

## ADVICE & GUIDELINES ON PROFESSIONAL CONDUCT

### FOR DISPENSING OPTICIANS

#### SECTION 1: PROFESSIONAL CONDUCT

##### General

1.1.1 Dispensing opticians shall always place the welfare of the public, who require their professional services, before all other considerations. They shall behave in a proper manner towards their patients, the GOC, ABDO and professional colleagues and shall not bring them or the profession into disrepute. (See Appendix A - GOC Code of Conduct). They must maintain a high standard of behaviour, integrity and competence, bringing to bear all their knowledge, skill and expertise in serving the public. Dispensing opticians should be aware that conviction for any non-optical offence may cause them to appear before the GOC for bringing the profession into disrepute, and subsequently be reported to ABDO.

1.1.2 Dispensing opticians should be aware of local NHS/PCT protocols, especially if working within the NHS.

1.1.3 Dispensing opticians should have a policy for chaperoning certain groups of vulnerable adults and children – see Appendix E(3).

1.1.4 Dispensing opticians must recognise their limitations by seeking further advice and guidance; or refer elsewhere when appropriate. In particular, those wishing to practise in specialised areas must be sure of their ability to do so, by obtaining specialist qualifications as available. All dispensing opticians have a duty to maintain and develop their professional competence throughout their careers, since only in this way can they continue to offer the best possible service to the public.

1.1.5 Dispensing opticians are reminded that they have a responsibility to apply the infection control procedures outlined in this guidance and to dispose of waste safely so are advised to read the following –

Section 4 - Infection Control  
Appendix F[4] Advice on the disposal of waste.

##### Whistleblowing

1.1.6 The following advice is taken from the GOC Code of Conduct.

If you have important information about yourself, other health professionals or organisations, which may mean that you, or they, lack the skills, knowledge, character or health to practise safely and effectively, or be trusted to act legally, you must act quickly to protect patients. In the first instance you should normally report your concern to your employer, manager or other appropriate person at your practice or business level. However if there is no such person and the matter cannot be addressed at practice or business level, your concern should be reported to the local primary care organisation.

### **However, you should inform the GOC if:**

- Taking action at a local level would not be practical;
- Action at a local level has failed;
- The problem is so serious that the GOC clearly needs to be involved;
- You are afraid of victimisation or a cover up.

### **You must let the GOC know straight away if you:**

- Have been convicted of a criminal offence, convicted of a criminal offence resulting in a conditional discharge;
- Have accepted a police caution;
- Have been disciplined by any organisation responsible for regulating or licensing a health or social care professional;
- Are barred from working with children and/or vulnerable adults;
- Have been suspended or placed under a practice restriction by an employer or similar organisation because of concerns about your fitness to practise;
- Have a health condition which a reasonable person would think may impair your fitness to practise.

### **This list is not exhaustive**

You should co-operate with any investigation or formal inquiry about your, or another health professional's, fitness to practise, fitness to undertake training as an optometrist or dispensing optician, or the fitness of a business registrant to carry on business as an optometrist, dispensing optician, or both.

For further information see:

[https://www.optical.org/goc/filemanager/root/site\\_assets/codes\\_of\\_conduct/chre\\_whistleblowing\\_statement.pdf](https://www.optical.org/goc/filemanager/root/site_assets/codes_of_conduct/chre_whistleblowing_statement.pdf)

### **Guidance on Social Media and Electronic Communication**

1.1.7 Members should ensure that they comply with their obligations in this area, which includes the bulletin board and similar forums. See Appendix I (OC guidance on social media) [OC Guidance on Social Media](#)

### **Registration and Enrolment**

1.2.1 The General Optical Council (GOC) was established in 1958 to promote high standards of professional education and professional conduct among opticians and to carry out some additional duties assigned by the Opticians Act. The GOC discharges its function in relation to professional conduct by means of its powers to require the registration of qualified dispensing opticians and to enforce standards by means of its disciplinary machinery. Under all circumstances it is the dispensing optician's responsibility to register and to maintain registration.

1.2.2 Registration with the GOC is essential for full scope of practice. The title dispensing optician is a registered title and can only be used by registered dispensing opticians. The GOC shall maintain a register of persons undertaking training as dispensing opticians. A person who is undertaking training provided by an approved training establishment or obtaining practical experience in the work of a dispensing optician shall have his/her name in the appropriate register.

