(7,499)</b>
<b>Current Liabilities</b>			
Creditors & Accruals	1,026	1,138	(112)
Income received in advance	2,612	10,078	(7,466)
<b>Total Current Liabilities</b>	<b>3,638</b>	<b>11,216</b>	<b>(7,578)</b>
<b>Current Assets less Current Liabilities</b>	<b>(500)</b>	<b>(579)</b>	<b>79</b>
<b>Total Assets less Current Liabilities</b>	<b>9,181</b>	<b>8,857</b>	<b>324</b>
Long Term Liabilities	0	0	0
<b>Total Assets less Total Liabilities</b>	<b>9,181</b>	<b>8,857</b>	<b>324</b>
<b>Reserves</b>			
Legal Costs Reserve	700	700	0
Strategic Reserve	2,000	2,000	0
Covid -19 reserve	900	900	0
Infrastructure / dilapidations	1,250	1,250	0
Income & Expenditure	4,331	4,007	324
<b>Total</b>	<b>9,181</b>	<b>8,857</b>	<b>324</b>

# Business performance quarterly dashboard

On track
At risk
Off track

For the year 1 April 2023 - 31 March 2024

Q3 report (1 October 2023 - 31 December 2023)		Q1	Q2	Q3	Q4	Measure	Q4 (22/23)
<b>Finance</b>							
1.1	BAU budget; operate within budget	+18%	+8%	+4.5%		Tolerance is ±10%	+6%
1.2	Reserves; operate within reserves policy	0%	0%	0%		Tolerance is ±10%	0%
1.3	Change team; operate within budget	+15%	+12%	-0.5%		Tolerance is ±10%	+1%
<b>People</b>							
2.1	Planned L&D events realised	100%	100%	100%		Target is ≥90%	100%
2.2	Staff turnover (excluding end of FTCs)	6.0%	9.3%	15%		Target is ≤17%	8.6%
2.3	Staff engagement (pulse survey):	37%	33%	82%*		N/A	37%
	a. % of staff who respond	81.00%	73.52%	71%*		Target is ≥70%	81.00%
<b>Customer</b>							
3.1	FOI requests resolved	100%	100%	100%		Target is ≥100% in 20 working days	98%
3.2	Corporate complaints (stage 2):	1	2	2		N/A	1
	a. received	100%	100%	100%		Target is ≥90% in 20 working days	100%
3.3	Customer satisfaction (TBC)	N/A	N/A	N/A		Target is ≥80% positive (TBC)	N/A
<b>Regulatory functions</b>							
4.1	Registration applications completed	98%	98%	99%		Target is ≥95% forms completed	98%
4.2	Registration accuracy	99%	98%	99%		Target is ≥95%	98%
4.3	Approved qualifications meeting new ETR	31%	32%	32%		Target is 100% by Sep 2025 ex. CoO	13%
4.4	Quality of GOC approved providers' CPD	95%	94%	96%		Target is ≥85% good or excellent	93%
4.5	Customers receiving an FtP update	95%	89%	85%		Target is ≥90% every 12 weeks	93%
4.6	FtP cases resolved (rolling median)	50%	60%	61%		Target is ≥60% within 78 weeks	54%
4.7	Hearings concluded first time	87%	70%	87%		Target is ≥90%	82%
4.8	Hearings dates utilised	87%	91%	87%		Target is ≥90%	89%
4.9	New investigations at representations	80%	82%	75%		Target is 80% within 40 weeks	87%

\* For Q3, there was no pulse survey – instead, the staff survey results were used.

Q3 report (1 October 2023 - 31 December 2023)		Q1	Q2	Q3
<b>Regulatory functions</b>				
<b>Registrant engagement with CPD</b>				
4.10	Number of fully-qualified registrants	24045	24638	24641
4.11	Number yet to log a PDP – OO/IP	3387	3336	2599
4.12	Number yet to log a PDP – DO/CLO	1278	1235	1034
4.13	Number of registrants yet to complete their SOP	641	517	61
4.14	Number yet to access the platform at all	213	155	77
4.15	General total points on or above target – OO/IP	43%	46%	52%
4.16	General total points on or above target – DO/CLO	44%	48%	52%
4.17	Specialist total points on or above target – IP	34%	35%	41%
4.18	Specialist total points on or above target – CLO	35%	34%	40%
<b>Registrant progress against final CPD requirements - % of registrants who have achieved their:</b>				
4.19	entire general points requirement	8%	13%	18%
4.20	entire specialist points requirement	6%	10%	16%
4.21	provider-led requirement	41%	53%	69%
4.22	interactive points requirement	23%	33%	45%
4.23	core domains requirement	59%	66%	78%
4.24	peer review requirement	50%	57%	66%
4.25	overall cycle requirements	5%	8%	13%

KPI	Current RAG status (why it's amber/red; when/how we will get it to green)	Budget implications	Risks
<p>Customers receiving an FtP update every 12 weeks – <b>85%</b></p> <p>Target is 90%</p>	<p>The customer service update figures for Q3 have declined.</p> <p>The team has been reminded of the importance of ensuring that all case parties are updated at 12-week intervals, and next month/quarter is expected to reflect the continuing commitment to this objective.</p>	<p>N/A</p>	<p>None</p>
<p>Hearings concluded first time – <b>87%</b></p> <p>Target is ≥90%</p>	<p>We had 15 hearings that proceeded to a hearing and 2 of those hearings went part heard – both cases have been put in the hearings calendar to conclude in February.</p>	<p>We need 2 additional hearing days, although in one hearing the committee agreed no transcript was necessary as they went part heard at the end of impairment; so the determination, as it stands, will suffice.</p>	<p>This will impact end-to-end timeliness, although one hearing was expediated so it will still be within the 6-month KPI when it concludes in February.</p>
<p>Hearings dates utilised – <b>87%</b></p> <p>Target is ≥90%</p>	<p>As 6 hearings concluded early, we had 14 lost days out of 110 that finished early in Q3 – this equates to 87% for the quarter.</p>	<p>We are paying for fees for committees not to do anything, however this is mitigated by the cancellation policy.</p>	<p>If we have too many days listed for hearings, we decrease the risk of going part heard but increase the fees paid out for lost days.</p> <p>If we have too few days listed for hearings, we increase the risk of going part heard – this impacts our ability to have cases conclude first time.</p>

