



Public Perceptions Survey 2016

Final Report

The General Optical Council

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Executive Summary

Introduction

Enventure Research, an independent research agency, was commissioned by the General Optical Council (GOC) to undertake its second public perceptions survey as part of its commitment to better understand the views and experiences of the general public. More specifically the GOC wanted to:

- Conduct robust research into public perceptions and experiences of the optical professions in the UK;
- Understand what the public expects from a regulatory body;
- Use the research to improve as a regulator and ensure that the GOC fulfils its statutory obligation to protect and promote the public's health and safety; and
- Benchmark public perceptions in order to track how these may change in the future.

Methodology

A mixed quantitative and qualitative approach was taken to this research in the form of a survey, focus groups and in depth telephone interviews.

The survey was administered primarily online to a stratified random sample of the general public, with quotas set on age, gender and UK country to ensure a representative sample was achieved. Towards the end of the survey fieldwork period, telephone and on-street interviews were also undertaken to ensure that quotas were met. In total, 3,252 survey responses were received and the returned data was weighted to be representative of the UK adult population.

Following the survey, five focus groups and fourteen in depth interviews were conducted as part of the qualitative research in order to explore some of issues in greater depth. The qualitative research was stratified across the UK to ensure representation, including both urban and rural locations.

Those who took part in the survey are referred to as 'respondents' and those who took part in the focus groups and in depth interviews are referred to as 'participants'.

For the purpose of this report, those who reported visiting an optician in the last two years are referred to as 'patients'. Those who reported visiting an optician more than two years ago or never are referred to as 'non-patients'.

The term 'optician' is used as the 2015 research indicated a low level of awareness in terms of the different roles in the profession (which was also found in this research).

The 2015 public perceptions survey, conducted by ComRes, was administered by telephone interview with a smaller sample size of 2,250 respondents across the UK. The change in

methodology means that the results are not directly comparable. However, a number of common themes have emerged, despite the different methodologies, and these have been highlighted throughout the report.

Key findings

Perceptions of opticians

GPs remain the first port of call for people with eye health problems with 40% of respondents saying that they would go to a GP first if they woke up tomorrow with an eye problem. Only 22% said that they would go to an optician first and 14% said they would go to a pharmacist first.

These findings are similar to the 2015 survey, where GPs were also the first choice (54%), followed by opticians (19%) and pharmacists (10%).

There were significant differences across the UK for example, respondents from Scotland (31%), Wales (26%) and Northern Ireland (25%) were all more likely to suggest that they would visit an optician first when compared to respondents from England (18%).

In this year's survey a new follow up question was asked to help better understand why opticians either were or were not the first port of call for eye health issues. The main reasons people said they would go to an optician first were the perception that an optician could treat eye problems (39%) and that an optician could see them on the same day (30%). Interestingly, the same reasons were given by those who said that they would *not* go to an optician first, with 27% saying that they might not be seen by an optician on the same day and 19% that an optician wouldn't be able to treat these kinds of problems.

The findings from the focus groups and in depth interviews confirm the survey results with the majority saying that they would go to a GP first. When explored further, participants said opticians were not their first choice because they did not view opticians as a place to go for health issues or where medication could be prescribed.

I would see the opticians as the place to go for glasses, but I'd go to the doctors if I had a problem with my eyes. (Participant from Warrington)

Overall, the findings show that opticians are still viewed in fairly narrow terms. The survey results indicate that the main association with opticians is providing sight tests rather than detecting and treating eye health problems, which was also found in the 2015 survey.

When this issue was explored further in the focus groups and in depth interviews, only a small number of participants were aware that opticians have the ability to treat eye health problems and were not just there to provide eye examinations and corrective products. Raising awareness of the broader role of opticians in treating eye health problems, prescribing medication and making referrals, was seen as a key driver by participants in changing public perceptions and behaviour.

If people felt they were trained like a doctor, they might go see them first for a problem about their eyes. (Participant from Belfast)

Do opticians provide a healthcare service or are they a retailer?

In this year's research the GOC wanted to better understand how the public perceive opticians. New questions were asked to explore whether opticians were seen primarily as a healthcare service or a retailer. Of those surveyed, nearly half (49%) viewed opticians as providing *both* a healthcare and retail experience. Only 34% saw opticians purely as a healthcare service and 15% as a retailer only.

In terms of how the public viewed themselves when engaging with an optician, only 21% viewed themselves solely as a patient. The largest proportion (40%) saw themselves as a customer and 37% as a combination of customer and patient.

In terms of national differences, respondents from Northern Ireland were more likely to view themselves as a patient (24%), whereas respondents from England were more likely to view themselves as a customer (42%).

Participants from the focus groups and in depth interviews largely confirmed the findings, with the majority viewing opticians as both a healthcare provider and retailer. However, they were more inclined to view themselves as both patients and customers, compared to the survey results where the largest proportion (40%) said the latter. The participants made a clear distinction between the eye examination carried out in a clinical environment by a trained healthcare professional and the process of purchasing glasses or contact lenses carried out on the shop floor in a retail environment by sales staff.

You've got different areas in the opticians. You've got the shop area where they try to flog you stuff and the little room that you go into with the actual optician. That's the medical bit. (Participant from Leeds)

When they take pictures of the back of the eye you are a patient. When you come out, that's when the hard sell comes and you're a customer. (Participant from Glasgow)

How often people visit an optician

The survey found that 70% had visited an optician in the last two years. This is a very similar finding to the 2015 survey, where 73% reported they had. Of this 70%, the majority (72%) had last visited a chain opticians compared to 28% that went to an independent optician.

Similarities between the 2016 and 2015 survey results also emerge when looking at those who said that they have *never* been to an optician, at 8% in this year's survey compared to 11% in the 2015 survey. Of the 8%, the majority (53%) said that the main reason they had never been was because they didn't have a problem with their eye sight (again a similar finding to the 2015 survey).

Confidence levels and satisfaction

Overall confidence and satisfaction levels with opticians remain high. The majority of respondents (89%) were confident that they would receive a high standard of care from an optician (recorded at 92% in 2015).

When looking at the patient experience, those who had visited an optician in the last two years reported high satisfaction levels both in relation to the optician who carried out the eye test and with the overall experience of visiting the optician (97% and 96% respectively). This again mirrors findings from the 2015 survey, where 96% of patients were satisfied with their overall experience of visiting an optician.

The main reason for satisfaction has remained the same with good quality examination/having an issue corrected (35%) coming first, followed by a feeling that the optician was qualified (15%) and polite and friendly staff (15%). The main reason for dissatisfaction has also remained the same, which was experiencing a poor quality examination/not having an issue corrected (24%).

Costs and pressure to buy

Satisfaction levels were explored further in this year's survey and new questions were asked about how clear costs were and whether people felt under pressure to buy a product or service they did not want or need when visiting an opticians.

The survey results were generally positive with 90% of patients saying that they felt costs were clear to them the last time they purchased a pair of glasses and 95% said that costs were clear last time they bought contact lenses.

Similarly, most patients said that they did not feel under any pressure to buy a product or service which they did not want or need when visiting an optician, ranging from 81% when purchasing glasses to 89% when having an eye test. However, one in six (17%) said that they felt under some or a lot of pressure to buy a product or service they did not want or need when they last purchased a pair of glasses.

These findings were generally reflected in the focus groups. However, in relation to costs some participants did report confusion when calculating the overall cost they had to pay, due to the various offers, vouchers and upgrades available. Some participants also accepted that opticians operate as businesses, so there was an expectation that they would have to spend money. There was a recognition that there was inevitably some pressure to spend money, however, most people felt confident in being able to deal with a 'sales pitch' and deciding whether or not to spend money on, for example, more expensive frames, additional products or add-ons.

You're not aware of the cost until all of the issues are discussed at the end of the process. (Participant from Glasgow)

You can't forget that they're a business at the end of the day and they want to sell the more expensive frames. It's up to you what you spend your money on though. (Participant from Cardiff)

Dissatisfaction and complaints

There continues to be low levels of dissatisfaction and complaints about opticians. Overall, 92% of respondents said that they had not complained or considered complaining about their experience with an optician (this is the same percentage as the 2015 survey).

Of those who had complained (3%) or those that had considered complaining (4%), the majority of these respondents said that they had, or would consider complaining, to the opticians where the treatment was carried out (59%). Almost one in five (18%) said that they were not sure who to complain to and only 3% said they would direct their complaint to the GOC.

Participants in the focus groups and in depth interviews reinforced the survey findings, as no one had made a formal a complaint about an optician. Some participants had experienced problems relating to products they had purchased, such as errors with prescriptions or lens coatings, but explained that these had been resolved to their satisfaction by the optician. Some participants said that they would go to external organisations such as Trading Standards or the Citizens Advice Bureau to make a complaint. Many participants said that they would not return to the opticians where they experienced a problem if serious enough, and would simply go elsewhere.

I go back if I can't see properly, and they will adjust them. (Participant from London)

To ensure everyone had the confidence to complain, some participants suggested that awareness of the GOC should be raised and that all opticians should have a patient feedback system in place.

Apologies when something goes wrong

This year the GOC wanted to find out more about whether people expect to receive an apology from an optician if something goes wrong. The majority of respondents, 67%, said that they thought it was likely that they would receive an apology from an optician if something went wrong. However, around one in five (19%) said they did not think it was likely and 14% said that they did not know.

Regulation and awareness of the GOC

Overall, a smaller proportion of respondents thought that opticians are regulated (71%) compared to GPs (87%), dentists (80%), pharmacists (75%) and nurses (75%). The same theme emerged from the 2015 survey, with opticians faring less well than the other regulated professions.

The majority of survey respondents (88%) were aware that opticians have recognised academic qualifications. However, smaller proportions were aware that opticians undergo regular training and are monitored by a regulatory body (65% and 64% respectively).

Awareness of the GOC remains low, with just 4% able to correctly name the GOC as the organisation that regulates the optical profession, and 12% claiming to be aware of the GOC before taking part in the survey. The survey results were reinforced by feedback from the focus groups and in depth interviews, where most had not heard of the GOC before taking part in the research.

I just had an idea that there should be some kind of body. That's all I knew, I didn't know the specific name, or what they did. (Participant from London)

When this issue was explored further in the focus groups and in depth interviews, the majority of participants indicated that they would expect to see information such as posters or leaflets about the GOC at their opticians.

Key demographic groups

Overall there continues to be some key demographic trends among particular sections of the population. This year's survey highlights that men and younger people (aged 16-34) continue to report never having been to an optician and largely see an optician as a retailer rather than a healthcare provider. Men were also more likely than women *not* to go to an optician with an eye problem and less likely to think that opticians are regulated.

The research has highlighted differences in perceptions of those who have visited an optician within the past two years (patients) and those who last visited more than two years ago or never. Patients were more likely to:

- Visit an optician first if they had a problem with their eyes
- View opticians as a healthcare service and themselves as a patient when visiting
- Be confident they would receive a high standard of care
- Be aware of the regulation of opticians, their academic qualifications and training
- Be aware of the GOC
- Complain if they received poor healthcare and expect to receive an apology as a result

Conversely, those who had been over two years ago or never (non-patients) were more likely to:

- Visit a GP first if they had a problem with their eyes
- View opticians as a retailer and themselves as a customer when visiting
- Feel costs were not clear when purchasing glasses
- Feel under pressure to spend money when purchasing glasses
- Be dissatisfied with their experience of purchasing glasses or contact lenses

1. About This Research

1.1 Introduction

The General Optical Council (GOC) is the regulator for the optical professions in the UK. Its mission is to protect and promote the health and safety of the public. It currently registers around 29,000 optometrists, dispensing opticians, student opticians and optical businesses.

The GOC has a research programme to help understand the views and experiences of members of the public across the UK. In doing so, it carries out an annual public perceptions survey to help the GOC better understand how it can improve as a regulator and fulfil its statutory role in protecting and promoting the public's health and safety.

Enventure Research, an independent research agency, was commissioned to deliver the 2016 public perceptions survey on behalf of the GOC. The key objectives were to:

- Conduct the survey with a robust and representative sample of the UK adult population
- Measure and track trends in perceptions and levels of awareness over time, comparing results to previous years
- Include a mix of both patients and non-patients within the survey
- Thoroughly analyse the survey results and highlight key findings

1.3 Methodology

A mixed research approach was taken, including both quantitative and qualitative methodologies.

Quantitative survey

A questionnaire was designed by Enventure Research and the GOC which took respondents between 10 and 15 minutes to complete. For reference, a copy of the questionnaire can be found in **Appendix A**.

Quotas were set to ensure a representative sample was achieved based on gender and age within each UK nation. Quotas were also set to achieve a minimum number of interviews for each UK nation, with Scotland, Wales and Northern Ireland over-sampled to ensure that confident statistical analysis could be undertaken at this level.

The survey was hosted online and a link to participate was sent via email to a stratified random sample of the UK general public, followed up by a series of reminder emails in order to boost the response rate.

To ensure that the quotas were met, additional telephone and face-to-face interviews were conducted towards the end of the fieldwork period. These targeted groups which had responded less to the online survey, focusing on males and younger age groups.

The survey was live from 16th March to 4th April 2016. During this time, 3,252 responses were received. 2,858 were completed online, 110 via telephone interview and 284 via face-to-face interview.

Qualitative research – focus groups and in depth interviews

A series of five focus groups and fourteen in depth interviews was facilitated by researchers from Enventure Research, who followed a specifically designed discussion guide to allow all relevant topics to be covered. The discussion guide was designed to revisit areas covered in the survey in order to stimulate discussion and explore the reasons behind the results in greater depth. A copy of the focus group and in depth interview discussion guide can be found in **Appendix B**.

The qualitative research fieldwork took place between 18th and 27th May 2016 with a broadly representative selection of the general public (45 participants in total). Two focus groups were held in England and one each in Scotland, Wales and Northern Ireland. The fourteen in depth interviews were also stratified to ensure a range of people were included within the research from different countries, with a focus on more rural areas to contrast with the city-centre locations of the focus groups.

A change in methodology between the 2015 and 2016 survey

The 2015 Public Perceptions Survey, conducted by ComRes, was delivered using a different methodology, which used telephone interviews to administer the survey. The change in methodology means that the results are not directly comparable. However, a number of common themes have emerged, despite the different methodologies, and these have been highlighted throughout the report.

A key difference between an online survey and a telephone survey is that most online survey questions are pre-coded, allowing the respondent to view a range of possible answers to each question before selecting the most appropriate response, whereas telephone survey questions are often unprompted (i.e. the interviewer does not read out a list of possible answers). In some cases, this may lead to differences in survey results, as online respondents are able to provide more considered responses, selecting answers which may represent their views, but which they may not have thought of if not prompted. Furthermore, an online survey methodology can produce more honest answers, as respondents are typically alone when answering questions and are less inclined to provide more 'socially acceptable' answers.

Certain questions have been changed in terms of their wording or the type of answer required to improve on the 2015 questionnaire. This also means that direct comparison is not possible for these questions, but importantly it has set an improved benchmark question for future comparative analysis.

1.4 Interpretation of the survey findings

Weighting

A combination of stratified random sampling and quota setting was implemented to ensure a representative sample was achieved of the UK in terms of gender, age and nation, meaning that the returned data was generally representative. However, weights have been applied to the returned data to ensure that certain subgroups are not over or under represented within the data and that the data is as close to the demographic profile of the UK as possible in terms of gender and age. Weighting adjusts the proportions of certain groups within a sample to match more closely to the proportions in the target population. All results presented within this report are based on the weighted data, which was calculated using the latest UK census data.

When setting the survey quotas, it was decided that the nations of Scotland, Wales and Northern Ireland should be over-sampled to allow for confident data analysis at a nation-specific level and also confident analysis between countries. Therefore, the data has not been weighted to adjust the number of responses by UK nation to be truly representative of the UK.

Use of the term ‘optician’

The term ‘optician’ has been used rather than the two distinct optical professions regulated by the GOC – optometrists and dispensing opticians. This term was used throughout the research, including the questionnaire and discussion guide, to avoid confusion as the majority of the public do not distinguish between the two professions (as highlighted in the 2015 research and reinforced by the findings of this research).

Interpretation of the survey data

This report contains tables and charts. In some instances, the responses may not add up to 100%. There are several reasons why this might happen:

- The question may have allowed each respondent to give more than one answer
- Only the most common responses may be shown in the table or chart
- Individual percentages are rounded to the nearest whole number so the total may come to 99% or 101%
- A response of between 0% and 1% will be shown as 0%

As the online survey was undertaken with a sample of the general public, all results are subject to sampling tolerances. For example, when interpreting the results to a survey question which all respondents answered, where 50% responded with a particular answer, there is a 95% chance that this result would not vary by more than +/- 1.7 percentage points had the result been obtained from the entire UK population (16+).

Subgroup analysis has been undertaken to explore the results provided by different demographic groups, such as gender or age group. This analysis has only been carried out

where the sample size is seen to be sufficient for comment. Where sample sizes were not large enough, subgroups have been combined to create a larger group.

Throughout this report, those who took part in the survey are referred to as ‘respondents’.

For the purpose of this report, those who reported visiting an optician in the last two years are referred to as ‘patients’. Those who reported visiting an optician more than two years ago or never are referred to as ‘non-patients’.

Comparisons between 2015 and 2016 survey results

Where possible, comparative analysis has been undertaken between the 2015 and 2016 Public Perceptions Survey results to allow perceptions to be tracked over time. This analysis is included where appropriate throughout the report, including details of any limitations of the comparison such as changes in methodology or wording of a question.

For reference, the 2015 Public Perceptions Survey report can be found online at:

https://www.optical.org/en/news_publications/Publications/policy-and-research-papers.cfm

Interpretation of the qualitative feedback

When interpreting qualitative research feedback, which for this research has been collected via focus groups and in depth interviews, it is important to remember that these findings differ to those collected via a quantitative methodology. Qualitative findings are collected by speaking in much greater depth to a select number of participants (in this case, 45 members of the public). These discussions were digitally recorded and notes made to draw out common themes and useful quotations.

Therefore, it should be remembered that qualitative findings are not meant to be statistically accurate, but instead are collected to provide additional insight and greater understanding based on in depth discussion and deliberation, something not possible to achieve via a quantitative survey. For example, if the majority of participants in a series of focus groups hold a certain opinion, this does not necessarily apply to the majority of the UK population.

Throughout this report, those who took part in qualitative research (focus groups or in depth interviews) are referred to as ‘participants’.

1.5. Acknowledgments

Enventure Research would like to thank Angharad Jones and David Rowland from the General Optical Council for their help and cooperation on this project, and to express gratitude to everyone who took part in the survey, focus groups and in depth interviews.