## **Safeguarding**

1.3.1 The Optical Confederation's Code of Practice for Domiciliary Eyecare may be accessed here:

<http://www.opticalconfederation.org.uk/downloads/domiciliary/domiciliary-code-of-practice-2014-final.pdf>

## **Continuing Education and Professional Development**

1.4.1 Dispensing opticians must abide by rules relating to compulsory education and training. This includes periods during which the dispensing optician is suspended from the register of dispensing opticians, or when career breaks are taken. Dispensing opticians wishing to practice in specialised areas should be sure that they have the necessary training and skills and comply with the specialty CET rules.

1.4.2 Those who cease to practise (for domestic, health or other reasons) should ensure that they undergo appropriate CET before returning to practice.

## **Indemnity Insurance**

1.5.1 It is a legal requirement that all dispensing opticians in practice and others under their supervision are covered by an appropriate level of professional indemnity and products liability insurance, and that they review the level of cover annually. Possession of such insurance is a condition of full membership of ABDO and is available (inter alia) from the Association.

1.5.2 Students' PI Insurance: The GOC requires student registration, and student insurance. Student insurance cannot be issued independently by ABDO's insurers, but must be included on the Supervisor insurance. ABDO's insurance company (via ABDO) must be notified, and details given. For student CLOs, the situation is the same, student CL insurance cannot be issued, and the student CLO must be insured on the supervisor's policy.

1.5.3 Practitioners working in more than one business, as locums for example, are reminded that cover afforded by an employer of one business will not necessarily extend to another. Practitioners covered by an employer's insurance are advised to acquaint themselves fully with the extent and nature of the policy.

1.5.4 Members should note that claims can be made many years after an event. They must ensure that cover continues in circumstances where they change insurers, take a career break or retire.

## **Working with the unregistered**

1.6.1 Some unregistered persons and unenrolled bodies corporate engaged in selling spectacles may employ registered dispensing opticians. While it is not unlawful to accept such employment, ABDO recognises that to do so could raise important legal and ethical issues and may create problems.

1.6.2 ABDO takes the view that it might constitute serious professional misconduct for a registered dispensing optician to enter, or to remain in the employment of, or in professional association with, lay persons (that is, not a doctor, hospital authorities, registered opticians or enrolled bodies corporate) whose business is carried on without regard to the principles of good professional conduct. The unregistered seller remains subject to no control but the employed registered dispensing optician, working full or part time, would be considered by the GOC as responsible for

adhering to GOC policies and ABDO guidelines. Moreover, the fact that a registered dispensing optician is on the premises all or part of the time does not mean that all of the available service will be provided by registered personnel. It is misleading to suggest otherwise to the public. If any title is to be used, it should indicate the registered dispensing optician's name and qualifications and hours of attendance. It is also important to ensure that, in accordance with the Sale of Optical Appliances Order of Council 1984, the prescriptions of the following categories of patients are dispensed by or under the supervision of a qualified registered medical practitioner, qualified registered optometrist or qualified registered dispensing optician:

1. Children under the age of 16.
2. Those who are registered sight impaired [partially sighted] or severely sight impaired [blind].

The provision of contact lenses to the public is also subject to the supervision of the above registered practitioners whose qualifications comply with the GOC Contact Lens (Qualification etc.) Rules 1988 (as amended).

### **Supervision of Trainees**

1.7.1 Certain professional functions are regulated by law:

1. The testing of sight, as defined in the Opticians Act 1989, Section 24 (Testing of Sight) and 26 (Duties to be performed on sight testing) and in the Sight Testing (Examination and Prescription) (No 2) Regulations 1989
2. The fitting of contact lenses (Section 25 of the Opticians Act 1989).
3. The dispensing of spectacle prescriptions of a kind that unqualified persons are not permitted by law to dispense (Section 27 of the Opticians Act 1989). The method of supply of all optical appliances including ready-made reading spectacles, on the premises of a registered optician or enrolled body corporate.

1.7.2 Those registered dispensing opticians who are charged with the supervision of trainees in practice have a considerable obligation. Supervisors should ensure that their trainees are registered with the GOC.

