General Optical Council

Equality, Diversity and Inclusion Annual Report

For the year ended 31 March 2023

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Introduction

The General Optical Council (the GOC) is the regulator for the optical professions in the UK. Our charitable purpose and statutory role is to protect and promote the health and safety of members of the public by promoting high standards of professional education, conduct and performance among optometrists and dispensing opticians, optical businesses and those training to be optometrists and dispensing opticians. As of 31 March 2023, there were 33,646 optometrists, dispensing opticians, student opticians and optical businesses on our register, who are known as our registrants.

Our Equality, Diversity, and Inclusion (EDI) annual report sets out our key achievements, and describes our EDI data and the progress we are making in relation to implementing our 2020-24 EDI action plan. It outlines our approach to EDI, including activities we have undertaken during the reporting year to 31 March 2023 to fulfil our commitments under the Equality Act 2010. Our EDI data includes information and analysis about our registrants, registrants going through fitness to practise proceedings, our staff, members and workers, and students registered with us. The information in this section of the report is based on our in-house datasets on 31 March 2023. (The exception to this is student data, which is based on the academic year 2021-2022, and provided to us by providers of GOC approved qualifications.)

This year, for the first time in just under a decade, the GOC met all 18 of the Professional Standard Authority's (PSA) Standards of Good Regulation. The PSA published a review of the GOC's performance in 2023, which highlighted several areas of work where the GOC has performed well, including in EDI. The PSA said: "*the GOC continues to implement its EDI Action Plan 2020-24, which contains 27 actions under six themes: data; people development and education; recruitment; values setting; community and support; and leadership and accountability. The GOC has reported progress against these actions in its EDI Annual Report for 2021-22 – the first report in this format which provides welcome transparency around the GOC's activities in this area. This report also sets out the GOC's plans for work in 2022-23.*"

This report intends to build on that commitment to transparency and accountability.

Our commitment to advancing equality and fostering inclusion

Advancing equality, promoting diversity and fostering inclusion is central to everything we do, both as a regulator and as an employer. It is an important part of our strategic plan, which sets out our roadmap to March 2025 and underpins our regulatory activities, organised around three strategic objectives:

- World-class regulatory practice
- Transforming customer service
- Continuous improvement

Our commitment to achieving equality and improving diversity is embedded into our values, underpinning the way we work with each other, the public and our stakeholders. Working in this way secures the benefits of the breadth of expertise, insight, and knowledge that our members, staff, stakeholders, registrants, and the public have to offer in shaping our regulatory activities and maintaining public confidence in the professions we regulate. Our values are:

- We act with integrity
- We pursue excellence
- We respect other people and ideas
- We show empathy
- We behave fairly
- We are agile and responsive to change

Treating everyone fairly is obviously the right thing to do, as a responsible employer committed to achieving equality and fostering inclusion, and as an inclusive healthcare regulator. We invest in EDI because we value the benefits it brings to us as an organisation. A diverse workforce with a diversity of members on our Council and committees ensures greater creativity, stronger governance and accountability, and better decision-making. Those we regulate (optometrists, dispensing opticians, and students) are also from diverse backgrounds with diverse needs, and we have a duty to act in the best interests of all patients and service users. It is therefore essential that we as an organisation have the right insight and ability to support diversity amongst all our people and understand the impact of our regulatory activities upon the public and patients we seek to protect.

Our legal and regulatory obligations

The Equality Act 2010 (the 'Act') specifies nine protected characteristics, namely:

- age
- disability
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race
- religion or belief (including no religion)
- sex
- sexual orientation.

Section 149 of the Act sets out what is known as the Public Sector Equality Duty (PSED). Under the Act, we are treated as a public authority and we are bound by the PSED. This means, when we carry out our public functions, we must have 'due regard' to the need to:

- eliminate unlawful discrimination, harassment and victimisation
- advance equality of opportunity between people from different groups
- foster good relations between people from different groups.

To have 'due regard' means that in making decisions and carrying out our functions and day-to-day activities, we must consciously consider all three of the duties above.

How much regard is 'due' under a particular duty will depend on the circumstances. It will depend on how relevant a duty is to the decision or function in question, as it applies to any particular group or groups. The greater the relevance and potential impact for any group, the greater the 'regard' we must have under the duty. Whenever possible, our approach to demonstrating 'due regard' includes considering 'intersectionality' between the protected characteristics.

The GOC carries a duty under the PSED to implement the Act. Specifically, to publish information to demonstrate GOC compliance with the Equality Duty, at least annually, and set equality objectives, at least every four years, which we set out in the form of our EDI action plan. However, our commitment is to do more than just comply with the Act, it is also to go above and beyond, to follow best practice in all our EDI work and provide thought leadership in this area. However, we must also demonstrate how we meet our legal obligations in this context, and we report publicly on how we comply with our legal duties and ethical responsibilities, including (but not limited to) PSED, the PSA Standards for Good Regulation, the Act, and the Human Rights Act 1998, as follows:

- written updates in the Chief Executive and Registrar's quarterly report to Council, published in the 'governance' section of our website;
- our gender-pay gap report, which is published annually; and
- this EDI annual report, which showcases

our key achievements in our EDI work, and describes our EDI data, which we collect and publish annually.

PSA Standard Three

In May 2023 the PSA updated its expectations for regulators it oversees in relation to equality, diversity and inclusion. Standard three of the PSA's Standards for Good Regulation requires the following: "*The regulator understands the diversity of its registrants and their patients and service users and of others who interact with the regulator and ensures that its processes do not impose inappropriate barriers or otherwise disadvantage people with protected characteristics*."

The PSA's new evidence framework and accompanying guidance for regulators sets out its intended approach to assessing the performance of regulators against Standard 3. The evidence framework sets out four outcomes all regulators are expected to evidence through a series of indicators of good performance. In its guidance the PSA states '*in practice, there is little in the matrix that most regulators are not already doing (or planning to do), or that we are not already considering in our assessments*.' The PSA intend to assess performance against this Standard on an annual basis, at the end of each performance review period, from March 2024 onwards. We have undertaken an initial mapping of our EDI activity against the draft evidence framework and will continue to keep this work under review to ensure we can demonstrate compliance at the conclusion of our 2023/24 performance review.

Responsibility for embedding EDI in our work

Our Council

Our Council is our governing body. It is responsible for the overall control of our organisation, including approval of our strategy, annual business plans and budget. It is responsible for holding the executive to account for their delivery in alignment with our values and EDI commitments.

Senior Management Team

The Chief Executive and Registrar and directors form the GOC's Senior Management Team (SMT). Directors have the authority to set the EDI priorities in their business areas. They are also accountable to the Chief Executive and Registrar for leading their teams with the support and understanding they need to deliver EDI through their work, and making sure resources are in place to deliver the EDI strategy.

Leadership team and line managers

Our leadership team is comprised of our heads of departments. Leadership team works with line managers to ensure the operational delivery of the EDI action plan. All heads of departments are responsible for EDI in their business areas. They must make sure that staff are engaged with these priorities, and that they understand how EDI underpins the work they do to meet the GOC vision and strategic plan.

Our staff, members and workers

Staff, members and workers are all central to the delivery of our mission, vision and strategic objectives. Everyone within the GOC is responsible for making sure they:

- act in accordance with equalities and human rights legislation;
- keep their training in and understanding of EDI up to date (this includes taking part in training sessions); and
- contribute to an inclusive working culture that celebrates the diversity of their colleagues and the people using our services.

Everyone has a responsibility to 'live' our values and to bring these to life through their work and interactions with other people both inside and outside the organisation.

Governance

Our EDI governance structure reflects our approach to making sure there is a clear leadership commitment to support the delivery of our EDI strategy. It reflects the important relationships and collaboration between key stakeholder groups, whose common purpose it is to make sure that EDI is considered in all our work. In 2022-23 our EDI manager was part of our People and Culture Team, reporting to our Head of People and Culture, with a 'dotted line' of responsibility into our Governance Team. In September 2023 our EDI manager moved into the Governance Team, to support an increased, outward-facing commitment to our members and registrants in progressing our EDI action plan and activities.

Our EDI Projects

Alongside our continued delivery of our operational functions and business-as-usual activity, in the reporting period to 31 March 2023 we undertook a series of EDI projects to help us better fulfil our statutory objectives and in doing so, protect the public. These projects are described below, organised under three broad themes, which connect and support achievement of our overarching EDI plan. These themes are:

- Our registrants, the public and other external stakeholders;
- Our members, employees and workers; and
- Raising awareness through communication, events and training.

Theme 1: Our registrants, the public and external stakeholders

Updating information about a registrant's gender on the public register

As part of our statutory duty to maintain and publish a register of all those who are fit to practise, we publish certain information about our registrants, which currently includes their gender. Section 11(2) of the Opticians Act 1989 and rule 21 of the Registration Rules 2005 set out the information that we must publish on our register.

These do not include a specific requirement to publish a registrant's sex or gender.

Between December 2022 and March 2023, we ran a public consultation on a draft policy and impact assessment to support registrants who wish to update information about their gender on our register and ensure compliance with the Gender Recognition Act 2004 (GRA) and the Equality Act 2010. Our response to our consultation is published on our website. Whilst, overall, there was some support for the policy from our stakeholders, it was not overwhelming and some stakeholders responding to the consultation questioned why we provide information on gender on the register at all. As a result of feedback received, we intend to make our process for updating information we hold about registrant's gender clear and easy to apply. In addition, Council will consider at its meeting in September 2023, whether we should consult on continuing to publish information regarding a registrant's gender on the register.

Welsh language scheme compliance reporting

In July 2022 Senedd Cymru approved a new set of Welsh Language Standards regulations that will apply to healthcare regulators, including the GOC, and the PSA. Compliance notices were issued June 2023. The majority of the new standards will need to be implemented by 6 December 2023.

Throughout 2022-23, we engaged with the Welsh Language Commissioner and other healthcare regulators to provide feedback on how we intend to implement the new Welsh Language Standards. We also added questions about Welsh language in our impact assessment

screening tool to ensure staff assessing impact remain conscious of the need to consider the policy and process changes in the context of the requirements of the Welsh language scheme requirements. Following publication of the compliance notice, we will work toward meeting the requirements in full by 6 December 2023 while securing best value for the public and registrants.

Annual monitoring of providers of GOC approved qualifications

Our annual monitoring of providers of GOC approved qualifications (AMR) is one of our key education quality assurance activities, providing an annual snapshot of providers of GOC approved qualifications' data, risk management and compliance arrangements; a window on the next generation of optical professionals. We require all providers to submit EDI data, which forms part of our analysis in this report and in our AMR report which is published separately on our website. This year, providers were additionally asked to submit widening participation (WP) information, including a narrative explanation as to how providers use WP information and data to inform the development and implementation of access and participation plans and initiatives at institutional and qualification level, and their impact on WP.

Registrant survey

Each year we commission a registrant survey to help us better understand registrant experiences of working in clinical practice and their views and perceptions of the GOC. This year we included new questions on the Continuing Professional Development (CPD) scheme, questions on EDI, questions on bullying, harassment and discrimination at work. The survey is an online survey of all our individual registrants, including optical students, sent out at the end of our EDI reporting year, between 21 March and 25 April 2023. We received 3,932 responses, representing a 13% response rate. While responses are slightly down on last year, the research is still highly robust with a 90% confidence interval at +/- 1.5%.

We found that while our public perceptions survey shows high levels of patient satisfaction and confidence in the professions, the experiences of registrants paint a different picture as many continue to struggle with heavy workloads and providing patients with a sufficient standard of care. In addition, new data this year reveals that many GOC registrants are subject to bullying, abuse, harassment, and discrimination at work, with the highest levels coming from patients / service users but also to a significant from extent managers and colleagues. Much of this behaviour goes unreported and therefore unresolved.

Some of the groups that experienced higher levels of bullying, abuse, and harassment at work were younger respondents, women, those with a disability, members of the LGBTQ+ community and those from an ethnic minority background. Of those that had experienced these types of behaviours, only 26% said they had reported it.

In relation to discrimination at work over the last 12 months, 24% of respondents reported that they had some experience of discrimination from patients/service users, their relatives or other members of the public; 11% had experienced this from managers and 8% experienced this from other colleagues.

While we know that these issues are not unique to the optical sector, with many healthcare workers reporting similar experiences, we think it is important for us and wider sector to reflect and think about what actions we can take to foster a more positive working environment. A workforce that experiences negative working conditions, such as bullying, harassment, abuse and discrimination, is not one that is in an

optimum place to deliver high quality patient care.

As a regulator focussed on public protection, it is important we take the lead in addressing these issues, so we are convening a meeting of senior stakeholders, including representatives of large employers, professional and representative bodies from across the optical sector in October 2023 to agree sector-wide commitments to address these issues. We have also invited student representation as we think it's important to consider the experiences of optical students on their journey to qualification and any negative behaviours that they face.

As in previous waves of the survey, the research report segments findings across the protected characteristics identifying statistically significant differences, and the data tables are published on our website, alongside the report, to allow anyone to interrogate the findings in more detail.

Public perceptions survey

We carried out our annual public perceptions survey between 27 January until 13 February 2023. Previous annual public perceptions surveys are available on the policy and research pages of our website. The 2023 survey is based on a UK representative sample of 2,020 interviews which were completed online. The aim of the survey is to track patient and public views, perceptions and experiences of optical care. This year we asked a series of new questions on shopping around for optical services.

This year's public perceptions survey showed that public confidence and satisfaction levels in optical services remain high, with 94% of respondents reporting that they were satisfied with the optometrist who carried out their sight test / eye examination (94% in 2022). However, whilst overall results are positive, breaking down the data further reveals stark differences between the experiences of those from, for example, an ethnic minority background and those with a disability.

Ethnic minority respondents were more likely than white respondents to feel uncomfortable about visiting an opticians / optometrist practice, citing the cost of the sight test / eye examination as one factor. They were less likely to get their sight tested in a high street opticians / optometrist practice, and more likely to get their sight tested in a hospital, and less likely to go to an opticians / optometrist practice in the event of an urgent eye problem. They were less likely to be satisfied with the experience of buying glasses. They were more likely to have considered complaining about an experience at an opticians / optometrist practice. These findings could indicate that some people from an ethnic minority background have different perceptions and experiences of visiting an opticians / optometrist practices compared to white people.

Respondents with a disability were less likely to say that they were satisfied with the optometrist who carried out their sight test and with the overall experience of visiting an opticians / optometrist practice than those without a disability. They were also more likely to say that something went wrong with the care / service they received and more likely to have complained than those without a disability. These findings could indicate that patients with a disability are struggling to receive the same standards of care as those without a disability. New questions this year on shopping around and price transparency, shows that 21% shopped around when looking for an opticians / optometrist practice and 28% did not know the price of their sight test / eye examination before their appointment.

We think that the findings show concerning differences between the experiences of different patient / public groups, and the data

suggests that there is scope to improve the quality of service offered to, for example, those with a disability and those from an ethnic minority background. Inclusion is often used to mean the practice or policy of providing equal access to opportunities and resources for people who might otherwise be excluded or marginalised. People belonging to excluded or marginalised groups tend to have very poor health outcomes, often much worse than the general population, and a lower average age of death.

We think it is important that we continue to track the data and will consider how we can use future surveys or other research to explore these differences. In order to understand these findings better, we are also exploring whether the next surveys could include multivariate analysis to help determine the most important factors that might shape a poor experience.

We are also using this data to inform our review of our professional standards to help us understand if we need to strengthen or set more detailed requirements. We already set standards for registrants to ensure they are respectful, fair and do not discriminate. They must also consider the needs of disabled patients and make responsible adjustments. We have commissioned further patient and public research as part of the Standards Review, which includes interviews with some vulnerable patients so that we can reflect their views and ensure the standards we set fully promote and embed the principles of quality, diversity and inclusion.

In terms of the wider optical sector, while the reasons for these differences between different groups may reflect many different factors, there may be more that the sector can do to reduce barriers to access, for example, for vulnerable patients. Greater transparency on the cost of the eye test, or improved information about the eye test online, might also help to reduce barriers to access.

Standards Review

This year we began a review of our standards of practice for optometrists and dispensing opticians and standards for optical students, ahead of a public consultation on proposed revisions planned in early 2024. Our engagement approach involves a series of 'conversations' with stakeholders between May and July 2023. The conversations cover areas where we have identified a possible need to strengthen our standards. EDI considerations impact on all the standards but one of the conversations topics - on maintaining professional boundaries - will consider EDI issues explicitly, particularly the issues described above raised in the registrant and public perceptions surveys.

