

# Pearson BTEC Level 3 Certificate for Optometric Clinical Assistant

# Pearson BTEC Level 3 Certificate for Ophthalmic Dispensing Assistant

## Specification

BTEC Specialist qualification

First registration April 2021

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ISBN 978 1 446 96878 9

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# Contents

<b>1</b>	<b>Introducing the qualifications</b>	<b>1</b>
	What are BTEC Specialist qualifications?	1
	Qualifications purpose	1
	Industry support and recognition	1
	Funding	2
	Relationship with previous qualifications	2
<b>2</b>	<b>Qualification summary and key information</b>	<b>3</b>
<b>3</b>	<b>Qualification structures</b>	<b>5</b>
	Pearson BTEC Level 3 Certificate for Optometric Clinical Assistant	5
	Pearson BTEC Level 3 Certificate for Ophthalmic Dispensing Assistant	6
<b>4</b>	<b>Assessment requirements</b>	<b>7</b>
	Language of assessment	7
	Internal assessment	8
	Assessment of knowledge units	8
	Assessment of skills units	9
<b>5</b>	<b>Centre recognition and approval</b>	<b>10</b>
	Approvals agreement	10
	Centre resource requirements	10
<b>6</b>	<b>Access to qualifications</b>	<b>11</b>
	Reasonable adjustments and special consideration	11
<b>7</b>	<b>Recognising prior learning and achievement</b>	<b>12</b>
<b>8</b>	<b>Quality assurance of centres</b>	<b>13</b>
<b>9</b>	<b>Units</b>	<b>14</b>
	Unit 1: Anatomy, Physiology and Pathology of the Visual System	15
	Unit 2: Use of Spectacles	24
	Unit 3: The Sight Test and Low Vision Service	32
	Unit 4: Contact Lens Service	41

Unit 5: Supporting the Provision of Spectacle Frames	49
Unit 6: Principles of Light Applied to Optics	55
Unit 7: Roles and Responsibilities in Optical Practice	59
Unit 8: Procedures in Contact Lens Practice	71
Unit 9: Communication in Optical Customer Service	77
Unit 10: Procedures in Optical Dispensing	84
<b>10 Suggested teaching resources</b>	<b>92</b>
<b>11 Appeals</b>	<b>93</b>
<b>12 Malpractice</b>	<b>94</b>
Dealing with malpractice in assessment	94
<b>13 Further information and publications</b>	<b>97</b>
Publisher information	97
<b>14 Glossary</b>	<b>98</b>
Part A – General terminology used in specification	98
Part B – Terms used in knowledge and understanding criteria	99
<b>Annexe A</b>	<b>100</b>
Unit mapping overview	100
<b>Annexe B</b>	<b>102</b>
Assessment strategy	102

# 1 Introducing the qualifications

## What are BTEC Specialist qualifications?

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BTEC Specialist qualifications are work-related qualifications available from Entry to Level 3. The qualifications put learning into the context of the world of work, giving students the opportunity to apply their research, skills and knowledge in relevant and realistic work contexts. This applied, practical approach means learners build the knowledge, understanding and skills they need for career progression or further study.

## Qualifications purpose

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The Pearson BTEC Level 3 Certificate for Optometric Clinical Assistant is for learners who are working in, or who are intending to work in optometric clinical services.

The Pearson BTEC Level 3 Certificate for Optometric Clinical Assistant is suitable for learners to:

- develop knowledge and skills related to optometry
- achieve a qualification to prepare for employment
- achieve a nationally recognised Level 3 qualification
- develop own personal growth and engagement in learning.

The Pearson BTEC Level 3 Certificate for Ophthalmic Dispensing Assistant is for learners who are working, or who are intending to work in the optical dispensing service.

The Pearson BTEC Level 3 Certificate for Ophthalmic Dispensing Assistant is suitable for learners to:

- develop knowledge and skills related to ophthalmic dispensing
- achieve a qualification to prepare for employment
- achieve a nationally recognised Level 3 qualification
- develop own personal growth and engagement in learning.

## Industry support and recognition

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These qualifications are supported by, and were developed in collaboration with, Distance Learning – Specsavers.

## Funding

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Qualifications eligible and funded for post-16-year-olds can be found on the funding Hub.

## Relationship with previous qualifications

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These qualifications are a direct replacement for the Pearson BTEC Level 3 Certificate for Optometric Clinical Assistant (601/1839/8) and Pearson BTEC Level 3 Certificate for Ophthalmic Dispensing Assistant (601/1796/5), which have expired. Information about how the new and old units relate to each other is given in *Annexe B*.

