

**Pearson
BTEC Level 6 Award
in Children's Eye Care**

**Pearson
BTEC Level 6 Award
in Children's Eye Care
(Contact Lenses)**

**Pearson
BTEC Level 6 Certificate
in Children's Eye Care**

Specification

BTEC Professional qualifications

First teaching November 2015

Issue 2

Edexcel, BTEC and LCCI qualifications

Edexcel, BTEC and LCCI qualifications are awarded by Pearson, the UK's largest awarding body offering academic and vocational qualifications that are globally recognised and benchmarked. For further information, please visit our qualification websites at www.edexcel.com, www.btec.co.uk or www.lcci.org.uk. Alternatively, you can get in touch with us using the details on our contact us page at qualifications.pearson.com/contactus

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This specification is Issue 2. Key changes are sidelined. We will inform centres of any changes to this issue. The latest issue can be found on our website: qualifications.pearson.com

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All information in this specification is correct at time of publication.

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Purpose of this specification

The purpose of a specification, as defined by Ofqual, is to set out:

- the qualification's objective
- any other qualification that a learner must have completed before taking the qualification
- any prior knowledge, skills or understanding that the learner is required to have before taking the qualification
- units that a learner must have completed before the qualification will be awarded and any optional routes
- any other requirements that a learner must have satisfied before they will be assessed or before the qualification will be awarded
- the knowledge, skills and understanding that will be assessed as part of the qualification (giving a clear indication of their coverage and depth)
- the method of any assessment and any associated requirements relating to it
- the criteria against which the learner's level of attainment will be measured (such as assessment criteria)
- any specimen materials
- any specified levels of attainment.

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What are BTEC Level 6 Professional qualifications?

BTEC Professional qualifications are work-related qualifications that are available from Level 4 to Level 8 in a range of sectors. The qualifications give learners the knowledge, understanding and skills that they need to prepare for employment. The qualifications also provide career development opportunities for those already in work, progress to employment in a particular vocational sector. Consequently they provide a course of study for full-time or part-time learners in schools, colleges and training centres.

BTEC Professional qualifications provide much of the underpinning knowledge and understanding for the National Occupational Standards for the sector, where these are appropriate. They are supported by the relevant Standards Setting Body (SSB) or Sector Skills Council (SSC). A number of BTEC Professional qualifications are recognised as the knowledge components of Apprenticeships Frameworks.

On successful completion of a BTEC Professional qualification, learners can progress to or within employment and/or continue their study in the same or related vocational area.

Sizes of BTEC Professional qualifications

All qualifications have a Total Qualification Time (TQT) value that indicates the size of the qualification.

TQT is defined as *'the number of notional hours which represents an estimate of the total amount of time that could reasonably be expected to be required in order for a Learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of the qualification'*.

TQT consists of:

- (a) the number of hours assigned for Guided Learning (GL)
- (b) an estimate of the number of hours a Learner will reasonably be likely to spend in preparation, study or any other form of participation in education or training, including assessment, which takes place as directed by, but not under the immediate guidance or supervision of a teacher, tutor, assessor or other appropriate provider of education or training.

Some qualifications may also have a credit value, which is equal to one tenth of the Total Qualification Time (TQT), rounded to the nearest whole number.

Pearson consults with users of these qualifications in assigning TQT and credit values.

BTEC Professional qualifications are available in the following sizes:

- Award – a qualification with a TQT value of 120 or less (equivalent to a range of 1 – 12 credits)
- Certificate – a qualification with a TQT value in the range of 121 – 369 (equivalent to a range of 13 – 36 credits)
- Diploma – a qualification with a TQT value of 370 or more (equivalent to 37 credits and above).

Qualification summary and key information

Qualification title	Pearson BTEC Level 6 Award in Children's Eye Care
Qualification Number (QN)	601/8120/5
Regulation start date	31/10/2015
Operational start date	01/11/2015
Approved age ranges	18+ 19+ Please note that sector-specific requirements or regulations may prevent learners of a particular age from embarking on this qualification. Please refer to the assessment requirements.
Total qualification time (TQT)	80
Guided learning (GL)	29
Credit value	8
Assessment	Portfolio of Evidence (internal assessment).
Grading information	The qualification and units are graded pass/fail.
Entry requirements	For details of entry requirements see below. The L6 Award is aimed at dispensing opticians. Centres must also follow the Pearson <i>Access and Recruitment</i> policy.
Funding	Qualifications eligible and funded for post-16 year-olds can be found on the funding Hub. The Skills Funding Agency also publishes a funding catalogue which lists the qualifications available for 19+ funding.

Qualification summary and key information

Qualification title	Pearson BTEC Level 6 Award in Children's Eye Care (Contact Lenses)
Qualification Number (QN)	601/8118/7
Regulation start date	31/10/2015
Operational start date	01/11/2015
Approved age ranges	18+ 19+ Please note that sector-specific requirements or regulations may prevent learners of a particular age from embarking on this qualification. Please refer to the assessment requirements.
Total qualification time (TQT)	91
Guided learning (GL)	33
Credit value	9
Assessment	Portfolio of Evidence (internal assessment).
Grading information	The qualification and units are graded pass/fail.
Entry requirements	For details of entry requirements see below. The L6 Award is aimed at dispensing opticians. Centres must also follow the Pearson <i>Access and Recruitment</i> policy.
Funding	Qualifications eligible and funded for post-16 year-olds can be found on the funding Hub. The Skills Funding Agency also publishes a funding catalogue which lists the qualifications available for 19+ funding.

Qualification summary and key information

Qualification title	Pearson BTEC Level 6 Certificate in Children's Eye Care
Qualification Number (QN)	601/8119/9
Regulation start date	31/10/2015
Operational start date	01/11/2015
Approved age ranges	18+ 19+ Please note that sector-specific requirements or regulations may prevent learners of a particular age from embarking on this qualification. Please refer to the assessment requirements.
Total qualification time (TQT)	145
Guided learning (GL)	57
Credit value	15
Assessment	Portfolio of Evidence (internal assessment).
Grading information	The qualification and units are graded pass/fail.
Entry requirements	For details of entry requirements see below. The L6 Certificate is aimed at optometrists. Centres must also follow the <i>Pearson Access and Recruitment</i> policy.
Funding	Qualifications eligible and funded for post-16 year-olds can be found on the funding Hub. The Skills Funding Agency also publishes a funding catalogue which lists the qualifications available for 19+ funding.

Centres will need to use the Qualification Number (QN) when they seek public funding for their learners. The qualification title, unit titles and QN will appear on each learner's final certificate. Centres should tell learners this when recruiting them and registering them with Pearson. There is more information about certification in our *UK Information Manual*, available on our website, qualifications.pearson.com

Key features of the Pearson BTEC Level 6 Award in Children's Eye Care

The Pearson BTEC Level 6 Award in Children's Eye Care has been developed to give learners the opportunity to:

- develop the knowledge, understanding and skills needed by dispensing opticians in relation to children's eye care
- engage in learning that is relevant to them and which will give them opportunities to develop a range of skills and techniques, professional skills and attributes essential for successful performance in working life
- achieve a nationally recognised Level 6 vocationally-related qualification
- gain recognition for existing skills
- progress to employment in a particular vocational sector
- progress to related general and/or vocational qualifications.

Key features of the Pearson BTEC Level 6 Award in Children's Eye Care (Contact Lenses)

The Pearson BTEC Level 6 Award in Children's Eye Care (Contact Lenses) has been developed to give learners the opportunity to:

- develop the knowledge, understanding and skills needed by contact lens opticians in relation to children's eye care
- engage in learning that is relevant to them and which will give them opportunities to develop a range of technical skills and techniques, professional skills and attributes essential for successful performance in working life
- achieve a nationally recognised Level 6 vocationally-related qualification
- gain recognition for existing skills
- progress to employment in a particular vocational sector
- progress to related general and/or vocational qualifications.

Key features of the Pearson BTEC Level 6 Certificate in Children's Eye Care

The Pearson BTEC Level 6 Certificate in Children's Eye Care has been developed to give learners the opportunity to:

- update their knowledge of ocular disease in children and ocular examination in children's eye care
- develop an in-depth knowledge of the management of children's eye care, engage in learning that is relevant to them and which will provide opportunities to develop a range of technical skills and techniques, professional skills and attributes essential for successful performance in working life
- achieve a nationally recognised Level 6 vocationally-related qualification
- gain recognition for existing skills

National Occupational Standards

Where relevant, BTEC Level 6 qualifications are designed to provide some of the underpinning knowledge and understanding for the National Occupational Standards (NOS), as well as developing practical skills in preparation for work and possible achievement of NVQs in due course. NOS form the basis of National Vocational Qualifications (NVQs). BTEC Level 6 qualifications do not purport to deliver occupational competence in the sector, which should be demonstrated in a work context.

Rules of combination

The rules of combination specify the credits that need to be achieved, through the completion of particular units, for the qualification to be awarded.

Rules of combination for Pearson BTEC Level 6 qualifications

When combining units for a Pearson BTEC Level 6 in Children's Eye Care, it is the centre's responsibility to ensure that the following rules of combination are adhered to.

Pearson BTEC Level 6 Award in Children's Eye Care

- 1 Qualification credit value: a minimum of 5 credits.
- 2 Minimum credit to be achieved at, or above, the level of the qualification: 8 credits.
- 3 All credits must be achieved from the units listed in this specification.

Pearson BTEC Level 6 Award in Children's Eye Care (Contact Lenses)

- 1 Qualification credit value: a minimum of 6 credits.
- 2 Minimum credit to be achieved at, or above, the level of the qualification: 9credits.
- 3 All credits must be achieved from the units listed in this specification.