Theme 2: Our members, employees and workers

Council Associate scheme

We are now in the second year of our Council Associate scheme. We have four registrant Council Associates, who actively participate in our Council and committee meetings, as well as other associated activities. The scheme aims to increase the diversity of experiences and perspectives on our Council, while providing registrants with the first step towards a board, committee or panel role. Our current Council Associates are:

- Rukaiya Anwar (appointed 2021 –2023)
- Jamie Douglas (appointed 2023 –2025)
- Deepali Modha (appointed 2023 –2025)
- Harry Singh Bhakar (appointed 2021 -2023)

"Since joining the GOC as a Council Associate in January 2022, I have been encouraged and supported to contribute to discussions within a safe and welcoming space. Equally, all input by colleagues is considered and thoughts are respected and valued, allowing for collective decision-making.

The Council Associate programme has been instrumental in opening up the discussions to individuals like myself who would have otherwise not had the opportunity to take part until much later on in my career. Having been part of this organisation for the last 18 months, I am very proud of the efforts of the GOC in continuously looking for ways to improve and innovate."

Rukaiya Anwar, Council Associate 2021-23

In 2022-23 we assessed the first year of the scheme and agreed to extend it to a two year appointment. This has the benefit of supporting an overlap between cohorts of Council Associates and ensuring they have peer-to-peer support. For 2023-24, we will be working with other regulators with similar schemes to develop an alumni network.

Staff welfare and engagement and staff networks

We are proud of our staff equality networks, which are developed by communities of staff who share an affiliation with a protected characteristic. Staff networks at the GOC provide a safe and practical space where generating and sharing new ideas and exchanging information can be expressed in an informal environment. They also provide peer support, networking opportunities and social activities. Their activities can help to open the door to changing the culture of our organisation.

Our staff networks have a SMT sponsor, are self-governed, and their terms of reference, leadership and membership arrangements are determined by their own members in accordance with guidelines approved by our SMT.

Current GOC staff led equality networks include:

- Able (Disability)
- Anti-Racism Group
- Embrace (Black and Global Majority)
- LGBTQIA+
- Staff Wellbeing and Engagement Group (SWEG) (Employee engagement and inclusion)
- Women (Gender Equality)

In 2022-23 the networks hosted a range of

activities including:

Awareness raising – Able, the staff disability network, raised awareness around the history of neurodiversity and its impact in the workplace, through a range of well attended workshops.

Educational Work – The LGBTQIA+ network offered a range of sessions during LGBT+ History Month highlighting inspirational LGBT+ people involved in the creative sectors.

Discussion – Both EMBRACE and the Woman's network provided a range of inspirational guest speakers offering people the opportunity to discuss lived experience of Ramadan, the role of the women's minister and Government Equality Hub, as well as the history of African art.

External networking – Staff network chairs attended a meeting with chairs from the Coal Authority to seek opportunities for sharing best practice and opportunities to collaborate and co-produce events.

Internal networking – The SWEG network activities have included Monday Night Yoga, Fit for Winter, Staff Cooking Class, Christmas Events, Talks and Time to Talk tea. These provide an excellent resource for developing working relationships, learning about different work areas and the types of roles that colleagues are engaged with across the GOC.

Signposting - All the GOC networks have provided peer advice and guidance to members and, where necessary, signposted them to relevant GOC services or external organisations.

In 2022 we revised our framework for staff networks, in part to reaffirm the commitment the GOC has made in supporting them, and ensure there is the leadership, resources and guidance available to make them a success.

The Staff Wellbeing and Engagement Group (SWEG) was shortlisted for Employee Network Group of the Year by the Employers Network for Equality & Inclusion (enei) Inclusivity Excellence Awards 2022. The judging panel at Employers Network for Equality & Inclusion felt that our submission stood out as a great example of what it takes to truly make a difference in creating a more inclusive workplace.

"It has been a real pleasure to engage staff members with SWEG activities. Our presentation led coffee breaks have been an excellent way for colleagues to advocate and share the virtues of personal hobbies, to boost their online presentation skills and to make new connections across the organisation. Additionally, the sessions have been a great demonstration of the diversity of experiences and skills that fellow colleagues bring to the GOC over and about the expertise demonstrated in their specific roles."

Chair of SWEG

"The GOC's LGBTQIA+ network promotes equality, diversity and inclusion by improving colleagues' awareness of issues relevant to the network. In the year ending March 2023, this included:

- *Sharing the recording of a GOC presentation by the charity 'Queer Britain';*
- *Working with the EDI Manager on intranet publications about Bisexual Visibility Day and LGBT+ History Month;*
- *Organising internal presentations to mark LGBT+ History Month and International Day against Homophobia, Biphobia and Transphobia.*

We welcomed colleagues from other regulators to the 'Queer Britain' presentation (in March 2022) and we aim to continue inviting external colleagues to further events.

The support of other GOC staff network groups makes it easier to have organisational conversations about LGBTQIA+ issues, and it is rewarding to see more colleagues bringing their whole selves to work."

Chair of the LGBTQIA+ network

"The Anti-Racism Group (ARG) was developed as a forum where staff from all backgrounds and ethnicities could better help each other in the understanding of people's differences. I joined as Co-Chair in 2022 and since then I have been very fortunate to be part of many lively in-depth discussions and presentations, for which we have received glowing praise for helping to make a sensitive topic more accessible for those who may have felt isolated. Personally, I had the opportunity to lead a presentation on an 'Introduction to West Africa' as part of Black History Month, where I explored the countries and regions within and its cultural impact on modern western society. It received very positive feedback from both staff and Council members. We are planning to host more events in the future, and hope to continue our success in achieving our goal to inspire conversation, promote education, and provide support to all."

Co-Chair of the Anti-Racism Group

"I joined as a Co-Chair of the Women's Network in 2022 and it has proven to be an invaluable way to connect with colleagues on a more personal level. With the pandemic meaning we have all been working from home, there was a definite need for physical interaction between colleagues. I held an in-person Women's session full of fun activities, competitions, and icebreakers. We had a very successful turn out of around 30 people attending and received glowing feedback about how lovely it was to meet people in person. We are hoping to hold more in-person events in the future to allow colleagues more of an opportunity to socialise with each other based on shared interests."

Co-Chair of the Women's Network

Theme 3: Raising awareness through communication, events and training

Staff and stakeholder communications and training

We have been proactive in communicating with staff to help raise awareness and support understanding on EDI.

Over the past 12 months we have published a Global Equality and Diversity Celebrations Calendar and published 15 articles for staff and other internal stakeholders on EDI related topics to raise awareness of global and national diversity celebrations. This included events such as Black History Month, Christmas and Easter, Diwali, Eid al-Fitr and Eid al-Adha, LGBT+ History Month, Pride, Ramadan, and Women's History Month. Networks and individual staff members have been supported to deliver sessions that cover these events, often sharing personal experiences or reflections. These sessions are often volunteered or organised by staff, and we are proud to celebrate with them. It is critical part of how we create a supportive space in which people can share their culture, heritage and insight.

We continue to commission external training or deliver it "in-house" to ensure all members, employees and workers are fully conversant with their responsibilities in relation to EDI. We introduced Skill Booster platform to provide online virtual EDI training. This is available to everyone at the GOC, regardless of whether they are a member, employee or worker. As of year end 31 March 2023 there were 140 users enrolled on the learning management system (LMS), with 78 enrolled on courses. All new employees are required to complete the online Inclusion Essentials course and we work with specific directorates to focus awareness on certain areas for example unconscious bias.

Modernising our people policies

In 2022-23 we reviewed and updated all of our family friendly policies, including: Maternity, Adoption, Shared Parental Leave, Paternity and Parental Leave. In addition, we have implemented an Agile Working Policy and we are currently reviewing our Flexible Working and Probation Policy.

In collaboration with external consultants QCG, we developed a new reward and recognition policy to align our approach to reward and recognition with the GOC's strategic aims, and to encourage and reward required behaviours and performance. It is also designed to provide

a clear and consistently applied process by which individual and team reward and recognition decisions are determined. It will also help us maintain salary competitiveness and attract the best talent whilst controlling payroll costs within agreed budgets. After extensive research and preparation, including equality impact assessments that considered how the policy would support our EDI duties, the launch and staff consultation was opened on 5 April 2023. Our new reward and recognition policy was implemented in July 2023.

Review of roles requirements

We have revised our recruitment processes to ensure that role descriptions are reviewed prior to being advertised to ensure inclusive language is used throughout and that any bias is removed. Roles reviewed during this reporting period include Optometric Advisor, Head of People and Culture, Head of Hearings and Standards Manager.

Review staff recruitment campaign EDI data

In 2022-23 we took steps to review and analyse recruitment campaign data in relation to EDI to reduce inequality and eliminate barriers to career progression. From 1 April 2022 to 31 March 2023 we recruited to 45 positions across the organisation and filled these positions with a mixture of internal promotions and the addition of 25 new employees. We had 1664 completed applications for our vacancies. All candidates were asked to complete our diversity monitoring form. Completion of this form is voluntary and not all candidates completed the form or answered all of the questions. The results can be viewed here:

Gender	Number	%
Male	504	37
Female	835	62
Other	13	1
Total	1352	100

Ethnicity	Number	%
White - English / Welsh / Scottish/NI / British	339	23
African / African British	149	10
Indian / Indian British	147	10
White and Asian / British	116	8
Other White Background	76	5
Pakistani / Pakistani British	61	4
White and Black African / British	61	4
Others	302	21
Other Ethnic Group	109	7
Prefer not to say	106	7
Total	1466	100

Disability	Number	%
No	1346	92
Yes	60	4
Prefer not to say	60	4
Total	1466	100

Sexual Orientation	Number	%
Heterosexual / Straight	1175	90
Bisexual	39	3
Gay / Lesbian	27	2
Other	12	1
Prefer not to say	56	4
Total	1309	100

Age	Number	%
Under 25	166	12
25-34	504	38
35-44	339	26
45-54	204	15
55-64	59	4
Prefer not to say	57	4
Total	1329	100

Religion	Number	%
Christian	539	46
Muslim	286	24
Hindu	144	12
Other	74	6
Prefer not to say	131	11
Total	1174	100

Marital status	Number	%
Married	469	38
Single	536	43
Partner	76	6
Other	154	12
Total	1235	100

Analysis of the results suggests that we are attracting a diverse range of applicants although more emphasis could be placed to attract people above 55 years old, disable persons and members of the LGBTQ+ community. We will continue to collect and analyse recruitment campaign data in relation to ED and progress our planned review of our recruitment policies to ensure we continue to reduce inequality and eliminate barriers to career progression.

Review member recruitment campaign EDI data

The Nominations Committee, which is responsible for member recruitment, is committed to inclusive recruitment and removing barriers to participation on our Council and Committees.

In relation to member recruitment, 186 applicants for member-roles in this reporting period completed an EDI monitoring form. The recruitment campaigns for member roles in this reporting period were:

- two Council members (one DO registrant and one lay)
- 15 Advisory Panel members
- two Council Associates

The Council member campaign included a message and targeted campaign encouraging candidates in Northern Ireland to maintain fair representation from the devolved nations on

our Council. The Council Associate roles were aimed at early career registrants. These two factors may influence statistics for 2022-23.

The data collected showed that 51.1% of applicants were male and 48.4% were female. Most applicants split evenly across three different age categories: 35-44 (25.3%); 45 – 54 (22.0%) and 55-65 (23.1%). 83.3% were not carers; 14.5% were carers.

The majority of applicants reported they were White: English, Welsh, Scottish or Northern Irish (60.2%). The second highest group was Asian / Asian British - Indian / Indian British (13.4%) followed by White - Any other white background (7%) and then Asian / Asian British - Pakistani / Pakistani British (5.9%). Less than 2% opted for "prefer not to say".

Gender Pay Gap Report

The GOC employs less than 250 employees and so we are not required to publish our gender pay gap data. However, as part of our commitment to equality, diversity, and inclusion (EDI) we have chosen to publish our data on an annual basis.

The Gender Pay Gap Report had a snapshot date of 5 April 2022. Our results show the GOC workforce is predominantly female and this year there has been an increase in the mean pay gap in favour of men, but a reduction in the and median pay gap in favour of women. Both are well within industry norms for the regulatory and charity sector.

Overview:

- Mean Gender Pay Gap – on average men earn 4.5% higher hourly rate than women, this an increase 3.18% on 2021.
- Median Gender Pay Gap – on average men's median pay is 0.6% higher than for women. This figure is less than 1% and not significant. Last year's figure was 5.0%
- Bonuses – we do not pay bonuses so there is no mean or median bonus gap.

	Men	Women
Lower Quartile	29%	71%
Lower Middle Quartile	33%	67%
Upper Middle Quartile	22%	78%
Upper Quartile	43%	57%
All Staff	32%	66%

Although we have seen a rise in our mean gender pay gap, we have also seen a reduction in the median gender pay gap. Both remain significantly better than the national averages for other full time employees. Please keep in mind when looking at the figures the impact of the small size of our population. As each person represents nearly 1.06% in each quartile, a 2% difference equates to two people only.

There are several initiatives to ensure that we pay colleagues appropriately and do not differentiate on gender, race or any other protected characteristic including:

- Launch of new policies for reward and recognition, family friendly and flexible working policies;
- A review of our recruitment practice, processes and policy to promote fairer hiring practices;
- We continue to promote our staff networks to support diversity and inclusion, including Women's; Black and Global Majority, Lesbian, Gay, Bisexual, Transgender, Queer+ (LGBTQ+) and Disability networks; plus our Anti-Racism group; and Staff Welfare and Engagement Group (SWEG);
- Roll out of an ambitious programme of learning and development to run over the next 2 years; and

- Our new applicant tracking system is allowing us to track EDI data on applicants to ensure that we are attracting a diverse pool.

Renewing our commitment to EDI with a new corporate strategy

Following an internal review of our EDI culture, policies, and practices in 2019, our current EDI plan was approved in April 2020. It's themes and objectives were developed using an evidence-based approach and responded to the views of a wide range of diverse internal and external stakeholders at the time. As we now look forward to the formation of our 2025-30 corporate strategy, and a renewal of our EDI action plan, we plan to commission an external review 'temperature check' of our progress against the recommendations made the 2019 internal review. This will assist us in making the transition to the new PSA evidence framework supporting achievement of standard 3 of the PSA's Standards of Good Regulation, and lay the groundwork for our new EDI strategy for 2025-30.

We will continue to report on our progress against yearly action plans. Our action plan will also give us the flexibility to adapt our approach, if we need to, to meet our six key themes. This will also help make sure that initiatives are built fully and effectively into our work, our people are engaged, and the impact is clearly measured.

Our 2020-24 EDI action plan

Our current EDI action plan for 2020-24 captures the critical activities we committed to as part of our five-year corporate strategy. It is organised around the following themes.

We regularly monitor our progress against this plan, and we report our progress through this, our annual EDI reports.

Data
Collecting data on our registrants, staff, Council and committee members can direct our actions and processes to ensure we progress equality. It is therefore important to collect the right type of data and analyse it to highlight areas of weakness. This will allow us to explore the reasons why certain groups are subjected to certain processes, what barriers are presented and the feeling of inclusion.
People development and education
It is important to develop a learning culture where shared learning is encouraged, giving a better understanding of EDI topics and how to make the GOC an equal and inclusive environment at all levels.
Recruitment
It is important that people who come into the organisation feel included, no matter their background, from the moment they apply to be part of the GOC. This process is an important chance to embed the GOC values and commitment to EDI.
Values setting
Embedding GOC values and commitment to EDI into every aspect of the GOC's work will allow staff to understand how their roles are connected to EDI and how they personally can contribute. This also embeds EDI into all practices in the GOC.
Community engagement and support
Building community is essential to creating a sense of belonging and forming trust, for mutual wellbeing support and having a place to discuss issues.
Leadership and accountability
Organisations with strong leadership on EDI are generally more successful, therefore it is important to have clear and practical definitions of EDI, which are shared and understood throughout the organisation, with a defined direction and plan of action, and an ease in talking about EDI issues in relation to the work of the GOC.

What next: Our plans for 2023/24

Our strategic priorities demonstrate our level of ambition to reduce discrimination, promote diversity and foster inclusion in everything we do, as a regulator and as an employer. In 2023-24, we will begin developing our next five-year corporate strategy, to 31st March 2030, which will include the next phase of our plans for delivering equality, fostering inclusion and improving diversity, recognising our leadership role in the eye-healthcare sector to tackle discrimination and use our data better to co-produce solutions.

As part of this work, we will refresh our EDI action plan, ensuring the resource, leadership and people are there to make it a reality, alongside the development of our next five-year corporate strategy. We have asked our Council Associates to help contribute to the preparation of the EDI component of our corporate strategy, and we will work with all our stakeholders to ensure this aligns to our values and ethos as a regulator.

Our commitment to EDI, through the delivery of our Fit for the Future strategy, continues into 2023/24. We know we have more work to do to fully understand and tackle other issues within the optical sector including:

- How we can better understand the communities and cultures of the people we work with, and the challenges they face, and apply this knowledge to our regulatory work.
- How we can better understand why we get a higher number of concerns about Asian and British Asian professionals being raised with us than we ought to expect statistically.
- How we can use our regulatory influence and levers to tackle discrimination and negative working environments and support the reduction of health inequalities
- How to make sure that diversity (including diversity of 'lived experience') is better reflected both in and through our governance and leadership.