1.7.3 Individual supervisors of registered student dispensing opticians and trainee contact lens opticians must be approved by ABDO and comply with the following requirements:

1. Have two years continuous full registration with the GOC, IOB or GMC (previous student GOC registration does not qualify towards the two year requirement) and have a maximum of two GOC registered students at any one time, irrespective of which optical discipline.
2. Undertake to give continuous personal supervision to the trainee and accept full responsibility for his/her actions – i.e. be on the premises whilst the trainee is attending any patient. It is essential that registered professionals in a supervisory capacity and those being supervised are aware of their roles and duties and particularly what functions cannot be carried out without a GOC/GMC registered supervisor being present on the premises and in a position to intervene. Students are advised to register two supervisors to allow flexibility for cover during periods of holiday and sickness. ABDO should be notified if a supervisor is absent for an extended period of cover (say in excess of four weeks) as alternative supervisory arrangements should then be made for the student. Only supervisors that students have registered with the ABDO Examinations and Registration Department may

- supervise for the ABDO PQP and supervisors may only sign records in the ABDO PQP portfolio folder for the student's work that they have personally supervised.
3. Ensure the practice facilities and equipment are to the standard normally required for providing a full dispensing service.
  4. Ensure that the trainee receives practical experience in all areas of practice covered in the GOC Dispensing Core Competencies.
  5. Give the trainee the opportunity to attend appropriate tutorial and revision courses.
  6. Take an active interest so that the trainee is familiar with the practical examination syllabus, observes and comments on the trainee carrying out spectacle dispensing and adjustments and discusses appropriate selected courses of action.
  7. Permit a representative of ABDO to visit the premises at any time considered reasonable by appointment. ABDO would expect to visit each student along with their principal supervisor during their time in practice training. The purpose of the visit is to verify that the working environment is conducive to training and to support the student and supervisor as much as possible. The ABDO representative would also be required to verify the authenticity of completed case records and therefore supervisors should ensure that procedures are in place to allow the auditing process and that they have complied with the Data Protection Act (i.e. that all related patients are aware that case records may be checked by ABDO for authenticity).

## Duty to Refer

1.8.1 Every registered dispensing optician has a statutory duty to immediately refer a patient to a registered medical practitioner or directly to a hospital for appropriate medical advice if it appears that a patient is suffering from disease or injury of the eye. In such cases the optician must inform the patient that s/he is referring him/her, and the reason for that referral. A referral letter must also be completed and contain enough information such that the need for referral is explained so that the correct action is taken by the recipient practitioner, including -

- The dispensing optician's name and qualifications,
- the patient's name, address and date of birth,
- the last examination date and the visual acuities on that date (if known).
- If possible the visual acuities at the referral date and the symptoms with the duration of the symptoms
- The signs as observed by gross external examination of the eye or, if appropriate by slit-lamp bio-microscope examination
- Relevant details of the patient's history including details of current and recent patient medication
- It must be stated that no ophthalmoscopy was performed.

1.8.2 A referral made directly to a hospital is necessary if the condition is potentially sight threatening. The patient must be given a casualty note and advised to attend the Accident & Emergency Department immediately. A copy of the casualty note must be sent to the patient's GP with a covering letter. The reason for referral should be explained to the patient, and it is good practice to support this in writing. Copies of referral letters must be kept with the patient record card. In due course the patient should be contacted and the record card annotated with the result of the referral. For non-urgent referrals, a full eye examination should be recommended as soon as possible.

1.8.3 If in the professional judgement of a registered optician there is no justification to refer a person consulting him/her to a registered medical practitioner, or that it would be impracticable or inexpedient to do so, the registered optician may at his/her discretion decide not to refer that person on that occasion; but in that event he/she:

1. shall record on the record card of the person consulting him/her:
  - i. a sufficient description of the injury or disease from which the patient appears to be suffering.
  - ii. the reason for deciding not to refer on that occasion.
  - iii. details of any advice tendered to the patient.
  - iv. an account of any action taken; and
2. if appropriate, and with the consent of the person consulting him/her, shall inform that person's general medical practitioner of those matters recorded.

1.8.4 A registered dispensing optician has the option of referring the patient to an optometrist. In that event, it will then be the optometrist's responsibility to refer or not, but it should be recorded that the referral has been made to the optometrist together with the details of the injury or disease from which the patient appears to be suffering and of any advice tendered to the patient. The registered dispensing optician must be fully cognisant of all ocular emergencies which would necessitate referral directly to a hospital.

1.8.5 The knowledge of a patient's visual acuity and how this may impinge on their driving ability is a confidential matter, and may not be disclosed to a third party. If a patient is suspected of being below the legal standard for driving, s/he has a legal responsibility to inform the DVLA. Any advice which you give to the patient should be noted on the record.

