

## STANDARDS OF CLINICAL COMPETENCE FOR OPTOMETRISTS

For the following scopes of practice: **Optometrist**  
**Optometrist (TPA Endorsement)**  
**Educator Optometrist**  
**Educator Optometrist (TPA Endorsement)**

Elements/Competencies	Performance criteria and indicators (this is not an exhaustive list)
<b>Task 1. Professional and clinical responsibilities</b>	
1.1 Keeps optometric knowledge, clinical expertise, skills and equipment maintained and up-to-date.	1.1.1 Ability to access relevant material (e.g. journal articles, internet material, textbooks). 1.1.2 Ability to demonstrate an understanding of sound research requirements and advantages and limitations of clinical techniques. 1.1.3 Accesses information about continuing education options. 1.1.4 Understands and maintains the Board's competence requirements of optometrists including CPD requirements. 1.1.5 Clinical experiences and discussions with colleagues are used to improve patient care. 1.1.6 Developments in clinical theory, techniques and technology can be appraised, evaluated for relevance to clinical practice and adapted to improve patient care. 1.2.1 Maintains professional independence in optometric decision-making and conduct. 1.2.2 Recognises and accepts responsibility for possible consequences of actions and advice.
1.2 Practises independently.	1.3.1 Provides optometric services as necessary for the management of the patient. 1.3.2 Holds patient eye care interests and comfort paramount. 1.3.3 No advantage is taken of the relationship with the patient. 1.3.4 Advice is sought from other professionals when further opinion is required.

	1.3.5 Optometric assistant services are used appropriately. 1.3.6 Complies (as a health provider) with Health and Disability Commissioner's Code of Health and Disability Services Consumers' Rights.
1.3 Acts in accordance with the standards of ethical behaviour of the profession.	1.3.7 Complies with and maintains the Board Standards of Ethical Conduct.
1.4 Communicates advice and information to patients and others.	1.4.1 Clearly and appropriately communicates information to patients, carers, staff, and other professionals. 1.4.2 Maintains appropriate liaison with other professionals, including recognising and communicating significant clinical presentations to other practitioners involved in the patient's care.
1.5 Utilises resources from optometry and other organisations to enhance patient care.	1.5.1 Understands and recommends appropriate optometric, community and other resources to patients.
1.6 Understands the principles of the planning, establishment, development and maintenance of an optometric practice.	1.6.1 Understands practice staff roles and training needs. 1.6.2 Maintains equipment in a safe, accurate state. 1.6.3 Maintains personal and general safety, hygiene and comfort, including appropriate infection control measures. 1.6.4 Schedules patient appointments according to the time required. 1.6.5 Recognises financial obligations and reporting requirements.
1.7 Understands the legal obligations involved in optometric practice.	1.7.1 Understands and complies with relevant legislation and standards.
1.8 Provides for the care of patients with special needs.	1.8.1 Appropriately recommends and makes available subsidies to patients who are entitled to them. 1.8.2 Provides domiciliary care or can direct patients to a provider of domiciliary care, if required. 1.8.3 Delivers optometric services in a culturally sensitive manner. 1.8.4 Complies with and maintains the Board's Standards of Cultural Competence
1.9 Provides or directs patients to emergency optometric care.	1.9.1 Identifies situations requiring emergency optometric care and can provide or direct patient to this appropriately if required.
1.10 Promotes issues of eye and vision care to the community.	1.10.1 Provides information on matters of visual health and welfare including product and treatment options. 1.10.2 Provides advice on eye safety and protection to patients and the public.
1.11 Understands factors affecting the community's need for optometric services.	1.11.1 Understands social determinants of health of the patient population. 1.11.2 Evaluates current trends regarding vision and health care.

