



# THE COLLEGE OF OPTOMETRISTS

## **Programme to prepare optometrists to manage or co-manage patients with established glaucoma (Diploma Level)**

### **1. Aim**

The training programme is designed to prepare optometrists to participate in community or hospital-based schemes for the management of patients with established COAG and other cases of glaucoma deemed suitable for management by optometrists e.g. treated angle closure, pseudo exfoliative glaucoma. Optometrists working at this level should additionally possess all of the competencies required at Certificate and Higher Certificate Level. The Diploma Level programme is designed to develop the required management skills for patients with glaucoma.

### **2. Learning outcomes**

Following completion of the programme, an optometrist should be able to demonstrate:

- [a] an ability to take a comprehensive ophthalmic history in a patient with established glaucoma
- [b] an understanding of the use of perimetric techniques for the assessment of a patient with diagnosed glaucoma
- [c] an ability to detect disease progression by observation of the optic nerve head/nerve fibre layer and/or results of imaging/functional tests
- [d] an ability to monitor the response to treatment and modify the management plan if necessary
- [e] an understanding of the pharmacology, cautions, contraindications, interactions and side effects of anti-glaucoma medication
- [f] an understanding of the indications for, techniques, expected outcomes and complications of laser therapies and surgical interventions used in the management of glaucoma and its related conditions

### **3. Indicative content**

- (a) Pathogenesis of glaucomatous optic neuropathy
- (b) Normal tension glaucoma
- (c) Secondary glaucomas
  - Exfoliation syndrome and exfoliative glaucoma (PXF)
  - Pigmentary glaucoma (PDS)
  - Other causes of secondary glaucoma
- (d) Principles of management of open angle glaucomas
  - Evidence base
  - Target IOP
- (e) Principles of management of primary angle closure (PAC) and primary angle closure glaucoma (PACG)
- (f) Medical management of open angle glaucomas

- Indications, cautions, contraindications, side effects of anti-glaucoma medication
  - Compliance and adherence
- (g) Monitoring and detection of progression in a patient with open angle glaucoma
- Visual field test strategies
  - Detection of progression (through observation of disc/RNFL, results of imaging tests or field change)
  - Non-glaucomatous field loss/impact of co-morbidity
- (h) Surgical techniques and laser therapy in the management of open and angle-closure glaucomas
- Indications
  - Techniques
  - Complications
- (i) Clinical decision making in the management of COAG, PXF glaucoma, and treated PAC/PACG
- Interpretation and synthesis of clinical findings
  - Formulation of a clinical management plan
  - Clinical guidelines e.g. NICE, EGS
- (j) Lifestyle and social aspects of glaucoma
- Compliance
  - Optimising quality of life
  - Sources of help and information
- (k) Clinical governance in the management of established glaucoma
- Quality standards e.g. NICE
  - National patient safety agency (NPSA)

#### **4. Teaching, Learning and Assessment Strategies**

The programme should be of sufficient length to achieve the stated learning outcomes. Training should consist principally of a structured clinical placement in an appropriate ophthalmic care setting under the direction of a sub-specialist ophthalmologist mentor (although it is anticipated that specialist optometrists could be involved in the training process). The designated mentor will provide supervision and support, and will arrange for appropriate clinical exposure to facilitate the stated learning outcomes and the integration of theory and practice. The clinical placement for the diploma should build on that required for the higher certificate. During the placement, the trainee should have an active involvement in each patient episode. It is anticipated that the complexity of the case mix should gradually increase as clinical experience develops. From experience of existing training programmes for optometrists with a specialist interest in glaucoma, it is recognized that the number of patient episodes required to achieve competence varies considerably. However, at least 250 patient episodes<sup>1</sup> of varying diagnosis and complexity are required for an individual to become competent at diploma level. As a guide, placements are likely to be of approximately 12 months duration on a one session per week basis in order to achieve the necessary experience, case exposure and patient numbers.

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<sup>1</sup> requirement additional to those required for the higher certificate level

Assessment strategies must be made explicit and be appropriate for the competency they are designed to test. For example, assessments could consist of a combination of workplace assessments (e.g. direct observation of consultation and examination skills or case discussions) in addition to formal examinations. The development of clinical decision-making is a key aspect of the training and this should be formally assessed e.g. using a structured oral exam based on unseen clinical scenarios or a 'key features' examination. For each assessment, a marking scheme with the appropriate pass/fail criteria should be established.

### **Accreditation of prior learning (APL)**

Accreditation of prior learning (APL) may be awarded to candidates as appropriate. It should be noted that the APL must be specific to the units and certificates already held by candidates. APL can count for no more than one third of the programme.

Candidates may be eligible for exemption from the clinical placement through accreditation of prior learning (APL).

The criteria for exemption are:

1. candidates must be current practitioners with relevant experience in glaucoma management within a hospital, clinic or other appropriate setting
2. candidates must present a portfolio of at least 250 patient episodes; patients should be seen within a hospital, clinic or other appropriate setting
3. the portfolio evidence must include details of relevant, specific workplace assessments which directly match the clinical skills learning outcomes in the College of Optometrists' Glaucoma professional diploma
4. items of evidence within a portfolio have a currency of two years.

The course provider must ensure that this portfolio is assessed by at least two assessors, using a formal process which is explicit, reliable, and valid and fits into the quality assurance framework of their course.