

Project 1 Indicative Guidance



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Project 1 - Indicative guidance

Methodology

This guidance was developed with input from a wide range of sector stakeholders, many of whom volunteered significant time and effort at short notice. Five writing groups were formed (22/09/21), working asynchronously as well as meeting on MS Teams, to focus on Outcomes 1 and 2, 3a, 3b, 4 and 5, and 6 and 7 each with a facilitator. Initial drafts were considered at a consolidation meeting (13/10/21), with representatives of each group present, at which point a format and content style was selected, and groups asked to refine their output accordingly. At that point the group determined that whilst an overarching assessment mapping table would be of value, the indicators themselves needed to be focused on final outcomes, such that learning and scaffolding approaches as well as examples of good practice present in early drafts would be held over for future projects. Revised and combined outputs, including overarching assessment materials prepared by the steering group were then considered and developed further at a refinement meeting (02/11/21), again comprised of writing group representatives. The revised compiled documents were shared with the Advisory review group, who were asked to feed back via a JISC online survey (11/11/21). Feedback was reviewed and incorporated at a further finalisation meeting including representatives of GOC (25/11/21), as well as via MS Teams before submission to GOC (30/11/21).

The support and expertise of the writers has been invaluable in completing the project. Accordingly, members of the writing groups are listed at the end of the document.

Purpose

The guidance is intended to support course teams and approval panels by developing and expanding on the meaning of the outcomes as indicators and providing references to resources that address elements in more detail. It deliberately does not address how students may be developed to achieve the outcomes, focusing instead on the terminal level specified. Some suggestions for assessments that may be effective in measuring outcomes are also provided. The intent is to be inclusive of innovative practice and developments in the profession, whilst capturing the key features of registrants in the two professions as described by the outcomes. It should therefore not be viewed or deployed in a way that is constraining or assumes that it is entirely comprehensive. The SPOKE contributors consider it important that it is viewed as a live document, that is updated regularly with good practice examples as they are identified during approval and review processes, and expect that excellent practice will emerge that is not yet captured here.

Structure

In order to provide the opportunity to reflect the distinctive characteristics and nuances of the two professions, two separate indicative guidance tables have been prepared. In addition, an assessment typology and mapping table is provided to assist course teams with developing assessment strategies that are able to cover all outcomes effectively, without undue burden on the learner or delivery team. Relevant background resources, selected by the writing groups, are cited in the table and presented after the assessment tables.

Outcomes for Registration – Dispensing Optician

Outcome 1. Person Centred Care

Patient well-being/care is an optical professional's primary concern and must be at the heart of all decisions made about patient care (Standard 1). Optical professionals must be able to employ an adaptive and personalised approach to patient care, considering the patient's social, clinical, personal, and cultural needs whilst challenging their own conscious and unconscious bias (Standards 4 and 13). Where care requires the involvement of other professionals, they must be able to collaborate effectively (Standards 3, 6, 7, 10, 11 and 14).

	Outcome	Level	Indicator	References /resources
01.1	Actively listens to patients and their carers to ensure patients are involved in and are at the heart of decisions made about patients' care.	Does	 Effectively communicates with patients and carers to obtain all relevant history and symptoms using a combination of verbal, non-verbal, and written skills. Actively seeks confirmation of patient understanding and involves patient in decisions made regarding their own healthcare. 	(1) (2) (3)
01.2	Manages desired health outcomes of patients, taking into consideration any relevant medical, family, and social history of the patient, which may include personal beliefs or cultural factors.	Does	 Recognises the importance and significance of family history, signs, and symptoms. Recognises patients' physical, emotional, intellectual, and cultural background and adapts care and communication appropriately. Adheres to relevant aspects of the Equalities Act. 	
01.3	Protects patients' rights; respects the choices they make and their right to dignity and privacy	Does	 Adheres to the Law as set in the Opticians Act. Complies with the GOC Standards of Practice 1-19. 	
01.4	Ensures high quality care is delivered and puts into place adaptive measures as needed for different environments (such as domiciliary, prisons and special schools).	Shows How	 Adapts own practise to ensure appropriate care of all patients. Recognises when environmental factors should be adapted to accommodate individual patient needs. 	
01.5	Commits to care that is not compromised because of own personal conscious and unconscious values and beliefs.	Does	 Develops an awareness of differing values and belief structures and seeks to care inclusively, with attention to the potential impact of own beliefs on patient care. 	
O1.6	Obtains and verifies continuation of valid consent from adults, children, young and vulnerable people, and their carers and records as appropriate.	Does	 Adheres to legal requirements when gaining consent. Applies the various policies that a practice is required to have on display or on file including safeguarding children and adults, chaperone policy, complaints and data management. 	
01.7	Demonstrates effective clinical decision- making, diagnosis, evaluation and makes appropriate and timely referral, where this is needed to meet a patient's needs.	Does	 Demonstrates an awareness of referral pathways and can accurately refer when appropriate. Recognises their scope of practice and the role of referral in effective person-centred care. Designs and implements an appropriate management plan, in line with individual patients' clinical needs and preferences. 	
01.8	Refers and signposts as necessary to sight loss and other relevant health services.	Does	 Advises on accessing and makes appropriate referrals to low-vision services, in line with patients' best interests. Is able to direct to relevant health and social care services for patients at risk. 	

Outcome 2. Communication

Communication is key to effective patient and public interactions (Standard 2). Optical professionals must be able to communicate effectively with patients and other professionals. Optical professionals must be able to adapt their approach and style according to specific individual needs and in a manner that is supportive of achieving desired outcomes (Standards 1, 10 and 13). This includes written and verbal communication, as well as recognising non-verbal cues (Standards 3, 4, 11, 12 and 13).

	Outcome	Level	Indicator	References /resources
02.1	Conducts communications in a sensitive and supportive manner adapting their communication approach and style to meet the needs of patients, carers, health and care colleagues and the public	Does	 Demonstrates effective communication using verbal, non-verbal, and written skills. Seeks and communicates relevant information from and to patients in an effective and appropriate manner. Ensures the effective implementation of individual management plans, checking patient understanding by actively adapting their communication approach. 	
O2.2	Acts upon non-verbal cues from patients or carers that could indicate discomfort, a lack of understanding or an inability to give informed consent.	Knows How	 Identifies patients who have poor or non-verbal communication skills or those who are confused, reticent or who might be misled. Adapts communication to ensure those patients are managed appropriately. Ensures appropriate consent and assent has been obtained from relevant carers and patients, in instances where the patient has limited ability to engage fully. 	
O2.3	Communicates effectively within a multi- disciplinary healthcare team and works collaboratively for the benefit of the patient.	Does	 Recognises the diverse contributions of both clinical and non-clinical colleagues including those from other professions, and adapts own communication methods, style and content to ensure the delivery of effective patient care. Recognises the varying roles of other allied health and medical professionals and their contribution to person centred care. 	
O2.4	Critically reflects on how they communicate with a range of people and uses this reflection to improve interactions with others.	Does	 Demonstrates how to deal effectively with patient concerns. Discusses how to deal with a patient who needs information about disease and its ocular impact, its treatment, and the possible ocular side effects of medication. Recognises and manages patient's expectations and aspirations, and situations where these cannot be met. Can identify instances of miscommunication and how this could be avoided/identifies areas of improvement in their own interactions. 	

Outcome 3. Clinical Care

Optical professionals are professionally accountable and personally responsible for achieving desired patient outcomes according to their individual scope of practice. Working within their limits of competence (Standard 6), and exercising professional judgement, they must engage in evidence-informed clinical decision-making for all patients (Standards 5, 7 and 8).

	Outcome	Level	Indicator	References /resources
03.1	Undertakes safe and appropriate ocular examinations using appropriate techniques and procedures to inform clinical decisionmaking within individual scope of practice.	Does	 Justifies the choice of clinical procedures used on appropriate techniques for clinical investigations. Has an awareness of own limitations to conduct clinical examinations, and work within limits of competence. Appraises the risk balance of clinical techniques used to examine patients. Ensures patient and practitioner safety during all clinical processes and procedures. 	(4) (5) (6) (7) (8) (9) (10)
03.2	Engages with developments in research, including the critical appraisal of relevant and up-to-date evidence to inform clinical decision-making and improve quality of care.	Does	 Uses a range of research sources to influence their practice. Demonstrates information literacy. Appreciation of the quality of evidence. Synthesises research evidence to inform clinical management of patients. Able to effectively communicate pertinent research evidence to peers and patients to justify clinical decisions. 	(4) (5) (7) (9) (11)
O3.3	Engages with technological advances in eye health and broader healthcare delivery and the significance of specific developments for enhancing patient outcomes and service delivery.	Does	 Uses new technologies in diagnosis, treatment and management of ocular conditions. Uses appropriate technology in consultation, referral and clinical data exchange. Keeps abreast of emerging technologies and their potential application in clinical practice. 	(12) (13)
03.4	Analyses visual function from a range of diagnostic sources and uses data to devise a clinical management plan for a patient in areas that include the following: Dispensing of optical appliances Low vision/visual impairment Refractive management Anterior eye and contact lenses Ocular and systemic disease Binocular vision Paediatrics	Does	 Applies normative data in the interpretation of results of visual function tests. Uses clinical data to formulate a management plan across a range of ocular conditions. Analyses clinical data in light of presenting signs and symptoms. Demonstrates effective management across the specified range of patients. 	(4) (5) (6) (8)

	 Patients with learning disabilities and complex needs Occupational optometry 				
03.5 Me	ets the following clinical practice outcomes for reg	gistration a	s a d	lispensing optician:	
O3.5a (i)	Acts as a first point of contact for patients for their eye health needs by investigating,	Does	•	Takes a relevant history from individual patients and any other appropriate person involved in their care (relatives/carers and others).	(14) (15)
	diagnosing and managing individuals' functional and developmental visual conditions, including those related to age.		•	Interprets the results of history-taking and the examination of the refractive and ocular motor status and ocular health of individual patients to inform clinical decision-making and care management plans.	
			•	Records all aspects of the consultation, the findings of all tests and relevant communications with patients, their carers and colleagues, ensuring that records are accurate, legible, dated, signed, concise, contemporaneous and securely stored.	
			•	Accepts responsibility and accountability for professional decisions and actions as a first point of contact, including in responding to individual patients' needs, managing risk, and making appropriate referrals.	
O3.5a (ii)	Completes an informed clinical assessment of individual patients' needs and uses this to	Does	•	Interprets and dispenses a prescription using appropriate lenses, frame choice and accurate facial and frame measurements.	(4) (16) (17) (18)
	dispense, fit and advise on the safe and effective use of spectacles, low-vision	•	•	Measures and verifies optical appliances in line with relevant standards, guidelines, and evidence.	(19)
	appliances and ophthalmic appliances.		•	Prescribes, advises, and dispenses appropriate vocational and special optical appliances in accordance with personal eye protection regulations and relevant standards.	
			•	Manages and dispenses appropriate optical appliances, suitably adjusted for paediatric patients and for patients with complex or additional needs, including by adapting the practice environment and practice activity in line with individuals' needs.	
			•	Manages cases of non-tolerance.	
			•	Identifies and advises patients who could benefit from a low vision assessment.	
			•	Assesses patients whose vision is not meeting their needs including full history-taking and evaluation of visual requirements.	
			•	Evaluates the clinical findings of low-vision assessments, applying knowledge of low-vision optics to dispense appropriate simple and complex low-vision aids and provide relevant advice.	
			•	Advises on accessing low-vision services and makes appropriate referrals.	
			•	Manages and assesses vision, refractive error, binocular status, and visual acuity.	
			•	Evaluates optical products and advancement in technology of ophthalmic lenses and frame manufacture in order to provide patients with the most appropriate optical appliances.	

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			 Analyses a wide range of prescriptions recognising potential problems and appraising suitable lens solutions, modifying a prescription in accordance with legal requirements relative to the visual task analysis for individual patients' requirements. 	
			 Appraises and understands facial development with an ability to relate anatomical features and material properties to the dispensing of optical appliances. 	
			 Appraises and completes all facial measurements required for bespoke eyewear, including the ability to modify where necessary frames for children and patients with craniofacial abnormalities. 	
			Modifies, repairs, adjusts and accurately fits optical appliances.	
			 Manages and dispenses prescriptions including high and/or complex prescriptions recalling knowledge of optical performance and production of the appliance in order to meet patients' visual and aesthetic needs. 	
O3.5a (iii)	Advises on the safe and effective use of contact lenses and removal in an emergency.	Does	 Recognises methods of selecting and fitting contact lenses and the importance of aftercare regimes for patients with both soft and rigid contact lenses to maintain ocular health. 	
			 Advises and discusses possible contact lens options for the intended use and clinical needs of the patient. 	
			• Instructs the patient in the handling of soft and rigid lenses and how to wear and care for them.	
			• Demonstrates the method of removal of a contact lens in an emergency.	
O3.5a (iv)	Accurately identifies patients' conditions and their potential need for medical referral in a timely way, including when urgent or	Does	• Investigates and interprets the results of history-taking and clinical findings (i.e., a recognition of abnormality and correct interpretation of common investigative tests) to formulate an appropriate management plan, recognising and acting when a referral is appropriate.	(4) (16)
	emergency attention is required.		 Recognises the clinical signs/presentation of common ocular abnormalities and appropriately advises and/or refers patients in line with professional guidance and local pathways. 	
			• Manages patients presenting with a range of anterior and/or posterior ocular conditions.	
			 Recognises the clinical signs of sight- and life-threatening conditions that require immediate treatment and takes appropriate action. 	
			 Appraises the need for and urgency of making a patient referral, using relevant local protocols and national professional guidance, and acts accordingly. 	
			 Advises individual patients on the implications and care options arising from the detection of common ocular abnormalities, making referrals when in patients' best interests for their receipt of timely, efficacious care. 	
O3.5a	Recognises the use of common ophthalmic	Does	Adheres to legal requirements for the use and supply of common ophthalmic drugs.	(4) (17)
(v)	drugs, to safely facilitate optometric examination and the diagnosis/treatment of ocular disease.		 Appraises the appropriate use of common ophthalmic drugs used to aid refraction and treatment of ocular conditions and its compatibility with other treatments the patient is receiving. 	(20)
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	•	Identifies adverse ocular reactions to medication and advises, manages, and refers in line with individual patients' needs.	
	•	Recognises the indications and contraindications of commonly used ophthalmic drugs and responds in light of these to uphold patient care and safety.	

Outcome 4. Ethics and Standards

Optical professionals must uphold high professional standards and ethics through honesty, integrity and lifelong development. They are responsible for ensuring the care and safety of patients and the public. Optical professionals must work within their scope of practice and current legislation (Opticians Act 1989 ('the Act'), GOC Standards of Practice for Optometrists and Dispensing Opticians) to ensure their own practice (including supervised and delegated activities) meets all legal and professional requirements and is equitable for all.

	Outcome	Level	Indicator	References /resources
04.1	Upholds the values and demonstrate the behaviours expected of a GOC registrant, as described in the GOC Standards of Practice for Optometrists and Dispensing Opticians.	Does	Applies and embodies the relevant optical standards to their patient interactions, in clinical records, in the practice environment, with colleagues and their personal conduct.	(17) (21)
04.2	Acts openly and honestly and in accordance with the GOC Duty of Candour guidelines.	Does	 Applies candour appropriately, and explains its relevance in creating trust between the public and the optical profession. 	(17) (22)
			 Differentiates between being candid and making a protected disclosure ('whistleblowing') to the GOC or other relevant regulatory bodies. 	
			Identifies scenarios in practice where being candid is not beneficial to the patient or the public.	
04.3	Understands and implements relevant safeguarding procedures, local and national	Shows How	 Identifies and applies, where necessary, national safeguarding protocols relating to healthcare professionals working in primary or secondary care. 	(23) (24) (25) (26)
	guidance in relation to children, persons with disabilities, and other vulnerable		 Identifies and applies local protocols in place to support healthcare professionals in managing instances of safeguarding issues, such as: 	(27) (28) (29) (30)
	people.		 Local safeguarding team's role in providing advice, training opportunities, and their contact details to the local healthcare professionals 	
			 Role of the 'designated' safeguarding doctor or nurse in the local area 	
			Explains the common signs of maltreatment, abuse, and neglect of children and vulnerable adults.	
			Recognises their responsibilities in ensuring the non-registered staff in their practice understand their responsibilities in relation to safeguarding.	
			Demonstrates detailed knowledge of internal and external protocols regarding the recording and safe referral of safeguarding issues.	