---

## Task 2. Obtaining a patient history

---

2.1 Communicates with the patient in an effective way, taking into account the physical, emotional, intellectual and cultural background of the patient.	2.1.1 Exchange of information between patient and optometrist is structured and comfortable. 2.1.2 Ensures patient privacy in communications and consultations.
2.2 Makes general observations of the patient.	2.2.1 Takes significant characteristics (physical and behavioural) into account in the assessment.
2.3 Elicits reasons for the patient visit in a structured way.	2.3.1 Understands and utilises different strategies to elicit information relevant to the visit from the patient and/or guardian.
2.4 Obtains information required for diagnosis and management from the patient and/or others (including information to safely perform diagnostic procedures).	2.4.1 Understands the need to investigate the patient history throughout the examination and to record information in relevant areas eg: symptoms and complaints, personal and family ocular and medical history, ocular and systemic medications, visual needs and recent visual devices and care regimes, allergies, previous assessments and treatment by other professionals, risk factors, injury details, assessment of likely future/past compliance.
2.5 Obtains and interprets relevant patient information from sources other than the patient.	2.5.1 Understands the need to obtain, interpret and integrate information appropriately from different sources (with appropriate consent), to assist in determining the management of the patient.

---

## Task 3. Examination of the eye and visual system

---

3.1 Formulates an examination plan based on the patient history in order to obtain information necessary for diagnosis and management.	3.1.1 Selects tests and procedures appropriate to the patient's condition and abilities, including relevant investigations which may not necessarily be associated with the patient's history.
3.2 Implements an examination plan that is progressively modified on the basis of findings.	3.2.1 Tests and procedures which efficiently provide information required for the diagnosis are performed in a safe, proficient and accurate manner. 3.2.2 Clear explanations on procedures are given. 3.2.3 Informed consent is obtained.
3.3 Assesses the structure and health of the components of the ocular adnexae, for their structure, health and functional ability, using diagnostic pharmaceutical	3.3.1 (a) Assesses and evaluates the structure and health of the <b>ocular adnexae</b> including lacrimal glands, lids, lashes, puncta, meibomian glands, skin lesions near the eye, following infection control measures relevant to optometric practice.

agents where clinically indicated.

(b) Uses tests including but not limited to photography, slit-lamp observation, lid eversion, diagnostic pharmaceuticals, tear film assessment, and palpebral aperture measurement using appropriate equipment.

3.3.2 (a) Assesses and evaluates the structure and health of the **anterior segment** including but not limited to: cornea, conjunctiva, anterior chamber and aqueous humour, anterior chamber angle, anterior chamber depth, episclera, sclera, iris, pupil and ciliary body (including surgical alterations).

(b) Uses and interprets results from such tests/equipment as: vital dyes and diagnostic pharmaceutical agents, slit-lamp biomicroscopy, keratometry, topography, gonioscopy, pachymetry, tonometry, photography, pupil reactions appropriate pharmacological testing, exophthalmometry.

(c) Interprets results of tests such as: anterior segment imaging, ultrasonography, confocal microscopy.

3.3.3 (a) Assesses and evaluates the structure and health of the **ocular media** including: the ocular lens, lens and other surgical implants, the lens capsule and vitreous.

(b) Uses and interprets results of tests including but not limited to: direct and indirect ophthalmoscopy, retinoscopy, photography, diagnostic pharmaceuticals, slit-lamp biomicroscopy, ultrasound.

3.3.4 (a) Assesses and evaluates the structure and health of the **components of the posterior segment** including but not limited to: retina, choroid, vitreous, blood vessels, optic nerve head, macula and fovea.

(b) Uses and interprets results of tests including but not limited to: direct and indirect ophthalmoscopy, retinoscopy, photography, diagnostic pharmaceuticals, slit-lamp biomicroscopy and funduscopy, visual acuity, colour vision tests, Amsler test, visual field assessment, photostress test, pupil reactions, auxiliary lenses for fundus viewing and optic nerve head assessment.

(c) Interprets tests including: ultrasound, diagnostic imaging, optical coherence tomography and nerve fibre layer analysis and other new developments involving assessment of these areas.

3.3.5 Recognises the need for microbiological testing and organises it when required.

*TPA endorsed scope:*

*Recognises the significance of the following in the management of the patient: indications and selection of specific microbiological tests, cost effectiveness of tests and treatments, urgency, drug sensitivity testing, collection and delivery of samples, collection and disposal of sharps and biohazards, and appropriate referral.*