2. Public perceptions of opticians

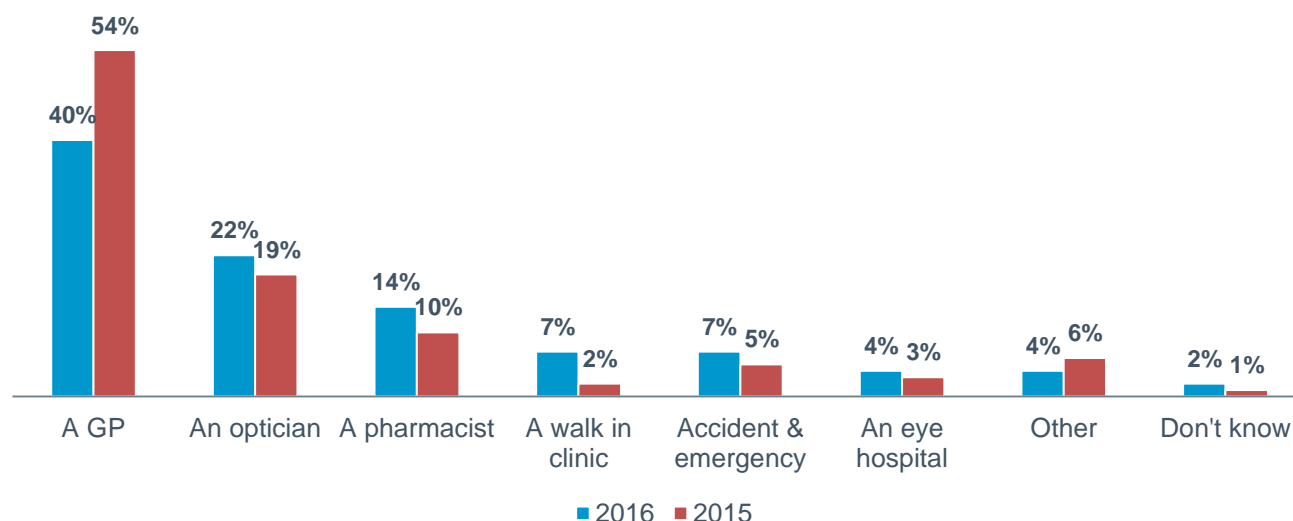
Key findings

- GPs remain the first port of call for people if they woke up tomorrow with an eye problem
- Of those surveyed 40% said that they would go to the GP first, followed by 22% who would go to an opticians and 14% who would go to a pharmacist
- Respondents from Scotland (31%), Wales (26%) and Northern Ireland (25%) were all more likely to suggest that they would visit an optician first when compared to respondents from England (18%)
- The main reasons people said they would go to an optician first were the perception that an optician could treat eye problems (39%) and that an optician could see them on the same day (30%)
- Of those who said that they wouldn't go to an optician, the main reasons given were that they didn't think they would be seen on the same day (27%) and that an optician would not be able to treat these kinds of problems (19%)
- Testing eyesight remains the service most associated with opticians
- Almost half of survey respondents (49%) saw opticians as a combination of a healthcare service and a retailer whilst 34% saw them as purely a healthcare service and 15% as a retailer only
- Two in five (40%) viewed themselves as customers when visiting an optician and almost the same proportion saw themselves as a combination of a customer and patient (37%). Just 21% saw themselves as a patient only
- Focus group and interview participants highlighted the distinction between the different stages of the appointment process (eye examination and purchasing glasses or contact lenses) as a reason to view opticians as a healthcare service and a retailer

2.1 The role of opticians in treating eye problems

Two in five (40%) respondents said that they would go to a GP first if they woke up tomorrow morning with an eye problem, followed by 22% who said they would go to an optician first.

Figure 1 – If you woke up tomorrow with an eye problem, such as something in your eye, a red eye or blurred vision, where would you go or who would you speak to first?
Base: All respondents 2016 (3,252) / 2015 (2,250)



‘Other’ suggestions included doing nothing and waiting to see if the problem went away, attempting to treat the problem alone, looking for advice online, and seeking the advice of family and friends.

This year’s results show small increases in the proportions of respondents who said that they would first visit an optician, pharmacist, walk in clinic and accident and emergency and a significant decrease in the proportion who said they would visit a GP first.¹

Subgroup analysis

Subgroups more likely to say they would **visit an optician first** (22% overall) included those who:

- Were patients (26%) compared to non-patients (12%)
- Were female (25%) compared to male (19%)
- From Scotland (31%), Wales (26%) and Northern Ireland (25%) compared to those from England (18%)
- Used contact lenses (37%) and prescription glasses (26%) compared to those who did use any products (14%)
- Viewed opticians as a healthcare service (31%) compared to those who viewed opticians as a retailer (7%)

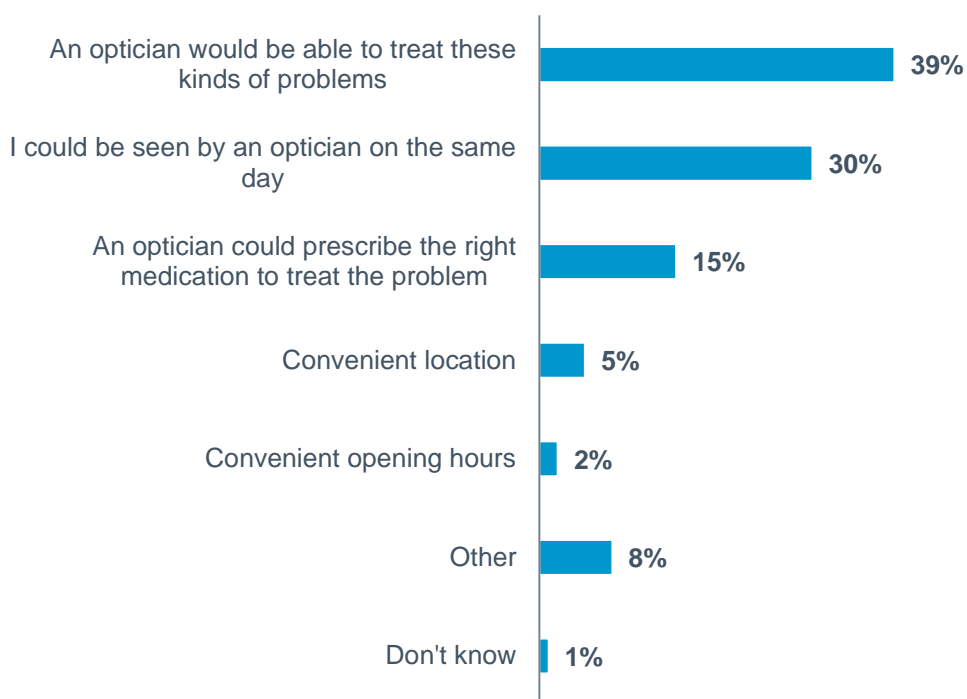
¹ This difference may partly be explained by the change in methodology, where respondents are able to view the range of possible answers in a self-completion questionnaire, which may result in them providing more considered responses.

In this year’s survey, the GOC wanted to better understand the reasons why people would or would not go to an optician first if they woke up with an eye problem. A new set of follow up questions were asked.

Two in five (39%) of those who said that they would go to an optician first indicated that this was because they thought an optician would be able to treat these kinds of problems. Three in ten said that they thought they could be seen by an optician on the same day (30%).

Figure 2 – Why would an optician be your first choice in this situation?

Base: Those who would go to an optician first (714)



‘Other’ responses included the optician being the best source of advice, regularly visiting and trusting an optician, knowing that opticians are trained eye specialists, and not wanting to waste a doctor’s time.

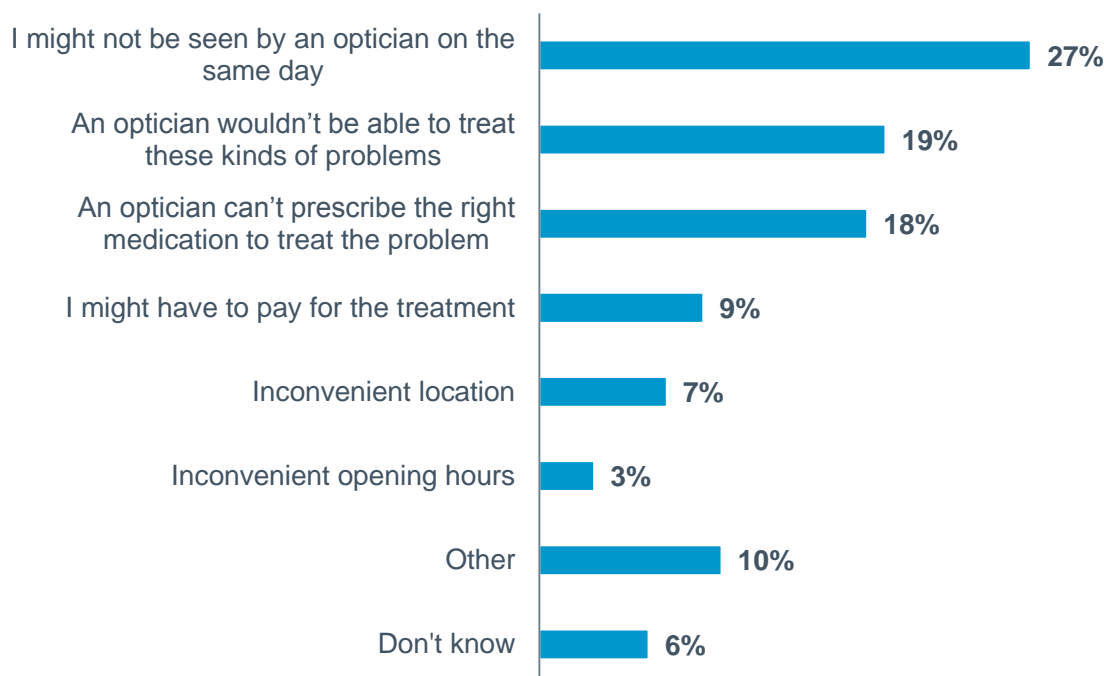
Subgroup analysis

Those who were younger aged 16 to 34 were more likely to say that **an optician would be able to treat these kinds of problems** at 52% (compared to 39% overall), particularly when compared to those aged 75+ (22%).

No significant differences were seen by country in response to this question.

Over a quarter (27%) of those who said that they would **not** go to an optician first specified that this was because they might not be seen by an optician on the same day followed by a further 19% who felt that an optician would not be able to treat these kinds of problems.

**Figure 3 – Why would you choose *not* to go to an optician first in this situation?
Base: Those who would not choose to go to an optician first (2,357)**



'Other' responses included trusting the opinion of their GP, feeling that a pharmacist could offer better advice, the issue being too serious for an optician and not knowing that an optician could treat these kinds of problems.

Subgroup analysis

Those who indicated that they would go to an eye hospital first were more likely to state that **an optician wouldn't be able to treat these kinds of problems** at 37% (19% overall).

A larger proportion of those who lived in England also stated that an **optician wouldn't be able to treat these kinds of problems** at 21%, particularly when compared to those who lived in Northern Ireland at 14%.

Subgroups more likely to say that they **might have to pay for the treatment** (9%) included those who:

- Were non-patients (13%) compared to patients (6%)
- Viewed opticians as a retailer (14%) compared to those who viewed opticians as a healthcare service (6%)

Focus group and interview feedback

Some perceived that opticians have the ability to treat eye health problems

Whilst only a minority said that they would go to an optician if they woke up with an eye problem, there was a small level of awareness that opticians had the knowledge, training and skills to diagnose and treat eye health-related problems, and that there was more to an optician's skill set than simply testing eyesight and prescribing glasses and contact lenses.

If it wasn't something serious I'd consider going to the optician. They would quite happily treat you or refer you on to a doctor. They can diagnose problems that aren't eye-related. (Participant from Craigavon)

The first point of contact would be, to me, the opticians because they are a specialist in that. (Participant from Gravesend)

What would encourage participants to go to an opticians first?

Those who said that they would not go to an optician first were asked when they might consider it, or what might encourage them to do so in the future. A common suggestion was that they would visit an optician first because they know how difficult it can be to get an appointment with a GP, explaining that it might be easier and quicker to be seen by an optician.

It's easier to get an appointment at an optician than a GP. Sometimes you can go the same day. (Participant from Cardiff)

Another reason which may encourage participants to consider going to an optician first was their location. Participants highlighted that generally opticians are much easier to access than GPs due to their location in town and city centres, and also due to the number available to them.

I work in the town centre with opticians all around me, so it's easier for me to go to them really. (Participant from Norwich)

It is interesting to note that many participants stated that they would consider going to an optician first if they knew that they would be able to treat these kinds of problems. Only a minority of participants had any awareness of whether opticians could treat eye-related health issues, prescribe medication or make referrals. It was widely agreed that, if opticians were able to do these things and if they were aware of it, they would consider visiting an optician in the future. It was suggested that more promotion of this would be needed if the public were to change their longstanding habits and visit an optician over a GP or pharmacist for these kinds of problems.

If people felt they were trained like a doctor, they might go see them first for a problem about their eyes. (Participant from Belfast)

If they wish you to go to the opticians for minor eye emergencies they need to promote this. (Participant from Glasgow)

Participants who said that they would not go to an optician first

As found in the survey results, the majority of focus group and in depth interview participants said that they would not go to an optician first if they woke up tomorrow with a problem with their eyes. When asked where they would go, a wide variety of locations were suggested, including a GP, pharmacy, optician, walk in centre and accident and emergency, with GP and pharmacy being the most popular suggestions. A number of participants also said that they would first look up their symptoms online before making the decision about where to go and would be guided by what they found. It was, however, strongly agreed that where they would go first would depend on the severity of the issue.

I would definitely go to the doctor. It would never cross my mind to go to an optician. (Participant from Belfast)

I'd go to the chemist because I wouldn't need an appointment and it's free advice. (Participant from Lisburn)

The first place I would probably go would be online. (Participant from Leeds)

Reasons why opticians were not generally not the first choice

A number of reasons were discussed for why an optician would not be the first choice for this kind of problem. Firstly, many participants said that they simply would not consider an optician because they were so used to going to their GP for this kind of issue. Furthermore, a number of participants discussed whether an optician would in fact be able to treat these kinds of problems. There was a perception that opticians were the providers of eye tests, glasses and contact lenses, and that therefore issues relating to eye health were likely outside their remit and that it would be more appropriate to visit a GP or pharmacist. A number of participants questioned whether opticians were able to prescribe medication and whether they had the ability to refer patients to other services for treatment.

Because the GP is there and it's in your head that they will do something, rather than going to the optician, even when it is our eyesight that is the concern. (Participant from London)

I would see the opticians as the place to go for glasses, but I'd go to the doctors if I had a problem with my eyes. (Participant from Warrington)

You wonder whether the optician can actually prescribe anything. I've been going since I was 10 but I have no idea. (Participant from Leeds)

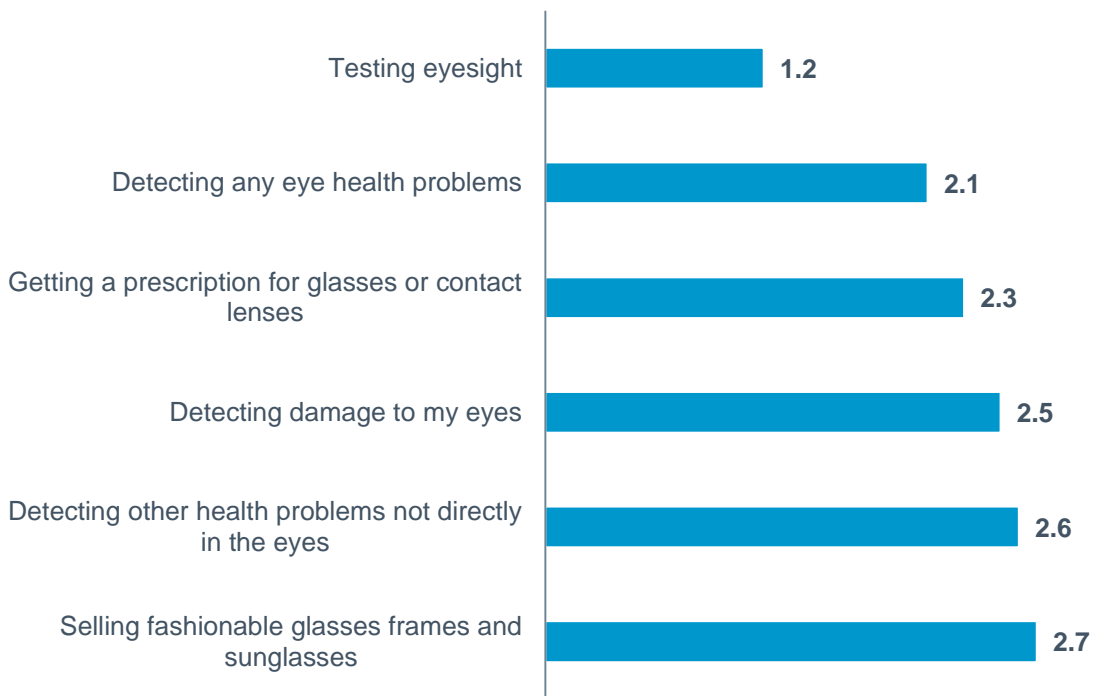
2.2 The role and remit of opticians

All respondents were asked to select which three services they most associated with opticians, ranked from 1 to 3, where 1 was the service most associated with opticians. The calculated mean scores for each service are presented in the chart below, where a lower score represents a service more associated with opticians. Testing eyesight was by far the highest ranked service associated with opticians with all other services closely ranked.

The same theme emerges in both the 2016 and 2015 survey, with the majority of respondents saying that they most associate opticians with testing eye sight, followed by detecting any eye health problems.

Figure 4 – Thinking about the services provided by opticians, which do you most associate with opticians?

Base: All respondents (3,252)



Subgroup analysis

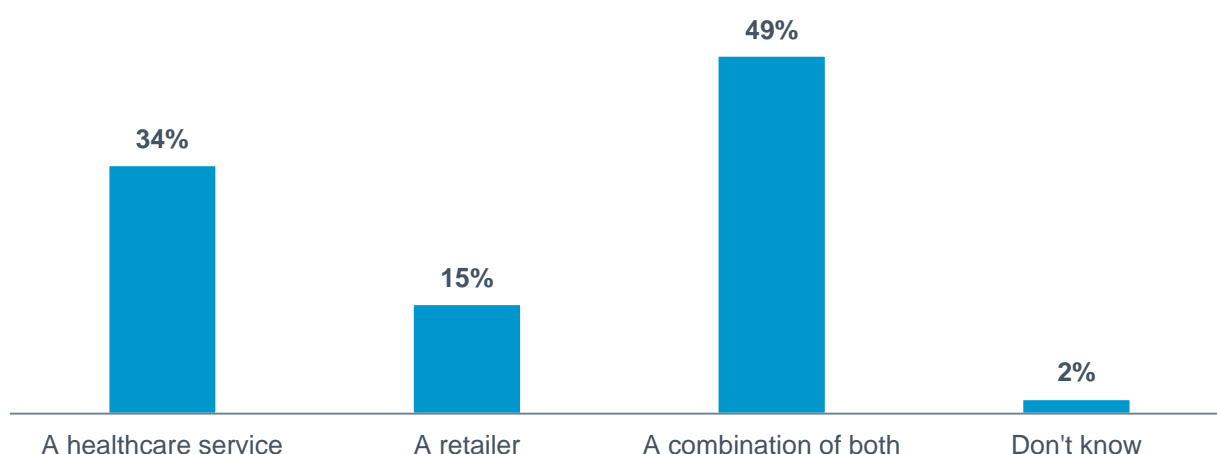
A larger proportion of patients most associated opticians with **detecting any eye health problems** (17%) compared to non-patients (11%).

