

The Common Clinical Competency Framework for Non-medical Ophthalmic Healthcare Professionals in Secondary Care

Acute & Emergency Care

November 2016



General basic competences of non-medical eye health care professionals

The basic skill set of an ophthalmic non-medical health care professional (qualified optometrist, orthoptist, ophthalmic nurse or ophthalmic healthcare science practitioner) is to:

- Perform basic clinical ophthalmic assessment
- Follow protocols within their scope of practice under appropriate supervision
- Detect abnormalities through assessment and act on these findings
- Not make a diagnosis or treat

This level of skills and competences is essential before undertaking further training and education for a Level 1 expanded role; and some HCPs may need additional ophthalmic training (basic ophthalmic training courses) to obtain these skills.

Possession of a competence indicates demonstration of an understanding of the underlying principles, limitations and benefits of the skill, as well as being able to elicit the appropriate information accurately.

HISTORY TAKING

- Basic science knowledge about symptomatology of eye disease
- Communication skills – ability to elicit relevant information
- Clinical knowledge about ophthalmic presentations
- Ability to take a general ophthalmic history
- Ability to take a social, family and drug history
- Ability to take a relevant systemic history, including past medical history

OPHTHALMIC EXAMINATION

- Ophthalmic basic science knowledge
 - Anatomy
 - Physiology
 - Pathology
 - Optics
 - Microbiology
- Understanding of basic disease processes
- Ability to elicit and recognise the relevance of positive and negative findings on examination
- Visual acuity measurement – understanding of various methods and notations
- External ocular examination

- Slit lamp examination
- Fundal examination
- Pupil reactions
- Eye movements
- Clinical assessment of visual fields
- Understand management of refractive error

INVESTIGATIONS

- Recognise roles of various investigations and understand their basis

DEALING WITH THE NEEDS OF OPTHALMIC PATIENTS

- Understand the terminology and notation used for ophthalmic examinations – including refractive status
- Communication skills
 - patients, relatives and colleagues
 - written, oral and non verbal
- Time management skills
- Patient as the focus of care
- Patient safety
- Infection control including equipment decontamination
- Knowledge of and adherence to local policies
- Team working
- Epidemiology of ophthalmic disease
- Understand basic drug principles
- Instil drops
- Administer drugs as prescribed
- Recognise allergies and common complications

TEACHING AND EDUCATION

- Recognise own development needs
- Ability to share basic information with patients for their education and understanding

PERSONAL DEVELOPMENT

- Self-learning
- Reflective practice
- Recognise and develop evidence based practice
- Recognise limitations of own practice and competences and works within this scope
- CPD – identify channels through which skills can be maintained and developed

Competence in practice – Acute & Emergency Care

Relevant underlying knowledge in competence and behavioural skills.

Level 1

Participate in triage of acute ophthalmology patients

Level 2

Participate in assessment and preliminary diagnosis of acute ophthalmology patients within agreed scope of practice

Level 3

Participate in diagnosis, management and discharge of acute ophthalmology patients within agreed protocols

Ophthalmic history taking

Level 1

As per general competences

Ability to:

- Take a comprehensive history relevant to the acute / emergency ophthalmic patient
 - including relevance of associated systemic symptoms such as headache
- Act as a competent triage practitioner
- Recognise relevance of symptoms of
 - Pain
 - Inflammation
 - Loss of vision
 - Diplopia
 - Normal post-op recovery or potential complications
 - Systemic disease
- Recognise “red flag” symptoms and prioritise accordingly

Level 2

As per Level 1

Ability to:

- Recognise the importance of presenting history to reach an effective differential diagnosis

Level 3

As per Level 2

Ability to:

- Take a basic systematic enquiry

Ophthalmic examination

Level 1	Level 2	Level 3
<p>As per general competences</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Recognise signs of serious ophthalmic trauma • Recognise the acute red eye • Use intra-ocular pressure measuring devices 	<p>As per Level 1</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Effectively use and interpret different stains • Recognise causes of acute ophthalmic presentations and refer <ul style="list-style-type: none"> - Red eye as required - Loss of vision (acute and chronic) - Trauma – including burns - Painful eye - Acute orbital diagnoses - Acute onset diplopia • Recognise high risk conditions for immediate referral • Recognise links to systemic disease and/or illness and act appropriately to involve other clinicians • Arrange appropriate and timely referral for patients outside scope of practice 	<p>As per Level 2</p> <ul style="list-style-type: none"> • Competent ophthalmic examination with regard to a wide range of acute and chronic ophthalmic conditions and trauma • Basic general examination – including neurological

