

CHAIR'S ADDRESS - FODO AGM 2018

[Transcript as delivered to FODO AGM 2018, Tuesday 22 May 2018, at 199 Gloucester Terrace, London]

INTRODUCTION

“Welcome, Colleagues, to the 32nd FODO AGM.

“Interestingly, that makes us older than our Royal College of Ophthalmologist colleagues, who are celebrating their 30th year, but younger than Optrafair, which is celebrating its 40th anniversary this year. Many congratulations to them both.

MEMBERSHIP

“These are challenging but also exciting times for our sector bringing both major opportunities and some risks. As I say in the introduction to the FODO Annual Review, this has been another tough but successful year both for FODO and our members as we work together to steer through the challenges and to make the most of the opportunities.

“Thankfully, due to our clinical, service and business success, FODO members continue to expand and new members also continue to join us. We were particularly pleased this year to welcome the Hakim Group into membership, for instance.

“This is important because, as existing members know, although we work hard to support successful optical practices, level playing fields and opportunities for all, we are agnostic about the business models themselves. Our members recognise the need for a variety of efficient models in the sector to offer patient choice and locally-based service solutions.

“All types and sizes of business are welcome as FODO members, as are all kinds and types of optical and ophthalmic registrant. The only condition we impose is that members share our aims of:

- eye health for all
- high-quality services delivered by registered professionals and trained staff
- services that are close to, or in, patients’ own homes. (A little plug for domiciliary there! It seems we still have a hill to climb in persuading the GOC of the quality and value of our domiciliary services but many of us are trying to do just that so that everyone can get the care they need.)

“As members know very well, the priorities for us as a Group are

- high quality care
- quality of service
- the highest quality insurance and legal defence for all

- and value for money both for patients and the NHS.

FEES

“On this last point, it is disappointing - to say the least - to see that - once again for most of the UK – GOS fees have been frozen and any pretence at paying realistic fees for the care provided has been abandoned.

“What makes this doubly galling is that the NHS sight testing service is by far the most cost-effective public health service in the UK, with 21 million case-finding examinations each year and far fewer errors than - comparable national programmes.

PSCE/CAPITA

“Speaking of errors brings me naturally to NHS England’s catastrophic handling of the payments service to Capita, which is still ongoing two and half years on.

“The National Audit Office report earlier this month found that “NHS England did not adequately assess the risk of service failure and Capita failed to recognise the scale and nature of the task it was taking on”.

“This was despite our warnings - talk about ‘none so blind as those who will not see!’

“Looking ahead, the advice from the NAO to NHS England, which I paraphrase, is to:

- look at past performance when letting contracts
- listen to what the sector is telling you
- understand the service you are dealing with
- agree sensible KPIs
- manage the contract.

“It is to be hoped that NHS England has learned these lessons – especially about listening to the sector - as we hurtle towards what they like to call ‘e-GOS transformation’. Only time will tell. I hope too that everyone who is entitled to them has claimed late payment interest and submitted good will claims for the reimbursement they so rightly deserve.

DATA PROTECTION & GDPR

“Further disappointment has come in the shape of the government’s dismissing out-of-hand our arguments for not requiring a Data Protection Officer in every GOS practice, with all the costs that that implies for the sector, especially small businesses which we thought were a key plank in the government’s economic strategy.

“This is yet another unnecessary and unfunded burden on optical businesses. It is pure gold-plating and was not in the original GDPR. It has nothing whatsoever to do with genuine data or patient

protection but, like so much, in the NHS has everything to do with NHS bureaucratic convenience and back covering.

“We are actively engaging with the Information Commissioner’s Office to keep implementation as proportionate as possible for you. That takes time, so please bear with us as we work closely with OC colleagues on this to get the best possible outcome for all of us.

OPTICAL CONFEDERATION

“Again, as I say in the Annual Review, we are all stronger when we work together.

“And so, I am delighted that the Optical Confederation is still functioning as a concept and as a mode of working across the representative bodies.

“On major policy issues - such as GDPR and the GOC’s Education Review - sharing our intellectual resources is the logical thing to do. Combining our thinking, voice and efforts produces better results than any single organisation could achieve on its own, while also helping share the cost.

“That is the FODO way of doing things, and I am delighted to see this increasingly replicated at local level through FODO members’ input to optical representative committees and - in England now - through Primary Eye Care companies (PECs) and now the super-PECs.