2.3 Healthcare service or retailer?

The GOC was interested in understanding whether the public saw an optician as providing a healthcare service or a retail service. All survey respondents were asked whether they thought of opticians as primarily a healthcare service, a retailer or a combination of both. Almost half (49%) saw opticians as a combination of both a healthcare service and a retailer, a third (34%) as a healthcare service and a further 15% as a retailer.

Figure 5 – When you think about an optician, do you think of it primarily as a healthcare service, a retailer or a combination of both?

Base: All respondents (3,252)



Subgroup analysis

Subgroups more likely to **view opticians as a healthcare service** (34% overall) included those who:

- Were patients (39%) compared to non-patients (21%)
- Were female (36%) compared to male respondents (31%)
- Were older aged 75+ (47%) compared to younger respondents aged 16 to 34 (29%)
- Viewed themselves as a patient (79%) compared to those who viewed themselves as a customer (16%)
- Had last visited an independent optician (54%) compared to those who had visited a chain (33%)
- Said they would visit an optician first if they woke up with an eye problem (47%)

Subgroups more likely to **view opticians as a retailer** (15% overall) included those who:

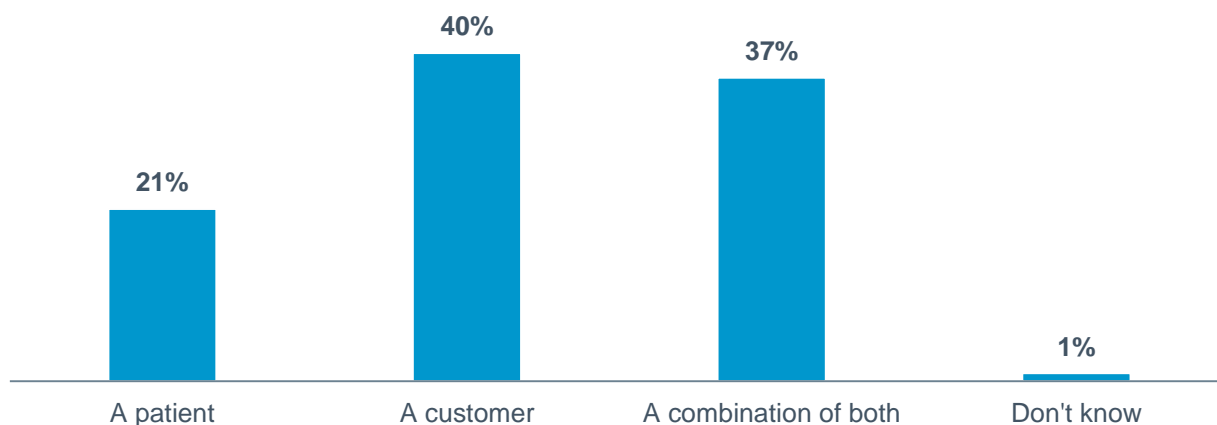
- Were non-patients (23%) compared to patients (12%)
- Were male (19%) compared to female respondents (11%)
- Were younger aged 16-35 (19%) compared to those aged 75+ (10%)
- Had last visited a chain optician (14%) compared to those who had visited an independent (7%)
- Viewed themselves as a customer (35%) compared to those who viewed themselves as a patient (2%)

2.4 Patient or customer?

This year respondents were also asked whether they thought of themselves as patients, customers or a combination of both when they visited opticians. Two in five (40%) saw themselves as a customer, closely followed by 37% who saw themselves as a combination of both a customer and patient. Only one in five (21%) saw themselves as just a patient.

Figure 6 – If you visited an opticians, would you think of yourself primarily as a patient, a customer or a combination of both?

Base: All respondents (3,252)



Subgroup analysis

Subgroups more likely to **view themselves as a patient** (21% overall) included those who:

- Were patients (24%) compared to non-patients (15%)
- Were older aged 75+ (30%) compared to those aged 16 to 35 (21%)
- Were from Northern Ireland (24%), particularly when compared to respondents from England (20%)
- Had most recently visited an independent optician (37%) compared to those who had visited a chain (19%)
- Viewed opticians as a healthcare service (50%) compared to those who viewed opticians as a retailer (2%)
- Would visit an optician first if they woke up with an eye problem (31%)

Subgroups more likely to **view themselves as a customer** (40% overall) included those who:

- Were non-patients (49%) compared to patients (37%)
- Were from England (42%), particularly when compared to respondents from Wales (36%)
- Had last visited a chain optician (41%) compared to those who had visited an independent (25%)
- Viewed opticians as a retailer (92%) compared to those who viewed opticians as a healthcare service (19%)

Focus group and interview feedback

Most participants viewed opticians as both a healthcare service and retailer, and saw themselves as both a patient and customer

In line with the survey results, most participants explained that they saw opticians as both a healthcare service and a retailer. The most common explanation for this was the distinction seen between the two stages of a typical appointment at an optician: the eye examination and the purchasing of glasses or contact lenses. The eye examination was perceived as being the healthcare-related element of their appointment, conducted in a more clinical environment by a trained and qualified optometrist, amongst medical equipment and machines, where any discussion is about vision and eye health. By contrast, the process of purchasing glasses or contact lenses was seen to be quite a different experience, conducted on a shop-floor in a retail environment, where the discussion is more focused on cost and money is exchanged.

You've got different areas in the opticians. You've got the shop area where they try to flog you stuff and the little room that you go into with the actual optician. That's the medical bit. (Participant from Leeds)

It's both because you have your test there, but then you also purchase your glasses from there too. (Participant from Maidstone)

I see it primarily as healthcare, but then, obviously, they make money, so it's both. (Participant from London)

Participants also felt that they viewed opticians as a combination of both a healthcare service and retailer due to the members of staff involved during the appointment process. They explained that because the eye examination was carried out by a trained and qualified health professional it felt much more like a healthcare service. When they were then purchasing their glasses or contact lenses, a process which was carried out by individuals referred to mostly as 'sales staff' who they perceived to be less qualified and not in a clinical role, they felt that this created an experience much closer to shopping.

The healthcare comes from the optician and the retail comes from the sales staff with the deals and the frames. (Participant from Dundee)

For the same reasons, many participants said that when they visited an optician they felt like both a patient and a customer. The majority of participants seemed to feel this way, in slight contrast to the survey results where the majority of respondents said that they felt like a customer.

When they take pictures of the back of the eye you are a patient. When you come out, that's when the hard sell comes and you're a customer. (Participant from Glasgow)

It's a different room from the testing bit to the selling bit, and it's a different person who sees you for each bit. So I was a patient and then a customer. (Participant from Cardiff)

Reasons to view opticians as a retailer and feel like a customer

Participants who saw opticians more as a retailer and felt more like a customer when visiting cited the location of opticians on the high street as one of the main reasons for this view. They felt that because the premises were typically positioned alongside other shops in town or city centres, this led them to see opticians more as another retailer rather than a provider of healthcare.

Opticians are on the high street, and the high street is designed for shoppers. (Participant from Cardiff)

Some participants also felt that opticians were becoming more like retailers, moving away from the image of a healthcare provider. Increased advertising, the presence of fashionable brands, vouchers and offers, and a shop-like atmosphere were suggested as reasons why going to the optician felt more like a consumer experience.

You see them being advertised on the television as retailers. (Participant from Belfast)

It used to be a lot more clinical, more like a doctor's surgery, but now it's more like Costa Coffee where you go in and it's more about what they've got to sell you. (Participant from Leeds)

Those who viewed opticians as more of a healthcare service and themselves as patients

A small number of participants indicated that they viewed opticians as a healthcare service and felt more like a patient than a customer when they visited. These participants often explained that this was because they had previously visited opticians for reasons other than an eye test or had medical conditions which meant that they had to visit opticians for regular check-ups, making the process feel more clinical.

For me it's probably the health aspect I think because I've had a few issues with my eyes in the past. (Participant from London)

I've got Graves' disease and a family history of glaucoma so the optician keeps an eye out for that and any other things, so it feels more like a health service. (Participant from Cardiff)

Some participants had also noticed that opticians were now doing more tests during their visit in addition to testing their sight. This awareness that opticians were now investigating eye health led some participants to view them more as a healthcare service.

My opinion changed recently because my optician sent me for a cholesterol check because he noticed something in my eyes. So that makes me see them as more healthcare orientated. (Participant from Norwich)

Those who viewed opticians as a healthcare service and felt more like a patient often indicated that they visited an independent optician rather than a chain. There was a perception that chain opticians were more focused on the retail aspect of optometry and that independent opticians would be more likely to treat visitors as patients. Furthermore, it was suggested that visiting an eye hospital as opposed to an optician would be a completely healthcare-focused experience where visitors would feel like patients throughout the process.

It depends where you go. I used to go to a small family-run place and it felt like going to your GP. Now I go to Specsavers and it's more like a retail experience. (Participant from Belfast)

If you go to the eye hospital you are a patient from start to finish. (Participant from Cardiff)

3. Frequency of visiting an optician

Key findings

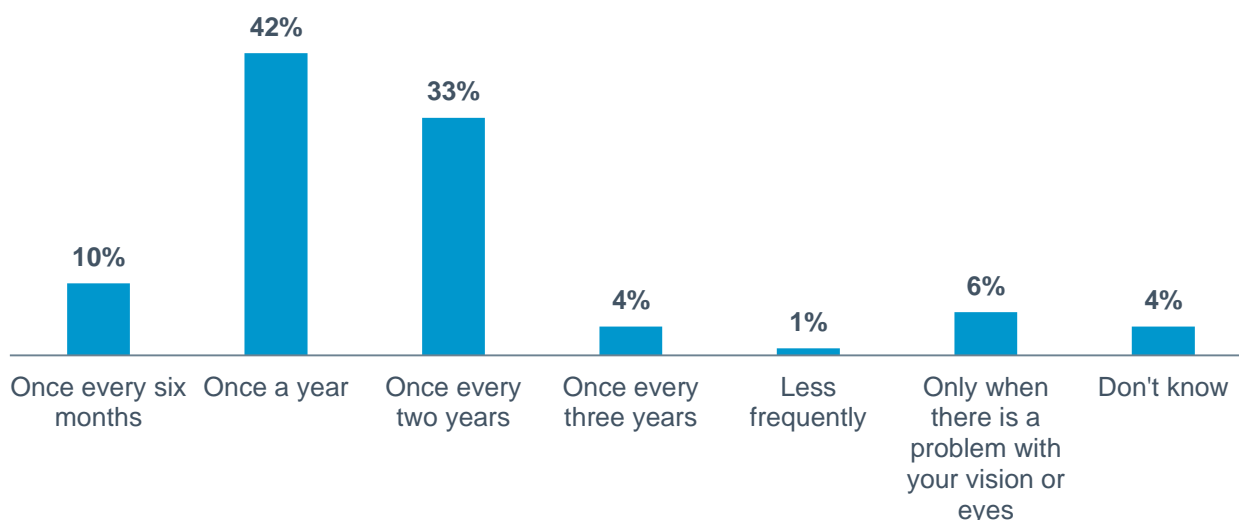
- The majority (70%) of respondents had visited an optician in the last two years
- A larger proportion of those who had visited in the last two years were female, older and were more likely to view opticians as a healthcare service
- 8% said they had never been to an optician and tended to be male and from younger age groups
- The main reason for not visiting an optician in the last two years was having no eyesight problems (53%)

3.1 Perception of how frequently the public think they should visit

Just over two in five (42%) survey respondents thought that they should visit the optician for an eye test once a year and a further 10% thought they should visit once every six months. This makes a combined majority of 52% who thought they should visit either yearly or more frequently, above the current frequency recommended by the College of Optometrists of once every two years, which a third (33%) of respondents thought they should do.

This year’s results for this question are broadly similar to those collected in 2015, where 40% said that opticians should be visited once a year and 36% once every two years.

Figure 7 – How often do you think you should visit the optician for an eye test?
Base: All respondents (3,252)



Subgroup analysis

Subgroups more likely to think they should visit **once every two years** (33% overall) included those who:

- Were patients (36%) compared to non-patients (25%)

- Were female (38%) compared to those who were male (28%)
- Were of White ethnicity (34%) compared to those of other ethnicity (22%)
- Had last visited a chain opticians (39%) compared those who last used a independent opticians (30%)

Subgroups more likely to think they should visit **only when there is a problem with your vision or eyes** (6% overall) included those who:

- Were male (8%) compared to female respondents (4%)
- Were from Northern Ireland (12%) compared to other UK nations

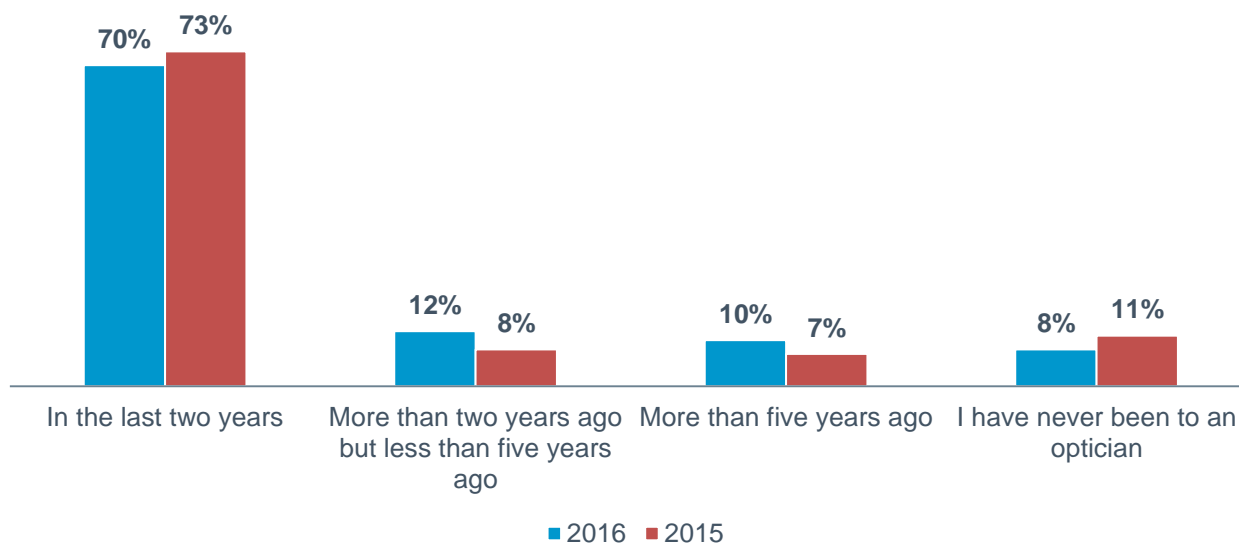
3.2 Reported last visit

The majority (70%) of respondents said that they last went to an optician in the last two years.

These results are very similar to those collected in 2015, where 73% said that they had visited in the last two years. Those who said they had visited an optician in the last two years were more likely to be female and older in both 2015 and 2016. Also, those who said they had never been to an optician were more likely to be male and younger in both 2015 and 2016.

Figure 8 – When was the last time you went to an optician?

Base: All respondents 2016 (3,252) / 2015 (2,250)



Subgroup analysis

Subgroups more likely to have visited an optician **in the last two years** (70% overall) included:

- Were female (78%) compared to male respondents (61%)
- Were older aged 75+ (91%) compared to younger respondents aged 16 to 34 (53%)

- Viewed opticians as a healthcare service (81%) compared to those who viewed opticians as retailers (54%)
- Viewed themselves as patients (79%) compared to those who viewed themselves as customers (64%)
- Said they would go to an optician if they woke up with an eye problem (84%)

Subgroups more likely to have visited an optician **more than five years ago** (10% overall) included those who:

- Were male (13%) compared to female respondents (7%)
- Viewed opticians as retailers (18%) compared to those who viewed opticians as a healthcare service (5%)
- Viewed themselves as customers (13%) compared to those who viewed themselves as patients (6%)

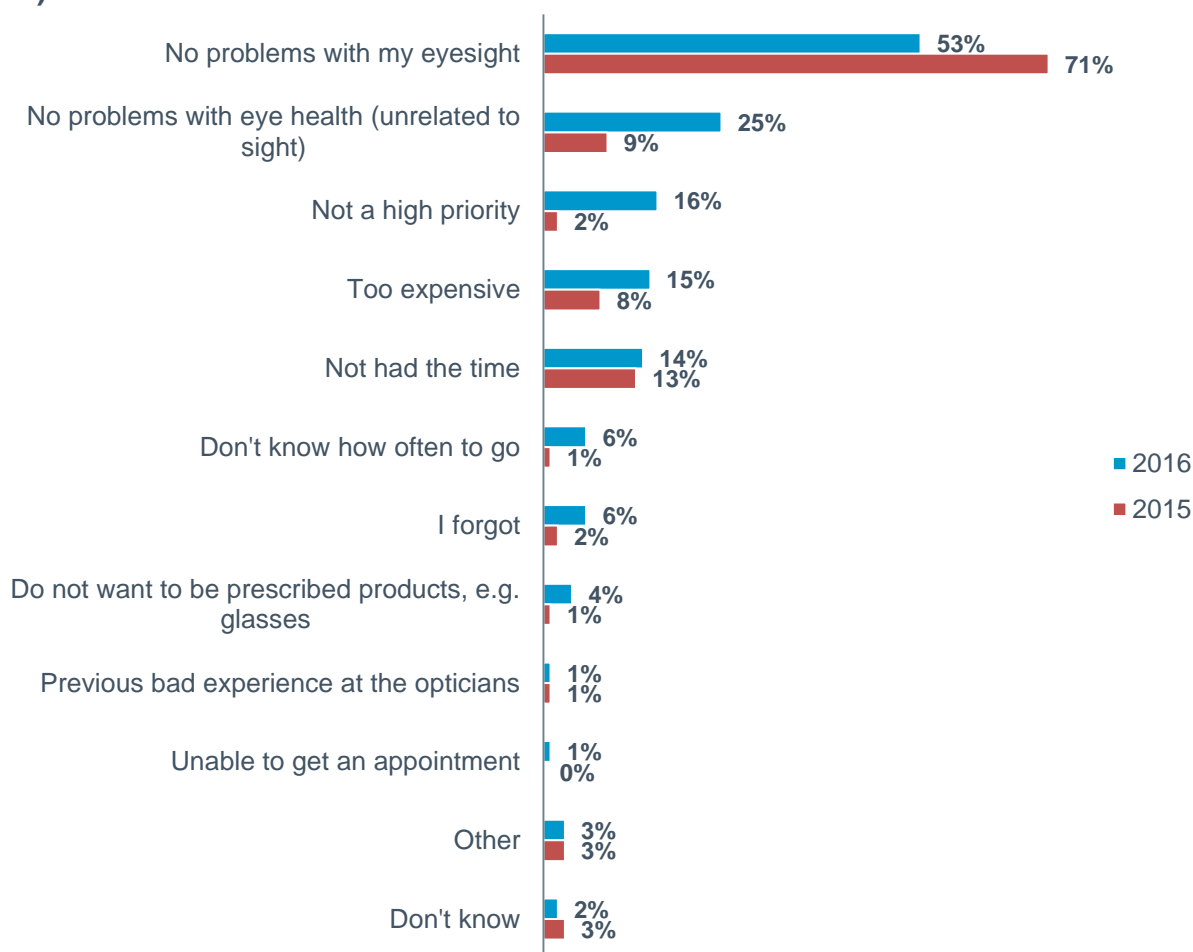
Subgroups more likely to have **never been to an optician** (8% overall) included those who:

- Were male (13%) compared to female respondents (3%)
- Were younger aged 16 to 34 (16%) compared to older age groups
- From Northern Ireland (10%) and Scotland (10%) compared to those from England (8%) and Wales (5%)
- Viewed opticians as retailers (14%) compared to those who viewed opticians as a healthcare service (5%)
- Viewed themselves as customers (10%) compared to those who viewed themselves as patients (6%)

3.3 Reasons for not visiting

Of those who had not visited an optician in the past two years, over half (53%) said that this was because they had no problems with their eyesight, followed by a quarter (25%) who said they had no problems with their eye health and 16% who felt it was not a high priority. The full range of responses are shown in the chart below, including the 2015 survey results.