Investigations

Level 1	Level 2	Level 3
<p>As per general competences</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Perform Schirmer's test • Take bacterial and viral swabs when recognised as being indicated • Perform and interpret sac washout 	<p>As per Level 1</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Identify need for specific ophthalmic and systemic tests • Organise specific ophthalmic and systemic tests • Evaluate and interpret specific ophthalmic and systemic tests and act on the results 	<p>As per Level 2</p>

Management and interventions

Level 1	Level 2	Level 3
<p>As per general competences</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Make relevant clinical decisions ie, identify those requiring urgent referral or assessment • Perform ocular irrigation and test pH • Initiate emergency treatment and basic ophthalmic 'first aid' 	<p>As per Level 1</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Intervene to prevent further harm or relieve suffering eg, removal of sub tarsal foreign bodies, use topical anaesthetic drops under PGD • Assess patients presenting acutely, developing a management plan for each patient and carrying out those parts of the plan which are appropriate within the particular service and the practitioners scope of practice, monitoring care as appropriate • Undertake minor surgical procedures within trained and agreed scope of practice 	<p>As per Level 2</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Monitor the response to treatment and modify management plan of referred patients • Follow up own patients management of ongoing care

Ability to deal with needs of ophthalmic patients

Level 1	Level 2	Level 3
<p>As per general competences</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Risk assess and report – understanding patient safety needs • Work as part of a team and communicate with relevant members 	<p>As per Level 1</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Demonstrate appropriate communication, information-giving and psychological support for the patient and carers • Recognise the network of services which can be accessed from the ophthalmic service and refer as appropriate 	<p>As per Level 2</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Understand indications for emergency surgery and interventions and refer for these as appropriate • Supply or prescribe appropriate drugs as required, under appropriate PGD if required

Ability to deal with needs of ophthalmic patients continued

	<ul style="list-style-type: none"> • Deal with patients fears and concerns • Initiate and administer pharmacological interventions in line with local policy and clinical guidelines • Understand pharmacology of medications (systemic and topical) regarding ophthalmic effects, contra-indications, side effects and drug interactions as well as management of side effects • Provide appropriate treatment under PGD 	
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Teaching and education

Level 1	Level 2	Level 3
<p>As per general competences</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Inform and educate patients and carers re acute care and trauma prevention 	<p>As per Level 1</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Teach and train patients, relatives, colleagues and other groups of professionals 	<p>As per Level 2</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Plan strategies and change for improvement to develop practice and service

Personal development

Level 1	Level 2	Level 3
<p>As per general competences</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Direct self-Learning • Understand reflective practice • Demonstrate participation in CPD 	<p>As per Level 1</p> <p>Ability to:</p> <ul style="list-style-type: none"> • Demonstrate provision of clinical supervision and competency assessment • Demonstrate ongoing maintenance of current practice through knowledge and application of current evidence • Instigate and participate in clinical audit and review 	<p>As per Level 2</p>

Non-medical HCPs performing expanded roles within the acute ophthalmology pathways will have a knowledge of the relevant basic sciences, epidemiology, clinical presentations and manifestations of acute ophthalmology presentations. They will have an understanding of associated systemic diseases. They will be familiar with evidence based guidelines and have a knowledge of basic principles and limitations of relevant equipment along with the technical skills to employ it.

Abbreviations

AMD	Age Related Macular Degeneration	ICG	Indocyanine Green
APD	Afferent Pupillary Defect	IOP	Intra Ocular Pressure
BRVO	Branch Retinal Vein Occlusion	IP	Independent Prescriber
CMO	Cystoid Macular Oedema	LA/GA	Local Anaesthetic/General Anaesthetic
COAG	Chronic Open Angle Glaucoma	MR	Medical Retina
CPD	Continuing Professional Development	nAMD	Neovascular Age Related Macular Degeneration (wet AMD)
CRVO	Central Retinal Vein Occlusion	OCT	Optical Coherence Tomography
CSR	Central Serous Retinopathy	OHT	Ocular Hypertension
DM	Diabetes Mellitus	PGD	Patient Group Directive
DMO	Diabetic Macular Oedema	PI	Peripheal Iridotomy
DR	Diabetic Retinopathy	RVO	Retinal Vein Occlusion
HCPs	Health Care Professionals	SLT	Selective Laser Trabeculoplasty
HEIs	Higher Education Institutions		
HES	Hospital Eye Service		

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