Public perceptions of the GOC's standards

Research with patients and the wider UK public to better understand views on the GOC's standards for optometrists, dispensing opticians and optical students revealed perceptions in four key topic areas.



Online conduct and use of social media

Appropriate online conduct and social media use was considered particularly necessary in public-facing professions requiring public trust.

It was felt that the existing standards adequately addressed this area.



Maintaining boundaries

Compassionate and friendly service was expected, but appropriate boundaries – during and outside appointments – were seen as key for patient wellbeing.

The research suggests the existing standards could be expanded to consider the balance between the commercial sales and patient-care functions of optical care.



Use of technology

Potential changes to how technology is used in eye care were welcomed, with many benefits perceived, but human interactions were still seen as important.

It was felt the existing standards could be expanded to consider how the increased use of technology may impact conduct and care.



Delegation and supervision

Delegation in optical care was viewed positively, while in-person supervision was considered crucial.

It was felt that the existing standards adequately addressed this area, but not if remote supervision was introduced in future.

Public perceptions of appropriate boundaries in eye care

Research conducted with patients and the wider UK public suggests that the close and intimate nature of eye care may require particular sensitivity around maintaining appropriate boundaries. Respondents discussed how a compassionate, friendly and respectful nature contributed towards a positive and less stressful experience, but that maintaining appropriate boundaries – both during and outside of appointments – was still key for patient wellbeing. Insights are demonstrated here using a patient's typical journey.

Type of boundary



Conversation: Some level of small talk was seen as appropriate, but overly personal topics should be avoided.



Physical: This was felt to be important due to the fairly intimate nature of eye examinations.



Relationship: Anything that may lead to treating a patient preferentially or inappropriately could cross a boundary.



Sexual or sensitive: There was strong feeling that unwelcome personal interactions, in person or otherwise, crossed a boundary.



Colleagues: Respondents felt strongly about showing respect to colleagues.



Commercial vs. patient care: Some discussed the balance between the functions of patient care and sales.

Points in the patient's journey when respondents suggested these boundaries should be considered:

Before a visit	Arrival and waiting	During an appointment	After a visit

Public perceptions of technology use in eye care

Research conducted with patients and the wider UK public sought to understand how potential changes to the use of technology in the provision of eye care were perceived.

Potential changes to technology use

Responses

Key considerations



Artificial intelligence in eye care could help optical professionals diagnose eye conditions or identify whether a patient might develop them in future.

Research respondents were positive about AI – feeling it could make eye care proactive rather than reactive by enabling pre-emptive or earlier diagnosis of conditions.



Patient choice is important. For example, online consultations may not work for all due to variable internet connections and digital literacy.



Greater use of machines to test eyesight or diagnose conditions, such as using an OCT machine to take a 3D picture of the back of a patient's eye.

Respondents were positive about the greater use of machines – feeling it could improve the quality of care – while advances in technology could increase the likelihood of quicker and more accurate diagnoses.



The human element of care is still crucial to patient comfort.



Technology should be used to support optical professionals, not replace them.



The provision of online consultations with optical professionals, rather than in person.

While perceiving benefits in quicker and easier access to appointments, respondents were concerned that the lack of human interaction could lead to lower quality of care.



Training for optical professionals should be up-to-date to reflect increased technology usage.

Public perceptions of the GOC's standards

Research with patients and the wider UK public to better understand views on the GOC's standards for optometrists, dispensing opticians and optical students revealed perceptions in four key topic areas.

Online conduct and use of social media

Existing standards are adequate

Delegation and supervision

Existing standards are adequate
BUT not if remote supervision is
introduced in the future

Maintaining boundaries

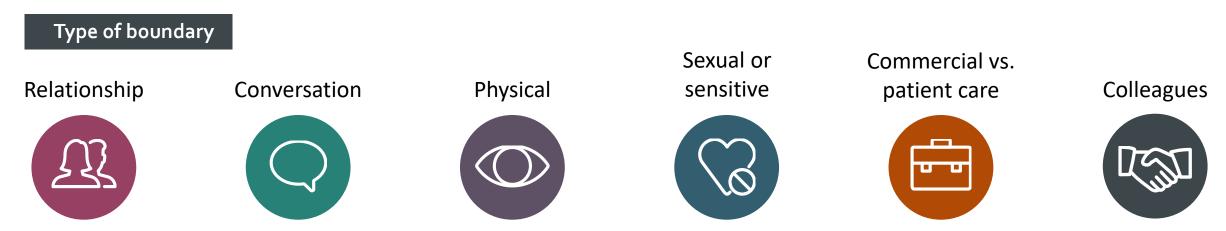
Standards could be expanded
To consider balance between commercial sales and patient-care functions

Use of technology in eye care

Standards could be expanded
To consider how increased technology
use may impact conduct and care

Public perceptions of appropriate boundaries in eye care

Research conducted with patients and the wider UK public suggests that maintaining appropriate boundaries is key for patient wellbeing. The research suggests boundaries should be considered throughout a patient's journey.



Points in the patient's journey when respondents suggested these boundaries should be considered:



Public perceptions of technology use in eye care

Research conducted with patients and the wider UK public sought to understand how potential changes to the use of technology in the provision of eye care were perceived.

Potential changes to technology use

Responses

Key considerations

Patient choice is key.

not work for all.

care is crucial.

Online consultations may

The human element of



Artificial intelligence

Positive

Could make eye care proactive by enabling pre-emptive or earlier diagnosis.



Could improve quality of care and increase likelihood of quicker and more accurate diagnosis.

Technology should support optical professionals, not replace them.

Training should be up-to-date to reflect changes.

Greater use of machines

Mixed

Potentially quicker and easier access, but lack of human interaction could mean lower quality of care.

Online consultations