

FODO STRATEGY MEETING, 23-24 APRIL 2018

FODO looks ahead with confidence and energy, committing to more primary eye care, integrating ophthalmic services across boundaries to meet public needs and push for lower VAT on optical goods to help patients.

At its annual strategy meeting, 23-24 April 2018, the FODO Group Board and industry leaders met to review eye health needs and to plan how FODO will support its members expand primary and community services to meet growing demand for high-quality eye health services both within and outside hospitals.

The event was launched with a review of the growing application of artificial intelligence in eye care, led by Professor James Wolffsohn of Aston University, followed by forensic analysis of the operating environments and trends for eye health both within and outside the NHS, in the Irish health service and across sensory impairment.

Pressures on practices

Time was spent considering the increasing burdens on optical and ophthalmology services, including from GDPR, tax and VAT, the now three-year freeze on NHS fees and rising infrastructure costs, and the squeeze on hospital services.

FODO will campaign for a post-Brexit reduction in VAT on optical devices and will call on others to join the campaign to improve access for patients and help develop sustainable local services. This will be particularly important in the light of the freeze on NHS voucher values over the past two years.

Workforce

Workforce shortages and response strategies were also discussed, including the FODO Educational Trust universities programmes, new teaching options for optometrists and dispensing opticians, and new ways of shaping education and employment across the sector to meet the needs and life choices of new graduates as well as the existing workforce.

Regulation of optical businesses

The Board spent time reviewing the regulatory environment for optical businesses, not least the revised standards expected to be proposed by the General Optical Council for the UK, which FODO hopes to be able to welcome and endorse.

These will no doubt require some effort to get right but, once finalised, ought to apply to all optical businesses carrying out restricted functions in order to fulfil the GOC's primary role to protect patients and the public.

Pending the opportunity for legislative change, which may not be possible for some time, FODO would support the UK governments making GOC registration a condition of providing GOS for all optical businesses.

Inefficiencies and worsening inequalities in NHS hearing care, due to bureaucratic and high cost IQIPS type models, un-evidenced based attempts at CCG rationing and system gaming provided salutary warnings about the risks of divided sectors. This is why the FODO Group in all its manifestations champions collective working and action, the work of the Optical Confederation, OS, OW and ONI and, in England, the Clinical Council. LOCSU, and the PEC model and pathways, as vehicles for collective strategic change.

Working for future success

Looking to the future, the FODO Group (FODO, NCHA and FODO Ireland) is committed to:

- fighting for GOS, and sight-testing and case-finding services, as the most accessible and costeffective eye health model for the UK
- expanding primary eye care to include MECS, referral refinement and potentially other procedures in every locality
- making community audiology the first call for all hearing needs (irrespective of type of provider as in optics)
- promoting new models of care, education and training across traditional boundaries
- supporting and expanding the workforce to take on new and enhanced roles in a wider range of settings and multidisciplinary teams
- supporting new career and employment options as the sector develops
- driving better care, outcomes and value through levelling playing fields, tackling market and service distortions, and 'calling out' protectionism and 'gaming' wherever these occur
- providing leadership, with sector partners, entrepreneurs and the new generation of thinkers, to drive beneficial change at every level.

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