

Standard in development

L6: Dispensing Optician

Title of occupation

Dispensing Optician

UOS reference number

ST0774

Core and options

No

Option title/s

Level of occupation

Level 6

Route

Health and science

Typical duration of apprenticeship

36 months

Degree apprenticeship

Target date for approval

04/05/2022

Resubmission

Yes

1. Please ensure the occupational profile provides more detail and is expanded, and ensure alignment with the duties. As currently drafted, the proposal does not set out the range and depth of a Level 6 occupation and you may wish to consider whether the occupation as described reflects a Level 5 occupation. Please refer to the attached Level Descriptors document for guidance. 2. We understand that a Level 7 Optometrist standard is currently in development. You will need to ensure both occupations are clearly distinct and standalone from one another and both should reflect how they interact with each other when developing your occupation proposal, it would be helpful if both groups could submit their proposals at the same time your Relationship Manager can help to facilitate this

Would your proposed apprenticeship standard replace an existing framework?

No

Does professional recognition exist for the occupation?

Yes

General Optical Council

Occupation summary

This occupation is found in Optical practices, domiciliary services, contact lens and ophthalmic lens manufacturers. The broad purpose of the occupation is A dispensing optician is a regulated professional and accountable for providing advice and the supply of the most comfortable fitting and aesthetically appealing spectacles after taking account of the patient's personal visual, lifestyle and vocational needs. They interpret a spectacle prescription and consider the range of optical appliances available and present these to the patient the most suitable options of lenses, tints and coatings to provide optimum visual performance, combined with suitable spectacle frames to ensure a comfortable fit. They take the necessary measurements and keep records of the specifications. They also deal with the more complex aspects of vision correction, such as advising parents and dispensing to children; and advising on and dispensing low vision aids to people with visual impairment. Many dispensing opticians fit and supply contact lenses. They work in multidisciplinary eyecare services and must be able to identify potentially serious eye problems and refer to an appropriate professional for further investigation and treatment.

The dispensing optician upholds professional standards and ensures their work is compliant with optical, consumer and healthcare regulations. They maintain a safe working environment, to ensure the safety of others and themselves. They also supervise the work of optical assistants and trainee dispensing opticians to ensure the care of patients is of the best possible standard.

They act as an ambassador to deliver the best possible standards of service to their customers/patients consistent with the employer's brand values. If a customer has a concern with their dispensed spectacles, the dispensing optician provides an aftercare service, with advice, and where necessary adjustments and minor repairs.. In their daily work, an employee in this occupation interacts with patients and carers/patients, multidisciplinary eyecare and healthcare providers, optical laboratory staff, NHS, suppliers of lenses, frames, special optical appliances, business service providers.. An employee in this occupation will be responsible for acting autonomously to provide services to a case load of patients, in the optical practice or external facilities or the patient's home.

They will use a range of specialist equipment to perform their duties, and create specifications and order precision manufactured optical products to meet their patient's visual needs. They manage the advice and guidance to the patient about the products they receive including managing their expectations, advising them on how to achieve optimum performance of the dispensed spectacles, and ensuring high levels of patient satisfaction with the professional service.

They are responsible for their own work and that of supervised optical assistants. Their line management and supervisory role would depend on the size of their practice. They may also work in a technical advisory role within a range of organisations such as manufacturing of optical products (see above). They are responsible for ensuring they comply with the relevant policies, standards and regulations in every aspect of the work they undertake.

They are responsible for their own professional development and with further study or qualifications they may progress to practice in a speciality, or to become a business owner or manager of a service with responsibility for clinical and business governance..

Typical job titles

Dispensing optician

Are there any statutory/regulatory or other typical entry requirements?

No

Occupation duties

DUTY	KSBS
<p>Duty 1 Practice autonomously to the legal, ethical and professional standards for Dispensing Opticians and in line with scope of own practice and limits of competence. Interpret patient histories and refractive and ocular motor status examination results to inform clinical decision making and care management plans.</p>	K1 K5 K6 K9 K10 K32 K33 K34 S1 S3 S5 S6 S7 S8 S9 S35 B1 B2 B3 B4 B5 B6
<p>Duty 2 Interpret and dispense prescriptions using appropriate lenses, frame choices and accurate facial and frame measurements.</p>	K20 K21 K22 K23 K40 S23 B1 B2 B3 B4 B5 B6
<p>Duty 3 Measure and verify optical appliances comply with relevant standards, guidelines and evidence.</p>	K27 K39 S28 B1 B2 B3 B4 B5 B6
<p>Duty 4 Prescribe, advise and dispense appropriate vocational and special optical appliances in accordance with personal eye protection regulations and relevant standards.</p>	K20 K22 K25 S25 B1 B2 B3 B4 B5 B6
<p>Duty 5 Manage and dispense appropriate spectacles for paediatric patients and patients with complex or additional needs.</p>	K8 K21 K22 K27 S22 S28 B1 B2 B3 B4 B5 B6
<p>Duty 6 Manage cases where the patient feels the vision is not satisfactory through their spectacle lenses and therefore cannot be tolerated.</p>	K19 K20 K22 K24 K27 S28 B1 B2 B3 B4 B5 B6
<p>Duty 7 Identify and advise patients who could benefit from</p>	K28