## 2 Qualification summary and key information

Qualification title	Pearson BTEC Level 3 Certificate for Optometric Clinical Assistant
Qualification Number (QN)	603/7318/0
Regulation start date	25/03/2021
Operational start date	01/04/2021
Approved age ranges	16–18 19+
Total qualification time (TQT)	339 hours.
Guided learning hours (GLH)	163 hours.
Assessment	Internal assessment.
Grading information	The qualification and units are graded Pass/Fail.
Entry requirements	No prior knowledge, understanding, skills or qualifications are required before learners register for this qualification.
Progression	Learners who achieve the Pearson BTEC Level 3 Certificate for Optometric Clinical Assistant can progress to Pearson BTEC Level 4 Certificate in Optical Dispensing.

Qualification title	Pearson BTEC Level 3 Certificate for Ophthalmic Dispensing Assistant
Qualification Number (QN)	603/7319/2
Regulation start date	25/03/2021
Operational start date	01/04/2021
Approved age ranges	16–18 19+
Total qualification time (TQT)	320 hours.
Guided learning hours (GLH)	154 hours.
Assessment	Internal assessment.
Grading information	The qualification and units are graded Pass/Fail.
Entry requirements	No prior knowledge, understanding, skills or qualifications are required before learners register for this qualification.
Progression	Learners who achieve the Pearson BTEC Level 3 Certificate for Optometric Clinical Assistant can progress to Pearson BTEC Level 4 Certificate in Optical Dispensing.



### 3 Qualification structures

#### Pearson BTEC Level 3 Certificate for Optometric Clinical Assistant

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The requirements outlined in the table below must be met for Pearson to award the qualification.

Minimum number of units that must be achieved	8
Minimum number of units that must be achieved at Level 3 or above	7

Unit number	Mandatory units	Level	Guided learning hours
1	Anatomy, Physiology and Pathology of the Visual System	3	19
2	Use of Spectacles	3	24
3	The Sight Test and Low Vision Service	3	20
4	Contact Lens Service	3	24
5	Supporting the Provision of Spectacle Frames	3	18
6	Principles of Light Applied to Optics	2	9
7	Roles and Responsibilities in Optical Practice	3	33
8	Procedures in Contact Lens Practice	3	16

## Pearson BTEC Level 3 Certificate for Ophthalmic Dispensing Assistant

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The requirements outlined in the table below must be met for Pearson to award the qualification.

Minimum number of units that must be achieved	8
Minimum number of units that must be achieved at Level 3 or above	7

Unit number	Mandatory units	Level	Guided learning hours
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2	Use of Spectacles	3	24
3	The Sight Test and Low Vision Service	3	20
4	Contact Lens Service	3	24
5	Supporting the Provision of Spectacle Frames	3	18
6	Principles of Light Applied to Optics	2	9
9	Communication in Optical Customer Service	3	18
10	Procedures in Optical Dispensing	3	22

## 4 Assessment requirements

The table below gives a summary of the assessment methods used in the qualifications.

Units	Assessment method
All units	Internal assessment (centre-devised assessments).

### Language of assessment

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Learners must use English only during the assessment of this qualification.

A learner taking the qualification(s) may be assessed in British Sign Language where it is permitted for the purpose of reasonable adjustment.

Further information on the use of language in qualifications is available in our *Use of languages in qualifications policy*, available on our website, [qualifications.pearson.com](https://qualifications.pearson.com).

## Internal assessment

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Internally assessed units are subject to standards verification. This means that centres set and mark the final summative assessment for each unit, using the examples and support that Pearson provides.

To pass each internally assessed unit, learners must:

- achieve all the specified learning outcomes
- satisfy all the assessment criteria by providing sufficient and valid evidence for each criterion
- prove that the evidence is their own.

Centres must ensure:

- assessment is carried out by assessors with relevant expertise in both the occupational area and assessment. For the occupational area, this can be evidenced by a relevant qualification or current (within three years) occupational experience that is at an equivalent level or higher than this qualification. Assessment expertise can be evidenced by qualification in teaching or assessing and/or internal quality assurance or current (within three years) experience of assessing or internal verification
- internal verification systems are in place to ensure the quality and authenticity of learners' work, as well as the accuracy and consistency of assessment.

Learners who do not successfully pass an assignment, are allowed to resubmit evidence for the assignment or to retake another assignment.