<p>New investigations at representations – <b>75%</b></p> <p>Target is ≥80% within 40 weeks</p>	<p>The team is currently undergoing several changes to its officer resource, with three officers' caseloads having had to be reallocated, and absorbed by others over the last few months. Additionally, staff resource was further limited in the weeks leading up to the holiday period and the office closure.</p> <p>Due to ongoing staff resource changes (with two more officers caseloads requiring re-allocation imminently whilst recruitment is ongoing), we anticipate it may take a few months for us to meet this target.</p> <p>Once a full team is up and running, the team ought to be able to meet this target each month going forward.</p>	<p>N/A</p>	<p>This will have an impact on end-to-end timeliness.</p>
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**GOC internal business plan - 2023/24**

Exceptions Report – Q3 update

All CRITICAL and ESSENTIAL Q1-Q3 activities are ON TRACK for the following business areas :

**Case Progression, Hearings, Legal, Comms, CPD, Education, Legislative Reform, Policy & Standards, Finance, HR, Registration, Change and Governance**

The following slides describe CRITICAL and ESSENTIAL Q1-Q3 activities that are OFF TRACK (amber) or DEADLINE MISSED (red) with commentary

# Facilities

Activity	BAU/Project	Timing	Priority	Success Measures	RAG	Comments
Archiving Project	Continuous Improvement Project	Q1-Q4	<div style="text-align: center;"> <span style="color: red;">●</span>                      Essential                 </div>	All archived records reviewed in line with retention policy and relevant legislation (GDPR etc.) and re-archived or destroyed		<p>The Archive project has been progressing – catalogued 293 boxes, these include all identified boxes belonging to the Registration and Case Progression (formerly FTP) Teams.</p> <p>However, there are still &gt;300 boxes to catalogue, and due to the complexity of the project and need of feedback from other teams, the time frame will be extended for an additional 6 months from mid-March 2024.</p>

# IT

Activity	BAU/Project	Timing	Priority	Success Measures	RAG	Comments
Support the business (HR & Finance) to select and implement a new HR & Payroll Environment.	Strategic Project	Q2-Q4	● Essential	<ul style="list-style-type: none"> <li>Q2 - Production of specification for New HR &amp; Payroll Systems</li> <li>Q3 - Tendering and implementation of new HR &amp; Payroll Systems</li> <li>Q4 - New HR &amp; Payroll Systems in place with no system downtime or service impact.</li> </ul>		<p>The tendering took place as planned in Q3, however only 2 bids were received, of which only 1 was in budget. The budget is reasonable and the other bidder's price was excessive (517% higher over 5 years). Nevertheless, the business did not have capacity to evaluate bids as planned and consequently we cannot go live in Q1 2024-2025.</p> <p>The supplier in budget will be assessed in Q4 although the procurement process may need to be re-run if the panel is not confident in their solution after interview.</p>
Laptop refresh of oldest 50% of laptops (not Case Examiners)	Departmental Project (minor scale)	Q2-Q4	● Essential	<ul style="list-style-type: none"> <li>Q2 - Tendering for new laptops</li> <li>Q3 - Batch 1 of new laptops delivered, setup and in place</li> <li>Q4 - Batch 2 of new laptops delivered, setup and in place</li> </ul>		<p>The IT Team has set up the automated installation method (Microsoft Autopilot) but unfortunately there is a problem with Windows 11 that make device operation for staff impractical (file access delays). The procurement will commence as soon as Microsoft provide a resolution.</p>
Annual DR Test of IT Systems & Backup	BAU	Q3	● Essential	The report notes more positive practices than remediation measures.		<p>Originally Rock were due to go live in April, but actually went live in June, so the planned Disaster Recovery Test has been delayed. It will take place in Q1 2024-2025, which is in the first year of the contract (as planned).</p>
Improved Cyber & Email Security including email archiving	BAU	Q2-Q4	● Essential	<ul style="list-style-type: none"> <li>Review Alternatives Q2-Q3.</li> <li>New Solution in place Q4.</li> </ul>	N/A	<p>Activity moved to 2024-2025 due to reduction in IT resources &amp; confidence of existing cyber security defence. The main benefit of the project will be enhanced email archiving which is not of high priority relative to other projects.</p>

**COUNCIL**

**Report from the Chair of Council**

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**Meeting:** 13 March 2024

**Status:** For noting

**Lead responsibility & paper author:** Dr Anne Wright (Chair of Council)

**Introduction**

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1. This report covers my principal activities since the last Public Council meeting on 13 December 2023.
2. This will be the final Council meeting for optometrist registrant member Dr David Parkins, whose second term of office ends on 14 February 2024. On behalf of the Council, I would like to thank David for the outstanding contribution he has made to the GOC over eight years. He has brought to the GOC's strategic objectives enormous expertise and knowledge of the optical sector, both in terms of policy and practice, and always in the interest of effective regulation to protect the public. David has been a member of the Audit, Risk and Finance Committee, and more recently also the Investment Committee. He has also acted as Council Lead for legislative reform. During the Covid-19 pandemic, his detailed contribution to the GOC and COO joint guidance enabled practice to continue safely. David is greatly respected by Council and Executive alike, and we all wish him the very best for the future.
3. I am also pleased to welcome as new optometrist registrant member Dr Hema Radhakrishnan, who has been appointed by the Privy Council to join the Council with effect from 15 March 2024. Hema is an experienced academic and researcher at Manchester University, where she is also a member both of the Senate and the Board of Governors. She was for several years Associate Dean for Social Responsibility in the Faculty of Biology, Medicine, and Health. Her specialist research interests include myopia management and low vision, as well as in differential achievement among optometry students. Her research has been recognised with awards both nationally and internationally. I am sure Hema will make an excellent contribution to the work of the Council, and I look forward to working with her.

