

# Optical regulator welcomes Government reform proposal

**General Optical Council press release, 21 February 2007**

The General Optical Council (GOC) has welcomed the publication of the Government's White Paper on professional regulation.

Commenting on the proposals, GOC chairman Rosie Varley said:

"This White Paper signals an end to a long period of uncertainty for the regulation of healthcare professionals. For the first time since the conclusion of the Shipman Inquiry two years ago, we have a clear policy framework. We look forward to continuing to reform our role to improve public protection.

We welcome the Government's recognition of the crucial role regulators play in fostering and maintaining a system of safe, high quality healthcare in the UK. It is clear that regulators' core functions will continue to involve setting and maintaining standards of education and conduct, registering qualified professionals and ensuring their continued fitness to practise.

Many of the proposals in the White Paper are an endorsement the GOC reform agenda which has strengthened our role in public protection. We have already laid the groundwork for professional revalidation to be developed from the strength and success of our CET scheme. The steps we have taken to separate investigation and hearings functions, and to introduce student registration also give us a head start.

In our response to last year's consultation, we stressed the importance of common standards and principles for healthcare professionals across the UK. We also argued for proportionality in regulation, to recognise differences in size, practice settings and risk among the different professions. We look forward to continuing to work closely with the departments of health of each of the four UK countries, as well as the other regulators and the CHRE, to ensure that the principles set out in this Paper are developed and implemented effectively."

Rosie Varley welcomed and endorsed the principles that are to underpin statutory professional regulation, as set out in the Paper:

- Its overriding interest should be the safety and quality of the care that patients receive from health professionals.
- Professional regulation needs to sustain the confidence of both the public and the professions through demonstrable impartiality.
- Professional regulation should be as much about sustaining, improving and assuring the professional standards of the overwhelming majority of health professionals as it is about identifying and addressing poor practice or bad behaviour.
- Professional regulation should not create unnecessary burdens, but be proportionate to the risk it addresses and the benefit it brings.
- The system must ensure the strength and integrity of health professionals across the United Kingdom, but be sufficiently flexible to reflect the differences in England, Scotland, Wales and Northern Ireland.

Key proposals in Trust, Assurance and Safety, The Regulation of Health Professionals in the 21st Century include:

- Councils will, as a minimum, have equal numbers of lay and professional members. Members will be independently appointed. Councils will become smaller, and more 'board-like'.
- All regulated professions will need to put in place arrangements for revalidation of their professional registration, by periodically demonstrating their continued fitness to practise. The Department of Health (DH) will discuss with the GOC and the optical professions the most appropriate arrangements.

- Revalidation processes for self-employed contractors including optometrists will be carried out under the supervision of the NHS commissioning organisation or the regulator. Employees of approved bodies (e.g. NHS organisations) will be subject to employer arrangements for revalidation. Regulators will develop direct revalidation arrangements for other groups.
- Fitness to Practise (FTP) panels will use the civil standard of proof, with a 'sliding scale', rather than the criminal standard.
- The Council for Healthcare Regulatory Excellence (CHRE) will have enhanced powers to scrutinise the regulators' handling of FTP cases. CHRE will develop common protocols for local investigations.
- The DH will develop a strategy to support and rehabilitate healthcare professionals experiencing health problems including substance misuse.
- An independent adjudication body will be created for doctors. The body will recruit and train hearings panel members to sit on independent adjudication panels for other regulatory bodies. Other regulators may eventually choose to use the independent adjudication body for hearings.
- The non-medical regulatory bodies should continue to be responsible for the educational standards of the professions they regulate.
- Regulators will work with NHS employers to develop arrangements for language testing as part of selection, where appropriate.
- The CHRE will develop a single definition of 'good character' as a consistent basis for professional registration.
- Regulators will consider the regulation of students and present proposals by January 2008.
- The Government will establish a national advisory group on professional regulation to advise on the detailed implementation of the White Paper and the response to the Shipman Inquiry and related inquiries.

For further information please contact:

Kate Fielding  
Communications Manager  
General Optical Council  
t: 020 7307 3472  
m: 07763 210019  
e: [kfielding@optical.org](mailto:kfielding@optical.org)