Figure 9 – Reasons for not going to the opticians in the last two years
Base: Those who had not visited an optician in the last two years 2016 (978) / 2015 (579)



This year’s results show that a much wider range of reasons for not visiting an optician in the last two years have been suggested.²

Subgroup analysis

Subgroups more likely to have not visited because they **had no problems with their eyesight** (53% overall) included those who:

- Were male (58%) compared to female respondents (44%)
- Were younger aged 16 to 34 (62%) compared to respondents aged 55 to 74 (29%)

² This difference may partly be explained by the change in methodology, where respondents are able to view the range of possible answers in a self-completion questionnaire, which may result in them providing more considered responses.

4. Recent visits to an optician

This set of questions was only asked to those who had visited an optician in the last two years, referred to as ‘patients’.

Key findings

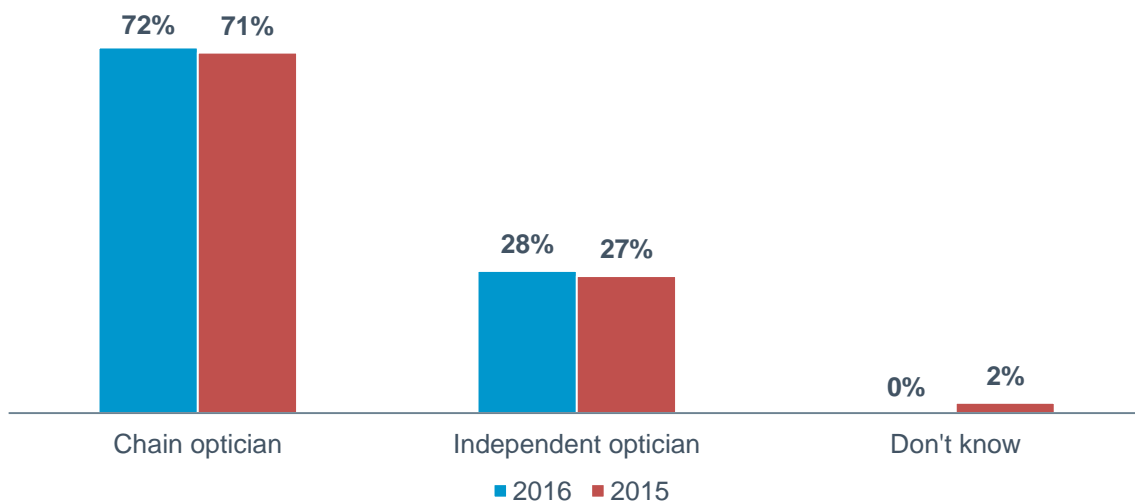
- Almost three quarters (72%) of patients went to a chain optician when they last visited an optician and 28% visited an independent optician
- Almost all patients were satisfied with the optician who carried out their eye test (97%) and their overall experience of the opticians (96%)
- Main reasons for satisfaction were experiencing a good quality examination/issue corrected (35%), the optician seemed qualified (15%) and polite/friendly staff (15%)
- The main reason for dissatisfaction was experiencing a poor quality examination/issue not resolved (24%)
- Focus group and in depth interview research participants also focused on the quality of the eye examination and the skills of the optometrist when explaining why they were satisfied
- Reasons for dissatisfaction related to issues with products purchased, which were generally resolved to participants’ satisfaction

4.1 Type of optician visited

Overall, almost three quarters (72%) of patients said that they had last visited a chain optician and the remaining 28% had last visited an independent optician, almost identical to the results collected in 2015.

Figure 10 – The last time you went to an opticians, did you go to an independent optician, or was it a chain of opticians?

Base: Patients 2016 (2,274) / 2015 (1,653)

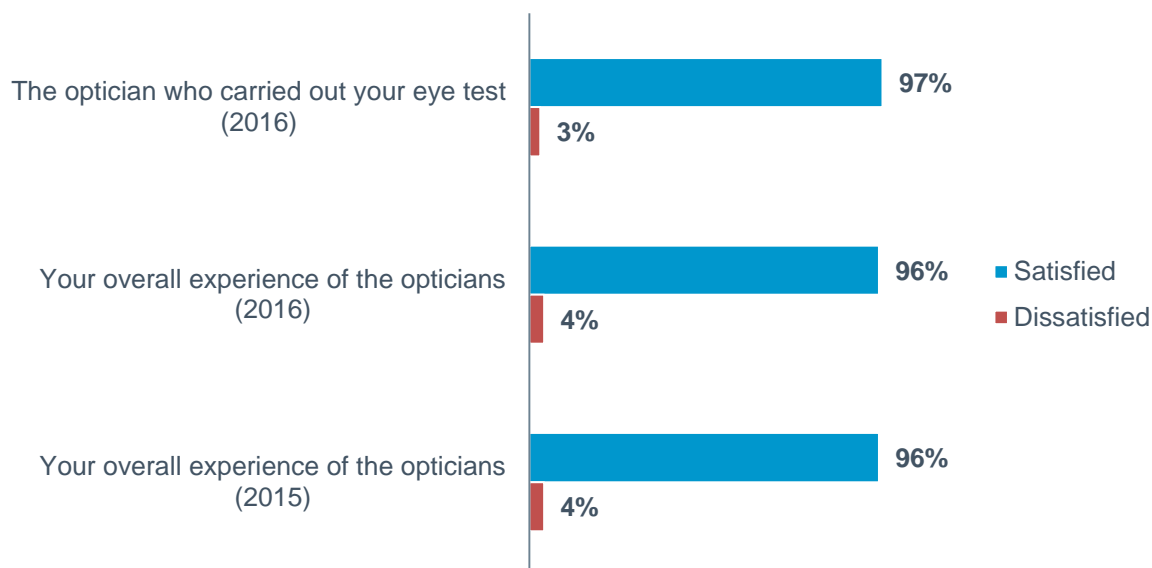


4.2 Satisfaction levels

Almost all patients indicated that they were satisfied with the optician who carried out their eye test (97%) and their overall experience of visiting the opticians (96%). The level of satisfaction with the overall experience of the opticians has stayed the same between 2015 and 2016.

Figure 11 – How satisfied were you with the optician who carried out your eye test / your overall experience of the opticians?

Base: Patients 2016 (2,274) / 2015 (1,653)



Subgroup analysis

Satisfaction levels with **the optician who carried out the eye test** (97% overall) were slightly higher amongst those who:

- Were of White ethnicity (97%) compared to those of another ethnic background (93%)
- Viewed opticians as a healthcare service (98%) compared to those who viewed opticians as a retailer (91%)
- Viewed themselves as a patient (98%) when visiting an optician compared to those who viewed themselves as a customer (95%)
- Would visit an optician first if they woke up tomorrow with an eye problem (99%)

Satisfaction levels with **the overall experience of the opticians** (96% overall) were slightly higher amongst those who:

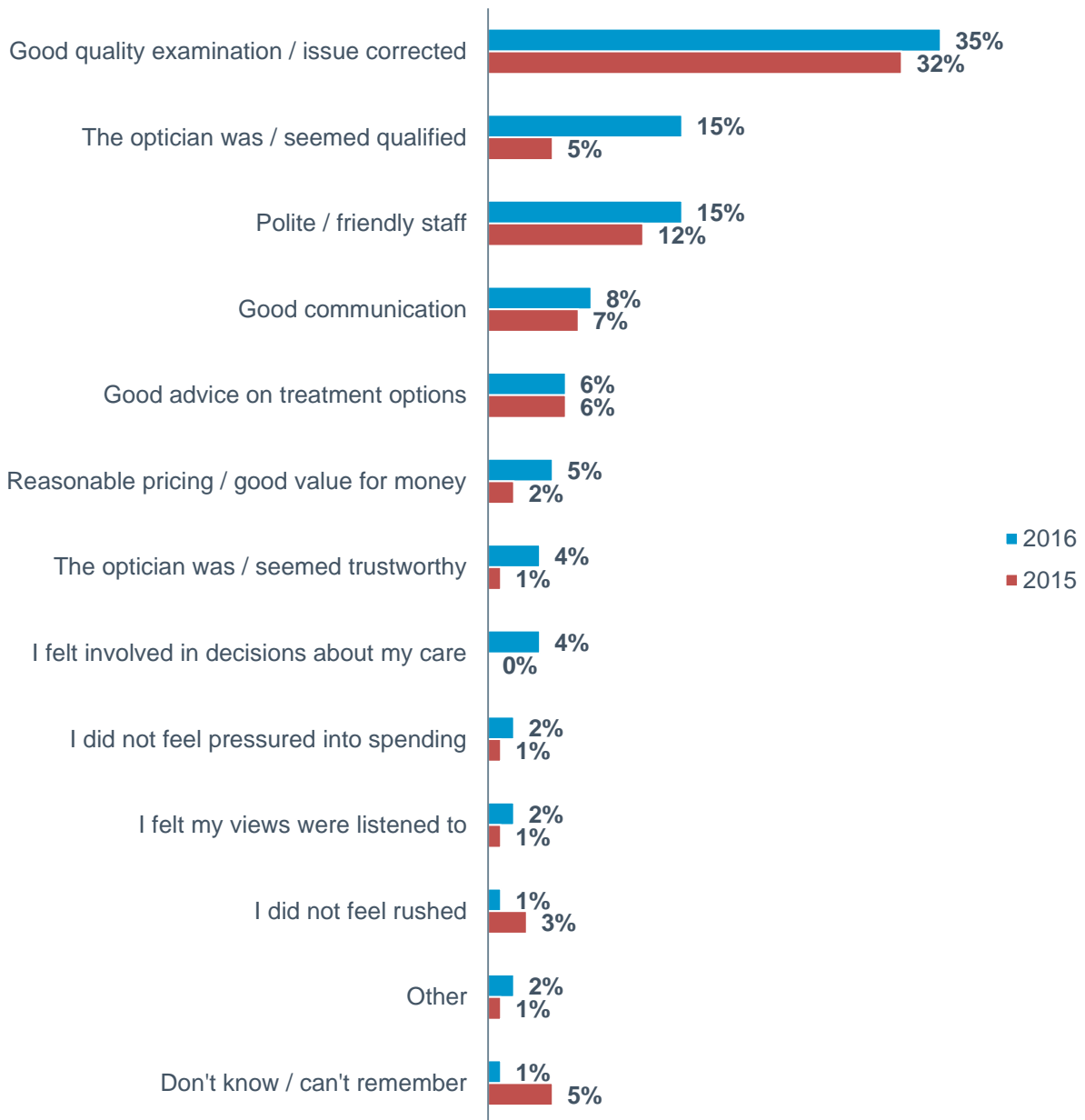
- Were confident they would receive high standards from opticians (98%) compared to those who were (46%)
- Viewed opticians as a healthcare service (98%) compared to those who viewed opticians as a retailer (86%)
- Viewed themselves as a patient (98%) when visiting an optician compared to those who viewed themselves as a customer (93%)

4.3 Reasons for satisfaction

The most popular reason for being satisfied with the overall experience of the most recent visit to an optician was a good quality examination or issue being corrected (35%). This again mirrors findings from the 2015 survey where the main reason for satisfaction was a good quality examination/having an issue corrected (35%), followed by a feeling that the optician was qualified (15%) and polite and friendly staff (15%)³.

Figure 12 – What was the main reason you were satisfied with your overall experience of the opticians?

Base: Patients who were satisfied 2016 (2,182) / 2015 (1,593)



³ A wider range of responses may have been provided by patients to this question due to the use of a self-completion questionnaire, where the range of potential responses are made available to respondents to consider, compared to a telephone interview where responses can be unprompted.

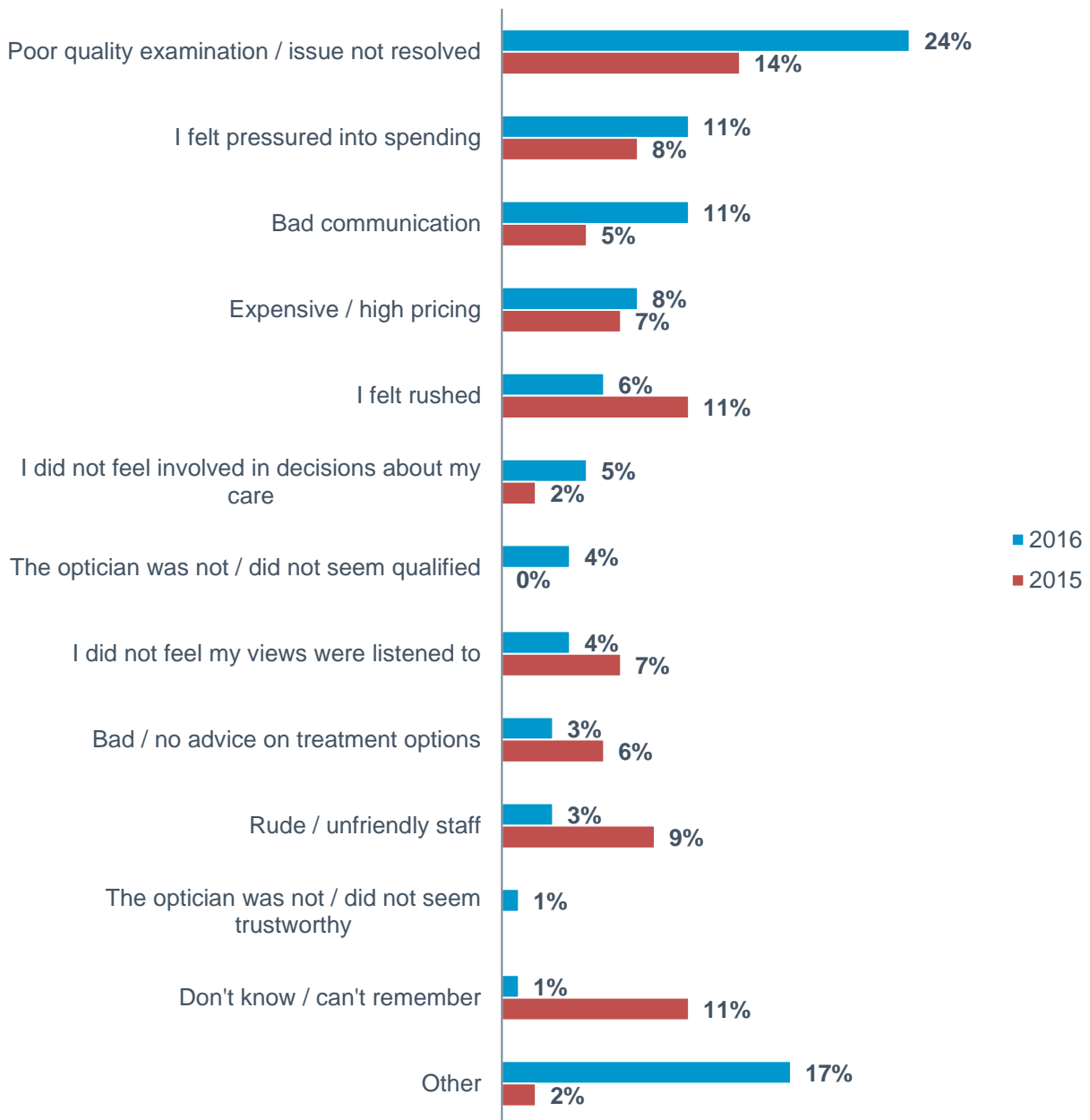
4.4 Reasons for dissatisfaction

Just 4% of patients indicated that they were dissatisfied with their most recent visit to an optician (90 respondents in total). The most common reason for being dissatisfied with the overall experience of the most recent visit to an optician was receiving a poor quality examination or an issue not being corrected (24%), followed by a further 11% who felt pressured into spending or had experienced bad communication. The seven ‘other’ responses mostly related to issues with products purchased at an optician.

The results of the 2015 also found that the main reason for dissatisfaction was because of poor quality examination/not having an issue corrected (24%).

Figure 13 – What was the main reason you were not satisfied with your overall experience of the opticians?

Base: Patients who were dissatisfied 2016 (90) / 2015 (56)



Focus group and in depth interview feedback

The majority of participants were satisfied with their experiences of visiting an opticians

As found in the survey results, the majority of participants stated that they were satisfied with their recent visit to opticians. The main reasons for satisfaction included the efficiency of the appointment process, the opticians and staff themselves, a clear explanation being provided of what was happening during and the results of the eye examination, not feeling rushed, value for money, and the quality of the eye examination.

I went because my glasses had broken. I came out with two for £60 on the same day. (Participant from Leeds)

I was satisfied because things were explained clearly to me. (Participant from Gravesend)

One of the main reasons for satisfaction was with the quality of the eye examination. Many participants said that they were very impressed with the eye examination, particularly its thoroughness, the number of tests and checks that were performed and the appliances and technology used to administer them. Participants were also satisfied with the knowledge, skills and demeanour of the optician that performed the eye test, explaining that they were able to answer their questions and inform them of what was happening during the examination.