	<p>3.4.1 Uses tests, assessment and equipment as and interpretation of results including but not limited to: measurement of contrast sensitivity function, neutral density filter test, photo-stress test, glare testing, pinhole, optokinetic nystagmus, preferential looking tests, logMAR and other acuity charts, monocular and binocular measurements, corrected/uncorrected vision, interferometry, Amsler grid, confrontation, kinetic and static field screening and threshold fields (appropriate for requirements), tests for functional loss and malingering, short wavelength automated perimetry and frequency doubling technology.</p>
<p>3.4 Assesses central and peripheral sensory visual function and the integrity of the visual pathways (including vision and visual acuity, visual fields, colour vision and pupil function).</p>	<p>3.4.2 Uses appropriate tests to assess colour vision and interpretation of results including but not limited to: pseudo-isochromatic and hue ordering tests, flicker, monocular and binocular measurements, colour matching.</p> <p>3.4.3 Assesses pupils and pupil reactions using appropriate tests/conditions including but not limited to: varied lighting conditions, swinging flashlight tests, and appropriate pharmacological testing and interpretation of results. All testing undertaken in appropriate conditions.</p>
<p>3.5 Assesses refractive status.</p>	<p>3.5.1 Measures the spherical, astigmatic and presbyopic components of the correction, using appropriate tests for the presentation.</p> <p>3.5.2 Understands when cycloplegia is indicated.</p> <p>3.5.3 Uses cycloplegia when indicated.</p>
<p>3.6 Assesses oculomotor and binocular function (including eye alignment, eye movement quality and range, binocularity status, vergence system adaptability, accommodation placements and adaptability).</p>	<p>3.6.1 Assess ocular alignment and binocular function, and nystagmus in terms of: manifest and latent deviation, (strabismus, heterophorias, direction, magnitude, comitancy), fixation (quality and eccentricity).</p> <p>3.6.2 Uses equipment enabling assessment of binocular status including: prisms, cover test in directions of gaze.</p> <p>3.6.3 Assesses versions, vergences and near points of convergence, and to make gross assessments of ocular pursuit movements, saccades and ocular motility, giving consideration to the nine positions of gaze and any limitations of gaze, detection of adaptive head postures.</p> <p>3.6.4 Evaluates the binocular state through assessment such as: sensory and motor fusion, suppression, diplopia, stereopsis, simultaneous perception, amblyopia, normal and anomalous correspondence.</p> <p>3.6.5 Analyses the adaptability of the vergence system through assessments such as: fusional vergence ranges, facility, near point of convergence, fixation disparity and accommodative convergence (AC/A) ratios.</p> <p>3.6.6 Assesses the placement and adaptability of accommodation through assessments such as: posture of and relative accommodation, accommodative facility, monocular and binocular amplitudes of accommodation, AC/A ratio.</p>

3.7 Assesses visual information processing.

- 3.7.1 Understands methods used to investigate visual information processing and has ability to interpret the results of these tests.
- 3.7.2 Recognises how patient history (eg brain injury) and milestones may affect visual information processing.
- 3.7.3 Determines necessity for analysis of aspects such as: visual analysis and spatial skills, visual motor integration.

---

3.8 Considers and assesses ocular and non-ocular signs and symptoms found during the ocular examination relevant to the patient's eye and/or general health, where indicated.

- 3.8.1 Identifies, considers and investigates pertinent ocular and non-ocular signs and/or visual symptoms and recognises their significance in terms of: general patient welfare (eg social and emotional), patient's medical condition (eg presence of acquired neurological disorders), and patient management (eg pharmacological interventions).
- 3.8.2 Recognises those requiring further investigation, and refers appropriately and in a timely manner (eg thyroid function tests, blood sugar level measurement, carotid auscultation, ESR, MRI, CAT scan, blood count, sphygmomanometry).

---

#### **Task 4. Detection, measurement and diagnosis of variations, anomalies, defects and diseases of the eyes, adnexae and visual system**

---

4.1 Interprets and analyses examination findings and results in order to determine the nature and aetiology of conditions or diseases and to establish a diagnosis or differential diagnoses.