DUTY**KSBS**

simple or complex low-vision aids.	S29 B1 B2 B3 B4 B5 B6
Duty 8 Conduct low-vision assessments, using the full patient history and evaluation of visual requirements.	K11 K12 K14 K29 S30 B1 B2 B3 B4 B5 B6
Duty 9 Select an appropriate visual aid to meet patient needs and provide appropriate advice.	K20 K30 S31 B1 B2 B3 B4 B5 B6
Duty 10 Work as part of a multi-discipline team to ensure evidence-informed clinical decision making, to maintain knowledge of optical products and advancements in technology, to provide patients with the most appropriate optical appliances, care, advice, and referral to other professionals.	K2 K3 K26 S2 S27 B1 B2 B3 B4 B5 B6
Duty 11 Recognise potential problems and appraise suitable lens solutions for different types of prescription, modifying the prescription in accordance with legal requirements relative to the visual task analysis for individual patient requirements.	K19 K24 S24 B1 B2 B3 B4 B5 B6
Duty 12 Use knowledge of facial development to relate anatomical features and material properties to the dispensing of optical appliances.	K21 S21 B1 B2 B3 B4 B5 B6
Duty 13 Modify, repair, adjust and accurately fit optical appliances.	K22 S26 B1 B2 B3 B4 B5 B6
Duty 14 Ensures high and/or complex prescriptions are managed and dispensed appropriately using knowledge of optical performance and production of the appliance in order to meet patients' visual and aesthetic needs.	K19 S24
Duty 15 Advise on the safe and effective use of contact lenses and removal in an emergency.	K17 K31 S32 S33 B1 B2 B3 B4 B5 B6
Duty 16 Identify patient conditions that need medical referral in a timely way, including when urgent or emergency attention is required.	K13 K14 S15 S16 B1 B2 B3 B4 B5 B6
Duty 17 Advise patients on the use of common ophthalmic drugs to safely facilitate optometric examination and the diagnosis / treatment of ocular disease.	K15 K16 K17 K18 S17 S18 S19 S20 B1 B2 B3 B4 B5 B6
Duty 18 Use verbal and non-verbal communication methods and techniques to overcome barriers and meet individuals' preferences, needs and desired outcomes.	K3 K4 S4 B1 B2 B3 B4 B5 B6
Duty 19 Analyse and interpret the results of diagnostic tests,	K10 K12

DUTY	KSBS
clinical investigations and assessments of eye health to determine an appropriate optical management plan.	S10 S11 S12 S13 S14 B1 B2 B3 B4 B5 B6
Duty 20 Maintain and further develop your own skills and knowledge and contribute to the development of others by participating in appraisal and continuing professional development (CPD).	K37 K38 K39 S38 S39 S40 S41 B1 B2 B3 B4 B5 B6
Duty 21 Provide leadership and supervision for others in the multidisciplinary optical team.	K7 K35 K36 S34 S36 S37 B1 B2 B3 B4 B5 B6

KSBS

Knowledge

K1: The legislation, laws, policies, professional standards, local ways of working and codes of conduct in relation to own role and scope of practice.

K2: The principles of evidence-based practice, research methods, ethics, and governance in order to critically appraise, safely use, share and apply research findings to clinical decision-making and improving practice and patient care.

K3: The importance of basing all management and care plans on patients' needs and preferences, recognising and addressing any personal and external factors that may unduly influence their decisions.

K4: The different modes of communication and how to apply with patients, carers, multi-disciplinary healthcare team, health and care colleagues and the public to maximise understanding ensuring patients are involved in and are at the heart of decisions made about their care.

K5: The principles of non-discriminatory, person-centred care, reflecting on people's values and beliefs, diverse backgrounds, cultural characteristics, language requirements, needs and preferences, taking account of any need for adjustments.

K6: The limits of own competence and when to seek support and refer to others where appropriate.

K7: The professional and legal responsibilities of trainee and student supervision, of being supervised and supervising unregistered colleagues undertaking delegated activities, how to manage situations when actions could put people at risk.

K8: The principles of safeguarding in relation to children, persons with disabilities, and other vulnerable people.