			 Demonstrates an understanding of the groups of people that are at a higher risk of experiencing safeguarding issues, including but not limited to: 'Looked after children', elder abuse, domestic abuse, adults with learning disabilities. 	
			Explains the minimum requirements of an effective chaperone policy and its role in safeguarding children and vulnerable adults.	
04.4	Applies the relevant national law and takes appropriate actions i) to gain consent and ii)	Does	Evaluates the appropriateness of different types of consent to dispensing, delegated functions, triage and release of information.	(31) (32) (33)
	if consent cannot be obtained or is withdrawn.		 Applies the principles of consent to practice and dispensing situations and evaluates situations when implied and implicit consent are required, including appropriate recording. 	
			• Establishes if a patient has the capacity to consent and if they are unable to consent, who is able to give consent on their behalf.	
			 Recognises that lack of capacity to consent may be temporary or may be withdrawn, describe examples of these situations and the actions that should be taken. 	
			 Applies the current legislation on data protection, confidentiality, and consent with respect to sharing information with patient's relatives or carers. 	
			 Ability to explain clinical tests and referrals, together with the risk and benefits in a way the patient is able to understand in order to obtain informed consent. 	
			Reflects on different situations from the student's own practice regarding consent.	
04.5	Recognises and works within the limits of own knowledge and skills. Seeks support	Does	 Identifies situations where they cannot perform / complete desired technique and demonstrates appropriate action. 	(16) (15) (17)
	and refers to others where appropriate.		Demonstrates appropriate action in situations when unable to interpret results.	
			Shows evidence of appropriate referral to other professionals in a variety of situations.	
			Shows evidence of consulting other professionals in making decisions.	
			Identifies gaps in own knowledge and makes and appropriate management plan to address this.	
04.6	Understands the professional and legal	Knows	Understands GOC Standards of Practice relating to supervision.	(34) (35)
	responsibilities of trainee and student	How	Understands guidance produced by other professional bodies (e.g. ABDO).	
	supervision and of being supervised.		Identifies when direct supervision might be appropriate.	
			 Understands how to ensure the level of supervision is appropriate for the colleague and the task and the level of experience. 	
04.7	Demonstrates the fulfilment of professional and legal responsibilities in supervising	Does	Delegates appropriate activities to unregistered colleagues, applying relevant legislation, standards and guidance.	(16) (17) (21) (36)
	unregistered colleagues undertaking		Monitors knowledge and skills of unregistered colleagues, including adequate training and	(37)
	delegated activities.		assessment for regulated activities.	

O4.8	Complies with health and safety legislation.	Does	Applies current health and safety legislation and professional body guidance to their practice environment.	(38) (39)
			Demonstrates appropriate infection control procedures.	
			Considers both personal and environmental hygiene when dealing with patients and colleagues.	
04.9	Complies with equality and human rights legislation, demonstrates inclusion and	Does	Acts in line with equality and human rights legislation in the context of patient care and the workplace.	(40) (41) (42)
	respects diversity.		 Demonstrates compassionate and professional behaviour, delivers patient centred care and an inclusive and fair approach towards patients and colleagues. 	
			 Recognises the potential impact of their own attitudes, values, beliefs, perceptions and bias (conscious and unconscious) on individuals and groups and identifies personal strategies to mitigate this. 	
			 Appreciates the importance of handling sensitive personal information and responding to any information divulged by the patient in a sensitive and unbiased fashion. Maintains confidentiality and respects an individual's dignity. 	
			 Gives consideration to any equality, diversity and fairness issues from the outset when assessing a patient, particularly for groups of people who share protected characteristics. 	
04.10	Understands the patient or carer's right to complain without prejudicing the standard of care provided.	Knows	Describes why and how to act in the best interests of patients, without bias, if the patient has made a complaint.	(17) (43) (44) (45)
			 Relates the relevant GOC Standard of Practice (18) the practitioner's duty to: respect the rights of the patient, provide or comply with an employer's complaints process and respond appropriately to complaints. 	(46) (47)
			Explains clearly to a patient how to complain and informs them of the routes available.	
04.11	Adheres to the ethical principles for prescribing and to legislation relating to medicines management.	Shows How	Applies the regulations regarding the use, storage, and disposal of ophthalmic drugs used in ophthalmic practice.	(48) (49) (50) (51)
			Respects the limitations in prescribing and treating yourself and others close to you.	(52) (53)
			Shows how to report incidents of adverse reactions to medical devices or medicines using the appropriate reporting schemes.	(54)
			 Maintains appropriate knowledge regarding the drugs administered in the practice, especially contraindications and side effects, and understands how to access the relevant information relating to the medicines used. 	
			Explains the requirement to register with the MHRA under specific circumstances (e.g. the assembly of spectacles), and identify the products regulated as class 1 medical devices.	
			Takes appropriate measures when delegating the instillation of ophthalmic drugs.	
04.12	Complies with legal, professional and ethical requirements for the management of	Does	 Keeps clear, accurate, and contemporaneous records, understanding the GOC's and professional bodies' advice and guidance in relation to record keeping. 	(55) (56) (57) (58)

	information in all forms including the accuracy and appropriateness of patient records and respecting patient confidentiality.		 Produces records which are accessible, and contain all relevant patient details and history, measurements and details of assessment findings, consent obtained, referrals made, and advice. Ensures that records contain the name of any staff undertaking delegated tasks/functions. Demonstrates a systematic understanding of the principles of data protection and freedom of information legislation in relation to the use and disclosure of health data. Grants, where appropriate, a patient's Right to Access their health data, and demonstrates a detailed knowledge of the Subject Access Request (SAR) protocols relevant to ophthalmic 	(59) (60) (61) (62)
O4.13	Manages situations under which patient confidentiality may be breached in order to protect a patient or the public, in line with relevant guidance on disclosing confidential information and/or with the patient's consent.	Shows How	 Demonstrates a detailed understanding of the GOCs disclosing confidential information guidance, including when to make disclosures in the public interest and complying with external investigations. Explains responsibilities to the patient when making a disclosure without their consent. Gives examples of circumstances where it may be necessary to share information without consent. 	(63) (56)
O4.14	Applies eye health policies and guidance and utilises resources efficiently to improve patient outcomes.	Does	 Demonstrates a working knowledge of shared care schemes, glaucoma triage, pre and -post-cataract referral schemes and other locally-commissioned Enhanced Optical Services (EOS). Refers patients appropriately to optometry-led triage services or secondary care where appropriate to improve patient care and outcomes, whilst reducing unnecessary delays. Navigates service commissioning and care information effectively, in order to establish and refresh knowledge of local health systems when changing location, and over time. Accesses public health information and campaigns (e.g. smoking cessation) for the benefit of patients. Takes account of national guidance e.g. NICE, ABDO guidance. Appropriately distinguishes between patients who require referral to secondary care and those who can be referred to an optometrist. 	(9) (64) (65) (66)
O4.15	Maintains professional boundaries with patients and others, taking into consideration the additional needs of vulnerable people and specific requests/requirements.	Does	 Recognises the boundaries between patient and clinician, both within and outside the workplace. Communicates appropriately with and respects the needs of vulnerable people and those with specific requests/requirements. Demonstrates interpersonal behaviours showing sensitivity to a range of physical, emotional, and protected characteristics in individuals. Maintains acceptable professional boundaries within the testing room and during an eye examination. Where appropriate, uses chaperones and adopts professional boundaries with children and vulnerable adults. 	(67) (68) (69) (70)

			Maintains a professional distance between the practitioner and the patient, understanding that using social media can blur personal and professional boundaries	
04.16	Understands the role of carers and the power of attorney.	Knows How	Recognises the reasons why a patient may not have mental capacity and require a power of attorney.	(71) (72)
			Knows the different types of power of attorney and when they might be given.	
04.17	Complies with legislation and rules concerning the sale and supply of optical	Does	 Applies the legislation and professional body guidance surrounding sale and supply of spectacles and of powered and zero powered contact lenses. 	(16) (73) (74) (75)
	appliances.		Applies the legislation and optical body guidance surrounding sale and supply of low vision aids.	
O4.18	Provides clarity on services available and any associated payments	Does	 Makes patients aware of costs of goods and professional services before they commit to payment. 	(76) (77)
			Itemises costs of eye care and ophthalmic devices.	
			 Makes information available to patients in a format they can understand, taking into account any disabilities. 	
			Works within relevant consumer legislation.	
			Signposts patients to alternative goods or services, should they decline a recommendation.	
			 Differentiates between sight testing as defined in the Opticians' Act and additional optional services. 	
			Provides clarity to patients about NHS funded services available within an area.	

Outcome 5. Risk

Optical professionals have a responsibility to protect and safeguard patients, colleagues and others from harm (Standard 11). Optical professionals must understand and work within the limits of their competence recognising the evolving nature of personal practice (Standard 6). They should be able to identify when people might be at risk and be candid when things have gone wrong to ensure a safe environment for patients and the public (Standards 12, 16 and 19).

	Outcome	Level	Indicator	References /resources
05.1	Recognises when their own performance or the performance of others is putting people at risk and takes prompt and appropriate	Does	 Recognises conditions that could affect the ability to practise safely, including alcohol dependence, drug abuse, mental health issues and other medical conditions and how these conditions can affect safe practice. 	(30) (68) (78)
	action.		 Applies, where appropriate, the principles and procedures of whistleblowing when a colleague may be putting patients at risk, recognising the correct authority to approach. 	
			 Undertakes further training, develops existing skills and acquires new competences that will enable safe practice in the future in line with new techniques and technologies. 	
			Identifies and addresses own major learning needs using regular reflection of own practice.	

O5.2		Knows How	 Identifies professional obligations, including duty of candour, when a patient complains. Recognises what constitutes an incident or error in practice. 	(47) (30) (79) (80)
			 Explains the respective roles of the business, the OCCS, the GOC and the NHS as channels for complaints. 	(22) (81)
			 Recognises when they would need to report a complaint/ incident to an external body, e.g. ICO, MHRA, NHS. 	
			Gives examples of strategies to manage complaints in practice.	
05.3	Address any health and safety concerns about the working environment that may	Knows How	 Identifies their role and responsibilities relating to health and safety at work as an employee or employer. 	(21) (30) (38) (82)
	put themselves, patients or others at risk.		Recognises situations that might constitute a concern over health and safety.	
			Explains how to escalate health and safety concerns relating to their environment.	
			Recognises when a protected disclosure (whistleblowing) is appropriate.	İ
05.4	Applies due process for raising and escalating concerns, including speaking-up and protected disclosure if all other routes have been pursued and there is reason to believe that patients or the public are at risk.	Knows	Recognises their professional duty to raise concerns.	(30) (22) (79) (83)
		How	Explains the GOC Whistleblowing Policy and how to operate within its principles.	
			Explains the GOC Fitness to Practice Procedure.	
			Explains 'protected disclosures' as laid out in the Employment Rights Act.	
			 Recognises the importance of acting with clarity, honesty and objectivity and keeping record of any steps taken when raising concerns or dealing with those made against them. 	
			 Recognises circumstances in which practice falls below the level expected by a competent optometrist or dispensing optician and can identify situations where patient safety, dignity, or comfort may be compromised. 	
			 Uses their judgement in identifying where premises, equipment, resources, policies or systems may be unfit for purpose. 	
			 Recognises that errors and near-misses should be shared openly and be able to learn from their own and others' errors to promote a culture of safety. 	
			 Assesses the appropriate promptness by which a concern should be addressed/escalated depending on severity and risk. 	
			Differentiates between the official and non-official channels by which a concern can be raised and identifies the appropriate channel depending on severity and risk.	
			• Identifies where to access independent help, support or advice when raising a concern or dealing with a concern raised against them.	

O5.5	Applies infection prevention control measures commensurate with the risks identified.	Does	 Safely applies appropriate measures to minimise risk of infection, applying relevant current guidance. Identifies risk of person-to-person transmission and transmission via object. Identifies appropriate measures to minimise risk of infection, including: hand hygiene, surface disinfection, use of PPE, use of disposable items, (e.g. tonometer heads), where possible, decontamination of tonometer heads/diagnostic contact lenses etc., proper treatment of open bottles of contact lens solutions/saline. Uses appropriate methods to deal with disposal of controlled, clinical and offensive waste, including both non-hazardous and hazardous waste. Carries out a risk assessment, applying appropriate principles. 	(84) (85) (86) (87) (88)
O5.6	Understands the importance of maintaining their own health to remain healthy and professionally effective.	Knows How	 Recognises the importance of wellbeing and how to seek help when the need arises, drawing from the relevant professional resources. Recognises conditions that could affect their own ability to practice safely, including alcohol dependence, drug abuse, mental health issues and other medical conditions. Recognises signs and symptoms of these conditions and explains how to act and when to inform the GOC. 	(4) (16) (17) (89) (90)
O5.7	Able to risk assess i) patient's clinical condition and ii) a situation in clinical practice and make appropriate clinical decisions.	Does	 Uses knowledge of the subject and techniques in a routine manner to evaluate and formulate management plans and solutions to problems encountered in practice. Applies underlying concepts and principles outside the context in which they were first studied. Applies strategies of clinical decision-making skills within ophthalmic dispensing practice. Applies the principles of clinical reasoning and evidence-based practice and the steps in problem solving. Effectively triages patients presenting with ocular conditions. 	(91)

Outcome 6. Leadership and Management

Optical professionals must understand the importance of clinical leadership, as determined by their scope of practice, and be able to work within their area of expertise and competence to achieve desired patient outcomes (Standards 1, 6, 11 and 12). Working collaboratively within healthcare teams and with other professionals, optical professionals should promote and engage with clinical governance requirements, service improvements and local and national public health initiatives (Standard 10).

	Outcome	Level		Indicator	References /resources
06.1	Undertakes efficient, safe and effective patient and caseload management.	Does	٠	Recognises when services/teams are under pressure and acts in a responsible and considered way to ensure safe practice.	(92)
			•	Recognises stress in self and others.	

			 Demonstrates ability to work with team members to manage the needs of various stakeholders, whilst keeping patient care at the forefront. 	
O6.2	Works collaboratively within healthcare teams, exercising skills and behaviours of clinical leadership and effective team-working and management in line with their role and scope of practice. Engages with clinical governance requirements to safeguard and improve the quality of patient care, including through contributing to	Shows How Knows How	 Respects the duties of other members of the practice team and understands how working together provides the best possible care for the patient. Is familiar with local and national shared care initiatives, as well as the roles that practice employees play in these initiatives. Interacts with colleagues and patients in a manner which is: compassionate, empathetic, supportive, fair, and respectful. Acts within the Clinical leadership competency framework. Demonstrates a systematic understanding of the legislation for the safeguarding of children and vulnerable adults. Recognises where an individual may require protection and knows how to take action using 	(78) (93) (94) (95) (96) (25) (97) (98)
	service evaluation and development initiatives.		 appropriate local measures to secure the individual's safety. Is able to articulate an understanding of the principles of data protection and freedom of information legislation in relation to the use and disclosure of health data. Demonstrates awareness of appropriate circumstances for disclosure of patient information in protecting the individual and society. 	
O6.4	Recognises and manages adverse situations, understanding when to seek support and advice to uphold patients' and others' safety.	Knows How	 Demonstrates a systematic understanding of the legislation for the safeguarding of children and vulnerable adults. Recognises where an individual may require protection and knows how to take action using appropriate local measures to secure the individual's safety. Demonstrates awareness of appropriate circumstances for disclosure of patient information in protecting the individual and society. Demonstrates an understanding of whistleblowing policies and procedures. 	(99) (100)
O6.5	Takes appropriate action in an emergency, providing care and clinical leadership within personal scope of practice and referring or signposting patients as needed, to ensure their safe and timely care.	Does	 Aware of the appropriate referral pathways aligned to scope of practice. Manages patients with signs and/or symptoms of a health emergency. 	(101) (102) (103)
O6.6	Engages with population and public health initiatives and understands how population data should inform practice and service delivery.	Knows How	 Has a skill set specific to using data for improvement of health care processes and systems. Ability to understand and critically appraise epidemiological research particularly with regards to eye health. Awareness of epidemiology of common eye conditions and systemic conditions, which manifest in the eye. Awareness of current CCG activity and public heath eye care initiatives within the UK. 	(104) (105)

Ability to critically reflect on current service delivery models' impact on public health problems, which relate to eye care.	
Ability to utilize knowledge above to inform their practice.	

