

CET Competencies for Optometrists 2016

Unit of Competency	Elements of Competence	Performance Criteria	Indicators
<p>1.Communication</p> <p><i>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</i></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>Asks appropriate questions to obtain a full history. Uses appropriate strategies to understand patients' needs e.g. not interrupting and then summarising and checking understanding</p>
		<p>1.1.2 Elicits the detail and relevance of any significant symptoms.</p>	<p>Employs an appropriate mix of questions to elicit information from patients, for example, open and closed questions.</p>
		<p>1.1.3 Identifies and responds appropriately to patients' fears, anxieties and concerns about their visual welfare.</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>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>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>Makes effective use of body language to support explanation. Demonstrates awareness of our own body language. Uses appropriate supporting material</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>Takes a thorough history from the patient to include: <ul style="list-style-type: none"> o Medication, control, disease duration <p>Demonstrates a thorough understanding of the disease process in cases such as diabetes, inflammatory disease etc. Provides a layman's explanation of the particular disease process</p> </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>
<p>1.2.5 Communicates effectively with any other appropriate person involved in the care of the patient</p>	<p>Records and discusses advice and management in a clear and appropriate manner</p>

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Standards of Practice	2.1 Listen to patients and ensure that they are at the heart of the decisions made about their care	2.1.1 Give patients your full attention and allow sufficient time to deal properly with their needs.	
		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> <p>2.3.1.1 Voluntarily.</p> <p>2.3.1.2 By the patient or someone authorised to act on the patient's behalf.</p> <p>2.3.1.3 By a person with the capacity to consent.</p> <p>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.</p>	
		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.	
		2.8.2 As a minimum, record the following information: 2.8.2.1 The date of the consultation. 2.8.2.2 Your patient's personal details. 2.8.2.3 The reason for the consultation and any presenting condition. 2.8.2.4 The details and findings of any assessment or examination conducted. 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. 2.8.2.6 Consent obtained for any examination or treatment. 2.8.2.7 Details of all those involved in the optical consultation, including name and signature, or other identification of the author.	
	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.	

		<p>2.11.2 Protect and safeguard children, young people and vulnerable adults from abuse. You must:</p> <p>2.11.2.1 Be alert to signs of abuse and denial of rights.</p> <p>2.11.2.2 Consider the needs and welfare of your patients.</p> <p>2.11.2.3 Report concerns to an appropriate person or organisation.</p> <p>2.11.2.4 Act quickly in order to prevent further risk of harm.</p> <p>2.11.2.5 Keep adequate notes on what has happened and what actions you took.</p>	
		<p>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 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>	

		2.11.7 Ensure that when reporting concerns, you take account of your obligations to maintain confidentiality as outlined in standard 14.	
	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> <p>2.12.1.1 Be aware of and comply with health and safety legislation.</p> <p>2.12.1.2 Ensure that the environment and equipment that you use is hygienic.</p> <p>2.12.1.3 Ensure that equipment that you use has been appropriately maintained.</p> <p>2.12.1.4 Follow the regulations on substances hazardous to health.</p> <p>2.12.1.5 Dispose of controlled, clinical and offensive materials in an appropriate manner.</p> <p>2.12.6 Minimise the risk of infection by following appropriate infection controls including hand hygiene.</p>	
		<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> <p>2.12.2.1 If insurance is provided by your employer, you must confirm that adequate insurance is in place.</p> <p>2.12.2.2 If you work in multiple practices, you must ensure that there is adequate insurance to cover each working environment.</p> <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>	