It's a good test. They check the back of your retina and lots of other tests. (Participant from Dundee)

They were very thorough when they came to the testing, so they did everything that they actually could, and if I did have questions then they would answer them. (Participant from London)

Dissatisfaction came from experiences of products which did not work correctly

The majority of reasons discussed for dissatisfaction focused on receiving products which were incorrect and did not work, such as glasses made to the wrong prescription or an add-on to a pair of glasses which they did not like, such as tinted lenses or lens coatings. It is, however, important to note that, in most cases, these issues were resolved locally by the optician to the satisfaction of the participant.

The glasses I got were no good for me, but I was able to exchange them with no problem. (Participant from Warrington)

The transition lenses I got didn't work in the car, which is why I got them. But I took them back in and they changed them for me and that was fine. (Participant from Craigavon)

It is interesting to note that any experiences of dissatisfaction were always in relation to the stage of sales and purchasing glasses or contact lenses, in contrast to the eye examination phase of their visit to the optician, of which no participants had any issues to report.

It was great until we got to choosing the frames. When it became sales I wasn't as happy. (Participant from Cardiff)

You have a lovely experience with the optician who seems to look after you and then you go out the door back into the retail world where they are trying to sell you stuff. (Participant from Belfast)

5. Purchasing glasses or contact lenses

Key findings

Location of purchase

- The majority of glasses with a prescription and contact lenses are purchased from the same optician where the eye test was carried out (91% and 84%)
- A small proportion (12%) of respondents indicated that they purchased their contact lenses online

Clarity of costs

- Almost all respondents felt that the costs were clear when they visited opticians (90% and above)
- Focus group and interview participants reported some confusion of costs when visiting an optician, feeling that the total price was only available once it was discussed with an optician and was difficult to calculate alone, particularly when vouchers and offers were available
- To make costs clearer, it was suggested that price lists could be displayed or examples provided

Pressure to spend money on products or services not wanted or needed

- The majority of respondents said that they felt no pressure to spend money on products or services they did not want or need when visiting opticians (as high as 89% recorded when having an eye test). However, a total of 17% said they felt some pressure when purchasing glasses
- Some pressure was reported by focus group and in depth interview participants, but most felt that this was to be expected when visiting an optician which runs as a business to make a profit
- Almost all (94%) respondents said that they were satisfied with their experience of purchasing glasses or contact lenses

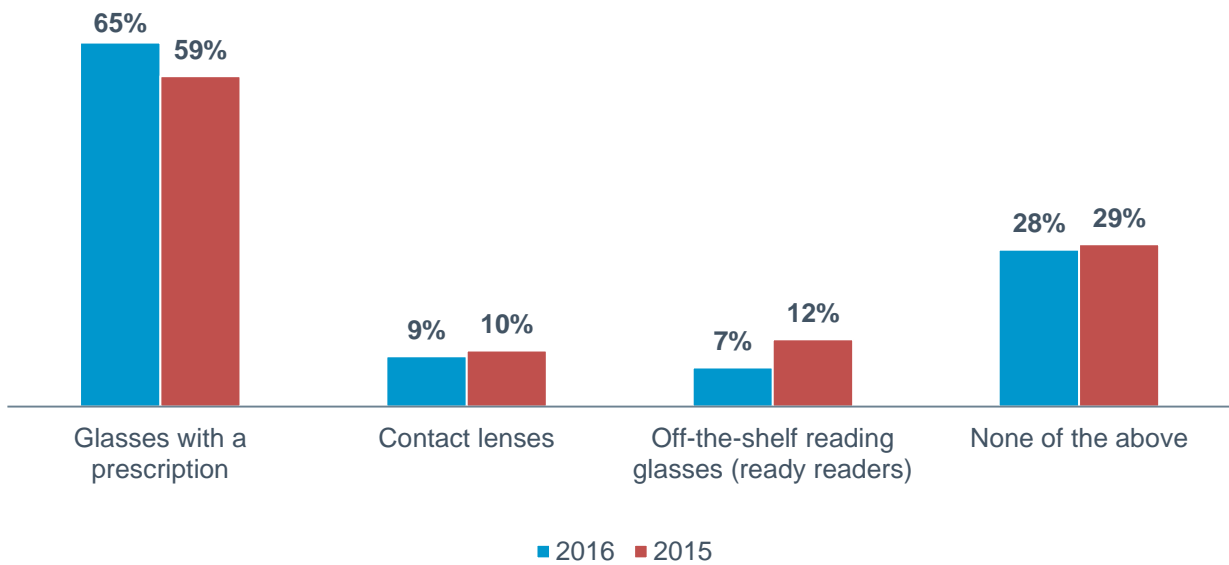
5.1 Use of products to improve sight

Almost two thirds (65%) of respondents said that they used glasses with a prescription to improve their sight, with a further 9% using contact lenses and 7% using off-the-shelf reading glasses without a prescription. Three in ten (28%) did not use any of these products.

The results have remained similar between 2015 and 2016, with the same proportion indicating that they use contact lenses or that they do not use any corrective products, and only small movements between those who use glasses with a prescription of off-the-shelf reading glasses.

Figure 14 – Do you currently use any products such as glasses or contact lenses to improve your eyesight?

Base: All respondents 2016 (3,252) / 2015 (2,250)

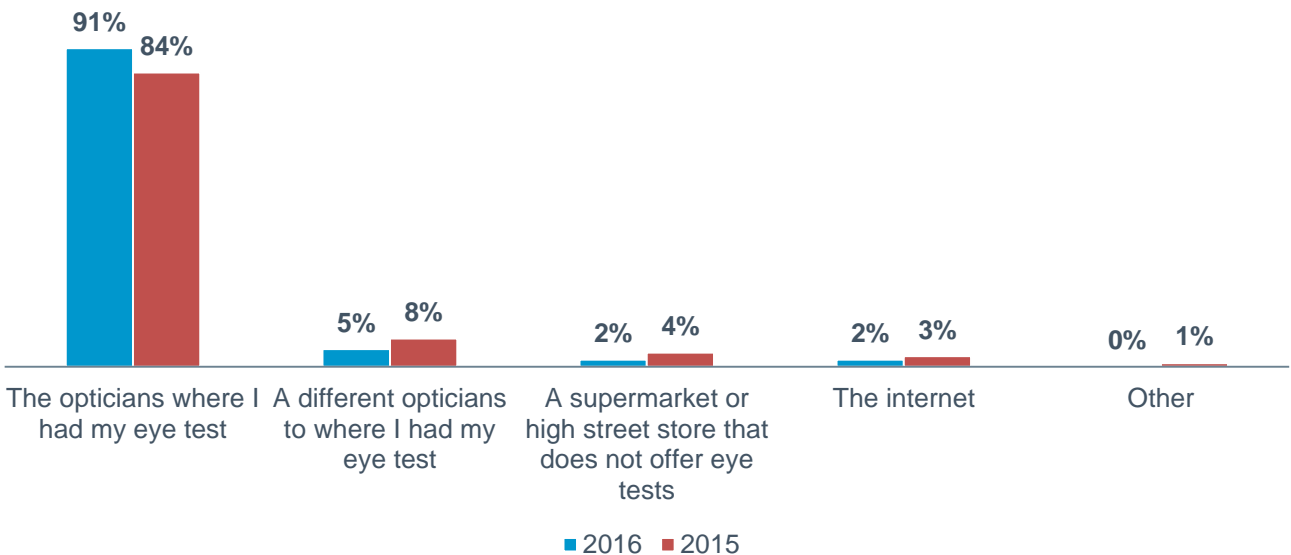


5.2 Location of purchase

The majority (91%) of respondents who used glasses with a prescription purchased their glasses from the same opticians where they had their eye test. This result shows an increase from 2015, where 84% of these respondents answered in this way (+7%).

Figure 15 – Where did you purchase your glasses from?

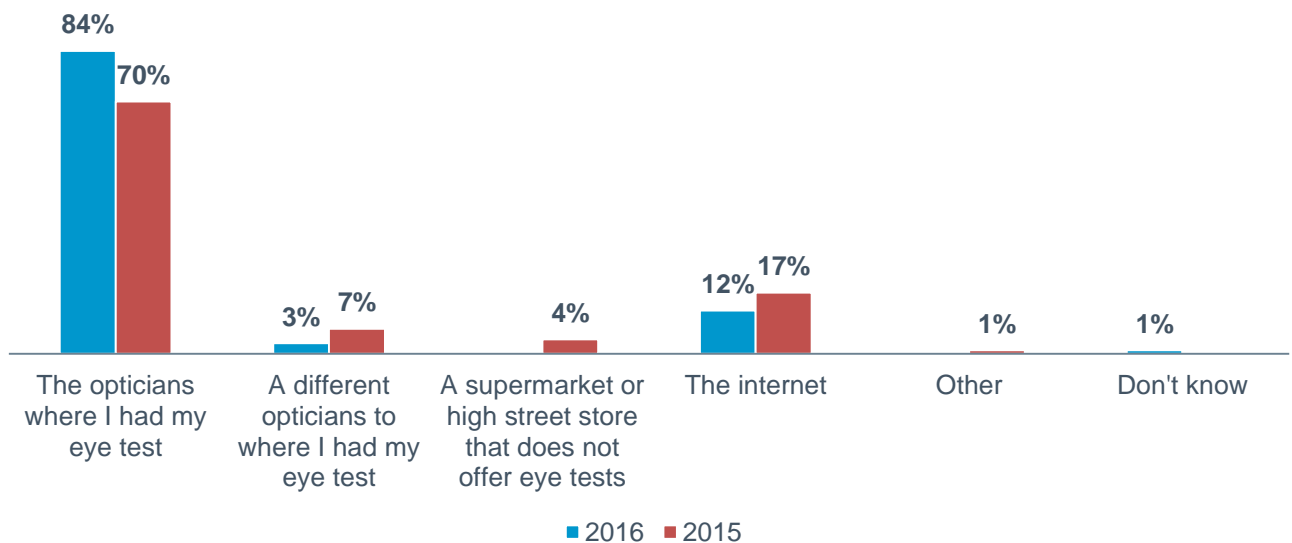
Base: Those who use glasses with a prescription 2016 (2,111) / 2015 (1,304)



The majority (84%) of respondents who used contact lenses also purchased them at the optician where they had their eye test, but one in eight (12%) indicated that they purchased them online. In comparison to the 2015 results, this represents a decrease (-5%) in the proportion of respondents who purchased their contact lenses online.

Figure 16 – Where did you purchase your contact lenses from?

Base: Those who use contact lenses 2016 (303) / 2015 (218)

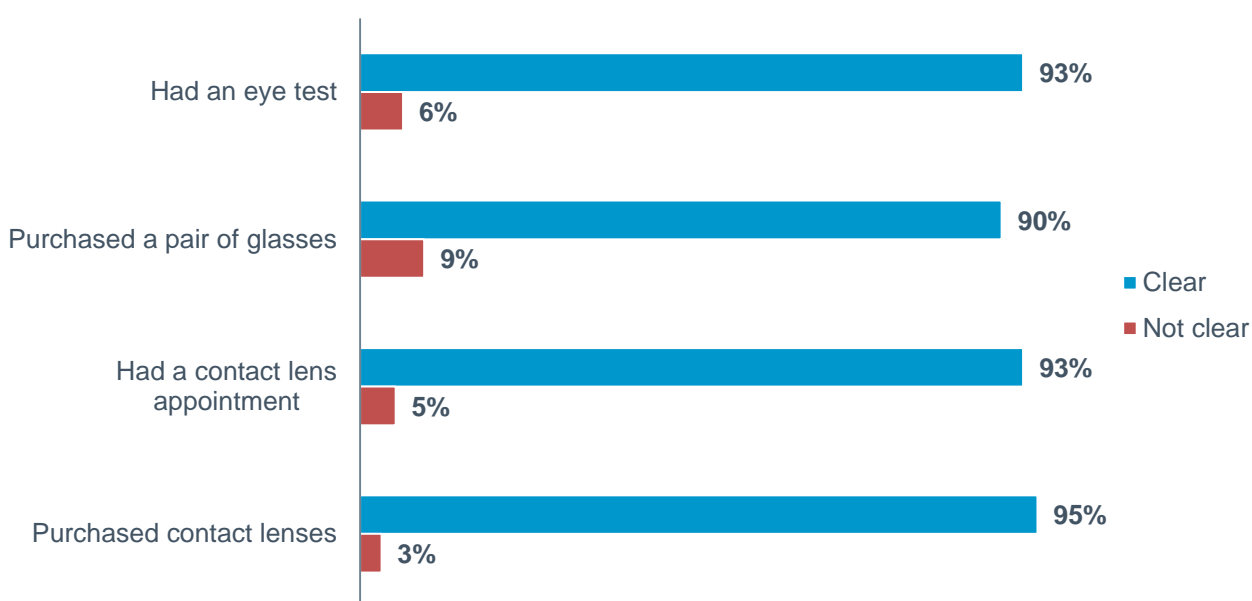


5.3 Clarity of costs

The GOC was interested in this year's survey to understand whether patients and the public were clear about the costs of optical services and products, and therefore included an additional question in the survey. The majority of those who used either glasses with a prescription or contact lenses felt that the costs were clear when having an eye test (93%), purchasing glasses (90%), having a contact lens appointment (93%) and purchasing contact lenses (95%).

Figure 17 – How clear or otherwise did you feel the costs were before you were asked to pay the last time you...

Base: Those who use glasses with a prescription (2,111) / Those who use contact lenses (303)



Focus group and in depth interview feedback

Many expect it will be an expensive visit

When discussing the costs associated with visiting an optician, one of the first things which many participants thought of was the expense, stating that visiting an optician was generally an expensive thing to do. These participants explained that when they went to the opticians, they expected to spend a lot, based on their previous experiences and awareness that they would not be able to have a pair of glasses that they were happy with if they did not spend a lot of money. Almost all participants related cost to purchasing glasses, with very few participants discussing the cost of an eye examination.

The first thing I think of when I think of opticians is 'expensive'. (Participant from Lisburn)

If I want a wire frame for example, this is when I have to start getting the thin lenses, and that's where they start to cost hundreds of pounds. (Participant from London)

A small number of participants had begun to take their eye prescription away from the optician and purchase their glasses or contact lenses online due to the high costs they found when purchasing directly from the optician. Not all participants were aware that they could do this.

Because of the cost I've been taking my prescription away and getting my glasses online for the past five or six years. £7 from China and they're exactly the same. (Participant from Leeds)

The use of vouchers and offers to reduce the cost

However, not all participants perceived going to an optician to be an expensive process. A number of participants explained that they took advantage of various offers and used vouchers in order to get their glasses for a low cost. However, further discussion highlighted that these participants tended to need glasses which did not require additional add-ons, such as thinned lenses or coatings, and chose inexpensive frames, which meant that they could take advantage of cheaper deals and prices.

I got a free eye test and didn't go for the expensive frames, so it was good value. (Participant from Warrington)

Many participants had experience of using vouchers or taking offers of deals in order to reduce the cost of visiting an optician. These offers tended to reduce the cost of the eye examination or meant that two pairs of glasses were provided for the cost of one. It was mentioned by some participants that they felt eye tests should be free, and they therefore sought out vouchers to avoid having to pay for the service. Typically, those who had experience of using vouchers and offers had visited chain opticians rather than independent opticians.

I used a voucher because I'm a student and I got a discount. (Participant from Leeds)

If I get offered a spare pair free. I always go for the sunglasses with exactly the same prescription. (Participant from Belfast)

Some confusion over costs and making costs clearer

Whilst a lot of participants felt that they were clear on how much they would spend when they visited an optician in line with the survey findings, a significant proportion reported that they were not clear about this and that the costs often left them slightly confused. This confusion tended to come from the cost of purchasing glasses, specifically the cost of add-ons and extras such as thinning of lenses and lens coatings. It was widely reported that the cost of the frames was clear, with most being in price bands or having a sticker on displaying the cost, but that the cost of the lenses and the total cost of the glasses would not be revealed until they sat down with an optician who would be able to talk the costs through with them.

You're not aware of the cost until all of the issues are discussed at the end of the process. (Participant from Glasgow)

You go in expecting to buy a £30 pair of glasses and by the time you've come out it's cost you over £100. (Participant from Cardiff)

When I go into an optician and I see the price of glasses I know that is not what I will end up paying only because I have had that experience in the past. (Participant from Belfast)

It was also reported by some participants that the variety of vouchers and offers can also confuse the costs and make things unclear. In particular, it was highlighted that advertisements which promoted low cost frames did not include any of the additional costs such as lens coating and thinning that may be required for the patient, and that therefore in reality, this low cost may not available to many people.

Sometimes the vouchers aren't that clear, what they actually cover and what you need to pay. You're not prepared beforehand. (Participant from Cardiff)

It's not clear at all. There are so many adverts, two pairs of glasses for £69, but that's just the basic cost. It doesn't include all the add-ons that you need which add on a lot of cost. (Participant from Dundee)

To make costs clearer, many participants suggested that a list of costs could be displayed in the opticians and on their website to allow patients the ability to calculate the total cost of their glasses before having their eye examination so they would be informed in advance. It was explained that this list should include the cost of all optional extras and add-ons. It was also suggested that there could be set, standardised costs for certain things when visiting an optician such as the eye examination or the cost of certain lens coatings so that patients would know more what to expect, similar to the system in place for NHS dentists. However, it was also accepted by some participants that this would be difficult to administer as there are no standardised costs for opticians and that glasses are tailored to suit the individual.

If they had a menu on the wall it would be good so people don't have to ask. (Participant from Port Talbot)

There should be set tariffs like there are at the dentist, where certain things cost a set amount and you can look it up. It's not common knowledge. (Participant from Leeds)

Costs could be more visible, but it would be difficult to have a standardised price list because glasses are a very personalised thing. (Participant from Maidstone)

An alternate suggestion was that example costs could be provided for different types of glasses to provide an indication of what the total cost would be.