Outcome 7. Lifelong Learning

Continuing professional development and keeping knowledge and skills up to date is the personal responsibility of all optical professionals working within their scope of practice (Standard 5). Their own performance and that of others must be evaluated by an ongoing process of reflection to inform own learning and development needs, meet service delivery requirements and improve the quality of care for patients (Standard 10). Sources of information could include clinical audit, patient feedback and peer review (Standard 6).

	Outcome	Level	Indicator	References /resources
07.1	Evaluates, identifies, and meets own learning and development needs.	Does	 Demonstrates understanding of GOC CPD requirements for registrants. Demonstrates reflective practitioner status 	
07.2	Supports the learning and development of others, including through acting as a role model and mentor.	Shows How	Acts as a role model, educator, supervisor and mentor, seeking to share best practice, knowledge and skills with other members of the team.	(106)
07.3	Gathers, evaluates and applies effective patient and service delivery feedback to improve their practice.	Shows How	 Demonstrates skills of active listening, empathy, and patient centred care. Ability to take on board patient feedback and act in a professional manner to optimize patient care. Demonstrates the ability to adopt a growth mind-set in the face of challenges in order to enhance quality of care. 	(107)
07.4	Engages in critical reflection on their own development, with a focus on learning from experience, using data from a range of information sources (such as clinical audits, patient feedback, peer review and significant event analysis) and identifying and addressing their new learning needs to improve the quality and outcomes of patient care.	Does	 Demonstrates the ability to critically reflect- learning from previous shortcomings and utilizing best practice literature to inform future practice. Creates a yearly personal development plan- identifying and incorporating relevant CPD to fill knowledge gaps and build on areas of interest. 	(108)

Outcomes for Registration – Optometry

Outcome 1. Person Centred Care

Patient well-being/care is an optical professional's primary concern and must be at the heart of all decisions made about patient care (Standard 1). Optical professionals must be able to employ an adaptive and personalised approach to patient care, considering the patient's social, clinical, personal, and cultural needs whilst challenging their own conscious and unconscious bias (Standards 4 and 13). Where care requires the involvement of other professionals, they must be able to collaborate effectively (Standards 3, 6, 7, 10, 11 and 14).

	Outcome	Level	Indicator	References /resources
01.1	Actively listens to patients and their carers to ensure patients are involved in and are at the heart of decisions made about patients' care.	Does	 Effectively communicates with patients and carers to obtain all relevant history and symptoms using a combination of verbal, non-verbal, and written skills. Actively seeks confirmation of patient understanding and involves patient in decisions made regarding their own healthcare. 	(1) (2) (3) (16) (17) (21)
01.2	Manages desired health outcomes of patients, taking into consideration any relevant medical, family, and social history of the patient, which may include personal beliefs or cultural factors.	Does	 Recognises the importance and significance of family history, signs, and symptoms. Recognises patients' physical, emotional, intellectual, and cultural background and adapts care and communication appropriately. Adheres to relevant aspects of the Equalities Act. 	
01.3	Protects patients' rights; respects the choices they make and their right to dignity and privacy	Does	Follows relevant frameworks (see references).	
01.4	Ensures high quality care is delivered and puts into place adaptive measures as needed for different environments (such as domiciliary, prisons and special schools).	Shows How	 Adapts own practise to ensure appropriate care of all patients. Recognises when environmental factors should be adapted to accommodate individual patient needs. 	
01.5	Commits to care that is not compromised because of own personal conscious and unconscious values and beliefs.	Does	 Develops an awareness of differing values and belief structures and seeks to care inclusively, with attention to the potential impact of own beliefs on patient care. 	
01.6	Obtains and verifies continuation of valid consent from adults, children, young and vulnerable people, and their carers and records as appropriate.	Does	 Adheres to legal requirements when gaining consent. Applies the various policies that a practice is required to have on display or on file including safeguarding children and adults, chaperone policy, complaints and data management . 	
01.7	Demonstrates effective clinical decision- making, diagnosis, evaluation and makes appropriate and timely referral, where this is needed to meet a patient's needs.	Does	 Demonstrates an awareness of referral pathways and can accurately refer when appropriate. Recognises their scope of practice and the role of referral in effective person-centred care. Designs and implements an appropriate management plan, in line with individual patients' clinical needs and preferences. 	

01.8	Refers and signposts as necessary to sight loss	Does	•	Advises on accessing and makes appropriate referrals to low-vision services, in line with patients'	
	and other relevant health services.			best interests.	
			•	Is able to direct to relevant health and social care services for patients at risk.	

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Outcome 2. Communication

Communication is key to effective patient and public interactions (Standard 2). Optical professionals must be able to communicate effectively with patients and other professionals. Optical professionals must be able to adapt their approach and style according to specific individual needs and in a manner that is supportive of achieving desired outcomes (Standards 1, 10 and 13). This includes written and verbal communication, as well as recognising non-verbal cues (Standards 3, 4, 11, 12 and 13).

	Outcome	Level	Indicator	References /resources
O2.1	Conducts communications in a sensitive and supportive manner adapting their communication approach and style to meet the needs of patients, carers, health and care colleagues and the public	Does	 Demonstrates effective communication using verbal, non-verbal, and written skills. Seeks and communicates relevant information from and to patients in an effective and appropriate manner. Ensures the effective implementation of individual management plans, checking patient understanding by actively adapting their communication approach. 	
02.2	Acts upon non-verbal cues from patients or carers that could indicate discomfort, a lack of understanding or an inability to give informed consent.	Knows How	 Identifies patients who have poor or non-verbal communication skills or those who are confused, reticent or who might be misled. Adapts communication to ensure those patients are managed appropriately. Ensures appropriate consent and assent has been obtained from relevant carers and patients, in instances where the patient has limited ability to engage fully. 	
02.3	Communicates effectively within a multi- disciplinary healthcare team and works collaboratively for the benefit of the patient.	Does	 Recognises the diverse contributions of both clinical and non-clinical colleagues including those from other professions, and adapts own communication methods, style and content to ensure the delivery of effective patient care. Recognises the varying roles of other allied health and medical professionals and their contribution to person centred care. 	
02.4	Critically reflects on how they communicate with a range of people and uses this reflection to improve interactions with others.	Does	 Demonstrates how to deal effectively with patient concerns. Discusses how to deal with a patient who needs information about disease and its ocular impact, its treatment, and the possible ocular side effects of medication. Recognises and manages patient's expectations and aspirations, and situations where these cannot be met. Can identify instances of miscommunication and how this could be avoided/identifies areas of improvement in their own interactions. 	

Outcome 3. Clinical Care

Optical professionals are professionally accountable and personally responsible for achieving desired patient outcomes according to their individual scope of practice. Working within their limits of competence (Standard 6), and exercising professional judgement, they must engage in evidence-informed clinical decision-making for all patients (Standards 5, 7 and 8).

	Outcome	Level	Indicator	References/ resources
03.1	Undertakes safe and appropriate ocular examinations using appropriate techniques and procedures to inform clinical decision-making within individual scope of practice.	Does	 Justifies the choice of clinical procedures used on appropriate techniques for clinical investigations. Has an awareness of own limitations to conduct clinical examinations, and work within limits of competence. Appraises the risk balance of clinical techniques used to examine patients. Ensures patient and practitioner safety during all clinical processes and procedures. 	(6) (7) (8) (9) (10)
O3.2	Engages with developments in research, including the critical appraisal of relevant and up-to-date evidence to inform clinical decision-making and improve quality of care.	Does	 Uses a range of research sources to influence their practice. Demonstrates information literacy. Appraises the quality of evidence. Synthesises research evidence to inform clinical management of patients. Able to effectively communicate pertinent research evidence to peers and patients to justify clinical decisions. 	(7) (8) (9) (11) (109)
O3.3	Engages with technological advances in eye health and broader healthcare delivery and the significance of specific developments for enhancing patient outcomes and service delivery.	Does	 Uses new technologies in diagnosis, treatment and management of ocular conditions. Uses appropriate technology in consultation, referral and clinical data exchange. Keeps abreast of emerging technologies and their potential application in clinical practice. 	(12) (13)
O3.4	Analyses visual function from a range of diagnostic sources and uses data to devise a clinical management plan for a patient in areas that include the following: Dispensing of optical appliances Low vision/visual impairment Refractive management Anterior eye and contact lenses Ocular and systemic disease Binocular vision Paediatrics Patients with learning disabilities and complex needs	Does	 Applies normative data in the interpretation of results of visual function tests. Uses clinical data to formulate a management plan across a range of ocular conditions. Analyses clinical data in the light of presenting signs and symptoms. Demonstrates effective management across the specified range of patients. 	(6) (8)

	Occupational optometry		
O3.5 Meet	s the following clinical practice outcomes for	r registratio	on as an optometrist:
O3.5b (i) Acts as a first point of contact for patients for their eye health needs by investigating, diagnosing and managing individuals' functional and developmental visual conditions, including those related to age.	•	Does	Takes a relevant history from individual patients and any other appropriate person involved in their care (relatives/carers and others).
		 Interprets the results of history-taking and the examination of the refractive and ocular motor status and ocular health of individual patients to inform clinical decision-making and care management plans. 	
		 Records all aspects of the consultation, the findings of all tests and relevant communications with patients, their carers and colleagues, ensuring that records are accurate, legible, dated, signed, concise, contemporaneous and securely stored. 	
			 Accepts responsibility and accountability for professional decisions and actions as a first point of contact, including in responding to individual patients' needs, managing risk, and making appropriate referrals.
O3.5b (ii)	Completes an informed clinical assessment of individual patients' needs	Does	Interprets and dispenses a prescription using appropriate lenses, frame choice and accurate facial and frame measurements.
	and uses this to dispense, fit and advise		Measures and verifies optical appliances in line with relevant standards, guidelines and evidence.
on the safe and effective use of spectacles, contact lenses, low-vision aids and other ophthalmic appliances.	spectacles, contact lenses, low-vision aids		 Prescribes, advises and dispenses appropriate vocational and special optical appliances, in accordance with personal eye protection regulations and relevant standards.
		 Manages and dispenses appropriate spectacles for paediatric patients and for patients with complex or additional needs, including by adapting the practice environment and practice activity in line with individuals' needs. 	
			Manages cases of non-tolerance.
			Assesses patients whose vision is not meeting their needs, including full history-taking and evaluation of visual requirements.
			Identifies and advises patients who could benefit from simple or complex low-vision aids.
			Evaluates the clinical findings of low-vision assessments, applying knowledge of low-vision optics to dispense appropriate simple and complex low-vision aids and provide relevant advice.
			 Advises on accessing and makes appropriate referrals to low-vision services, in line with patients' best interests.
		•	Identifies, recommends and fits soft or rigid contact lenses as appropriate to support and enhance individual patients' vision, lifestyle and eye health and provides ongoing care.
			 Instructs and advises patients in handling soft or rigid lens and how to wear and care for their fitted lenses.

O3.5b (iii)		Does	• Investigates and interprets individual patients' presenting symptoms and risk factors and identifies the clinical signs of potential abnormality and disease.
ļ			Selects and deploys appropriate methods of clinical examination.
ļ			Analyses the results of an examination to make a differential diagnosis.
			 Advises individual patients on the implications and care options arising from the detection of common ocular abnormalities and disease, making referrals in line with professional guidance and local pathways, when in patients' best interests so that they receive timely, efficacious care.
			 Designs and implements an appropriate management plan arising from a clinical examination and differential diagnosis, in line with individual patients' clinical needs and preferences.
			Assesses and evaluates signs and symptoms of neurological significance.
			Manages patients presenting with a range of anterior and/or posterior ocular conditions.
			• Detects the ocular manifestations of systemic disease and advises and refers in line with individual patients' needs.
O3.5b (iv)	Accurately identifies patients' conditions and their potential need for medical referral in a timely way, including when urgent or emergency attention is required.	Does	 Interprets the results of history-taking and clinical findings (i.e., a recognition of abnormality and correct interpretation of common investigative tests) to formulate an appropriate management plan, recognising and acting when a referral is appropriate.
			• Identifies the signs of disease progression or change in individual patients' clinical status and adapts and advises on their management plan in line with this.
			 Appraises the need for and urgency of making a patient referral, using relevant local protocols and national professional guidance, and acts accordingly.
			 Recognises the clinical signs of sight- and life-threatening conditions that require immediate treatment and takes appropriate action.
			 Detects adverse ocular reactions to medication and advises, manages and refers in line with individual patients' needs.
O3.5b (v)	Uses common ophthalmic drugs safely to	Does	Adheres to legal requirements for the use and supply of common ophthalmic drugs.
	facilitate optometric examination and the diagnosis/treatment of ocular disease.		 Appraises the appropriate use of common ocular drugs to aid refraction and assessment of the fundus.
			 Obtains individual patients' informed consent to use common ophthalmic drugs to aid investigation, examination, diagnosis and treatment, including by advising on the potential side effects and associated risks of specific drugs.
			 Administers common ocular drugs appropriately, effectively and judiciously, exercising caution to ensure patient safety.
			 Recognises the indications and contraindications of commonly used ophthalmic drugs and responds in light of these to uphold patient care and safety.

Outcome 4. Ethics and Standards

Optical professionals must uphold high professional standards and ethics through honesty, integrity and lifelong development. They are responsible for ensuring the care and safety of patients and the public. Optical professionals must work within their scope of practice and current legislation (Opticians Act 1989 ('the Act'), GOC Standards of Practice for Optometrists and Dispensing Opticians) to ensure their own practice (including supervised and delegated activities) meets all legal and professional requirements and is equitable for all.