Similarly, we recognise the recent debates and different perspectives about the use and limitations of the term Black, Asian and Minority Ethnic (BAME), specifically that it should not be taken as referring to a singular group or identity.

We will revise our action plan and plan our strategy with these challenges at the forefront our minds. We are committed to taking a nuanced approach to issues of race and ethnicity as far as possible, working with our stakeholders to shape our approach, deliver our regulatory responsibilities and inform our decision-making.

Annexes and appendix

Annex 1: Our progress against our EDI Plan 2020 – 2024

The following tables provide evidence of progress against agreed actions:

Data

Programme of work	Strategic objective	When	Progress
Improve collection, analysis and recording of protected characteristics in its regularity, use and timeliness, to better inform policy, processes, and impact.	Continuous improvement	Jan–Mar 2022	We have made substantial changes in how we collect and review EDI data, in particular in relation to registrant and public perception surveys. We have also adjusted how we collect EDI data for our members, relying on an annual return to capture the changes to our EDI profile year on year. While the response rates remain low, we will proactively encourage members to complete these surveys in future years.
Improve recording, analysis and sharing of fitness to practise data.	Transforming customer service	Jan–Mar 2022	As part of our ambition to become a world-class regulator, the Fitness to Practise Improvement Programme for 2022-2025 contains a workstream to develop and implement guidance for decision-makers in recognising and addressing potential bias.
Implement new data analysis programmes to explore intersectional data and remove barriers.	Continuous improvement	Jan–Mar 2023	Intersectionality describes people who are shaped by their simultaneous membership of multiple interconnected social categories. We have included more in our monitoring report this year to highlight where intersectionality may be an important factor in terms of the data we have collected. New programmes are not necessary as intersectionality is an approach to analysing EDI data. We are in the process of updating our equalities impact assessment process and will consider how we use intersectional data to identify barriers. By doing so, it is not necessary to implement new data analysis programmes but instead consider intersectionality from the outset as a method that helps us to understand how people experience services, such as healthcare, differently because of their identity and unequal power dynamics.

Embed EDI benchmarking reporting into each quarter.	Continuous improvement	Jan–Mar 2021	Council had previously expressed support for a set of EDI measures to be regularly monitored. However, exploratory work by SMT showed there is limited scope to introduce a numerical quarterly EDI benchmark, given the small sample size (for example, variances in the EDI profile of staff on a quarterly basis would potentially identify individuals), and that the data does not significantly change in-year to warrant quarterly reporting. The monitoring of systemic change associated with the GOC's EDI plans is better served by an annual data set, such as that contained in the EDI monitoring report. Further monitoring around the staff EDI profile at an operational level, including recruitment data, investigations, grievances and other HR matters will be incorporated into BAU reporting to SMT over 2023-24.
Create an inter-regulatory sharing space for learning and research that progress EDI, where there are limits to data use.	Transforming customer service	Jan–Mar 2023	On behalf of the GOC, the EDI Manager attended the inter-regulatory EDI forum to share best practice and research that progress EDI.
Start collecting qualitative data to understand inclusion.	Continuous improvement	Jan–Mar 2023	Our qualitative data is in part gathered via regular pulse surveys and an annual staff survey. The themes and topics that emerge from this feedback are discussed with teams and action plans are drawn up for implementation in response. The outcome of the staff survey is reported to Council via its informal catch-ups.

People development and education

Programme of work	Strategic objective	When	Progress
Roll out essential EDI training for all staff.	Continuous improvement	Jan–Mar 2021	EDI Learning and Development programme was launched, and training opportunities provided to a range of stakeholders.
Develop and launch an enhanced management development programme.	Continuous improvement	Apr–Jun 2021	Completed - this was launched in March 2021 and details published on our IRIS intranet. Management training is being provided to new and potential managers in 2023-24. There is further work being undertaken in the context of developing the people plan, and the production of a new knowledge, skills and behaviour framework. This will seek to enhance manager skills as well as develop their understanding of EDI in the context of people management.
Develop and launch a continuous EDI learning programme, with embedded values, for staff.	Continuous improvement	Apr - Sep 2022	Suite of EDI learning available through partnership with Skills Boosters and Vinci Works LMS system for all staff.
Develop an EDI training programme for Council.	Continuous improvement	Apr - Sep 2022	Training is being delivered regularly using a combination of e-learning (Skills Boosters), internal sessions and external providers. In 2023-24 we are undertaking a member support review which will consider the wider offer to our members, covering both Council and committee members.
Develop informal EDI learning opportunities for registrants.	Continuous improvement	Jan–Mar 2023	There are opportunities for the GOC to showcase its EDI work, however this needs to be done in coordination with the relevant professional bodies to ensure it is coordinated and appropriate for our role as regulator. The Standards Review will support components of this work, including recent discussions about professional boundaries.

Adopt reverse mentoring to further develop leaders and people managers.	Continuous improvement	Jan–Mar 2023	There is a need to redevelop this work in line with the development of the new knowledge, skills and behaviour framework, and revised reward and recognition policies. The development of the People Plan will also assist with identifying where this approach is suitable. Coaching opportunities are available to staff via an inter-regulatory support offer.

Recruitment and retention

Programme of work	Strategic objective	When	Progress
Review recruitment policy, processes, and assessment, to embed EDI and values.	Continuous improvement	Jan–Mar 2022	A review of recruitment practices and procedures was undertaken to ensure best practice in inclusive recruitment was being followed in 2022. Further work will be undertaken in this area in 2023-24 to ensure we are consistently demonstrating GOC values.
Analyse EDI data of recruitment campaigns to highlight and analyse inequality and barriers.	Continuous improvement	Jan–Mar 2023	EDI data from recruitment campaigns for employees, workers and members provides evidence that we attracted a diverse range of candidates. We can see from Hireful data that, over the 12-month period, 1664 applicants applied for positions at the GOC. Analysis demonstrated that 62% of applicants were female compared to 27% male and 1% other. With regards to ethnicity, 77% of applicants were from non-white backgrounds, however 7% of applicants preferred not to say. There are some areas where more targeted recruitment and marketing may help namely related to older people, disabled people and members of the LGBTQ+ community. Reliable data for these groups may be difficult to confirm as many candidates may withhold the data for fear of unfair discrimination.

Review role requirements to ensure the role descriptions are not limiting.	Continuous improvement	Jan–Mar 2023	Job descriptions for roles are regularly reviewed by the EDI Manager to ensure inclusive language is used throughout and that any bias is removed; this is now standard procedure in HR. Recent roles reviewed include Optometric Advisor in case progression, Head of People and Culture for HR, Head of Hearings for Operations and Standards Manager for the Strategic Directorate.

Values setting

Programme of work	Strategic objective	When	Progress
Clarify the link between EDI and GOC values and embed those values in to ways of working.	Continuous improvement	Jan–Mar 2022	Previous work has included ensuring appraisal documents reference the GOC values and behaviours. This is now being taken forward through the Change programme, work to update GOC values for 2025-30, and development of the People Plan.
Redraft all HR policies and processes.	Continuous improvement	Jan–Mar 2023	The family friendly suite of polices have been redrafted and approved. There are further updates, including to the EDI policy that will be updated in 2023-24.
Redesign processes to practise values.	Continuous improvement	Jan–Mar 2023	This action links in with the above action around the People Plan and as such a redesign of processes is already underway with a new appraisal process planned for 2024 and the April 2023 launch of the reward and recognition policy.
Build Equality Impact Assessments (EQIAs) into each process.	Continuous improvement	Jan–Mar 2022	Equality Impact Assessments (EQIAs) are used when developing and/or renewing policy or processes. Staff are able to access advice and peer support across the organisation in preparing these. Work to redevelop our EQIAs is underway with a view to strengthen our approach and ensure it is aligned to best practice.

Community Engagement and Support

Programme of work	Strategic objective	When	Progress
Review and promote a staff engagement plan where EDI dates are celebrated.	Continuous improvement	Jan–Mar 2022	EDI Calendar established and dates such as PRIDE, Black History Month, Disability History Month are celebrated. SWEG, staff networks and individual staff are regularly engaged in leading and preparing these plans.
Review the staff network structures and support.	Continuous improvement	Jan–Mar 2022	Staff networks were reviewed in September 2022, with a framework for operating staff networks developed and presented to SMT in October 2022. The guidance document provided clarity, coherence and consistency of approach in the operation of all network groups. Small budgets exist to support operation and engagement.
Set up new, and develop existing, structures to promote and reward cross-department / cross-team working.	Continuous improvement	Jan–Mar 2023	The Change programme has driven this cross-departmental working, bringing together multiple perspectives and experiences to develop our work in this area. Leadership team and SMT colleagues have provided a wealth of anecdotal evidence as to the depth of cross-department / cross-team working that has occurred in the past 12 months, demonstrating that informal structures have been put in place that promote and reward cross-department / cross-team working.
Develop and implement a People Plan.	Continuous improvement	Jan–Mar 2023	Whilst development of the People Plan is well underway, it is a project that was not completed by March 2023. The People Plan is being supported by the Change programme and deadlines have been realigned to support preparation of the 2025-30 corporate strategy.

Develop and implement a revised communications strategy to engage staff.	Continuous improvement	Jan–Mar 2022	A 12 Month EDI communications plan was put in place from January 2023 for the year. The EDI Manager supports at least five big ticket items across the year to include: Women's History Month, Wellbeing Week, Ramadan/EID, PRIDE and Black History Month, while continuing to support staff networks to raise awareness, such as a Chinese New Year event in January 2023 hosted by Embrace.

Leadership and accountability

Programme of work	Strategic objective	When	Progress
Develop guidance on 'speaking up' for staff and registrants	World-class regulatory practice	Jan–Mar 2021	This was completed and implemented in Nov 2021. The number of staff referrals received under this policy are reported as part of the exception reporting to the Audit, Risk and Finance Committee (ARC) on a quarterly basis.
Publish and implement guidance on 'speaking up' for registrants	World-class regulatory practice	Jan–Mar 2022	This was completed and reported in optometrist media.
Monitor the revised communications strategy to achieve greater transparency	Transforming customer service	Apr–Jun 2023	In collaboration with the internal Communications team, an EDI communications plan was trialled between September and December 2022, where a total of 12 EDI awareness articles were published on our IRIS intranet between September and December, accounting for 435 views by staff. This strategy was reviewed and a 12-month EDI communications plan put in place from January 2023 for the year.

Annex 2: EDI Data Monitoring Report 2022-23

This diversity data is about registrants, registrants going through fitness to practise proceedings, staff, members/workers, and students.

The information in this report is based on our in-house datasets on 31 March 2023. (The exception to this is student data, which is based on the academic year 2021-2022, and provided to us by education providers.)

Data

While we aim to gather evidence about protected characteristics, there is a variation in response rates.

We are unable to report data involving small cohorts where individuals may be identifiable. Similarly, we may round up or group figures to ensure that individuals cannot be identified within the report. Due to rounding, percentages may not always add up to 100 percent.

Categories

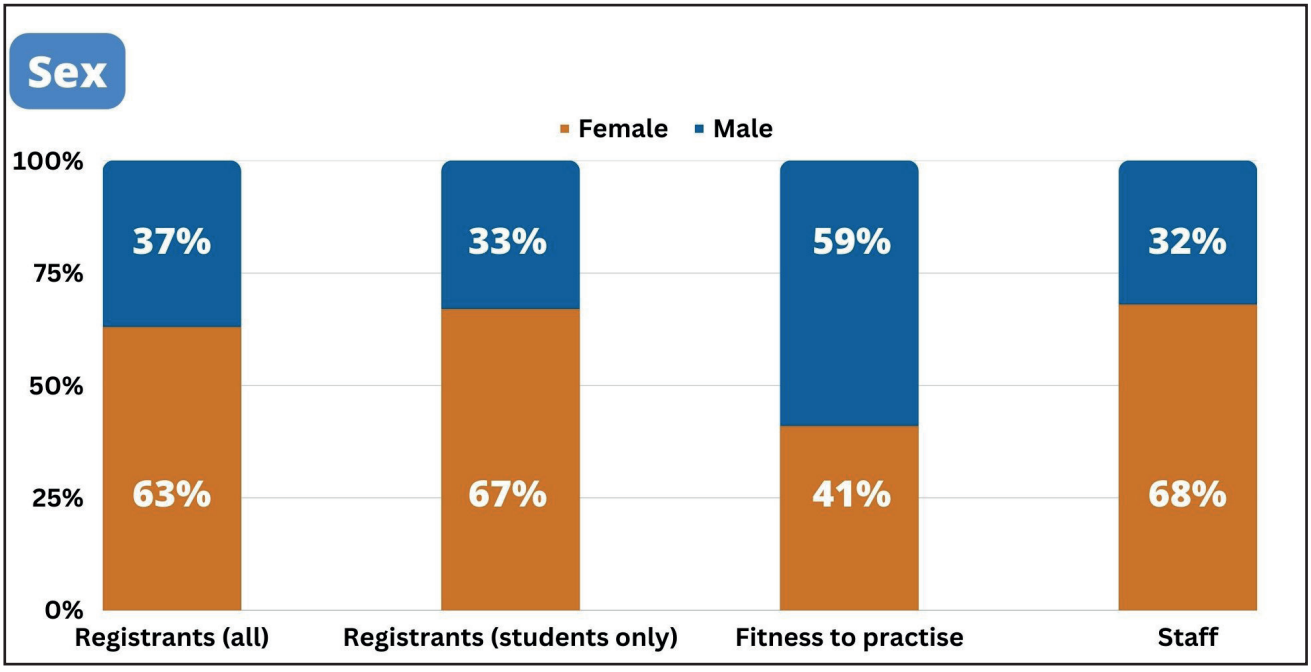
Where possible, we provide a breakdown of White, Asian, Black, Mixed, and Other ethnic groups. White EWSNI/Irish means “White English, Welsh, Scottish, Northern Irish, or Irish”.

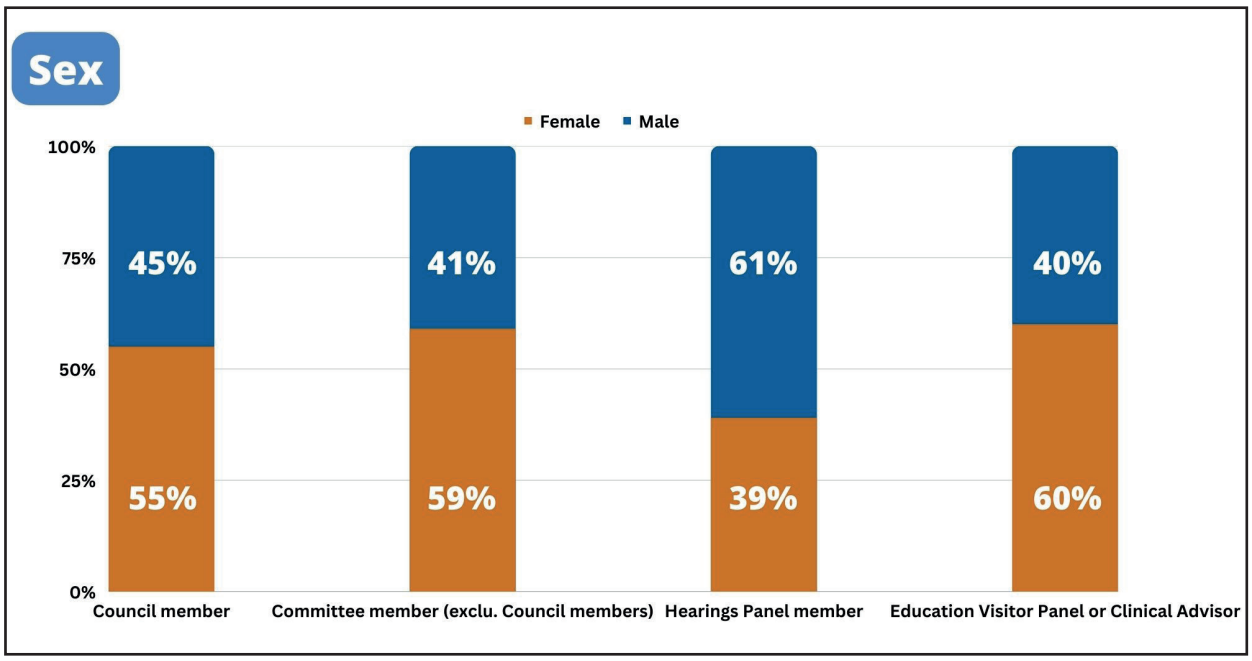
The religion category ‘Christian’ includes Anglican, Catholic and all other Christian denominations.