Provide examples for what typical glasses will cost with all the add-ons. And include this cost in the adverts, rather than someone having to tell you later. (Participant from Dundee)

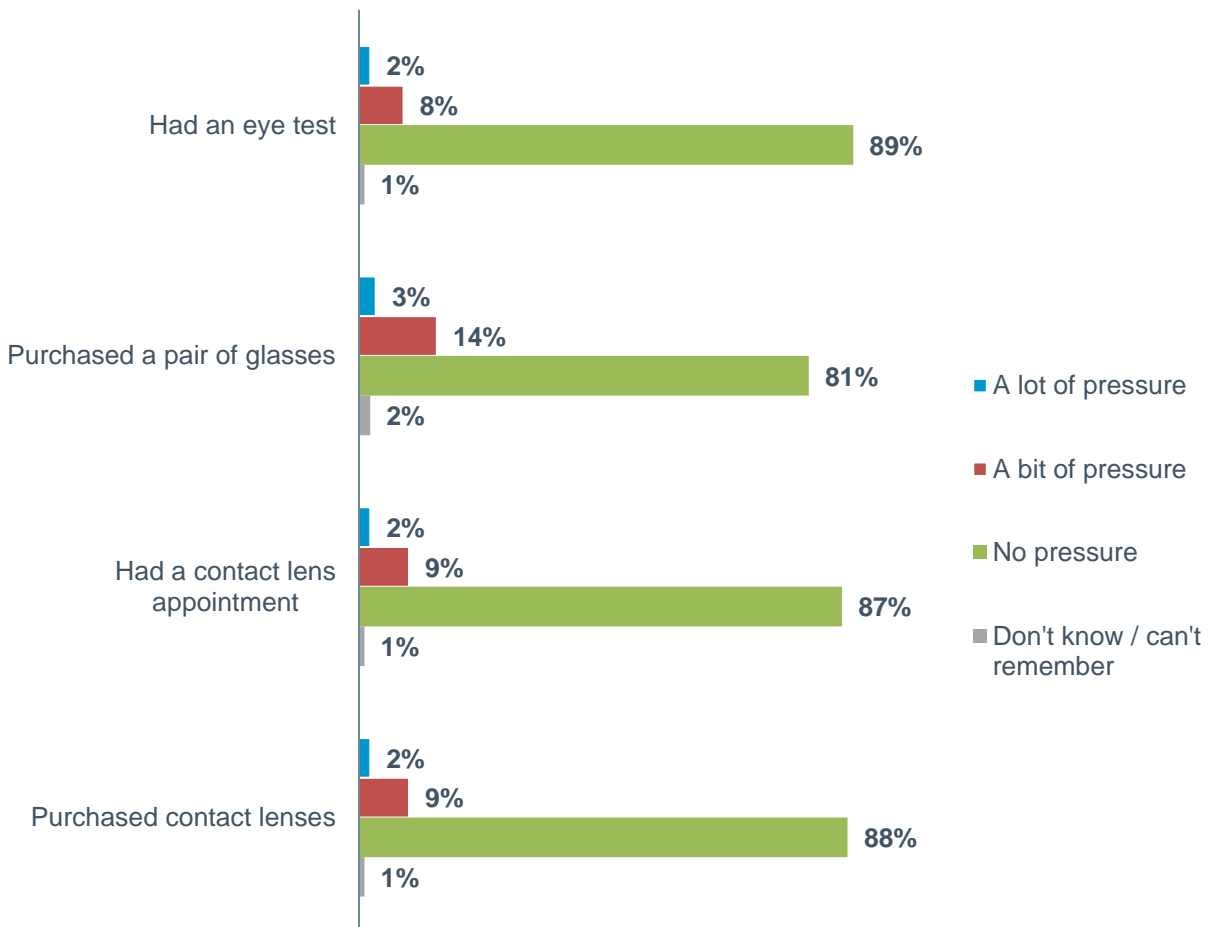
5.4 Pressure to buy an unwanted or unneeded product or service

The GOC was interested in knowing whether patients and the public felt under pressure purchase products or services which they did not consider necessary, and therefore a new question was included in this year’s questionnaire, asked to all those who used glasses with a prescription or contact lenses.

The majority of respondents who used glasses with a prescription or contact lenses said that they felt under no pressure to buy products or services they did not want or need when having an eye test (89%) or contact lens appointment (87%), or when purchasing these glasses (81%) or contact lenses (88%). The largest proportion of those who said that they felt under pressure were those who purchased a pair of glasses, where 14% said they felt a bit of pressure and 3% a lot of pressure.

Figure 18 – Did you feel under any pressure to buy a product or service which you didn’t want or need the last time you...

Base: Those who used glasses with a prescription or contact lenses (2,256) / Those who use glasses with a prescription or contact lenses (2,179) / Those who use glasses with a prescription (2,111) / Those who use contact lenses (303)



Focus group and in depth interview feedback

In line with the survey findings, the majority of focus group and in depth interview participants said that they did not feel under pressure to buy unwanted or unneeded products or services when visiting an optician. Indeed, some participants reported that they would never expect this from their optician, who they perceived to be working in their interest to get them the lowest cost products possible.

I've never felt under any pressure. The last time I went I was told my prescription hadn't changed so they didn't push me into getting a new pair of glasses. (Participant from Elgin)

I've been given quite honest advice, which has meant that I haven't necessarily bought the most expensive glasses. (Participant from London)

The most common attitude towards the topic of pressure purchase unnecessary products or services from opticians was that they expected some form of a 'sales pitch' during the process as participants accepted that opticians were businesses aiming to make a profit, and therefore it was in their interest to encourage their patients or customers to spend as much as possible. It appears that, whilst they may expect their optician to encourage them to spend more, the participants do not necessarily perceive this to be pressure, and feel that it is simply part of the purchasing process when visiting an optician. Generally, these participants explained that they were confident in telling their optician if they did not want to spend any additional money on their purchases, and in some cases prepared to spend a specific amount during their visit.

There was a push to have a coating, but I wouldn't say it was pressure. (Participant from Warrington)

You can't forget that they're a business at the end of the day and they want to sell the more expensive frames. It's up to you what you spend your money on though. (Participant from Cardiff)

Despite this, a minority of participants reported that they did feel some form of pressure to spend money when visiting an optician. They explained that this pressure typically took the form of feeling as though they were being directed towards more expensive frames, persuaded to take up offers for additional frames and opt for upgrades and add-ons to their lenses, such as thinning and coating. These participants said that if they declined these offers they noticed a change in the attitude of the optician and were made to feel cheap.

They make you feel like anti-glare is something you really need, even though you might not. It makes you feel a bit cheap when you turn it down. (Participant from Leeds)

When I've told them that I don't want to spend any extra I feel their body language change and lose eye contact. Just because I didn't want my kids to have Armani glasses. (Participant from Cardiff)

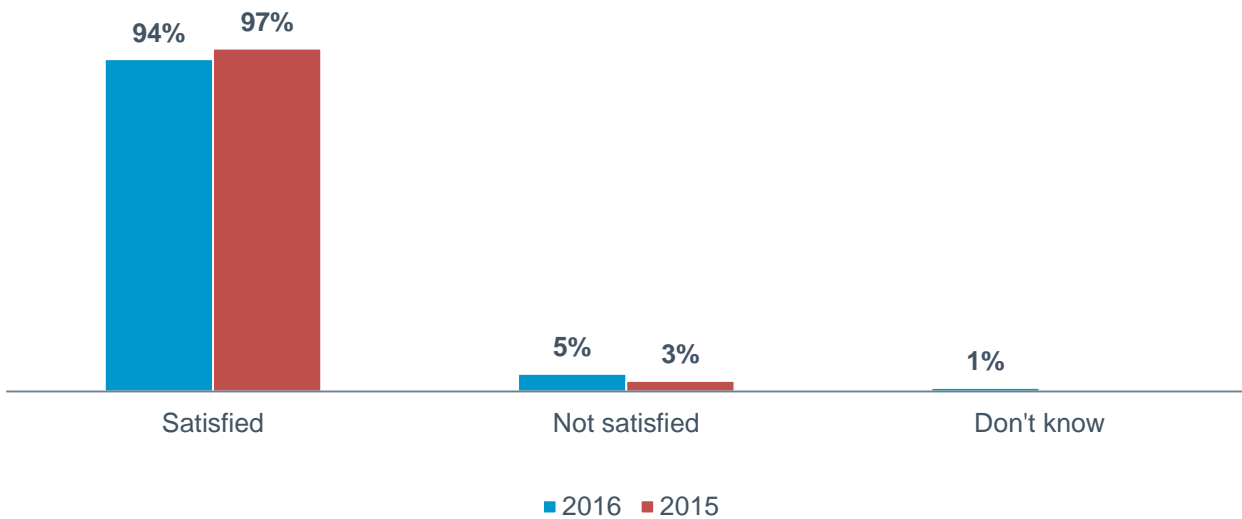
5.5 Satisfaction with purchasing

Almost all (94%) respondents who used glasses or contact lenses reported that they were satisfied with their experience of purchasing these products. The majority (63%) indicated that they were very satisfied and a further 32% said they were fairly satisfied. This result is broadly similar to that seen in 2015, where a total of 97% were satisfied with their experience.

This result is perhaps unsurprising given the high levels of overall satisfaction when visiting an optician recorded earlier in the survey.

Figure 19 – How satisfied or otherwise were you with your experience of buying your glasses or contact lenses?

Base: Those who use glasses with a prescription or contact lenses 2016 (2,179) / 2015 (1,337)



6. Complaints

Key findings

- 60% of respondents said they would be likely to complain if they received poor healthcare
- Just 3% said that they had complained about an experience with an optician and 4% had considered complaining
- The majority (59%) of respondents said that they would direct their complaint to the opticians where the treatment was carried out
- No focus group or in depth interview participants had experience of making a complaint about an experience with an optician. Some had experienced problems, but explained that these had been resolved to their satisfaction by the optician
- Some participants said that they would go to external organisations such as Trading Standards or the Citizens Advice Bureau to make a complaint
- Many participants said that they would not return to the opticians where they experienced a problem if serious enough, and would simply go elsewhere
- To ensure everyone had the confidence to complain, it was suggested during the focus groups and in depth interviews that awareness of the GOC should be raised and that all opticians should have a patient feedback system in place

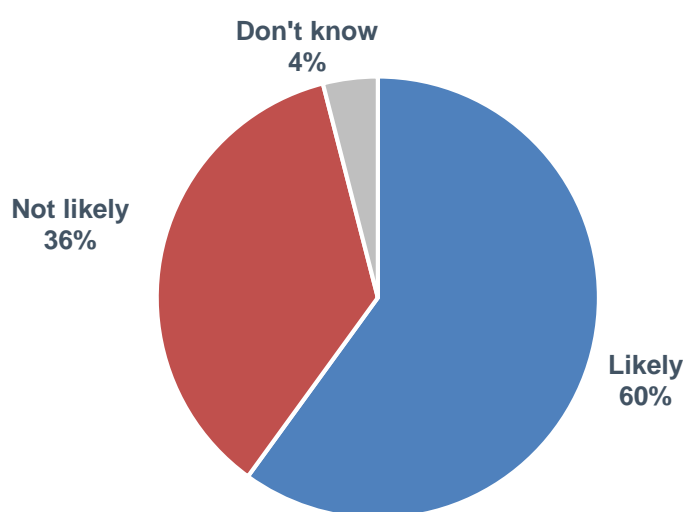
6.1 Likelihood of complaining when receiving poor healthcare

To better understand respondents' propensity to complain, this year's survey asked all respondents how likely they would be to complain if they received poor healthcare from a GP, hospital consultant, optician, dentist, or anyone else working in the health sector.

A total of 60% of respondents said that they were likely to complain if they received poor healthcare (25% very likely and 35% quite likely).

Figure 25 – If you received poor healthcare, how likely or unlikely would you be to complain about it?

Base: All respondents (3,252)



Subgroup analysis

Subgroups more likely to complain if they received poor healthcare (60% overall) included those who:

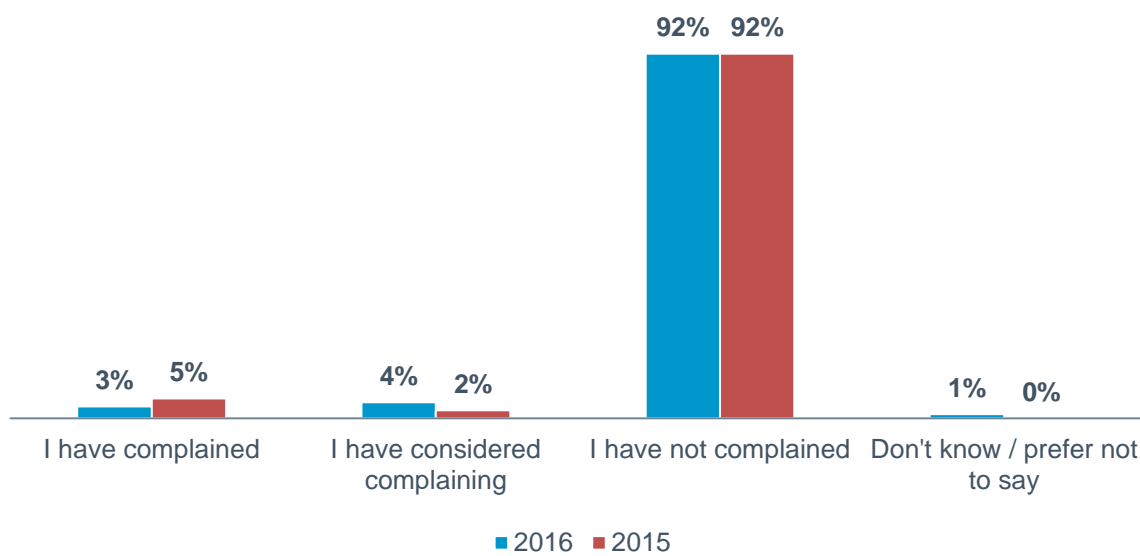
- Were patients (64%) compared to non-patients (50%)
- Were aged 55 to 74 (69%) compared to other age groups
- From England (63%), particularly when compared to respondents from Northern Ireland (47%)
- Were aware of the GOC (74%) compared to those who were not (58%)
- Viewed opticians as a healthcare service (66%) compared to those who viewed opticians as a retailer (48%)
- Viewed themselves as patients when they visited an optician (66%) compared to those who viewed themselves as a customer (54%)

6.2 Reported complaints behaviour

Whilst the majority (92%) of respondents said that they had not complained about an experience with an optician, 3% indicated that they had and 4% said that they had considered complaining. This year’s results are very similar to those collected in 2015.

Figure 26 – Have you ever complained or considered complaining about an experience with an optician?

Base: Those who had ever visited an optician 2016 (2,983) / 2015 (1,994)



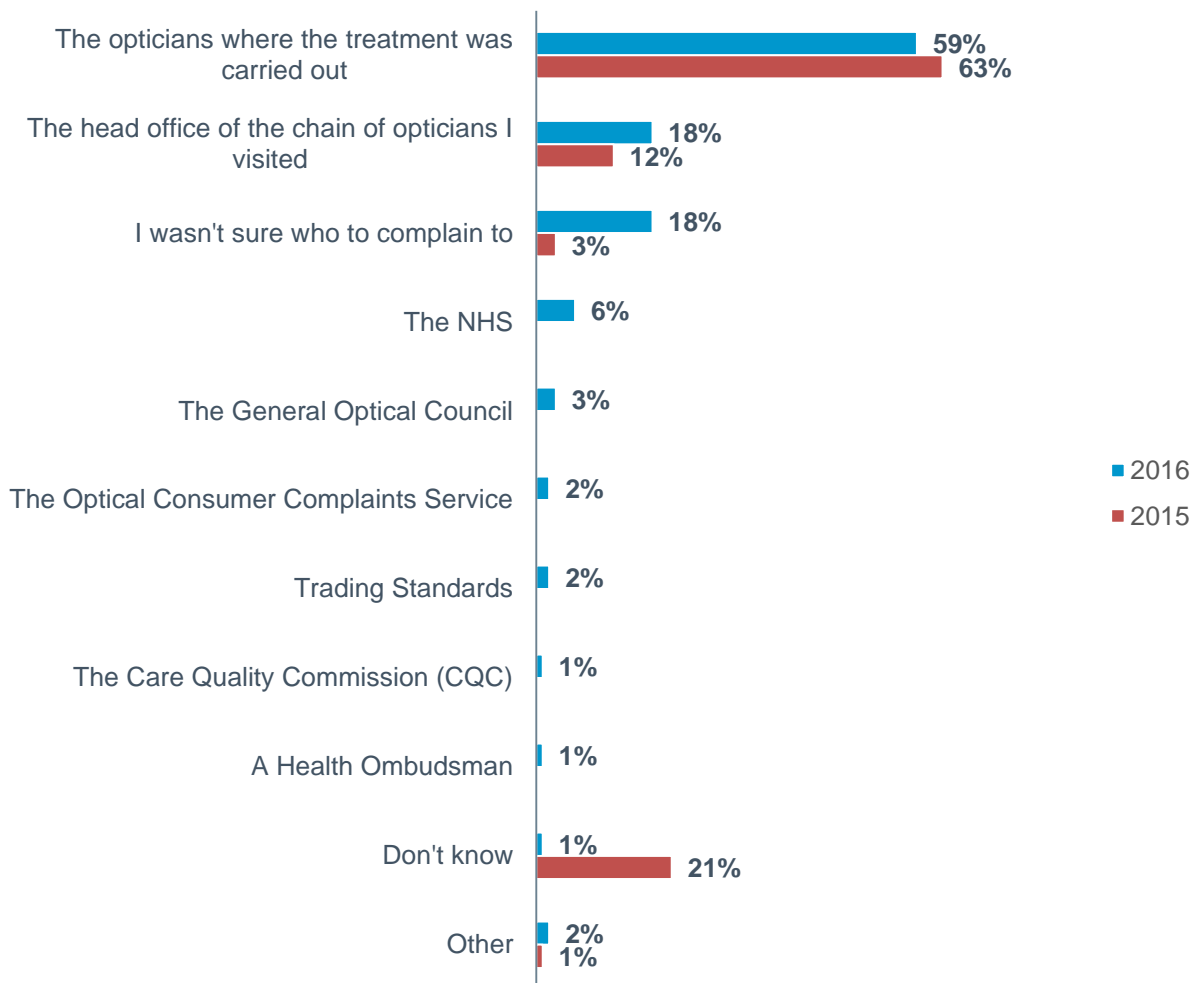
6.3 Where complaints are made

Of the small proportion of respondents who said that they had complained or had considered complaining about an experience with an optician, the majority (59%) stated that they would direct the complaint to the opticians where the treatment was carried out, followed by 18% who said that they would go to the head office of the chain of opticians they visited. A further 18% said that they were not sure who to complain to.

This year’s results are quite similar to the 2015 results, but with an increase in the proportion of respondents saying that they were not sure who to complain to from 3% in 2015 to 18% in 2016. However, there has also been a decrease in the proportion of those who said that they did not know how to answer this question, from 21% in 2015 to 1% in 2016.⁴

Figure 27 – Thinking about the most recent time you complained or considered complaining about an experience with an optician, who did you complain or consider complaining to?

Base: Those who have ever complained or considered complaining 2016 (186) / 2015 (143)



⁴ Again, it should be remembered that respondents were able to view the range of possible answers in this year’s self-completion questionnaire (which they were unable to do in 2015’s telephone survey), which may result in them providing more considered responses.

Focus group and in depth interview feedback

No focus group or interview participants had experience of making a complaint about an optician. Indeed, some participants found it unusual that someone would make a complaint about an optician at all, explaining that they expected it of doctors but not of the optical profession.

I have never even heard of anyone making a complaint about an optician. (Participant from Glasgow)

Some had experienced issues when visiting an optician which were related to the product they had purchased, either glasses or contact lenses. Usually, this was a problem with the prescription of the lenses or the fit of the frames. However, all participants explained that they had returned to their optician to report their problems and the problem had been rectified. Only a small number of participants said that they had to return on more than one occasion or had experienced difficulties in getting their problems solved.

