

CET Competencies for Dispensing Opticians 2016

Unit of Competency	Elements of Competence	Performance Criteria	Indicators
<p>1. Communication</p> <p>The ability to communicate effectively with the patient and any other appropriate person involved in the care of the patient, with English being the primary language of communication</p>	<p>1.1 The ability to communicate effectively with a diverse group of patients with a range of optometric conditions and needs</p>	<p>1.1.1 Obtains relevant history and information relating to general health, medication, family history, work, lifestyle and personal requirements.</p> <p>1.1.2 Elicits the detail and relevance of any significant symptoms.</p> <p>1.1.3 Identifies and responds appropriately to patients' fears, anxieties and concerns about their visual welfare.</p>	<p>Asks appropriate questions to obtain a full history. Employs appropriate strategies to understand the patient's needs by not interrupting and then summarising to check understanding.</p> <p>Employs an appropriate mix of questions to elicit information from patients, for example, open and closed questions.</p> <p>Establishes and maintains a good professional and clinical relationship with the patient to inspire trust and confidence. Recognises emotion in patients. Explores patient concerns and provides reassurance where appropriate, using explanations that are relevant to that patient.</p>
	<p>1.2 The ability to impart information in a manner which is appropriate to the recipient</p>	<p>1.2.1 Understands the patient's expectations and aspirations and manages situations where these cannot be met.</p> <p>1.2.2 Communicates with patients who have poor or non-verbal communication skills, or those who are confused, reticent or who might mislead.</p> <p>1.2.3 Discusses with the patient the importance of systemic disease and its ocular impact, its treatment and the possible ocular side effects of medication.</p>	<p>Conveys expert knowledge in an informative and understandable way, for example, not using jargon. Explores the patients' expectations and checks the level of understanding. Employs a patient-centred approach to understand the patient's perspective. Is able to empathise with and manage the patient's needs, resolving any problems to mutual satisfaction.</p> <p>Makes effective use of body language to support explanation. Demonstrates awareness of our own body language. Uses appropriate supporting material</p> <p>Provides a layman's explanation of the ocular impact of a particular disease. Uses appropriate supporting material, for example, diagrams or leaflets, and uses a range of different explanations where required to avoid repetition. Understands limitations of knowledge, referring the patient for advice where necessary</p>
		<p>1.2.4 Explains to the patient the implications of their pathological or physiological eye condition.</p>	<p>Gives factually relevant information in a clear and understandable way, avoiding jargon and technical terms. Uses appropriate supporting material, for example, diagrams or leaflets, and uses a range of different explanations where required to avoid repetition. Understands limitations of knowledge, referring the patient for advice where necessary</p>

	1.2.5 Communicates effectively with any other appropriate person involved in the care of the patient	Records and discusses advice and management in a clear and appropriate manner
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Standards of Practice	2.1 Listen to patients and ensure that they are at the	2.1.1 Give patients your full attention and allow sufficient time to deal properly with their needs.	

	heart of the decisions made about their care		
		2.1.2 Listen to patients and take account of their views, preferences and concerns, responding honestly and appropriately to their questions.	
		2.1.3 Assist patients in exercising their rights and making informed decisions about their care. Respect the choices they make.	
		2.1.4 Treat patients as individuals and respect their dignity and privacy. This includes a patient's right to confidentiality.	
		2.1.5 Where possible, modify your care and treatment based on your patients' needs and preferences without compromising their safety.	
		2.1.6 Consider all information provided by your patients, including where they have undertaken research in advance of the consultation. Explain clearly if the information is not valid or relevant.	
		2.1.7 Encourage patients to ask questions and take an active part in the decisions made about their treatment, prescription and aftercare.	
		2.1.8 Support patients in caring for themselves, including giving advice on the effects of life choices and lifestyle on their health and well-being and supporting them in making lifestyle changes where appropriate.	
	2.2 Communicate effectively with your patients	2.2.1 Give patients information in a way they can understand. Use your professional judgement to adapt your language and communication approach as appropriate.	
		2.2.2 Patients should know in advance what to expect from the consultation and have the opportunity to ask questions or change their mind before proceeding.	
		2.2.3 Be alert to unspoken signals which could indicate a patient's lack of understanding, discomfort or lack of consent.	
		2.2.4 Ensure that the people you are responsible for are able to communicate effectively with patients and their carers, colleagues and others.	
		2.2.5 Ensure that patients or their carers have all the information they need to safely use, administer or look after any optical devices, drugs or other treatment that they have been prescribed or directed to use in order to manage their eye conditions. This includes being actively shown how to use any of the above.	
		2.2.6 Be sensitive and supportive when dealing with relatives or other people close to the patient.	