- 4.1.1 Critically appraises accuracy and validity of test results and information from the case history and other sources.
  - 4.1.2 Interprets data appropriately.
  - 4.1.3 Analyses data and equipment for consistency.
  - 4.1.4 Uses reference material to assist in diagnosis.
  - 4.1.5 Differentiates between refractive, inflammatory, infective, immunologic, metaplastic, neoplastic, dystrophic, degenerative, congenital, neurological, iatrogenic, irritative and traumatic conditions.
  - 4.1.6 Laboratory results are interpreted.
  - 4.1.7 Ability to assess how the patient's condition has responded to previous interventions.
  - 4.1.8 Integrates information from results, history, to differentiate changes, to differentiate chronic / acute conditions, to establish a differential diagnosis and to determine a need for additional testing.
- TPA endorsed scope:*  
*reviews all evidence to come to a reasonable conclusion about the specific nature of the condition to ascertain which, if any, prescribed medication will be most efficacious for the treatment of the condition.*

---

4.2 Evaluates the expected prognosis of the condition or disease, using all available relevant information.

- 4.2.1 Refers to appropriate literature in determining natural disease progression, and can determine how the patient's condition has changed over time or responded to

interventions.

---

## **Task 5. Patient management**

**Including prescribing (meaning the issuing, usually written, of directions for composition and use) of an ophthalmic appliance, optical appliance or ophthalmic medical device intended for remedial or cosmetic purposes or for the correction of a defect of sight.**

---

- |  |  |
|--|--|
| 5.1 Develops a management plan for each patient that is implemented in agreement with the patient/carer.   | 5.1.1 Presents and explains the diagnosis and prognosis to the patient in a manner the patient can understand.<br>5.1.2 Addresses the importance of the presenting problems and findings in the management plan and discusses options to address the patient's needs.<br>5.1.3 Agrees a course of management with the patient including likely management and prognosis.<br>5.1.4 Seeks and obtains informed consent for the initiation and continuation of management.<br>5.1.5 Recalls patients for ongoing care and review as indicated.<br>5.1.6 Promptly follows up patients with life or sight threatening conditions who do not show for review.  |
| 5.2 Prescribes spectacles, contact lenses, low vision aids and/or other optical appliances or ophthalmic appliances or ophthalmic medical devices where indicated. | 5.2.1 Assesses the suitability of spectacles or contact lenses as forms of correction for the patient.<br>5.2.2 Applies the patient's refraction, visual requirements and other findings to determine the spectacle or contact lens prescription and type of lens.<br>5.2.3 Correctly orders spectacles and contact lenses, and on receipt, verifies measurable parameters before the lenses are supplied to the patient.<br>5.2.4 Writes a spectacle or contact lens prescription in a manner that can be interpreted for correct fabrication of the appliance. Prescription information includes name of patient, name of prescriber, purpose of prescription, an expiry date and any other information deemed appropriate.<br>5.2.5 Assesses contact lenses with new fitting parameters on the eye prior to supply to the patient.<br>5.2.6 Instructs the patient in matters relating to ocular health, vision, contact lens care and maintenance and after care visits.<br>5.2.7 Monitors contact lens performance, ocular health and patient adherence to wearing and maintenance regimens.<br>5.2.8 Where indicated, selects and demonstrates a range of low vision devices suitable to the patient's needs, and prescribes an appropriate device if suited to patient's needs.<br>5.2.9 Instructs the patient in the use of the prescribed low vision device.<br>5.2.10 Evaluates and monitors the success of the low vision aid, and informs and refers the patient to other rehabilitative services if appropriate. |
-

5.3 Selects, recommends and prescribes appropriate pharmacological, non-pharmacological and therapeutic agents for treatment of ocular dysfunction, disease and injury.

5.3.1 Considers drug actions and interactions, adverse side effects or allergies when determining non-prescription pharmacologic agents to meet the patient's needs.

5.3.2 Adheres to legal requirements when providing advice to the patient on pharmacologic agents.

5.3.3 Has ability to interpret and apply current clinical trial findings.

5.3.4 Determines the need for ocular and/or systemic therapy.

5.3.5 Understands the details to be provided to patients regarding non-prescription ocular medications (eg. name of medication, how it is to be used).

5.3.6 Utilises suitable pharmaceutical reference resources.

5.3.7 Understands legal requirements for record keeping pertaining to pharmacological agents and for storage of any ocular medications held by the optometrist.