1.8.6 At Appendix I a form designed for the use of dispensing opticians wishing to refer can be downloaded.

## **Clinical Support**

Use and Supply of Pupil Dilating Drugs [ *this paragraph is repeated in Section 5*]

1.9.1 Optometrists and Dispensing Opticians are reminded that Tropicamide and other pupil dilating drugs are prescription only medicines (POMs). As such the supply of these drugs is controlled by law and only certain classes of person, such as optometrists (and OMPs), are the only members of the practice team who legally are responsible for the instillation of these POMs. Registered Dispensing Opticians may order a limited list of POMs [see below] including these drugs for use in the practice. The use of pupil dilating eye drops should always, therefore, be done under the direction and supervision of an optometrist (or doctor/OMP).

Amethocaine hydrochloride  
Chloramphenicol  
Cyclopentolate hydrochloride  
Fusidic acid  
Lignocaine hydrochloride  
Oxybuprocaine hydrochloride  
Proxymetacaine hydrochloride  
Tropicamide

Contact Lens Opticians may now instil a limited range of anaesthetics [see below] in the course of appropriate contact lens fitting. The Association recommends that this should only be used for complex fittings where it is needed to achieve a satisfactory result.

Lignocaine hydrochloride  
Oxybuprocaine hydrochloride  
Proxymetacaine hydrochloride

In the case of acute bacterial conjunctivitis ONLY, the sale and supply of 0.5% Chloramphenicol drops [1% ointment] may now be instigated by all Dispensing Opticians. The restrictions of the pharmacy classification limit the supply to

- o a maximum pack size of 10ml[ drops]/4gms[ointment]
- o only in adults and children over 2 years of age
- o for a maximum of 5 days.

All actions and advice should be noted on the patient's record.

For diagnosis of acute bacterial conjunctivitis and further advice - [see Dispensing Optics - Special educational supplement - April 2010](#)

1.9.2 Practices should have Standard Operating Procedures to ensure that drugs are managed in accordance with the legislation.

1.9.3 Optometrists are referred to the Appendix A of the College Formulary, and College Guidance on delegation. If they are in any doubt about what to do in their particular circumstances they are advised to contact their professional and/or defence body for advice.

For further information see [www.college-optometrists.org](http://www.college-optometrists.org)

### **Domiciliary Visits**

1.10.1 A domiciliary service is intended for those who are house-bound. A registered dispensing optician offering this service should ensure that the required high standards of care, conduct and professional responsibility are provided.

1.10.2 Registered dispensing opticians carrying out domiciliary visits should be readily identifiable by name to the patient. As patients retain the right to freedom of choice of dispensing it is important that, should a dispensing be requested, a range of spectacle frames and/or other appliances (such as magnifiers etc.) appropriate to the patient's need, be made available.

1.10.3 Proper patient records must be made, kept secure and confidential. Domiciliary visits should not be viewed as a 'one-off' service. Specific arrangements must be made for a contact address and telephone number so that patients have access to a local contact for queries, advice and any necessary aftercare service in connection with the dispensing.

### **Statutory cooling off period for domiciliary services**

1.10.4 The UK Domiciliary Eyecare Committee advises that the new statutory cooling off period of seven (7) days applies to all goods and services ordered/contracted for in the home or a place of work for over £35 including the supply of spectacles, contact lenses and other optical devices. For example, when a provider takes an

order from a domiciliary patient to supply spectacles to the patient's prescription, the patient is entitled to a seven day "cooling off period". This means that he may cancel the order for the new spectacles at any time within 7 days of the order being placed. The provider may start the ordering process before the 7 day cooling off period is over but at their own risk of the patient cancelling unless the patient gives written permission. If the patient has given written permission then he/she is liable for the costs of any work carried out after that permission is given.

1.10.5 The Optical Confederation's Code of Practice for Domiciliary Eyecare may be accessed here:

<http://www.opticalconfederation.org.uk/downloads/domiciliary/domiciliary-code-of-practice-2014-final.pdf>

## **Professional Publicity**

1.11.1 Although the GOC has ceased to issue rules on publicity, ABDO takes the view that any advertising by a dispensing optician should not bring the profession into disrepute.

1.11.2 Items for sale should be clearly marked with their price. It is very important that members of the public who might purchase the product or service are fully aware of prices and fees charged. Registered dispensing opticians should encourage the public to use eyecare and eyewear services and may employ acceptable publicity.

1.11.3 It is universally recognised that the success of the practice depends upon the public reputation it enjoys for the quality of the services and product provided. The public is the only true guide in this matter, since no registered dispensing optician can be competent to claim, directly or indirectly, that his/her quality of service is superior to that of professional colleagues. Any claim of superiority therefore carries a serious risk of being misleading and should not be made.

1.11.4 Registered dispensing opticians should observe their professional obligation to avoid publicity or advertising which could bring the profession into disrepute or which their colleagues or the public could find distasteful.

