

**BEFORE THE FITNESS TO PRACTISE COMMITTEE
OF THE GENERAL OPTICAL COUNCIL**

GENERAL OPTICAL COUNCIL

F(07)04

AND

ARTHUR ROWLEY TAYLOR (01-7569)

DETERMINATION OF THE INQUIRY: 20 SEPTEMBER 2007

On 20 September 2007, the Fitness to Practise Committee of the General Optical Council met to consider the following allegation against Arthur Rowley Taylor:

ALLEGATION

That the fitness to practise of Arthur Rowley Taylor (a registered optometrist) is impaired by reason of the following:

The Council alleges that between 1 July 2005 and 31 August 2005, whilst employed by Cando Visiting Eyecare to provide domiciliary optometric care to patients whose records are detailed in Schedule 1 annexed to this allegation, Mr Taylor failed:

1. to maintain adequate patient records;
2. to conduct an assessment of intraocular pressure for those patients;
3. For the reasons set out above Mr Taylor is guilty of deficient professional performance;

AND in light of the above Mr Taylor's fitness to practise is impaired.

DETERMINATION

Findings in relation to the particulars of the allegation

The Committee found all particulars of the allegation admitted and proven including the allegations of deficient professional performance (particular 3) of which we noted that Mr Taylor had admitted that he was guilty.

Findings regarding impairment

The maintenance of proper and adequate records is a core requirement for the continuing care and management of patients and the public has a right to expect that this will be done. In the first instance Mr Taylor's level of record keeping fell well below that expected of a reasonably competent optometrist. This included a failure to conduct an assessment of intra-ocular pressures for all of those 122 patients who are deemed to be at risk of glaucoma by reason of advanced age. Mr Taylor has chosen not to give evidence before us to explain his reasons and to have that explanation tested.

The Committee is satisfied that the public perception of standards of his practises and the standards of the profession have been brought into disrepute and public confidence in the profession thereby damaged.

Proper examination and record keeping is essential for all patients and particularly in vulnerable groups such as the elderly and infirm in residential and/or nursing care. The Committee do not accept that faulty equipment constitutes a continuing justification for the reasonably competent optometrist not to conduct an examination of intra-ocular pressures.

The Committee is satisfied that Mr Taylor's fitness to practise is impaired.

Further order

The Committee found the allegations in this case to be both serious and troubling involving, as they do, the elderly and infirm in residential and/or nursing care. These patients are particularly dependent on professionals and trust them to be performing their duties competently. Any failure so to do is bound to damage public confidence in the profession, particularly with the number of instances shown by this evidence. In the light of the mitigation, the Committee considered with care and anxiety the appropriate sanction both to protect public confidence and the maintenance of proper professional standards and has concluded that only the erasure of Mr Taylor from the register can meet these requirements. The Committee considered all other options before reaching this decision. Whilst it gives the Committee no pleasure to direct erasure in the case of an optometrist with no previous disciplinary findings who is 63 years of age and who tells us he has now retired, the primary responsibility of the Committee is to ensure that the public is protected and that proper professional standards and public confidence in the profession are maintained.