	Outcome	Level	Indicator	References /resources							
04.1	Upholds the values and demonstrate the behaviours expected of a GOC registrant, as described in the GOC Standards of Practice for Optometrists and Dispensing Opticians.	Does	Applies and embodies the relevant optical standards to their patient interactions, in clinical records, in the practice environment, with colleagues and their personal conduct.	(17) (21)							
04.2	Acts openly and honestly and in accordance with the GOC Duty of Candour guidelines.	Does	 Applies candour appropriately, and explains its relevance in creating trust between the public and the optical profession. Differentiates between being candid and making a protected disclosure ('whistleblowing') to the GOC or other relevant regulatory bodies. 	(17) (22) (110) (111)							
			 Identifies scenarios in practice where being candid is not beneficial to the patient or the public. 								
04.3	O4.3 Understands and implements relevant safeguarding procedures, local and national guidance in relation to children, persons with disabilities, and other vulnerable people.	safeguarding procedures, local and national guidance in relation to children, persons with	•	•	•	•	•	•			(23) (24) (26) (27)
				 Identifies and applies local protocols in place to support healthcare professionals in managing instances of safeguarding issues, such as: 	(28) (29) (30) (54) (112) (113) (114)						
				 Local safeguarding team's role in providing advice, training opportunities, and their contact details to the local healthcare professionals 							
			 Role of the 'designated' safeguarding doctor or nurse in the local area. 								
						Explains the common signs of maltreatment, abuse, and neglect of children and vulnerable adults.					
			Recognises their responsibilities in ensuring the non-registered staff in their practice understand their responsibilities in relation to safeguarding.								
			Demonstrates detailed knowledge of internal and external protocols regarding the recording and safe referral of safeguarding issues.								
			 Demonstrates an understanding of the groups of people that are at a higher risk of experiencing safeguarding issues, including but not limited to: 'Looked after children', elder abuse, domestic abuse, adults with learning disabilities. 								
			Explains the minimum requirements of an effective chaperone policy and its role in safeguarding children and vulnerable adults.								

aŗ	Applies the relevant national law and takes appropriate actions i) to gain consent and ii) if	Does	 Evaluates the appropriateness of different types of consent to clinical tests, dispensing, delegated functions, triage and release of information. 	(31) (32) (91) (115)
	consent cannot be obtained or is withdrawn.		 Applies the principles of consent to clinical situations and evaluates situations when implied and implicit consent are required, including appropriate recording. 	
			• Establishes if a patient has the capacity to consent and if they are unable to consent, who is able to give consent on their behalf.	
			 Recognises that lack of capacity to consent may be temporary or may be withdrawn, describe examples of these situations and the actions that should be taken. 	
			 Applies the current legislation on data protection, confidentiality, and consent with respect to sharing information with patient's relatives or carers. 	
			 Is able to explain clinical tests and referrals, together with the risk and benefits in a way the patient is able to understand in order to obtain informed consent. 	
			Reflects on different situations from the student's own practice regarding consent.	
knowledge and skills.	Recognises and works within the limits of own knowledge and skills. Seeks support and refers	Does	 Identifies clinical situations where they cannot perform / complete desired technique and demonstrates appropriate action. 	(16) (21) (116)
	to others where appropriate.		Demonstrates appropriate action in situations when unable to interpret results.	
			Shows evidence of appropriate referral to other professionals in a variety of situations.	
			Shows evidence of consulting other professionals in making decisions.	
			Identifies gaps in own knowledge and makes an appropriate management plan to address this.	
04.6	Understands the professional and legal	Knows	Understands GOC Standards of Practice relating to supervision.	(21) (117)
	responsibilities of trainee and student	How	Understands guidance produced by other professional bodies (e.g. College, AOP).	
	supervision and of being supervised.		Identifies when direct supervision might be appropriate.	
			Understands how to ensure the level of supervision is appropriate for the colleague and the task and the level of experience.	
04.7	Demonstrates the fulfilment of professional and legal responsibilities in supervising	Does	Delegates appropriate activities to unregistered colleagues, applying relevant legislation, standards and guidance.	(16) (21) (37) (117)
	unregistered colleagues undertaking delegated activities.		 Monitors knowledge and skills of unregistered colleagues, including adequate training and assessment for regulated activities. 	
			Demonstrates appropriate supervision of unregistered colleagues.	
04.8	Complies with health and safety legislation.	Does	Applies current health and safety legislation and professional body guidance to their practice environment.	(38) (87) (118)
			Demonstrates appropriate infection control procedures.	
			Considers both personal and environmental hygiene when dealing with patients and colleagues.	

04.9	Complies with equality and human rights	Does	Acts in line with equality and human rights legislation in the context of patient care and the	(40) (41)
	legislation, demonstrates inclusion and		workplace.	(119) (120)
	respects diversity.		 Demonstrates compassionate and professional behaviour, delivers patient centred care and an inclusive and fair approach towards patients and colleagues. 	
			 Recognises the potential impact of their own attitudes, values, beliefs, perceptions and bias (conscious and unconscious) on individuals and groups and identifies personal strategies to mitigate this. 	
			 Appreciates the importance of handling sensitive personal information and responding to any information divulged by the patient in a sensitive and unbiased fashion. Maintains confidentiality and respects an individual's dignity. 	
			 Gives consideration to any equality, diversity and fairness issues from the outset when assessing a patient, particularly for groups of people who share protected characteristics. 	
04.10	Understands the patient or carer's right to complain without prejudicing the standard of	Knows	Describes why and how to act in the best interests of patients, without bias, if the patient has made a complaint.	(17) (121)
care provided.		 Relates the relevant GOC Standard of Practice (18) the practitioner's duty to: respect the rights of the patient, provide or comply with an employer's complaints process and respond appropriately to complaints. 		
			Explains clearly to a patient how to complain and informs them of the routes available.	
04.11	Adheres to the ethical principles for prescribing and to legislation relating to	Shows How	 Applies the regulations regarding the use, storage, and disposal of ophthalmic drugs used in ophthalmic practice. 	(48) (49) (50) (51)
	medicines management.		Respects the limitations in prescribing and treating yourself and others close to you.	(53) (122)
			 Shows how to report incidents of adverse reactions to medical devices or medicines using the appropriate reporting schemes. 	(123) (124)
			 Maintains appropriate knowledge regarding the drugs administered in the practice, especially contraindications and side effects, and understands how to access the relevant information relating to the medicines used. 	
			• Explains the requirement to register with the MHRA under specific circumstances, and identify the products regulated as class 1 medical devices.	
			Takes appropriate measures when delegating the instillation of ophthalmic drugs.	
04.12	Complies with legal, professional and ethical requirements for the management of	Does	 Keeps clear, accurate, and contemporaneous records, understanding the GOC's and professional bodies' advice and guidance in relation to record keeping. 	(55) (57) (58) (59)
	information in all forms including the accuracy and appropriateness of patient records and		 Produces records which are accessible, and contain all relevant patient details and history, measurements and details of assessment findings, consent obtained, referrals made, and advice. 	(60) (61) (62) (126)
	respecting patient confidentiality.		Ensures that records contain the name of any staff undertaking delegated tasks/functions.	

			Demonstrates a systematic understanding of the principles of data protection and freedom of information legislation in relation to the use and disclosure of health data.	
			 Grants, where appropriate, a patient's Right to Access their health data, and demonstrates a detailed knowledge of the Subject Access Request (SAR) protocols relevant to ophthalmic practice. 	
04.13	Manages situations under which patient confidentiality may be breached in order to protect a patient or the public, in line with relevant guidance on disclosing confidential information and/or with the patient's consent.	Shows How	 Demonstrates a detailed understanding of the GOCs disclosing confidential information guidance, including when to make disclosures in the public interest and complying with external investigations. Explains responsibilities to the patient when making a disclosure without their consent Gives examples of circumstances where it may be necessary to share information without 	(56) (63)
04.14	Applies eye health policies and guidance and utilises resources efficiently to improve patient outcomes.	Does	 Demonstrates a working knowledge of shared care schemes, glaucoma triage, pre and -post-cataract referral schemes and other locally-commissioned Enhanced Optical Services (EOS). 	(7) (9) (66) (126) (128)
			 Refers patients appropriately to optometry-led triage services or secondary care to improve patient care and outcomes, whilst reducing unnecessary delays. 	
			 Navigates service commissioning and care information effectively, in order to establish and refresh knowledge of local health and other relevant systems when changing location, and over time. 	
			 Accesses public health information and campaigns (e.g. smoking cessation) for the benefit of patients. 	
			• Takes account of national guidance e.g. NICE, the College of Optometrists Clinical Management Guidance.	
			 Appropriately distinguishes between patients who require referral and those who can be monitored effectively in practice. 	
04.15	Maintains professional boundaries with	Does	• Recognises the boundaries between patient and clinician, both within and outside the workplace.	(67) (68)
	patients and others, taking into consideration the additional needs of vulnerable people and		• Communicates appropriately with and respects the needs of vulnerable people and those with specific requests/requirements.	(69) (70)
	specific requests/requirements.		• Demonstrates interpersonal behaviours showing sensitivity to a range of physical, emotional, and protected characteristics in individuals.	
			 Maintains acceptable professional boundaries within the testing room and during an eye examination. 	
			 Where appropriate, uses chaperones and adopts professional boundaries with children and vulnerable adults. 	
			 Maintains a professional distance between the practitioner and the patient, understanding that using social media can blur personal and professional boundaries. 	

O4.16	Understands the role of carers and the power of attorney.	Knows How	 Recognises the reasons why a patient may not have mental capacity and require a power of attorney. Knows the different types of power of attorney and when they might be given. 	(71) (72) (129) (130) (131)
04.17	Complies with legislation and rules concerning the sale and supply of optical appliances.	Does	 Applies the legislation and professional body guidance surrounding sale and supply of spectacles and of powered and zero powered contact lenses. Applies the legislation and optical body guidance surrounding sale and supply of low vision aids 	(16) (73) (74) (75)
O4.18	Provides clarity on services available and any associated payments	Does	Makes patients aware of costs of goods and professional services before they commit to payment. Itemises costs of eye care and arbitralmic devices.	(76) (77) (132) (133)
			 Itemises costs of eye care and ophthalmic devices. Makes information available to patients in a format they can understand, taking into account any disabilities. 	
			Works within relevant consumer legislation.	
			• Signposts patients to alternative goods or services, should they decline a recommendation.	
			 Differentiates between sight testing as defined in the Opticians' Act and additional optional services. 	
			Provides clarity to patients about NHS funded services available within an area.	

Outcome 5. Risk

Optical professionals have a responsibility to protect and safeguard patients, colleagues and others from harm (Standard 11). Optical professionals must understand and work within the limits of their competence recognising the evolving nature of personal practice (Standard 6). They should be able to identify when people might be at risk and be candid when things have gone wrong to ensure a safe environment for patients and the public (Standards 12, 16 and 19).

	Outcome	Level	Indicator	References /resources
05.1	Recognises when their own performance or the performance of others is putting people at risk and takes prompt and appropriate action.	Does	 Recognises conditions that could affect the ability to practise safely, including alcohol dependence, drug abuse, mental health issues and other medical conditions and how these conditions can affect safe practice. 	(16) (17) (70) (134)
			 Applies, where appropriate, the principles and procedures of whistleblowing when a colleague may be putting patients at risk, recognising the correct authority to approach. 	
			 Undertakes further training, develops existing skills and acquires new competences that will enable safe practice in the future in line with new techniques and technologies. 	
			Identifies and addresses own major learning needs using regular reflection of own practice.	
O5.2	Knows how to manage complaints, incidents or errors in an effective manner.	Knows How	 Identifies professional obligations, including duty of candour, when a patient complains. Recognises what constitutes an incident or error in practice. 	(22) (47) (79) (80) (135) (136)

			Explains the respective roles of the business, the OCCS, the GOC and the NHS as channels for complaints.	(44) (45) (46) (137)
			 Recognises when they would need to report a complaint/ incident to an external body, e.g. ICO, MHRA, NHS. 	
			Gives examples of strategies to manage complaints in practice.	
05.3	Address any health and safety concerns about the working environment that may put	Knows How	 Identifies their role and responsibilities relating to health and safety at work as an employee or employer. 	(17) (21) (30) (38)
	themselves, patients or others at risk.		Recognises situations that might constitute a concern over health and safety.	(82)
			Explains how to escalate health and safety concerns relating to their environment.	
			Recognises when a protected disclosure (whistleblowing) is appropriate.	
O5.4	Applies due process for raising and escalating concerns, including speaking-up and protected disclosure if all other routes have been pursued and there is reason to believe that patients or the public are at risk.	Knows	Recognises their professional duty to raise concerns.	(22) (30)
		How	Explains the GOC Whistleblowing Policy and how to operate within its principles.	(79) (83)
			Explains the GOC Fitness to Practice Procedure.	
			Explains 'protected disclosures' as laid out in the Employment Rights Act.	
		 Recognises the importance of acting with clarity, honesty and objectivity and keeping record of any steps taken when raising concerns or dealing with those made against them. 		
			 Can recognise circumstances in which practice falls below the level expected by a competent optometrist or dispensing optician and can identify situations where patient safety, dignity, or comfort may be compromised. 	
			Can use their judgement in identifying where premises, equipment, resources, policies or systems may be unfit for purpose.	
			 Recognises that errors and near-misses should be shared openly and be able to learn from their own and others' errors to promote a culture of safety. 	
		Can assess the appropriate promptness by which a concern should be addressed/escalated depending on severity and risk.		
		Differentiates between the official and non-official channels by which a concern can be raised and identifies the appropriate channel depending on severity and risk.		
		 Identifies where to access independent help, support or advice when raising a concern or dealing with a concern raised against them. 		
O5.5	Applies infection prevention control measures commensurate with the risks identified.	Does	Safely applies appropriate measures to minimise risk of infection, applying relevant current guidance.	(84) (85) (86) (87)
			Identifies risk of person-to-person transmission and transmission via object.	(88) (138)
			 Identifies appropriate measures to minimise risk of infection, including: hand hygiene, surface disinfection, use of PPE, use of disposable items, (e.g. tonometer heads), where possible, 	

			 decontamination of tonometer heads/diagnostic contact lenses etc., proper treatment of open bottles of contact lens solutions/saline. Uses appropriate methods to deal with disposal of controlled, clinical and offensive waste, including both non-hazardous and hazardous waste. 	
O5.6	O5.6 Understands the importance of maintaining their own health to remain healthy and professionally effective.	Knows How	 Carries out a risk assessment, applying appropriate principles. Recognises the importance of wellbeing and how to seek help when the need arises, drawing from the relevant professional resources. Recognises conditions that could affect their own ability to practice safely, including alcohol dependence, drug abuse, mental health issues and other medical conditions. Understands how these conditions can affect safe practice. 	(17) (16) (134)
			 Ability to recognise signs and symptoms of these conditions, how to act and when to inform the GOC. Recognises conditions that could affect their own ability to practice optometry safely, including adequate vision and be able to carry out the essential clinical tests required for safe practice. 	
O5.7	Able to risk assess i) patient's clinical condition and ii) a situation in clinical practice and make appropriate clinical decisions.	Does	 Uses a range of established techniques to initiate and undertake critical analysis of information, and to propose solutions to problems arising from that analysis Applies knowledge of the subject and techniques in a routine manner to evaluate and formulate management plans and solutions to problems and issues in clinical practice. 	(7) (91) (139)
			 Applies underlying concepts and principles outside the context in which they were first studied and applies symptom-appropriate tests. Understands and applies the principles of clinical reasoning and evidence-based practice and the steps in problem solving. 	

Outcome 6. Leadership and Management

Optical professionals must understand the importance of clinical leadership, as determined by their scope of practice, and be able to work within their area of expertise and competence to achieve desired patient outcomes (Standards 1, 6, 11 and 12). Working collaboratively within healthcare teams and with other professionals, optical professionals should promote and engage with clinical governance requirements, service improvements and local and national public health initiatives (Standard 10).

	Outcome	Level	Indicator	References /resources
O6.1	Undertakes efficient, safe and effective patient and caseload management.	Does	 Conducts responsibilities in a timely manner, prioritising urgent and important tasks to ensure safe practice. Acts in a responsible and considered way to ensure safe practice when services are under pressure. Applies best-practice techniques to promote own health and wellbeing in the workplace. 	(140) (141) (142) (143)
O6.2	Works collaboratively within healthcare teams, exercising skills and behaviours of clinical leadership and effective team-working and management in line with their role and scope of practice.	Shows How	 Critically evaluates appropriate theoretical frameworks of leadership and management. Demonstrates the application of theoretical perspectives of multi-professional team working to own practice. Proactively constructs and develops effective relationships, fostering clarity of roles within teams, to encourage productive working and to positively influence practice. 	(144) (145)
O6.3	Engages with clinical governance requirements to safeguard and improve the quality of patient care, including through contributing to service evaluation and development initiatives.	Knows How	 Demonstrates a systematic understanding of the components of clinical governance. Recognises the need to adhere to local and national clinical governance guidelines. Evaluates own practice, and participates in multi-disciplinary service and team evaluation. Is able to articulate an understanding of the impact of own and team practice on service function, effectiveness, and quality. 	(137) (146)
O6.4	Recognises and manages adverse situations, understanding when to seek support and advice to uphold patients' and others' safety.	Knows How	 Demonstrates a systematic understanding of the legislation for the safeguarding of children and vulnerable adults. Recognises where an individual may require protection and knows how to take action using appropriate local measures to secure the individual's safety. Demonstrates awareness of appropriate circumstances for disclosure of patient information in protecting the individual and society. Demonstrates an understanding of whistleblowing policies and procedures. 	(25) (147) (148) (149)
O6.5	Takes appropriate action in an emergency, providing care and clinical leadership within personal scope of practice and referring or signposting patients as needed, to ensure their safe and timely care.	Does	 Manages patients with signs and/or symptoms of a health emergency. Demonstrate leadership and determination, managing situations that are unfamiliar, complex or unpredictable. Demonstrates awareness of local health and safety legislation, policies and protocols. Aware of the limits of own competence and works within them. 	(150) (151)

06.6	Engages with population and public health	Knows	•	Demonstrates awareness of current population and public health initiatives.	(152) (153)	
	initiatives and understands how population data should inform practice and service delivery.	How	•	Demonstrates an understanding of the need to develop practice and service delivery in response to changing population health needs.		