“These new organisations have the potential to do great good for creating level playing fields and for minimising costs amongst providers. Like all human creations, they also have the potential to go wrong and become monsters of our own making.

“To avoid this, they need all the business, corporate and clinical governance expertise they can get, and nowhere are these in greater supply than amongst FODO members - so I would urge all members to get involved to make super-PECs or the super-PEC, if that is what happens, a success for everyone.

OPHTHALMOLOGY

“One of the great things about FODO is that, although our roots go back to the early 20th Century, the past is not a fetish for us. We learn from it, take what is best from it, and move onwards and upwards.

“In that regard it has been pleasing this year to see FODO moving further into the ophthalmology space, which is clearly where the future for many of our services lie, with an ageing population, acute capacity struggling and all four UK governments committed to moving care out of hospitals and into the community.

“NHS England, and Parliament have also been clear about:

- rapidly growing public health needs

- the need for early interventions
- the need for services to change to cope with long-term conditions and multiple pathologies
- the need to tackle sensory impairment - and I include both vision and hearing here –
- and the crucial role vision and hearing have in helping an ageing population maintain independence, social inclusion and social functioning for as long as possible - both outside and within care settings.

“Colleagues, as ever FODO and FODO members have been pioneers at the forefront of these changes. But we now need to step up a gear especially with our ophthalmology members

“If the UK is to meet its eye health - and hearing needs – over the next few years, we, with our Optical Confederation and wider partners, need to find the means to make these changes happen at a faster pace.

“That is why we have been actively involved this year with NHS England’s Ophthalmology Transformation Programme and the All Party Parliamentary Group’s (APPGs) inquiry into NHS eye care capacity as well as the NICE guidelines on glaucoma, cataract and macular disease, and - with partners at the Royal College - on a refractive surgery dataset. If successful, this could well be the model for other ophthalmic datasets and data bases which will underpin and drive improvements in good clinical care in the future.

“No-one expects any of this this to be easy. It is difficult and painstaking work and ranged against us are systems inertia, vested interests, normal human resistance to change, combined on occasion with lack of confidence amongst our own people. But FODO has never shirked from the difficult we would be failing in our duty to patients and our members if we did not try.

“And it is here that FODO can bring our unique expertise to the assistance of both the NHS and the UK health care system more widely.

“To do that, over the coming year, we need to do two things:

- build trust amongst the ophthalmology community, where traditionally this has been lacking, and
- establish new partnership and consensuses to take this work forward.

“We will be actively exploring these areas over the coming year both with our existing partners, and, we hope, some new ones, so watch this space.

FODO HEADQUARTERS

“Closer to home we will also be further integrating our HQ operations across optics, hearing and ophthalmology to accommodate these new priorities, as well as to continue to expand our member support.

“This is a key part of what we do. There will be no FODO, FODO Ireland, NCHA, or ophthalmology member who has needed our support over the past 10 years who has not found it invaluable and thanked their lucky stars they had the foresight to be members!

“Members, we thank you for all of your feedback, which really does mean a lot - as well as helping us in our efforts continually to improve what we do for you.

CODA

“And finally, on a personal note, I would like to thank and commend to you my colleagues on the FODO Board - especially our Vice-Chair, Claire, and past chair, Paul - who have stood in for me recently during a family crisis.

“And thank you also to the fantastic HQ team who are always working hard to ensure we can get on with what we do best - caring for people and successfully running our practices and businesses.

“FODO genuinely is a family and it is a privilege and pleasure to be part of that as your Chair. That is why I am standing again in this position and hope you will give me your trust again later in this AGM.

“In the meantime, I commend to you the Annual Review 2017-18 and thank you for listening.”

[ENDS]

Notes to editors

About FODO

FODO is the trade and professional body for optical businesses and practitioners in the UK. For us, maintaining and building successful practices and businesses is key to delivering high-quality care, customer service and improved eye health across the four UK nations.

Our national experts support the sector and our members with advice and guidance in all areas of optical business and professional practice. We also provide the best professional indemnity, legal defence and business insurance packages in the market.

As the representative voice of the majority of the optical market and NHS provision in the UK, we are a leading influence with government, regulators, the NHS and the voluntary sector.

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