

Invitation to tender (ITT): Patient and public views on refraction

Summary

1. We are looking to commission deliberative research to understand the views of patients and the general public on whether dispensing opticians should be permitted to carry out refraction¹ for the purposes of the sight test, and, if so, under what circumstances and regulatory controls. This will involve designing and conducting the research, then analysing and reporting on the findings.
2. The research, alongside other evidence on this topic, will inform the GOC's policy development as part of its call for evidence on legislative reform project.
3. The aim of the research is to help us better understand:
 - views and perceptions of both patients and the public on these issues, including on the core question of whether dispensing opticians should be allowed to refract for the purposes of the sight test;
 - if dispensing opticians were permitted to refract, should this be limited in some way, e.g. only under the supervision² of an optometrist or registered medical practitioner; and
 - what additional regulatory safeguards would give patients and the public confidence in the system and mitigate any risks.
4. We have an approved budget of up to a total cost of **£40,000 including VAT and all other contractor costs**. Proposals over £40,000 will not be considered.
5. **The deadline for tenders is 5pm on 1 November 2022.**

About the GOC

6. We are the regulator for the optical professions in the UK and our mission is to protect and promote the health and safety of the public. We currently register around 33,000 optometrists, dispensing opticians, student optometrists, student

¹ Refraction as part of the sight test refers to a check of the patient's visual acuity i.e. how well they can see, and whether any corrective measures such as spectacles or contact lenses are required. Different forms of refraction include objective refraction (when the refractive error of an eye is determined without input by the patient), subjective refraction (a clinical examination to determine the combination of lenses that will provide the best corrected visual acuity) and over-refraction (checking the fit of a contact lens). We are concerned with the first two forms of refraction only.

² Supervision means that the supervisor must be on the premises, exercising their professional judgement as a clinician and in a position to intervene in the patient's interests.

dispensing opticians and optical businesses. For more information, please visit our website: <https://www.optical.org/>

7. Optometrists examine eyes, test sight, and prescribe spectacles or contact lenses for those who need them. They are also qualified to fit spectacles and contact lenses, give advice on visual problems and detect any ocular disease or abnormality, referring the patient to a medical practitioner if necessary. A fully qualified optometrist can also gain specialty qualifications in independent prescribing.
8. A dispensing optician advises on, fits and supplies spectacles after taking account of each patient's visual, vocational and lifestyle needs. A fully qualified dispensing optician can undertake additional specialist training to fit and supply contact lenses.
9. We launched our [Strategic Plan 'Fit for the Future 2020-2025'](#) on 1 April 2020. This outlines what we plan to do over the next five years. The three main strategic objectives for the next five years are:
 - delivering world-class regulatory practice;
 - transforming customer service; and
 - building a culture of continuous improvement.
10. As part of this strategy, in March 2022 we launched a [call for evidence](#) on possible reform to the Opticians Act 1989. In this document, we also asked for views on amending or removing a [policy statement](#) issued by the GOC in 2013 so that dispensing opticians can refract for the purposes of the sight test. Based on an initial analysis of responses, in September 2022 our governing Council agreed to commission patient and public research on this issue to inform its decision-making. In addition to the research in this invitation to tender (ITT), we will separately commission research on clinical and international perspectives on this matter.

Research issue and aims

11. It is generally recommended that people have a sight test every two years. Sight tests (called eye examinations in Scotland) broadly consist of two aspects. Refraction refers to a check of the patient's visual acuity i.e. how well they can see, and whether any corrective measures such as spectacles or contact lenses are required. The second aspect is to identify the presence of possible pathologies (eye health conditions like cataracts and glaucoma). The sight test can also reveal signs of other health conditions, such as diabetes.
12. Under current legislation only optometrists or registered medical practitioners can test sight (with special provision for students). Currently, no part of the sight test can be delegated to a dispensing optician or contact lens optician, even under supervision. However, aspects of sight testing can be undertaken by others for purposes other than the sight test, for example, dispensing opticians undertaking refraction to check accuracy of lenses, or optical

assistants completing triage checks prior to the sight test. The GOC's policy statement in 2013 set out our position on this.

