

Standards of conduct performance and ethics

Response from the British and Irish Orthoptic Society to the Health and Care Professions Council, June 2023

The British and Irish Orthoptic Society (BIOS) is the professional body for orthoptists and was founded in 1937. It is also a registered charity and a company limited by guarantee. BIOS is affiliated to the Allied Health Professionals Federation, a group made up of 12 bodies representing more than 158,000 workers in the UK. BIOS is also a member of the International Orthoptic Association and OCE. BIOS members in the UK are also automatically trade union members of the British Orthoptic Society Trade Union (BOSTU).

Do the revised Standards make it clear what the appropriate boundaries are between a registrant and service users or carers?

The extra detail on maintaining appropriate boundaries with service users and carers is particularly positive. This makes it much clearer to registrants the duty to maintain an appropriate relationship and to be aware of the potential impact of their position of power.

Do the revised Standards support registrants in maintaining their own well-being?

There should be a greater emphasis on registrants maintaining their own well-being within the Standards. There is a clear emphasis on bullying and discrimination, such as in the duties to take action against discrimination (standards 1.5-1.7), treating colleagues with respect and consideration (2.8), and raising concerns about bullying or harassment (7.5). However, the 'Manage your health' section is focused on assessing you health and adjusting your practice, rather than actively maintaining your wellbeing. Registrants should feel a responsibility to act to minimise the impact of their practice on their wellbeing. This will benefit registrants but also reduce the need for adjustments to practice.

Do the revised Standards ensure that registrants maintain a practice that promotes equal, fair, and inclusive treatment?

We welcome the move to a more positive, active language in this section particularly; that registrants are encouraged to act to be aware of the impact of biases and take action to counter them.

However, as it stands, the duty to "be aware of the potential impact that your personal values biases and beliefs" doesn't make clear that these biases could be unconscious. There should be a responsibility on registrants to be aware of the possibility of unconscious bias and act to become of aware of these. Further, we question whether removing the duty to challenge colleagues was necessary. While we recognise that there may be occasions when registrants may feel there is a risk to them if looking to challenge colleagues for discrimination, the old standard 1.5 could have been reworded rather than

entirely removed. Registrants should feel a responsibility, as we all should, to challenges discrimination where appropriate and this should be encouraged within the Standards.

Are the revised Standards clear about what registrants must do when things go wrong?

The revised Standards are much clearer on the responsibilities when things go wrong, such as the stipulation that they should inform their employer, and the extra emphasis given to giving an apology. While the duty to support service users who wish to raise a concern is included as standard 8.3, there should be mention of it under the same sub heading. Part of the duty of openness should include supporting service users and carers to recognise they have a right to raise a concern or complain.

Is the language used in the revised Standards accessible and clear?

The language used is clear and accessible.

Does the structure of the revised Standards promote understanding and easy reading?

The structure of the revised Standards encourages understanding and easy reading by splitting into clear and defined sections. Where this may be over simplified is where there is overlap that is not recognised, for example the example given above where a service user's right to raise a concern could be included as part of the condition of openness.

Are the revised Standards clear about the appropriate use of social media and how this relates to registrant practice?

The Standards are clear about the use of social media practice, particularly when combined with the associated social media guidance. The addition of 2.9, making explicit the responsibility to avoid contributing to misinformation is especially welcome.

Should improving sustainability in health and care practice be a part of the Standards? a) If so, what ought to be included in the Standard?

We believe that sustainability in health and care practice should be included in the Standards. All four health services in the UK have committed to achieving net zero, which reflects a recognition of both the environmental impact of health services and the public health impact of climate change. Effects such as water and food insecurity, extreme weather and increased infectious diseases threaten the capacity of health systems.

While this is incorporated within the updated Standards of Proficiency, in the standard to "understand how social, economic and environmental factors (wider determinants of health) can influence a person's health and well-being", sustainability should be included as a standard of conduct here. This could be included as an extension to standard 1, to "Promote and protect the interests of service users and carers", for example:

Additional subheading: *Practice sustainably to protect patients, the wider community, and the environment, both now and in the future*

- **1.11** You must, wherever safe and effective to do so, choose treatment with the least environmental impact e.g. lowest carbon footprint or least waste generated.
- **1.12** You should include sustainability as a domain of quality when taking part in improvement work, thereby minimising the environmental and financial impacts and seeking positive social impact.
- **1.13** You should exploit opportunities to promote actions that both reduce carbon emissions and benefit public health e.g. promoting active travel, sustainable diets

Do you consider there are any aspects of our proposals that could result in equality and diversity implications for groups or individuals based on one or more of the following protected characteristics – age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, or sexual orientation – as defined by the Equality Act 2010?

As stated elsewhere in our response we question the removal of the duty to challenge discrimination. We are concerned that the removal of this wording could have a detrimental effect on equality and diversity as registrants do not feel empowered to actively challenge behaviour from service users, carers or colleagues.