		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.	
		2.12.4 In an emergency, take appropriate action to provide care, taking into account your competence and other available options. You must: 2.12.4.1 Use your professional judgement to assess the urgency of the situation. 2.12.4.2 Provide any care that is within your scope of practice which will provide benefit for the patient. 2.12.4.3 Make your best efforts to refer or signpost the patient to another healthcare professional or source of care where appropriate.	
	2.13 Show respect and fairness to others and do not discriminate	2.13.1 Respect a patient's dignity, showing politeness and consideration.	
		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.	
		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.	
		2.13.4 Respect colleagues' skills and contributions and do not discriminate.	
		2.13.5 Be aware of how your own behaviour might influence colleagues and students and demonstrate professional behaviour at all times.	
		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 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	<p>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:</p> <p>2.19.1.1 Tell the patient or, where appropriate, the patient's advocate, carer or family) that something has gone wrong.</p> <p>2.19.1.2 Offer an apology.</p> <p>2.19.1.3 Offer appropriate remedy or support to put matters right (if possible).</p> <p>2.19.1.4 Explain fully and promptly what has happened and the likely short-term and long-term effects.</p> <p>2.19.1.5 Outline what you will do, where possible, to prevent reoccurrence and improve future patient care.</p>	
		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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<p>3. Methods of Ocular Examination</p> <p><i>The ability to perform an examination of the eye and related structures</i></p>	<p>3.1 The ability to use techniques in ocular examination and to understand the implications of the findings in terms of subsequent examination techniques</p>	<p>3.1.1 Uses instruments to measure corneal curvature and assess its regularity</p>	<p>Uses instruments to accurately measure, assess and record the corneal curvature and regularity Correctly interprets the information gathered</p>
		<p>3.1.2 Uses a slit lamp to examine the external eye and related structures</p>	<p>Demonstrates an understanding of the methods of illumination, filters and other attributes of the slit lamp and their uses Demonstrates a full slit-lamp routine for the assessment of the external eye and related structures in a logical sequence</p>
		<p>3.1.3 Examines the fundi using both direct and indirect techniques</p>	<p>Uses a technique which allows an appropriate view of the fundus, including thorough and systematic scanning Demonstrates a safe technique Detects significant lesions</p>
		<p>3.1.4 Identifies abnormal colour vision and appreciates its significance</p>	<p>For a minimum of 2 different test types, the ability to:</p> <ul style="list-style-type: none"> ○ Identify the test types available and who to use them on ○ Correctly use and interpret the results ○ Advise and manage the patient appropriately ○ Understands the significance of results in terms of: <ul style="list-style-type: none"> ○ Occupational implications ○ Genetics
		<p>3.1.5 Investigates the visual fields of patients with all standards of acuity and analyses and interprets the results.</p>	<p>Identifies which patients require visual fields assessment Chooses and carries out the appropriate method and manner of visual field assessment Interprets the field plot (including reliability), describing any abnormality using recognised terminology Identifies the cause of field defects from sample images e.g. location of visual pathway lesion, retinal problem Uses the basic alternative techniques in appropriate circumstances e.g. confrontation, Amsler, alternative fixation targets Appropriately adapts investigation for patients with reduced acuity</p>

		3.1.6 Uses both a non-contact and contact tonometer to measure intraocular pressure and analyses and interprets the results.	Safely sets up and uses the appropriate tonometer For contact tomometry demonstrates appropriate choice and use of drug/s Provides explanation and advice to the patient covering: <ul style="list-style-type: none"> o Process, risks, after procedure advice Accurately records and interprets the results
		3.1.7 Assesses the tear film	Chooses appropriate instrumentation and uses correct and safe methods to assess tear quantity and quality Accurately records the results and differentiates normal from abnormal
		3.1.8 Uses the slit lamp to assesses anterior chamber signs of ocular inflammation	Uses the appropriate slit lamp technique in appropriate ambient lighting Slit lamp technique should include viewing the following: <ul style="list-style-type: none"> • Corneal endothelium • Aqueous humour • Iris and anterior lens surface Describes and grades what they would expect to see in a patient with anterior ocular inflammation
		3.1.9 Assesses pupil reactions	Uses appropriate ambient illumination and light source to assess pupil reactions Accurately records the results and differentiates normal from abnormal
		3.1.10 Uses diagnostic drugs to aid ocular examination	Understands the indications and contraindications for drug use and potential side effects Understands and applies best practice in terms of the legal aspects of access, use and supply Makes appropriate selection of drug/s and uses safely
		3.1.11 Makes an assessment of the fundus in the presence of media opacities.	Carries out dilated examination of a patient using a binocular indirect ophthalmoscopy (BIO)lens Provides evidence of fundus seen (features recorded e.g. C/D ratio, pigmentation etc.) Records the media opacity