Pearson BTEC Level 6 Certificate in Children's Eye Care

- 1 Qualification credit value: a minimum of 12 credits.
- 2 Minimum credit to be achieved at, or above, the level of the qualification: 15 credits.
- 3 All credits must be achieved from the units listed in this specification.

Pearson BTEC Level 6 Award in Children's Eye Care

The Pearson BTEC Level 6 Award in Children's Eye Care is an 8-credit qualification that consists of three mandatory units.

Pearson BTEC Level 6 Award in Children's Eye Care				
Unit number	Mandatory units	Level	Credit	Guided learning
Unit 2	Professional Practice in Children's Eye Care	6	3	12
Unit 3	Dispense Spectacles to Children	6	2	5
Unit 6	Understand the Principles of Eye Examination and Management of Ocular Abnormalities	5	3	12

Pearson BTEC Level Award in Children's Eye Care (Contact Lenses)

The Pearson BTEC Level 6 Award in Children's Eye Care (Contact Lenses) is a 9-credit qualification that consists of four mandatory units.

Pearson BTEC Level 6 Award in Children's Eye Care (Contact Lenses)				
Unit number	Mandatory units	Level	Credit	Guided learning
Unit 2	Professional Practice in Children's Eye Care	6	3	12
Unit 3	Dispense Spectacles to Children	6	2	5
Unit 4	Dispense Contact Lenses to Children	6	1	4
Unit 6	Understand the Principles of Eye Examination and Management of Ocular Abnormalities	5	3	12

Pearson BTEC Level 6 Certificate in Children's Eye Care

The Pearson BTEC Level 6 Certificate in Children's Eye Care is a 15-credit qualification that consists of six mandatory units.

Pearson BTEC Level 6 Certificate in Children's Eye Care				
Unit number	Mandatory units	Level	Credit	Guided learning
Unit 1	Ocular Examination for Children's Eye Care	6	3	12
Unit 2	Professional Practice in Children's Eye Care	6	3	12
Unit 3	Dispense Spectacles to Children	6	2	5
Unit 4	Dispense Contact Lenses to Children	6	1	4
Unit 5	Ocular Disease and Abnormalities in Childhood	6	3	12
Unit 6	Understand the Principles of Eye Examination and Management of Ocular Abnormalities	5	3	12

Assessment

All units in these qualifications are internally assessed. The qualifications are criterion referenced, based on the achievement of all the specified learning outcomes.

To achieve a 'pass' a learner must have successfully passed **all** the assessment criteria.

Guidance

The purpose of assessment is to ensure that effective learning has taken place to give learners the opportunity to:

- meet the standard determined by the assessment criteria
- achieve the learning outcomes.

All the assignments created by centres should be reliable and fit for purpose, and should be built on the unit assessment criteria. Assessment tasks and activities should enable learners to produce valid, sufficient and reliable evidence that relates directly to the specified criteria. Centres should enable learners to produce evidence in a variety of forms, including performance observation, presentations and posters, along with projects, or time-constrained assessments.

Centres are encouraged to emphasise the practical application of the assessment criteria, providing a realistic scenario for learners to adopt, and making maximum use of practical activities. The creation of assignments that are fit for purpose is vital to achievement and their importance cannot be over-emphasised.

The assessment criteria must be clearly indicated in the assignment briefs. This gives learners focus and helps with internal verification and standardisation processes. It will also help to ensure that learner feedback is specific to the assessment criteria.

When designing assignment briefs, centres are encouraged to identify common topics and themes. A central feature of vocational assessment is that it allows for assessment to be:

- current, i.e. to reflect the most recent developments and issues
- local, i.e. to reflect the employment context of the delivering centre
- flexible to reflect learner needs, i.e. at a time and in a way that matches the learner's requirements so that they can demonstrate achievement.

Qualification grade

Learners who achieve the minimum eligible credit value specified by the rule of combination will achieve the qualification at pass grade.

Quality assurance of centres

BTEC Level 4–7 qualifications provide a flexible structure for learners, enabling programmes of varying credits and combining different levels. For the purposes of quality assurance, all individual qualifications and units are considered as a whole.

Centres delivering BTEC Level 4–7 qualifications must be committed to ensuring the quality of the units and qualifications they deliver, through effective standardisation of assessors and verification of assessor decisions. Centre quality assurance and assessment is monitored and guaranteed by Pearson.

Pearson quality assurance processes will involve:

- centre approval for those centres not already recognised as a centre for BTEC qualifications
- approval for BTEC Level 4–7 qualifications and units.

For all centres delivering BTEC qualifications at Levels 4–7, Pearson allocates a Standards Verifier (SV) for each sector offered who will conduct an annual visit to quality assure the programmes.

Approval

Centres are required to declare their commitment to ensuring the quality of the programme of learning and providing appropriate assessment opportunities for learners that lead to valid and accurate assessment outcomes. In addition, centres will commit to undertaking defined training and online standardisation activities.

Centres already holding approval are able to gain qualification approval online. New centres must complete a centre approval application.

Quality assurance guidance

Details of quality assurance for BTEC Level 4 to 7 qualifications are available on our website (qualifications.pearson.com).

Programme design and delivery

Mode of delivery

Pearson does not normally define the mode of delivery for BTEC Level 4 – Level 8 qualifications. Centres are free to offer the qualifications using any mode of delivery (such as full-time, part-time, evening only, distance learning) that meets their learners' needs. Whichever mode of delivery is used, centres must ensure that learners have appropriate access to the resources identified in the specification and to the subject specialists delivering the units. This is particularly important for learners studying for the qualification through open or distance learning.

Learners studying for the qualification on a part-time basis bring with them a wealth of experience that should be utilised to maximum effect by tutors and assessors. The use of assessment evidence drawn from learners' work environments should be encouraged. Those planning the programme should aim to enhance the vocational nature of the qualification by:

- liaising with employers to ensure a course relevant to learners' specific needs
- accessing and using non-confidential data and documents from learners' workplaces
- including sponsoring employers in the delivery of the programme and, where appropriate, in the assessment
- linking with company-based/workplace training programmes
- making full use of the variety of experience of work and life that learners bring to the programme.

Resources

BTEC Level 6 qualifications are designed to give learners an understanding of the skills needed for specific vocational sectors. Physical resources need to support the delivery of the programme and the assessment of the learning outcomes, and should therefore normally be of industry standard. Staff delivering programmes and conducting the assessments should be familiar with current practice and standards in the sector concerned. Centres will need to meet any specific resource requirements to gain approval from Pearson.

Where specific resources are required these have been indicated in individual units in the *Essential resources* sections.

Delivery approach

It is important that centres develop an approach to teaching and learning that supports the vocational nature of BTEC Level 6 qualifications and the mode of delivery. Specifications give a balance of practical skill development and knowledge requirements, some of which can be theoretical in nature. Tutors and assessors need to ensure that appropriate links are made between theory and practical application and that the knowledge base is applied to the sector. This requires the development of relevant and up-to-date teaching materials that allow learners to apply their learning to actual events and activity within the sector. Maximum use should be made of learners' experience.

Access and recruitment

Pearson's policy regarding access to its qualifications is that:

- they should be available to everyone who is capable of reaching the required standards
- they should be free from any barriers that restrict access and progression
- there should be equal opportunities for all wishing to access the qualifications.

Centres are required to recruit learners to BTEC qualifications with integrity. This will include ensuring that applicants have appropriate information and advice about the qualifications and that the qualification will meet their needs. Centres should take appropriate steps to assess each applicant's potential and make a professional judgement about their ability to successfully complete the programme of study and achieve the qualification. This assessment will need to take account of the support available to the learner within the centre during their programme of study and any specific support that might be necessary to allow the learner to access the assessment for the qualification. Centres should consult our policy on learners with particular requirements.

Centres will need to review the entry profile of qualifications and/or experience held by applicants, considering whether this profile shows an ability to progress to a higher level qualification.

Access to qualifications for learners with disabilities or specific needs

Equality and fairness are central to our work. Pearson's Equality Policy requires all learners to have equal opportunity to access our qualifications and assessments. It also requires our qualifications to be awarded in a way that is fair to every learner.

We are committed to making sure that:

- learners with a protected characteristic (as defined by the Equality Act 2010) are not, when they are undertaking one of our qualifications, disadvantaged in comparison to learners who do not share that characteristic
- all learners achieve the recognition they deserve from undertaking a qualification and that this achievement can be compared fairly to the achievement of their peers.

Learners taking a qualification may be assessed in British sign language or Irish sign language where it is permitted for the purpose of reasonable adjustments.

Further information on access arrangements can be found in the Joint Council for Qualifications (JCQ) document *Access Arrangements, Reasonable Adjustments and Special Consideration for General and Vocational Qualifications*.

Details on how to make adjustments for learners with protected characteristics are given in the document *Pearson Supplementary Guidance for Reasonable Adjustment and Special Consideration in Vocational Internally Assessed Units*.

Both documents are on our website(qualifications.pearson.com).

In particular sectors the restrictions on learner entry might also relate to any physical or legal barriers, for example people working in health, care or education are likely to be subject to Disclosure and Barring Service criminal record checks.

Recognising prior learning and achievement

Recognition of Prior Learning (RPL) is a method of assessment that considers whether a learner can demonstrate that they can meet the assessment requirements for a unit through knowledge, understanding or skills they already possess and so do not need to develop through a course of learning.

Pearson encourages centres to recognise learners' previous achievements and experiences in and outside the workplace, as well as in the classroom. RPL provides a route for the recognition of the achievements resulting from continuous learning.