4. On behalf of the Council, I warmly congratulate Lisa Cole and Ashley Francis, our new Investigation Committee Dispensing Optician (DO) members whose appointment commenced on 15 January 2024.
5. Lisa has over 33 years' experience in the optical sector with several years working in Practice management. She is a MECS accredited Contact Lens Optician (CLO), working as a supervisor and assessor of undergraduate Optometry students at the University of the West of England, and qualified as a DO at the City of Islington College in 1994 and as a CLO in 2002.
6. Ashley is a qualified DO based in north Wales and north-west England. His career in optics began in 2011 in multiple practices on the Hampshire-Surrey border as an optical assistant. He also trained in an optical lab as a glazing technician and became a trainer for the practice in later years. Ashley has a keen interest in Low vision, Pediatrics, Ocular pathology, and Myopia management.

## Management

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7. I have had weekly catch-up meetings with the Chief Executive and Registrar (CE&R) and the Head of Governance. I have had pre-briefing meetings and received briefings from members of the Communications Team, Governance and Regulatory Strategy Departments on a range of priorities.
8. I have held quarterly 1:1 meetings with individual SMT Members as well as other meetings on specific priorities and issues.
9. On 6 March 2024, I joined one of the GOC Standards review conversations entitled the 'GOC Registrants Open Event' that was organised by our Standards Officer and our Standards Team.

10. Last month was LGBTQ+ History Month in the UK, therefore each week of February our EDI Manager organised and authored weekly blog posts about a different figure or moment in LGBTQ+ history to celebrate:

- Our first figure was Dr James Barry, a British military surgeon, who was born around 1789 and died on 25 July 1865. We learned from the blog that after his death, an autopsy performed against his wishes found that he'd been assigned female at birth. The opportunity was opened to all staff who wished to share their knowledge or interests.
- Dr Louisa "Lulu" Martindale (1872-1966) was another figure who followed her own path in advocating for women through her work as a physician and surgeon. Once she'd gained her doctorate in medicine in 1906 at a time when the profession was, at best resistant and at worst hostile towards women, Martindale moved to Brighton and open her own general practice, becoming the first woman General Practitioner (GP) in the UK.
- Master Victoria McCloud graduated from Christ Church Oxford with a degree in experimental psychology, and later obtained a doctorate in human visual system science. Dr McCloud then converted to the legal profession, was appointed a deputy judge in 2006, and in 2010, when she was aged only 40, became the youngest person to be appointed a Queen's Bench (now King's Bench) Master. She was the second woman and the first trans person to be appointed to this role.
- The San Francisco Gay Men's Chorus (SFGMC) was founded in 1978, becoming the first openly gay choir in the world, and is one of the world's largest male choruses with around 300 members. The SFGMC is still running today however, there are very few members who have outlived it. The first cases of what would later become known as AIDS were reported in the USA in June 1981. There is a continued lack of understanding around HIV; diagnosis rates are now highest among heterosexual people, with many believing it still be to a condition that only affects gay or

bisexual men. Treatments we have in the UK are also not available or accessible globally, demonstrating a significant health inequality.

11. Leonie Milliner, our Chief Executive and Registrar, gave an inspiring presentation to launch Women's History Month (WHM) entitled 'Not All Who Wander Are Lost' on the 1 March 2024, which was about Margaret Dye, a rare female pioneer in the male dominated world of dinghy sailing. All staff members were welcomed and we were joined by colleagues from GCC.

- For the month of March, our Information Governance (IG) Officer organised a WHM podcast club where staff listened to different podcasts and held a review session each week to discuss the episode. The first episode on the 6 March 2024 was from the Women Who Travel Podcast, entitled 'More Solo Travel' with Jessica Nabongo. Followed by another lunch-time session on the 7 March 2024, full of fun, games and pizza which was opened to staff who identified as a woman.
- On 8 March 2024, all staff were welcomed to our WHM 'Purple Day and Presentations' where staff brought a hint of purple to the session and heard from the Women's Network on the history of International Women's Day and how this has shaped our lives today.

### **Council and Committees**

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12. I chaired the appointment panel for the recruitment campaign for a new registrant Council Member to succeed Dr David Parkins which produced a very strong response from Registrants.

13. We are currently also recruiting for a new Independent Appointment Panel (IPM) Member to participate in recruitment of new Council members over the next period. The current IPM Ranjit Sondhi is due to step down shortly having completed a number of appointments within the framework of PSA guidance. I

would like to thank Ranjit for his invaluable input and advice over the last three years.

14. Further recruitment campaigns are scheduled for a Lay Council member to succeed Sinead Burns who will step down in September 2024, and also for two new registrant Council Associates to join the GOC April 2024.
15. I chaired a Council Strategy Day on 18 January 2024 to further progress plans for the 2025 - 2030 GOC's strategy. The hybrid meeting was held at 10 Old Bailey with some participants joining online.
16. I chaired the Nominations Committee meeting on 23 January 2024 and the Financial Chair's meeting on 25 January 2024. I attended the Audit, Risk and Finance Committee (ARC) meeting on 30 January 2024 and on 27 February 2024, in addition, I joined the Remuneration Committee meeting on 05 February 2024.
17. I have held fortnightly meetings with Clare Minchington, our Senior Council Member (SCM). I have chaired regular informal Council Catch Up sessions including the sessions held on 09 January 2024 and on 20 February 2024. I hosted the Council Members' virtual coffee morning on 22 February 2024, and have had individual catch-ups with Council Members and Council Associates.

## **Stakeholders**

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18. 14 December 2023: PSA Seminar - What role do health & care professionals have in tackling inequalities & discrimination? - Organised by Alan Clamp, PSA for Health and Social Care, Chief Executive, with the relevant sector bodies and regulators in attendance. Clare Minchington, Michael Galvin, and Tim Parkinson also participated from Council.
- 19 December 2023: General Optical Council (GOC) Stakeholder Roundtable - Organised by Charlotte Urwin, our Head of Strategy, Policy, and Standards with

Louisa Wickham, National Clinical Director for Eye Care & Medical Director at Moorfields Eye Hospital NHS Foundation Trust.

