

POLICY COMMITTEE

POLICIES AS REVISED AT POLICY COMMITTEE MEETING 4th APRIL 2016

1. The GOS Contract needs to be revised to take account of modern practice and more aligned with the models in Scotland and Wales.
2. Refraction should continue to be regulated under the Opticians Act.
3. Any ‘whistle blowing’ implemented by the GOC should be through a third party and not the GOC itself. Standards for students should only apply when they are dealing with patients.
4. The GOC should be challenged to police illegal practices in the supply of optical products in the UK.
5. Enhanced pathways should be agreed by all the relevant national bodies, nationally adopted and centrally funded.
 - In the meantime AIO will support LOC’s engaging with CCG’s to implement the LOCSU strategies.
 - In particular the Government should fund a National strategy for Optometrists to screen all groups of people who are at risk of glaucoma and direct referral pathways should be established from Optometrists to Ophthalmologists for patients where the disease has been detected.
 - Also, ocular hypertension and glaucoma in a stable stage should be managed by Optometrists in a primary care situation with a seamless system of referral back when significant changes are found.
6. Adjustable focus eye ware should only be supplied by Optometrists or Dispensing Opticians in their practices.
7. Dispensing Opticians should receive the same financial support for CET as Optometrists
8. AIO strongly opposes any commercial pressures which compromise the delivery of professional clinical service by its members in the course of their professional work.
9. AIO advocates the introduction of a Doctor of Optometry Degree and use of the term Doctor of Optometry for those holding appropriate higher qualifications. (Further discussions with the academic community are required)
10. Any national contracts concerning vision should be awarded in the best interests of patients and not necessarily to the lowest cost tender.