RPL enables recognition of achievement from a range of activities using any valid assessment methodology. If the assessment requirements of a given unit or qualification have been met, the use of RPL is acceptable for accrediting a unit, units or a whole qualification. Evidence of learning must be sufficient, reliable and valid.

Further guidance is available in our policy document *Recognition of Prior Learning Policy and Process*, available on our website.

Unit format

All units in BTEC Professional qualifications have a standard format. The unit format is designed to give guidance on the requirements of the qualification for learners, tutors, assessors and those responsible for monitoring national standards.

Each unit has the following sections.

Unit title

The unit title that will appear on the learner's Notification of Performance (NOP).

Level

All units and qualifications have a level assigned to them. The level assigned is informed by the level descriptors defined by Ofqual and, where appropriate, the NOS and/or other sector/professional benchmarks, inform the allocation of level.

Credit value

All units in this qualification have a credit value. The minimum credit value is 1 and credits can be awarded in whole numbers only. Learners will be awarded credits for the successful completion of whole units.

Guided learning (GL)

The activity of a Learner in being taught or instructed by – or otherwise participating in education or training under the Immediate Guidance or Supervision of – a lecturer, supervisor, tutor or other appropriate provider of education or training. The activity of 'participating in education or training' includes the activity of being assessed, if the assessment takes place under the Immediate Guidance or Supervision of a lecturer, supervisor, tutor or other appropriate provider of education or training.

Pearson has consulted with users of the qualification and has assigned a number of hours to this activity for each unit.

Unit aim

This gives a summary of what the unit aims to do.

Unit introduction

The unit introduction gives the reader an appreciation of the unit in the vocational setting of the qualification, as well as highlighting the focus of the unit. It gives the reader a snapshot of the unit and the key knowledge, skills and understanding gained while studying the unit. The unit introduction also highlights any links to the appropriate vocational sector by describing how the unit relates to that sector.

Learning outcomes

The learning outcomes of a unit set out what a learner knows, understands or is able to do as the result of a process of learning.

Assessment criteria

Assessment criteria specify the standard required by the learner to achieve each learning outcome.

Unit content

The unit content identifies the breadth of knowledge, skills and understanding needed to design and deliver a programme of learning to achieve each of the learning outcomes. This is informed by the underpinning knowledge and understanding requirements of the related National Occupational Standards (NOS), where relevant. The content provides the range of subject material for the programme of learning and specifies the skills, knowledge and understanding required for achievement of the unit.

Each learning outcome is stated in full and then the key phrases or concepts related to that learning outcome are listed in italics followed by the subsequent range of related topics.

Relationship between content and assessment criteria

The learner should have the opportunity to cover all of the unit content.

It is not a requirement of the unit specification that all of the content is assessed. However, the indicative content will need to be covered in a programme of learning in order for learners to be able to meet the standard determined in the assessment criteria.

Content structure and terminology

The information below shows the unit content is structured and gives the terminology used to explain the different components within the content.

- Learning outcome: this is shown in bold at the beginning of each section of content.
- Italicised sub-heading: it contains a key phrase or concept. This is content which must be covered in the delivery of the unit. Colons mark the end of an italicised sub-heading.
- Elements of content: the elements are in plain text and amplify the sub-heading. The elements must be covered in the delivery of the unit. Semi-colons mark the end of an element.
- Brackets contain amplification of content which must be covered in the delivery of the unit.
- 'e.g.' is a list of examples, used for indicative amplification of an element i.e the content specified in this amplification could be covered or could be replaced by other, similar material).

Essential guidance for tutors

This section gives tutors additional guidance and amplification to aid understanding and a consistent level of delivery and assessment. It is divided into the following sections.

- *Delivery* – explains the content’s relationship to the learning outcomes and offers guidance about possible approaches to delivery. This section is based on the more usual delivery modes but is not intended to rule out alternative approaches.
- *Assessment* – gives amplification about the nature and type of evidence that learners need to produce in order to achieve the unit. This section should be read in conjunction with the assessment criteria.
- *Essential resources* – identifies any specialist resources needed to allow learners to generate the evidence required for each unit. The centre will be asked to ensure that any requirements are in place when it seeks approval from Pearson to offer the qualification.
- *Indicative resource materials* – gives a list of resource material that benchmarks the level of study.

Units

Units

Unit 1:	Ocular Examination for Children's Eye Care	23
Unit 2:	Professional Practice in Children's Eye Care	29
Unit 3:	Dispense Spectacles to Children	37
Unit 4:	Dispense Contact Lenses to Children	43
Unit 5:	Ocular Disease and Abnormalities in Childhood	49
Unit 6:	Understand the Principles of Eye Examination and Management of Ocular Abnormalities	55

Unit 1: Ocular Examination for Children's Eye Care

Level:	6
Credit value:	3
Guided learning hours:	12

Unit aim

This unit assesses the appropriate application of methods and interpretation of results of eye examination for under-16s, in order to guide clinical decision making.

Unit introduction

In this unit, learners are required to demonstrate an understanding of how and why ocular examinations are carried out on patients under 16 years of age. This will include an understanding of the techniques used for children of different ages, the action to take if ocular problems are identified, and how to communicate these results to patients and/or carers.

Learners will carry out an ocular examination and use the examination results to determine next actions. When carrying out the examination, learners will put into practice their knowledge of instruments and techniques, preventative measures and when further investigation is appropriate.

Learning outcomes and assessment criteria

In order to pass this unit, the evidence that the learner presents for assessment needs to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

On completion of this unit a learner should:

Learning outcomes	Assessment criteria
1 Understand the techniques and instruments used for ocular examination of patients under 16 years of age	1.1 Explain the instruments and techniques used to assess refractive, visual, ocular health and oculomotor status in children of different ages 1.2 Explain the applications and limitations of instruments and techniques used for eye examination in children of different ages
2 Understand myopia progression and how it can be prevented	2.1 Analyse current thinking on mechanisms and strategies to limit myopia progression
3 Be able to carry out ocular examination on patients under the age of 16	3.1 Present eye examination results of patients under the age of 16
4 Be able to make investigations in response to a patient with signs or symptoms of ocular problems	4.1 Make judgements on the need for further investigation of children with suspected ocular problems 4.2 Propose appropriate strategies for examination of children who are unwilling or unable to cooperate fully 4.3 Explain the factors to be considered when informing the patient and/or their carer of results

Unit content

1 Techniques and instruments used for ocular examination of patients under 16 years of age

Instruments and techniques used to assess refractive, visual, ocular health and oculomotor status, in children of different ages:

- *instruments*: occluder; pen torch; retinoscope; ophthalmoscope; fixation target; RAF rule; test charts; pinhole test; prism bars; stereo test; tonometer; autorefractor; slit lamp biomicroscope; Volk lens; colour vision tests: Ishihara, City University.
- *techniques*: birth to 12 months: Hirschberg test; forced choice preferential looking cards; objection to occlusion; cover test; visual evoked response; hundreds and thousands; styrcar balls; visually directed reaching; catford drum; Frisby screening test; Lang test; 10/25 Δ prism test; ocular motor tests: optokinetic nystagmus: – tested by barany drum, OKN or OKN scarf, vestibular movement: – dolls head testing, swinging baby test.
12 months to 2.5 years: Cardiff acuity cards; Kay's pictures; illiterate E test; graphical object; hundreds and thousands; Hirschberg test; 20 Δ base-out test; Titmus test; Mohindra technique; ocular motor tests: saccadic movement, smooth pursuit movement: motility test, vestibular movement: caloric testing.
2.5 years upwards: Lea symbols; Kay pictures crowded/uncrowded; Sheridan-Gardiner test; Cambridge crowded cards; Landolt C test; Sonksen-Silver test; LogMAR acuity cards; Snellen letters; TNO test; ocular motor tests: saccadic movement, smooth pursuit movement: motility test, vestibular movement: caloric testing; Ishihara/city university test; cycloplegic refraction; direct/indirect ophthalmoscopy.

The applications and limitations of instruments and techniques used for eye examination in children of different ages:

- resistance of child; understanding; ability; age appropriate; priorities; results of previous examination; areas of concern; uncooperative children; anxiety

2 Myopia progression and how it can be prevented

Current thinking on mechanisms and strategies to limit myopia progression:

- biofeedback theories; behavioural techniques; vision training; optical lifestyle change; pharmaceuticals

3 Be able to carry out ocular examination on patients under the age of 16

The need for further investigation of children with suspected ocular problems:

- irregularities of examination results; swelling of ONH; distortion; infection; refractive errors; blind spots; inconclusive results; blurring; spots/ashes/floaters; pain; discharge; headache; itching; puffiness; injury; bleeding; significant changes to vision and/or visual acuity

Factors to be considered when informing the patient and/or their carer of results:

- role; responsibilities; understanding; language/communication barriers; addressing concerns/worries; confidentiality

4 Be able to make investigations in response to a patient with signs or symptoms of ocular problems

The need for further investigation of children with suspected ocular problems:

- irregularities of examination results; swelling; distortion; infection; refractive errors; blind spots; inconclusive results; blurring; spots/ashes/floaters; pain; discharge; head ache; itching; puffiness; swelling; injury; bleeding; changes to vision

Strategies for examination of children who are unwilling or unable to cooperate fully:

- distraction

Essential guidance for tutors

Delivery

The delivery of this unit requires a clear structure from the outset. It is recommended that tutors give an overview of each learning outcome at the beginning of the unit. This will give them a context for understanding that each learning outcome is an essential step towards carrying out an ocular examination.

Assessment criteria 1.1, 1.2 and 2.1 could be delivered through in-class resource reviews, for example instruments and techniques, and tutor input followed by group discussions. Learners should be made aware of current views on strategies for limiting the progression of myopia. This might be through group discussions, individual or group investigations.