19. 15 January 2024: PSA Chairs Roundtable Organised by Caroline Corby, PSA Chair with the professional health regulator Chairs in attendance.
20. 16 January 2024: Health & Care Professions Council (HCPC), Cross Regulator Consent Project hosted by Christine Elliott, HCPC Chair with the relevant sector bodies and regulators in attendance.
21. 06 February 2024: PSA Chair and Chief Executive catch-up meeting - Organised by Alan Clamp, PSA for Health and Social Care, Chief Executive, with Caroline Corby, PSA Chair and accompanied by Leonie Milliner, our CE&R.
22. 13 February 2024: Introductory meeting with Jonathan McShane, new Chair of the General Chiropractic Council (GCC).

**Council Member meetings with stakeholders**

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23. N/A.

**COUNCIL**

**Chief Executive and Registrar's Report**

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**Meeting:** 13 March 2024

**Status:** For noting

**Lead responsibility and paper author:** Leonie Milliner, Chief Executive and Registrar

**Council Lead(s):** Dr Anne Wright CBE, Council Chair

**Purpose**

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1. To provide Council with an update on stakeholder and other meetings attended by the Chief Executive and Registrar and activities not reported elsewhere on the agenda.

**Recommendations**

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2. Council is asked to note the Chief Executive and Registrar's report.

**Strategic objective**

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3. This work contributes towards the achievement of all parts of our Strategic Plan and our 2024/2025 Business Plan.

**Background**

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4. The last report to Council was provided for its public meeting on 13 December 2023.

**Analysis**

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5. I start my report by recording my appreciation for our Women's Network, who have organised a splendid schedule of talks and events to mark Women's History Month, including a 'purple day' on International Women's Day on 8 March and lunch time session in the office, open to anyone who identifies as a woman, on 7 March. The theme for this year's Women's History Month is 'Women who advocate for Equity, Diversity and Inclusion' and I was delighted to be asked to launch this year's programme with a joint event with the General Chiropractic Council on 1 March, where I spoke about Margaret Dye, a female pioneer in the male dominated world of dinghy sailing.
6. Since Council last met, we have been joined by six new members of staff: Alimun Nessa, Head of People and Culture; Bernice Yeboah, Legal Administrator; William Baines, IT Apprentice; Tom Scott, Project Consultant; Latanya Gordon and Humera Arif, Hearings & Scheduling Officers. I would like to thank Naomi Gouldbourne, Investigations Officer and Tom Henery, Head of People & Culture, both of whom have left since the last report. We wish them well for the future.
7. Interviews for the permanent post of Director of Regulatory Operations were held on 23 February. I am grateful to Council member Lisa Gerson for her assistance with shortlisting, and to Council member Tim Parkinson, who joined me on the selection panel.

Prior to interview, shortlisted candidates met members of the senior management team and representatives from our staff network groups. An announcement is expected shortly.

8. I continue to hold weekly meetings with our Chair of Council, Head of Governance and with each member of our Senior Management Team (SMT). In addition, I held briefing meetings with our Chair of Council on 19 January 2024 and on 8 March 2024. I chaired two monthly all-staff meetings and fortnightly SMT meetings, as well as attending monthly Risk Register meetings, chaired by our Director of Corporate Services and a Leadership Team meeting (which has a rotational chair). On 18 December 2023, SMT held an off-site team planning meeting, with lunch. I joined the Strategic Change Board Meeting (Quarterly Report) on 19 January 2024, which was organised by our Change Team with the relevant staff members in attendance. I chaired two finance Q3 forecast review meetings, on 25 January 2024 and on 26 January 2024, which included our Director of Corporate Services, Head of Finance, and relevant members of staff.
9. I attended the Council Strategy Day on 18 January 2024; and attended the Nominations Committee meeting on 23 January 2024; the joint meeting of the chairs of ARC, Investment, Nominations and Remuneration committees on 25 January 2024; the Audit, Risk and Finance Committee (ARC) meeting on 30 January 2024 and on 27 February 2024; the Remuneration Committee meeting on 5 February 2024; and the Council Catch-up session on 20 February 2024.
10. I also attended the GOC Standards Review engagement event with Case Examiners and Fitness to Practise (FtP) members on 22 February 2024, the open engagement event for all GOC registrants on 6 March 2024 and the standards review student event on 7 March 2024, which was organised by our Standards Officer, with the relevant staff, members, workers, students, and external guests in attendance.
11. Although some time ago now, it is worth reporting on our collective winter-break celebrations. On 14 December 2023, we held an all-staff in person network and team-building event at our offices in Old Bailey, followed our GOC Christmas lunch, held at the Folly. Our SWEG also held a festive coffee break on 20 December 2023, organised by our Governance Officer, to which all staff were invited.
12. We are corporate members of the Institute for Regulation (IoR), and I was delighted to welcome Lousia Dale to our all-staff meeting on 4 March to talk about the benefits and opportunities of our membership, including podcasts, publications, courses, and special interest groups in matters of common regulatory interest, such as EDI, risk and policy. I also attended the IoR's annual conference at BMA House on 7 March. We are also corporate members of the Association of Chief Executives (ACE) and Public Chairs Forum (PCF), and if any Council member wishes to be added to the PCF events mailing list, please email [executiveoffice@optical.org](mailto:executiveoffice@optical.org).

## Change

### *Change Management Office (CMO)*

13. The CMO continues to deliver its planned programme of strategic projects. The Strategic Change Board Meeting met on 19 January 2024, and each project is supported by a project board which meets monthly.
14. The procurement process for a supplier for the MyGOC contract has concluded. In accordance with the scheme of delegation, the final authority to sign the contract is

delegated to the Chief Executive and Registrar and the Chair of Council, and Council will be updated in due course.

15. The Fitness to Practise Case Management System (CMS) project is on track with a phase one go-live date of 10th April 2024. The overarching CMS build is complete, and User Acceptance Testing is complete, subject to fixes and re-testing. The next significant milestone prior to go live is end to end testing, scheduled for March and staff training, scheduled for April. The project is in budget, with two workstreams (bundling and Registration Appeals Committee) being pushed back until after go-live. Neither of these will affect the usability of CMS. Planning discussions and considerations for phase 2 are underway.
16. Projects under the People Plan Programme board are delayed due to the recent departure of the Head of People & Culture. However, with an interim now in place, these are now being progressed with revised timelines.