*TPA Endorsed Scope:*

*5.3.8 When choosing the most appropriate therapeutic agent(s) for the patient, considers aspects including but not limited to: microbiological factors (eg. infections, inflammations), pharmacological factors (eg frequency, dose etc.), systemic factors (eg. allergies, interactions with systemic medications etc.), ocular factors (eg. ocular side effects and effects on the contralateral eye), contra-indications and side effects, issues of antibiotic resistance and quality use of medicines, diagnosis and prognosis, available delivery systems (eg. ointments, drops etc.), drug substitution factors (eg brand versus generic), patient related factors (e.g. dexterity, cognitive state, adherence history).*

*5.3.9 Writes a prescription in a manner that allows accurate supply of the agent.*

*5.3.10 Issues a prescription for ocular therapeutic medication in accordance with legislation (eg. name of drug, dosage, how it is to be used and for how long, patient's name, optometrist's name, signature and practice address).*

*5.3.11 Understands legislative requirements regarding prescriptions, including co-management requirements (e.g. glaucoma).*

*5.3.12 Understands legal requirements for record keeping, labelling and dispensing pertaining to therapeutic medications and for storage of any ocular therapeutic medications held by the optometrist.*

*5.3.13 Understands how to clarify any issues relating to the prescription with the pharmacist.*

*5.3.14 Understands how to store prescription stationery securely.*

*5.3.15. Understands and appropriately uses Pharmac funding codes.*

---

5.4 Monitors the effect of ocular therapeutic treatment and makes or recommends appropriate changes in management.

5.4.1 Understands when the patient should be referred.

5.4.2 Knows the intervals at which the patient's condition should be reviewed.

5.4.3 Knows the tests to be administered at the patient's review visit.

5.4.4 Knows the adverse signs and symptoms, side effects and interactions.

5.4.5 Is able to determine when and how treatment should be modified.

*TPA Endorsed Scope:*

*5.4.6 Is able to alter drug type and dose when necessary, including consideration of co-management requirements.*

*5.4.7 Is able to determine the need for additional or alternative medicines.*

*5.4.8 Is able to determine criteria for the completion of treatment.*

---

5.5 Instructs patients on the correct use, administration, storage and disposal of pharmaceutical agents.

5.5.1 Conveys information to the patient on dose, frequency, timing, method of instillation, hygiene, shelf-life, storage, disposal, possible interactions with drugs and other substances, actions to take if adverse reactions occur etc.

---

5.6 Instructs patients about precautionary procedures and non-pharmacological and palliative management.

5.6.1 Understands and advises appropriately on non-therapeutic management eg use of sunglasses, lid hygiene procedures, lid scrubs, compresses, artificial tears, health supplements, variation in use of contact lens wear and solutions, and use of eye makeup.

5.6.2 Advises patients of where to obtain alternative care in the optometrist's absence.

5.6.3 Understands and counsels patients appropriately on how to avoid cross-infection and contamination of medications.

5.6.4 Understands and counsels patients appropriately regarding the use of eye patches and analgesia.

---

5.7 Performs non pharmacological treatment or intervention procedures, and emergency first aid in the management of eye conditions or injury.

5.7.1 Performs procedures including epilation, lid scrubs, lacrimal lavage, irrigation, superficial foreign body removal, embedded foreign body removal, punctal occlusion, punctal plug insertion, meibomian gland expression, corneal debridement.

5.7.2 Is able to provide emergency management of trauma to the eye and adnexae.

5.7.3 Utilises bandage contact lenses when necessary.

---

5.8 Implements and manages vision therapy.

5.8.1 Treats or refers for treatment patients with accommodative, vergence, strabismic and amblyopic conditions.

5.8.2 If vision therapy is provided, instructs the patient in the use and maintenance of vision training equipment.

5.8.3 Sets goals of the vision therapy program and criteria for discharge.

5.8.4 Monitors progress of the vision therapy program.

---

5.9 Refers the patient to other professionals in a timely and appropriate manner.

5.9.1 Recognises the need for referral to other professionals for assessment and/or treatment, discusses this with the patient and recommends a suitable professional.