Timeframe

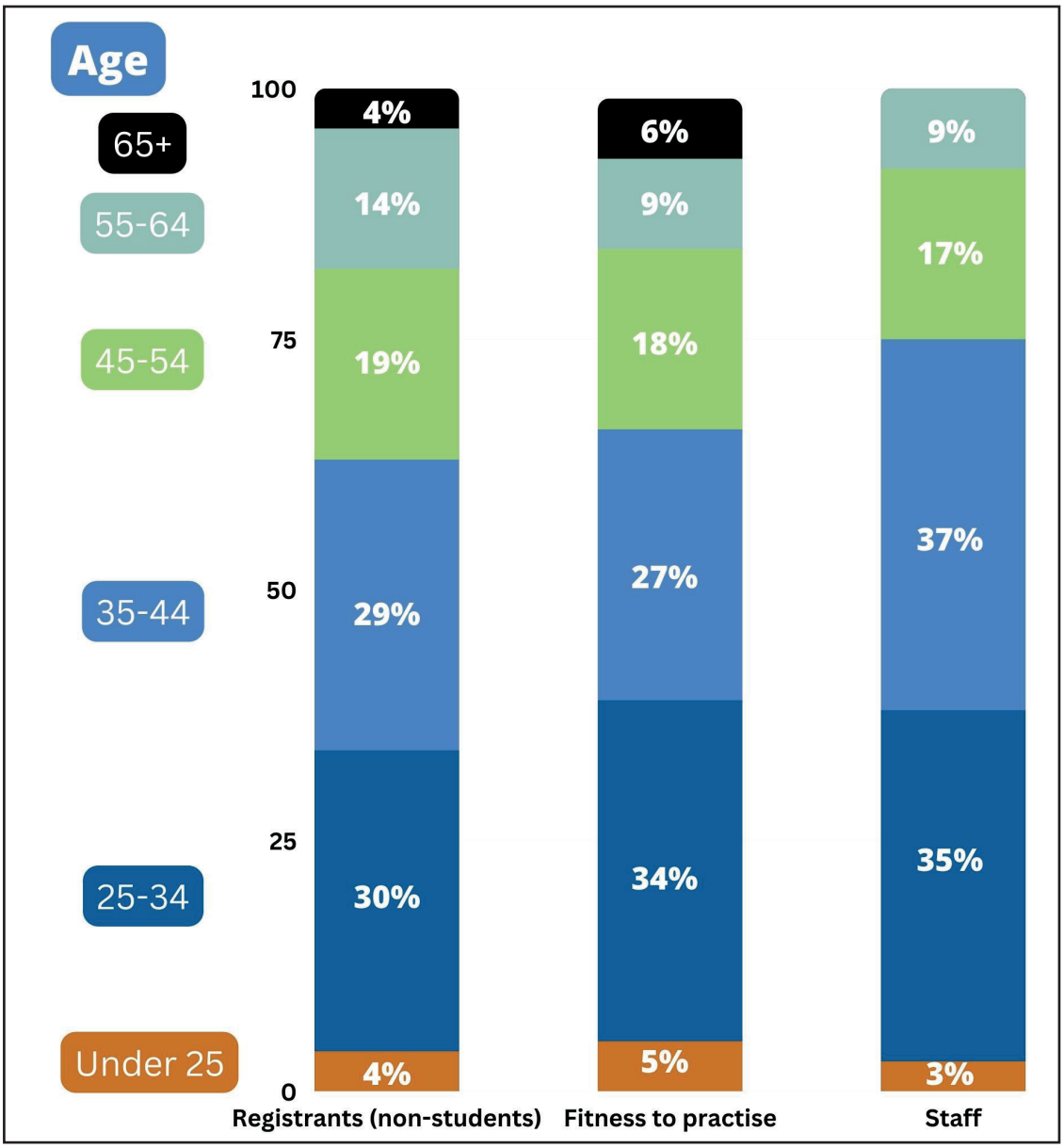
Where possible we have provided three annual instances of data: 31 March 2021, 31 March 2022, and 31 March 2023, to help us identify any trends.

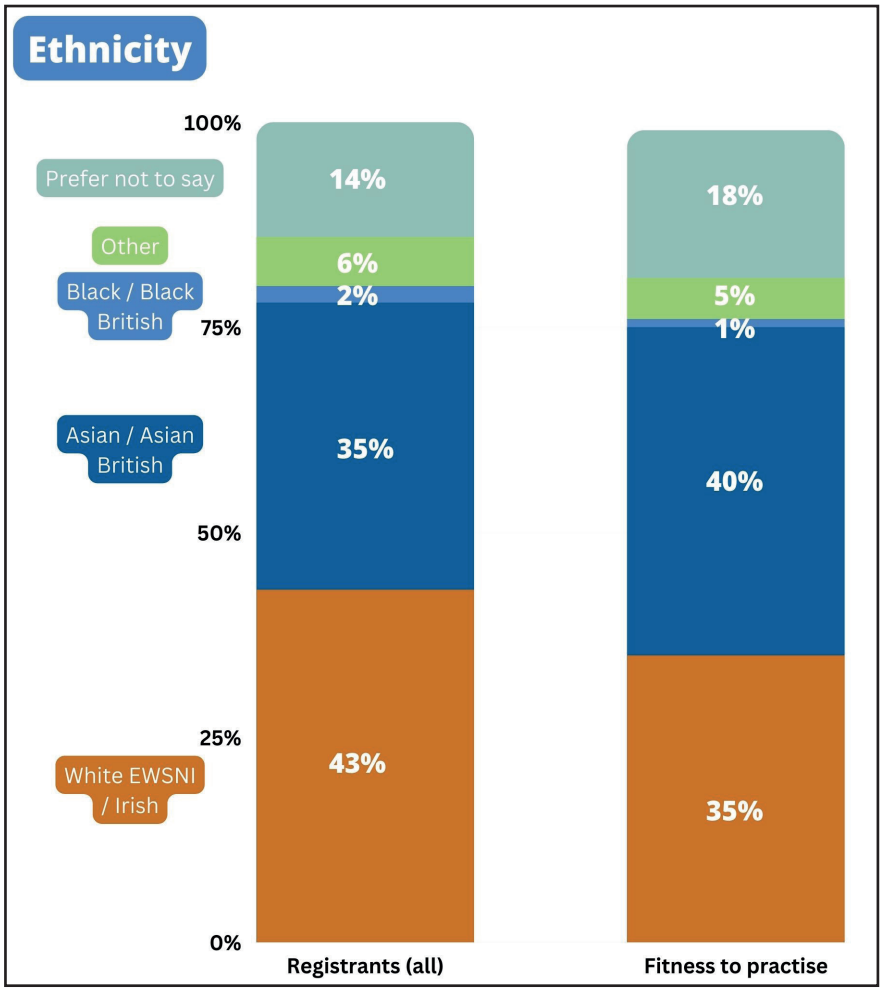
2023 EDI Data Snapshots

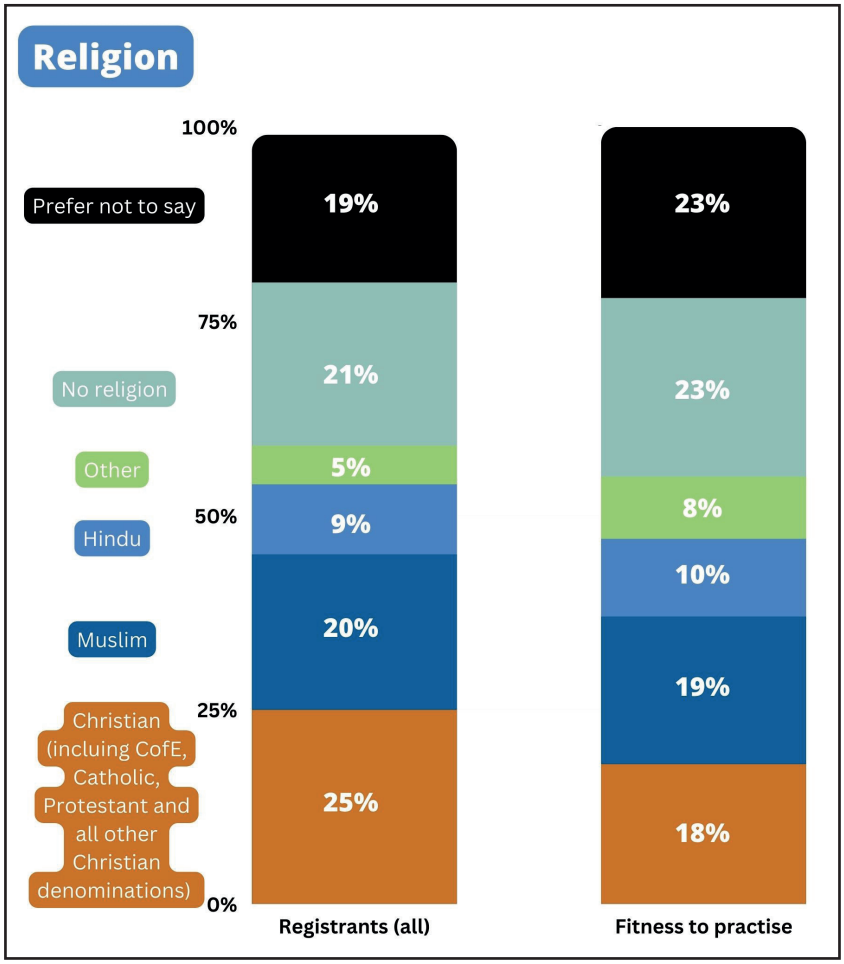




Note: data portrayed here only from workers who filled in an EDI form




Ethnicity
100%
75%
50%
25%
0%
Prefer not to say
Other
Black / Black British
Asian / Asian British
White EWSNI / Irish
14%
6%
2%
35%
43%
18%
5%
1%
40%
35%
Registrants (all)
Fitness to practise


Religion
100%
75%
50%
25%
0%
Prefer not to say
No religion
Other
Hindu
Muslim
Christian (incluing CofE, Catholic, Protestant and all other Christian denominations)
19%
21%
5%
9%
20%
25%
23%
23%
8%
10%
19%
18%
Registrants (all)
Fitness to practise

Registrants

Appendix: Tables 1-22

As of 31 March 2023, we had 30,484 optometrists, dispensing opticians, student optometrists, and student dispensing opticians on our registers.

Numbers

The largest annual change occurred with student optometrists: this group has increased by 6.3% compared to the previous year. The total number of registrants has increased by 1.4% compared to the previous year.

Sex

63.6% of all registrants are female (63.1% in 2022). Like 2022, the most marked imbalance is found in student optometrists and student dispensing opticians where females account for 67.3% and 68.2% respectively. All four specialty categories are roughly 60% female and 40% male.

Age

Excluding students, age groups with the highest percentage of registrants are aged 25-34 and 35-44 (29.6% and 29.2% respectively); regarding this, there has been no significant change over the three-year period. Like the previous year, the specialty age profile shows a comparatively higher proportion of registrants aged 35-44 (32.9%, compared to 29.2% of all registrants excluding students).

Ethnicity

42.7% of all registrants (43.3% in 2022) are white EWSNI/Irish; this has been decreasing over the three-year period. 35.4% of all registrants (33.9% in 2022) are Asian / Asian British; this has been increasing over the three-year period. The proportion of registrants who are black, Asian, mixed, or other ethnic group is significantly higher than the UK population (13%).[1]

Excluding registrants who prefer not to say, 49.7% are white EWSNI/Irish, and 41.2% are Asian / Asian British. There is a proportionately higher rate of white EWSNI/Irish specialty registrants (61.9%, compared to 42.7% of all white EWSNI/Irish registrants).

Most registrants are 25- to 34-year-old white EWSNI/Irish female optometrists.

Religion

The religion declared most frequently by all registrants was Christian (25.3%) followed by Muslim (20.0%); in 2022, this was 26.4% and 18.4% respectively.

Excluding those who prefer not to say, 31.1% of registrants are Christian, and 24.5% are Muslim.

The percentage of Muslim registrants is significantly higher than the UK Muslim population (5.2%).[2]

Disability

1.1% of registrants declared that they are disabled. Since 2020, there has been no significant change in the percentage of all registrants who have declared a disability. In 2020, 10% of working age adults in the UK who are economically active, considered themselves to have a disability.[3]

Sexual Orientation

Since 2020, there has been no significant change in the percentage of all registrants who have declared a sexual orientation other than

1 Ethnicity Facts and Figures, UK Government Data extracted from 2011 Census

2 Muslim Population in the UK, ONS, 2018

3 Disabled People in Employment, House of Commons Briefing Paper No 7450

heterosexual (less than 3%).

Pregnancy and Maternity/Paternity Leave

The percentage of all registrants who have declared that they have been pregnant and/or taken maternity/paternity leave has remained static at 6% since 2020.

Nation

81.4% of registrants live in England. 2.0% of registrants live outside of the UK.

Fitness to practise

Appendix: Tables 23-36

One of our statutory functions is to investigate allegations where registrants may not be fit to practise as part of our role in protecting the public.

Anyone can complain to us if they have a concern about one of our registrants. If the complaint raises a question about a registrant's fitness to practise (FtP), we will investigate by gathering all the relevant information, for example, optical records, witness statements, or information from the police or NHS organisations. Once the investigation is complete and both the registrant and complainant have had the opportunity to provide comments, all papers are passed to case examiners to decide whether the case should be either closed or referred to the FtP Committee for a hearing.

Further information regarding FtP outcomes can be found in our Annual Report.

The data presented in the Appendix shows activity at each of the different stages of our fitness to practise process. They do not track a single cohort of complaints through the system because cases do not necessarily reach outcomes in the same year.

Complainants

Excluding the unknowns, 60.5% of complaints come from females (56.1% in 2022). Compared to the previous year, the number of complaints received is very similar. There has been an increase of 40.3% in the number of complaints compared with 2021.

Location

Excluding the unknowns, there has been no significant difference in the location of complaints by country over the past three years.

Registrants subject to an FtP Investigation

Compared with 2021, there have been 60.0% more FtP investigations this year; compared with 2022, there have been 2.8% fewer FtP investigations this year. Over the past three years, there has been no significant difference in the percentage of registrants by profession subjected to an FtP investigation.

Sex

64.5% of registrants under FtP investigation are male (59.0% in 2022).

Ethnicity

42.7% of registrants on the register are white EWSNI/Irish, and 35.5% of registrants under FtP investigation are white EWSNI/Irish. Comparatively 35.4% of registrants on the register are Asian / Asian British, and 39.8% of registrants under FtP investigation are Asian / Asian British. Asian / Asian British registrants make up a disproportionate number of FtP investigations. This trend has remained unchanged over the past three years.

Excluding those who prefer not to say, 43.4% of registrants under FtP investigation are white EWSNI/Irish, and 48.7% are Asian / Asian

British.

Age

The age group with the highest percentage of registrants under FtP investigation is 25-34 (34.4%), followed by 35-44 (26.9%).

Most registrants under FtP investigation are 25- to 34-year-old Asian / Asian British males.

Religion

25.3% of registrants on the register are Christian, and 18.3% of registrants under FtP investigation are Christian. 20.0% of registrants on the register are Muslim, and 19.4% of registrants under FtP investigation are Muslim. 9.1% of registrants on the register are Hindu, and 9.7% of registrants under FtP investigation are Hindu.

Excluding those who prefer not to say, 23.6% of registrants under FtP investigation are Christian, and 25.0% are Muslim.

Fitness to practise - types of allegations

Appendix: Tables 37-42

When we receive a complaint about an individual registrant's fitness to practise or a student registrant's fitness to undertake training, we consider whether the type of allegation should be classified as 'clinical', 'conviction/caution', 'conduct', 'health', or 'mixed'.

These allegation types are distilled further in to sub-categories depending on the nature of the complaint, sometimes containing allegations that are mixed in nature (for example clinical and conduct).

Allegation Types

The most frequent allegations concern clinical practice (53.8%), followed by conduct (33.3%).

Sex

Like the past two years, male clinical cases make up the largest allegation category by sex (33.3%). For both the sexes, cases are mostly clinical and conduct-related; this has remained unchanged over the past three years.

Age

Clinical cases of 25-34 year-olds, clinical cases of 35-44 year-olds, and conduct cases of 25-34 year-olds make up the largest age group categories (16.1% each).

Ethnicity

Asian / Asian British clinical cases represent the largest allegation category by ethnicity (22.6%), followed by white EWSNI/Irish clinical cases (17.2%).

Religion

'No religion' and 'prefer not to say' clinical cases represent the largest allegation category by religion (12.9%).

Fitness to practise - Case Examiner outcomes

Appendix: Tables 43-48

Each case is considered by two case examiners (one registrant and one lay person), and they decide whether the allegation should be referred to the FtP Committee (FtPC) for a full hearing.

Sex

71.0% of registrants referred to the FtPC were male (85.7% in 2022).

Age

Like 2022, the age of registrant cases considered by case examiners is consistent with the register.