Outcome 7. Lifelong Learning

Continuing professional development and keeping knowledge and skills up to date is the personal responsibility of all optical professionals working within their scope of practice (Standard 5). Their own performance and that of others must be evaluated by an ongoing process of reflection to inform own learning and development needs, meet service delivery requirements and improve the quality of care for patients (Standard 10). Sources of information could include clinical audit, patient feedback and peer review (Standard 6).

Outcome		Level	Indicator	References /resources				
07.1	Evaluates, identifies, and meets own learning and development needs.	Does	 Analyses and responds to own learning and development needs. Prepares and follows a personal development plan, utilising appropriate learning opportunities. 	(154) (155) (156)				
07.2	Supports the learning and development of others, including through acting as a role model and mentor.	Shows How	 Demonstrates the skills required to contribute to the teaching and training of students and other healthcare colleagues. Demonstrates awareness of teaching and learning theories and models in healthcare. 	(106) (157) (158)				
			Understands future position as supervisor and mentor.	(107) (159)				
07.3	Gathers, evaluates and applies effective patient and service delivery feedback to	Shows How	 Demonstrates a systematic understanding of how audit of clinical practice can improve clinical outcomes. 					
	improve their practice.		Actively seeks and is open to feedback on own practice by colleagues to promote ongoing development.					
			Undertakes effective reflection and analysis of feedback.					
			Proactively formulates and implements strategies to act on feedback and make improvements to practice.					
07.4	Engages in critical reflection on their own development, with a focus on learning from experience, using data from a range of information sources (such as clinical audits, patient feedback, peer review and significant event analysis) and identifying and addressing their new learning needs to improve the	Does	 Assesses own learning needs and engages in self-directed learning to maximise potential and improve outcomes. 	(137) (162)				
			Critically reflects on own practice, and participates in multi-disciplinary service and team evaluation formulating and implementing strategies to act on learning and make improvements.					
			• Actively engages in peer review to inform own practice, formulating and implementing strategies to act on learning and make improvements.					
	quality and outcomes of patient care.		 Demonstrates how audit can contribute to improvement in the quality and/or efficiency of patient care. 					

Assessment

Assessment is used to measure the achievement of learning outcomes and to drive and guide further learning. Assessments will need to be selected with due regard for the outcome to be assessed, the levels (both Miller's Pyramid and relevant Higher Education framework) at which that outcome must be met. Consideration should also be given to ensuring validity, reliability and fairness and accordingly marking rubrics, methods of standard setting (such as Angoff or Ebel), moderation and standardisation must also be considered as well as staff and student workload. A wide variety of resources exist in the literature to support and underpin individual assessment design as well as overall assessment strategies, and these are therefore not addressed here. The following materials are intended to summarise common methods of assessment and map these against possible GOC outcomes they might be deployed upon. The mapping table shows ways in which outcomes might be assessed, but it should be recognised that these are not the only ways to measure each outcome. Equally, outcomes may be assessed by only one method, or subjected to multiple methods, as determined by the provider's overall assessment strategy.

Typology of assessment methods

Written assessment

Research proposal/Audit proposal

Written work to describe a potential project activity, typically referencing current state of the art and relevant literature sources. May include resource considerations as well as Key Performance indicators (KPIs) and outputs.

Dissertation/Project thesis/Meta-analysis/Literature review

An extended piece of writing (typically 5000-15000 words) presenting and evaluating a project or evaluation of the literature or published data. May include introduction, methods, results, data analysis and discussion and take the form of a thesis or research article. Alternative forms may more strongly resemble a literature review. At level 6 this may provide relatively incremental insights into a research question, or summarise current thinking. At level 7/11 this should demonstrate a critical awareness of current knowledge, and the ability to tackle complex issues with some elements of originality.

Workbooks

A proforma template that is completed by the student. May often be used to scaffold or exemplify higher level activities such as reflective writing or practical reports.

Practical report

A structured report of an investigative or practical activity, typically structured in the Introduction, Methods Results And Discussion (IMRAD) format, or a subset of sections from IMRAD focussed on specific skills that were developed during the activity.

Problem solving task

A written response to a specified challenge or problem, that proposes and justifies one or more solutions – demonstrating analytical, evaluation and applications of knowledge. May include research and information management elements as well as written communications skills. Lower-level problem solving tasks frequently including scaffolding questions or templates to guide student approaches to solutions.

Essays

An extended piece of writing (typically 2000-4000 words) addressing a specified question. May often take the form of thesis, antithesis, synthesis.

Case record review/Case report

A commentary summarising and evaluating the overarching learning that can be drawn from the review of multiple patient/case records.

Reflective writing

A focussed piece of writing that considers one or more experiences with a view to evaluating positive and negative features objectively, ideally in the context of current good practice and professional information sources or references. Outputs are intended to provoke improved performance over time and may include action planning and developmental activities.

Journaling/Logbook

An approach that diarises experiences, typically in a tabular or database format, often accompanied by narrative that summarises key features or learning points.

Performance/Practical

Oral / Poster presentation

A live or recorded spoken presentation accompanied by relevant media to convey information on a specified topic, and sometimes for a specified type of audience which may differ from the assessor. Typically requires research activities as well as visual and oral presentation skills. Live formats typically include question and answer elements.

Case discussion (unseen)

Students are asked to discuss the meaning and interpretation of history and diagnostic information from one or more patients, with whom they are not familiar, typically selected from a bank by the assessor. Often used to ensure that students correctly identify and respond appropriately to less common conditions that might otherwise be difficult to simulate or document.

Student selected case discussion

Students are asked to present and discuss one or more cases that they have experienced and documented, that meets specified conditions. Typically used to ensure that appropriate breadth of experience is assessed.

Patient history taking

Students are required to work with real or simulated patients to take and document their history. Commonly part of other "performance" based assessments.

Simulated patient assessments

Students are required to undertake common procedures using peers or actors are subjects. This may include "scripted" elements to mimic real life challenges and conditions.

Direct observation in practice

Students are observed working in a practice setting. Actors may be used instead of patients, to enhance consistency and standardisation. Has the advantage of realism, but can be challenging to standardise effectively.

Time limited assessment

It should be noted that purpose and utility of timed assessments may be varied by time, elements of choice, mechanism (handwritten or computer based), location (remote or in a hall), oversight (invigilated/proctored or unsupervised), unpredictability (unseen, take home, predetermined) and materials permitted to be used (limited or fully open book, limited or unrestricted use of online materials, provided materials, memory only). It is important to select and communicate the conditions under which time assessments will take place.

Multiple Choice Examination Questions (MCQs)

The candidate is required to select the correct answer from amongst a list of distractors. A variety of formats exist (single best answer, extended matching etc) each with their own advantages. It is often considered difficult to write effective and rigorous questions and distractor answers, especially for higher level assessments, and particularly when deployed with open books or without invigilation or proctoring. Effective where strong problem solving or recall skills are required and can be subject to post hoc standard setting processes to remove poor performing questions.

Short answer questions

Often used to test comprehension or decision-making skills, especially when combined with a requirement to justify the answer.

Long answers/essays

Extended writing under exam conditions (typically 500-1000 words). Use depends on the conditions of the examination – and may range from testing memorisation of factual material (unseen, invigilated) to problem solving and evaluation (open book, and "take home").

Scenario-led comprehension/ evaluation questions

The student is presented with a scenario, data, case reports or even a published article. Multimedia formats including videos may also be adopted. One or more questions are used to test any or all of understanding, data analysis, evaluation, problem solving, situational judgment and decision making.

Assessment Methods Mapping

	sessinent interneds mapping		Written assessment										Perf	orman	ce/Pra	Tir	Time limited assessment					
	Outcome	Level	Research proposal/Audit proposal	Dissertation/Project thesis/Meta- analysis/Literature review	Workbooks	Practical report	Problem solving task	Essays	Case record review/Case report	Reflective writing	Journaling/Logbook	Oral/ Poster presentation	Case discussion (unseen)	Student selected case discussion	Patient history taking	Simulated patient assessments	Direct observation in practice	OSCE	MCQs	Short answer questions	Long answers/essays	Scenario-led comprehension/ evaluation questions
01.1	Actively listens to patients and their carers to ensure patients are involved in and are at the heart of decisions made about patients' care.	Does							х	Х			х		Х	х	х	х				
01.2	Manages desired health outcomes of patients, taking into consideration any relevant medical, family, and social history of the patient, which may include personal beliefs or cultural factors.	Does					х		х	х			х			х	х	х				х
01.3	Protects patients' rights; respects the choices they make and their right to dignity and privacy	Does					х		х	х			х			х	Х	х				х
01.4	Ensures high quality care is delivered and puts into place adaptive measures as needed for different environments (such as domiciliary, prisons and special schools).	Shows How					х		х	х			х	х		х						х
01.5	Commits to care that is not compromised because of own personal conscious and unconscious values and beliefs.	Does							х	х		х	х	х		х	х					х
O1.6	Obtains and verifies continuation of valid consent from adults, children, young and vulnerable people, and their carers and records as appropriate.	Does							х		Х		х	х		х	х					
01.7	Demonstrates effective clinical decision-making, diagnosis, evaluation and makes appropriate and timely referral, where this is needed to meet a patient's needs.	Does					х		х	х			х	х		х	х	х				х
01.8	Refers and signposts as necessary to sight loss and other relevant health services.	Does					х		х	х	х		х	х		х	х	х				х

					1	Writte	n asse	ssmen	t				Perf	orman	e/Pra	ctical		Tin	ne limi	ted as	sessm	ent
	Outcome	Level	Research proposal/Audit proposal	Dissertation/Project thesis/Meta- analysis/Literature review	Workbooks	Practical report	Problem solving task	Essays	Case record review/Case report	Reflective writing	Journaling/Logbook	Oral/ Poster presentation	Case discussion (unseen)	Student selected case discussion	Patient history taking	Simulated patient assessments	Direct observation in practice	OSCE	MCQs	Short answer questions	Long answers/essays	Scenario-led comprehension/ evaluation questions
02.1	Conducts communications in a sensitive and supportive manner adapting their communication approach and style to meet the needs of patients, carers, health and care colleagues and the public	Does										х	х	х	Х	Х	х	х				
02.2	Acts upon non-verbal cues from patients or carers that could indicate discomfort, a lack of understanding or an inability to give informed consent.	Knows How								х	х	х				х	х	х				х
02.3	Communicates effectively within a multi-disciplinary healthcare team and works collaboratively for the benefit of the patient.	Does										х	Х	х		Х	Х					
O2.4	Critically reflects on how they communicate with a range of people and uses this reflection to improve interactions with others.	Does						х		х	х	х		х						х	Х	х

					,	Writte	n asse	ssmen	t				Perf	orman	ce/Pra	ctical		Tir	ne limi	ted as	sessm	ent
	Outcome	Level	Research proposal/Audit proposal	Dissertation/Project thesis/Meta- analysis/Literature review	Workbooks	Practical report	Problem solving task	Essays	Case record review/Case report	Reflective writing	Journaling/Logbook	Oral/ Poster presentation	Case discussion (unseen)	Student selected case discussion	Patient history taking	Simulated patient assessments	Direct observation in practice	OSCE	MCQs	Short answer questions	Long answers/essays	Scenario-led comprehension/ evaluation questions
03.1	Undertakes safe and appropriate ocular examinations using appropriate techniques and procedures to inform clinical decision-making within individual scope of practice.	Does														х	х	х				
03.2	Engages with developments in research, including the critical appraisal of relevant and up-to-date evidence to inform clinical decision-making and improve quality of care.	Does	х	х				х	х	х		х								х	х	
03.3	Engages with technological advances in eye health and broader healthcare delivery and the significance of specific developments for enhancing patient outcomes and service delivery.	Does	х	х		х	х	х		х		х	х								х	
O3.4	Analyses visual function from a range of diagnostic sources and uses data to devise a clinical management plan for a patient in areas that include the following: • Dispensing of optical appliances • Low vision/visual impairment • Refractive management • Anterior eye and contact lenses • Ocular and systemic disease • Binocular vision • Paediatrics • Patients with learning disabilities and complex needs • Occupational optometry	Does								x	x			х	x	x	x	x				

					١	N ritte	n asse	ssmen	t				Perf	ormano	e/Pra	ctical		Tin	ne limi	ted as	sessm	ent
	Outcome	Level	Research proposal/Audit proposal	Dissertation/Project thesis/Meta-analysis/Literature review	Workbooks	Practical report	Problem solving task	Essays	Case record review/Case report	Reflective writing	Journaling/Logbook	Oral/ Poster presentation	Case discussion (unseen)	Student selected case discussion	Patient history taking	Simulated patient assessments	Direct observation in practice	OSCE	MCQs	Short answer questions	Long answers/essays	Scenario-led comprehension/ evaluation questions
03.5	Meets the following clinical practice outcomes for registration either as a dispensing optician or an optometrist.	Does																				
O3.5a (i)	Acts as a first point of contact for patients for their eye health needs by investigating, diagnosing and managing individuals' functional and developmental visual conditions, including those related to age.	Does													х	х	х	х				
O3.5a (ii)	Completes an informed clinical assessment of individual patients' needs and uses this to dispense, fit and advise on the safe and effective use of spectacles, low-vision aids and other ophthalmic appliances.	Does							х						Х	х	х	х				
O3.5a (iii)	Advises on the safe and effective use of contact lenses and removal in an emergency.	Does							х						_	х	Х	Х				
O3.5a (iv)	Accurately identifies patients' conditions and their potential need for medical referral in a timely way, including when urgent or emergency attention is required.	Does							х				х	х	Х	х		х				х

					1	Vritte	n asse	ssmen	t				Perf	orman	ce/Pra	ctical		Tin	ne limi	ted as	sessm	ent
	Outcome	Level	Research proposal/Audit proposal	Dissertation/Project thesis/Meta-analysis/Literature review	Workbooks	Practical report	Problem solving task	Essays	Case record review/Case report	Reflective writing	Journaling/Logbook	Oral/ Poster presentation	Case discussion (unseen)	Student selected case discussion	Patient history taking	Simulated patient assessments	Direct observation in practice	OSCE	MCQs	Short answer questions	Long answers/essays	Scenario-led comprehension/ evaluation questions
03.5	Meets the following clinical practice outcomes for registration either as a dispensing optician or an optometrist.	Does																				
O3.5b (i)	Acts as a first point of contact for patients for their eye health needs by investigating, diagnosing and managing individuals' functional and developmental visual conditions, including those related to age.	Does													х	х	х	х				
O3.5b (ii)	Completes an informed clinical assessment of individual patients' needs and uses this to dispense, fit and advise on the safe and effective use of spectacles, contact lenses, low-vision aids and other ophthalmic appliances.	Does							х					х	х	х	х	х				
O3.5b (iii)	Makes informed decisions on the treatment and management of ocular abnormalities and disease.	Does					х		х				х	Х				Х		х		
O3.5b (iv)	Accurately identifies patients' conditions and their potential need for medical referral in a timely way, including when urgent or emergency attention is required.	Does							х				х	х	х	х		х				х
O3.5b (v)	Uses common ophthalmic drugs safely to facilitate optometric examination and the diagnosis/treatment of ocular disease.	Does				X			х				Х	х		х	х		х	X		