	2.3 Obtain valid consent	<p>2.3.1 Obtain valid consent before examining a patient, providing treatment or involving patients in teaching and research activities. For consent to be valid it must be given:</p> <ul style="list-style-type: none"> 2.3.1.1 Voluntarily. 2.3.1.2 By the patient or someone authorised to act on the patient's behalf. 2.3.1.3 By a person with the capacity to consent. 2.3.1.4 By an appropriately informed person. Informed means explaining what you are going to do and ensuring that patients are aware of any risks and options in terms of examination, treatment, sale or supply of optical appliances or research they are participating in. This includes the right of the patient to refuse treatment or have a chaperone or interpreter present. 	
		2.3.2 Be aware of your legal obligations in relation to consent, including the differences in the provision of consent for children, young people and vulnerable adults. When working in a nation of the UK, other than where you normally practise, be aware of any differences in consent law and apply these to your practice.	
		2.3.3 Ensure that the patient's consent remains valid at each stage of the examination or treatment and during any research in which they are participating.	
	2.4 Show care and compassion for your patients	2.4.1 Treat others with dignity, and show empathy and respect.	
		2.4.2 Respond with humanity and kindness to circumstances where patients, their family or carers may experience pain, distress or anxiety.	
	2.5 Keep your knowledge and skills up to date		
		2.5.3 Be aware of current good practice, taking into account relevant developments in clinical research, and apply this to the care you provide.	

		2.5.4 Reflect on your practice and seek to improve the quality of your work through activities such as reviews, audits, appraisals or risk assessments. Implement any actions arising from these.	
	2.6 Recognise, and work within, your limits of competence	2.6.1 Recognise and work within the limits of your scope of practice, taking into account your knowledge, skills and experience.	
		2.6.2 Be able to identify when you need to refer a patient in the interests of the patient's health and safety, and make appropriate referrals.	
		2.6.4 Understand and comply with the requirements of registration with the General Optical Council and the legal obligations of undertaking any functions restricted by law, i.e. sight testing and the sale and supply of optical devices.	
	2.7 Conduct appropriate assessments, examinations, treatments and referrals	2.7.1 Conduct an adequate assessment for the purposes of the optical consultation, including where necessary any relevant medical, family and social history of the patient. This may include current symptoms, personal beliefs or cultural factors.	
		2.7.2 Provide or arrange any further examinations, advice, investigations or treatment if required for your patient. This should be done in a timescale that does not compromise patient safety and care.	
		2.7.3 Only prescribe optical devices, drugs, or treatment when you have adequate knowledge of the patient's health.	
		2.7.4 Check that the care and treatment you provide for each patient is compatible with any other treatments the patient is receiving, including (where possible) over-the-counter medications.	
		2.7.5 Provide effective patient care and treatments based on current good practice.	
		2.7.6 Only provide or recommend examinations, treatments, drugs or optical devices if these are clinically justified, and in the best interests of the patient.	

		2.7.7 When in doubt, consult with professional colleagues appropriately for advice on assessment, examination, treatment and other aspects of patient care, bearing in mind the need for patient confidentiality.	
	2.8 Maintain adequate patient records	2.8.1 Maintain clear, legible and contemporaneous patient records which are accessible for all those involved in the patient's care.	
		<p>2.8.2 As a minimum, record the following information:</p> <p>2.8.2.1 The date of the consultation.</p> <p>2.8.2.2 Your patient's personal details.</p> <p>2.8.2.3 The reason for the consultation and any presenting condition.</p> <p>2.8.2.4 The details and findings of any assessment or examination conducted.</p> <p>2.8.2.5 Details of any treatment, referral or advice you provided, including any drugs or optical device prescribed or a copy of a referral letter.</p> <p>2.8.2.6 Consent obtained for any examination or treatment.</p> <p>2.8.2.7 Details of all those involved in the optical consultation, including name and signature, or other identification of the author.</p>	
	2.9 Ensure that supervision is undertaken appropriately and complies with the law	2.9.1 Be sufficiently qualified and experienced to undertake the functions you are supervising.	
		2.9.2 Only delegate to those who have appropriate qualifications, knowledge or skills to perform the delegated activity.	
		2.9.3 Be on the premises, in a position to oversee the work undertaken and ready to intervene if necessary in order to protect patients.	
		2.9.4 Retain clinical responsibility for the patient. When delegating you retain responsibility for the delegated task and for ensuring that it has been performed to the appropriate standard.	
		2.9.5 Take all reasonable steps to prevent harm to patients arising from the actions of those being supervised.	