K9: The principles of confidentiality, storing information securely and relevant guidance on disclosing confidential information and/or with the patient's consent.

K10: The principles of consent, the actions to take if consent cannot be obtained or is withdrawn and the role of carers and the power of attorney.

K11: The methods assessment of visual function from a range of diagnostic sources and the relevance of history taking the examination of the refractive and ocular motor status of the patient to inform clinical decision-making and care management plans.

K12: Ocular anatomy and associated systems, for recognition and safe management of ocular abnormalities, and the assessment of visual function.

K13: The clinical signs/presentation of common ocular abnormalities, to identify a patient's condition and their potential need for medical referral.

K14: When and how to refer patients safely to other professionals and/or services for clinical intervention or support.

K15: The principles of pharmacology to safely facilitate optometric examination and the diagnosis/treatment of ocular disease and its compatibility with other treatments the patient is receiving.

K16: The legal requirements for the use and supply of common ophthalmic drugs and the indications and contraindications of commonly used ophthalmic drugs.

K17: The principles of infection prevention control and risk management.

K18: How adverse ocular reactions to medication may occur and how to manage and refer in line with individual patients' needs.

K19: The theory of general optics and ophthalmic lenses to the dispensing of all optical appliances including high and/or complex prescriptions with understanding of optical performance and production of the resultant appliance.

K20: The relevance of visual task analysis for an informed clinical assessment of the patients' needs.

K21: Facial anthropometry in relation to dispensing and the relevant advice on the safe use of spectacles, low vision aids and other ophthalmic appliances.

K22: The material properties of optical appliances to know how to safely and accurately modify, repair, and fit spectacles, low vision aids and other ophthalmic appliances, including to paediatric patients, patients with complex or additional needs and patients with craniofacial abnormalities.

K23: The variability in prescription analysis, recognising potential problems and the ability to provide suitable optical solutions.

K24: How and when to modify a prescription in accordance with legal requirements relative to the visual task analysis for individual patients' requirements.

K25: The regulations relating to vocational and special optical appliances in accordance with personal eye protection regulations and standards.

K26: Optical products and advancement in technology of ophthalmic lenses and frame manufacture to provide patients with the most appropriate optical appliances.

K27: The relevant standards to accurately measure and verify optical appliances and understand the management of cases of non-tolerance.

K28: How to recognise a patient who could benefit from simple or complex low-vision aids.

K29: The methods of low vision assessment, evaluation of clinical findings and the relevance of registration for sight impaired or severely sight impaired.

K30: When and how to refer and signpost to sight loss and other relevant health services.

K31: The principles of contact lenses to advise on contact lens options, handling, and importance of aftercare regimes with both soft and rigid contact lenses to maintain ocular health.

K32: The principles of transparency and the professional duty of candour, using knowledge of dispensing practice and effective communication to manage complaints, incidents, and errors.

K33: The principles of health and safety legislation and regulations.

K34: The roles, responsibilities, and scope of practice of all members of the practice team and wider interdisciplinary teams to work collaboratively when providing care.

K35: The principles of effective leadership, management, business dynamics and culture and apply these to team working and decision-making.

K36: The demands of professional practice and caseload management, to recognise signs of vulnerability in themselves or their colleagues and the action required.

K37: The principles and application of processes for performance management and how these apply to own learning and development needs.

K38: How to identify, report, and critically reflect, data from a range of information sources such as clinical audits, patient feedback, peer review and significant event analysis, learning from experience, using and identifying and addressing their new learning needs to improve future practice.

K39: Understanding and apply technological advances in eye health and broader healthcare delivery to improve future practice.

K40: The principles of service evaluation and development initiatives, including the sale and supply of optical appliances, services available and associated payments.

Skills

S1: Work in line with legislation, laws, policies, professional standards, local ways of working and codes of conduct that apply to own role.

S2: Safely demonstrate evidence-based practice, thinking critically when applying evidence and drawing on experience to make evidence informed decisions in all situations.

S3: Responsible and accountable for professional decisions and actions as a first point of contact for patient's eye health needs.

S4: Communicate effectively using a range of skills and strategies with patients, carers, multi-disciplinary healthcare team, health and care colleagues and the public to maximise understanding ensuring patients are involved in and are at the heart of decisions made about their care.

S5: Provide and promote non-discriminatory, person centred and sensitive care, reflecting on people's values and beliefs, diverse backgrounds, cultural characteristics, language requirements, needs and preferences, taking account of any need for adjustments.

S6: Recognise and work within the limits of own knowledge and skills, seeking support and referring to others where appropriate.

S7: Protect patients' rights; respect their choices and their right to dignity and privacy, adapting care measures to meet different environments where required.