					,	Writte	n asse	ssmen	t				Perf	orman	ce/Pra	ctical		Tin	ne lim	ited as	sessm	ent
	Outcome	Level	Research proposal/Audit proposal	Dissertation/Project thesis/Meta- analysis/Literature review	Workbooks	Practical report	Problem solving task	Essays	Case record review/Case report	Reflective writing	Journaling/Logbook	Oral/ Poster presentation	Case discussion (unseen)	Student selected case discussion	Patient history taking	Simulated patient assessments	Direct observation in practice	OSCE	MCQs	Short answer questions	Long answers/essays	Scenario-led comprehension/ evaluation questions
04.1	Upholds the values and demonstrate the behaviours expected of a GOC registrant, as described in the GOC Standards of Practice for Optometrists and Dispensing Opticians.	Does						х		х	х		х	х		х	х				х	х
04.2	Acts openly and honestly and in accordance with the GOC Duty of Candour guidelines.	Does								Х	х		х	х		х	Х					Х
04.3	Understands and implements relevant safeguarding procedures, local and national guidance in relation to children, persons with disabilities, and other vulnerable people.	Shows How						х		х	х	х					х				х	х
04.4	Applies the relevant national law and takes appropriate actions i) to gain consent and ii) if consent cannot be obtained or is withdrawn.	Does								Х	х		Х	х	х	х	Х					
O4.5	Recognises and works within the limits of own knowledge and skills. Seeks support and refers to others where appropriate.	Does								Х			х	х		х	Х					х
O4.6	Understands the professional and legal responsibilities of trainee and student supervision and of being supervised.	Knows How			Х					Х									Х	Х		х
04.7	Demonstrates the fulfilment of professional and legal responsibilities in supervising unregistered colleagues undertaking delegated activities.	Does								Х				Х		х	Х		Х			х
04.8	Complies with health and safety legislation.	Does				Х				Χ						Χ	Χ					igsquare
04.9	Complies with equality and human rights legislation, demonstrates inclusion and respects diversity.	Does								Х	Х			Х		Х						Х
04.10	Understands the patient or carer's right to complain without prejudicing the standard of care provided.	Knows					Х			X			Х	Х					Х	Х		Х

					,	Writte	n asse	ssmen	t				Perf	orman	ce/Pra	ctical		Tir	ne lim	ited as	sessm	ent
	Outcome	Level	Research proposal/Audit proposal	Dissertation/Project thesis/Meta- analysis/Literature review	Workbooks	Practical report	Problem solving task	Essays	Case record review/Case report	Reflective writing	Journaling/Logbook	Oral/ Poster presentation	Case discussion (unseen)	Student selected case discussion	Patient history taking	Simulated patient assessments	Direct observation in practice	OSCE	MCQs	Short answer questions	Long answers/essays	Scenario-led comprehension/ evaluation questions
04.11	Adheres to the ethical principles for prescribing and to legislation relating to medicines management.	Shows How	х		Х	х	х		х	х	х		х	х		х						
04.12	Complies with legal, professional and ethical requirements for the management of information in all forms including the accuracy and appropriateness of patient records and respecting patient confidentiality.	Does							х				х	х	х	х	х					
04.13	Manages situations under which patient confidentiality may be breached in order to protect a patient or the public, in line with relevant guidance on disclosing confidential information and/or with the patient's consent.	Shows How							х				х	х	х	х	х					х
04.14	Applies eye health policies and guidance and utilises resources efficiently to improve patient outcomes.	Does				х	х		х	х			х	х								Х
O4.15	Maintains professional boundaries with patients and others, taking into consideration the additional needs of vulnerable people and specific requests/requirements.	Does								х			х	х		х	х	х				
04.16	Understands the role of carers and the power of attorney.	Knows How										х	х						х	х		Х
04.17	Complies with legislation and rules concerning the sale and supply of optical appliances.	Does			Х	Х			Х				х	х	х	х	х					
04.18	Provides clarity on services available and any associated payments	Does										х				х						Х

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	Outcome	Level	Research proposal/Audit proposal	Dissertation/Project thesis/Meta- analysis/Literature review	Workbooks	Practical report	Problem solving task	Essays	Case record review/Case report	Reflective writing	Journaling/Logbook	Oral/ Poster presentation	Case discussion (unseen)	Student selected case discussion	Patient history taking	Simulated patient assessments	Direct observation in practice	OSCE	MCQs	Short answer questions	Long answers/essays	Scenario-led comprehension/ evaluation questions
05.1	Recognises when their own performance or the performance of others is putting people at risk and takes prompt and appropriate action.	Does								х			х	х		х						х
05.2	Knows how to manage complaints, incidents or errors in an effective manner.	Knows How			х							х				х			х	х		
O5.3	Address any health and safety concerns about the working environment that may put themselves, patients or others at risk.	Knows How			х							х							х	х		х
05.4	Applies due process for raising and escalating concerns, including speaking-up and protected disclosure if all other routes have been pursued and there is reason to believe that patients or the public are at risk.	Knows How			Х							х				х						х
05.5	Applies infection prevention control measures commensurate with the risks identified.	Does				Х						х				Х	Х					
O5.6	Understands the importance of maintaining their own health to remain healthy and professionally effective.	Knows How	_				х			х										_		х
O5.7	Able to risk assess i) patient's clinical condition and ii) a situation in clinical practice and make appropriate clinical decisions.	Does					х						Х	х		Х		х				х

					ı	Writte	n asse:	ssmen	t				Perf	orman	ce/Pra	ctical		Tin	ne limi	ited as	sessm	ent
	Outcome	Level	Research proposal/Audit proposal	Dissertation/Project thesis/Meta- analysis/Literature review	Workbooks	Practical report	Problem solving task	Essays	Case record review/Case report	Reflective writing	Journaling/Logbook	Oral/ Poster presentation	Case discussion (unseen)	Student selected case discussion	Patient history taking	Simulated patient assessments	Direct observation in practice	OSCE	MCQs	Short answer questions	Long answers/essays	Scenario-led comprehension/ evaluation questions
06.1	Undertakes efficient, safe and effective patient and caseload management.	Does							х		х						х					
O6.2	Works collaboratively within healthcare teams, exercising skills and behaviours of clinical leadership and effective team-working and management in line with their role and scope of practice.	Shows How					х						х	х		х	х					х
O6.3	Engages with clinical governance requirements to safeguard and improve the quality of patient care, including through contributing to service evaluation and development initiatives.	Knows How	х		х																	х
O6.4	Recognises and manages adverse situations, understanding when to seek support and advice to uphold patients' and others' safety.	Knows How								х						х			х	х		х
O6.5	Takes appropriate action in an emergency, providing care and clinical leadership within personal scope of practice and referring or signposting patients as needed, to ensure their safe and timely care.	Does					х						х	х		х		х				х
O6.6	Engages with population and public health initiatives and understands how population data should inform practice and service delivery.	Knows How		х	х							х								х	Х	

					١	Writte	n asse	ssmen	t				Perf	orman	ce/Pra	ctical		Tin	ne limi	ited as	sessm	ent
	Outcome	Level	Research proposal/Audit proposal	Dissertation/Project thesis/Meta- analysis/Literature review	Workbooks	Practical report	Problem solving task	Essays	Case record review/Case report	Reflective writing	Journaling/Logbook	Oral/ Poster presentation	Case discussion (unseen)	Student selected case discussion	Patient history taking	Simulated patient assessments	Direct observation in practice	OSCE	MCQs	Short answer questions	Long answers/essays	Scenario-led comprehension/ evaluation questions
07.1	Evaluates, identifies, and meets own learning and development needs.	Does			х					х	Х			х								
07.2	Supports the learning and development of others, including through acting as a role model and mentor.	Shows How			х							х				х	Х					
07.3	Gathers, evaluates and applies effective patient and service delivery feedback to improve their practice.	Shows How	х	х	х					х		Х										
07.4	Engages in critical reflection on their own development, with a focus on learning from experience, using data from a range of information sources (such as clinical audits, patient feedback, peer review and significant event analysis) and identifying and addressing their new learning needs to improve the quality and outcomes of patient care.	Does	х	х	х	х			х	х	х	х		х								

References

- 1. Development of a framework for person-centred nursing. McCormack, B and McCance, T.V. 2006, Journal of Advanced Nursing, Vol. 56.
- 2. Development of a health dialogue model for patients with diabetes: A complex intervention in a low-/middle income country. M. Reid, C. Walsh, J. Raubenheimer, T. Bradshaw, M Pienaar, C.Hassan, C.Nyoni, M. Le Roux. 2018, International Journal of Africa Nursing Sciences, Vol. 8.
- 3. CanMEDS Role: Communicator. *Royal College of Physicians and Surgeons of Canada*. [Online] [Cited: 11 11 2021.] https://www.royalcollege.ca/rcsite/canmeds/framework/canmeds-role-communicator-e.
- 4. Association of British Dispensing Opticians (ABDO). Clinical advice and guidelines. *ABDO*. [Online] 2021. [Cited: 10 November 2021.] https://www.abdo.org.uk/regulation-and-policy/advice-and-guidelines/clinical/.
- 5. —. Diploma in Ophthalmic Dispensing Syllabus 2015. *ABDO.* [Online] 2015. [Cited: 10 November 2021.] https://www.abdo.org.uk/wp-content/uploads/2019/04/ABDO-Diploma-Syllabus-2015-PAGES-MAR19.pdf.
- 6. The College of Optometrists. College of Optometrists Guidance for Professional Practice. *College of Optometrists*. [Online] 2020. [Cited: 9 November 2021.] https://www.college-optometrists.org/clinical-guidance/guidance.
- 7. —. Clinical Management Guidelines. *College of Optometrists*. [Online] 20 December 2020. [Cited: 9 November 2021.] https://www.college-optometrists.org/clinical-guidance/clinical-management-guidelines.
- 8. Association of Optometrists (AOP). Clinical Governance. AOP. [Online] [Cited: 9 November 2021.] https://www.aop.org.uk/advice-and-support/clinical/clinical-governance.
- 9. National Institute for Health and Care Excellence (NICE). NICE Guidance Conditions and Eye Diseases Eye conditions. NICE. [Online] [Cited: 9 November 2021.] https://www.nice.org.uk/guidance/conditions-and-diseases/eye-conditions.
- 10. Local Optometric Committee Support Unit (LOCSU). What we do Policies. *LOCSU*. [Online] [Cited: 9 November 2021.] https://www.locsu.co.uk/what-we-do/policy/.
- 11. Cochrane Eyes and Vision. Cochrane Eyes and Vision Resources. *Cochrane Eyes and Vision*. [Online] [Cited: 9 November 2021.] https://eyes.cochrane.org/resources-0.
- 12. 2020health. 20/20health.org. [Online] [Cited: 9 November 2021.] https://2020health.org/publication/foresight-project-report/.
- 13. NHS Health Education England. The Topol Review. *NHS Health Education England*. [Online] 2019. [Cited: 9 November 2021.] https://topol.hee.nhs.uk/the-topol-review/.
- 14. World Health Organization. International Classification of Functioning, Disability and Health (ICF). WHO. [Online] 2018. [Cited: 10 November 2021.] https://www.who.int/standards/classifications/international-classification-of-functioning-disability-and-health.
- 15. HM Government. The General Optical Council (Rules relating to Injury or Disease of the Eye) Order of Council 1999. legislation.gov.uk. [Online] 1999. [Cited: 10 November 2021.] https://www.legislation.gov.uk/uksi/1999/3267/schedule/part/1/made.
- 16. —. Opticians Act 1989. *legislation.gov.uk*. [Online] 1989. [Cited: 9 November 2021.] https://www.legislation.gov.uk/ukpga/1989/44/contents.
- 17. General Optical Council. Standards for optometrists and dispensing opticians. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/standards-of-practice-for-optometrists-and-dispensing-opticians/.
- 18. British Standards Institute (BSI). Standards. BSI. [Online] 2021. [Cited: 10 November 2021.] https://www.bsigroup.com/en-GB/standards/.
- 19. The International Agency for the Prevention of Blindness (IAPB). International Standards for Vision Rehabilitation International Consensus Conference Report. *IAPB*. [Online] December 2015. [Cited: 10 November 2021.] https://www.iapb.org/learn/resources/international-standards-for-vision-rehabilitation-international-consensus-conference-report/.
- 20. HM Government. Medicines Act 1968. *legislation.gov.uk*. [Online] 1968. [Cited: 10 November 2021.] https://www.legislation.gov.uk/ukpga/1968/67.
- 21. General Optical Council. Standards for optical businesses. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/standards-for-optical-businesses/.
- 22. —. General Optical Council Standards The professional duty of candour. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/the-professional-duty-of-candour/.

- 23. HM Government. Children Act 2004. *Legislation.gov.uk*. [Online] 2004. [Cited: 9 November 2021.] https://www.legislation.gov.uk/ukpga/2004/31/contents.
- 24. —. Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children. *Gov.uk.* [Online] July 2018. [Cited: 9 November 2021.]
- https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/942454/Working_together_to_safeguard_children_inter_agency_guidance.pdf.
- 25. NHS England. Safeguarding policies and annual report. *NHS England*. [Online] 2021. [Cited: 10 November 2021.] https://www.england.nhs.uk/safeguarding/policies-annual-report/.
- 26. Optical Confederation. Guidance on Safeguarding, Mental Capacity, Deprivation of Liberties and the Prevent Strategy Protecting Children and Adults at Risk . *Association of British Dispensing Opticians (ABDO).* [Online] August 2019. [Cited: 9 November 2021.] https://www.abdo.org.uk/wp-content/uploads/2019/12/oc-safeguarding-guidance-august-2019-update.pdf.
- 27. HM Government. Safeguarding Vulnerable Groups Act 2006. *legislation.gov.uk*. [Online] 2006. [Cited: 9 November 2021.] https://www.legislation.gov.uk/ukpga/2006/47/section/2.
- 28. NHS Clinical Governance Support Team. Guidance on the Role and Effective Use of Chaperones in Primary and Community Care Settings Model Chaperone Framework. *Londonwide LMCs.* [Online] June 2005. [Cited: 9 November 2021.] https://www.lmc.org.uk/visageimages/guidance/2007/Chaperone model%20framework.pdf.
- 29. General Optical Council. General Optical Council Standards 11 Protect and safeguard patients, colleagues and others from harm. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/standards-of-practice-for-optometrists-and-dispensing-opticians/11-protect-and-safeguard-patients-colleagues-and-others-from-harm/.
- 30. General Optical Council. Raising concerns Speaking up guidance for registrants. *General Optical Council*. [Online] October 2021. [Cited: 9 November 2021.] https://goc.pixl8.london/en/Investigating_complaints/raising-concerns.cfm.
- 31. The Quality Assurance Agency for Higher Education (QAA). UK Quality Code for Higher Education Part A: Setting and Maintaining Academic Standards. *QAA*. [Online] 2014 October. [Cited: 9 November 2021.] https://www.qaa.ac.uk/docs/qaa/quality-code/qualifications-frameworks.pdf.
- 32. General Optical Council. General Optical Council Standards 3 Obtain valid consent. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/standards-for-optical-students/3-obtain-valid-consent/.
- 33. General Optical Council (GOC). Supplementary guidance on consent. *GOC*. [Online] [Cited: 10 November 2021.] https://optical.org/en/publications/supplementary-guidance-on-consent/.
- 34. Supervisor responsibilities and guidance. *ABDO College*. [Online] [Cited: 11 11 2021.] https://abdocollege.org.uk/supervisor-zone/supervisor-responsibilities/#:~:text=%20ABDO%20College%20requires%20the%20following%20conditions%20to,time%20at%20any%20point%2C%20on%20any...%20More%20.
- 35. General Optical Council Standards. *General Optical Council*. [Online] [Cited: 11 11 2021.] https://optical.org/en/standards/.
- 36. General Optical Council (GOC). Standards for optical students. *GOC.* [Online] 2020. [Cited: 10 November 2021.] https://optical.org/en/standards-and-guidance/standards-for-optical-students/.
- 37. The College of Optometrists. Guidance for Professional Practice Delegation. *College of Optometrists*. [Online] 2020. [Cited: 9 November 2021.] https://guidance.college-optometrists.org/guidance-contents/communication-partnership-and-teamwork-domain/working-with-colleagues/delegation/.
- 38. HM Government. Health and Safety at Work etc. Act 1974. legislation.gov.uk. [Online] 1974. [Cited: 9 November 2021.] https://www.legislation.gov.uk/ukpga/1974/37/contents.
- 39. Association of British Dispensing Opticians (ABDO). Advice and Guidelines Infection control. *ABDO*. [Online] [Cited: 10 November 2021.] https://www.abdo.org.uk/regulation-and-policy/advice-and-guidelines/regulatory/infection-control/.
- 40. HM Government. Equality Act 2010. *legislation.gov.* [Online] 2010. [Cited: 9 November 2021.] https://www.legislation.gov.uk/ukpga/2010/15/contents.
- 41. Equality and Human Rights Commission. Advice and guidance. *Equality and Human Rights Commission*. [Online] 2021. [Cited: 9 November 2021.] https://www.equalityhumanrights.com/en/advice-and-guidance.
- 42. Association of British Dispensing Opticians (ABDO). Dispensing for people with complex or additional needs. *ABDO*. [Online] [Cited: 10 November 2021.] https://www.abdo.org.uk/regulation-and-policy/advice-and-guidelines/clinical/specialist-dispensing/.