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<p>4. Optical Appliances</p> <p><i>The ability to dispense an appropriate optical appliance</i></p>	<p>4.1 The ability to interpret and dispense a prescription using appropriate lenses and facial and frame measurements.</p>	<p>4.1.1 Identifies anomalies in a prescription and implements the appropriate course of action</p>	<p>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 offers solutions, for example, aniseikonia, anisometropia</p>
		<p>4.1.2 Measures and verifies optical appliances taking into account relevant standards where applicable.</p>	<p>Measures and verifies that lenses have been produced to a given prescription within BS tolerances Verifies that all aspects of the frame or mount has been correctly supplied Measures and verifies that the lenses are correctly positioned in the spectacle frame/mount within BS tolerances</p>

		<p>4.1.3 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 and form • Centration and fitting positions • Frame details • Lens surface treatments
		<p>4.1.4 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 166 and legislation and sources <p>Demonstrates a knowledge of visual task analysis including lighting Understands the legal responsibilities for employees, employers, dispensing opticians and optometrists Understands and identifies common ocular hazards and common or sight threatening leisure activities and occupations and the ability to advise patients.</p>
		<p>4.1.5 Dispenses a range of lens forms to include complex lenses, multifocals and high corrections, and advise on their application to specific patients needs.</p>	<p>Demonstrates correct interpretation of prescriptions Understands the following lens parameters Lens form, design, materials, coatings and tints, availability, blank sizes Demonstrates understanding of frames covering the following: Size, materials, relationship between frame, lenses and face Demonstrates the appropriate lens and frame selection and justification (bearing in mind patient's lifestyle requirements) Demonstrates appropriate frame adjustments</p>
		<p>4.1.6 Prescribes and dispenses spectacles for vocational use.</p>	<p>Identifies the vocational needs of the patient and carries out task analysis Takes appropriate measurements Prescribes and dispenses the most appropriate frames and lenses for the task</p>
		<p>4.1.7. Manages non-tolerance cases.</p>	<p>Identifies problems Undertakes appropriate investigation and takes appropriate action Explains to patient what course of action will be taken and obtains patient's agreement Arranges follow-up if necessary</p>

	<p>4.2 The ability to advise on and to dispense low vision aids</p>	<p>4.2.1 Advises on the use of, and dispenses simple low vision aids including simple hand and stand magnifiers, typoscopes and hand held telescopes.</p>	<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>
		<p>4.2.2 Understands the application of complex low vision aids.</p>	<p>Identifies appropriate patients for complex low vision aids Selects the appropriate Visual Aid e.g. spectacle mounted telescopes, CCTV</p> <ul style="list-style-type: none"> • Considering range: use / magnification / Limitations / Lighting and environment • Demonstrate an awareness of other alternatives <p>Aware of access/ availability of services Makes appropriate referral and potential outcome</p>

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<p>5. Contact Lenses</p> <p>The ability to manage the fitting and aftercare of patients with contact lenses</p>	<p>5.1 The ability to select and fit the most appropriate lens for the planned use and clinical needs of the patient</p>	<p>5.1.1 Chooses, fits and orders soft lenses</p>	<p>Demonstrates an understanding of the range of soft lens materials and designs available Makes the appropriate choice of soft lens parameters Assesses the fit of lenses using a variety of techniques Makes appropriate adjustment of lens for best fit Writes an appropriate order for a soft lens</p>
		<p>5.1.2 Instructs the patient in soft lens handling and how to wear and care for them</p>	<p>Instructs a patient in the techniques of soft lens insertion, removal and other relevant handling instructions Instructs a patient on the principles of soft lens wear and care including use of soft lens care products</p>
		<p>5.1.3 Chooses, fits and orders rigid lenses</p>	<p>Demonstrates an understanding of the range of rigid lens materials and designs available Makes the appropriate choice of rigid lens parameters Assesses the fitting of a rigid lens Makes appropriate adjustment of lens for best fit Writes an appropriate order for a rigid lens</p>
		<p>5.1.4 Instructs the patient in rigid contact lens handling, and how to wear and care for them</p>	<p>Instructs a patient in the techniques of RGP lens insertion, removal and other relevant handling instructions Instructs a patient on the principles of RGP lens wear and care including use of RGP lens care products</p>