		2.9.6 Comply with all legal requirements governing the activity.	
		2.9.7 Ensure that details of those being supervised or performing delegated activities are recorded on the patient record.	
	2.10 Work collaboratively with colleagues in the interests of patients	2.10.1 Work collaboratively with colleagues within the optical professions and other healthcare practitioners in the best interests of your patients, ensuring that your communication is clear and effective.	
		2.10.2 Refer a patient only where this is clinically justified, done in the interests of the patient and does not compromise patient care or safety. When making or accepting a referral it must be clear to both parties involved who has responsibility for the patient's care.	
		2.10.3 Ensure that those individuals or organisations to which you refer have the necessary qualifications and registration so that patient care is not compromised.	
		2.10.4 Ensure that patient information is shared appropriately with others, and clinical records are accessible to all involved in the patient's care.	
		2.10.5 Where disagreements occur between colleagues, aim to resolve these for the benefit of the patient.	
	2.11. Protect and safeguard patients, colleagues and others from harm	2.11.1 You must be aware of and comply with your legal obligations in relation to safeguarding of children, young people and vulnerable adults.	
		2.11.2 Protect and safeguard children, young people and vulnerable adults from abuse. You must: 2.11.2.1 Be alert to signs of abuse and denial of rights. 2.11.2.2 Consider the needs and welfare of your patients. 2.11.2.3 Report concerns to an appropriate person or organisation. 2.11.2.4 Act quickly in order to prevent further risk of harm. 2.11.2.5 Keep adequate notes on what has happened and what actions you took.	
		2.11.3 Promptly raise concerns about your patients, colleagues, employer or other organisation if patient or public safety might be at risk and encourage others to do	

		<p>the same. Concerns should be raised with your employing, contracting, professional or regulatory organisation as appropriate. This is sometimes referred to as 'whistle-blowing' and certain aspects of this are protected by law.</p>	
		<p>2.11.4 If you have concerns about your own fitness to practise whether due to issues with health, character, behaviour, judgement or any other matter that may damage the reputation of your profession, stop practising immediately and seek advice.</p>	
		<p>2.11.5 If patients are at risk because of inadequate premises, equipment, resources, employment policies or systems, put the matter right if that is possible and/or raise a concern.</p>	
		<p>2.11.6 Ensure that any contracts or agreements that you enter into do not restrict you from raising concerns about patient safety including restricting what you are able to say when raising the concern.</p>	
		<p>2.11.7 Ensure that when reporting concerns, you take account of your obligations to maintain confidentiality as outlined in standard 14.</p>	
	2.12 Ensure a safe environment for your patients	<p>2.12.1 Ensure that a safe environment is provided to deliver care to your patients, and take appropriate action if this is not the case (see standard 11). In particular:</p> <ul style="list-style-type: none"> 2.12.1.1 Be aware of and comply with health and safety legislation. 2.12.1.2 Ensure that the environment and equipment that you use is hygienic. 2.12.1.3 Ensure that equipment that you use has been appropriately maintained. 2.12.1.4 Follow the regulations on substances hazardous to health. 2.12.1.5 Dispose of controlled, clinical and offensive materials in an appropriate manner. 2.12.1.6 Minimise the risk of infection by following appropriate infection controls including hand hygiene. 	
		<p>2.12.2 Have adequate professional indemnity insurance and only work in practices that have adequate public liability insurance. This includes the following:</p> <ul style="list-style-type: none"> 2.12.2.1 If insurance is provided by your employer, you must confirm that adequate insurance is in place. 2.12.2.2 If you work in multiple practices, you must ensure that there is adequate insurance to cover each working environment. 	

		<p>2.12.2.3 Your professional indemnity insurance must provide continuous cover for the period you are in practice.</p> <p>2.12.2.4 Your professional indemnity insurance must cover complaints that are received after you stop practising, as these might be received years later – this is sometimes referred to as 'run-off' cover.</p>	
		<p>2.12.3 Ensure that when working in the home of a patient or other community setting, the environment is safe and appropriate for the delivery of care.</p>	
		<p>2.12.4 In an emergency, take appropriate action to provide care, taking into account your competence and other available options. You must:</p> <p>2.12.4.1 Use your professional judgement to assess the urgency of the situation.</p> <p>2.12.4.2 Provide any care that is within your scope of practice which will provide benefit for the patient.</p> <p>2.12.4.3 Make your best efforts to refer or signpost the patient to another healthcare professional or source of care where appropriate.</p>	
	2.13 Show respect and fairness to others and do not discriminate	<p>2.13.1 Respect a patient's dignity, showing politeness and consideration.</p>	
		<p>2.13.2 Promote equality, value diversity and be inclusive in all your dealings and do not discriminate on the grounds of gender, sexual orientation, age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief.</p>	
		<p>2.13.3 Ensure that your own religious, moral, political or personal beliefs and values do not prejudice patients' care. If these prevent you from providing a service, ensure that you refer patients to other appropriate providers.</p>	
		<p>2.13.4 Respect colleagues' skills and contributions and do not discriminate.</p>	
		<p>2.13.5 Be aware of how your own behaviour might influence colleagues and students and demonstrate professional behaviour at all times.</p>	
		<p>2.13.6 Refrain from making unnecessary or disparaging comments which could make a patient doubt your colleagues' competence, skills or fitness to practise, either</p>	