- 43. —. Advice and Guidelines Complaints. *ABDO*. [Online] [Cited: 10 November 2021.] https://www.abdo.org.uk/regulation-and-policy/advice-and-guidelines/advice/complaints/.
- 44. NHS England. NHS England Complaints Policy. *NHS England*. [Online] 14 October 2021. [Cited: 9 November 2021.] https://www.england.nhs.uk/publication/nhs-england-complaints-policy/.
- 45. Scottish Government. The NHS Scotland Complaints Handling Procedure. NHS Scotland. [Online] [Cited: 9 November 2021.] https://www.msg.scot.nhs.uk/wp-
- content/uploads/Circulars/DL%27s/NHS%20Model%20Complaints%20Handling%20Procedure%20-%203%20October%202016.pdf.
- 46. NHS Wales. Health in Wales NHS complaints. *NHS Wales*. [Online] 2021. [Cited: 9 November 2021.] https://www.wales.nhs.uk/ourservices/contactus/nhscomplaints.
- 47. Optical Consumer Complaints Service. Optical Consumer Complaints Service. *Optical Consumer Complaints Service*. [Online] 2021. [Cited: 9 November 2021.] https://www.opticalcomplaints.co.uk/.
- 48. General Optical Council. High level principles for good practice in remote consultations and prescribing. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/publications/high-level-principles-forgood-practice-in-remote-consultations-and-prescribing/.
- 49. HM Government. Medicines for Human Use (Miscellaneous Amendments) Regulations 2009. *legislation.gov.uk*. [Online] 2009. [Cited: 9 November 2021.] https://www.legislation.gov.uk/uksi/2009/3063/contents/made.
- 50. —. The Human Medicines Regulations 2012. *legislation.gov.uk.* [Online] 2012. [Cited: 9 November 2021.] https://www.legislation.gov.uk/uksi/2012/1916/contents/made.
- 51. —. Dispose of business or commercial waste. *gov.uk*. [Online] 2021. [Cited: 9 November 2021.] https://www.gov.uk/managing-your-waste-an-overview.
- 52. —. Medical devices regulation and safety: detailed information. *gov.uk*. [Online] 2021. [Cited: 9 November 2021.] https://www.gov.uk/topic/medicines-medical-devices-blood/medical-devices-regulation-safety.
- 53. National Institute for Health and Care Excellence (NICE). BNF. *NICE*. [Online] 6 October 2021. [Cited: 9 November 2021.] https://bnf.nice.org.uk/.
- 54. Association of British Dispensing Opticians (ABDO). Advice and Guidelines on Professional Conduct for Dispensing Opticians Section 2: Regulation of Professional Activities . *ABDO*. [Online] December 2007. [Cited: 9 November 2021.] https://www.abdo.org.uk/wp-content/uploads/2012/07/Section-2-December-2007.pdf.
- 55. Information Commissioner's Office (ICO). Guide to the General Data Protection Regulation (GDPR) Individual rights Right of access. *ICO*. [Online] [Cited: 9 November 2021.] https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/individual-rights/right-of-access/.
- 56. —. Information sharing without consent: advice for small organisations. *ICO*. [Online] [Cited: 9 November 2021.] https://ico.org.uk/for-organisations/sme-web-hub/whats-new/blogs/information-sharing-without-consent-advice-for-small-organisations/.
- 57. Optical Confederation. Changes to Data Protection Law Information and Guidance. *LOCSU*. [Online] July 2018. [Cited: 9 November 2021.] https://www.locsu.co.uk/wp-content/uploads/2019/10/OC-Data-protection-and-gdpr-updated-guidance-july-2018.pdf.
- 58. General Optical Council. General Optical Council Standards 8 Maintain adequate patient records. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/standards-of-practice-for-optometrists-and-dispensing-opticians/8-maintain-adequate-patient-records/.
- 59. —. General Optical Council Standards 9 Ensure that supervision is undertaken appropriately and complies with the law. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/standards-of-practice-for-optometrists-and-dispensing-opticians/9-ensure-that-supervision-is-undertaken-appropriately-and-complies-with-the-law/.
- 60. General Optical Council Standards 14 Maintain confidentiality and respect your patients' privacy. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/standards-of-practice-for-optometrists-and-dispensing-opticians/14-maintain-confidentiality-and-respect-your-patients-privacy/.
- 61. NHS England. Accessible Information Standard. NHS England. [Online] 2017. [Cited: 9 November 2021.] https://www.england.nhs.uk/ourwork/accessibleinfo/.
- 62. Association of British Dispensing Opticians (ABDO). Patient Records. *ABDO*. [Online] August 2020. [Cited: 9 November 2021.] https://www.abdo.org.uk/regulation-and-policy/advice-and-guidelines/clinical/patient-records/.

- 63. General Optical Council. General Optical Council Standards Disclosing confidential information. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/disclosing-confidential-information/.
- 64. Association of British Dispensing Opticians (ABDO). Advice and guidelines Duty ro refer. *ABDO*. [Online] [Cited: 10 November 2021.] https://www.abdo.org.uk/regulation-and-policy/advice-and-guidelines/clinical/duty-to-refer-2/.
- 65. NHS England . Policy Book for Eye Health. NHS England . [Online] November 2021. [Cited: 10 November 2021.] https://www.england.nhs.uk/publication/policy-book-for-eye-health/.
- 66. The College of Optometrists. Clinical Council for Eye Health Commissioning (CCEHC). *College of Optometrists*. [Online] 2021. [Cited: 9 November 2021.] https://www.college-optometrists.org/clinical-council-for-eye-health-commissioning.
- 67. General Optical Council. Temporary Accreditation and Quality Assurance Handbook: Routes to Registration in Optometry. *General Optical Council.* [Online] August 2020. [Cited: 9 November 2021.] https://consultation.optical.org/standards-and-cet/temporary-handbook-changes/results/optometrytemporaryhandbook2020.pdf.
- 68. General Optical Council Standards 4 Show care and compassion for your patients. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/standards-for-optical-students/4-show-care-and-compassion-for-your-patients .
- 69. —. General Optical Council Standards 17 Do not damage the reputation of your profession through your conduct. *General Optical Council.* [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/standards-of-practice-for-optometrists-and-dispensing-opticians/17-do-not-damage-the-reputation-of-your-profession-through-your-conduct/.
- 70. British Medical Association (BMA). Social media, ethics and professionalism BMA guidance. BMA. [Online] 2018. [Cited: 9 November 2021.] https://www.bma.org.uk/media/1851/bma-ethics-guidance-on-social-media-2018.pdf.
- 71. HM Government. The Mental Capacity (Deprivation of Liberty: Standard Authorisations, Assessments and Ordinary Residence) Regulations 2008. *legislation.gov.uk*. [Online] 2008. [Cited: 9 November 2021.] https://www.legislation.gov.uk/uksi/2008/1858/contents/made.
- 72. Age UK. Power of attorney. *Age UK*. [Online] 2021. [Cited: 9 November 2021.] https://www.ageuk.org.uk/information-advice/money-legal/legal-issues/power-of-attorney/.
- 73. HM Government. The Sale of Optical Appliances Order of Council 1984. *legislation.gov.uk*. [Online] 1984. [Cited: 9 November 2021.] https://www.legislation.gov.uk/uksi/1984/1778/contents/made.
- 74. General Optical Council. Statement on sale and supply of optical appliances. *General Optical Council*. [Online] October 2006. [Cited: 9 November 2021.] https://optical.org/en/publications/position-statements-and-useful-information/sale-and-supply-of-optical-appliances/.
- 75. —. Low vision aids . *General Optical Council*. [Online] April 2012. [Cited: 9 November 2021.] https://optical.org/en/publications/position-statements-and-useful-information/low-vision-aids/.
- 76. HM Government. The Consumer Protection from Unfair Trading Regulations 2008. *legislation.gov.uk*. [Online] 2008. [Cited: 9 November 2021.] https://www.legislation.gov.uk/uksi/2008/1277/contents.
- 77. —. The Price Marking Order 2004. *legislation.gov.uk*. [Online] 2004. [Cited: 9 November 2021.] https://www.legislation.gov.uk/uksi/2004/102/contents/made.
- 78. General Optical Council (GOC). General Optical Council Standards 5 Keep your knowledge and skills up to date. *GOC.* [Online] 2020. [Cited: 10 November 2021.] https://optical.org/en/standards-and-guidance/standards-of-practice-for-optometrists-and-dispensing-opticians/5-keep-your-knowledge-and-skills-up-to-date/.
- 79. General Optical Council. Investigating complaints. *General Optical Council*. [Online] 2021. [Cited: 9 November 2021.] https://www.optical.org/en/Investigating complaints/.
- 80. General Optical Council Standards Learning from adverse events. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/the-professional-duty-of-candour/learning-from-adverse-events/.
- 81. Optical Confederation. Managing Non-Tolerance Issues. *ABDO*. [Online] December 2014. [Cited: 10 November 2021.] https://www.abdo.org.uk/wp-content/uploads/2020/01/optical-confederation-managing-non-tolerances-guidance-final-210618-contact-details-update.pdf.
- 82. Care Quality Commission. Whistleblowing: Quick guide to raising a concern with CQC. *Care Quality Commission*. [Online] [Cited: 9 November 2021.] https://www.cqc.org.uk/files/whistleblowing-quick-guide-raising-concern-cqc.
- 83. HM Government. Employment Rights Act 1996. *legislation.gov.uk*. [Online] 1996. [Cited: 9 November 2021.] https://www.legislation.gov.uk/ukpga/1996/18/contents.

- 84. General Optical Council. GOC statement on infection prevention and control during the COVID-19 pandemic. *General Optical Council*. [Online] July 2020. [Cited: 9 November 2021.]
- https://www.optical.org/en/news_publications/news_item.cfm/statement-on-infection-prevention-and-control-during-the-covid-19-pandemic.
- 85. NHS England. Suggested Guidance for Optometry Practices: Coronavirus (COVID-19). NHS England. [Online] June 2020. [Cited: 9 November 2021.] https://www.england.nhs.uk/midlands/wp-content/uploads/sites/46/2020/06/BAME-Risk-assessment-in-Optometry-Practices.pdf.
- 86. Association of Optometrists (AOP). COVID19: Back to work risk assessment. *AOP*. [Online] May 2020. [Cited: 9 November 2021.] https://www.aop.org.uk/coronavirus-updates/covid19-back-to-work-risk-assessment.
- 87. The College of Optometrists. Guidance for Professional Practice Infection control. *College of Optometrists*. [Online] 2020. [Cited: 9 November 2021.] https://guidance.college-optometrists.org/guidance-contents/safety-and-quality-domain/infection-control/.
- 88. General Optical Council. General Optical Council Standards 12 Ensure a safe environment for your patients. *General Optical Council*. [Online] 2020. [Cited: 9 November 2021.] https://optical.org/en/standards-and-guidance/standards-of-practice-for-optometrists-and-dispensing-opticians/12-ensure-a-safe-environment-for-your-patients/.
- 89. Academy of Royal Medical Colleges. COVID-19 Mental health & wellbeing for healthcare professionals. *Academy of Royal Medical Colleges*. [Online] [Cited: 10 November 2021.] https://www.aomrc.org.uk/covid-19-mentalwellbeing/.
- 90. Federation of Dispensing Opticians (FODO). Guidance and support. *FODO*. [Online] [Cited: 10 November 2021.] https://www.fodo.com/members/guidance/.
- 91. The Quality Assurance Agency for Higher Education (QAA). Subject Benchmark Statement Optometry. *QAA*. [Online] November 2019. [Cited: 9 November 2021.] https://www.qaa.ac.uk/docs/qaa/subject-benchmark-statements/subject-benchmark-statement-optometry.pdf?sfvrsn=b839c881 7.
- 92. It's about time: New perspectives and insights on time management. Aeon, B; Aguinis, H. . 4, s.l. : Academy of Management Perspectives, 2017, Vol. 31.
- 93. NHS Leadership Academy. Clinical Leadership Competency Framework. NHS Leadership Academy. [Online] 2011. [Cited: 10 November 2021.] https://www.leadershipacademy.nhs.uk/wp-content/uploads/2012/11/NHSLeadership-Leadership-Framework-Clinical-Leadership-Competency-Framework-CLCF.pdf.
- 94. The King's Fund. Leadership and Leadership Development in Health Care The Evidence Base. *The King's Fund.* [Online] February 2015. [Cited: 10 November 2021.]
- https://www.kingsfund.org.uk/sites/default/files/field/field_publication_file/leadership-leadership-development-health-care-feb-2015.pdf.
- 95. NHS England. Clinical leadership a framework for action. *NHS Improvement*. [Online] 2019. [Cited: 10 November 2021.] https://www.england.nhs.uk/wp-content/uploads/2021/08/clinical-leadership-framework.pdf.
- 96. Local Optical Committee Support Unit (LOCSU). What we do Clinical Pathways. *LOCSU*. [Online] [Cited: 10 November 2021.] https://www.locsu.co.uk/what-we-do/pathways/.
- 97. Association of British Dispensing Opticians (ABDO). Advice and guidelines Safeguarding. *ABDO*. [Online] [Cited: 10 November 2021.] https://www.abdo.org.uk/regulation-and-policy/advice-and-guidelines/regulatory/safeguarding/.
- 98. NHS Digital. General Data Protection Regulation (GDPR) information. NHS Digital. [Online] May 2021. [Cited: 10 November 2021.] https://digital.nhs.uk/about-nhs-digital/our-work/keeping-patient-data-safe/gdpr.
- 99. NHS England. Whistleblowing. NHS England. [Online] [Cited: 10 November 2021.] https://www.england.nhs.uk/ourwork/whistleblowing/.
- 100. Managing conflict situations nursing students encounter during their clinical practice, narrated and performed through Forum Play. Wigert, H, et al. October, s.l.: Science Direct, 2021, Vol. 56.
- 101. The College of Optometrists. Guidance for Professional Practice Annex 4 Urgency of referrals table. *College of Optometrists*. [Online] 2020. [Cited: 10 November 2021.] https://guidance.college-optometrists.org/guidance-contents/annexes/annex-4-urgency-of-referrals/.
- 102. St John Ambulance. First Aid at Work. St John Ambulance. [Online] [Cited: 10 November 2021.] https://www.sja.org.uk/courses/workplace-first-aid/hse-first-aid-at-work/book-faw/?gclid=Cj0KCQjw8eOLBhC1ARIsAOzx5cHIs5MmwlxSZPUg1IsP_L5bmiTdG8l6qJmwZISQLho5tYYidfthIdgaAj2mEALw_wcB&gclsrc=aw.ds.
- 103. The Royal College of Ophthalmologists (RCOphth). Commissioning Guidance Emergency Eye Care. *RCOphth.* [Online] February 2020. [Cited: 10 November 2021.] https://www.rcophth.ac.uk/wp-content/uploads/2020/05/Emergency-Eye-Care-Commissioning-Guidance.pdf.