### *Information Technology (IT)*

17. A new IT apprentice William Baines started with the team in December.
18. Tenders were received and evaluated for our annual internal and external penetration test of our whole ICT environment, and a contract has been awarded. Work commences in February and includes our Cyber Essentials re-assessment.
19. Following TIAA cyber audit review, proposed recommendations have now been received. These have been reviewed and we await final outcome.
20. The IT team are having a team development day in March, as part of their professional development and continuous growth. The team will be attending an IT conference covering a range of topics including cyber security and the emergence and use of AI in organisations.

### Corporate Services

#### *Facilities*

21. The archive project has successfully completed a review of 293 boxes with contents catalogued. These include all identified boxes belonging to the Registration and Case Progression (formerly FTP) Teams. Over 300 boxes still need to be reviewed. Due to the complexity of the project and need for input from business areas, the time frame will be extended for another six months from mid-March 2024. The team continues to support our Future Office Accommodation project manager.
22. We continue to review our Health and Safety procedures and risk assessments, with a focus on staff home working arrangements and Display Screen Equipment assessments, supporting colleagues with any additional needs identified through the process, such as furniture or equipment, as recommended by specialist consultants.

#### *People and Culture*

23. Our annual staff survey results were presented to SMT and Council at the end of January and to all employees at an all staff meeting in early February 2024. The overall results were positive, and we have agreed three development areas to prioritise for the next 10 months. We continue our work to develop a new Knowledge Skills and Behaviours framework to replace our current appraisals process. A working group has been established comprising staff from all business areas. We will support and train our

managers in applying the framework consistently and fairly, as part of the implementation process.

24. As part of our ongoing investment into Learning and Development, our senior management and leadership teams will undertake an externally facilitated two-day workshop in March focussing on developing our leadership skills. We are also developing a training timetable for the year ahead including agreeing our approach to mandatory training for all staff.

### *Registration*

25. The Registration Team have been busy with annual renewal for fully qualified and body corporate registrants, which opened on 22 January and will close on 31 March as usual. This year we have introduced a new question around 'service of statutory notices by email,' this allows registrants to either opt in or opt out of receiving statutory notices by email only. Dependant on responses it could mean cost and efficiency savings for the organisation, as all statutory letters are required to be sent by tracked mail. So far renewal rates are on track with previous years trends.
26. Levels of interests continue to remain high from applicants who qualified overseas. We have successfully introduced an additional 'qualification check' for all these types of applications to add an additional layer of verification directly from educational establishment overseas, through a third party.
27. We have recently received a pass list of over 200 newly qualified registrants, and we are busy processing these applications to allow them to begin their professional careers.

### Regulatory Operations

28. We have completed a procurement exercise for the Optical Consumers Complaints Service and appointed Nockolds as our supplier from 1 April 2024 for a further three years.
29. The Directorate leadership team has been restructured and we have completed an external recruitment exercise to fill the remaining Head roles in the structure. We hope to have the revised team in place during Q1 to provide more stable leadership as we move into 2024/2025.
30. We have seen some turnover in managers and investigation officers in recent months. This, combined with planned and unplanned leave, has put additional pressure on the teams during Q4. Following a recruitment exercise for investigation officers we hope to be back up to full strength by the end of Q1.
31. We've commissioned a project consultant who is working with us during March and April to carry out a rapid review of our hearing's operations. The review will make practical recommendations with the aim of ensuring greater value for money and cost effectiveness and assisting us in concluding cases more briskly.
32. We are meeting the Defence Stakeholder Group later this month to discuss our consultation on the proposed changes to our Standards.

## Regulatory Strategy

### *Standards Review*

33. In December, Council approved the decision to consult on proposed changes to the Standards of Practice for Optometrists and Dispensing Opticians, Standards for Optical Students and Standards for Optical Businesses. After the Council meeting, we then prepared to launch the consultation. This involved amending the documents in line with Council feedback. I approved the documents for consultation in accordance with the delegation from Council, in consultation with the Chair of Council and Chair of Standards Committee. We subsequently arranged for Welsh language translation of the consultation documents and built and tested the survey consultation platform. We launched the Standards Review consultation on 14 February, with a deadline for responses of 8 May.
34. We promoted the consultation through our usual channels via a press release, blog post and information on social media. We also included the consultation in our bulletins for registrants and education providers. Following the success of the stakeholder conversations we carried out in 2023 as we developed our thinking on changes to our standards, we will also be undertaking a programme of engagement events open to all stakeholders (including registrants), as well as sessions with GOC staff, Case Examiners and Fitness to Practise members to promote the consultation and hear their views on the proposed changes.
35. Alongside the launch of the Standards Review we also launched our new consultation hub. The new platform offers increased functionality, including improvements to the process of building consultations on the platform as well as the ability to host online workshops or organise events through the platform. We hope that this increased functionality will give stakeholders a more joined up engagement experience.

### *Legislative Reform*

36. At the Council meeting in June, Council agreed a plan for taking forward commitments made following our analysis of responses to the 2022 Call for Evidence. That paper identified six different work streams arising from those commitments. We have progressed the priority work streams since the last Council meeting, although the timetable for the work has slipped in places. This is partly due to our inability to appoint a Policy Manager to deliver the business regulation (meaning the work has to be done within existing resources) and to delays in receiving bids for our research. These are explained in more detail in the following paragraphs.
37. One work stream focuses on updating our 2013 statement on the testing of sight. There is stakeholder concern that some sight test models which are separated by time, place or person may not adequately protect the public. We issued a tender for an external agency to develop a risk-based framework that will explore the differing risks arising from separation of elements of the sight test by time, place or person on public protection or patient safety. A second element of the brief invited agencies to propose how the GOC might test the risk-based framework in a real-world setting.
38. Unfortunately, we did not receive any tenders but have had one expression of interest from a group of universities who are developing a proposal. We anticipate that this proposal may cost more than the amount we originally indicated, though within our

budget. For this reason, we anticipate that we may need to reopen the tender process, in line with good practice in procurement.