I go back if I can't see properly, and they will adjust them. (Participant from London)

Most participants said that they would feel confident to complain about an optician should they need to, but also appreciated that it may be different for other people who may not feel confident. A small number of participants indicated that they would be hesitant to complain directly to their optician knowing that this may have an impact on their experiences with the individual optician in the future.

I would feel confident to complain and I think if the issue was serious the optician would want me to. (Participant from Craigavon)

In the first instance, the majority of participants said that they would complain directly to the opticians where they had the issue, either the branch itself or the head office, either in person or via a letter. If they were not satisfied with the outcome of approaching the optician directly, these participants said that they would then search for another route, with many suggesting organisations such as Trading Standards and the Citizens Advice Bureau, and others explaining that they would search online for information about who to complain to. However, a number of participants said that they would go to external organisations or search online first and would not go back to their optician to make a complaint. No participants mentioned the GOC by name, but some said they would go to 'the regulator'.

I'd write directly to Specsavers. (Participant from Warrington)

If I didn't get it sorted at the optician I'd probably go to Trading Standards. (Participant from Port Talbot)

If I really wanted to complain, I would probably just Google it. (Participant from Belfast)

A large number of participants said that if they were unhappy with the care or service they had received at an optician and the issue was not too serious, they would simply ‘vote with their feet’, find a different optician to visit and not return. It was felt that this would not be a difficult decision to make due to the fact that it is not a requirement to be registered with an optician, as with a doctor, there are many opticians to choose from and it would be a relatively simple process.

If anything was that bad I'd just move opticians. (Participant from Dundee)

You vote with your feet. An optician who doesn't give good service just won't get your business next time, so they have a strong vested interest to provide a good service. (Participant from Glasgow)

It was suggested that some people may not complain about poor service received from an opticians because they may not know where to complain to outside the opticians itself. It was, therefore, felt that the complaints process could be made clearer, which could be done by increasing awareness of the standards opticians are required to work to and the GOC itself. Another suggestion made to make routes to complaining clearer was to make it a requirement to have feedback forms present in opticians, something which many participants had encountered at their doctor's surgery.

If it was advertised how people could complain easily perhaps more people would. An online form is probably easiest. (Participant from Belfast)

If people were more aware of where they could complain and that it's actually okay to complain then they might be more confident to do it. (Participant from Leeds)

7. When something goes wrong

Key findings

- The majority of respondents felt it was likely that they would receive an apology from an optician if something had gone wrong (67%)
- However, a significant minority said that it was not likely they would receive an apology (19%) or that they didn't know (14%)
- Only 9% of respondents said they had experience of a situation where something had gone wrong with the care or service they received from an optician
- Of these 254 respondents, 42% said they had received an apology as a result, but 53% said they had not

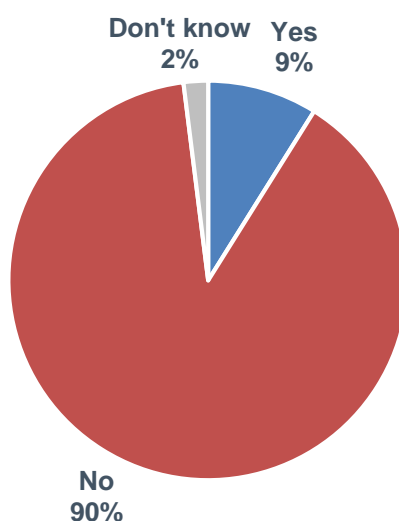
In April 2016 the GOC introduced new standards for the optical profession (Standards of Practice for Optometrists and Dispensing Opticians and Standards for Optical Students). One of these new standards requires optical professionals to be candid to patients and customers when something goes and to provide an apology. The GOC therefore wanted to know in this year's survey how frequently something went wrong for patients and whether they received an apology when this occurred.

7.1 Experience of something going wrong and receiving an apology

One in twelve (9%) respondents said that they had experienced a situation where something had gone wrong with the care or service they had received from an optician.

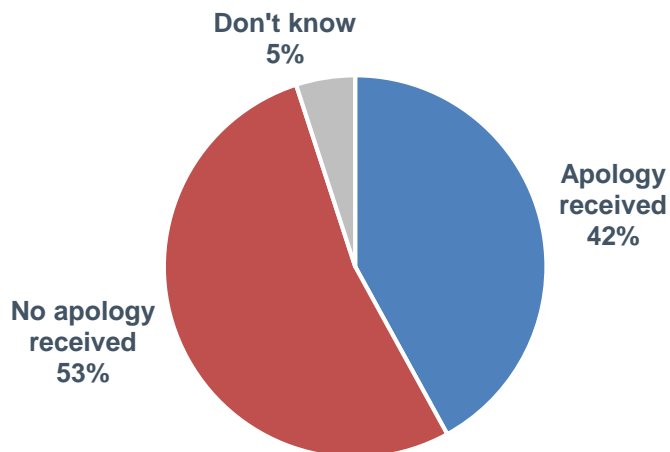
Figure 28 – Have you ever experienced a situation where something has gone wrong with the care/service you received from an optician?

Base: Those who had ever visited an optician (2,983)



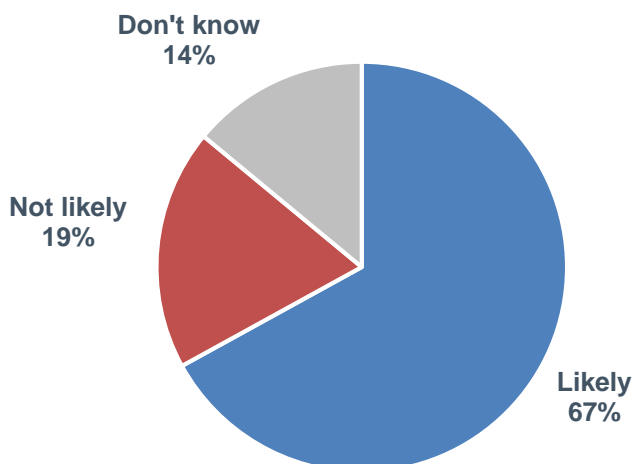
Of those who had experience of when something had gone wrong, just over two in five (42%) said that they received an apology as a result, whilst just over half said they did not (53%).

Figure 29 – Did you receive an apology as a result?
Base: Those who experience of something going wrong (254)



All respondents were asked how likely it was that an optician would provide an apology. Two thirds (67%) of all respondents thought that it was likely that an optician would provide an apology to a patient when something has gone wrong with the care or service they receive.

Figure 30 – How likely do you think it is that an optician would provide an apology to a patient when something has gone wrong with the care/service they receive?
Base: All respondents (3,252)



Subgroup analysis

Larger proportions of the following subgroups thought it was **likely that an apology would be received** when something has gone wrong (67% overall):

- Patients (71%) compared to non-patients (57%)

- Those who were confident they would receive a high standard of care from opticians (70%) compared to those who were not confident (36%)
- Those who were aware of the GOC (77%) compared to those who were not (66%)
- Those who viewed opticians as a healthcare service (71%) compared to those who viewed opticians as a retailer (55%)
- Those who would go to an optician first if they woke up tomorrow with an eye problem (74%)

8. Perceptions of regulation

Key findings

- The majority (89%) of respondents were confident in receiving high standards of care from opticians, in line with other healthcare professions
- 71% said that they thought opticians were regulated. This was a lower score than GPs (87%), dentists (80%), pharmacists (75%) and nurses (75%)
- Almost nine in ten (88%) respondents were aware that opticians have recognised academic qualifications, but awareness that opticians undergo regular training and are monitored by a regulatory body was lower (65% and 64%)
- Few participants were aware of the GOC's standards, but strongly assumed that something like them would exist that opticians had to work to
- Just 4% of survey respondents could correctly name the GOC and 12% claimed to be aware before taking part in the research
- Most participants felt that the public would benefit from a general awareness of the GOC and its standards, which could increase confidence in the profession, make it clearer how to make a complaint, and make visiting an optician feel more like a healthcare experience
- Many participants suggested that the GOC logo should be clearly displayed in opticians, in windows, posters, leaflets and company websites to help increase awareness

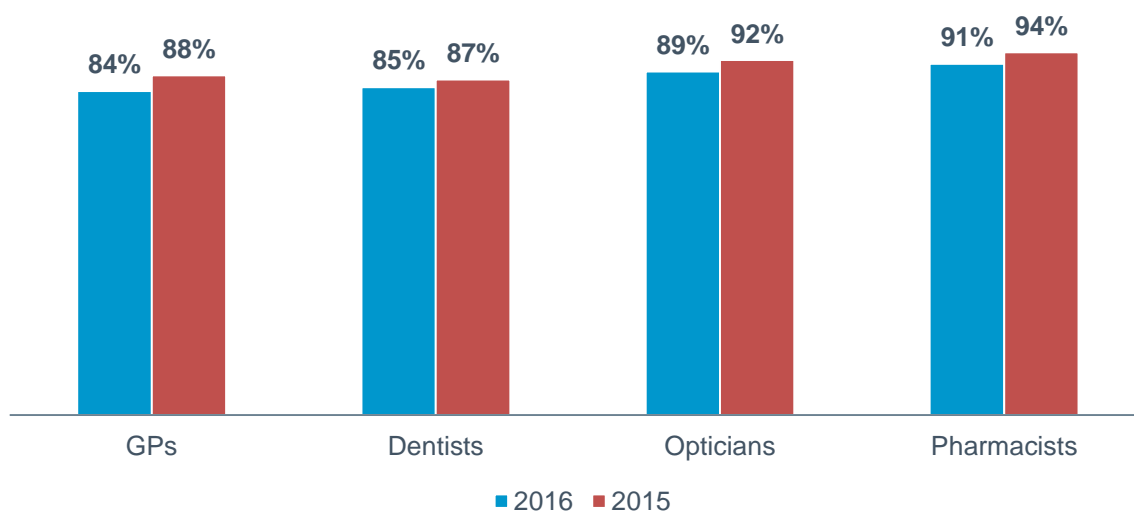
8.1 Confidence in standards of care from opticians and other healthcare professionals

All respondents were asked to state how confident they were of receiving a high standard of care from various healthcare professions, including opticians. The majority of respondents were confident that they would receive a high standard of care from various healthcare professions, with pharmacists at 91%, opticians at 89%, dentists at 85% and GPs at 84%.

In contrast to the previous year, the results are broadly similar to those collected in 2015, with a small decrease in the total level of confidence in opticians from 92% in 2015 to 89% in 2016 (-3%).⁵

Figure 20 – How confident or otherwise are you of receiving a high standard of care from each of the following healthcare professionals?

Base: All respondents 2016 (3,252) / 2015 (2,250)



Subgroup analysis

Confidence in receiving a high standard of care from opticians was not uniform across all subgroups. Those who had visited an optician within the last two years were more likely to be confident (95%) compared to those who had not (75%), as were those who were aware of the GOC (96%) compared to those who were not (75%).

In terms of demographic differences, a larger proportion of those of White ethnicity and those aged over 55 said they were confident (90% and 95 respectively) compared to those of other ethnicity and those aged 16 to 34 (81% and 85%).

Those who viewed opticians as a healthcare service were more likely to be confident of receiving a high standard of care (96%) compared to those who viewed opticians as a retailer (75%). Those who indicated that they would go to an optician if they woke up with an eye problem were also more likely to be confident (95%).

⁵ This change could be accounted for by a change in methodology

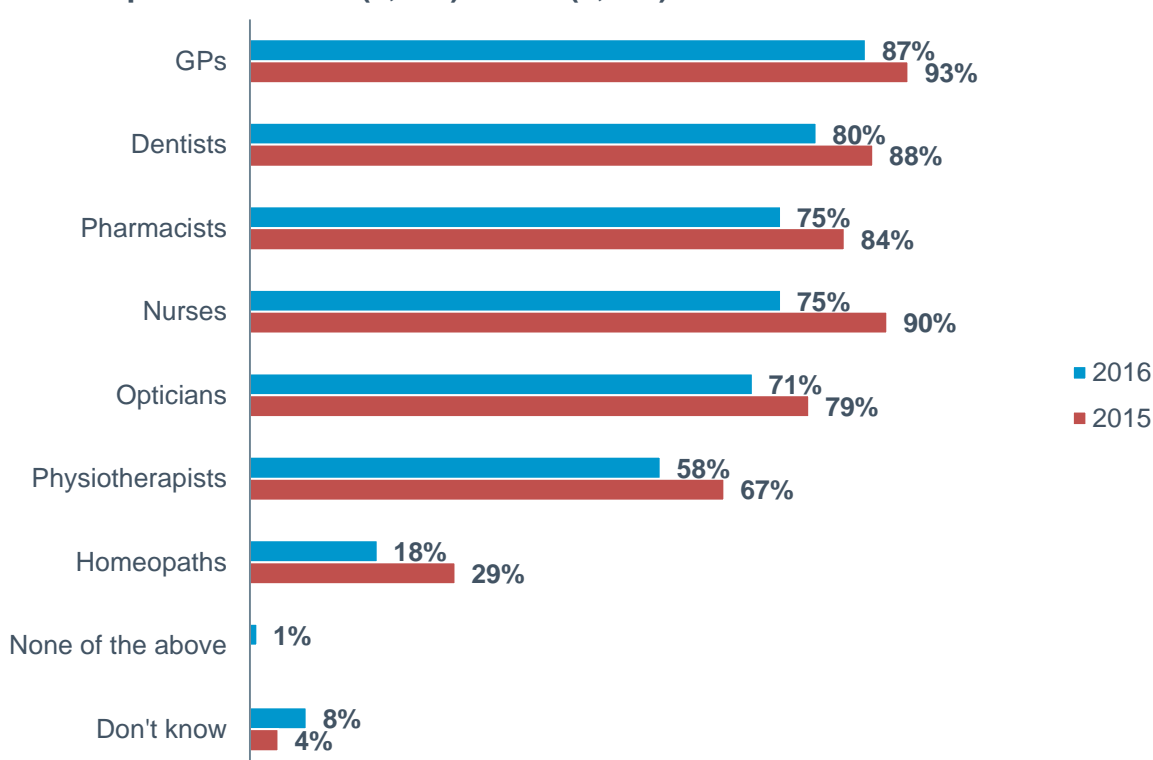
8.2 Awareness of regulation

Just over seven in ten (71%) respondents indicated that they thought opticians are regulated. This is a smaller proportion than those who believe GPs, dentists, pharmacists and nurses to be regulated.

This year’s results show a small decrease in the proportion of respondents who believed opticians to be regulated from 79% in 2015 to 71% in 2016. However, decreases can be seen for all healthcare professions, most notably nurses (a decrease of 15%).⁶

Figure 21 – Which, if any, of the following healthcare professions do you think are regulated?

Base: All respondents 2016 (3,252) / 2015 (2,250)



Subgroup analysis

Subgroups more likely to be **aware that opticians were regulated** (71% overall) included those who:

- Were patients (75%) compared to non-patients (60%)
- Were female (75%) compared to male respondents (67%)
- From Scotland (80%), compared to respondents from Wales (76%), England and Northern Ireland (both at 68%)
- Were of White ethnicity (72%) compared to those of another ethnicity (52%)
- Were aware of the GOC (87%) compared to those who were not (69%)
- Viewed opticians as a healthcare service (75%) compared to those who viewed opticians as a retailer (58%)

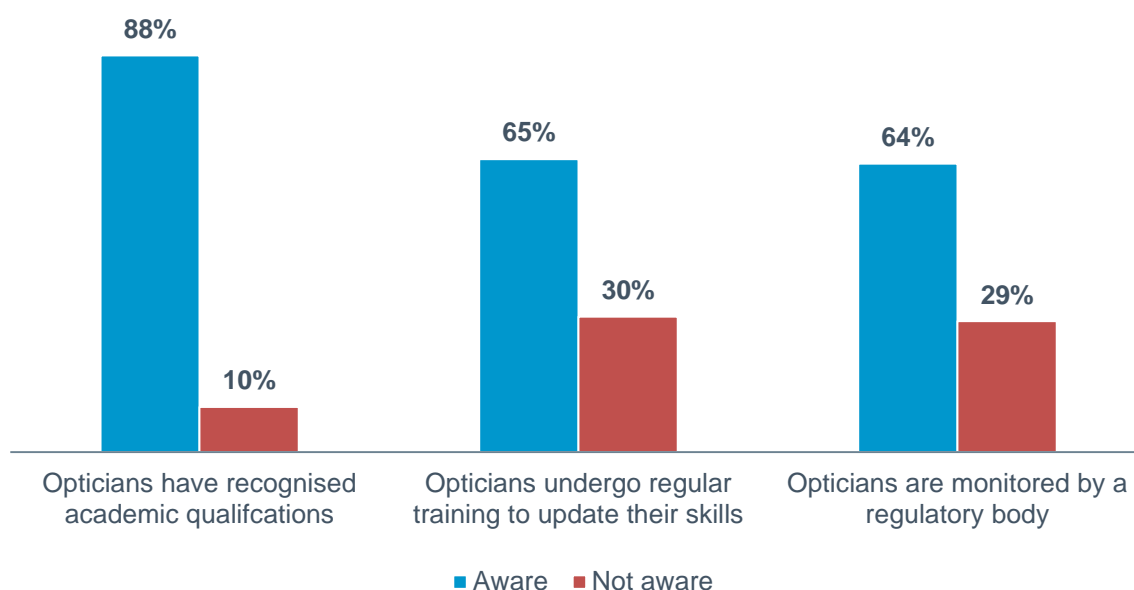
⁶ This change could be accounted for by a change in methodology

8.3 Awareness of qualifications, training and a regulatory body

Almost nine in ten (88%) respondents said that they were aware that opticians have recognised academic qualifications, and almost two thirds said that they were aware that opticians undergo regular training to update their skills (65%) and are monitored by a regulatory body (64%).

Figure 22 – How aware are you that opticians have recognised academic qualifications, undergo regular training to update their skills, and are monitored by a regulatory body?

Base: All respondents (3,252)



Focus group and in depth interview feedback

High standards of care expected when visiting an optician

Almost all participants said that they were confident that they would receive a high standard of care when they visited an optician, reflecting the results seen in the survey. When asked to explain why they felt this way, the majority of participants explained that they had some awareness that opticians were required to be “well-educated” to degree level and sufficiently trained to practise. A number of participants highlighted that they had seen training and qualification certificates on the wall of their opticians which served to reinforce this awareness.

I’m quite confident because I know they’ve had to do a degree to be able to be an optician. (Participant from Leeds)

They display their qualifications very proudly on the wall. (Participant from Craigavon)

Two contrasting reasons for expecting high standards of care when visiting an optician were suggested. Those who visited smaller independent opticians said that they expected high standards due to an established existing relationship with their optician, meaning that they knew exactly what to expect during their visit as they typically saw the same person where a level of trust had developed between them. These participants questioned whether they would receive the same standard of care when visiting a chain optician, but at the same time were aware that this perception was probably unfounded.