Ethnicity

Of the cases referred to the FtPC, 33.9% were white EWSNI/Irish (35.7% in 2022), and 43.6% were Asian / Asian British registrants (35.7% in 2022).

Most registrants referred to the FtPC were 35-44-year-old Asian / Asian British males.

Religion

The religion category shows a more even spread for cases.

Employees

Appendix: Tables 49-52

We are committed to promoting and developing equality and diversity in our work. Our objective is to behave consistently and fairly to everyone and ensure that we operate in a fair and transparent manner and in a way that is free from discrimination, harassment, and victimisation.

All employees are asked to complete an EDI monitoring form on appointment. The information requested covers sex, age, ethnicity, religion, disabilities, and pregnancy and maternity/paternity, and is managed by our Human Resources team. Case examiner data is not included in this data set.

Sex

62.8% of staff are female (67.5% in 2022).

Age

The age demographic of GOC employees matches the UK Labour Force Survey, in that the age groups with the highest proportion of people in employment are aged 25-34 and 35-44. There has been no significant change in the past three years.

Ethnicity

This has remained almost unchanged compared to the previous year. Approximately 87% of people in the UK are white British; 44.9% of employees are white.

Pregnancy and Maternity/Paternity Leave

As of 31 March 2023, fewer than ten employees were on maternity/paternity leave.

Disability

As of 31 March 2023, fewer than ten employees were disabled.

Religion

We lack almost half of the necessary data for this protected characteristic, so data is unreliable.

Members and workers

Appendix: Tables 53-57

Our members and workers are the members of Council and our Committees, as well as clinical advisors. Both Council and Committee members scrutinise the GOC, providing checks and balances on the organisation to protect the public. Council also sets the vision and strategy of the GOC.

There are limitations to the data below, in that only information about those who filled in our EDI form is shown. 50 out of 161 members/workers chose not to fill in the EDI form, so we only have data for 68.9% of our members/workers.

Sex

Of the members and workers who filled in our EDI form, 50.5% are female. 49.5% selected male. No-one selected prefer not to say.

Age

Of the members and workers who filled in our EDI form, the most populous age group is 55-64 (36.9%), followed by 45-54 (28.8%); 7.2% preferred not to say.

Ethnicity

Of the members and workers who filled in our EDI form, the largest ethnicity group is white EWSNI/Irish (82.0%); less than 1% preferred not to say.

Disability

Of the members and workers who filled in our EDI form, 8.1% declared that they have a disability, and 3.6% preferred not to say.

Sexual orientation

Of the members and workers who filled in our EDI form, 6.3% declared a sexuality other than heterosexual, and 3.6% preferred not to say.

Religion

Of the members and workers who filled in our EDI form, the largest ethnicity group is Christian, which is 45.9%.

Students

Appendix: Tables 58-65

Our Education Strategic Review has increased our focus on the outcomes of education and training, and how the profession is fit for the future.

This is the second year that we have published EDI data that has been provided for use by providers of GOC-approved qualifications. We plan to build upon these data sets so that we can learn more about the student journey, including enrolment, retention, and attainment.

This data only includes students studying at universities/colleges; to avoid duplication, it omits data provided by two providers of GOC-approved qualifications: ABDO Exams and the College of Optometrists. This means the total number of student optometrists and dispensing opticians will be lower than that obtained from registration data.

Sex

In the Academic Year (AY) 2021/22, 64.4% (64.9% in 2020/21) of students were female, slightly higher than the percentage of female registrants. Of all four individual courses, the range of female students is 58.6% to 66.7% (58.7% to 65.8% in 2020/21).

Age

In the AY 2021/22, the age group with the highest proportion of students is aged 20 and under (48.1%; 45.6% in 2020/21) and aged 21-24 (25.0%; 24.8% in 2020/21). The age profile of students enrolled in Independent Prescribing and Contact Lens courses is significantly older than the profile of those enrolled in Optometry and Dispensing, who are predominantly undergraduates. There has been no significant annual change.

Ethnicity

In the AY 2021/22, white students make up 32.5% of all students (34.0% in 2020/21) – compared with the register, which is 45.8%. The number of white registrants has decreased over past years, and data shows that this will most likely continue. Asian students make up 54.5% of all students (55.0% in 2020/21) – compared with the Asian / Asian British registrants on the

register, which is 35.4%.

As of 31 March 2023, 52.1% of student optometrists are Asian / Asian British, and 11.9% of student optometrists are white EWSNI/ Irish. Excluding students who prefer not to say, 70.2% of student optometrists are Asian / Asian British, and 16.0% of student optometrists are white EWSNI/Irish.

The number of Asian / Asian British registrants has increased over past years, and student data shows that this will most likely continue.

As of 31 March 2023, 18.2% of student dispensing opticians are Asian / Asian British, and 43.0% of student optometrists are white EWSNI/Irish. Excluding students who prefer not to say, 26.4% of student optometrists are Asian / Asian British, and 62.4% of student optometrists are white EWSNI/Irish.

In the AY 2021/22, most students are Asian / Asian British females aged 20 and under.

Disability

In the AY 2021/22, 7.6% (5.3% in 2020/21) of students across all courses have declared that they are disabled.

Religion

As of 31 March 2023, 41.1% of student optometrists are Muslim, and 11.0% of student optometrists are Christian. Excluding students who prefer not to say, 56.8% of student optometrists are Muslim, and 15.2% of student optometrists are Christian.

The number of Muslim optometrists has rapidly increased over past years, and student data shows that this will most likely continue.

As of 31 March 2023, 32.9% of student dispensing opticians declared no religion. Excluding students who prefer not to say, 51.1% of student optometrists declared no religion.

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Table 1: Registrants – Professional group – 2021 to 2023

	2021		2022		2023		2022 to 2023 % change	2021 to 2023 % change
Optometrists	16,663	56.8%	17,082	56.8%	17,428	57.2%	2.0%	4.6%
Dispensing opticians	7,108	24.2%	7,074	23.5%	6,904	22.7%	-2.4%	-2.9%
Student optometrists	4,258	14.5%	4,614	15.4%	4,906	16.1%	6.3%	15.2%
Student dispensing opticians	1,330	4.5%	1,290	4.3%	1,246	4.1%	-3.5%	-6.7%
All registrants (excluding body corporate)	**29,359**	**100.0%**	**30,060**	**100.0%**	**30,484**	**100.0%**	**1.4%**	**3.8%**

Table 2: Registrants – Sex – 31 March 2023

	Male			Female			Total	
	Total registrants		% of register	Total registrants		% of register	% of register	% of registrant type
Optometrists	6,712	22.0%	38.5%	10,716	35.2%	61.5%	17,428	57.2%
Dispensing opticians	2,386	7.8%	34.6%	4,518	14.8%	65.4%	6,904	22.7%
Student optometrists	1,606	5.3%	32.7%	3,300	10.8%	67.3%	4,906	16.1%
Student dispensing opticians	396	1.3%	31.8%	850	2.8%	68.2%	1,246	4.1%
All registrants	**11,100**	**36.4%**		**19,384**	**63.6%**		**30,484**	**100.0%**

Table 3: Registrants (excluding students) – Sex – 2021 to 2023

		2021		2022		2023		2022 to 2023 % change	2021 to 2023 % change
Male	Optometrists	6,605	27.8%	6,680	27.7%	6,712	22.0%	0.5%	1.6%
	Dispensing opticians	2,540	10.7%	2,482	10.3%	2,386	7.8%	-3.9%	-6.1%
Female	Optometrists	10,058	42.3%	10,402	43.1%	10,716	35.2%	3.0%	6.5%
	Dispensing opticians	4,568	19.2%	4,592	19.0%	4,518	14.8%	-1.6%	-1.1%
Total		**23,771**	**100.0%**	**24,156**	**100.0%**	**24,332**	**100.0%**	**0.7%**	**2.4%**

Table 4: Registrants – Specialty – Sex – 31 March 2023

	Contact Lens Specialty		Independent Prescribing Specialty		Additional Supply Specialty		Supplementary Prescribing Specialty		All specialties	
Female	700	60.2%	891	60.5%	896	60.5%	893	60.7%	**3,380**	**61.3%**
Male	463	39.8%	556	39.5%	561	39.5%	554	39.3%	**2,134**	**38.7%**
Total	**1,163**	**100.0%**	**1,447**	**100.0%**	**1,457**	**100.0%**	**1,447**	**100.0%**	**5,514**	**100.0%**

Table 5: Registrants (excluding students) – Age – 31 March 2023

	Optometrists		Dispensing opticians		All non-students	
Under 25	850	4.9%	76	1.1%	**926**	**3.8%**
25-34	5700	32.7%	1,491	21.6%	**7,191**	**29.6%**
35-44	5015	28.8%	2,082	30.2%	**7,098**	**29.2%**
45-54	3046	17.5%	1,595	23.1%	**4,641**	**19.1%**
55-64	2126	12.2%	1,341	19.4%	**3,467**	**14.3%**
65+	691	4.0%	318	4.6%	**1,009**	**4.2%**
Total	**17,428**	**100.0%**	**7,074**	**100.0%**	**24,332**	**100.0%**

Table 6: Registrants (excluding students) – Age – 31 March 2022

	Optometrists		Dispensing opticians		All non-students	
Under 25	831	4.9%	81	1.2%	**912**	**3.8%**
25-34	5,512	32.3%	1,574	22.3%	**7,086**	**29.3%**
35-44	4,972	29.1%	2,109	29.8%	**7,081**	**29.3%**
45-54	2,955	17.3%	1,638	23.2%	**4,593**	**19.0%**
55-64	2,103	12.3%	1,344	19.0%	**3,447**	**14.2%**
65+	709	4.2%	328	4.6%	**1,037**	**4.3%**
Total	**17,082**	**100.0%**	**7,074**	**100.0%**	**24,156**	**100.0%**

Table 7: Registrants (excluding students) – Age – 31 March 2021

	Optometrist		Dispensing opticians		All non-students	
Under 25	838	5.0%	102	1.4%	**940**	**4.0%**
25-34	5,346	32.1%	1,626	22.9%	**6,972**	**29.3%**
35-44	4,838	28.0%	2,064	29.0%	**6,902**	**29.0%**
45-54	2,857	17.2%	1,653	23.3%	**4,510**	**19.0%**
55-64	2,063	12.4%	1,353	19.0%	**3,416**	**14.4%**
65+	721	4.3%	310	4.4%	**1,031**	**4.3%**
Total	**16,663**	**100.0%**	**7,108**	**100.0%**	**23,771**	**100.0%**

Table 8: Registrants – Specialty – Age – 31 March 2023

	Under 25	25-34	35-44	45-54	55-64	65+	Total
Contact Lens Specialty	0	106	269	298	372	118	**1,163**
	0.0%	9.1%	23.1%	25.6%	32.0%	10.2%	**100.0%**
Independent Prescribing Specialty	0	401	517	316	185	28	**1,447**
	0.0%	25.7%	35.7%	21.8%	12.8%	1.9%	**100.0%**
Additional Supply Specialty	0	399	513	321	192	32	**1,457**
	0.0%	27.4%	35.2%	22.0%	13.2%	2.2%	**100.0%**
Supplementary Prescribing Specialty	0	400	514	318	186	29	**1,234**
	0.0%	27.6%	35.5%	22.0%	12.9%	2.0%	**100.0%**
Total	**0**	**1,306**	**1,813**	**1,253**	**935**	**207**	**5,514**
	0.0%	**23.7%**	**32.9%**	**22.7%**	**17.0%**	**3.8%**	**100.0%**

Table 9: Registrants – Ethnicity – 31 March 2023

	Optometrists		Dispensing opticians		Student optometrists		Student dispensing opticians		Total	
White EW-SNI/Irish	7,121	40.9%	4,789	69.4%	584	11.9%	536	43.0%	**13,030**	**42.7%**
Asian / Asian British	7,063	40.5%	955	13.8%	2,556	52.1%	227	18.2%	**10,801**	**35.4%**
Black / Black British	280	1.6%	69	1.0%	214	4.4%	23	1.9%	**586**	**1.9%**
Mixed/ Multiple	190	1.1%	67	1.0%	47	1.0%	16	1.3%	**320**	**1.1%**
Other	848	4.9%	321	4.7%	239	4.9%	57	4.6%	**1,465**	**4.8%**
Prefer not to say	1,926	11.1%	703	10.2%	1,266	27.9%	387	31.1%	**4,282**	**14.1%**
Total	**17,428**	**100.0%**	**6,904**	**100.0%**	**4,906**	**100.0%**	**1,246**	**100.0%**	**30,484**	**100.0%**

Table 10: Registrants – Ethnicity – 31 March 2022

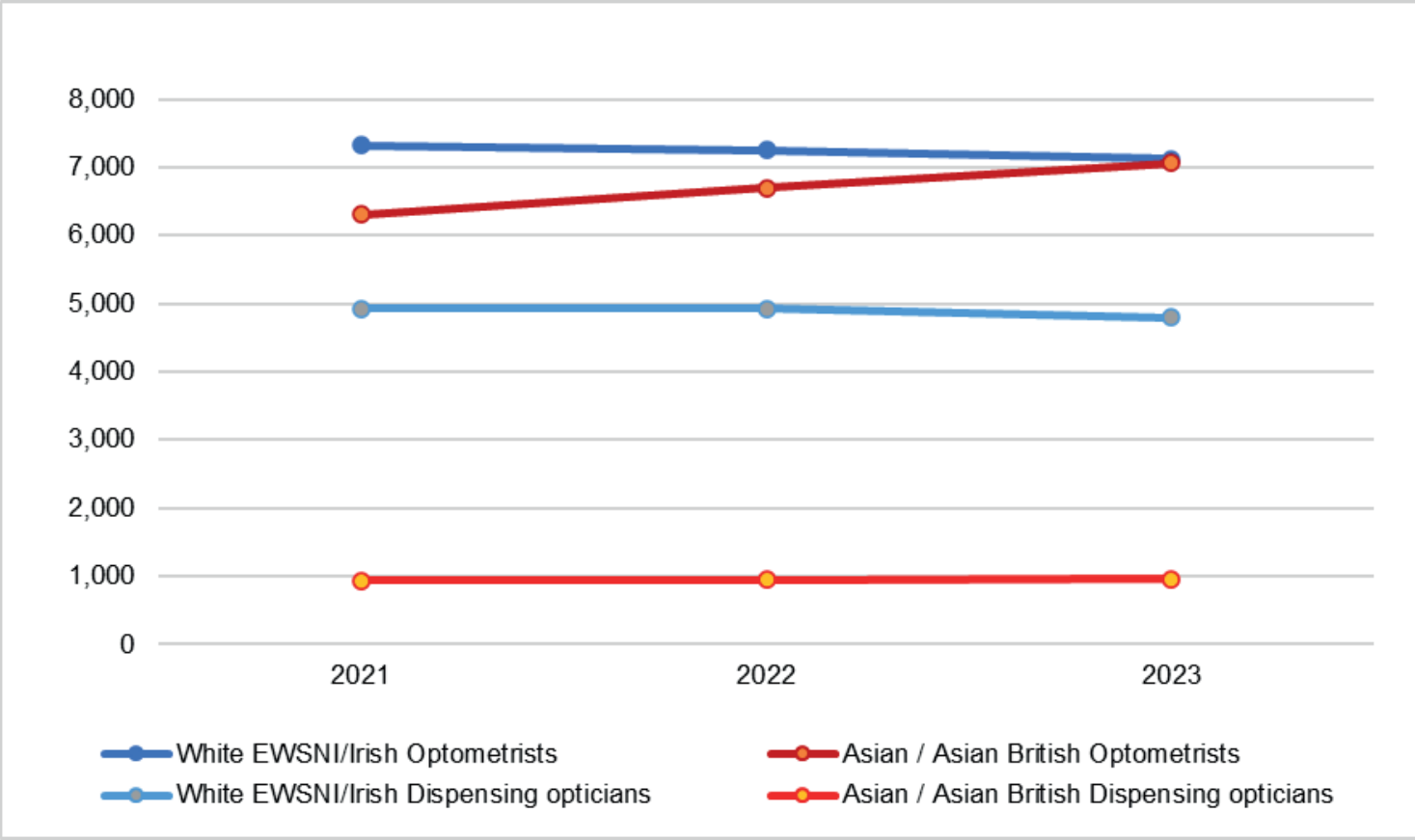
	Optometrists		Dispensing opticians		Student optometrists		Student dispensing opticians		Total	
White EWSNI/ Irish	7,247	42.4%	4,927	69.7%	579	12.6%	575	44.6%	**13,328**	**43.3%**
Asian / Asian British	6,691	39.2%	945	13.4%	2,311	50.1%	251	19.5%	**10,198**	**33.9%**
Black / Black British	252	1.5%	72	1.0%	146	3.2%	22	1.7%	**492**	**1.6%**
Mixed/Multiple	174	1.0%	65	0.9%	53	1.2%	12	0.9%	**304**	**1.0%**

