
Continuing Education for Extended Primary Eye Care Services

Issued by
LOCSU, ABDO, AOP, FODO and The College of Optometrists
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Association of
Optometrists



THE COLLEGE OF
OPTOMETRISTS



SUPPORT FOR PRIMARY
EYE CARE DEVELOPMENT



Association of British
Dispensing Opticians



FEDERATION OF (OPHTHALMIC
AND DISPENSING) OPTICIANS

Continuing Education for Extended Primary Eye Care Services

Advice from LOCSU, ABDO, AOP, FODO and The College of Optometrists

Continuing education is required for practitioners to maintain their competence for core extended primary eye care services. The only mandated continuing education for core competency services is the GOC CET scheme. It is necessary to meet the requirements of this GOC scheme in order to continue to practise as an optometrist or registered dispensing optician. Within the confines of the CET scheme, practitioners should target relevant subject areas to meet their learning needs.

The extended primary eye care services are:

- Minor Eye Conditions
- Glaucoma Repeat Measures
- Cataract counselling and referral
- Cataract Post-operative review
- Low Vision
- Learning Disabilities
- Children (screening follow up)

Service providers (Primary Eye Care Companies)

As a matter of governance, service providers (usually primary eye care companies) should feedback data to sub-contractors and commissioners. In the case of MECS, for instance, this should include their caseload and case complexity by diagnosis or provisional diagnosis as well as other factors such as source of referrals, proportion of referrals and proportion of follow ups. For Glaucoma Repeat Measures, data might include the proportion of 2nd repeats. In all cases the data provided to sub-contractors or practitioners should provide anonymised comparative data showing performance relative to others providing the service. The companies should encourage practitioners to consider their performance and whether they have identified any learning needs.

Primary eye care companies should aim to hold an annual meeting of all sub-contractors and practitioners to update them on service performance, new services and any problem areas. They should explain how to use the data that is being provided. They may or may not wish to include a relevant CET presentation at the same meeting.

Companies may find it useful to collect feedback on learning needs as there may be common themes.

Sub-contractors and practitioners

Data provided by their company or commissioner should be carefully considered by sub-contractors and practitioners. They should review their case mix and consider whether there are any areas where they feel further study is required, as well as any areas where they may appear to be an outlier – for which there can often be good reasons.

Where learning needs are identified, practitioners should plan ways of acquiring the additional knowledge required. Where this is available as accredited CET, the points provide a useful record of action taken.

Arranging peer review or discussion events is a useful way of discussing cases from extended services with local colleagues.

Commissioners

Where commissioners wish to quantify further learning in relation to core extended services this can be measured by GOC CET points. Both minor eye conditions and post-operative cataract review are services that fall within the core competence of optometry but might previously have been provided by doctors. For that reason the optical bodies' advice, following on from initial accreditation, is 3 CET points for MECS and 1 CET point for post-op cataract from the mandatory 36 points required by the GOC every 3 years (3 years being a CET cycle). The other services are extensions of core optometry but falling outside the General Ophthalmic Services contract. The optical bodies' position is that mandated CET is not required for these services to be contracted and practitioners should target their CET at those areas where they feel further personal learning is required, as they would for any other aspect of optometry.

Learning objectives at the practitioner level and appropriate to all the services are listed in Appendix 1

Accredited CET

CET that is specifically aimed at extended services and uses some of the learning points listed above can describe itself as being suitable to support the development of practitioners who are providing the service in question. It may use the description of Extended Primary Eyecare CET (EPECET)

Providers should note that companies and service providers may prefer practitioners to attend education that they provide within the area as this may be more targeted at local aspects of the services.

CLOs and dispensing opticians may be involved in elements of various services, either directly or as part of the practice team. As such they may wish to attend relevant lectures and so learning objectives have been included for them.

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Appendix 1 - Learning objectives*

The following section outlines example learning objectives aligned to each service:

Minor eye conditions service

Optometrist

- 1.1.2 Be able to elicit relevant detail from patients presenting with a minor eye condition (Communication)
- 2.8.1 Maintain appropriate records for patients presenting with a minor eye condition (Standards of Practice)
- 3.1.2 Be able to use appropriate techniques to assess patients presenting with a minor eye condition (Methods of Ocular Examination)
- 6.1.3 Be able to manage patients presenting with a minor eye condition (Ocular Disease)

Dispensing optician

- 1.1.2 Be able to elicit relevant detail from patients presenting with a minor eye condition (Communication)
- 2.8.1 Maintain appropriate records for patients presenting with a minor eye condition (Standards of Practice)
- 8.1.6 Can recognise the need for further investigation and can refer appropriately (Ocular Abnormalities)

Contact lens optician

- 1.1.2 Be able to elicit relevant detail from patients presenting with a minor eye condition (Communication)
- 2.8.1 Maintain appropriate records for patients presenting with a minor eye condition (Standards of Practice)
- 3.1.2 Be able to use appropriate techniques to assess patients presenting with a minor eye condition (Methods of Ocular Examination)

Glaucoma repeat measures service

Optometrist

- 1.2.4 Be able to explain to patients about the outcome from their glaucoma repeat readings assessment (Communication)
- 2.5.3 Be aware of the latest guidelines relating to glaucoma referral (Standards of Practice)
- 2.8.1 Maintain appropriate records for patients presenting for glaucoma repeat readings (Standards of Practice)
- 3.1.6 Understand the appropriate use of a tonometer and interpret the results accordingly (Methods of Ocular Examination)
- 6.1.8 Be able to appropriately assess patients at risk of glaucoma (Ocular Disease)