		in public or private. If you have concerns about a colleague's fitness to practise, then please refer to standard 11.	
		2.13.7 Support colleagues and offer guidance where they have identified problems with their performance or health or they have sought your help, but always put the interests and safety of patients first.	
		2.13.8 Consider and respond to the needs of disabled patients and make reasonable adjustments to your practice to accommodate these and improve access to optical care.	
		2.13.9 Challenge colleagues if their behaviour is discriminatory and be prepared to report behaviour that amounts to the abuse or denial of a patient's or colleague's rights, or could undermine patient safety.	
	2.14 Maintain confidentiality and respect your patients' privacy	2.14.1 Keep confidential all information about patients in compliance with the law, including information which is handwritten, digital, visual, audio or retained in your memory.	
		2.14.2 Ensure that all staff you employ or are responsible for, are aware of their obligations in relation to maintaining confidentiality.	
		2.14.3 Maintain confidentiality when communicating publicly, including speaking to or writing in the media, or writing online including on social media.	
		2.14.4 Co-operate with formal inquiries and investigations and provide all relevant information that is requested in line with your obligations to patient confidentiality.	
		2.14.5 Provide an appropriate level of privacy for your patients during consultation to ensure that the process of information gathering, examination and treatment remains confidential. Different patients will require different levels of privacy and their preferences must be taken into account.	
		2.14.6 Only use the patient information you collect for the purposes it was given, or where you are required to share it by law.	
		2.14.7 Securely store and protect your patient records to prevent loss, theft and inappropriate disclosure, in accordance with data protection law. If you are an employee, then this would be in accordance with your employer's storage policy.	

		2.14.8 Confidentially dispose of patient records when no longer required in line with data protection requirements.	
	2.15 Maintain appropriate boundaries with others	2.15.1 Maintain proper professional boundaries with your patients, students and others that you come into contact with during the course of your professional practice and take special care when dealing with vulnerable people.	
		2.15.2 Never abuse your professional position to exploit or unduly influence your patients or the public, whether politically, financially, sexually or by other means which serve your own interest.	
	2.16 Be honest and trustworthy	2.16.1 Act with honesty and integrity to maintain public trust and confidence in your profession.	
		2.16.2 Avoid or manage any conflicts of interest which might affect your professional judgement. If appropriate, declare an interest, withdraw yourself from the conflict and decline gifts and hospitality.	
		2.16.3 Ensure that incentives, targets and similar factors do not affect your professional judgement. Do not allow personal or commercial interests and gains to compromise patient safety.	
		2.16.4 Ensure that you do not make false or misleading statements when describing your individual knowledge, experience, expertise and specialties, including by the use of titles.	
		2.16.5 Be honest in your financial and commercial dealings and give patients clear information about the costs of your professional services and products before they commit to buying.	
		2.16.6 Do not make misleading, confusing or unlawful statements within your advertising.	
	2.17 Do not damage the reputation of your profession through your conduct	2.17.1 Ensure your conduct, whether or not connected to your professional practice, does not damage public confidence in you or your profession.	

		2.17.2 Ensure your conduct in the online environment, particularly in relation to social media, whether or not connected to your professional practice, does not damage public confidence in you or your profession.	
		2.17.3 Be aware of and comply with the law and regulations that affect your practice, and all the requirements of the General Optical Council.	
	2.18 Respond to complaints effectively	2.18.1 Operate a complaints system or follow the system that your employer has in place, making patients aware of their opportunities to complain to yourself or your employer. At the appropriate stage in the process, the patient should also be informed of their rights to complain to the General Optical Council or to seek mediation through the Optical Consumer Complaints Service.	
		2.18.2 Respect a patient's right to complain and ensure that the making of a complaint does not prejudice patient care.	
		2.18.3 Respond honestly, openly, politely and constructively to anyone who complains and apologise where appropriate.	
		2.18.4 Provide any information that a complainant might need to progress a complaint including your General Optical Council registration details and details of any registered specialty areas of practice.	
	2.19 Be candid when things have gone wrong	2.19.1 Be open and honest with your patients when you have identified that things have gone wrong with their treatment or care which has resulted in them suffering harm or distress or where there may be implications for future patient care. You must: 2.19.1.1 Tell the patient or, where appropriate, the patient's advocate, carer or family) that something has gone wrong. 2.19.1.2 Offer an apology. 2.19.1.3 Offer appropriate remedy or support to put matters right (if possible). 2.19.1.4 Explain fully and promptly what has happened and the likely short-term and long-term effects. 2.19.1.5 Outline what you will do, where possible, to prevent reoccurrence and improve future patient care.	
		2.19.2 Be open and honest with your colleagues, employers and relevant organisations, and take part in reviews and investigations when requested and with the General Optical Council, raising concerns where appropriate. Support and encourage your colleagues to be open and honest, and not stop someone from raising concerns.	