Other	811	4.8%	318	4.5%	236	5.1%	60	4.7%	**1,425**	**4.7%**
Prefer not to say	1,907	11.2%	747	10.6%	1,289	27.9%	370	28.7%	**4,313**	**14.4%**
Total	**17,082**	**100.0%**	**7,074**	**100.0%**	**4,614**	**100.0%**	**1,290**	**100.0%**	**30,060**	**100.0%**

Table 11: Registrants – Ethnicity – 31 March 2021

	Optometrists		Dispensing opticians		Student optometrists		Student dispensing opticians		Total	
White EWSNI/ Irish	7,317	43.9%	4,929	69.3%	584	13.7%	661	49.7%	**13,491**	**46.0%**
Asian / Asian British	6,307	37.9%	938	13.2%	2,084	48.9%	283	21.3%	**9,612**	**32.7%**
Black / Black British	219	1.3%	71	1.0%	126	2.7%	31	2.3%	**447**	**1.5%**
Mixed/Multi-ple	154	0.9%	65	0.9%	60	1.4%	11	0.8%	**290**	**1.0%**
Other	765	4.6%	317	4.5%	231	5.4%	66	5.0%	**1,379**	**4.7%**
Prefer not to say	1,901	11.4%	788	11.1%	1,173	27.6%	278	20.9%	**4,140**	**14.1%**
Total	**16,663**	**100.0%**	**7,108**	**100.0%**	**4,258**	**100.0%**	**1,330**	**100.0%**	**29,359**	**100.0%**

Graph 1: Registrants (excluding students) – Number of White EWSNI/Irish vs. Number of Asian / Asian British – 2021 to 2023



Graph 2: Registrants (only students) – Number of White EWSNI/Irish vs. Number of Asian / Asian British – 2021 to 2023

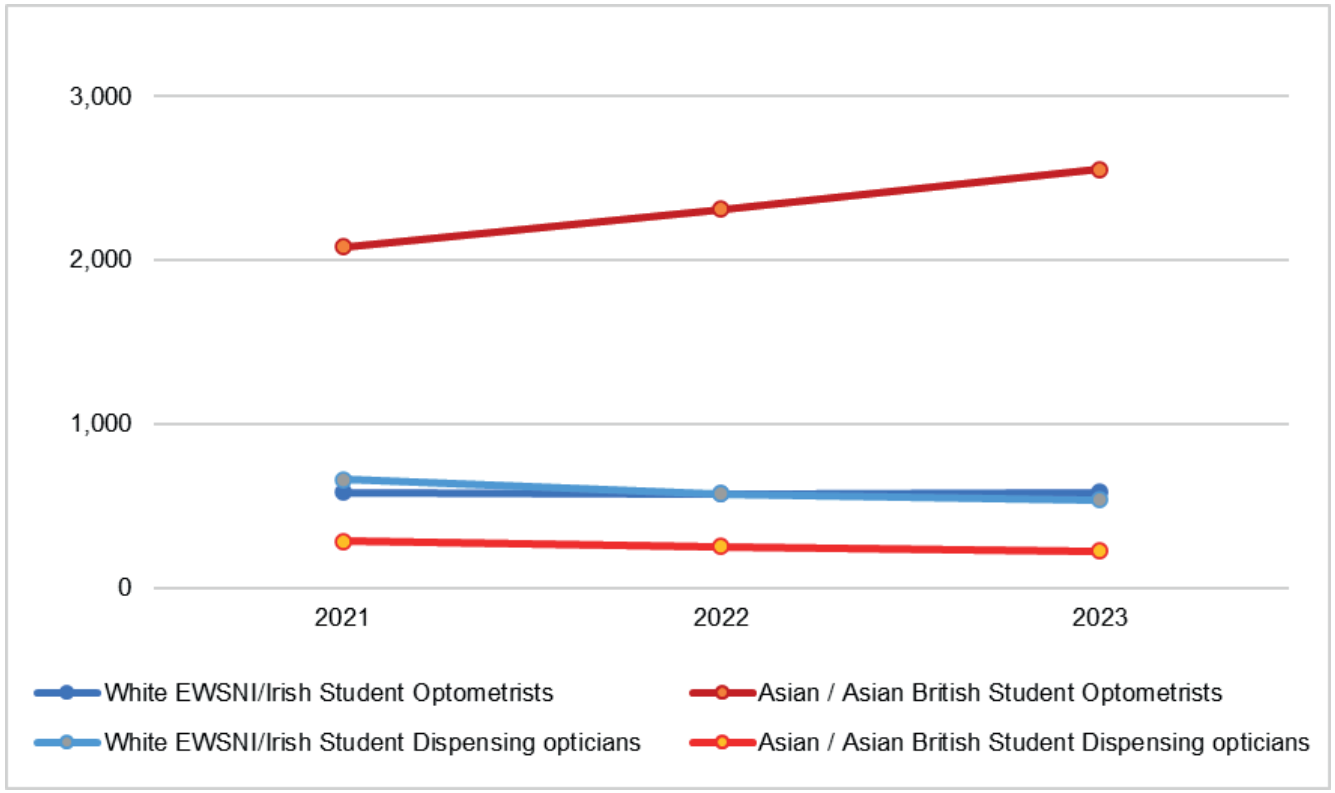


Table 12: Registrants – Specialty – Ethnicity – 31 March 2023

	White EWSNI/Irish		Black / Black British		Asian / Asian British		Mixed/ Multiple		Other ethnic group		Prefer not to say		Total	
Contact Lens Specialty	801	68.9%	8	0.7%	166	14.3%	4	0.3%	46	4.0%	138	11.9%	**1,163**	**100.0%**
Independent Prescribing Specialty	869	60.1%	13	0.9%	351	24.3%	15	1.0%	63	4.4%	136	9.4%	**1,447**	**100.0%**
Additional Supply Specialty	873	59.9%	13	0.9%	353	24.2%	15	1.0%	64	4.4%	139	9.5%	**1,447**	**100.0%**
Supplementary Prescribing Specialty	869	60.1%	13	0.9%	350	24.2%	15	1.0%	63	4.4%	137	9.5%	**1,447**	**100.0%**
Total	**3,412**	**61.9%**	**47**	**0.9%**	**1,220**	**22.1%**	**49**	**0.9%**	**236**	**4.3%**	**550**	**10.0%**	**5,514**	**100.0%**

Table 13: Registrants – Specialty – Ethnicity – 31 March 2022

	White EWSNI/ Irish		Black / Black British		Asian / Asian British		Mixed/ Multiple		Other ethnic group		Prefer not to say		Total	
Contact Lens Specialty	847	69.6%	9	0.7%	170	14.0%	3	0.3%	46	3.8%	142	11.7%	**1,217**	**100.0%**
Independent Prescribing Specialty	757	61.5%	13	1.1%	277	22.5%	13	1.1%	56	4.6%	115	9.3%	**1,231**	**100.0%**
Additional Supply Specialty	764	61.4%	13	1.0%	279	22.4%	13	1.0%	57	4.6%	119	9.6%	**1,245**	**100.0%**
Supplementary Prescribing Specialty	758	61.4%	13	1.1%	277	22.5%	13	1.1%	56	4.5%	117	9.5%	**1,234**	**100.0%**
Total	**2,126**	**63.5%**	**48**	**1.0%**	**1,003**	**20.4%**	**42**	**0.9%**	**215**	**4.4%**	**493**	**10.0%**	**4,927**	**100.0%**

Table 14: Registrants – Specialty – Ethnicity – 31 March 2021

	White EWSNI/ Irish		Black / Black British		Asian / Asian British		Mixed/ Multiple		Other ethnic group		Prefer not to say		Total	
Contact Lens Specialty	863	69.8%	10	0.8%	167	13.5%	3	0.2%	41	3.3%	153	12.4%	**1,237**	**100.0%**
Independent Prescribing Specialty	665	63.4%	9	0.9%	225	21.5%	11	1.1%	43	4.1%	96	9.2%	**1,049**	**100.0%**
Additional Supply Specialty	670	63.1%	9	0.9%	228	21.5%	11	1.0%	44	4.1%	100	9.4%	**1,062**	**100.0%**
Supplementary Prescribing Specialty	665	63.2%	9	0.9%	225	21.4%	11	1.1%	44	4.2%	98	9.3%	**1,052**	**100.0%**
Total	**2,863**	**65.1%**	**37**	**0.8%**	**845**	**19.2%**	**36**	**0.8%**	**172**	**3.9%**	**447**	**10.2%**	**4,400**	**100.0%**

Table 15: Registrants – Disability – 2021 to 2023

	2021		2022		2023	
Has a disability	250	0.9%	291	1.0%	319	1.1%
Does not have a disability	25,277	86.1%	25,750	85.7%	26,120	85.7%
Prefer not to say	3,832	13.1%	4,019	13.4%	4,045	13.3%
Total	**29,359**	**100.0%**	**30,060**	**100.0%**	**30,484**	**100.0%**

Table 16: Registrants – Sexual orientation – 2021 to 2023

	2021		2022		2023	
Heterosexual/ Straight	23,778	81.1%	24,322	80.9%	24,772	81.3%
Gay/Lesbian	342	1.2%	356	1.2%	353	1.2%
Bisexual	184	0.6%	224	0.8%	242	0.8%
Other	67	0.2%	69	0.2%	73	0.2%
Prefer not to say	4,988	17.0%	5,089	16.9%	5,044	16.6%
Total	**29,359**	**100.0%**	**30,060**	**100.0%**	**30,484**	**100.0%**

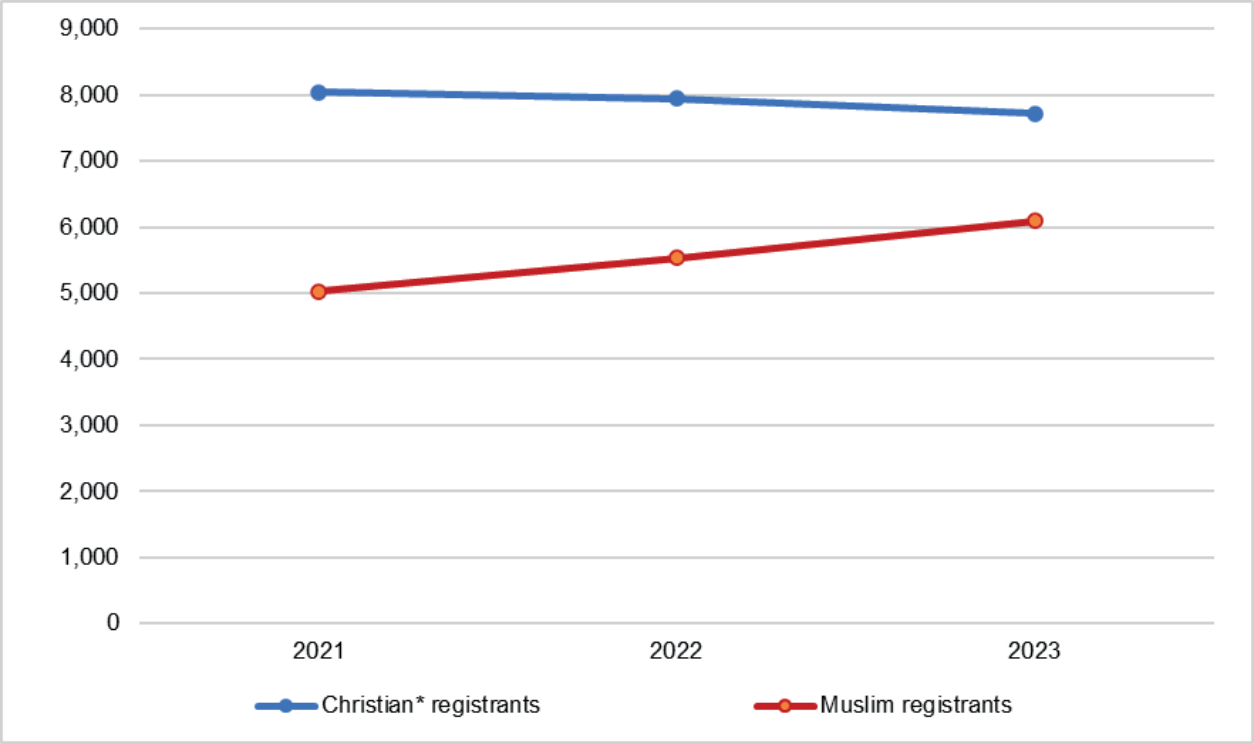
Table 17: Registrants – Pregnancy and maternity/paternity – 2021 to 2023

	2021		2022		2023	
Pregnant or on maternity/paternity leave	1,852	6.3%	1,863	6.2%	1,841	6.0%
Not pregnant or on maternity/paternity leave	21,343	72.7%	21,750	72.4%	22,111	72.5%
Prefer not to say	6,164	21.0%	6,447	21.5%	6,532	21.4%
Total	**29,359**	**100.0%**	**30,060**	**100.0%**	**30,484**	**100.0%**

Table 18: Registrants – Religion – 2021 to 2023

	2021		2022		2023	
Christian	8,044	27.4%	7,944	26.4%	7,723	25.3%
Muslim	5,027	17.1%	5,537	18.4%	6,089	20.0%
Hindu	2,696	9.2%	2,771	9.2%	2,787	9.1%
Sikh	1,199	4.1%	1,225	4.1%	1,272	4.2%
Jewish	281	1.0%	259	0.9%	250	0.8%
Buddhist	132	0.5%	138	0.5%	139	0.5%
Other	0	0.0%	0	0.0%	0	0.0%
No religion	6,404	21.8%	6,452	21.5%	6,545	21.5%
Prefer not to say	5,576	19.0%	5,734	19.1%	5,679	18.6%
Total	**29,359**	**100.0%**	**30,060**	**100.0%**	**30,484**	**100.0%**

Graph 3: Registrants – number of Christian compared to number of Muslim – 2021 to 2023



* includes Church of England, Catholic, Protestant, and all other Christian denominations.

Table 19: Registrants – Religion – 31 March 2023

	Optometrists		Dispensing Opticians		Student Optometrists		Student Dispensing Opticians		All	
Christian	4,722	27.1%	2,288	33.1%	540	11.0%	173	13.9%	**7,723**	**25.3%**
Muslim	3,493	20.0%	420	6.1%	2,017	41.1%	159	12.8%	**6,089**	**20.0%**
Hindu	2,109	12.1%	352	5.1%	289	5.9%	37	3.0%	**2,787**	**9.1%**
Sikh	950	5.5%	124	1.8%	179	3.6%	19	1.5%	**1,272**	**4.2%**
Other	278	1.6%	79	1.1%	28	0.6%	4	0.3%	**389**	**1.3%**
No religion	3,154	18.1%	2,481	35.9%	500	10.2%	410	32.9%	**6,545**	**21.5%**
Prefer not to say	2,722	15.6%	1,160	16.8%	1,353	27.6%	444	35.6%	**5,679**	**18.6%**
Total	**17,428**	**100.0%**	**6,904**	**100.0%**	**4,906**	**100.0%**	**1,246**	**100.0%**	**30,484**	**100.0%**

Table 20: Registrants – Nation – 31 March 2023*

	Optometrists		Dispensing opticians		Student optometrists		Student dispensing opticians		Total	
England	13,878	79.6%	5,961	86.3%	3,940	80.3%	1,034	83.0%	**24,813**	**81.4%**
Scotland	1,694	9.7%	482	7.0%	402	8.2%	101	8.1%	**2,679**	**8.8%**
Wales	853	4.9%	319	4.6%	252	5.1%	50	4.0%	**1,474**	**4.8%**
Northern Ireland	680	3.9%	84	1.2%	118	2.4%	24	1.9%	**906**	**3.0%**
Other	323	1.9%	58	0.8%	194	4.0%	37	3.0%	**612**	**2.0%**
Total	**17,428**	**100.0%**	**6,904**	**100.0%**	**4,906**	**100.0%**	**1,246**	**100.0%**	**30,484**	**100.0%**

***based on postcode data supplied at registration – this may not reflect where individual registrants work.**

Table 21: Registrants – Sex and Ethnicity – 31 March 2023

	White EWSNI/Irish		Non white EWSNI/Irish		Prefer not to say		Total	
Male	4,538	40.9%	4,641	41.8%	1,921	17.3%	11,100	100.0%
Female	8,492	43.8%	8,531	44.0%	2,361	12.2%	19,384	100.0%
Total	13,030	42.7%	13,172	43.2%	4,282	14.0%	30,484	100.0%