The assessments must also incorporate the Skills for Health Assessment Principles (November 2017) in *Annexe B*.

## Assessment of knowledge units

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To pass each knowledge unit, learners must independently complete assignment(s) that show that the learning outcomes and assessment criteria for the unit have been met.

Format of assignments for knowledge units:

- all learning outcomes and assessment criteria must be covered
- assignments can include both practical and written tasks
- assignments are independently completed as a distinct activity after the required teaching has taken place
- the brief is issued to learners with a defined start date, a completion date and clear requirements for the evidence they are required to produce
- all or parts of units can be combined into a single assignment. Learning outcomes must not be split into more than one assignment.

Each unit contains suggested tasks that centres can use to form the basis of assignments for learners to complete. It is expected that centres will contextualise these and ensure that the final version is checked by their internal verifier.

## Assessment of skills units

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To pass each skills unit, learners must:

- gather evidence from their course in a portfolio showing that they have met the required standard specified in the learning outcomes, assessment criteria and Pearson's quality assurance arrangements
- have an assessment record that shows how each individual assessment criterion has been met. The assessment record should be cross-referenced to the evidence provided. The assessment record should include details of the type of evidence and the date of assessment. Suitable centre documentation should be used to form an assessment record.

Learners can use one piece of evidence to prove their knowledge, skills and understanding across different assessment criteria and/or across different units. The evidence provided for each unit must reference clearly the unit that is being assessed and learners should be encouraged to signpost evidence. Evidence must be available to the assessor, the internal verifier and the Pearson Standards Verifier.

Examples of forms of evidence include observation records, reflective accounts, witness testimony and products of learners' work. Learners must provide evidence of their achievement of the knowledge-based learning outcomes and the associated assessment criteria in skills units – achievement cannot be inferred from performance.

Any specific evidence requirements for a unit are given in the unit's *Assessment* section.

## 5 Centre recognition and approval

Centres must have approval prior to delivering or assessing any of the units in this qualification.

Centres that have not previously offered BTEC Specialist qualifications need to apply for, and be granted, centre recognition as part of the process for approval to offer individual qualifications.

Existing centres will be given 'automatic approval' for a new qualification if they are already approved for a qualification that is being replaced by a new qualification and the conditions for automatic approval are met.

Guidance on seeking approval to deliver BTEC qualifications is given on our website.

### Approvals agreement

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All centres are required to enter into an approval agreement with Pearson, in which the head of centre or principal agrees to meet all the requirements of the qualification specification and to comply with the policies, procedures, codes of practice and regulations of Pearson and relevant regulatory bodies. If centres do not comply with the agreement, this could result in the suspension of certification or withdrawal of centre or qualification approval.

### Centre resource requirements

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As part of the approval process, centres must make sure that the resource requirements below are in place before offering the qualifications:

- appropriate physical resources (for example IT, learning materials, teaching rooms) to support the delivery and assessment of the qualification
- suitable staff for delivering and assessing the qualification (see *Section 4 Assessment requirements*)
- systems to ensure continuing professional development (CPD) for staff delivering and assessing the qualifications
- health and safety policies that relate to the use of equipment by learners
- internal verification systems and procedures (see *Section 4 Assessment requirements*)
- any unit-specific resources stated in individual units.

## 6 Access to qualifications

Access to qualifications for learners with disabilities or specific needs.

Equality and fairness are central to our work. Our *Equality, diversity and inclusion policy* requires all learners to have equal opportunity to access our qualifications and assessments, and that our qualifications are 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 taking one of our qualifications, disadvantaged in comparison to learners who do not share that characteristic
- all learners achieve the recognition they deserve from their qualification and that this achievement can be compared fairly to the achievement of their peers.

For learners with disabilities and specific needs, the assessment of their potential to achieve the qualification must identify, where appropriate, the support that will be made available to them during delivery and assessment of the qualifications.

- Centres must deliver the qualifications in accordance with current equality legislation. For full details of the Equality Act 2010, please visit [www.legislation.gov.uk](http://www.legislation.gov.uk)

### Reasonable adjustments and special consideration

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Centres are permitted to make adjustments to assessment to take account of the needs of individual learners. Any reasonable adjustment must reflect the normal learning or working practice of a learner in a centre or a learner working in the occupational area.

Centres cannot apply their own special consideration – applications for special consideration must be made to Pearson and can be made on a case-by-case basis only.