		2.19.3 Ensure that when things go wrong, you take account of your obligations to reflect and improve your practice as outlined in standard 5.	

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3. Methods of Ocular Examination An understanding of instrumentation used in the examination of the eye and related structures	3.1 An understanding of the use of instruments used in the examination of the eye and related structures, and the implications of results	3.1.1 Understands the methods of measurement of corneal curvature and assessment of regularity	Understands the use and optical principle of the keratometer, one and two position instruments and fixed and variable doubling. Understands the principles and use of corneal topographers
		3.1.2 Understands the examination of the external eye and related structures by use of the slit lamp	Understands the features and operation of the slit lamp Understands how direct and indirect illumination can be achieved and how the eye should be examined in a logical sequence Understands the methods used for tear assessment
		3.1.3 Understands the examination of the fundus using either a direct or indirect ophthalmoscope	Understands ophthalmoscopy and conditions required to view the fundus Understands the differences between direct and indirect ophthalmoscopy in terms of optical principle, method of use, field of view and magnification
		3.1.4 Understands the methods of assessment of colour vision	Understands classification and description of colour vision defects, descriptions and use of the different tests available for colour vision defects
		3.1.5 Understands the instruments involved in visual field analysis and the results	Understands static and kinetic perimetry and different threshold measurements Understands the different types of field analysis instruments, for example: screens, arc and bowl perimeters, automated field instruments and the Amsler chart Understands the terminology related to defective fields and how this relates to the visual pathway
		3.1.6 Understands the use of a tonometer and the results	Understands the different types of tonometry, e.g. contact and non-contact and the relative procedures Understands the diurnal variations of the results, and the implications of the results

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4.Optical Appliances The ability to dispense an appropriate optical appliance	4.1 The ability to interpret and dispense a prescription using appropriate lenses and frames or mounts.	4.1.1 Identifies anomalies in a prescription and implements the appropriate course of action	Identifies possible errors in a prescription and follows the appropriate course of action Identifies and explains any problems which may occur from the given prescription and offer solutions, for example, aniseikonia, anisometropia

		<p>4.1.4 Matches the form, type and positioning of lenses to meet all the patient's needs and requirements and provides appropriate advice.</p>	<p>Provides all the necessary information for a pair of spectacles to be duplicated, to include:</p> <ul style="list-style-type: none"> • Prescription • Lens type • Lens form • Centration and fitting positions • Frame details • Lens surface treatments
	<p>4.2 The ability to advise on and dispense appropriate safety, vocational, and special optical appliances.</p>	<p>4.2.1 Advises on personal eye protection regulations and relevant standards, and appropriately advises patients on their occupational visual requirements.</p>	<p>Applies the relevant standards for:</p> <ul style="list-style-type: none"> • VDU users, driving • EN standards, including markings standards BSEN I66 and legislation and sources <p>Demonstrates a knowledge of visual task analysis including lighting</p> <p>Understands the legal responsibilities for employees, employers, Dispensing Opticians and Optometrists</p> <p>Understands and identifies common ocular hazards and common or sight threatening leisure activities and occupations and the ability to advise patients.</p>
	<p>4.3 The ability to fit, adjust and repair optical appliances</p>	<p>4.2.2 Recommends and dispenses special optical appliances where appropriate</p>	<p>Identifies and fits special optical appliances, explains their optical properties and features</p> <p>These will include sports, paediatric frames, safety, recumbent, reversible, flips, low vision appliances, specialist lenses, occluders, trigeminal spectacles etc</p>
		<p>4.3.1 Identifies current and obsolete frame materials and considers and applies their properties when handling, adjusting, repairing and dispensing</p>	<p>Performs appropriate adjustments to ensure a correct fit</p> <p>Recognises all frame materials from associated features and handling the frames.</p> <p>Knows details of the manufacturing methods and how these affect the adjustment properties of the material.</p> <p>Demonstrates an awareness of the dermatological effects of the materials to be able to advise patients accordingly</p> <p>Knows whether the frame can be repaired and the appropriate repair method</p>
		<p>4.3.2 Demonstrates knowledge of frame and lens manufacturing and the application of special lens treatments.</p>	<p>Identifies the difference between glass and plastics materials and has a knowledge of the properties of each material, manufacturing methods and associated advantages and disadvantages</p> <p>Knows the different manufacturing methods of frames to include injection moulding, routing and wire formation.</p> <p>Knows of the different methods of tint and coating applications and the associated advantages and disadvantages of each</p>

