



Association of British
Dispensing Opticians



ASSOCIATION OF
OPTOMETRISTS



THE COLLEGE OF OPTOMETRISTS



Federation of Ophthalmic
and Dispensing Opticians

Care Quality Commission Enforcement Policy Consultation

Together ABDO, AOP, the College and FODO represent over 11,000 optometrists, over 5,300 dispensing opticians and optical businesses in the UK who provide high quality and accessible eye care services to the whole population.

Consultation question 1: Do you agree with our proposed principles and overall approach to enforcement?

Overall we support the principles and approach to enforcement and in particular the principle of proportionality. Regulation must be proportionate to the level of risk. Otherwise the system will fall into disrepute and the unnecessary burdens placed on providers could put at risk the availability of services.

Nowhere is this more true than in community optical practice where the risk of harm (and also the level of patient complaints) is extremely low. We have welcomed therefore the commitments from the Department of Health that the Care Quality Commission's enforcement policy will not apply to optical practices.

Optical practices are already regulated by the General Optical Council. Those providing NHS services (the vast majority) are also overseen by PCTs who have the power to terminate contracts with providers if necessary. In addition, practitioners are also regulated by either the General Optical or General Medical Councils and PCTs also have powers to remove them from their performers lists in certain situations. Further registration and regulation from the Care Quality Commission would add further costs and burdens to these businesses without any demonstrable benefits to patients or the public and we agree therefore with the Department of Health that such regulation would be unnecessary.

It follows from the above that we support the principles of proportionality in regulation and support incentives to improve services without enforcement wherever possible.

Consultation question 2: Do you agree with the circumstances and manner in which we intend to use each enforcement power?

We believe it is self-evident that there should be consistency applied across the sectors which are regulated by the Care Quality Commission, with a tailored approach to different types of providers.

Consultation question 3: Does the way in which we propose to work with other organisations ensure a coordinated approach to enforcement?

Yes, and although we would re-emphasise that, given the level of regulation currently applied to optical practices, there is no need for optical practices to be registered with or regulated by the CQC, we nevertheless fully support the principle of co-ordination and collaboration between the CQC and other regulators provided this is proportionate. Should an issue of concern relating to an optical practice arise during the course of the Care Quality Commission's wider functions therefore, we would expect this to be referred in the first instance to the provider concerned or, if necessary, to the appropriate authority either at local or national level.

We hope these comments are helpful.

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