Delivery of learning outcomes 1 and 2 would also benefit from a visiting optician or optometrist to enhance learners' knowledge and understanding of specific techniques used with children when carrying out an ocular examination.

Learning outcome 3 is about the actual ocular examination itself. The work for this learning outcome could be in the form of a tutor or client-generated brief in a vocational scenario or a realistic opportunity for learners to carry out an ocular examination.

Assessment criterion 3.1 requires learners to present the results of an ocular examination for a patient under 16 years of age. Learners should build on the skills developed in learning outcomes 1 and 2 in order to put this into practice.

Learning outcome 4 requires learners to follow up any concerns raised or identified during the ocular examination carried out in learning outcome 3. The learner has to be able to identify issues such as inconclusive results or irregularities which could give cause for concern and require further investigation. They have to confirm why they consider further testing or investigation is necessary following the examination.

For assessment criterion 4.2, learners have to explain how to convey the results of the ocular examination to the patient and/or carers. The assessor should give learners examples of methods of doing this, including legal consideration in relation to data protection and confidentiality. Evidence could be in the form of a written report, presentation, evidence of communications, or professional discussion.

Assessment

This guidance supports assessors in making decisions about how best to assess each unit and the evidence needed to meet the assessment requirements. Centres can adapt the guidance for learners and the particular assessment context, as appropriate. Centres will devise and mark the assessment for this unit.

A range of assessment methods should give learners suitable opportunities to demonstrate, explain and analyse instruments and techniques used for ocular examinations of patients under 16 years of age. Evidence of individual understanding could include written assignments, a reflective journal and presentations. Learners will also have to demonstrate their understanding through practical demonstration in real-life situations, supported by their own reflective journal and witness observation sheets.

To achieve learning outcome 1, learners should assess how refractive, visual, ocular health and ocular motor status is assessed in children of different ages. Learners could use examples from their experience to illustrate their assessments and analysis.

Learning outcome 2 explores myopia, learners could prepare an analysis of methods of reducing the progression of myopia. They should carry out in-depth research to enable them to gather the required information.

Learning outcome 3 requires learners to carry out an ocular examination. This must be on a patient or patients under the age of 16. Learners have to perform an ocular eye test and submit the findings for information or further action. The ocular eye test should involve the use of instruments and techniques explored in learning outcome 1.

Learning outcome 4, assessment criterion 4.1, continues on from the examination to address reasons why further investigation or testing might be necessary.

Learners should use their professional judgment when interpreting the examination results and taking the necessary action. Reasons for further exploration can include sudden symptoms/signs, swelling, distortion or pain. Relevant records must also be completed, detailing the examination and reasons for taking action.

Learning outcome 4, assessment criterion 4.2, focuses on the task of informing the child or their carer that further investigation is necessary. This can include who to inform and how communication is carried out, all within the boundaries of confidentiality and data protection.

Unit 2: Professional Practice in Children's Eye Care

Level:	6
Credit value:	3
Guided learning hours:	12

Unit aim

This unit assesses the learner's knowledge and understanding of regulation of eye care for under 16s, and the application of this knowledge to practice operations and case management

Unit introduction

For this unit learners are asked to review their professional practice, identifying how they will address areas to ensure currency and validity of practice. Learners will explore the regulatory and professional obligations they have in relation to maintaining current and safe practice.

Learners will also apply regulations and standards that will contribute to their professional development, identifying risk management strategies to ensure their practice is legally compliant.

Learners will reflect on their practice, utilising a method suited to their needs. Using the outcomes of their reflections, learners will identify an action plan. Learners are also required to carry out the agreed actions and evaluate their progress in relation to their identified and agreed priorities.

Learning outcomes and assessment criteria

In order to pass this unit, the evidence that the learner presents for assessment needs to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

On completion of this unit a learner should:

Learning outcomes	Assessment criteria
1 Understand the regulations and professional framework relating to children's eye care practice	1.1 Explain the legal, professional and ethical obligations of a registered optical practitioner when examining and dispensing children's eye care
	1.2 Analyse the multi-disciplinary approach to children's eye care and the differing roles of the practitioners involved
2 Be able to apply regulations and professional standards to the delivery of children's eye care	2.1 Critically Evaluate the application of strategies to manage risk in practice operations and to ensure compliance with standards and regulations for children's eye care
	2.2 Plan a process to ensure compliance with standards and regulations for children's eye care
3 Be able to reflect on own professional practice as a registered optical practitioner for children's eye care	3.1 Apply appropriate reflective practice methods to review own professional practice
	3.2 Evaluate own professional practice as a registered optical practitioner against regulations and the professional framework relating to children's eye care practice
4. Be able to improve own professional practice, as a registered optical practitioner, in children's eye care	4.1 Analyse the role of continuous professional development in professional updating and improvement of practice
	4.2 Prioritise areas for continuous professional development and improvement
	4.3 Produce a personal action plan to improve and maintain professional practice in children's eye care
	4.4 Undertake planned development activities to update and improve professional practice in children's eye care
	4.5 Evaluate continuous professional development in children's eye care practice against identified priorities

Unit content

1 The regulations and professional framework relating to children's eye care practice

The legal, professional and ethical obligations of a registered optical practitioner when examining and dispensing children's eye care:

- the Association of British Dispensing Opticians (ABDO) advice and guidelines; duty of care; safeguarding; health and safety; data protection; consent; Federation of (Ophthalmic and Dispensing) Opticians (FODO) Policy on Chaperoning; appropriate recalls following a child's eye examination; the Royal College of Ophthalmologists guidelines; College of Optometrists guidelines; the British Orthoptic Society guidelines

The multi-disciplinary approach to children's eye care and the differing roles of the practitioners involved:

- Ophthalmologists; Orthoptists; Optometrists; nurses; technical/support staff; Ophthalmic Medical Practitioners; Dispensing Opticians

2 Apply regulations and professional standards to the delivery of children's eye care

The application of strategies to manage risk in practice operations and to ensure compliance with standards and regulations for children's eye care:

- risk assessment; harm reduction; implementation of policies and procedures; reporting; recording; supervision; monitoring; infection prevention and control
- *Reflective practice methods:* Schon D, Moon, J, Gibbs reflective cycle, Johns model of reflection, Atkins and Murphy's model of reflection, feedback from others, importance of objectivity and how to achieve this

3 Reflect on own professional practice as a registered optical practitioner for children's eye care

Identifying reflection in practice and reflection on practice and when to use these, how reflective practice improves performance

4 Improve own professional practice, as a registered optical practitioner, in children's eye care

The role of continuous professional development in professional updating and improvement of practice:

- competence, currency, validity, safety, duty of care, selection and use of appropriate methodologies, review of approaches/competence; current practice; safe practice; how reflective practice influences future performance, reflective writing e.g. storyboards, diaries, tape recordings, documenting achievements and mistakes, how you can influence others through learned theories applied to practice

Areas for continuous professional development and improvement:

- practice, competence, knowledge, skills

Personal action plan to improve and maintain professional practice in children's eye care:

- how to select formal and informal learning opportunities to meet identified goals, targets and objectives for personal development e.g. being mentored or coached, shadowing, secondment, accredited and non-accredited courses, how to identify and consider own preferred learning style and recognise this within the plan, how to evaluate own plan e.g. developing a timeframe, monitoring and review of plan, collecting evidence of achievement and performance, self-assessment against targets, validating plan with chosen mentor, colleague or manager

Development activities to update and improve professional practice in children's eye care:

- training, mentoring, shadowing, monitoring, research, peer support, networking, feedback, supervision, appraisal

Evaluate continuous professional development in children's eye care practice against identified priorities:

- review of agreed objectives, ongoing review of action plan, ongoing actions

Essential guidance for tutors

Delivery

This unit incorporates areas of knowledge with areas of competence, requiring elements of practice. Tutors should introduce the unit in its entirety so learners can see the links between knowledge and practice, ensuring they have a context for understanding that each learning outcome is an essential step towards carrying out reflection and continuous professional development.

The unit requires learners to reflect on their practice, using the outcomes of this activity to plan how they will develop their professional practice. To complete the cycle learners will then be required to carry out identified development activities and review their progress against agreed priorities.

In addressing learning outcome 1, learners could investigate the regulatory and professional frameworks underpinning professional practice in relation to children's eye care practice. Learners could carry out research into these aspects and use the resulting evidence to explore the frameworks and the roles of those involved in children's eye care practice.

Guidance for learning outcome 2 should focus on the importance of applying the frameworks identified learning outcome 1. Learners could use case study material or anonymised examples from the learner's work setting in order to familiarise themselves with the requirements of relevant regulations and professional standards in relation to risk management and compliance.

To meet learning outcome 3, learners need to focus on reflecting on their professional practice and evaluating it against the frameworks identified in learning outcome 1. Learners should review their own knowledge and practice against identified standards and benchmarks, and feedback from a range of sources; prioritising areas for development.

Learning outcome 4 requires learners to continue on from their reflections of learning outcome 3 and identify areas for development and change, recording this in their personal action plan. The next step involves starting the identified development activities. These could include external or internal training and development, shadowing or planned reading activities.

Learners are also asked to explore the importance of continuous professional development and practice in relation to their role as a registered optical practitioner.

Assessment

Evidence of individual learner understanding could include written assignments, a reflective journal and presentations. Learners will also have to demonstrate their understanding through practical demonstration in real-life situations, supported by their own reflective journal and witness observation sheets.

For learning outcome 1, assessment criterion 1.1, the learners will need to demonstrate an understanding of the legal, professional and ethical frameworks and requirements underpinning their role as a children's eye care practitioner. Reflective accounts could be used and learners should be encouraged to interact with the concepts as required by the assessment criteria and indicate how this knowledge and understanding impact on their current work practices or past experience, and then consider how they could potentially use this knowledge and understanding in their job role to inform their practice.