13. Some consider that the current situation is too prescriptive, for example, in terms of who can carry out a sight test and how this must be done. The specific policy issue for this ITT is whether dispensing opticians should be permitted to perform refraction for the purposes of the sight test. Should this principle be accepted, there are a series of associated questions: what types of refraction, under what circumstances, whether this activity should be limited in some way (e.g. delegated or only when supervised by an optometrist or registered medical practitioner), and whether additional safeguards should be introduced (e.g. training).
14. The issue has been contentious in responses to the GOC's call for evidence. To offer a flavour of the discussion, supporters of allowing dispensing opticians to refract point to the need to free up optometrists to deliver more medical care in high street practices in the context of long hospital waiting lists. Also, the trend towards a multidisciplinary approach to patient care where healthcare professionals work together under oversight. They also suggest this would improve access to eye care (e.g. in rural areas) and widen patient choice.
15. By contrast, opponents of allowing dispensing opticians to refract warn that it could lead to the sight test being split between refraction and eye health – people would be discouraged from having a full eye examination and therefore eye disease and/or other health conditions would go undetected. Also, they suggest that dispensing opticians lack the necessary qualifications, training or experience. Further, only businesses would benefit by keeping labour costs down and the move would not benefit patients – commercial interests could force fast refractions risking things being missed.
16. The perspectives of patients and the public is largely missing from this debate, and we wish to hear their views directly. The patient perspective includes people who have recently had their sight tested and/or are managing common eye conditions. Understanding the views of the general public (including those who are not regular users of optical services) is also important since this may reveal consumer considerations (e.g. convenience, choice, affordability) that have hitherto been largely missing from submissions to our call for evidence.
17. In short, we would like the research to help us better understand:
 - views and perceptions of both patients and the public on these issues, including on the core question of whether dispensing opticians should be allowed to refract for the purposes of the sight test;
 - if dispensing opticians were permitted to refract, should this be limited in some way, e.g. only under the supervision of an optometrist or registered medical practitioner; and
 - what additional regulatory safeguards would give patients and the public confidence in the system and mitigate any risks.

Methodology

18. We would like the appointed agency to advise on the best methodology. Initially, we have identified deliberative research since this approach gives people the time, information and opportunity they need to reach informed decisions about complex policy issues where there are different points of view. We are open to alternative or additional suggestions.
19. Stimulus materials will be needed to help explain the issues. While the GOC can provide technical knowledge, we would expect the agency to produce materials that participants can easily understand and engage with.
20. We wish the sample to be diverse in terms of age, gender, socio-economic background and ethnicity. As above, the sample should be selected to include two perspectives: a mix of the general public (including people who have had their sight tested within the last two years and those who have not); and people with common eye conditions (e.g. cataracts, glaucoma). The sample should include people in vulnerable circumstances due to eye health or other factors. The GOC has contacts at eye care charities who may be able to assist with recruitment of people with specific eye care conditions.
21. The GOC is a UK-wide regulator, and it is important that the sample includes all four nations of the UK. Please bear in mind that while professional regulation is a reserved matter and there is a consistent UK-wide approach, requirements of government-funded sight tests vary somewhat between the four nations. This means aspects of the public experience of sight tests may differ across the UK.

Outputs

22. The appointed agency will be expected to deliver the following:
 - design questions based on the research aims;
 - data collection;
 - data processing;
 - rigorous analysis of findings and drawing conclusions for the GOC;
 - production of a detailed written report (template to be agreed in advance with the GOC and include infographics) to publishable standards, including annexes and data tables as necessary;
 - preparation and delivery of a presentation of the findings and conclusions to Council; and
 - delivery of all background and foreground data to the GOC on fulfilment of the contract.

Budget

23. We have an approved budget of up to a total cost of £40,000 including VAT and all other contractor costs. Proposals over £40,000 will not be considered.