<p>5.2 The ability to assess the progress in wear of a contact lens patient and to investigate, identify and manage any aftercare issues.</p>	<p>5.2.1. Manages the aftercare of patients wearing soft lenses.</p>	<p>Demonstrates an understanding of the content and routine of a soft CL aftercare consultation Carries out the relevant tests and assessments which are required in a routine soft lens aftercare consultation Demonstrates an understanding of soft lens adaptation and aftercare issues and how to manage them</p>
	<p>5.2.2. Manages the aftercare of patients wearing rigid gas permeable contact lenses.</p>	<p>Demonstrates an understanding of the content and routine of a rigid CL aftercare consultation Carries out the relevant tests and assessments which are required in a routine rigid lens aftercare consultation Demonstrates an understanding of rigid lens adaptation and aftercare issues and how to manage them</p>
<p>5.3 The ability to select and fit the most appropriate complex lens for the planned use and clinical needs of the patient</p>	<p>5.3.1. Chooses and manages the fitting of toric contact lenses</p>	<p>Demonstrates an understanding of the types of astigmatism which require correction Chooses the appropriate type of CL correction to meet the relevant needs of the patient Demonstrates an understanding of the designs and materials available in toric contact lenses and selects the appropriate toric lens for the needs of the patient</p>
	<p>5.3.2 Chooses and manages the correction of presbyopic patients</p>	<p>Demonstrates an understanding of the advantages/disadvantages of the various methods of managing presbyopia and chooses the most appropriate method for the needs of the patient</p>
	<p>5.3.3. Understands the techniques used in fitting complex contact lenses and advises patients requiring complex visual correction.</p>	<p>Knows the methods for the CL correction of aphakia, high ametropia, keratoconus postsurgical and post-refractive surgery Including:</p> <ul style="list-style-type: none"> o the types of lenses available, their fitting characteristics, fitting technique and any patient advice required when fitting these lenses

Unit of Competency	Elements of Competence	Performance Criteria	Indicators
<p>6 Ocular Disease</p> <p>The ability to identify and manage ocular abnormalities</p>	<p>6.1 The ability to manage patients presenting with eye disease, including sight threatening eye disease</p>	<p>6.1.1. Understands the risk factors for common ocular conditions.</p>	<p>Understands the risk factors for developing common ocular conditions including: Glaucoma, cataract, diabetic retinopathy and ARMD</p>
		<p>6.1.2. Interprets and investigates the presenting symptoms of the patient.</p>	<p>Asks appropriate and relevant questions to follow up presenting symptoms Recognises a significant symptom (including reduced vision) Investigates the presenting symptom Interprets the results</p>
		<p>6.1.3. Develops a management plan for the investigation of the patient.</p>	<p>Recognises that there is a need for action and further investigation within the primary care setting Chooses and carries out an appropriate technique for that investigation Interprets the results and acts in line with College of Optometrists and NHS guidelines</p>
		<p>6.1.4. Identifies external pathology and offers appropriate advice to patients not requiring referral.</p>	<p>Uses an appropriate method for looking at the external eye, grades what is seen at the initial check and at follow up covering:</p> <ul style="list-style-type: none"> • External eye and ocular surfaces • Lids, lashes, lumps/bumps and red eye <p>Gives the correct advice /treatment and review period Aware of pharmaceutical agents available (legal status, indications, contraindications and side effects and uses appropriate sources of medicines information) Explains clearly to the patient and checks their understanding</p>
		<p>6.1.5. Recognises common ocular abnormalities and refers when appropriate.</p>	<p>Recognises, using appropriate technique/s, all of the following:</p> <ul style="list-style-type: none"> o Cataract o Glaucoma or glaucoma suspects o Anterior eye disorders e.g. blepharitis, dry eye, meibomian gland dysfunction, lid lesions o AMD and macular abnormalities <p>Manages appropriately</p>