Centres must follow the guidance in the Pearson document *Guidance for reasonable adjustments and special consideration in vocational internally assessed units*.

## 7 Recognising prior learning and achievement

Recognition of Prior Learning (RPL) 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.



## 8 Quality assurance of centres

For the qualification in this specification, the Pearson quality assurance model will consist of the following processes.

Centres will receive at least one visit from our Standards Verifier, followed by ongoing support and development. This may result in more visits or remote support, as required to complete standards verification. The exact frequency and duration of Standards Verifier visits/remote sampling will reflect the level of risk associated with a programme, taking account of the:

- number of assessment sites
- number and throughput of learners
- number and turnover of assessors
- number and turnover of internal verifiers
- amount of previous experience of delivery.

Following registration, centres will be given further quality assurance and sampling guidance.

For further details, please see the work-based learning quality assurance handbooks, available in the support section of our website:

- *Pearson centre guide to quality assurance – NVQs/SVQs and competence-based qualifications*
- *Pearson delivery guidance & quality assurance requirements – NVQs/SVQs and competence-based qualifications.*

## 9 Units

This section of the specification contains the units that form the assessment for the qualification.

For explanation of the terms within the units, please refer to *Section 14 Glossary*.

It is compulsory for learners to meet the learning outcomes and the assessment criteria to achieve a Pass. Content is compulsory unless it is provided as an example and is therefore marked 'e.g.'. All compulsory content must be delivered, but assessments may not cover all content.

Where legislation is included in delivery and assessment, centres must ensure that it is current and up to date.

# Unit 1: Anatomy, Physiology and Pathology of the Visual System

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Level: 3

Unit type: **Mandatory**

Guided learning hours: 19

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## Unit introduction

The aim of this unit is to enable learners to develop knowledge and understanding of the biology of the eye, common ocular pathologies and the safe use, storage and supply of ophthalmic drugs.

You will study the anatomy and physiology of the internal and external structures of the eye, learning about the basic principles that enable the eye to see fine detail and colour. You will learn about common ocular pathologies and the signs and symptoms that customers could display that might indicate a serious problem. The storage, administration and disposal of common ophthalmic drugs will also be covered along with any relevant regulations.

## Learning outcomes and assessment criteria

To pass this unit, learners need to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

Learning outcomes		Assessment criteria	
1	Understand the structure and function of the eye	1.1	Identify external and internal ocular structures
		1.2	Explain the structural and functional characteristics of: <ul style="list-style-type: none"><li>external ocular structures</li><li>internal ocular structures</li></ul>
		1.3	Describe the basic processes involved in the perception of colour and fine detail

Learning outcomes		Assessment criteria	
2	Understand common ocular problems and take appropriate action	2.1	Identify common ocular pathologies
		2.2	Describe the common ocular pathologies, including their risk factors
		2.3	Describe the signs and symptoms which might indicate a serious or urgent ocular problem
		2.4	Explain when and how to seek advice regarding ocular problems
		2.5	Explain how to take appropriate action if a serious or urgent ocular problem occurs
3	Understand the role of the optical assistant in the management of ophthalmic drugs	3.1	Identify the classifications of ophthalmic drugs
		3.2	Explain how classification relates to management of ophthalmic drugs
		3.3	Explain the key features of drug: <ul style="list-style-type: none"> <li>• packaging</li> <li>• dosage</li> <li>• application methods</li> </ul>
		3.4	Explain the regulations and compliance surrounding the management of ophthalmic drugs
		3.5	Describe how to follow standard operating procedures when dealing with ophthalmic drugs
4	Understand the basic principles relating to the use of common ophthalmic drugs	4.1	Describe common ophthalmic drugs and reasons for their use
		4.2	Describe the importance of hygiene and infection control procedures relevant to the use of ophthalmic drugs
		4.3	Describe the side effects of common ophthalmic drugs
		4.4	Explain how to take appropriate action when faced with side effects of common ophthalmic drugs
		4.5	Explain precautions taken and advice given to the customer before and following the administration of ophthalmic drugs