S8: Obtain, record, and verify valid consent from adults, children, young and vulnerable people, and their carers acting upon non-verbal cues from patients or carers that could indicate discomfort, a lack of understanding or an inability to give informed consent.

S9: Record 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.

S10: Take relevant medical, family, and social history from the patient and any other people involved in their care (relatives/carers and others) considering their beliefs and/or cultural factors in managing outcomes.

S11: Provide information in accessible ways to ensure patients understand and make informed decisions about their care and management plans.

S12: Undertakes safe ocular examinations using the correct techniques and procedures to inform clinical decision-making within individual scope of practice.

S13: Investigates, diagnoses, and manages individuals' functional and developmental visual conditions, including those related to age, actioning timely referral to other services, where this is needed to meet a patient's needs.

S14: Manage and assess vision, refractive error, binocular status, and visual acuity (within scope of practice).

S15: Recognise the clinical signs/presentation of common ocular abnormalities, accurately identify a patient's condition and their potential need for medical referral in a timely way.

S16: Investigate and interpret the results of history-taking and clinical findings from diagnostic sources (i.e., a recognition of abnormality and correct interpretation of common investigative tests) to formulate a management plan, recognising and acting when a referral is appropriate.

S17: Recognise the use of common ophthalmic drugs, to safely facilitate optometric examination and the diagnosis/treatment of ocular disease and its compatibility with other treatments the patient is receiving.

S18: Detect adverse ocular reactions to medication and advise, manage, and refer in line with individual patients' needs.

S19: Adhere to legal requirements for the use and supply of common ophthalmic drugs.

S20: Recognise the indications and contraindications of commonly used ophthalmic drugs and responds considering these to uphold patient care and safety.

S21: Complete an informed clinical assessment of the patients' needs and facial anthropometry to dispense, modify and /or repair, and accurately fit and advise on the safe use of spectacles, low vision aids and other ophthalmic appliances.

S22: Manage and dispense spectacles for paediatric patients and for patients with complex or additional needs.

S23: Interpret and dispense a prescription using the correct lenses, frame choice and facial and accurate frame measurements.

S24: Analyse 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.

S25: Prescribe, advise, and dispense vocational and special optical appliances in accordance with personal eye protection regulations and standards.

S26: Complete all facial measurements and modify spectacles where necessary, particularly frames for children and patients with craniofacial abnormalities.

S27: Evaluate optical products and advancement in technology of ophthalmic lenses and frame manufacture to provide patients with the most appropriate optical appliances.

S28: Measure and verify optical appliances in line with relevant standards, guidelines, and manage cases of non-tolerance.

S29: Identify patients who could benefit from simple or complex low-vision aids.

S30: Conduct a low-vision assessment, evaluate the clinical findings to dispense and advise on simple and complex low-vision aids suitable for the patient.

S31: Refers and signposts as necessary to sight loss and other relevant health services.

S32: Advise the patient on the safe use of contact lenses and demonstrate removal in an emergency.

S33: Advise and discuss possible contact lens options and demonstrate the handling and importance of aftercare regime to patients with both soft and rigid contact lenses to maintain ocular health.

S34: Manages complaints, incidents, and or errors.

S35: Recognise and address any health and safety concerns that may risk themselves, others, public protection, and quality of care, escalating concerns appropriately.

S36: Work collaboratively within healthcare teams, employing skills and behaviours of clinical leadership and team-working and management in line with their role and scope of practice.

S37: Undertakes efficient, safe, and effective patient and caseload management.

S38: Evaluates, identifies, and meets own learning and development needs.

S39: Supports the learning and development of others, including through acting as a role model and mentor.

S40: Gathers, evaluates, and applies effective patient and service delivery feedback to improve their own practice and the practice of others.

S41: 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.

Behaviours

B1: Treat people with dignity and respect.

B2: Show discretion and empathy for those you work with.

B3: Be adaptable, reliable and committed.

B4: Be caring and compassionate.

B5: Show resilience and self-awareness.

B6: Show openness and integrity at all times.

Qualifications

English & Maths

Apprentices without level 2 English and maths will need to achieve this level prior to taking the End-Point Assessment. For those with an education, health and care plan or a legacy statement, the apprenticeship's English and maths minimum requirement is Entry Level 3. A British Sign Language (BSL) qualification is an alternative to the English qualification for those whose primary language is BSL.

Does the apprenticeship need to include any mandated qualifications in addition to the above-mentioned English and maths qualifications?

No

Regulated standard

This is a regulated occupation.

Regulator body:

General Optical Council

Training Provider must be approved by regulator body

EPAO must be approved by regulator body