6.1.6. Manages patients presenting with cataract.	<p>Understands the impact of cataract on patients' lifestyle Provides advice on minimising impact on lifestyle – non surgical management Shows awareness of HES management – understands the risk and benefit of surgery. Provides appropriate advice and management including, when necessary, referral for cataract extraction</p>
6.1.7. Manages patients presenting with red eye/s.	<p>Obtains relevant information from the patient Uses appropriate methods of examination to enable differential diagnosis Appropriately manages the patient after diagnosis</p>
6.1.8. Evaluates glaucoma risk factors, to detect glaucoma and refer accordingly.	<p>Discusses the key risk factors Identifies findings suggestive of open and closed angle glaucoma from clinical examination Uses above information to determine if referral is appropriate Decides on urgency and pathway of referral</p>
6.1.9 Manages patients presenting with macular degeneration.	<p>Distinguishes between wet and dry AMD from symptoms and clinical findings Establishes patient needs and visual function Makes appropriate recommendations for management or referral Understands potential treatments both medical and "in practice" options</p>

<p>6.1.10. Recognises, evaluates and manages diabetic eye disease and refers accordingly.</p>	<p>Recognises and names correctly the stage of diabetic eye disease Gives local referral route and the appropriate timescales for referral for the following diabetic retinopathies: Background/ Maculopathy/ Pre-proliferative/ Proliferative</p>
<p>6.1.11. Understands the treatment of a range of common ocular conditions.</p>	<p>Demonstrates a basic understanding of the treatment regimes of cataract, AMD, glaucoma, diabetic eye disease and minor anterior eye problems Can discuss the treatment options for 2 of the above conditions</p>
<p>6.1.12. Evaluates and manages patients presenting with symptoms of retinal detachment.</p>	<p>Identifies, evaluates and investigates significant symptoms Assesses risk factors Carries out an appropriate eye examination, Manages the findings according to local protocol</p>
<p>6.1.13. Recognises ocular manifestations of systemic disease.</p>	<p>Provides evidence of examining patients and recognising ocular manifestations of systemic disease in hypertension and diabetes Answers questions and recognises a range of ocular conditions from images provided by the assessor and relates these to the systemic disease</p>
<p>6.1.14. Assesses symptoms and signs of neurological significance.</p>	<p>Assesses the relevant symptoms and signs Understands which signs/symptoms could relate to a neurological condition and the follow up information required to make a differential diagnosis Understands the significance and relative importance of the findings Manages appropriately</p>

6.1.15. Recognises adverse ocular reactions to medication.

Shows awareness relating to sources of information of adverse reactions
Provides evidence of the recognition of an adverse reaction to medication (systemic or topical)
Identifies and/or lists the Ocular Adverse reactions to a range of common medications (systemic or topical)
Describes the reporting scheme