5.9.2 Makes a timely referral to other professionals, with appropriate supporting documentation.

5.9.3 Can jointly manage patients with other health care practitioners.

5.10 Co-operates with other medical practitioners in a professional and ethical manner in the provision of pre- and post-operative management of patients.	5.10.1 Provides pre-operative assessment and advice. 5.10.2 Assesses and monitors post-surgical follow-up of signs according to the surgeon's requirements, and the procedures are undertaken. 5.10.3 Provides emergency management for observed post-surgical complication. 5.10.4 Arranges appropriate referral for further post-operative treatment or assessment of complications.
5.11 Provides advice on vision, eye health and safety in particular settings including the workplace.	5.11.1 Provides vision screenings for occupational or other purposes. 5.11.2 Provides advice on eye protection, visual standards and visual ergonomics in the workplace and recreational settings. 5.11.3 Counsels individuals on the suitability of their vision for certain occupations. 5.11.4 Provides certification of an individual's visual suitability for designated occupations or tasks. 5.11.5 Advises the patient or parent/caregiver of the presence of conditions that have implications for other family members.

---

## Task 6. Ophthalmic dispensing

---

6.1 Interprets a prescription for an optical appliance, ophthalmic appliance or ophthalmic medical device is interpreted and accepts responsibility for dispensing.	6.1.1 Is able to resolve ambiguities in optical prescriptions. 6.1.2 Understands the requirements for dispensing optical prescriptions to nationally agreed standards.
6.2 Assists patients in selecting appliances that are suitable for their needs.	6.2.1 Assists the patient to select a suitable spectacle frame. 6.2.2 Understands the advice to be provided to the patient on the appropriate lenses and lens treatment for their needs.
6.3 Dispenses optical prescriptions accurately and in accordance with accepted standards.	6.3.1 Makes relevant measurements pertaining to the spectacle frame and lens, orders lenses and verifies finished appliances according to appropriate standards. 6.3.2 Understands the process to edge lenses and mount them in the frame appropriately. 6.3.3 Is able to check frames and uncut lenses or mounted lenses for damage and compliance with the prescription. 6.3.4 Verifies the appliance for accuracy and quality against the prescription prior to delivery.
6.4 Adjusts and delivers the optical appliance, ophthalmic appliance or ophthalmic medical device, and instructs the patient in the proper use, maintenance of the appliance and any adaptation considerations.	6.4.1 Fits spectacles to the patient to optimise comfort and performance. 6.4.2 Provides information to the patient regarding the correct use of spectacles or other optical appliance, their maintenance and possible adaptation effects.

---

## Task 7. Recording and maintaining of clinical data and records

---

- |   |   |
|---|---|
| 7.1 Ensures that clinical data is documented in a legible, secure, accessible, permanent and unambiguous manner, in the English language. | 7.1.1 Promptly records all relevant information pertaining to the patient in a separate record and in a format which is understandable and useable by any optometrist and his/her colleagues (including such information as name and address of patient, name of examining practitioner, patient history, diagnoses, management strategies, summary of advice given to patient, photographic and video information for all consultations, dates and information relating to all patient contacts, timing of review, copies of referral letters and reports with the record).<br>7.1.2 Keeps patient records in a readily retrievable format which is physically secure (including appropriate firewall, virus protection and back-up for computer records).<br>7.1.3 Makes corrections to records in accordance with legislation (including initialling and dating of corrections).<br><br>7.1.4 Includes details of microbiological tests and results, and modifications to management on the patient record.<br><i>TPA endorsed scope</i><br><i>7.1.4 Includes details of medications prescribed.</i> |
| 7.2 Maintains confidentiality of patient records in accordance with the Privacy Act and the Health Information Privacy Code.              | 7.2.1 Limits access to records to appropriate personnel.<br>7.2.2 Only releases information from patient records and/or obtained from the patient with the consent of the patient (understanding of legal requirements related to confidentiality, privacy and health records).<br>7.2.3 Understands and observes the rights of the patient to access his or her patient record.<br>7.2.4 Observes patient privacy when patient information is transferred.   |
| 7.3 Meets legislative requirements regarding retention and destruction of patient records and other practice documentation.               | 7.3.1 Understands and observes the requirements regarding the retention of records.<br>7.3.2 Understands and observes the requirements regarding archiving or destruction of records to ensure patient privacy.<br>7.3.3 Understands and observes the requirement for the retention of practice documentation other than patient records.   |
- 

## Task 8. Research

---

- |   |  |
|---|--|
| 8.1 Where research is conducted it is with consideration to NZ ethical guidelines and privacy legislation | 8.1.1 Follows appropriate processes and keeps records to demonstrate compliance. |
|---|--|