Timetable

24. The proposed timetable for this project is outlined below. We welcome comments as to whether this is a realistic timetable. (We reserve the right to alter this timetable.)

Task	Date
Bid submitted by agency	5pm, 1 November 2022
Selection process by GOC	w/c 8 November 2022
Draft report submitted by agency	30 January 2023
Final report submitted by agency	13 February 2023
Presentation of findings to our Council by agency	March 2023 (TBC)

Proposals

25. Proposals should clearly state how you would meet the requirements set out in this ITT. They should include:

- evidence of an understanding of our requirements;
- details of the project team, relevant skills and experience (including examples of relevant projects previously conducted) and specific project roles;
- details of any conflicts of interest that the agency or project team members may have relevant to this work and how these would be managed;
- details of any information or assistance that will be required from the GOC;
- details of how this project will be delivered, including the project management procedures and a research timetable for the different stages;
- an assessment of the key risks and how these will be mitigated;
- a comprehensive itemised cost for all aspects of the work and total cost; and
- a breakdown of different elements of the research and costs to help us prioritise which methodologies to focus on.

Selection process

26. Tenders will be assessed with reference to the following criteria:

- extent to which proposals demonstrate understanding of the brief, and meet its stated objectives in terms of research design;

- the tenderer having appropriate skills, qualifications and a track record in delivering similar projects; and
 - the ability of the tenderer to deliver this project within the specified timescale and at reasonable costs.
27. All work should comply with the Code of Conduct of the Market Research Society.
 28. The Council reserves the right to pay only for work it deems to be satisfactorily completed.
 29. The Council is not bound to accept the lowest offer or any tender.
 30. Following assessment of proposals, we reserve the right to request of selected potential contractors a further tender, proposals or pricing details.

GOC contacts

31. Please send tenders and direct any questions to Angharad Jones (Policy Manager) by email to policy@optical.org

Data and Freedom of Information

32. The Freedom of Information Act 2000 (“FOIA”) applies to the GOC and potential contractors should be aware of our obligations and responsibilities under FOIA to disclose, on written request, recorded information held by the GOC. Information provided by you in connection with this proposal, or with any contract that may be awarded as a result of this exercise, may therefore have to be disclosed in response to such a FOIA request, unless we decide that one of the statutory exemptions under the FOIA applies. If you wish to designate information supplied as part of this response as confidential, or if you believe that its disclosure would be prejudicial to any person’s commercial interests, you must provide clear and specific detail as to the precise information involved. Such designation alone may not prevent disclosure if in our reasonable opinion publication is required by applicable legislation or Government policy or where disclosure is required by the Information Commissioner.

Warnings/Disclaimer

33. Offering an inducement of any kind in relation to obtaining this contract with the GOC will disqualify your proposal from being considered. You must not tell anyone else what your proposal or tender price is or will be, before the deadline for proposals. You must not try to obtain any information about anyone else's proposal or make any arrangements with another organisation about whether or not they should make a proposal, or about their or your tender price. Failure to comply with any of these conditions may disqualify your proposal.
34. Nothing contained in this ITT or any other communication made between the GOC or our representatives and any person shall constitute an agreement, contract or representation (except for the formal written contract between the

GOC and our preferred supplier). Receipt by the tenderer of this ITT does not imply the existence of a contract or commitment by or with the GOC for any purpose and tenderers should note that this ITT may not result in the award of any business.

35. It is the responsibility of tenderers to obtain for themselves all information necessary for the preparation of their response to this ITT. The information contained in this ITT and the supporting documents and in any related written or oral communication is believed to be correct at the time of publication. The GOC will not accept any liability for its accuracy, adequacy or completeness and no warranty is given as such. We reserve the right to change any aspect of, or cease, the tender process at any time.
36. By issuing this ITT the GOC is not bound in any way and does not have to accept the lowest or any tender.
37. You will not be entitled to claim from us any costs or expenses which you may incur in preparing your tender whether or not your tender is successful and regardless of whether a contract is awarded.