

Adam Hodson
HM Area Coroner
Coroner's Court
Steelhouse Lane
Birmingham
B4 6BJ

Sent by email

18 December 2025

Dear Mr Hodson,

I write in response to your Regulation 28 Report to Prevent Future Deaths (the Report) dated 12 November 2025, in respect of the investigation into the death of Christopher Sampson.

The GOC is deeply saddened by the death of Christopher Sampson, and we would be most grateful if you could pass on our condolences to his family.

I have set out below a brief summary of our role, a summary of our concerns about self-referral of health issues, and some concluding remarks about potential future work.

The General Optical Council (GOC)

The GOC is one of a number of organisations in the UK known as health and social care regulators. These organisations oversee the health and social care professions by regulating individual professionals and some businesses/premises.

We are the regulator for the optical professions in the UK. We currently register around 35,000 optometrists, dispensing opticians, optical students and optical businesses. Our over-arching objective is protection of the public.

Our annual public perceptions survey suggests that 87% of those aged 55 and above have had a sight test in the last two years.¹ Those aged 65 and over are more likely to state they had a sight test in the past six months (41% vs. 35%).² However, we do not have specific data on the uptake of sight testing amongst over 70s.

¹ [Public perceptions research 2025](#)

² [Public perceptions research 2025](#)

Disclosing confidential information where patient or public safety is at risk

We set [standards](#) for the individuals and businesses on our register. Standard 11 of our Standards of Practice (10 in the Standards for Optical Students) outlines that our registrants must promptly raise concerns about their patients, colleagues, employer or other organisation(s) if patient or public safety might be at risk. This would include raising concerns where a patient may not be safe to drive but where the registrant believes that the patient will not/cannot inform the Driver Vehicle Licensing Agency (DVLA). To help our registrants comply with this standard, we have produced guidance on [disclosing confidential information](#) (which includes a section on driving vision standards), as you note in the Report.

You have identified the issue of drivers failing to self-refer health issues (including deteriorating or poor eyesight) as a persisting public safety issue and have called for action to be taken. We are mindful that this issue has been highlighted in other recent Prevention of Future Deaths reports. In April following the publication of HM Senior Coroner for Lancashire's report, we took prompt [action to remind registrants](#) of our existing guidance on when they should report patients who are unfit to drive to the authorities.

Future work

We recognise that there remain concerns about drivers' failures to self-report health issues and that the current system is not sufficient to protect the public from the potential harm caused when drivers fail to meet their legal obligations to self-report and health professionals do not make a voluntary disclosure to the DVLA.

In June the [Government committed](#) to “*work with eye healthcare professionals and their regulatory bodies to identify and aim to address any concerns and issues that may be preventing them from notifying the DVLA when it is in the public interest to do so*”. We have had several discussions with officials from the DVLA and DfT as they develop the government's road safety strategy. We have discussed this issue with professional and representative bodies which represent optometrists and dispensing opticians in the UK. We have also discussed the issue with the General Medical Council, to explore the possibilities for joint working, including how we might collaborate on some shared messages to our registrants, and coordinate timing to maximise the impact of any communications activity. We'll continue to progress this work over the coming weeks.

The road safety strategy will frame or narrow what initiatives might most effectively respond to those concerns, but the options available to Government include legislating to introduce mandatory reporting of concerns by healthcare professionals (as happens in cases of suspected Female Genital Mutilation) and mandatory sight testing for drivers. Whichever approach the Government takes in their strategy, they will need to be mindful of unintended consequences. Mandatory reporting by healthcare professionals in the absence of mandatory sight tests might disincentivise people from having sight tests for fear of losing their licence even if this would not be the outcome. This could have the perverse effect of making the roads more dangerous as well as adversely impacting the quality of life of those avoiding sight testing.

Any mandatory reporting requirement for healthcare professionals would need to be supported by an adequate electronic reporting system. We have also encouraged DVLA to consider improvements to data collection since there is no reliable information available at present on the source of existing referrals to DVLA.

Once the strategy is published, we will work with stakeholders to ensure that any recommendations are acted upon promptly and appropriately. This could include updating our guidance or amending our standards to reflect a change in the law.

Whilst we await the strategy, we will also carry out the following actions:

- include information in the next edition of our registrant newsletter (which goes to all our registrants) highlighting their responsibilities in this area; and
- explore how we can best use our annual survey of our registrants to gather evidence on what barriers, if any, prevent them from referring drivers where they have concerns about their ability to drive.

We remain committed to working with Government and other parties to address these issues.

Yours sincerely,



Chief Executive & Registrar, General Optical Council