- 104. Provost, L and Murray, S. The Health Care Data Guide: Learning from Data for Improvement. s.l.: ProQuest Ebook Central, 2011.
- 105. Public Health England (PHE). Atlas of Variation. *PHE*. [Online] [Cited: 10 November 2021.] https://fingertips.phe.org.uk/profile/atlas-of-variation.
- 106. Being a Mentor: What's in it for Me? Coates, WC. s.l.: Academic Emergency Medicine, 2012, Vol. 19.
- 107. National Institute for Health Research (NIHR). Improving care by using patient feedback Themed review. NIHR. [Online] December 2019. [Cited: 10 November 2021.] https://content.nihr.ac.uk/nihrdc/themedreview-04327-PE/Patient-Feedback-WEB.pdf.
- 108. Booles, K. Becoming a Reflective Practitioner. s.l.: Wiley, 2017. Vol. 24.
- 109. Scottish Intercollegiate Guidelines Network (SIGN). SIGN Our guidelines. SIGN. [Online] [Cited: 9 November 2021.] https://www.sign.ac.uk/our-guidelines/.
- 110. Professional Standards Authority. Progress on strengthening professional regulation's approach to candour and error reporting Advice to the Secretary of State. *Professional Standards Authority*. [Online] November 2014. [Cited: 9 November 2021.] https://www.professionalstandards.org.uk/docs/default-source/publications/advice-to-ministers/progress-on-strengthening-approach-to-candour-november-2014.pdf.
- 111. General Optical Council. General Optical Council Standards Supplementary guidance on the professional duty of candour. *General Optical Council*. [Online] [Cited: 9 November 2021.] https://optical.org/media/e0xduxzt/supplementary guidance on the professional duty of candour.pdf.
- 112. The College of Optometrists . Guidance for Professional Practice Safeguarding children and adults at risk. *College of Optometrists*. [Online] 2020. [Cited: 9 November 2021.] https://guidance.college-optometrists.org/guidance-contents/safety-and-quality-domain/safeguarding-children-and-vulnerable-adults/.
- 113. NHS England. ROAN information sheet 36: Intercollegiate document on safeguarding guidance, 2019 revision. *NHS England*. [Online] December 2019. [Cited: 9 November 2021.] https://www.england.nhs.uk/medical-revalidation/ro/info-docs/roan-information-sheets/intercollegiate-document-on-safeguarding-guidance/.
- 114. Federation of Ophthalmic and Dispensing Opticians (FODO). FODO Guidance Safeguarding. *FODO.* [Online] August 2019. [Cited: 9 November 2021.] https://www.fodo.com/members/guidance/category-3/safeguarding/.
- 115. The College of Optometrists. Guidance for Professional Practice Gaining consent to treatment from adults. *College of Optometrists*. [Online] 2020. [Cited: 9 November 2021.] https://guidance.college-optometrists.org/guidance-contents/communication-partnership-and-teamwork-domain/consent/gaining-consent-to-treatment-from-adults/.
- 116. HM Government. The General Optical Council (Rules relating to Injury or Disease of the Eye) Order of Council 1999. legislation.gov.uk. [Online] 1999. [Cited: 9 November 2021.] https://www.legislation.gov.uk/uksi/1999/3267/contents/made.
- 117. The College of Optometrists. College of Optometrists Supervision. *College of Optometrists*. [Online] 2021. [Cited: 9 November 2021.] https://www.college-optometrists.org/qualifying/scheme-for-registration/supervision.html.
- 118. Guidance for Professional Practice Health and safety on the premises. *College of Optometrists*. [Online] 2020. [Cited: 9 November 2021.] https://guidance.college-optometrists.org/guidance-contents/safety-and-quality-domain/health-and-safety-on-the-premises/.
- 119. Guidance for Professional Practice Partnership with patients. *College of Optometrists*. [Online] 2020. [Cited: 9 November 2021.] https://guidance.college-optometrists.org/guidance-contents/communication-partnership-and-teamwork-domain/partnership-with-patients/#open:183,184,2201,186,2203.
- 120. —. Ethical Scenarios. *College of Optometrists*. [Online] 2021. [Cited: 9 November 2021.] https://www.college-optometrists.org/clinical-guidance/ethical-scenarios.
- 121. Guidance for Professional Practice Complaints procedure. *College of Optometrists*. [Online] 2020. [Cited: 9 November 2021.] https://guidance.college-optometrists.org/guidance-contents/communication-partnership-and-teamwork-domain/dealing-with-complaints/complaints-procedure/.
- 122. HM Government. The Medicines (Exemptions and Miscellaneous Amendments) Order 2009. *legislation.gov.uk.* [Online] 2009. [Cited: 9 November 2021.] https://www.legislation.gov.uk/uksi/2009/3062/contents/made.
- 123. —. Medical devices regulation and safety: detailed information. *gov.uk*. [Online] 2021. [Cited: 9 November 2021.] https://www.gov.uk/topic/medicines-medical-devices-blood/medical-devices-regulation-safety.
- 124. —. Main page. *Yellow Card Medicines & Healthcare Products Regulatory Agency.* [Online] 2021. [Cited: 9 November 2021.] https://yellowcard.mhra.gov.uk/.

- 125. The College of Optometrists. Guidance for Professional Practice Patient records. *College of Optometrists*. [Online] 2020. [Cited: 9 November 2021.] https://guidance.college-optometrists.org/guidance-contents/knowledge-skills-and-performance-domain/patient-records/.
- 126. —. Ophthalmic Services Guidance: Primary Eye Care, Community Ophthalmology and General Ophthalmology (England). *College of Optometrists*. [Online] 2019. [Cited: 9 November 2021.] https://cms.college-optometrists.org/COO/media/Media/Documents/SPOKE/Ophthalmic-Services-Guidance-Primary-Eye-Care-Community-Ophthalmology-and-General-Ophthalmology.pdf.
- 127. Effectiveness of UK optometric enhanced eye care services: A realist review of the literature. Baker, H, et al. 36, s.l.: Wiley Online Library, 2016, Vol. Ophthalmic & Physiological Optics.
- 128. HM Government. Mental Capacity Act 2005. *legislation.gov.uk*. [Online] 2005. [Cited: 9 November 2021.] https://www.legislation.gov.uk/ukpga/2005/9/contents.
- 129. —. Adults with Incapacity (Scotland) Act 2000. *legislation.gov.uk*. [Online] 2000. [Cited: 9 November 2021.] https://www.legislation.gov.uk/asp/2000/4/contents.
- 130. Mental Capacity Act (Northern Ireland) 2016. *legislation.gov.uk*. [Online] 2016. [Cited: 9 November 2021.] https://www.legislation.gov.uk/nia/2016/18/contents.
- 131. The College of Optometrists. Guidance for Professional Practice Communicating about the costs of your services. *College of Optometrists.* [Online] 2020. [Cited: 9 November 2021.] https://www.college-optometrists.org/clinical-guidance/guidance/communication,-partnership-and-teamwork/partnership-with-patients#Communicatingaboutthecostsofyourservices.
- 132. Association of Optometrists (AOP). Helping patients with concerns about misleading claims. *AOP*. [Online] 2021. [Cited: 9 November 2021.] https://www.aop.org.uk/advice-and-support/business/misleading-claims.
- 133. The College of Optometrists. Wellbeing: College of Optometrists Resources. *College of Optometrists*. [Online] 2021. [Cited: 9 November 2021.] https://www.college-optometrists.org/wellbeing/wellbeing-college-resources.
- 134. —. Guidance for Professional Practice Dealing with complaints. *College of Optometrists*. [Online] 2020. [Cited: 9 November 2021.] https://guidance.college-optometrists.org/guidance-contents/communication-partnership-and-teamwork-domain/dealing-with-complaints/.
- 135. General Optical Council. Speaking up: guidance for registrants. *General Optical Council*. [Online] October 2021. [Cited: 9 November 2021.] https://www.optical.org/en/Investigating_complaints/raising-concerns.cfm.
- 136. Quality in Optometry. Quality in Optometry. Quality in Optometry. [Online] 2021. [Cited: 9 November 2021.] https://www.qualityinoptometry.co.uk/.
- 137. The College of Optometrists, FODO, ABDO and AOP. Workforce risk assessment for primary eye care practices. *College of Optometrists*. [Online] July 2020. [Cited: 9 November 2021.] https://www.college-optometrists.org/news/2020/july/2020-07-workforceriskassessmentforprimaryeyecarepr.
- 138. The College of Optometrists. Appropriate advice, clinical decision making and more. *College of Optometrists*. [Online] 2015. [Cited: 9 November 2021.] https://www.college-optometrists.org/guidance/clinical-notes/appropriate-advice.html.
- 139. Caseload management methods for use within district nursing teams: a literature review. Roberson, C. 5, s.l.: British Journal of Community Nursing, 2016, Vol. 21.
- 140. Association of Optometrists (AOP). Creating health, low stress optical practices Advice and workbook for optometrists and managers. *AOP*. [Online] 2020. [Cited: 10 November 2021.] https://www.aop.org.uk/advice-and-support/health-and-wellbeing/stress-advice/low-stress-guide.
- 141. Total Success Training. NEWSLETTER: Time Management. *Total Success dircon.co.uk.* [Online] [Cited: 10 November 2021.] http://www.tsuccess.dircon.co.uk/timemanagementtips.htm.
- 142. Stress Management Society. Stress Management Society. Stress Management Society. [Online] 2021. [Cited: 10 November 2021.] https://www.stress.org.uk/.
- 143. Leadership in interprofessional health and social care teams: a literature review. Smith, T, et al. 4, s.l.: Leadership in Health Services, 2018, Vol. 31.
- 144. Academy of Royal Medical Colleges. Developing professional identity in multi-professional teams. *Academy of Royal Medical Colleges*. [Online] May 2020. [Cited: 10 November 2021.] https://www.aomrc.org.uk/wp-content/uploads/2020/05/Developing_professional_identity_in_multi-professional_teams_0520.pdf.
- 145. Healthcare Quality Improvement Partnership. Healthcare Quality Improvement Partnership. Healthcare Quality Improvement Partnership. [Online] 2021. [Cited: 10 November 2021.] https://www.hqip.org.uk/resources/?fwp_resource_type=guidance#.YYutw6ZM6Uk.

- 146. The College of Optometrists. Courses Safeguarding. *College of Optometrists*. [Online] 2020. [Cited: 10 November 2021.] https://learning.college-optometrists.org/course/index.php?categoryid=47.
- 147. General Optical Council. General Optical Council Standards Disclosing confidential information. *General Optical Council*. [Online] February 2020. [Cited: 10 November 2021.] https://optical.org/en/standards-and-guidance/disclosing-confidential-information/.
- 148. NHS England. About information governance. *NHS England*. [Online] 2021. [Cited: 10 November 2021.] https://www.england.nhs.uk/ig/about/.
- 149. —. Overview First Aid. *NHS England*. [Online] November 2018. [Cited: 10 November 2021.] https://www.nhs.uk/conditions/first-aid/.
- 150. General Optical Council. GOC rules and regulations. *GOC.* [Online] 2021. [Cited: 10 November 2021.] https://www.optical.org/en/about us/legislation/rules and regulations.cfm.
- 151. Royal Society for Public Health. The RSPH Top 20 Best public health innovations 2000-2020. *Royal Society for Public Health.* [Online] 2020. [Cited: 10 November 2021.] https://www.rsph.org.uk/our-work/policy/top-20-public-health-achievements-of-the-21st-century.html.
- 152. —. Introducing Healthy Living Optical Practices. *Royal Society for Public Health.* [Online] April 2019. [Cited: 10 November 2021.] https://www.rsph.org.uk/about-us/news/healthy-living-optical-practices.html.
- 153. How to prepare a personal development plan. Tasker, F. s.l.: BMJ, 2015, Vol. 351.
- 154. NHS Health Education England. Feedback for Personal Development. *Health Education England e-learning hub.* [Online] June 2013. [Cited: 10 November 2021.] https://portal.e-lfh.org.uk/Component/Details/509278.
- 155. —. Developing Self Awareness. *Health Education England e-learning hub*. [Online] May 2013. [Cited: 10 November 2021.] https://portal.e-lfh.org.uk/Component/Details/509284.
- 156. —. Effective Team Working. *Health Education England e-learning hub*. [Online] June 2013. [Cited: 10 November 2021.] https://portal.e-lfh.org.uk/Component/Details/510196.
- 157. —. Coaching Skills. *Health Education England e-learning hub*. [Online] June 2021. [Cited: 10 November 2021.] https://portal.e-lfh.org.uk/Component/Details/511060.
- 158. Explaining Evidence / Guidelines / Protocols to Patients. *Health Education England e-learning hub.* [Online] September 2021. [Cited: 10 November 2021.] https://portal.e-lfh.org.uk/Component/Details/509554.
- 159. Evidence Based Medicine in Clinical Practice . *Health Education England e-learning hub*. [Online] June 2016. [Cited: 10 November 2021.] https://portal.e-lfh.org.uk/Component/Details/509560 .
- 160. Quality Improvement and Patient Safety . *Health Education England e-learning hub*. [Online] July 2013. [Cited: 10 November 2021.] https://portal.e-lfh.org.uk/Component/Details/509620.
- 161. National Institute for Health and Care Excellence (NICE). Audit and service improvement. *NICE*. [Online] 2021. [Cited: 10 November 2021.] https://www.nice.org.uk/about/what-we-do/into-practice/audit-and-service-improvement.
- 162. Optical Confederation. Guidance on Completing an RG2 Form for Medicines and Healthcare Products Regulatory Agency (MHRA) Registration. *Association of British Dispensing Opticians (ABDO).* [Online] [Cited: 9 November 2021.] https://abdocollege365-
- $my. share point.com/:b:/g/personal/sbutter field_abdo college_org_uk/EdEBgS3pPOZCtEstRx0L43MBrbKbSqQ_n4d1WzFy0skQ4w?e=YWQvCT\ .$
- 163. Development of a framework for person-centred nursing. McCormack, B and McCance, T.V. 2006, Journal of Advanced Nursing, Vol. 56.
- 164. Development of a health dialogue model for patients with diabetes: A complex intervention in a low-/middle income country. M. Reid, C. Walsh, J. Raubenheimer, T. Bradshaw, M Pienaar, C.Hassan, C.Nyoni, M. Le Roux. s.l.: International Journal of Africa Nursing Sciences, 2018, Vol. 8.
- 165. Canada, Royal College of Physicians and Surgeons of. CanMEDS Role: Communicator. [Online] [Cited: 11 11 2021.] https://www.royalcollege.ca/rcsite/canmeds/framework/canmeds-role-communicator-e.
- 166. ABDO College. Supervisor Responsibilities and Guidance. *ABDO College*. [Online] 2021. [Cited: 10 November 2021.] https://abdocollege.org.uk/supervisor-zone/supervisor-
- responsibilities/#:~:text=%20ABDO%20College%20requires%20the%20following%20conditions%20to,time%20at%20any%20point%2C%20on%20any...%20More%20.

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