	4.4 The ability to dispense low vision aids	4.4.1 Understands conditions which cause visual impairment and to dispense the most appropriate low vision aid/advice	<p>Identifies which patients would benefit from low vision aids and advice Understands the principles of magnification, field of view and working distance in relation to different aids Provides advice on the advantages and disadvantages of different types of simple low vision aids Understands the mechanisms of prescribing magnification including acuity reserve Gives correct instruction to a patient in the use of various aids, to include:</p> <ul style="list-style-type: none"> • Which specs to use with aid • Lighting required • Appropriate working distance <p>Provides basic advice on non-optical aids, use of contrast and lighting to enhance visual performance and daily living skills</p>
	4.5 The ability to relate general anatomical features, including the development of a child's facial anatomy to the fitting of optical appliances	4.5.1 Accurately records facial measurements and dispenses the most appropriate appliance taking into account development, comfort, function and safety	<p>Takes accurate facial measurements and appreciates the implications of anatomical features and how these relate to the final fitting position of the appliance Knows about special frame features, for example, inset bridges, and handmade frames Appropriately advises on paediatric frame fitting, including specialist bridge and side features</p>

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<p>5. Contact Lenses</p> <p>An understanding of the fitting and aftercare of patients with rigid and soft contact lenses</p>	<p>5.1 An understanding of the selection and fitting of the most appropriate contact lens for the planned use and clinical needs of the patient.</p>	<p>5.1.1 Understands contact lens types and materials, their benefits and disadvantages, and their most appropriate applications</p>	<p>Understands</p> <ul style="list-style-type: none"> • the differences between RGP, soft and scleral contact lenses. • the advantages and disadvantages of all types of contact lenses <p>Has a knowledge of differences in contact lens materials currently used for RGP and all types of soft lenses including silicone hydrogels</p> <p>Understands the advantages and disadvantages of wearing contact lenses compared with spectacles</p> <p>Has a knowledge of other applications of contact lenses e.g. therapeutic lenses and in low vision</p>
		<p>5.1.2 Understands the initial contact lens selection and fitting of RGP and soft contact lens patients</p>	<p>Understands, at foundation level, the typical parameters of RGP and soft lenses and their relationship to corneal measurements</p> <p>Understands the shape of the normal cornea, the fitting philosophies of RGP and soft lenses, and the lens' behaviour on the eye</p>
	<p>5.2 Understands the patients instruction in contact lens handling, and all aspects of lens wear including care regimes</p>	<p>5.2.1 Understands the different methods of contact lens removal and the ability to remove the lens in an emergency, if feasible, and the ability to discuss the use of care regimes</p>	<p>Knows the methods of insertion and removal of RGP and soft lenses by a contact lens wearer</p> <p>Understands how a suitably skilled practitioner should remove a lens in an emergency</p> <p>Knows the relative advantages and disadvantages of RGP and soft lens care regimes, the solutions' constituents and their purpose</p> <p>Understands the importance of wearing schedules and regular aftercare visits</p>
		<p>5.2.2 Understands both the aftercare of patients wearing RGP and soft contact lenses and the management of any complications</p>	<p>Understands the minor issues which can arise during adaptation or that are identified at the aftercare appointment, and how these are managed</p> <p>Understands the signs and symptoms of serious contact lens complications such as microbial keratitis, severe corneal abrasion, or misuse of solutions, and the appropriate referral procedure</p>

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6. Low Vision The management of low vision patients	6.1 An understanding of the causes of low vision and their effects on vision	6.1.1 Considers the effectiveness of current refraction of patients with low visual acuity and to refer back where appropriate	Understands the main causes of low vision and the effect on vision Checks the date of the last eye examination and when the last spectacles were dispensed and if the patient is wearing those spectacles. Uses a pinhole and confirmation tests to check effectiveness and refer back if necessary Understands the referral procedure associated with unexplained/sudden vision loss Understands the criteria for visual impairment registration and referral
	6.2 The ability to assess a patient with low vision	6.2.1 Understands the assessment of visual function, including the use of specialist charts, the effects of illumination, contrast and glare 6.2.2 Understands the assessment of the visual field of patients with reduced vision 6.2.3 Understands binocular vision in relation to low vision appliances	Knows the different types of test charts available for distance and near vision and assessment of contrast sensitivity Understands the effects of lighting, contrast and glare on vision Understands <ul style="list-style-type: none">• the need for visual field tests and the different types available• the different types of field loss e.g. hemianopia, central field loss etc Understands the indications for supplying binocular and monocular LVAs and the use of occlusion, for example, to combat convergence problems with high adds, suitable alignment of binocular telescopes etc
	6.3 The ability to advise on the use of and dispense appropriate low vision aids	6.3.1 Dispenses relevant optical low vision aids and common types of non-optical low vision aid 6.3.2 Advises patients on illumination, glare and contrast	Questions the patient about their occupation, hobbies and lifestyle in order to dispense an appropriate aid to assist the patient Understands the principles of magnification, field of view and working distance in relation to different aids Knows the availability of non-optical aids such as CCTV, TV reader-systems and aids for daily living, and where to source these aids Trains the patient to use the aid effectively and replace batteries and bulbs if required Advises patients on <ul style="list-style-type: none">• the benefit of appropriate lighting in the home• how to minimise different types of glare and how to improve the contrast out of doors and in the home environment, text type, etc can also benefit the patient• selection of appropriate tints
	6.4 The ability to advise, refer and provide aftercare to low vision patients	6.4.1 Advises patients about their impairment and its consequences	Able to empathetically understand and manage the potential concerns of the patient Discusses with the patient their concerns in terms that are easily understood