In assessment criterion 1.2, learners are also asked to explore the roles involved in children's eye care practice and the multi-disciplinary approach facilitating this service provision. They could produce an organisation chart to show how the multi-disciplinary team is structured and the relationships between the individual and teams.

For learning outcome 2, learners will need to demonstrate an understanding of the importance of risk management and how this can be carried out to good effect, in compliance with the legal, professional and ethical frameworks and requirements explored in learning outcome 1. Learners could carry out research and present their findings to a group, describing approaches to risk management and how compliance against standards is maintained.

To meet learning outcome 3, learners need to focus on actually carrying out reflective practice, ensuring they adhere to the required regulatory and professional frameworks underpinning professional practice, identified in learning outcome 1. The reflective practice outcomes should be recorded using an agreed format, ensuring the detail is sufficient to inform plans for continuous professional development.

For learning outcome 4, assessment criterion 4.1, learners will need to demonstrate an understanding of the purpose and meaning of professional development in direct relation to their role as a registered optical practitioner. Learners should relate their evidence to their own workplace and identify priority areas for development, using the evidence collated in learning outcome 3. Meeting with their manager at work or tutor they can discuss areas for development and how they think they can achieve this. Leading on from this learners are required to carry out the identified development activities, appraising their progression against the priorities identified in assessment criterion 4.2.

A reflective account, professional discussion or a report could be used to support the evidence for learning outcome 4 where the learners will need to explain their choice of learning methods and key aspects involved in the preparation of their plan.

Essential resources

There are no essential resources required for this unit.

Indicative resource materials

Books

Blyth, M – *Effective Safeguarding for Children and Young People: What Next After Munro?* (Policy Press, 2012) ISBN-13: 978-1447304906

Johns, C – *Becoming a Reflective Practitioner* (Wiley-Blackwell, 2013)
ISBN-13: 978-0470674260

Lindon, J – *Safeguarding and Child Protection: 0-8 Years, 4th Edition: Linking Theory and Practice* (Hodder Education, 2012) ISBN-13: 978-1444145489

Schon, D – *The Reflective Practitioner: How Professionals Think in Action*
(Basic Books, 1984) ISBN-13: 978-0465068784

Thompson N and Thompson S – *The Critically Reflective Practitioner*
(Palgrave Macmillan, 2008) ISBN-13: 978-0230573185

Journals

www.bjo.bmj.com/ The British Journal of Ophthalmology

Websites

www.abdo.org.uk The Association of Dispensing Opticians

www.aop.org.uk The Association of Optometrists

www.cipd.co.uk/cpd/default.aspx The Chartered Institute of Personnel and Development is the professional body for HR and people development.

www.college-optometrists.org The College of Optometrists

www.docet.info/ Directorate of Optometric Continuing Education and Training

www.fodo.com The Federation of (Ophthalmic and Dispensing) Opticians

www.orthoptics.org.uk The British Orthoptic Society

www.rcophth.ac.uk The Royal College of Ophthalmologists

Unit 3: Dispense Spectacles to Children

Level: 6

Credit value: 2

Guided learning hours: 5

Unit aim

This unit assesses the learner's understanding and application of the prescription, dispensing, fitting, advice and aftercare, appropriate for non-surgical correction of refractive error in children.

Unit introduction

Wearing spectacles can be difficult for some children and can take some time for them to get used to the key issues involve being aware of the children's lifestyle and preferences.

This unit explores why children might need spectacles and the areas which need to be considered when discussing options with them and their parents/carers.

Learners will assess cases requiring non-standard appliances, and make recommendations in relation to complex ophthalmic lenses.

Learning outcomes and assessment criteria

In order to pass this unit, the evidence that the learner presents for assessment needs to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

On completion of this unit a learner should:

Learning outcomes	Assessment criteria
1 Understand the conditions required for fitting and aftercare of spectacles for patients under the age of 16	1.1 Discuss options to meet a child's needs and requirements
	1.2 Analyse the strengths and limitations of different options for different patients
	1.3 Discuss the environmental and lifestyle considerations which impact on the selection of appropriate refractive correction for children
2 Be able to manage cases which require non-standard appliances	2.1 Assess cases that require non-standard optical appliances
	2.2 Recommend a selection of complex ophthalmic lenses
	2.3 Justify the reason for the advice given in different cases

Unit content

1 The conditions required for fitting and aftercare of spectacles for patients under the age of 16

Options to meet a child's needs and requirements:

- spectacles; contact lenses; index; choice; preference; weight; comfort; durability; strength; range of sight; prescription, lens type

The strengths and limitations of different options for different patients:

- age; ability; activities undertaken; support network; already prescribed; new prescription; non-prescription; cost; other refractive errors

Environmental and lifestyle considerations which impact on the selection of appropriate refractive correction for children:

- choice; period/regularity of use; ability; activity; customer input; preferences; testing

2 Manage cases which require non-standard appliances

Cases that require non-standard optical appliances:

- refractive errors; astigmatism; squint; presbyopia; myopia; hypermetropia
- ophthalmic lenses; bifocal; progressive; contact lens; reading glasses; trifocals; modified monovision; gradual; high index; lightweight; impact resistant; ease of use; polycarbonate; trivex; concave/convex lens; cylinder lens; multifocal contact lens

Essential guidance for tutors

Delivery

It is recommended that learners are given an overview of each learning outcome at the beginning of the unit. This will give them a context for understanding that each learning outcome is an essential in developing the knowledge and skills to give advice and manage the dispensing of spectacles to children.

For learning outcome 1, self-directed learning through desk research can be applied to enable learners to explore options for refractive correction for children. Learners might participate in a discussion on how conditions identified during ocular examination can be addressed through the options identified in their self-directed learning. Learners can then be encouraged to relate this to their own experiences, through private analytical written work.

For learning outcome 2, discussion and recognition of cases requiring non-standard optical appliances could take place. This could help learners to identify the need for non-standard optical appliances and what options are available for children. This will include contact lenses and complex lenses.

Delivery of learning outcomes 1 and 2, would benefit from a visiting optician, or optometrist to enhance learner's knowledge and understanding of specific options for children with refractive errors, enabling them to provide clear, current advice and guidance, for children in relation to spectacles and non-standard appliances.

Learners are required to make recommendations, in relation to the most suitable options, available to children with refractive errors.

Assessment

This unit can be assessed in the workplace or in conditions resembling the workplace.

Evidence of individual learner understanding could include written assignments, a reflective journal and presentations. Learners will also have to demonstrate their understanding through practical demonstration in real-life situations, supported by their own reflective journal and witness observation sheets.

To meet learning outcome 1 learners are required to identify when and how spectacles of different types should be dispensed to children. Learners need to explore and evaluate the options available in order to make recommendations for different cases. Assessment evidence can come from a range of sources, for example work-based evidence of dispensing spectacles and non-standard appliances and the results of the desk research carried out.

Learning outcome 2 requires evidence of case management and dispensing. This could be through reports, documentation and observations/witness statements. Learners should produce documentation to show they managed cases correctly, starting with an initial assessment of each case and explaining why they made the recommendations they did in relation to non-standard appliances. For example lifestyle considerations such as age and sporting interests.

Essential resources

There are no essential resources required for this unit.

Indicative resource materials**Books**

Carlson, N – *Clinical Procedures for Ocular Examination, Fourth Edition*
(McGraw-Hill Education, 2016) ISBN-13: 978-0071849203

Doshi, S – *Investigative Techniques and Ocular Examination*
(Butterworth-Heinemann/Optician, 2002) ISBN-13: 978-0750654043

Journals

www.bjo.bmj.com/ The British Journal of Ophthalmology

Websites

www.abdo.org.uk The Association of Dispensing Opticians

www.aop.org.uk The Association of Optometrists

www.cipd.co.uk/cpd/default.aspx The Chartered Institute of Personnel and Development is the professional body for HR and people development.

www.college-optometrists.org The College of Optometrists

www.docet.info/ Directorate of Optometric Continuing Education and Training

www.fodo.com The Federation of (Ophthalmic and Dispensing) Opticians

www.orthoptics.org.uk The British Orthoptic Society

www.rcophth.ac.uk The Royal College of Ophthalmologists

Unit 4: Dispense Contact Lenses to Children

Level: 6

Credit value: 1

Guided learning hours: 4

Unit aim

This unit assesses the learner's understanding and decision-making for contact lens prescribing and providing aftercare for individual patients under 16 years of age.

Unit introduction

This unit covers the dispensing contact lenses to children and the options available to suit different needs. Learners are asked to consider the options available for children and the aspects they need to take into account when prescribing and dispensing, for example the child's sporting interests and lifestyle.

Learners will explore the need for contact lenses and how this can best be addressed. Every child has different needs and these must be factored in when addressing refractive correction through the contact lens route, for example how active are they, do they swim and the support available to them.