Table 22: Registrants – Age and Ethnicity – 31 March 2023

	White EWSNI/Irish		Non white EWSNI/Irish		Prefer not to say		Total	
Under 25	835	15.7%	3,252	61.1%	1,236	23.2%	**5,323**	**100.0%**
25-34	2,967	35.1%	4,548	53.8%	946	11.2%	**8,461**	**100.0%**
35-44	3,407	45.5%	3,171	42.3%	911	12.2%	**7,489**	**100.0%**
45-54	2,782	58.9%	1,366	28.9%	578	12.2%	**4,726**	**100.0%**
55-64	2,368	68.1%	632	18.2%	476	13.7%	**3,476**	**100.0%**
65+	671	66.5%	203	20.1%	135	13.4%	**1,009**	**100.0%**
Total	**13,030**	**42.7%**	**13,172**	**43.2%**	**4,282**	**14.0%**	**30,484**	**100.0%**

Fitness to Practise data

Table 23: Complainants – Sex – 2021 to 2023

	2021		2022		2023	
Male	124	38.8%	137	30.2%	116	25.8%
Female	160	50.0%	175	38.6%	178	39.6%
Not known	2	0.6%	141	31.1%	155	34.5%
N/A (e.g. referred by company)	34	10.6%	0	0.0%	0	0.0%
Total	**320**	**100.0%**	**453**	**100.0%**	**449**	**100.0%**

Table 24: Complainants – Location – 2021 to 2023

	2021		2022		2023	
England	184	57.5%	303	66.9%	369	82.2%
Scotland	16	5.0%	19	4.2%	31	6.9%
Wales	9	2.8%	11	2.4%	10	2.2%
Northern Ireland	5	1.6%	5	1.1%	1	0.2%
Not known / Other	106	33.1%	115	25.4%	38	8.5%
Total	**320**	**100.0%**	**453**	**100.0%**	**449**	**100.0%**

Table 25: Registrants under FtP investigation – Professional group – 2021 to 2023

	2021		2022		2023	
Optometrists	43	66.2%	74	69.2%	70	67.3%
Dispensing Opticians	8	12.3%	15	14.0%	13	12.5%
Student Optometrists	4	6.2%	4	3.7%	7	6.7%
Student Dispensing Opticians	4	6.2%	2	1.9%	3	2.9%
Subtotal	**59**	**90.8%**	**95**	**88.80%**	**93**	**89.4%**
Business Registrants	6	9.2%	12	11.2%	11	10.6%
Total FTP Investigations	**65**	**100.0%**	**107**	**100.0%**	**104**	**100.0%**

Table 26: Registrants under FtP investigation (excluding business registrants) – Professional group – 31 March 2023

	Total investigations	% of total FTP investigations against role	% of investigations against total registrant role	Total registrants	% of total registrants
Optometrists	70	75.3%	0.4%	17,428	57.2%
Dispensing Opticians	13	14.0%	0.2%	6,904	22.7%
Student Optometrists	7	7.5%	0.1%	4,906	16.1%
Student Dispensing Opticians	3	3.2%	0.2%	1,246	4.1%
All	**93**	**100.0%**	**0.3%**	**30,484**	**100.0%**

Table 27: Registrants under FtP investigation (excluding business registrants) – Specialty – 31 March 2023

	Total registrants	% of complaints against specialism	% of complaints against total registrant specialism	Total registrants with specialties	% of total registrants with specialties
Contact lens specialty	23	24.7%	0.1%	1,163	3.8%
Independent prescribing specialty	59*	63.4%	0.2%	1,447	4.8%
Additional supply specialty	59*	63.4%	0.2%	1,447	4.8%
Supplementary prescribing specialty	59*	63.4%	0.2%	1,447	4.8%
Total	**200**			**5,504**	**18.1%**

*These figures may be double-counted due to registrants being active in all three prescribing categories.

Table 28: Registrants under FtP investigation (excluding business registrants) – Sex – 31 March 2023

	Total	Male			Female		
		Under investigation		Register	Under investigation		Register
Optometrists	70	46	49.5%	38.5%	24	25.8%	61.5%
Dispensing Opticians	13	9	9.7%	34.6%	4	4.3%	65.4%
Student Optometrists	7	4	4.3%	32.7%	3	3.2%	67.3%
Student Dispensing Opticians	3	1	1.1%	31.8%	2	2.2%	68.2%
All	**93**	**60**	**64.5%**	**36.4%**	**33**	**35.5%**	**63.6%**

Table 29: Registrants under FtP investigation (excluding business registrants) – Age – 31 March 2023

	Under 25		25-34		35-44		45-54		55-64		65+		Total	
Optometrists	0	0.0%	24	25.8%	20	21.5%	16	17.2%	5	5.4%	5	5.4%	**70**	**75.3%**
Dispensing Opticians	1	1.1%	3	3.2%	5	5.4%	0	0.0%	3	3.2%	1	1.1%	**13**	**14.0%**
Student Optometrists	4	4.3%	3	3.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	**7**	**7.5%**
Student Dispensing Opticians	0	0.0%	2	2.2%	0	0.0%	1	1.1%	0	0.0%	0	0.0%	**3**	**3.2%**
All (minus body corporate)	**5**	**5.4%**	**32**	**34.4%**	**25**	**26.9%**	**17**	**18.3%**	**8**	**8.6%**	**6**	**6.5%**	**93**	**100.0%**

Table 30: Registrants under FtP investigation (excluding business registrants) – Ethnicity – 31 March 2023

	White EW-SNI/Irish		Asian / Asian British		Black / Black British		Mixed / Multiple		Other ethnic group		Prefer not to say		Total	
Optometrists	22	66.7%	28	75.7%	1	100.0%	1	100.0%	4	100.0%	14	82.4%	70	75.3%
Dispensing Opticians	7	21.2%	3	8.1%	0	0.0%	0	0.0%	0	0.0%	3	17.7%	13	14.0%
Student Optometrists	1	3.0%	6	16.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	7	7.5%
Student Dispensing Opticians	3	9.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	3	3.2%
All (minus body corporate)	**33**	**100.0%**	**37**	**100.0%**	**1**	**100.0%**	**1**	**100.0%**	**4**	**100.0%**	**17**	**100.0%**	**93**	**100.0%**

Table 31: Registrants under FtP investigation (excluding business registrants) – Ethnicity – 2021 to 2023

		Registrants under FTP investigation	Register
White EWSNI/Irish	2021	48%	46%
	2022	36%	44%
	2023	36%	43%
Asian / Asian British	2021	36%	33%
	2022	46%	34%
	2023	40%	35%
Black / Black British	2021	2%	2%
	2022	2%	2%
	2023	2%	2%
Mixed/Multiple	2021	0%	<1%
	2022	0%	1%
	2023	0%	<1%
Other	2021	2%	5%
	2022	6%	5%
	2023	6%	5%
Prefer not to say	2021	14%	14%
	2022	9%	14%
	2023	9%	14%
Total	**2021**	**100%**	**100%**
	2022	**100%**	**100%**
	2023	**100%**	**100%**

Graph 4: Registrants under FtP investigation (excluding business registrants) compared to the total register – % of White EWSNI/Irish vs. % of Asian / Asian British – 2021 to 2023

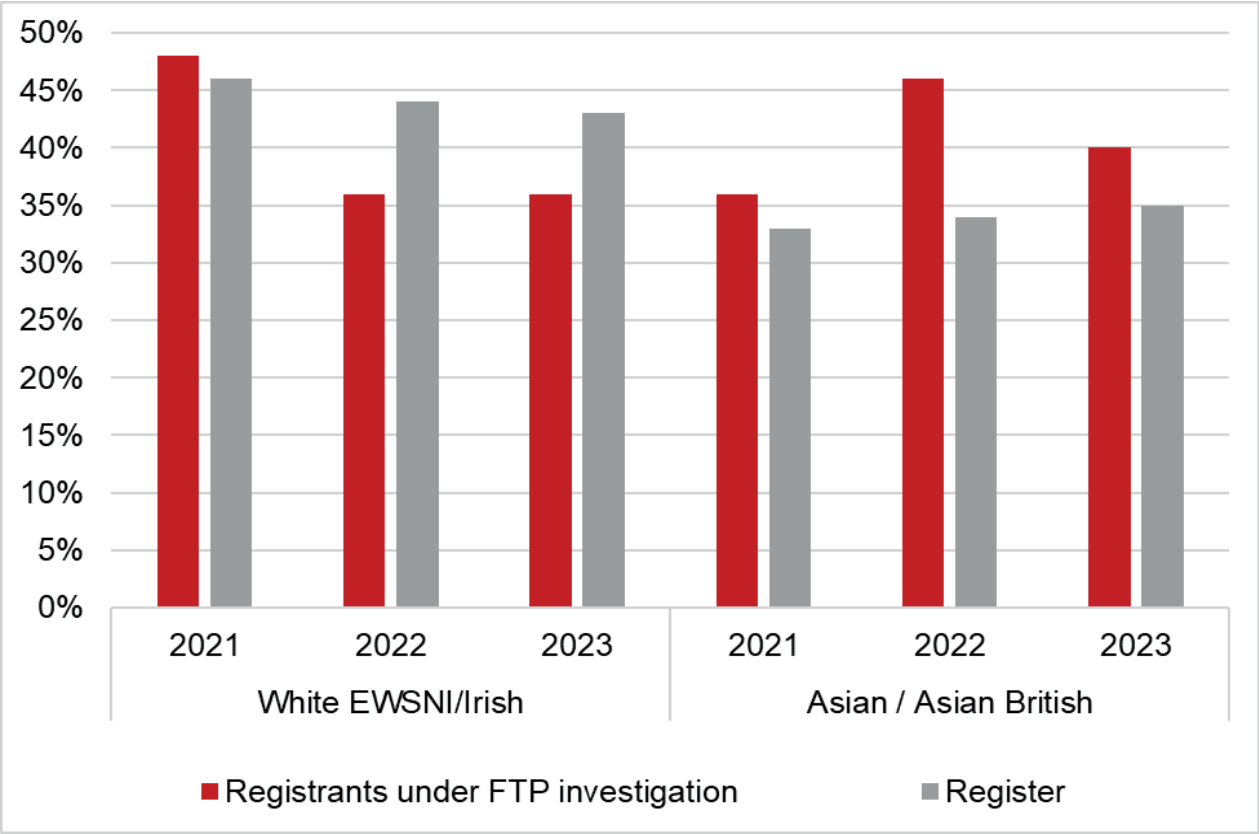


Table 32: Registrants under FtP investigation (excluding business registrants) – Pregnancy and maternity/paternity – 31 March 2023

	Optometrist		Dispensing optician		Student optometrist		Student dispensing optician		Total	
Pregnant or on maternity/paternity leave	2	2.9%	0	0.0%	0	0.0%	0	0.0%	**2**	**2.2%**
Not pregnant or on maternity/paternity leave	47	67.1%	10	76.9%	6	85.7%	2	66.7%	**65**	**69.9%**
Prefer not to say	21	30.0%	3	23.1%	1	14.3%	1	33.3%	**26**	**28.0%**
Total	**70**	**100.0%**	**13**	**100.0%**	**7**	**100.0%**	**3**	**100.0%**	**93**	**100.0%**

Table 33: Registrants under FtP investigation (excluding business registrants) – Religion – 31 March 2023

	Christian		Muslim		Hindu		Other		No religion		Prefer not to say		Total	
Optometrists	12	70.6%	12	66.7%	9	100.0%	5	71.4%	15	71.4%	17	81.0%	**70**	**75.3%**
Dispensing Opticians	3	17.7%	0	0.0%	0	0.0%	2	28.6%	4	19.1%	4	19.1%	**13**	**14.0%**
Student Optometrists	1	5.9%	6	33.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	**7**	**7.5%**
Student Dispensing Opticians	1	5.9%	0	0.0%	0	0.0%	0	0.0%	2	9.5%	0	0.0%	**3**	**3.2%**
All (minus body corporate)	**17**	**100.0%**	**18**	**100.0%**	**9**	**100.0%**	**7**	**100.0%**	**21**	**100.0%**	**21**	**100.0%**	**93**	**100.0%**

Table 34: Registrants under FtP investigation (excluding business registrants) – Religion – 2021 to 2023

	2021		2022		2023	
	Registrants under FTP investigation	Register	Registrants under FTP investigation	Register	Registrants under FTP investigation	Register
Christian	23.7%	27.4%	19.0%	26.4%	18.3%	25.3%
Muslim	18.6%	17.1%	16.8%	18.4%	19.4%	20.0%
Hindu	11.9%	9.2%	16.8%	9.2%	9.7%	9.1%
Other	6.8%	5.5%	12.6%	5.4%	7.5%	5.5%
No religion	28.8%	21.8%	21.1%	21.5%	24.7%	21.5%
Prefer not to say	10.2%	19.0%	13.7%	19.1%	24.7%	18.6%

Table 35: Registrants under FtP investigation (excluding business registrants) – Sex and Ethnicity – 2021 to 2023

	White EWSNI/Irish		Non white EWSNI/Irish		Prefer not to say		Total	
Male	20	33.3%	24	40.0%	16	26.7%	60	100.0%
Female	13	39.4%	19	57.6%	1	3.0%	33	100.0%
Total	**33**	**35.5%**	**43**	**46.2%**	**17**	**18.3%**	**93**	**100.0%**

Table 36: Registrants under FtP investigation (excluding business registrants) – Age and Ethnicity – 2021 to 2023

	White EWSNI/Irish		Non white EWSNI/Irish		Prefer not to say		Total	
Under 25	1	20.0%	4	80.0%	0	0.0%	**5**	**100.0%**
25-34	11	34.4%	16	50.0%	5	15.6%	**32**	**100.0%**
35-44	6	24.0%	10	40.0%	9	36.0%	**25**	**100.0%**
45-54	8	47.1%	8	47.1%	1	5.9%	**17**	**100.0%**
55-64	2	25.0%	4	50.0%	2	25.0%	**8**	**100.0%**
65+	5	83.3%	1	16.7%	0	0.0%	**6**	**100.0%**
Total	**33**	**35.5%**	**43**	**46.2%**	**17**	**18.3%**	**93**	**100.0%**

Table 37: Registrants under FtP investigation (excluding business registrants) – Allegation type – Professional group – 31 March 2023

	Optometrist		Dispensing Opticians		Student Optometrists		Student Dispensing Opticians		Total	
Clinical	46	65.7%	4	30.8%	0	0.0%	0	0.0%	**50**	**53.8%**
Conduct	16	22.9%	7	53.9%	5	71.4%	3	100.0%	**31**	**33.3%**
Conviction/ caution	0	0.0%	0	0.0%	0	0.0%	0	0.0%	**0**	**0.0%**
Health	5	7.1%	2	15.4%	2	28.6%	0	0.0%	**9**	**9.7%**
Mix	3	4.3%	0	0.0%	0	0.0%	0	0.0%	**3**	**3.2%**
All	**70**	**100.0%**	**13**	**100.0%**	**7**	**100.0%**	**3**	**100.0%**	**93**	**100.0%**

Table 38: Registrants under FtP investigation (excluding business registrants) – Allegation type – Sex – 2021 to 2023

	Female						Male					
	2021		2022		2023		2021		2022		2023	
Clinical	8	13.6%	17	17.9%	19	20.4%	18	30.5%	24	25.3%	31	33.3%
Conduct	1	1.7%	15	15.8%	8	8.6%	15	25.4%	15	15.8%	23	24.7%
Conviction/ caution	2	3.4%	0	0.0%	0	0.0%	4	6.8%	5	5.3%	0	0.0%
Health	1	1.7%	4	4.2%	6	6.5%	2	3.4%	5	5.3%	3	3.2%
Mix	2	3.4%	3	3.2%	0	0.0%	6	10.2%	7	7.4%	3	3.2%
All	**14**	**23.7%**	**39**	**41.1%**	**33**	**35.5%**	**45**	**76.3%**	**56**	**58.9%**	**60**	**58.9%**

Table 39: Registrants under FtP investigation (excluding business registrants) – Allegation type – Age – 31 March 2023

	Under 25		25-34		35-44		45-54		55-64		65+		Total	
Clinical	1	1.1%	15	16.1%	15	16.1%	11	11.8%	5	5.4%	3	3.2%	**50**	**53.8%**
Conduct	4	4.3%	15	16.1%	4	4.3%	5	5.4%	2	2.2%	1	1.1%	**31**	**33.3%**
Convic-tion/cau-tion	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	**0**	**0.0%**
Health	0	0.0%	2	2.2%	6	6.5%	1	1.1%	0	0.0%	0	0.0%	**9**	**9.7%**
Mix	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	1.1%	2	2.2%	**3**	**3.2%**
All	**5**	**5.4%**	**32**	**34.4%**	**25**	**26.9%**	**17**	**18.3%**	**8**	**8.6%**	**6**	**6.5%**	**93**	**100.0%**
All (minus students)	**1**	**1.1%**	**27**	**29.0%**	**25**	**26.9%**	**16**	**17.2%**	**8**	**8.6%**	**6**	**6.5%**	**83**	**89.3%**

Table 40: Registrants under FtP investigation (excluding business registrants) – Allegation type – Ethnicity – 31 March 2023