It's a small optician and I know them well, so I feel there's a real genuine care from them and that I'm well looked after. (Participant from Lisburn)

For some reason I'm a bit more sceptical of the big chains and wonder whether the people who work there are as qualified. They probably are. (Participant from Cardiff)

Conversely, those who visited larger chain opticians said that they expected high standards of care due to the fact that their optician was a 'known brand' that they could trust. These participants explained that, because of the size of the optician, they perceived that all their staff would be very well managed, qualified, trained and regulated with set internal standards, and questioned whether they would receive the same high standards of care if they visited a smaller independent optician.

Sometimes you think that big chains are big for a reason. They're competent and you know you're going to get a good standard. With an independent you might not be as sure. (Participant from Leeds)

Assumed rather than actual awareness of standards and regulation

Only a small number of participants said that opticians work to set standards and are monitored by an independent regulatory body without being prompted. Participants tended to focus on education, qualifications and training. The majority of participants only discussed professional standards and regulation when prompted, suggesting low levels of awareness. However, participants explained that they strongly assumed that there were standards of practice in place for opticians, as they thought there were for all medical professions, and that there must be an organisation in place to regulate opticians.

There has to be standards of some kind, or I'd like to think there are. (Participant from Leeds)

I imagine there's a regulatory body of some kind, the same with any healthcare professionals. (Participant from Maidstone)

Potential benefits of increased awareness of the standards

During discussions, all participants were informed that the GOC sets standards of practice for its registrants and a new version of these standards came into effect in April 2016 (Standards of Practice for Optometrists and Dispensing Opticians and Standards for Optical Students).

Overall, participants felt that there were potential benefits to knowing that there were set standards of practice for opticians. It was felt that awareness may lead to improved levels of trust between opticians and patients, as patients would know what they should expect from their visit and opticians would be aware of this. It was also suggested that increased awareness of what to expect would highlight to patients when they were not receiving high standards of care, and that they would know that they had grounds to make a complaint.

It would help increase trust and increase relationships. (Participant from London)

It would make people know that, if they were having a poor experience, that isn't normal. (Participant from Maidstone)

It was also suggested that awareness of the standards may make the process of visiting an optician feel more like using a healthcare service in a clinical setting rather than visiting a retailer or shop. It was felt that this may lead more people to visit their optician first if they had a problem with their eyes rather than going to their doctor.

It would make it feel less like a shopping experience and a bit more medical, which would be a good thing. (Participant from Leeds)

It might make people go there first rather than to their GP if they had a problem. (Participant from Thirsk)

High-level awareness of the GOC's standards

Whilst the majority of participants thought that the general public should be aware of the standards that opticians work to, as there were various perceived benefits to this, it was generally agreed that simply knowing that the standards exist was sufficient to knowing the detail of them and their implications. It was felt that a high level of awareness would be of enough benefit, and that knowing the finer detail would only be necessary if a patient had a particular issue or needed to make a complaint of some kind.

It needs to be there if you want to look for it. There can be too much information out there sometimes. (Participant from Craigavon)

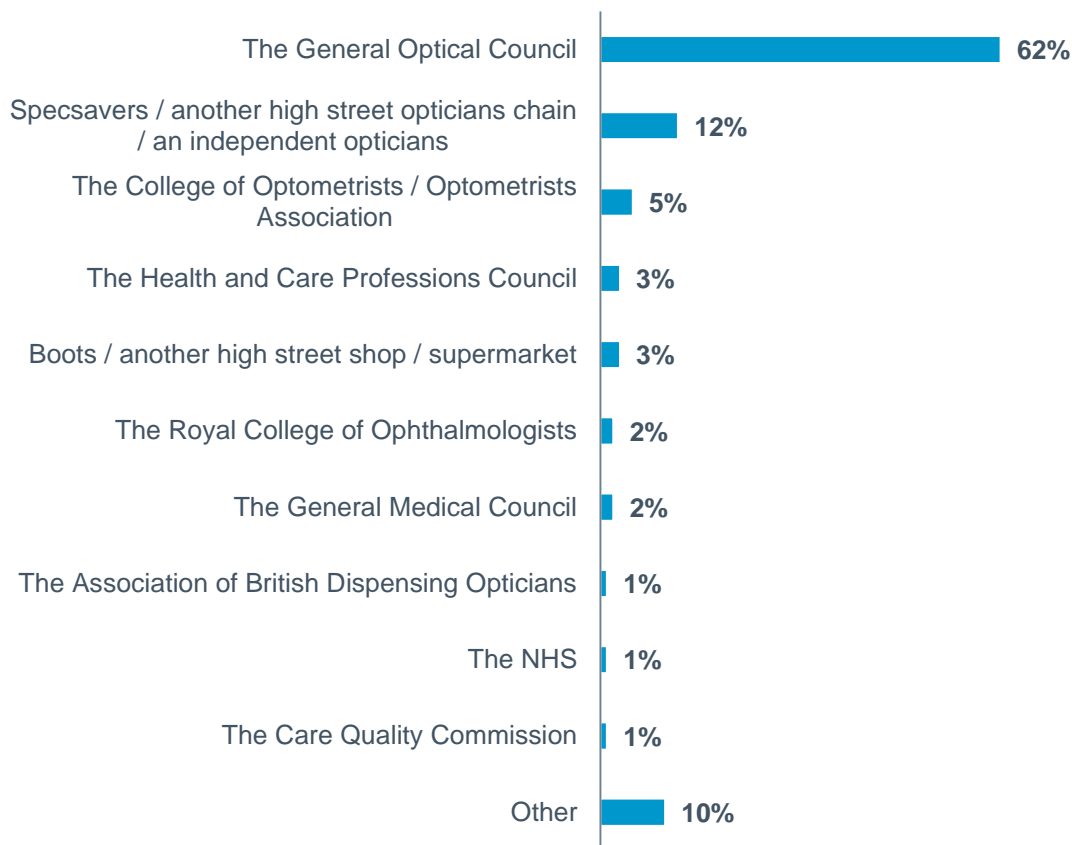
It would only need to be a high level understanding. Like who regulates and who to contact if you have a problem. (Participant from Leeds)

8.4 Awareness of the General Optical Council

Only 4% could correctly name the GOC when asked to name the organisation that regulates the optical profession without being prompted. Other suggestions included specific chains (such as Specsavers) and independent opticians (12%) and the College of Optometrists (5%).

In relation to the previous year’s results, in 2015 a larger proportion of respondents (12%) were able to correctly name the GOC without being prompted. However, in the 2015 survey the questions were ordered differently and the GOC was mentioned in an earlier question which may have contributed to the higher percentage result.

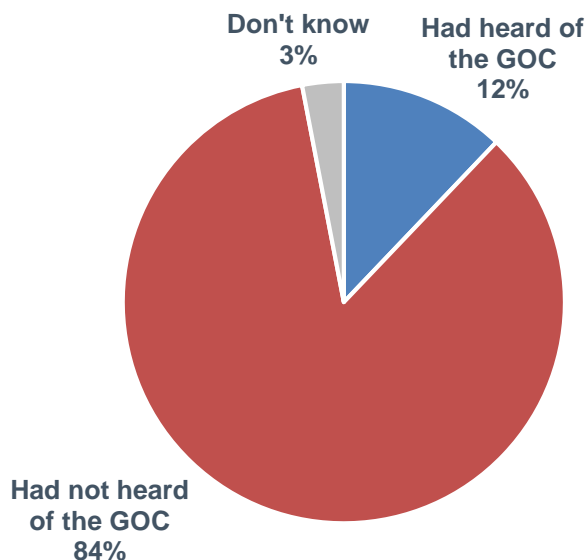
Figure 23 – Names suggested for organisation which regulates the optical profession
Base: Those who thought they could name the organisation (192)



All respondents were informed that the GOC was responsible for regulation of the optical profession in the UK and then asked whether they were aware of the GOC before taking part in the survey. One in eight (12%) said that they had heard of the GOC before, but the majority (84%) had not. This is the same result as seen in 2015 (12%).

Figure 24 – Had you heard of the GOC before taking part in this survey?

Base: All respondents (3,252)



Subgroups more likely to claim to be **aware of the GOC** before taking part in the survey (12% overall) included those who:

- Lived in Northern Ireland (16%) compared to respondents from Scotland (13%), Wales (13%) and England (11%)
- Were aged 55 to 74 (17%) compared to other age groups
- Were patients (15%) compared to non-patients (6%)
- Had last visited an independent optician (18%) compared to those who had visited a chain (14%)
- Were confident they would receive high standards from opticians (13%) compared to those who were not (7%)
- Viewed opticians as a healthcare service (17%) compared to those who viewed opticians as a retailer (5%)
- Viewed themselves as a patient when they visited an optician (19%) compared to those who viewed themselves as a customer (7%)
- Would visit an optician first if they woke up tomorrow with an eye problem (21%)

Focus group and in depth interview feedback

Assumption that a regulatory body must exist

Only a few participants said that they had heard of the GOC before taking part in the research, in line with the survey findings. As seen when discussing the standards, the majority of participants appeared to strongly assume that some form of regulatory body that monitored the optical profession would exist, but did not know any specific details about the organisation. Some were not sure, but explained that they hoped there would be some kind of regulation via an independent body.

I just had an idea that there should be some kind of body. That's all I knew, I didn't know the specific name, or what they did. (Participant from London)

I don't know if there is one but I hope there is for something as important as eyesight. (Participant from Belfast)

Awareness of the GOC was in stark contrast to the General Medical Council (GMC), of which most participants appeared to be aware of and discussed when trying to understand the role of the GOC. Furthermore, a small number of participants had assumed that the GMC was responsible for the regulation of opticians. It was widely agreed that awareness of the GMC was due to repeated press coverage of cases where doctors had done something wrong, something they felt would be unlikely for opticians.

You're aware that there's a body that investigates doctors, but it's not as obvious with opticians. (Participant from Leeds)

Assumptions were also made by the majority of participants about what the role of the GOC was. Most correctly identified that the GOC was responsible for the regulation of opticians and ensuring they were registered and worked to certain standards. Some also believed that the GOC would be responsible for facilitating serious complaints about opticians and the regulation of training and education of opticians.

I assume they set the standards and make sure everyone has access to opticians. (Participant from Maidstone)

I've not heard of them, but they are probably there to put laws in place or to implement laws or help protect the public in terms of being given a quality standard of care...to provide rules for opticians to follow. (Participant from Gravesend)

Little understanding of the different roles within an optician

It was apparent throughout discussions that understanding of the different roles regulated by the GOC was low. All participants spoke of their 'optician' when referring to both the place/building and the professional administering the eye examination (their optometrist). When referring to the person who then helped them choose frames or contact lenses and who dealt with their payment, the title 'sales staff' was generally used. No participants were

aware of the title ‘dispensing optician’ or were aware of what training they received or qualifications they required.

*You can sort of point and tell who’s the optician and who’s the sales staff on the till.
(Participant from Belfast)*

Increased awareness of the GOC would be of benefit to the public

As also seen in response to the standards, participants felt that there were potential benefits to the general public being aware of the GOC and its role. The benefit of increased confidence in opticians was suggested as they would become aware of regulation and the requirements that opticians had to meet in order to practice, and also increased confidence in the patient to question the level of service they receive. It was also highlighted that it would increase awareness of the accountability of opticians, which would also help to strengthen confidence in the profession, and that awareness of regulation could make the experience of visiting an optician feel less like a retail experience. Again, it was also felt that only a basic awareness of the GOC was sufficient for the general public, and that the finer details of the organisation and its role were only needed if someone wished to make a complaint.

Not just confidence, but improvements in services as well, because if more people knew about who was governing and how they were being governed, we would be more willing to say ‘who are you and what are you doing?’ (Participant from London)

If people are aware that opticians are regulated they would be more confident when they visit. (Participant from Warrington)

It was also explained that increased awareness of the GOC amongst the general public would make it clearer who patients could go to if they had a poor experience with an optician and wanted to raise a complaint, but did not wish to do so at their opticians.

Until I filled out the questionnaire for this research I had no idea, but now that I do, if I had a bad experience that’s who I would go to. (Participant from London)

How the GOC could raise awareness

The majority of participants said that they would expect to see information about the GOC at their opticians in the form of posters and leaflets. However, no participants could recall ever seeing anything like this in their previous visits. It was agreed that displaying information about the GOC in opticians should be a requirement, as it would increase awareness of regulation and increase the legitimacy of the opticians itself, as visitors would be able to confirm that those working there were registered. Some likened displaying information about the GOC in opticians to the food hygiene rating displayed in the windows of places that prepare and sell food, stating that the scores provided instilled them with confidence when visiting restaurants or cafes, and that seeing the GOC’s logo as they enter an optician could do the same thing. Other suggestions for displaying the GOC’s logo included optician websites and on all stationery, such as reminders for appointments.

In the window, on the website, on their information and leaflets. (Participant from Leeds)

Like the food hygiene rating. They should have something similar to show that they are registered. (Participant from Cardiff)

When asked how they would find out information about the GOC, by far the most popular response was to look online, typically via a Google search.

I would use Google to see information about the GOC and the standards. (Participant from Belfast)

9. Key findings

Perceptions of opticians

Overall, there is still a limited understanding of the role of opticians beyond testing sight. This is highlighted by the finding that most people would still go to a GP first if they woke up with an eye problem, rather than an optician.

This may be due in part to how opticians are perceived by the public, as the majority of people view opticians as both a healthcare provider and a retailer. When probed further, participants in the focus groups and in depth interviews made a clear distinction between the eye examination carried out in a clinical environment by a trained healthcare professional and the process of purchasing glasses or contact lenses carried out on the shop floor in a retail environment by sales staff.

Interestingly, the survey found that only around one in five classified themselves solely as a 'patient' and only around a third viewed opticians primarily as a healthcare provider. These findings were confirmed by the focus groups and in depth interviews. However, this group was more likely to visit an optician more frequently and view opticians as the first port of call for eye health problems.

Raising awareness of the broader role of opticians in treating eye health problems, prescribing medication and making referrals was seen as a key driver by focus group participants in changing public perceptions and behaviour.

How often people visit an optician

The proportion of people reporting that they visited an optician in the last two years has remained about the same when compared to the results of the 2015 survey. The majority of people said their last visit to an optician was to a chain rather than an independent optician.

Confidence levels and satisfaction

Overall confidence and satisfaction levels with opticians remains high. When looking at the patient experience, those who had visited an optician in the last two years, reported high satisfaction levels both in relation to the optician who conducted the sight test and with the overall experience of visiting an opticians.

When this issue was explored further in the focus groups and in depth interviews, there was a general sense that there must be a set of professional standards that must be adhered to with oversight from a regulatory body. The participants felt that there could be benefits in increasing awareness of these standards as it would help increase trust and highlight cases of poor care. There was general agreement that a high level of awareness would be sufficient for the public rather than knowing the finer details.

Costs and pressure to buy

Satisfaction levels were explored further in this year's survey and additional questions were asked about how clear costs are and whether people felt under pressure to buy products they might not want or need when visiting an optician.

The survey results were generally positive, with the majority of people saying that they were clear about the costs both for the eye or contact lens examination and when purchasing glasses or contact lenses. Likewise, most respondents said that they did not feel under any pressure to buy a product or service that they did not want or need, however, around one in six did say that they had felt some pressure.

These findings were generally reflected in the focus groups and in depth interviews. However, when explored further participants reported that they did feel some confusion in relation to costs, for example, calculating the overall cost was sometimes tricky due to a multitude of offers, vouchers and upgrades available.

Overall, participants said that there was an expectation that, when visiting an optician, they might have to spend money as opticians are businesses trying to make a profit. There was a recognition that there was inevitably some pressure to spend money, however, most people felt confident in being able to deal with a 'sales pitch' and deciding whether or not to spend money on, for example, more expensive frames, additional products or add-ons.

Dissatisfaction and complaints

There continues to be low levels of dissatisfaction and complaints about opticians. Any complaints made were usually reported at the opticians where the treatment was carried out.

A new question was asked in this year's survey about whether people perceived that they would receive an apology from an optician when something went wrong. The majority thought that they would, however a significant minority thought they would not or they did not know if they would.

When this issue was explored further in the focus groups and in depth interviews, complaints were largely in relation to purchasing or receiving incorrect or faulty products rather than the sight test itself. Again these issues were largely resolved at a local level to the satisfaction of the participant. There was some sense that the complaints process should be made clearer for patients to help them understand who and where to go if they want to complain.

Regulation and awareness of the GOC

The survey, focus groups and in depth interviews found that the majority of people were confident that opticians have recognised qualifications, although smaller proportions thought they underwent regular training to update their skills.

Overall, a smaller proportion of respondents thought that opticians were regulated compared to GPs, nurses, dentists and pharmacists. Overall awareness of the GOC remains low, however there was a strong assumption that a regulatory body exists. When this issue was

explored further in the focus groups and in depth interviews, the majority of participants indicated that they would expect to see information such as posters or leaflets about the GOC at their opticians.

10. Respondent and Participant Profile

The table below presents the weighted survey respondent profile.

Demographic	Count	Percentage
Gender		
Male	1625	50%
Female	1626	50%
Prefer not to say	1	0%
Age		
16 - 24	519	16%
25 - 34	515	16%
35 - 44	541	17%
45 - 54	551	17%
55 - 64	470	14%
65 - 74	350	11%
75 +	305	9%
Prefer not to say	1	0%
UK Nation		
England	1966	60%
Wales	412	13%
Scotland	450	14%
Northern Ireland	420	13%
English region		
North East	143	7%
North West	334	17%
Yorkshire and Humber	282	14%
East Midlands	135	7%
West Midlands	172	9%
East of England	115	6%
London	195	10%
South East	393	20%
South West	198	10%
Ethnicity		
White	2997	92%
Other ethnic group	208	6%

The tables below present the stratification of focus groups and in depth interviews.

Group	Location	Stratification
1	England (Leeds)	Must have visited an optician in the last five years Equal split of gender Mix of age groups and ethnicity
2	England (London)	
3	Northern Ireland (Belfast)	
4	Wales (Cardiff)	
5	Scotland (Glasgow)	

Interview	Location	Stratification
1	England (Thirsk)	Focus on more rural areas, avoiding cities where focus groups took place
2	England (Maidstone)	
3	England (Warrington)	
4	England (Norwich)	
5	England (Camberley)	
6	England (Gravesend)	
7	Northern Ireland (Craigavon)	Must have visited an optician in the last five years
8	Northern Ireland (Lisburn)	
9	Northern Ireland (Belfast)*	Equal split of gender
10	Northern Ireland (Belfast)*	
11	Wales (Swansea)	Mix of age groups and ethnicity
12	Wales (Port Talbot)	
13	Scotland (Dundee)	
14	Scotland (Elgin)	

*Two additional interviews were conducted with participants from Northern Ireland due to being unable to attend the Belfast focus group