39. Our work on developing a new model of business regulation continues to progress. Our stakeholder reference group on business regulation met for the first time on 7 December, with subsequent meetings planned for March and June of this year. We aim to bring consultation proposals to Council for the September meeting.
40. We have now published the consultation response document summarising responses to last year's consultation on a draft statement on the verification of contact lens specifications and a definition of aftercare. Following careful consideration of the responses, we have made changes to the statement on verification and decided not to progress with plans to set out a definition of aftercare.

### *Research Update*

41. We have commissioned Impact Health to carry out the GOC's first business registrant survey. The survey was sent to all GOC registered optical businesses and included questions on the size and characteristics of our business registrants, the issues they face, levels of innovation and adaptation of technology, and their perceptions of regulation. The survey has now finished, with a response rate of around 7% (approximately 215 responses), despite extensive communications to promote the survey and an extension of the deadline. The survey report is due at the end of March. Given the low response rates, we will consider whether we should run the survey again next year.
42. We have commissioned DJS to conduct the next three waves of the GOC's annual public perceptions survey. This is a survey of around 2,000 people from across the UK. The aim of this survey is to track trends in, for example, patient satisfaction levels, trust, and confidence levels in the professions, where to go in an eye care emergency, complaints and shopping habits. While we have seen generally positive findings of the professions over the years, we know that some groups, such as those with a disability or from an ethnic minority background, have less positive experiences of visiting an opticians/optometrist practice. This year we are delving deeper into the data to better understand vulnerability in eye care services and which groups of patients may have more adverse experiences of accessing and using optical services. The fieldwork is now complete, and the report is due to be finalised by the end of March.
43. We have commissioned Enventure Research to conduct the next three waves of the GOC's annual registrant survey. This is a survey of GOC registered optometrists, dispensing opticians, and optical students. The survey provides important data, not just for the GOC but also for external organisations including government departments across the UK to help inform areas such as workforce planning. We will continue to collect data in relation to the workforce makeup, including the number of full and part time workers, locums and those with and planning to gain additional qualifications. We will continue to track trends in areas such as job satisfaction, challenging working conditions, speaking up about patient safety issues, and future career plans. After issuing our joint sector statement last year on bullying, harassment, and discrimination, we will delve into the data more to understand how often this is occurring and why many registrants are not reporting it.
44. The survey is due to launch on 19 March and will close on 22 April, with the report due at end of May. Reflecting on our learning from the business registrant survey, we have

refreshed all our communications about the registrant survey so that registrants can see the value of completing it, in the hopes of improving response rates.

45. We will bring a paper to Council in September setting out the findings from these research projects.

#### *Communications and Parliamentary Engagement*

46. We are currently in the process of delivering our student roadshows, to welcome new students and introduce them to the GOC. These are held online and have attracted similar numbers to last years' events.
47. Staff represented the GOC at 100% optical, an event held at the ExCel Centre at the end of February, where we had a stand to engage with and answer questions from registrants. The event attracts over 10,000 optical professionals from across the globe.
48. Leonie Milliner and representatives from ADBO and the College of Optometrists met with the Office for Students to discuss funding gaps for optics courses and followed up with a joint letter setting out more information on this.
49. A new animation to promote self-directed CPD has been produced and has been shared on our social channels and website. The animation can be viewed here: <https://optical.org/selfdirectedcpd/>
50. A Welsh translation toggle is now available on the main website, to support compliance with the Welsh language standards.
51. The external facing business plan for 2024/2025 has been drafted and will be designed following approval from Council.
52. Registrant bulletins were sent out in December and January, we have supported member recruitment with a number of press releases, and new blogs have been posted to support the standards review and the final year of the CPD cycle.

#### *Education and Continuing Professional Development (CPD)*

53. Quality assurance visits to education providers continue as planned and we continue to assess whether to hold visits virtually or on site. Since 1 April 2023, we have undertaken 12 quality assurance visits, four of which were virtual and eight onsite/in-person.
54. On 17 January, the team attended an in-person training session addressing 'Risks in Optometric Education' to prepare and support them with the Annual Monitoring and Reporting (AMR) process this year. This training was developed based on feedback from the process in 2023 and received very positive feedback. Analysis of the AMR provider submissions is underway, information from which will support our QA activities throughout the remainder of the year.
55. As previously reported, twelve GOC-approved qualifications have adapted to the new education and training requirements, all of which admitted students into year one from

September/October 2023. We continue to work with providers to ensure we are aware of their proposed plans for adaptation, and to ensure we are sufficiently resourced to manage their notification to adapt.

56. An in-person EVP workshop took place on 28 February 2024. This provided our current EVP group with the opportunity to work together, learn about updates and changes to our processes (Operations & Development), contribute to our continuous improvement and develop some 'Lines to Take' (LTT) on specific, frequent issues raised during visits for improved consistency in GOC messaging.
57. We are preparing for the end-of-cycle CPD arrangements, as well as continuing with our communications plan to further promote and increase CPD engagement including a recently published blog and animated video on self-directed CPD. We hosted a CPD provisionally approved provider forum on 27 February 2024 (which was made open to all fully approved CPD providers who wished to attend).
58. As this is the first full cycle of our new CPD scheme SMT has agreed, for this cycle only, that non-completion of the PDP and reflective exercise will not on their own be grounds for removal from the register. However, compliance with this requirement will be taken into consideration as a mitigating or aggravating factor where registrants raise exceptions as per our exceptions policy.
59. Plans for the next CPD cycle 2025-2027 are underway and SMT has agreed minimal changes will be made to the scheme. This will allow for the review of a full cycle to establish the effectiveness of the new scheme. We are aware the new scheme has meant significant change for the sector. These changes aimed for a culture change in how registrants engage with their CPD and reflect on their own development, and time is needed to see such a shift in culture.

## Governance

60. The Governance team continues to support our members in several ways, including servicing our committees, managing member recruitment, and ensuring that the GOC remains compliant with its own policies and procedures.
61. The team's principal focus in the past few months has been member recruitment, with two Council member vacancies arising in 2024. In addition to this, the department has also supported the advertising and recruitment of two Council Associates and an Independent Panel Member.
62. The Governance team will be reviewing some policies in the next few months, including our Speaking Up policy, Customer Complaints and Feedback policy and Acceptable Behaviour policy. It will also be supporting a small member reference group in reviewing several committee terms of reference and the Council's standing orders. Council will receive a more substantial update on this work in autumn 2024.