1.11.5 Considerable care has to be exercised when offering discounts or special offers to ensure that the public is not misled in any way. Complete details of any conditions connected with an offer or discount must be included in any advertising material and prominently displayed in the practice. Failure to do so results in prosecution being brought by Trading Standards Officers and involves GOC fitness to practice procedures. False claims of 'sale' items will incur similar action and penalties. (See Consumer Protection Act 1987 Part III)

## **Media Relations**

### General information

1.12.1 Registered dispensing opticians are occasionally called on by journalists and radio and television reporters to make statements on current issues in the profession, grant interviews or to help in the composition of feature articles, pamphlets or books. While good publicity and a free flow of information to the public through the news media is desirable and potentially of benefit to the public, such activities must be handled with the greatest of care, especially by the inexperienced.

1.12.2 It is preferable that questions about dispensing practice be dealt with by the ABDO Secretariat, rather than individuals. If there is no alternative but to make a statement on a professional matter of public interest, ideally advice and guidance should be sought from the Secretariat before responding.

1.12.3 Local newspapers frequently publish feature articles publicising some (usually retail) enterprise, associated with editorial matter and supportive advertisements by retail shopkeepers. Registered dispensing opticians are advised to treat any such requests for interviews with caution and should insist on the right to approve the text of articles before publication.

1.12.4 ABDO takes the view that all registered dispensing opticians who own or manage practices must take responsibility for such publicity even if they can claim lack of knowledge.

### **Advice**

1.12.5 The registered dispensing optician should be adequately prepared for questioning. Avoid 'off the cuff' statements to casual callers; insist on time for reflection on questions from journalists if unprepared.

1.12.6 If unsure of how to handle the interview either refer the interviewer to the Association's Secretariat or seek the latter's advice.

1.12.7 If wishing to express personal opinions ensure that they are identified as such, and do not be harassed into imprudent over-simplification.

1.12.8 Avoid overt self-advertisement or assertions of superiority of professional services over colleagues.

1.12.9 Insist on editorial right to vet any material for publication.

1.12.10 Be especially cautious of interviews intended to be the basis of feature articles.

### **Consumer Complaints**

1.13.1 Wherever possible complaints should be given priority and speedily resolved within the practice. Unwillingness on the part of any registered dispensing optician to deal with a complaint does not reflect well upon either the individual or on the profession as a whole. It is therefore essential that a sound procedure for handling complaints exists and can be explained to patients by all members of staff.

1.13.2 ABDO fully supports the independent Optical Consumer Complaints Service, (OCCS) which was established to handle complaints that could not be resolved in-house. Any complaint against a member who refuses to accept any finding of OCCS will render himself/herself liable to investigation for conduct unbecoming membership of ABDO, and could result in GOC fitness to practise procedures being instigated.

1.13.3 It is important that when other organisations are involved – including the GOC, Primary Care Trusts (PCTs), Local Health Boards (Wales), Health Authorities, Scottish Executive, OCCS etc., information requested by such an authority is provided as promptly as possible, subject to the guidelines in paragraph 24.

## **The Fitness to Practise Jurisdiction of the GOC – see Appendix A**

1.14.1 A registered dispensing optician who becomes involved with the GOC fitness to practise procedures should seek the advice of the Association at an early stage. Legal protection and professional indemnity cover in such an event is a benefit of membership.

1.14.2 The General Optical Council appoints selected members to its Investigation Committee. This committee investigates an allegation made against a registrant. It decides whether the complaint ought to be considered by the Fitness to Practise Committee, or by the Optical Consumer Complaints Service (OCCS), or whether the allegation warrants no further action.

1.14.3 The Fitness to Practise Committee is independent of the membership of the General Optical Council. It receives evidence and adjudicates on allegations made against a registrant following referral from the Investigation Committee. Other than in exceptional circumstances it deliberates and adjudicates in public. Its powers in the case of a guilty verdict range from an erasure order or suspension from the register or, if appropriate, conditional registration.

1.14.4 The committee may impose either in addition or instead of it, a financial penalty order currently not exceeding £50,000. In reaching a decision the committee will, in appropriate cases, take into account ABDO's Advice and Guidelines.

1.14.5 If either the Fitness to Practise Committee or the Investigation Committee finds a registered dispensing optician's fitness to practice is not impaired, they may nevertheless give the registrant a warning regarding his/her future conduct or performance. Such cases may be referred to the ABDO to invoke a Performance Review Procedure (PRP) although the GOC still maintains overall responsibility.