## Unit content

What needs to be learned
<b>Learning outcome 1: Understand the structure and function of the eye</b>
<b>1A External and internal ocular structures</b> <ul style="list-style-type: none"><li>• External: eyelids; eyelashes; lacrimal glands; extraocular muscles; cornea</li><li>• Internal: ciliary body; iris; lens; pupil; aqueous humour; retina; macula; fovea; optic nerve; vitreous; sclera; choroid</li></ul>
<b>1B Functions of the external and internal ocular structures</b> <ul style="list-style-type: none"><li>• External:<ul style="list-style-type: none"><li>○ Eyelids – protects the eye</li><li>○ Eyelashes – protection from dust/debris, coats eye with tears</li><li>○ Lacrimal glands – secrete tears</li><li>○ Extraocular muscles – control eye movements</li><li>○ Cornea – refractive structure</li></ul></li><li>• Internal:<ul style="list-style-type: none"><li>○ Ciliary body – controls movement of the lens</li><li>○ Iris – regulates amount of light entering</li><li>○ Lens – refracts light</li><li>○ Pupil – lets in light</li><li>○ Aqueous humour – maintains shape of the eye</li><li>○ Retina – captures/converts light</li><li>○ Macula – central vision</li><li>○ Fovea – colour vision</li><li>○ Optic nerve – connects the eye to the brain</li><li>○ Vitreous – maintains shape</li><li>○ Sclera – protective layer</li><li>○ Choroid – blood supply to the eye</li></ul></li></ul>
<b>1C Perception of colour and fine detail</b> <ul style="list-style-type: none"><li>• Detail: An area on the retina (macula) helps the eyes see fine details. Macula contains mainly cones and fewer rods</li><li>• Colour: Three types of cone cells which are sensitive to different wavelengths of light.</li></ul>

What needs to be learned
<p><b>Learning outcome 2: Understand common ocular problems and take appropriate action</b></p> <p><b>2A Common ocular pathologies</b></p> <ul style="list-style-type: none"> <li>• Dry eye; blepharitis; conjunctivitis; cataract; glaucoma; retinal detachment; age-related macular degeneration; diabetic retinopathy and other retinal disorders</li> </ul> <p><b>2B Risk factors</b></p> <ul style="list-style-type: none"> <li>• Progression of pathological conditions; age-related conditions; individual risk factors of specific pathology (to include family history, smoking, ethnicity, intraocular pressure; BMI; underlying systemic health conditions); environmental influence.</li> </ul> <p><b>2C Signs and symptoms</b></p> <ul style="list-style-type: none"> <li>• Increased number of flashes and/or floaters; blurred vision; loss or decrease of vision; pain; itching; bleeding; light sensitivity; redness; shadows in vision; discharge from the eye</li> </ul> <p><b>2D Seeking advice</b></p> <ul style="list-style-type: none"> <li>• Increased number of flashes and/or floaters; blurred vision; loss or decrease of vision; pain; itching; bleeding; light sensitivity; redness; shadows in vision; discharge from the eye unresolved/ongoing problems.</li> <li>• Identification of who to speak to and how to go about it (following relevant standard operating procedures)</li> </ul> <p><b>2E Appropriate action</b></p> <ul style="list-style-type: none"> <li>• Triage form; identification of support required to manage the customer appropriately; referral to an appropriate individual (practitioner/emergency services)</li> </ul>
<p><b>Learning outcome 3: Understand the role of the optical assistant in the management of ophthalmic drugs</b></p> <p><b>3A Classifications</b></p> <ul style="list-style-type: none"> <li>• Pharmacy (P); prescription only (POM); general sales list (GSL)</li> </ul> <p><b>3B Management</b></p> <ul style="list-style-type: none"> <li>• Sale and supply for the three classifications <ul style="list-style-type: none"> <li>◦ Pharmacy: can only be sold or supplied through registered pharmacies or under the supervision of a pharmacist</li> <li>◦ Prescription-only: may only be sold or supplied through pharmacies in accordance with a prescription issued by an appropriate practitioner</li> <li>◦ General sales list: can be sold without the supervision of a pharmacist</li> </ul> </li> </ul>

## What needs to be learned

### 3C Key features

- Packaging: patient information leaflet; drug/brand name; strength; warning statements; name of medication in Braille; manufacturer; strength.
- Dosage: frequency; dose; route; special instructions/precautions; time of dosage.
- Application method (drops/ointment): infection control considerations; amount; method; precautions; special instructions.