		Discusses the management of their impairment, referral and benefits of registration, other sources of help and support
	6.4.2 Understands the need for multi- and inter-disciplinary approaches to low vision care	Understands the importance of a current eye examination, ophthalmological assessment/treatment Able to explain the process and criteria for registration and the associated benefits
	6.4.3 Refers low vision patients to other agencies where appropriate	Knows where and how to access additional support e.g. a resource centre, social services, etc
	6.4.4 Manages the aftercare of low vision patients	Understands factors affecting frequency of aftercare to include; likely progress of pathology, retraining with selected aids, the need for different/ additional aids

Unit of Competency	Elements of Competence	Performance Criteria	Indicators
7.Refractive Management An understanding of methods of assessing vision, refraction, binocular status and visual acuity in all patients	7.1 An understanding of refractive prescribing and management decisions	7.1.1 Understands the refraction of a range of patients by appropriate objective and subjective means	Understands retinoscopy and end-point subjective results Understands appropriate checking methods, e.g. +1.00D blur and use of pin-hole Understands determination of addition power and appropriate range
		7.1.2 Understands the use of ocular diagnostic drugs to aid refraction	Understands different types of ocular drugs and their purpose e.g. mydriatics, anaesthetics, diagnostic stains etc Understands the mode of action, dosage, function and effects and the regulations affecting use and storage of ophthalmic drugs
		7.1.3 Understands the methods of refracting children, cycloplegic drugs and their effects, and understands prescribing and management decisions	Understands <ul style="list-style-type: none"> • the different distance and near test methods designed for children • the function and effect of cycloplegic drugs • the critical period and paediatric prescribing decisions and their purpose, e.g. early onset myopia
		7.1.4 Understands refraction of patients with reduced visual acuity	Understands the testing methods involved with reduced visual acuity, for example LogMar, and the related terms to record low levels
		7.1.5 Understands the investigation and management of patients presenting with heterophoria, heterotropia and amblyopia based anomalies of binocular vision, including the relevance of history and the recognition of any clinical symptoms	Understands <ul style="list-style-type: none"> • signs and symptoms and causes of binocular vision anomalies • the different methods of classification e.g. cover test, pin hole etc • how the patient may be managed, e.g. surgery, prescribed prisms etc
		7.1.6 Understands the objective and subjective tests necessary to investigate binocular vision status	Understands the different objective tests available to assess deviation, e.g. cover and motility tests Understands the different subjective tests available to assess deviation, e.g. fixation disparity tests
		7.1.7 Understands likely management options related to the prescribing of the appliance	Understands the options to include; vision training, refractive correction, modified refractive correction, prismatic correction
		7.1.8 Understands the investigation and management of patients presenting with incomitant deviations, including the recognition of symptoms and referral advice	Understands the use of cover test and motility. Takes accurate history and symptoms – new/longstanding Understands diplopia management options – prisms, occlusion and surgery