	Clinical		Conduct		Conviction/ caution		Health		Mix		Total	
White EWSNI/ Irish	16	32.0%	9	29.0%	0	0.0%	5	55.6%	3	100.0%	**33**	**35.5%**
Asian / Asian British	21	42.0%	12	38.7%	0	0.0%	4	44.4%	0	0.0%	**37**	**39.8%**
Black / Black British	0	0.0%	1	3.2%	0	0.0%	0	0.0%	0	0.0%	**1**	**1.1%**
Mixed/Multiple	1	2.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	**1**	**1.1%**
Other	3	6.0%	1	3.2%	0	0.0%	0	0.0%	0	0.0%	**4**	**4.3%**
Prefer not to say	9	18.0%	8	25.8%	0	0.0%	0	0.0%	0	0.0%	**17**	**18.3%**
Total	**50**	**100.0%**	**31**	**100.0%**	**0**	**0.0%**	**9**	**100.0%**	**3**	**100.0%**	**93**	**100.0%**

Table 41: Registrants under FtP investigation (excluding business registrants) – Allegation type – Religion – 31 March 2023

	Clinical		Conduct		Conviction/caution		Health		Mix		Total	
Christian	9	18.0%	5	16.1%	0	0.0%	2	22.2%	1	33.3%	**17**	**18.3%**
Muslim	7	14.0%	8	25.8%	0	0.0%	3	33.3%	0	0.0%	**18**	**19.4%**
Hindu	7	14.0%	2	6.5%	0	0.0%	0	0.0%	0	0.0%	**9**	**9.7%**
Other	3	6.0%	2	6.5%	0	0.0%	2	22.2%	0	0.0%	**7**	**7.5%**
No religion	12	24.0%	6	19.4%	0	0.0%	2	22.2%	1	33.3%	**21**	**22.6%**
Prefer not to say	12	24.0%	8	25.8%	0	0.0%	0	0.0%	1	33.3%	**21**	**22.6%**
Total	**50**	**100.0%**	**31**	**100.0%**	**0**	**0.0%**	**9**	**100.0%**	**3**	**100.0%**	**93**	**100.0%**

Table 42: Registrants under FtP investigation (excluding business registrants) – Allegation type – Nation – 31 March 2023

	Clinical		Conduct		Conviction/caution		Health		Mix		Total	
England	36	72.0%	31	100.0%	0	0.0%	6	66.7%	2	66.7%	75	80.7%
Scotland	14	28.0%	0	0.0%	0	0.0%	1	11.1%	1	33.3%	16	17.2%
Wales	0	0.0%	0	0.0%	0	0.0%	1	11.1%	0	0.0%	1	1.1%
Northern Ireland	0	0.0%	0	0.0%	0	0.0%	1	11.1%	0	0.0%	1	1.1%
Other	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	**50**	**100.0%**	**31**	**100.0%**	**0**	**0.0%**	**9**	**100.0%**	**3**	**100.0%**	**93**	**100.0%**

Table 43: Case Examiner decisions – Sex – 31 March 2023

	Male		Female		Total	
No further action (incl. advice/warning issued)	28	25.7%	19	17.4%	47	43.1%
Referral to Fitness to Practise Committee (FtPC)	44	40.4%	18	16.5%	62	56.9%
Total	**72**	**66.1%**	**37**	**33.9%**	**109**	**100.0%**

Table 44: Case Examiner decisions – Sex – 2021 to 2023

	Male			Female		
	2021	2022	2023	2021	2022	2023
No further action (incl. advice/warning issued)	65.1%	46.7%	38.9%	71.1%	84.6%	51.4%
Referral to Fitness to Practise Committee (FtPC)	34.9%	53.3%	61.1%	29.0%	15.4%	48.7%
Total	**63**	**45**	**72**	**38**	**26**	**37**

Table 45: Case Examiner decisions – Age – 31 March 2023

	No further action (incl. advice/ warning issued)		Referral to Fitness to Practise Committee (FtPC)		Total	
Under 25	1	50.0%	1	50.0%	2	100.0%
25-34	12	40.0%	18	60.0%	30	100.0%
35-44	11	33.3%	22	66.7%	33	100.0%
45-54	10	52.6%	9	47.4%	19	100.0%
55-64	12	66.7%	6	33.3%	18	100.0%
65+	1	14.3%	6	85.7%	7	100.0%
All	**47**	**43.1%**	**62**	**56.9%**	109	100.0%

Table 46: Case Examiner decisions – Ethnicity – 31 March 2023

	No further action (incl. advice/ warning issued)		Referral to Fitness to Practise Committee (FtPC)		Total	
White EWSNI/ Irish	19	40.4%	21	33.9%	40	36.7%
Asian / Asian British	21	44.7%	27	43.6%	48	44.0%
Black / Black British	0	0.0%	1	1.6%	1	0.9%
Mixed/Multiple	0	0.0%	0	0.0%	0	0.0%
Other	0	0.0%	5	8.1%	5	4.6%
Prefer not to say	7	14.9%	8	12.9%	15	13.8%
All	**47**	**100.0%**	**62**	**100.0%**	109	100.0%

Table 47: Case Examiner decisions – Ethnicity – 2021 to 2023

		No further action (incl. advice/ warning issued)	Referral to Fitness to Practise Committee (FtPC)	Total
White EWSNI/ Irish	2021	25	10	35
		71.4%	28.6%	100.0%
	2022	19	10	29
		65.5%	34.5%	100.0%
	2023	19	21	40
		47.5%	52.5%	100.0%
Asian / Asian British	2021	30	17	47
		63.8%	36.2%	100.0%
	2022	18	10	28
		64.3%	35.7%	100.0%
	2023	21	27	48
		43.8%	56.3%	100.0%
Black / Black British	2021	2	1	3
		66.7%	33.3%	100.0%
	2022	3	2	5
		60.0%	40.0%	100.0%
	2023	0	1	1
		0.0%	100.0%	100.0%

Mixed/ multiple	2021	2	0	2
		100.0%	0.0%	100.0%
	2022	1	0	1
		100.0%	0.0%	100.0%
	2023	0	0	0
		0.0%	0.0%	100.0%
Other	2021	1	1	2
		50.0%	50.0%	100.0%
	2022	1	0	1
		100.0%	0.0%	100.0%
	2023	0	5	5
		0.0%	100.0%	100.0%
Prefer not to say	2021	8	4	12
		66.7%	33.3%	100.0%
	2022	1	6	7
		14.3%	85.7%	100.0%
	2023	7	8	15
		46.7%	53.3%	100.0%
Total	**2021**	**68**	**33**	**101**
		67.3%	**32.7%**	**100.0%**
	2022	**43**	**28**	**71**
		60.6%	**39.4%**	**100.0%**
	2023	**47**	**62**	**109**
		43.1%	**56.9%**	**100.0%**

Table 48: Case Examiner decisions – Religion – 31 March 2023

	Christian		Muslim		Hindu		Other		No religion		Prefer not to say		Total	
No further action (incl. advice/ warning issued)	6	5.5%	7	6.4%	10	9.2%	3	2.8%	12	11.0%	9	8.3%	**47**	**43.1%**
Referral to Fitness to Practise Committee (FTPC)	8	7.3%	11	10.1%	8	7.3%	10	9.2%	16	14.7%	9	8.3%	**62**	**56.9%**
Total	**14**	**12.8%**	**18**	**16.5%**	**18**	**16.5%**	**13**	**11.9%**	**28**	**25.7%**	**18**	**16.5%**	**109**	**100.0%**

Employee data

Table 49: GOC Employees – Sex – 2021 to 2023

	2021		2022		2023	
Female	51	67.1%	52	67.5%	49	62.8%
Male	25	32.9%	25	32.5%	29	37.2%
Total	**76**	**100.0%**	**77**	**100.0%**	**78**	**100.0%**

Table 50: GOC Employees – Age – 2021 to 2023

	2021		2022		2023	
Under 25	3	4.0%	3	3.9%	2	2.6%
25-34	27	35.5%	27	35.1%	27	34.6%
35-44	25	32.9%	26	33.8%	29	37.2%
45-54	14	18.4%	14	18.2%	13	16.7%
55-64	7	9.2%	7	9.1%	7	9.0%
65+	0	0.0%	0	0.0%	0	0.0%
Total	**76**	**100.0%**	**77**	**100.0%**	**78**	**100.0%**

Table 51: GOC Employees – Ethnicity – 2021 to 2023

	2021		2022		2023	
White British	35	46.1%	35	45.5%	35	44.9%
Asian / Asian British	12	15.8%	13	16.9%	15	19.2%
Black / Black British	15	19.7%	16	20.8%	16	20.5%
Mixed/multiple	2	2.6%	3	3.9%	2	2.6%
Other	11	14.5%	9	11.7%	9	11.5%
Prefer not to say	1	1.3%	1	1.3%	1	1.3%
Total	**76**	**100.0%**	**77**	**100.0%**	**78**	**100.0%**

Table 52: GOC Employees – Religion – 2021 to 2023

	2021		2022		2023	
Christian	9	11.8%	12	15.6%	15	19.2%
Muslim	3	4.0%	4	5.2%	6	7.7%
Hindu	2	2.6%	2	2.6%	3	3.9%
Other	1	1.3%	3	3.9%	2	2.6%
No religion	12	15.8%	12	15.6%	16	20.5%
Prefer not to say	49	64.5%	44	57.1%	36	46.2%
Total	**76**	**100.0%**	**77**	**100.0%**	**78**	**100.0%**

Member and Worker data

Table 53: Members and Workers – Committee – 31 March 2023

	Lay	Registrant	Total
Council member	6	5	11
Committee member (includes Advisory Panel and independent members on Council committees; excludes Council members)	11	18	29
Hearing Panel	26	25	51
Education Visitor Panel or Clinical Advisor	6	14	20
Total responses received	**51**	**60**	**111**

Table 54: Members and Workers – Sex – 31 March 2023

	Male		Female		Total	
Council member	6	54.6%	5	45.5%	11	100.0%
Committee member (includes Advisory Panel and independent members on Council committees; excludes Council members)	17	58.6%	12	41.4%	29	100.0%
Hearing Panel	20	39.2%	31	60.8%	51	100.0%
Education Visitor Panel or Clinical Advisor	12	60.0%	8	40.0%	20	100.0%
Total responses received	**55**	**49.6%**	**56**	**50.5%**	**111**	**100.0%**

Table 55: Members and Workers – Age – 31 March 2023

	Under 25		25-34		35-44		45-54		55-64		65+		Prefer not to say		Total	
Council member	0	0.0%	0	0.0%	0	0.0%	2	9.1%	5	45.5%	4	36.4%	0	0.0%	11	100.0%
Committee member (includes Advisory Panel and independent members on Council committees; excludes Council members)	0	0.0%	1	3.4%	2	6.9%	10	34.5%	13	44.8%	1	3.4%	2	6.9%	29	100.0%
Hearing Panel	0	0.0%	1	2.0%	9	17.6%	12	23.5%	16	31.4%	7	13.7%	6	11.8%	51	100.0%
Education Visitor Panel or Clinical Advisor	0	0.0%	0	0.0%	4	20.0%	9	45.0%	7	35.0%	0	0.0%	0	0.0%	20	100.0%
Total responses received	**0**	**0.0%**	**2**	**1.8%**	**15**	**13.5%**	**33**	**29.7%**	**41**	**36.9%**	**12**	**10.8%**	**8**	**7.2%**	111	100.0%

Table 56: Members and Workers – Ethnicity – 31 March 2023

	White EW-SNI/Irish		Asian / Asian British		Black / Black British		Mixed/ Multiple		Other		Prefer not to say		Total	
Council member	10	90.9%	0	0.0%	0	0.0%	0	0.0%	1	9.1%	0	0.0%	**11**	**100.0%**
Committee member (includes Advisory Panel and independent members on Council committees; excludes Council members)	24	82.8%	5	17.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	**29**	**100.0%**
Hearing Panel	40	78.4%	6	11.8%	0	0.0%	1	2.0%	4	7.8%	0	0.0%	**51**	**100.0%**
Education Visitor Panel or Clinical Advisor	16	80.0%	1	5.0%	0	0.0%	0	0.0%	2	0.0%	1	5.0%	**20**	100.0%
Total responses received	**90**	**81.1%**	**12**	**10.8%**	**0**	**0.0%**	**1**	**0.9%**	**7**	**6.3%**	**1**	**0.9%**	111	100.0%

Table 57: Members and Workers – Religion – 31 March 2023

	Christian		Muslim		Hindu		Other		No religion		Prefer not to say		Total	
Council member	6	54.5%	0	0.0%	0	0.0%	1	9.1%	3	27.3%	1	9.1%	11	100.0%
Committee member (includes Advisory Panel and independent members on Council committees; excludes Council members)	18	62.1%	2	6.9%	1	3.5%	0	0.0%	8	27.6%	0	0.0%	29	100.0%
Hearing Panel	22	43.1%	2	3.9%	2	3.9%	6	11.8%	16	31.4%	3	5.9%	51	100.0%
Education Visitor Panel or Clinical Advisor	6	30.0%	0	0.0%	0	0.0%	1	5.0%	11	55.0%	2	1.0%	20	100.0%
Total responses received	**52**	**46.8%**	**4**	**3.6%**	**3**	**2.7%**	**8**	**7.2%**	**38**	**34.2%**	**6**	**5.4%**	111	100.0%

Student data

Table 58: Students – Sex – 2019/20 to 2021/22

	2019/20	2020/21	2021/22
Male	34.0%	35.1%	35.6%
Female	66.0%	64.9%	64.4%
Total	**100.0%**	**100.0%**	**100.0%**

Table 59: Students – Sex – 2019/20 to 2021/22

	2019/20				2020/21				2021/22			
	Male		Female		Male		Female		Male		Female	
Optometry	943	33.4%	1883	66.6%	1,077	34.2%	2,077	65.8%	1,161	35.5%	2,109	64.5%
Dispensing	371	35.2%	683	64.8%	278	36.7%	480	63.3%	262	34.4%	501	65.6%
Independent Prescribing	113	37.0%	193	63.0%	24	41.2%	34	58.7%	113	41.4%	159	58.6%
Contact lens	31	30.8%	70	69.2%	161	39.0%	251	61.0%	22	33.3%	44	66.7%
Total	**1,458**	**34.0%**	**2,829**	**66.0%**	**1,540**	**35.1%**	**2,842**	**64.9%**	**1,558**	**35.6%**	**2,813**	**64.4%**

Table 60: Students – Age – 2019/20 to 2021/22

Age Group	2019/20	2020/21	2021/22
20 and under	41.2%	45.6%	48.1%
21-24	31.0%	24.8%	25.0%
25-29	13.8%	11.9%	9.7%
30-39	14.0%	16.7%	11.3%
40+			5.5%
Not known	0.0%	9.9%	0.5%
Total	**100.0%**	**100.0%**	**100.0%**

Table 61: Students – Age – 2021/22

	20 and under	21-24	25-29	30-39	40+	Prefer not to say
Optometry	57.3%	26.4%	5.5%	7.1%	3.4%	0.4%
Dispensing	29.9%	29.2%	18.0%	19.5%	2.7%	0.7%
Independent Prescribing	0.0%	2.2%	31.2%	30.1%	36.6%	0.0%
Contact lens	0.0%	3.3%	36.0%	47.3%	13.3%	0.0%

Table 62: Students – Ethnicity – 2019/20 to 2021/22

	2019/20	2020/21	2021/22
White	36.9%	34.0%	32.5%
Black	3.4%	3.5%	3.8%
Asian	50.1%	55.0%	54.5%
Mixed	1.8%	1.9%	3.7%
Other	5.8%	3.3%	2.8%
Not known	3.0%	2.3%	2.7%
Total	**100.0%**	**100.0%**	**100.0%**

Table 63: Students – Ethnicity – 2021/22

	White / White British	Black / Black British	Asian / Asian British	Mixed/multiple	Other	Not known
Optometry	27.0%	3.9%	59.9%	3.6%	3.4%	2.1%
Dispensing	48.9%	4.1%	37.9%	5.3%	0.2%	3.8%
Independent Prescribing	40.6%	2.5%	45.2%	0.8%	3.0%	7.5%
Contact lens	81.7%	0.0%	18.3%	0.0%	0.0%	0.0%

Table 64: Students – Disability – 2019/20 to 2021/22

	2019/20	2020/21	2021/22
Known disability	5.1%	5.3%	7.6%
No known disability	94.9%	94.8%	89.5%
Prefer not to say	0.0%	0.0%	2.9%
Total	**100.0%**	**100.0%**	**100.0%**

Table 65: Students – Disability – 2021/22

	Known disability	No known disability	Prefer not to say
Optometry	7.5%	88.4%	3.8%
Dispensing	9.5%	90.5%	0.0%
Independent Prescribing	4.9%	94.1%	1.0%
Contact lens	0.0%	100.0%	0.0%

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