### 3D Regulations

- Will cover regulations covering the receipt, storage, disposal, access and supply of ophthalmic drugs

### 3E Standard operating procedures

- Learner should know and understand the relevant standard operating procedures and be able to describe how to follow them

## Learning outcome 4: Understand the basic principles relating to the use of common ophthalmic drugs

### 4A Common ophthalmic drugs may include:

- Dry eye drops used to provide relief from dry eye symptoms
- Cycloplegics used to abolish/reduce a customer's accommodation e.g. cyclopentolate HCl
- Mydriatics used to dilate the pupil e.g. tropicamide
- Diagnostic staining agents used in the diagnosis of eye problems e.g. fluorescein and lissamine green
- Local anaesthetics used to numb the cornea e.g. benoxinate HCl
- Antimicrobials/antibiotics to prevent infection e.g. chloramphenicol
- Anti-allergy eye drops used to relieve ocular symptoms caused by allergies e.g. sodium cromoglycate

### 4.2 Importance of hygiene and infection control procedures

- Prevention of contamination; avoid infecting customer's eye

### 4.3 Side effects may include:

- Blurred vision; burning/stinging, redness, dry eyes, lid crusting; allergic reaction; puffiness; rash; dermatitis

## What needs to be learned

### 4.4 Appropriate action

- Referral to optometrist/eye casualty.
- Severity of symptoms will impact action taken.

### 4.5 Precautions and advice

- Before administration: explanation of process of administration; impact on vision; potential side effects; driving
- After administration: monitoring; observation; instructions; emergency contact details; activities



## Essential information for tutors and assessors

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### Essential resources

Learners will need access to a box of Minims, a Minim and the packaging it comes in.

### Assessment

This unit is internally assessed. To pass this unit, the evidence that learners present for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria.

The assessment for this unit should be set in a specific organisational context, it should draw on learning from the unit and be designed in a way that enables learners to meet all the assessment criteria.

A recommended assessment approach is given below. Centres are free to create their own assessment as long as they are confident it enables learners to provide suitable and sufficient evidence to meet the stated standard of the assessment criteria and achieve the learning outcomes.

### Learning outcome 1: Understand the structure and function of the eye

Learning outcome 1 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learners' understanding of the external and internal structures of the eye.

**To satisfy the assessment for this learning outcome,** learners will:

Label key external and internal structures of the eye (AC1.1)

Provide a clear account of the function of **one** external and **three** internal ocular structures using the learner's own words (AC1.2)

Detail the area of the retina involved in colour vision and the perception of fine detail and provide a brief account of these processes (AC1.3)

## **Learning outcome 2: Understand common ocular pathologies and take appropriate action**

Learning outcome 2 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learners' understanding of common ocular pathologies and the appropriate action to take when faced with a customer with a serious or urgent ocular problem.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Identify common ocular pathologies from a brief description (AC2.1)
2. Provide details of **three** of the common ocular pathologies covered in AC2.1, including risk factors. Details of the signs and symptoms, the effect on vision and any treatment should be provided using the learner's own words (AC2.2)
3. Give a clear account of the signs and symptoms that might indicate a serious or urgent ocular problem (AC2.3)
4. Give a clear account of when and how to seek advice regarding ocular problems, using the learner's own words. Reference should be made to any relevant procedures within the learner's workplace (AC2.4)
5. Provide details of the appropriate action to take if a serious or urgent ocular problem occurs. The learner should be able to provide a clear account of how to identify the support required to manage the customer appropriately, who to contact and how to record the incident (AC2.5)

## **Learning outcome 3: Understand the role of the optical assistant in the management of ophthalmic drugs**

Learning outcome 3 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assessment to cover this learning outcome could be a short question and answer paper, assessing the learner's understanding of the management of ophthalmic drugs.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Be able to identify the three classifications of ophthalmic drugs (AC3.1)
2. Provide a clear account of how each of the three classifications affects receipt, storage, disposal, access and supply (AC3.2)

3. Photograph a box of Minims and a Minim highlighting key features (drug/brand name; strength; warning statements; name of medication in Braille; manufacturer; labelling; date of opening; expiry date), explaining why each of these are important. Explain the dosage and administration/application of the drug (AC3.3)
4. Provide a clear account of the regulations and compliance requirements surrounding the management of ophthalmic drugs (AC3.4)
5. Provide details on standard operating procedures in place when dealing with ophthalmic drugs (AC3.5)

#### **Learning outcome 4: Understand the basic principles relating to the use of common ophthalmic drugs**

Learning outcome 4 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assessment to cover this learning outcome could be a discussion with an optometrist. The discussion would have to include information on at least **two** ophthalmic drugs used in their workplace and the management of these drugs. The learner would be required to describe when the drugs would be used, how they are administered and what potential side effects the customer could experience. The learner should be able to provide details of the regulations surrounding the receipt, storage, supply and administration of each of the drugs discussed, including information about hygiene and infection control.