## *Equality Diversity and Inclusion (EDI)*

63. The PSA Standard 3 evidence matrix gap analysis has highlighted additional actions, including the development of an Unfair Outcomes Working Group and a project to standardise our EDI data. These are included in our proposed 2024-25 EDI action plan.

64. A workshop covering the proposed principles and goals of our 2025-2030 EDI Strategy was delivered at the Council Strategy Day in January.
65. Our EDI Manager attended a PSA conference on “The role of health professionals in tackling health inequalities.”
66. Internal awareness raising about EDI issues has continued with a Hannukah Hangout and a celebration of various winter festivals in December. Several blogs have been produced and posted on IRIS throughout February as part of LGBTQ+ History Month.

#### External Stakeholder Engagement

67. Since the last public Council meeting on 13 December 2023, I have attended the following external meetings and engagements:
  - 14 December 2023: Professional Standards Authority (PSA) Seminar - What role do health & care professionals have in tackling inequalities & discrimination?
  - 15 December 2023: Chief Executives of Health & Social Care Regulators Steering Group (CESG) - Chaired and organised by Nick Jones, Chief Executive and Registrar at General Chiropractic Council with the relevant regulators in attendance.
  - 19 December 2023: General Optical Council Stakeholder Roundtable - Organised by our Head of Strategy, Policy, and Standards with Louisa Wickham, National Clinical Director for Eye Care & Medical Director at Moorfields Eye Hospital NHS Foundation Trust, in attendance.
  - 22 January 2024: Sector Partnership for Optical Knowledge & Education (SPOKE) networking & collaborative writing event at the University of Warwick, organised by the College of Optometrists.
  - 26 January 2024: Round Table Sustainable Eyecare Services - Organised by Louisa Wickham, National Clinical Director for Eye Care & Medical Director at Moorfields Eye Hospital NHS Foundation Trust, in attendance.
  - 30 January 2024: Meeting with Jenni Minto MSP, Minister for Public Health and Women's Health and Scottish Government, accompanied by our Director of Regulatory Strategy and our Communications and Public Affairs Officer.
  - 1 February 2024: Sector Strategic Implementation Steering Group (SSISG) meeting - with the relevant sector bodies and academics in attendance.
  - 2 February 2024: Introductory meeting with College of Medicine & Dentistry (CoMD), and Paul Carroll, Director of Professional Services, Clinical Services Team at Specsavers, and relevant GOC staff members.
  - 6 February 2024: meeting with Alan Clamp, PSA for Health and Social Care, Chief Executive and Caroline Corby, PSA Chair.
  - 9 February 2024: meeting with Ross Lawlor, Head of Funding, Office for Students (OfS), with Professor Joy Myint, Professor of Optometry, Director of Learning & Teaching School of Optometry & Vision Sciences, Miranda Richardson, Head of Professional Qualifications & Education at Association of British Dispensing Opticians (ABDO) and Lizzy Ostler, Director of Education at College of Optometrists.

- 21 February 2024: attendance at the Royal National Institute of Blind People (RNIB) Low Vision Centre launch of RNIB's Adult Low Vision Service Quality Framework - organised by Dr Louise Gow, Clinical lead for eye health, optometry, and low vision at RNIB with the relevant sector bodies, patients and registrants in attendance.
- 22 February 2024: Chief Executives of Regulatory Bodies (CEORB) meeting - Chaired and organised by Nick Jones, Chief Executive and Registrar at GCC with the relevant regulators in attendance.
- 26 February 2024: 100% Optical Event which was also attended by our Communications Team.
- 28 February 2024: roundtable public sector breakfast discussion with Doug Gurr, Leadership in the age of Artificial Intelligence (AI), organised by Saxton Bampfyld with external guests in attendance.
- 7 March 2024: Institute of Regulation (IoR) Annual Conference 2024.

68. A range of other engagements by Directors are listed in Annex 1.

## **Finance**

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69. This paper requires no decisions and so has no financial implications.

## **Risks**

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70. The Strategic Risk Register has been reviewed in the past quarter and discussed with ARC.

## **Equality Impacts**

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71. No impact assessment has been completed as this paper does not propose any new policy or process.

## **Devolved Nations**

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72. We continue to engage with all four nations across a wide range of issues.

## **Other Impacts**

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73. No other impacts have been identified.

## **Communications**

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### **External communications**

74. This report will be made available on our website, but there are no further communication plans.

### **Internal communications**

75. An update to staff normally follows each Council meeting, which will pull out relevant highlights.

## **Next Steps**

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76. There are no further steps required.

## **Attachment**

77. Annex 1 - Directors' Stakeholder Meetings.

## Annex 1 - Meetings/visits since last Council meeting

<b>Philipsia Greenway - Director of Change</b>	<b>Yeslin Gearty - Director of Corporate Services</b>	<b>Carole Auchterlonie - Acting Director of Regulatory Operations</b>	<b>Steve Brooker - Director of Regulatory Strategy</b>
15.12.23 - Meeting of Defence Stakeholder Group to discuss the revised Disclosure Policy	08.01.24 Meeting with TIAA, internal auditors – annual planning	15.12.23 - Meeting of Defence Stakeholder Group to discuss the revised Disclosure Policy	21.12.23 - Field visit to Specsavers stores in West Midlands to support review of 2013 statement project
03.01.24 Emma Bentley, Gate One regarding CMO future	09.01.24 Meeting with HW Fisher re external audit services		4.1.24 - Impact Health to discuss business registrant survey
09.01.24 Neuroscience for Change working group	10.01.24 - Meeting with Worknest – HR services		10.1.24 - routine meeting with national optometric advisers
26.01.24 CEORB meeting	10.01.24 Meeting with Haysmacintyre – external audit services		11.1.24 - SPOKE quarterly catch-up
19.02.24 IoD offices - training	22.01.24 Meeting with Cyber Management Alliance – business continuity management		12.1.24 - Claire Slade, Hakim Group – business regulation
	22.01.24 Meeting with Blake Morgan solicitors – HR matters		12.1.24 - Chaired Optical Sector Policy Forum
	25.01.24 - Meeting with Haysmacintyre – external audit services procurement		30.1.24 - Jenni Minto MSP, Public Health Minister in Scottish Govt – eye care in