Learning outcomes and assessment criteria

In order to pass this unit, the evidence that the learner presents for assessment needs to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

On completion of this unit a learner should:

Learning outcomes	Assessment criteria
1 Understand the conditions required for contact lenses fitting and aftercare for patients under 16	1.1 Discuss options to meet a child's needs and requirements
	1.2 Analyse the strengths and limitations of different options for different patients
	1.3 Discuss the environmental and lifestyle considerations which impact on the selection of appropriate refractive correction for children

Unit content

1 The conditions required for contact lenses fitting and aftercare for patients under 16

Discuss options to meet a child's needs and requirements:

- soft lenses; rigid gas permeable lenses; bifocal /multifocal lenses; hybrid lenses; piggy back fit; mini scleral lens; large diameter rigid lenses; corneal lenses

The strengths and limitations of different options for different patients:

- Strengths: comfort; safety; security; improvements in visual acuity; appearance; field of vision; not susceptible to fogging/dirt; aftercare; sports use; leisure activities; no/limited aftercare for some types; frequency of replacement; boosts confidence
- Limitations: correction of vision; loss; aftercare; ongoing costs; handling damage; follow up visits; cleaning; storage; remaining in situ; replacement; foreign body sensation; dry eyes; scratches to lenses; insertion; removal; re-centration; infection; irritation; allergy to environmental factors and/or contact lens solutions; impact on vision; injury; build-up of protein/bacteria

The environmental and lifestyle considerations which impact on the selection of appropriate refractive correction for children:

- prescription; results from examination; preference; age; level of visual acuity; safety; comfort; ability; mobility; dexterity; appearance; hobbies/sporting interests; carer/parental support; UV protection required

Essential guidance for tutors

Delivery

This unit focuses on the knowledge required in order to carry out the process of dispensing contact lenses to children. The delivery of the unit will initially focus on appropriate choices for children requiring contact lenses. Learners will be introduced to reasons why children have opted for or been advised to use contact lenses and learners will address the variety of possible factors which must be considered when selecting the appropriate type of contact lens. For example soft lenses have more options for replacement, which may be daily, two-weekly, monthly.

Learning outcome 1 assessment criteria could be delivered at the same time. Learners could research information relating to contact lens provision and suitable options for children under 16. There are many aspects to consider when dispensing contact lenses for children, for example durability, replacement intervals and cleaning, and learners are asked to evaluate the benefits and drawbacks of types of lenses for different children.

In addition learners are required to identify areas to be considered and discussed to ensure the most appropriate type of lens is dispensed. Learners need a realistic workplace activity to enable them to develop real skills in identifying and addressing potential issues with lens use and putting in place a course of action. For example the disposal intervals could be increased or reduced.

Learners are required to make recommendations in relation to the most suitable options available to children with refractive errors.

Assessment

Learning outcome 1, assessment criterion 1.1, requires learners to explore ways of meeting a child's needs and preferences in relation to dispensing contact lenses. Learners could use a client-generated brief with a vocational scenario as the starting point for generating their research. This could also be a work-based activity where learners utilise case study material to explore the range of needs to be met when dispensing contact lenses to children.

Using their findings from assessment criterion 1.1, learners should review the benefits and drawbacks of each option identified and present their conclusions in a report format. Soft lenses might not be appropriate as they are difficult for the child to cope with and not suited to their prescription, for example.

Assessment criterion 1.3 requires evidence that learners understand all of the very important areas to be addressed to enable children to use contact lenses to good effect. For example the child's ability to maintain hygiene, the requirements for UV protection and their level of understanding in relation to contact lenses.

For assessment criterion 1.3 learners need to justify an appropriate course of action to take to ensure all of the necessary areas of a child's lifestyle and environmental requirements have been fully and effectively addressed prior to dispensing contact lenses.

Delivery of learning outcome 1 would also benefit from a visiting optician or optometrist to enhance learners knowledge and understanding of specific options used with children when dispensing contact lenses.

Essential resources

There are no essential resources required for this unit.

Indicative resource materials

Books

Carlson, N – *Clinical Procedures for Ocular Examination, Fourth Edition*
(McGraw-Hill Education, 2016) ISBN-13: 978-0071849203

Doshi, S – *Investigative Techniques and Ocular Examination*
(Butterworth-Heinemann/Optician, 2002) ISBN-13: 978-0750654043

Journals

www.blo.bmj.com The British Journal of Ophthalmology

Websites

www.abdo.org.uk The Association of Dispensing Opticians

www.aop.org.uk The Association of Optometrists

www.bcla.org.uk/ The British Contact Lens Association

www.cipd.co.uk/cpd/default.aspx The Chartered Institute of Personnel and Development is the professional body for HR and people development.

www.college-optometrists.org The College of Optometrists

www.docet.info/ Directorate of Optometric Continuing Education and Training

www.fodo.com The Federation of (Ophthalmic and Dispensing) Opticians

www.orthoptics.org.uk The British Orthoptic Society

www.rcophth.ac.uk The Royal College of Ophthalmologists

Unit 5: Ocular Disease and Abnormalities in Childhood

Level:	6
Credit value:	3
Guided learning hours:	12

Unit aim

This unit assesses the learner's understanding of ocular problems, their management, and application to decision-making scenarios for the care of patients under the age of 16.

Unit introduction

Ocular disease and abnormalities must be managed efficiently and effectively, utilising the most appropriate treatments and approaches for each case. The identification of abnormalities can be a concerning time for children and their parents or carers so the advice and guidance given must be clear and current. Learners will be required to explore the management of such cases, facilitating ongoing treatment and referrals.

Learners will make decisions in relation to referrals and follow up treatment, liaising with and accessing guidance with other services as required.

Learning outcomes and assessment criteria

In order to pass this unit, the evidence that the learner presents for assessment needs to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

On completion of this unit a learner should

Learning outcomes	Assessment criteria
1 Be able to identify and manage ocular disease and binocular vision abnormalities which may present in children under the age of 16	1.1 Explain the risk factors for common ocular childhood conditions
	1.2 Identify the ocular problems present in different children under the age of 16, with an explanation of the indicative signs and symptoms
	1.3 Explain the management of ocular problems identified in children under the age of 16
	1.4 Explain strategies that may be used to maximise concordance when giving advice to patients under the age of 16
2 Be able to make follow-up and referral decisions when necessary	2.1 Critically review case management records
	2.2 Use professional guidance to inform clinical decision-making
	2.3 Make referrals to other services where appropriate
	2.4 Complete referral documentation

Unit content

1 Identify and manage ocular disease and binocular vision abnormalities which may present in children under the age of 16

The risk factors for common ocular childhood conditions:

- progression; age, treatment; diagnosis; individual risk factors of specific pathology; monitoring; well-being; environment; hereditary; metabolic; traumatic; secondary; maternal infection; congenital; iatrogenic; syndromic; neurological; lifestyle; contact lens use/aftercare

The ocular problems present in different children under the age of 16:

- temporal arteritis; blepharitis; episcleritis; tearing; corneal diseases; amblyopia; asthenopia; blurred vision; intermittent diplopia; tropia; glaucoma; buphthalmos (infantile glaucoma); acute anterior uveitis; retinal disorders; dacryocystitis strabismus; diabetic retinal disease; ocular allergy; preseptal/orbital cellulitis; convergence insufficiency; childhood retinal detachments; idiopathic congenital cataract; congenital optic disc hypoplasia; adenoviral conjunctivitis; bacterial conjunctivitis; atopic keratoconjunctivitis; vernal keratoconjunctivitis; microbial keratitis; epithelial herpes simplex keratitis; stromal herpes simplex keratitis; ophthalmia neonatorum; decompensating heterophoria; retinoblastoma; toxoplasmosis; keratoconus; retinitis pigmentosa; myelinated nerve fibres; optic nerve glioma; orbital dermoid cysts; optic nerve drusen; retinopathy of prematurity; Duane's syndrome; Brown's syndrome; Marfan's Syndrome; nystagmus; coloboma; aniridia.

The management of ocular problems identified in children under the age of 16:

- spectacles; contact lenses; referral; testing; diagnosis; prescription; consultant; medication; occlusion therapy; review; amendment; after care; support needs; re-examination; surgery; monitoring

Strategies that may be used to maximise concordance when giving advice to patients under the age of 16:

- treatment options available; further testing; referral; consultation; medication; review of medication; prescription; abnormalities; patient data; test results; clarity; roles and responsibilities; written confirmation; aftercare

2 Make follow-up and referral decisions when necessary

Referrals to other services where appropriate:

- other members of the practice team-patient data; test results; clarity; roles and responsibilities; ophthalmologists; orthoptists; optometrists; nurses; technical/support staff; ophthalmic medical practitioners; dispensing opticians; paediatrician; hospital eye service

Referral documentation:

- patient details; general health; medication; family history; results of tests; clinical details; dispensing details; people responsible for tests/assessments/recording; prescriptions; advice given

Essential guidance for tutors

Delivery

This unit will give learners the knowledge and understanding required to identify and manage ocular diseases and abnormalities in children.

Learning outcome 1 enables learners to explore the ocular diseases and abnormalities they may encounter and learning outcome 2 addresses the procedure of referring cases on to other services, as appropriate.

For learning outcome 1 learners need to know the risk factors and indicators of ocular abnormalities to enable them to put appropriate care and support in place.

Learning outcome 1 could be covered through learners using examples of identified abnormalities from their work practice or through their own research, with results of research fed back through a range of assessment activities. Learners can then use this research to explore ways of managing each case and how concordance can be applied to ensure the child's safety and wellbeing.

Learning outcome 2 requires learners to manage the next steps of case management through follow up treatment or referral. Learners have to demonstrate the decision making process which can lead to further action or referral. For example learners may need additional guidance from the optometrist prior to making a referral to the hospital eye service. Patient details also need to be checked and verified to ensure concordance and evidence of this could be provided through work based or realistic scenarios, supported by learner research.

Delivery of learning outcomes 1 and 2 would also benefit from a visiting optician or optometrist to enhance learner's knowledge and understanding of specific diseases or abnormalities and how they can best be managed.

Assessment

Assessment methods should give learners suitable opportunities to demonstrate, explain the identification and management of ocular disease and abnormalities in patients under 16 years of age. Evidence of individual learner understanding could include written assignments, a reflective journal and presentations. Learners will also have to demonstrate their understanding through practical demonstration in real-life situations, supported by their own reflective journal and witness observation sheets.