		7.1.9 Understands diagnostic methods for patients with field defects	Understands different types of field loss and the causes Understands the adaption of examination techniques e.g. fixation target for cover test/ocular examination
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Unit of Competency	Elements of Competence	Performance Criteria	Indicators
8.Ocular Abnormalities An understanding of the relevance of ocular disease	8.1 The ability to recognise conditions and symptoms requiring referral and/or emergency referral and the demonstration of the ability to take appropriate action	<p>8.1.1 Identifies common diseases of the external eye and related structures</p> <p>8.1.2 Understands symptoms associated with internal eye disease</p> <p>8.1.3 Understands the clinical treatment of a range of significant ocular diseases/disorders and conditions</p> <p>8.1.4 Understands the clinical treatment of a range of systemic diseases with ocular manifestations and adverse ocular reactions to medication</p> <p>8.1.5 Understands the implications of the manifestations of eye disease</p> <p>8.1.6 Recognises and deals with ocular emergencies</p>	<p>Recognises signs and symptoms of external eye and adnexa, for example; keratitis, iritis, blepharitis, chalazion, ectropion, entropion, epicanthus, hordeolum, ptosis, stye, xanthelasma, conjunctivitis, melanoma, pinguecula, subconjunctival haemorrhage</p> <p>Understands symptoms associated with internal eye disease such as diabetic retinopathy, retinal vascular disorders, retinitis pigmentosa, retinal and vitreous detachment, macular degeneration, for example</p> <p>Understands the surgical treatments, drug treatments and self-treatment such as hot compresses, hygiene regimes, etc</p> <p>Understands treatment of a range of systemic diseases, for example, diabetes and hypertension Understands adverse ocular reactions to medication</p> <p>Understands how the disease will progress with or without treatment and the prognosis in terms of affecting the vision and likelihood of reoccurrence Demonstrates an awareness of diet and vitamin and mineral supplements that may also be beneficial</p> <p>Recognises an ocular emergency and refers the patient in an appropriate manner.</p>

<u>Unit of Competency</u>	<u>Elements of Competence</u>	<u>Performance Criteria</u>	<u>Indicators</u>
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<p>9. Paediatric Dispensing</p> <p>The ability to dispense an appropriate optical appliance, taking into account the development of anatomical features</p>	<p>9.1 The ability to communicate effectively with the child and their carer</p>	<p>9.1.1 Directs communication to the child in appropriate language and manner</p>	<p>Understands the view of a child and elicits information on their preferences Engages the child in discussions and decisions relating to the dispensing Uses appropriate supporting material to aid understanding</p>
		<p>9.1.2 Discusses with the carer as appropriate the factors influencing dispensing</p>	<p>Conveys expert knowledge in an understandable and informative way Establishes and maintains a good professional and clinical relationship Explores patient concerns and provide explanation and reassurance where appropriate Aware of implications in discussing factors with a carer</p>
	<p>9.2 An understanding of paediatric refractive prescribing and management decisions</p>	<p>9.2.1 Understands the methods of refraacting children and prescribing decisions</p>	<p>Understands</p> <ul style="list-style-type: none"> • the different distance and near test methods designed for children • the function and effect of cycloplegic drugs • the critical period, paediatric prescribing decisions and their purpose, e.g. early onset myopia
		<p>9.2.2 Understands the investigation and management of children presenting with anomalies of binocular vision</p>	<p>Understands</p> <ul style="list-style-type: none"> • signs and symptoms and causes of binocular vision anomalies • how the condition may be managed, e.g. occlusion, prescribed prisms etc
	<p>9.3 The ability to advise on and measure for the most appropriate paediatric frames</p>	<p>9.3.1 Takes accurate facial measurements</p>	<p>Takes accurate pupillary distance using a range of methods appropriate to age and fixation ability Takes accurate facial measurements and appreciates the implications of anatomical features and how these relate to the final fitting of the appliance Appreciates the difference in features for children from different nationalities, or those with conditions such as Down's Syndrome</p>
		<p>9.3.2 Understands changes in measurements as the facial features develop</p>	<p>Explains the development expected as a child grows and how this affects facial measurements and frame fitting Conveys the importance of frame function in terms of comfort, fit, position and safety</p>

		<p>9.3.3 Advises on appropriate frames and availability of special features</p> <p>9.4.1 Advises on lens choice with</p>	<p><i>Accurately records frame details, adjustments and appropriate measurements</i> <i>Fits specialist frame parts where appropriate such as specialist bridge and side options</i> <i>Advises on frame shape , size and position with consideration to the prescription and cosmesis</i></p>
	9.4 The ability to advise and measure for the most appropriate lens choice	<p>emphasis on safety, comfort and cosmesis</p>	<p>Demonstrates appropriate advice for a wide range of prescriptions in terms of materials deemed high impact resistance, such as polycarbonate Conders the weight of the finished lens and any improvements that can be made to overall comfort, such as reduced aperture or aspheric forms Explains how cosmesis may be improved by ordering certain manufacturing techniques such as minimum substance surfacing or altering the form of the lens</p>
		<p>9.4.2 Measures for lens positioning</p>	<p>Accurately measures for lens centration, vertical and horizontal optical centre positioning Conders the pantoscopic angle and vertex distance to ensure a close fit that is not making inappropriate contact with the face</p>
	9.5 The ability to fit, adjust and repair paediatric optical appliances	<p>9.5.1 Fits the appliance effectively and has the ability to adjust and repair the appliance</p>	<p>Ensures the spectacles are a comfortable fit and the child is looking through the appropriate portion of the lens Explains the importance of maintaining a good fit and is able to adjust and repair where necessary Advises the child and carer on how to care for the spectacles</p>