The discussion would be followed by short answer questions to provide evidence of their learning.

**To satisfy the assessment criteria for this learning outcome**, learners will:

1. Provide details of the common ophthalmic drugs used in their workplace and describe the reasons for their use (AC4.1)
2. Provide details of the importance of the hygiene and infection control procedures relevant to the use of ophthalmic drugs (AC4.2)
3. Provide details of the side effects of common ophthalmic drugs (AC4.3)
4. Provide a clear account of how to take appropriate action when faced with side effects of common ophthalmic drugs, giving reasons to support the points made (AC4.4)
5. Provide a clear account of the precautions taken and the advice given to the customer by the optometrist before and after the administration of ophthalmic drugs in the learner's own words (AC4.5)

## Unit 2: Use of Spectacles

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Level: **3**

Unit type: **Mandatory**

Guided learning hours: **24**

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### Unit introduction

This unit enables learners to gain knowledge and understanding of how the eye focuses light, the refractive errors that can arise and how they can be corrected with spectacle lenses.

In this unit, you will learn the basic principles of refraction and the practical application of spectacle lenses. You will gain an understanding of the relationships between lens properties and materials, while learning how to appropriately select a spectacle lens and frame for an individual. You will gain knowledge of ophthalmic prescriptions and how to interpret the terms used.

### Learning outcomes and assessment criteria

To pass this unit, learners need to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

Learning outcomes		Assessment criteria	
1	Understand the basic principles of refraction, common refractive errors and how they are corrected	1.1	Describe how light rays are affected by the refracting structures in a healthy eye
		1.2	Describe the different types of refractive errors
		1.3	Describe the basic methods of correcting refractive errors
		1.4	Identify the terminology used in explaining refractive errors to patients

Learning outcomes		Assessment criteria	
2	Understand the practical application of spectacle lenses	2.1	Explain the terms: <ul style="list-style-type: none"> <li>• focal power</li> <li>• focal length</li> </ul>
		2.2	Describe the relationship between lens thickness and curvature
		2.3	Demonstrate how to calculate focal lengths and powers
		2.4	Describe different types of astigmatism
		2.5	Explain how spectacle lenses are used to correct astigmatism
		2.6	Demonstrate appropriate selection of spectacle frames and lenses for correcting refractive errors
3	Understand the properties of different spectacle lens material	3.1	Identify and compare the different lens materials and their properties
		3.2	Describe visual effects which may arise with different lens materials
		3.3	Describe how to minimise non-tolerance to high-index lenses
4	Understand ophthalmic prescriptions and use of lenses for different prescriptions	4.1	Identify terms used in writing an ophthalmic prescription
		4.2	Demonstrate the transposition of sphero-cylindrical prescriptions in the selection of appropriate lens
		4.3	Describe the types of optical prisms
		4.4	Explain why optical prisms are prescribed

## Unit content

What needs to be learned
<b>Learning outcome 1: Understand the basic principles of refraction, common refractive errors and how they are corrected</b>
<b>1A Refracting surfaces of the eye</b> <ul style="list-style-type: none"><li>• cornea, crystalline lens, retina; integrity of these structures; refraction; axial length; lens power</li></ul>
<b>1B Refractive errors</b> <ul style="list-style-type: none"><li>• emmetropia; myopia; hypermetropia; astigmatism; presbyopia</li></ul>
<b>1C Correcting refractive errors</b> <ul style="list-style-type: none"><li>• concave lenses; convex lenses; lens power; spherical lenses; cylindrical lenses; prism; near addition (add)</li></ul>
<b>1D Terminology</b> <ul style="list-style-type: none"><li>• short-sighted; long-sighted; astigmatism; accommodation; multifocal; muscle imbalance</li></ul>
<b>Learning outcome 2: Understand the practical application of spectacle lenses</b>
<b>2A Focal length</b> <ul style="list-style-type: none"><li>• Focal power: the ability of a lens to converge a parallel beam of light; equals the reciprocal of the focal length</li><li>• Focal length: distance from lens to virtual focus; dioptres; metres</li></ul>
<b>2B Thin lens theory</b> <ul style="list-style-type: none"><li>• Focal length: distance from lens to virtual focus; dioptres; metres</li></ul>
<b>2C Calculate focal length</b> <ul style="list-style-type: none"><li>• <math>F=1/f</math>; dioptres; metres; reciprocal relationship</li></ul>
<b>2D Types of astigmatism</b> <ul style="list-style-type: none"><li>• simple hyperopic astigmatism - first focal line coincides with the retina while the second is located behind the retina</li><li>• simple myopic astigmatism - first focal line is located in front of the retina while the second focal line is located on the retina</li><li>• compound hyperopic astigmatism - both focal lines are located behind the retina</li><li>• compound myopic astigmatism - both focal lines are located in front of the retina</li><li>• mixed astigmatism - focal lines are on both sides of the retina.</li></ul>