Unit of Competency	Elements of Competence	Performance Criteria	Indicators
<p>7. Assessment of Visual Function</p> <p>The ability to assess visual function in all patients</p>	<p>7.1 The ability to make appropriate prescribing and management decisions based on the refractive and ocular motor status</p>	<p>7.1.1. Refracts a range of patients with various optometric problems by appropriate objective and subjective means.</p>	<p>Achieves accurate retinoscopy, and end point subjective results Near add and range appropriate to needs Uses appropriate methods of checking e.g. +1.00Ds blur and use of pin-hole Understands the relationship between vision and prescription and symptoms and prescription</p>
		<p>7.1.2. Uses appropriate diagnostic drugs to aid refraction.</p>	<p>Understands the indications/contraindications/legal aspects for use and supply of cycloplegic drugs Carries out the procedure safely Interprets the results Appropriately records all aspects of the examination</p>
		<p>7.1.3. Assesses children's visual function using appropriate techniques.</p>	<p>Uses a range of assessment strategies according to age and ability to include:</p> <ul style="list-style-type: none"> o Vision, OMB and Stereopsis <p>Knows the expected norms for different ages</p>
		<p>7.1.4. Understands the techniques for assessment of vision in infants.</p>	<p>Describes the use of vision testing equipment, for an infant under 2 years old, for example, preferential looking, optokinetic nystagmus</p>
		<p>7.1.5. Assesses patients with impaired visual function and understands the use of specialist charts for distance and near vision, and the effects of lighting, contrast and glare.</p>	<p>Assesses vision and adapts refraction routine depending on circumstances, for example, age, amblyopia, visual impairment Is realistic in their expectations for patient Understands the use and scoring of specialist charts e.g. Peli Robson, LogMar to assess vision/VA and contrast sensitivity Understands the benefits of lighting and the adverse affects of lighting/glare</p>
		<p>7.1.6. Understands the special examination needs of patients with learning and other disabilities.</p>	<p>Recognises what range of patients have special examination needs Treats those with learning and other disabilities without prejudice in a courteous and sensitive manner and, in addition, have an ability to empathise with the patient. Demonstrates an awareness of the need to be flexible in their approach to the examination, amending and adapting techniques and communication appropriately.</p>

7.1.7. Understands the special examination needs of patients th severe visual field defects.

Understands the different types of severe visual field defect and how to adapt examination technique to take them into account, in particular:

- o Consideration of patient's mobility,
- o Adaptation of routine

Unit of Competency	Elements of Competence	Performance Criteria	Indicators
8. Assessment and Management of	8.1 The ability to	8.1.1. Assesses binocular status using objective and subjective means.	Takes a case history that covers patient history and symptoms relevant to binocular status only Undertakes objective tests using suitable targets, and assessing deviation accurately Undertakes subjective tests using suitable targets, as appropriate to patient

Binocular Vision The ability to assess and manage patients with anomalies of binocular vision	assess and make appropriate prescribing and management decisions based on the ocular motor status of the patient		
		8.1.2. Understands the management of patients with an anomaly of binocular vision.	Recognises which management option is appropriate dependant on presenting symptoms and history Demonstrates an understanding of the principles of different types of management including refractive, orthoptic, prismatic, surgery Is able to describe in detail the orthoptic exercises given
		8.1.3. Investigates and manages adult patients presenting with heterophoria.	Relates OMB tests and symptoms and decides on appropriate management Evidences correct management including complete patient advice. Is able to discuss alternatives including prism, refraction, exercises and referral
		8.1.4. Manages adult patients with heterotropia.	Identifies onset and type of tropia from appropriate questions during symptoms and history and appropriate clinical tests Demonstrates appropriate management of different types and onsets of tropia Understands treatment options including potential benefits/limitations of squint surgery Gives advice to patient about their condition and possible effect on lifestyle e.g. driving
		8.1.5. Manages children at risk of developing an anomaly of binocular vision.	Identifies signs and symptoms in relation to personal / family history Understands/ administers and interprets appropriate examination procedures with respect to age and developmental ability Provides appropriate management of the child
		8.1.6. Manages children presenting with an anomaly of binocular vision.	Identifies and manages significant heterophoria or strabismus in children Demonstrate knowledge of possible orthoptic treatment at hospital Demonstrates knowledge of hospital waiting list times locally
		8.1.7. Manages patients presenting with an incomitant deviation.	Carries out and interprets motility and cover test results. Takes and interprets History and Symptoms Recognises that additional tests are required and interprets the results. Appropriately manages the condition Understands the musculature involved