Dispensing optician

- 1.2.4 Can explain to the patient the purpose of repeat measures in monitoring the progress of glaucoma
- 2.8.1 Maintain appropriate records for patients presenting for glaucoma repeat readings (Standards of Practice)
- 3.1.6 Understand the procedure for contact tonometry and the implications of results obtained (Methods of Ocular Examination)

- 8.1.3 Understands the options for glaucoma management
- 8.1.6 Can recognise the need for further investigation and can refer appropriately (Ocular Abnormalities)

Cataract counselling and referral

Optometrist

- 1.1.2 Be able to elicit relevant detail from patients presenting with cataract (Communication)
- 1.2.4 Be able to explain management options to patients presenting with cataract (Communication)
- 2.8.1 Maintain appropriate records for patients presenting with cataract (Standards of Practice)
- 3.1.2 Be able to use appropriate techniques to assess patients presenting with cataract (Methods of Ocular Examination)
- 6.1.6 Be able to manage patients presenting with cataract (Ocular Disease)

Dispensing optician

- 2.8.1 Record advice for patients presenting with cataract (Standards of Practice)
- 4.2.1 Be able to advise on appropriate optical and non-optical strategies to maximise visual quality in the presence of cataract (Optical Appliances)
- 6.3.2 Be able to advise patients on glare, illumination and contrast (Low Vision)

Cataract postoperative review service

Optometrist

- 1.1.2 Be able to elicit relevant detail from patients presenting following cataract surgery (Communication)
- 2.8.1 Maintain appropriate records for patients presenting following cataract surgery (Standards of Practice)
- 3.1.2 Be able to use appropriate techniques to assess patients presenting following cataract surgery (Methods of Ocular Examination)
- 6.1.11 Be able to manage patients presenting following cataract surgery (Ocular Disease)

Low vision

Optometrist

- 1.1.1 Be able to elicit relevant detail from patients with low vision in order to meet their specific needs (Communication)
- 4.2.1 Be able to advise patients on the use of suitable low vision aids (Optical Appliances)
- 4.2.2 Understand the use of complex low vision aids (Optical Appliances)
- 7.1.6 Be able to adapt examination techniques to meet the needs of patients with impaired visual function (Assessment of Visual Function)

Dispensing optician

- 1.1.1 Be able to elicit relevant detail from patients with low vision in order to meet their specific needs (Communication)
- 6.1.1 Can check the effectiveness of a current prescription and carry out a low vision assessment (Low Vision)

6.3.1 Be able to advise patients on the use of, and dispense suitable simple or complex low vision aids (Low Vision)

6.4.1 Can advise patients about the consequences of their visual impairment and provide aftercare (Low Vision)

6.4.3 Can direct/refer low vision patients to other support services and agencies (Low Vision)

Learning disabilities

Optometrist

1.1.2 Be able to communicate effectively with patients with specific needs (Communication)

2.2.5 Be able to provide patients or their carers with sufficient support to allow them to follow any advice given in relation to their care (Standards of Practice)

7.1.5 Be able to adapt examination techniques to meet the needs of patients with learning disabilities (Assessment of Visual Function)

Dispensing optician

1.2.2 Be able to communicate effectively with patients with poor or atypical communication skills (Communication)

2.2.5 Be able to provide patients or carers with sufficient support to allow them to follow any advice given in relation to their care (Standards of Practice)

2.1.5 Can facilitate reasonable adjustments in practice, for example, appointment times, familiarisation visit, quiet area to wait, minimal waiting time (Standards of Practice)

2.7.7 Be able to advise on use and purpose of prescribed spectacles, liaising with professional colleagues as necessary (Standards of Practice)

4.5.1 Is able to record facial measurements to ensure the accurate final fitting, use and maintenance of prescribed optical appliances, including special frame adaptations as appropriate (Optical Appliances)

Children

Optometrist

1.1.2 Be able to elicit relevant detail from children and their parents (Communication)

1.2.4 Be able to explain the reasons behind management decisions to children and their parents (Communication)

5.1.1 Understand the most suitable approach for fitting contact lenses to children (Contact Lenses)

7.1.1 Be able to assess children's visual function using appropriate techniques (Assessment of Visual Function)

7.1.4 Understand how to assess visual function in infants (Assessment of Visual Function)

8.1.5 Be able to manage patients presenting with a binocular vision anomaly (Assessment and Management Of Binocular Vision)

Dispensing optician

1.1.2 Be able to elicit relevant detail from children and their parents (Communication)

1.2.4 Be able to explain the reasons for referral from school screening and management decisions to children and their parents, liaising with professional colleagues as necessary (Communication)

5.1.1 Be able to advise parents and children about contact lens wear for children (Contact Lenses)

9.2.1 Can discuss factors pertaining to prescribing decisions and spectacle dispensing with children and carers (Paediatric Dispensing)

9.3.1 Completes and records facial measurements and can relate them to stages in facial development for accurate spectacle fitting, including special frame adaptations as appropriate (Paediatric Dispensing)

Contact lens optician

5.1.1 Understand the most suitable approach for fitting contact lenses to children (Contact Lenses)

* These criteria have been developed by LOCSU in consultation with: Association of British Dispensing Opticians, Association of Optometrists; College of Optometrists; Federation of Ophthalmic and Dispensing Opticians.