The initial identification and management of diseases and abnormalities is the focus of learning outcome 1. Assessment criterion 1.1 addresses common ocular conditions for children and the associated risk factors. Learners could carry out research, perhaps starting with their own practice, into the statistics for diseases and abnormalities for children.

Learners could use case materials from their work practice to illustrate how these diseases and abnormalities are identified, for example through examination or test results. This could also be evidenced through documentation and witness statements from learners' managers.

From the identification of abnormalities learners continue on to the next step in managing the issues identified. This could involve further treatment, the prescribing and dispensing of spectacles, additional appointments or surgery. Learners must also explore methods of facilitating concordance through the advice and guidance they provide. For example through carefully reviewing each child's medical history and checking prescribed medication and contraindications. This will ensure clear, accurate and concise information and guidance can be provided.

For learning outcome 2 learners have to demonstrate how they manage cases; making clinical decisions in relation to next steps for patients. This should include referring to other services and practitioners, where appropriate. For example, after consultation, it may be that next steps for a child are to refer them to the hospital eye service or paediatrician.

Completed referral forms should be presented as evidence, alongside the reports and results which informed these decisions. Learners should also provide evidence of the process of informed decision making. What evidence made them arrive at the decision they did? Who did they consult with and seek advice from?

Essential resources

There are no essential resources required for this unit.

Indicative resource materials

Books

Brodsky, M-*Pediatric Neuro-Ophthalmology*, (Springer, 2010)
ISBN-13: 978-0387690667

Carlson, N-*Clinical Procedures for Ocular Examination, Fourth Edition*
(McGraw-Hill Education, 2016) ISBN-13: 978-0071849203

Doshi, S-*Investigative Techniques and Ocular Examination*
(Butterworth-Heinemann/Optician, 2002) ISBN-13: 978-0750654043

Journals

www.bjo.bmj.com The British Journal of Ophthalmology

Websites

www.abdo.org.uk The Association of Dispensing Opticians

www.aop.org.uk The Association of Optometrists

www.cipd.co.uk/cpd/default.aspx The Chartered Institute of Personnel and Development is the professional body for HR and people development.

www.college-optometrists.org The College of Optometrists

www.docet.info/ Directorate of Optometric Continuing Education and Training

www.fodo.com The Federation of (Ophthalmic and Dispensing) Opticians

www.orthoptics.org.uk The British Orthoptic Society

www.rcophth.ac.uk The Royal College of Ophthalmologists

Unit 6: Understand the Principles of Eye Examination and Management of Ocular Abnormalities

QCF Level : 5
Credit value: 3
Guided learning hours: 12

Unit aim

This unit assesses the learner's understanding of the eye examination, investigation and management of ocular problems which may present in patients under 16.

Unit introduction

Eye examinations are carried out regularly and a key part of these is the identification of ocular abnormalities. Learners are required to know about risk factors for these abnormalities and how to manage and facilitate the next steps, which could include referral.

Referral decisions are explored in detail and learners are required to research the scope and nature of referrals and the documentation necessary when making referrals.

Learning outcomes and assessment criteria

In order to pass this unit, the evidence that the learner presents for assessment needs to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

On completion of this unit a learner should

Learning outcomes	Assessment criteria
1 Understand the principles of assessing ocular health and refractive status in children under 16 years of age	1.1 Explain visual development norms in children
	1.2 Explore the use of a range of tests used during the examination of children's vision and ocular health
2. Understand common ocular diseases and binocular vision abnormalities which may present in children under 16 years of age	2.1 Explain the risk factors for common ocular childhood conditions in different children under 16 years of age
	2.2 Explain the signs and symptoms of different ocular diseases and abnormalities which present in childhood
	2.3 Examine the principles of management of ocular abnormalities
	2.4 Explain how to support concordance in a dispensing role
3 Understand referral decisions within the scope of practice, of a dispensing optician	3.1 Compare signs and symptoms of ocular diseases and abnormalities for urgency of investigation that informs referral decision making
	3.2 Explain the reasons for referral of children with eye care problems to other services
	3.3 Explain the nature and purpose of documentation to support referrals

Unit content

1 The principles of assessing ocular health and refractive status in children under 16 years of age

Visual development norms in children:

- 0-12 months – turns to diffuse light; shows steady fixation; irregular horizontal pursuit; eyes widen and other movements are stopped when shown an interesting visual stimulus; blinks to threatening stimuli; starting to mimic facial expressions; examines objects in more detail; can discriminate between simple geometric forms; can scribble with a crayon; visually interested in pictures. 2-3 years – optical skills well co-ordinated; normal acuity. By 3 years – retinal tissue maturity is almost attained; slower ongoing development for another 4 or 5 years until complete.

Tests used during the examination of children's vision and ocular health:

- *Birth-12 months:* Hirschberg test; cover test; forced choice preferential looking cards; objection to occlusion; hundreds and thousands; visually directed reaching; visual evoked response; stycar balls; catford drum; Frisby screening test; Lang test; 10/25 Δ prism test; ocular motor tests: optokinetic nystagmus: – tested by barany drum, OKN or OKN scarf, vestibular movement: – dolls head testing, swinging baby test.
- *12 months to 2.5 years:* Cardiff acuity cards; graphical object; hundreds and thousands; Hirschberg Test; illiterate E test; Kay's picture crowded/uncrowded; 20 Δ base-out test; Titmus test; Mohindra technique; ocular motor tests: saccadic movement, smooth pursuit movement: motility test, vestibular movement: caloric testing.
- *2.5 years upwards:* Lea symbols; Kay pictures crowded/uncrowded; Sheridan-Gardiner test; Sonksten-Silver test; LogMAR acuity cards; Snellen Letters; TNO test; charts; Keeler LogMAR Crowded test; Cycloplegic refraction; direct/indirect ophthalmoscopy; Ishihara/city university colour vision tests; ocular motor tests: saccadic movement, smooth pursuit movement: motility test, vestibular movement: caloric testing.

2 Understand common ocular diseases and binocular vision abnormalities which may present in children under 16 years of age

The risk factors for common ocular childhood conditions in different children under 16 years of age:

- progression; age, treatment; diagnosis; individual risk factors of specific pathology; monitoring; well-being; environment; hereditary; metabolic; traumatic; secondary; maternal infection; iatrogenic; syndromic; neurological; lifestyle; contact lens use/aftercare

Different ocular diseases and abnormalities which present in childhood:

- temporal arteritis; blepharitis; episcleritis; congenital cataracts; tearing; corneal diseases; amblyopia; asthenopia; blurred vision; intermittent diplopia; tropia; glaucoma; buphthalmos (infantile glaucoma); acute anterior uveitis; retinal disorders; dacryocystitis; strabismus; diabetic retinal disease; ocular allergy; preseptal/orbital cellulitis; convergence insufficiency; childhood retinal detachments; idiopathic congenital cataract; congenital optic disc hypoplasia; adenoviral conjunctivitis; bacterial conjunctivitis; atopic keratoconjunctivitis; vernal keratoconjunctivitis; microbial keratitis; epithelial herpes simplex keratitis; stromal herpes simplex keratitis; ophthalmia neonatorum; convergence insufficiency; decompensating heterophoria; retinoblastoma; toxoplasmosis; keratoconus; retinitis pigmentosa; myelinated nerve fibres; optic nerve glioma; orbital dermoid cysts; optic nerve drusen; retinopathy of prematurity; Duane's syndrome; Brown's syndrome; Marfan's Syndrome; nystagmus; coloboma; aniridia.

The principles of management of ocular abnormalities:

- risk; priority; urgency; occlusion therapy; spectacles; contact lenses; referral; testing; diagnosis; prescription; consultant; medication; review; amendment; after care; support needs; re-examination; surgery; monitoring

How to support concordance in a dispensing role:

- treatment options available; further testing; referral; consultation; medication; review of medication; prescription; abnormalities; patient data; test results; clarity; roles and responsibilities; written confirmation; aftercare

3 Referral decisions within the scope of practice, of a dispensing optician

Signs and symptoms of ocular diseases and abnormalities for urgency of investigation that informs referral decision making:

- spots/flushes/floaters; tearing; retinal detachment; sudden pain; pathology presenting; contraindications; bleeding; inflammation; redness; blurring; discharge; head ache; itching; puffiness; swelling of eyelids/ONH; distortion; injury; bleeding; changes to vision

The reasons for referral of children with eyecare problems to other services:

- age; urgency; risk; facilities; treatment; resources; access; availability; specialist services

The nature and purpose of documentation to support referrals:

- dissemination of information; patient details; general health; medication; family history; results of tests; clinical details; dispensing details; people responsible for tests/assessments/recording; prescriptions; advice given

Essential guidance for tutors

Delivery

This unit provides learners with the knowledge and understanding required to identify and manage ocular abnormalities in children. Delivery of learning outcomes 1, 2 and 3 could be achieved using simulated or real-life case studies or real-life situations.

It is recommended that learners are given an overview of each learning outcome at the beginning of the unit. This will give them a context for understanding that each learning outcome is an essential step towards carrying out an ocular examination and identifying problems and abnormalities.

Learning outcome 1 addresses the assessment of ocular health and the norms of development expected in children and the tests carried out to check on these norms. Self-directed learning through desk research can be applied to enable learners to address assessment criteria 1.1 and 1.2.

In addressing learning outcome 2 learners could work on a workplace generated brief, using examples gained from practice. Learners are asked to explore the risk factors for conditions and indicators of abnormalities, identifying how to manage such cases and support concordance. Learners can draw upon real examples from work practice to help.