Philipsia Greenway - Director of Change	Yeslin Gearty - Director of Corporate Services	Carole Auchterlonie - Acting Director of Regulatory Operations	Steve Brooker - Director of Regulatory Strategy
	26.01.24 - Meeting with MHA – external audit services procurement		31.1.24 - routine meeting with national optometric advisers
	26.01.24 - Meeting with HW Fisher – external audit services procurement		1.2.24 - SSISG quarterly meeting
	09.02.24 - Meeting with Brewin Dolphin – investment management		2.2.24 - College of Medicine and Dentistry, education matters
			20/21.2.24 - Observing EVP visit to ABDO College, Godmersham
			27.2.24 - DHSC Eye Health Forum
			28.2.24 - EVP Day
			28.2.24 - routine meeting with national optometric advisers

<b>Council Meeting (Strictly Confidential) 25 June 2024</b> <b>For decision</b> <ul style="list-style-type: none"> <li>- <b>Business regulation (Marie Bunby)</b> (at least 1-2 hours)</li> </ul> <b>For discussion</b> <ul style="list-style-type: none"> <li>- Strategic risk discussion</li> </ul> <b>For noting</b> <ul style="list-style-type: none"> <li>- Committee updates</li> <li>- Council papers for the public session</li> </ul>
<b>Council Meeting (Public) 26 June 2024</b> <b>For decision</b>  <b>For discussion</b> <ul style="list-style-type: none"> <li>- OCCS Annual Report</li> <li>- Q1 financial and performance reports</li> <li>- <b>Business performance dashboard Q2</b></li> <li>- Business Plan Assurance Report Q1</li> </ul> <b>For noting</b> <ul style="list-style-type: none"> <li>- Chair / CEO report</li> <li>- Advisory Panel minutes</li> </ul>
<b>Council Catch-up 2 July 2024</b> -Update from Wales
<b>Council Meeting (Strictly Confidential) 24 September 2024</b> <b>For decision</b> <ul style="list-style-type: none"> <li>- GOC strategy 2025-30</li> </ul> <b>For discussion</b> <ul style="list-style-type: none"> <li>- Strategic risk discussion</li> <li>- Legislative / Regulatory Reform</li> <li>- Public perceptions survey</li> <li>- Registrant survey</li> </ul> <b>For noting</b> <ul style="list-style-type: none"> <li>- Committee updates</li> <li>- Council papers for the public session</li> </ul>
<b>Council Meeting (Public) 25 September 2024</b> <b>For decision</b> <ul style="list-style-type: none"> <li>- Annual report and financial statements 2023/24</li> <li>- ARC annual report 2023/24</li> <li>- Equality, Diversity and Inclusion annual report 2023/24</li> <li>- <b>Business Regulation Project (Marie Bunby)</b></li> </ul> <b>For discussion</b> <ul style="list-style-type: none"> <li>- Update on research on testing of sight</li> <li>- AMR</li> <li>- Registrant and public perception survey</li> <li>- GOC strategy 2025-30</li> <li>- Q2 Financial performance report/Q2 forecast</li> <li>- Business performance dashboard Q2</li> <li>- Business Plan Assurance Report Q2</li> </ul> <b>For noting</b>

<ul style="list-style-type: none"> <li>- Chair's report</li> <li>- Chief Executive and Registrar's report</li> </ul>
<b>Council Catch-up 8 October 2024</b>
<ul style="list-style-type: none"> <li>- Update from NI</li> </ul>
<b>Council Catch-up 19 November 2024</b>
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<b>Council Strategy Day 21 November 2024</b>
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<b>Council Meeting (Strictly Confidential) 10 December 2024</b>
<p><b>For decision</b></p> <p><b>For discussion</b></p> <ul style="list-style-type: none"> <li>- Strategic risk discussion</li> <li>- GOC strategy 2025-30</li> <li>- GOC office / Old Bailey update</li> </ul> <p><b>For noting</b></p> <ul style="list-style-type: none"> <li>- Corporate Policies</li> <li>- Governance Review Progress Report</li> <li>- Committee updates</li> <li>- Council papers for the public session</li> </ul>
<b>Council Meeting (Public) 11 December 2024</b>
<p><b>For decision</b></p> <ul style="list-style-type: none"> <li>- Standards Review</li> <li>- Registrant fees 2024/2025</li> <li>- Annual reappointment of Council members to committees</li> <li>- Governance review update</li> </ul> <p><b>For discussion</b></p> <ul style="list-style-type: none"> <li>- H&amp;S assurance report</li> <li>- FTP Update</li> <li>- Council's self-assessment against the Charity Governance Code</li> <li>- Q3 Financial performance report/Q3 forecast</li> <li>- Business performance dashboard Q3</li> <li>- Business Plan Assurance Report Q3</li> </ul> <p><b>For noting</b></p> <ul style="list-style-type: none"> <li>- CEO / Chair Report</li> <li>- Advisory Panel minutes</li> </ul>
<b>Council Catch-up 21 January 2025</b>
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<b>Council Catch-up 4 March 2025</b>
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<b>Council Meeting (Strictly Confidential) 18 March 2025</b>
<p><b>For decision</b></p> <p><b>For discussion</b></p> <ul style="list-style-type: none"> <li>- Strategic risk discussion</li> <li>- Legislative / Regulatory Reform</li> </ul>

**For noting**

- Corporate Policies
- Governance Review Progress Report
- Committee updates
- Council papers for the public session

**Council Meeting (Public) 19 March 2025**

**For decision**

- Member fees 25/26
- Budget and business plan for 2024/25

**For discussion**

- Q3 Financial performance report
- Business performance dashboard Q3
- Business Plan Assurance Report Q3

**For noting**

- Chair / Chief Executive Report
- Committee updates