Learning outcome 3 requires learners to focus on the referral process and the aspects prompting practitioners to make referrals. Real life scenarios could facilitate this. Learners are asked to justify their referral decision, identifying indicators triggering this process, explaining how this needs to be recorded.

It is recommended that centres use a wide range of delivery methods to achieve all the learning outcomes in the unit. These could include lectures, seminars, workshops, presentations, project work, research using the internet and/or library resources, and the use of work based experience. Centres are encouraged to organise talks from key parties and organisations.

Delivery of learning outcomes 1,2 and 3 would also benefit from a visiting optician or optometrist to enhance learner's knowledge and understanding of specific diseases or abnormalities and how they can best be managed, using the referral system.

Assessment

Evidence for assessment criterion 1.1 could be in the form of a document with bullet points of the key visual developmental norms of children. Learners may present their information in the form of a presentation or blog that allows interaction with others. A small group discussion would provide an opportunity for each learner to demonstrate their understanding.

Assessment criterion 1.2 requires learners to explain how these norms are tested during children's visual and ocular health examinations. Learners could report on this using a report, presentation or blog.

Learning outcome 2 explores ocular diseases and binocular vision abnormalities and learners could present this in the form of a written or verbal report. Leading on from this, assessment criterion 2.3 addresses the management of any identified ocular abnormalities. Learners could produce a report or presentation on the issues identified and how they are effectively managed, to include facilitating concordance in their dispensing role.

For learning outcome 3 learners have to explore the referral system and how indicators of ocular disease and abnormality could drive the referral process. Learners could use a report, a presentation to provide evidence for assessment. This should include referring to other services and practitioners, where appropriate. For example, after consultation, it may be that next steps for a child are to refer them to the hospital eye service or paediatrician.

Completed referral forms could be used as exemplars, alongside the reports and results which informed these decisions. Learners should also provide evidence of the process of informed decision making. What evidence made them arrive at the decision they did? Who did they consult with and seek advice from?

Essential resources

There are no essential resources required for this unit.

Indicative resource materials

Books

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www.fodo.com The Federation of (Ophthalmic and Dispensing) Opticians

www.orthoptics.org.uk The British Orthoptic Society

www.rcophth.ac.uk The Royal College of Ophthalmologists

Further information and useful publications

To get in touch with us visit our 'Contact us' pages:

- Edexcel: qualifications.pearson.com
- BTEC: qualifications.pearson.com
- Pearson Work Based Learning and Colleges: qualifications.pearson.com
- books, software and online resources for UK schools and colleges: qualifications.pearson.com

Key publications:

- *Adjustments for candidates with disabilities and learning difficulties – Access and Arrangements and Reasonable Adjustments, General and Vocational qualifications* (Joint Council for Qualifications (JCQ))
- *Equality Policy* (Pearson)
- *Recognition of Prior Learning Policy and Process* (Pearson)
- *UK Information Manual* (Pearson)
- *UK Quality Vocational Assurance Handbook* (Pearson)

All of these publications are available on our website.

Publications on the quality assurance of BTEC qualifications are available on our website. qualifications.pearson.com

Our publications catalogue lists all the material available to support our qualifications. To access the catalogue and order publications, please go to qualifications.pearson.com.

Additional resources

If you need further learning and teaching materials to support planning and delivery for your learners, there is a wide range of BTEC resources available.

Any publisher can seek endorsement for their resources, and, if they are successful, we will list their BTEC resources on our website. qualifications.pearson.com

How to obtain National Occupational Standards

Please contact:

Skills for Health
Lynton House
Tavistock Square
London
WC1H 9LT

Telephone: 0207 388 8800

Email: Office@skillsforhealth.org.uk

www.skillsforhealth.org.uk

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- developing effective assignments
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- developing learner-centred learning and teaching approaches
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- **Ask the Expert:** submit your question online to our Ask the Expert online service qualifications.pearson.com and we will make sure your query is handled by a subject specialist.

Annexe A

Eye Care Development Pathways

OPHTHALMIC DISPENSING DEVELOPMENT PATHWAY			
Level	Awarding body	Qualification achieved	Learner's job role
2	Pearson and SMC	Optical retailing, optical practice support	Optical assistant
3	Pearson and SMC	Diploma/apprenticeship/certificate in optical retailing, optical practice support, optical customer service, optical dispensing assistant, optometric clinical assistant	Optical assistant
4	Pearson	Certificate in optical dispensing	Senior optical assistant
5/6	Association of British Dispensing Optici Opticians (ABDO) in association with various providers and Anglia Ruskin iversity	There are only two registrable qualifications: Fellowship Diploma FBDO (ABDO) and Foundation Degree in Ophthalmic Dispensing Awards that give a university degree in addition to the theory for the FBDO include: BSc Optical Management (Anglia Ruskin), FdSc (Level 6) in Ophthalmic Dispensing (Canterbury Christchurch), BSc Ophthalmic Dispensing (Glasgow Caledonian)	Trainee DO who gains one of these qualifications is eligible for registration as a dispensing optician with the General Optical Council
5/6	GOC-accredited continuing education and training in association with various providers	CET points awarded for training in the core competencies for each register set by the GOC as required for ongoing registration	Registered DO and Registered CLO

Level	Awarding body	Qualification achieved	Learner's job role
6	Pearson	Proposed Level 6 Award in Children's Eye Care	Registered DO and Registered CLO provides in-depth knowledge and management skills in children's eye care
6	Association of British Dispensing Opticians (ABDO) in association with various providers	Fellowship Diploma in contact lens practice (FBDO CL)	Registered DO who gains this qualification is eligible for registration in the specialist register for contact lens practice with the General Optical Council (GOC)
6	Bradford University	Conversion to optometrist	Registered DO and Registered CLO gaining this qualification is eligible to enter the optometrist (one year) work-based scheme for registration

Annexe B

Wider curriculum mapping

BTEC Level 6 qualifications give learners opportunities to develop an understanding of spiritual, moral, ethical, social and cultural issues as well as an awareness of citizenship, environmental issues, European developments, health and safety considerations and equal opportunities issues.

Spiritual, moral, ethical, social and cultural issues

Throughout the delivery of these qualifications learners will have the opportunity to actively participate in different kinds of decision-making. They will have to consider fair and unfair situations and explore how to resolve conflict. Working in small groups they will learn how to respect and value others' beliefs, backgrounds and traditions.

Citizenship

Learners undertaking these qualifications will have the opportunity to develop their understanding of citizenship issues.

Environmental issues

Developing a responsible attitude towards the care of the environment is an integral part of this qualification. Learners are encouraged to minimise waste and discuss controversial issues.

European developments

Much of the content of the qualification applies throughout Europe, even though the delivery is in a UK context.

Health and safety considerations

Health and safety is embedded within many of the units in this qualification. Learners will consider their own health and safety at work, how to identify risks and hazards and how to minimise those risks.

Equal opportunities issues

There will be opportunities throughout this qualification to explore different kinds of rights and how these affect both individuals and communities, for example learners will consider their rights at work, the rights of employers and how these rights affect the work community.

Annexe C

BTEC Specialist and Professional qualifications

BTEC qualifications on the NQF	Level	BTEC Specialist and Professional qualifications	BTEC qualification suites on the QCF
BTEC Level 7 Advanced Professional qualifications BTEC Advanced Professional Award, Certificate and Diploma	7	BTEC Level 7 Professional qualifications BTEC Level 7 Award, Certificate, Extended Certificate and Diploma	
BTEC Level 6 Professional qualifications BTEC Professional Award, Certificate and Diploma	6	BTEC Level 6 Professional qualifications BTEC Level 6 Award, Certificate, Extended Certificate and Diploma	
BTEC Level 5 Professional qualifications BTEC Professional Award, Certificate and Diploma	5	BTEC Level 5 Professional qualifications BTEC Level 5 Award, Certificate, Extended Certificate and Diploma	BTEC Level 5 Higher Nationals BTEC Level 5 HND Diploma
BTEC Level 4 Professional qualifications BTEC Professional Award, Certificate and Diploma	4	BTEC Level 4 Professional qualifications BTEC Level 4 Award, Certificate, Extended Certificate and Diploma	BTEC Level 4 Higher Nationals BTEC Level 4 HNC Diploma
BTEC Level 3 qualifications BTEC Award, Certificate, Extended Certificate and Diploma	3	BTEC Level 3 Specialist qualifications BTEC Level 3 Award, Certificate, Extended Certificate and Diploma	BTEC Level 3 Nationals BTEC Level 3 Certificate, Subsidiary Diploma, Diploma and Extended Diploma

BTEC qualifications on the NQF	Level	BTEC Specialist and Professional qualifications	BTEC qualification suites on the QCF
BTEC Level 2 qualifications BTEC Award, Certificate, Extended Certificate and Diploma	2	BTEC Level 2 Specialist qualifications BTEC Level 2 Award, Certificate, Extended Certificate and Diploma	BTEC Level 2 Firsts BTEC Level 2 Certificate, Extended Certificate and Diploma
BTEC Level 1 qualifications BTEC Award, Certificate, Extended Certificate and Diploma	1	BTEC Level 1 Specialist qualifications BTEC Level 1 Award, Certificate, Extended Certificate and Diploma	BTEC Level 1 qualifications BTEC Level 1 Award, Certificate and Diploma (Vocational component of Foundation Learning)
	E	BTEC Entry Level Specialist qualifications BTEC Entry Level Award, Certificate, Extended Certificate and Diploma	BTEC Entry Level qualifications (E3) BTEC Entry Level 3 Award, Certificate and Diploma (Vocational component of Foundation Learning)

NQF = National Qualifications Framework

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