## What needs to be learned

### 2E Correction of astigmatism

- correction of refractive error by glasses or contact lenses
- spherical lens power used for correction
- 'cylinder' lens power to correct the difference between the powers of the two principal meridians of the eye (astigmatism)
- frame selection for high cylinders (cyls)

### 2F Frame selection, lens selection

- appropriate for prescription; lens thickness; refractive index; coatings; frame size; shape; optical centres; plus and minus lenses

## Learning outcome 3: Understand the properties of different spectacle lens material

### 3A Lens material

- CR-39 plastic; crown glass; polycarbonate; trivex; high index glass; high index plastics; refractive index; density; v-value

### 3B Visual effects

- transverse chromatic aberration (colour fringing), barrel, pincushion distortion

### 3C Non-tolerance

- change of index; low v-value= high chromatic aberration; curvature; frame size, larger frames encourage deviating from optical centre, vertical and horizontal centre measurements, adaptation to change of material

## Learning outcome 4: Understand ophthalmic prescriptions and use of lenses for different prescriptions

### 4A Prescription terminology

- Identification of which eye/s
- Dioptres - the unit used to measure the correction
- Sph refers to the 'spherical' portion of the prescription which is the degree of short-sightedness or long-sightedness
- Cyl refers to the 'cylinder' or degree of astigmatism present, can be a negative or a positive number
- axis is a number anywhere between 1 and 180 degrees - orientation of the astigmatism
- 'prism' indicates the amount of correction that may be needed to align the image on the retina

## What needs to be learned

- “add” refers to near or intermediate addition - plus power added to sphere value for close work

### **4B Transposition**

- sphero-cyl power; interchange between plus and minus cyl; axis rotation; principal meridians; power diagrams

### **4C Prism types**

- incorporation into the lens; surfaced; decentred; Fresnel; horizontal; vertical; base directions

### **4D Prescribed prism**

- muscle imbalance; light diverted; image displacement; centre on retina



## Essential information for tutors and assessors

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### Essential resources

Learners undertaking this qualification will need access to an optical practice and a registered dispensing optician/ optometrist.

Staff supervising this unit should be occupationally competent and registered with the General Optical Council. They should have recent experience of optical practice and be able to demonstrate evidence of continuing professional development in order to maintain their registration with the General Optical Council. Exceptions to the requirement for registration may apply in Ireland.

### Assessment

This unit is internally assessed. To pass this unit, the evidence that learners present for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria.

The assessment for this unit should be set in a specific organisational context, it should draw on learning from the unit and be designed in a way that enables learners to meet all the assessment criteria.

A recommended assessment approach is given below. Centres are free to create their own assessment as long as they are confident it enables learners to provide suitable and sufficient evidence to meet the stated standard of the assessment criteria and achieve the learning outcomes.

### **Learning outcome 1: Understand the basic principles of refraction, common refractive errors and how they are corrected**

An example of a suitable assignment to cover this learning outcome could be a discussion with a registered practitioner on how the eye focuses light and the errors that can occur. The discussion would have to include information on at least 3 types of refractive error and how each would be corrected. The learner would be required to provide suitable spectacle lens options and justify their choice.

The discussion would be followed by short answer questions and case-based examples to provide evidence of their understanding.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give an account the path of light through a healthy eye and name at least one structure involved in this pathway. (The learner must include the term refraction (or bending) of light). (AC 1.1)
2. Give an account of the five types of refractive error. (AC 1.2)
3. Provide details of a suitable lens option for a provided refractive error and lifestyle. (AC 1.3)
4. Recognise appropriate terminology when offering explanation of refractive errors to the patient. (1.4)

### **Learning outcome 2: Understand the practical application of spectacle lenses**

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learners' understanding of spectacle lenses and how they work. Questions may be case based where appropriate. For the "demonstrate" assessment criteria a suitable assignment would require the learner to carry out and evidence the completion of relevant tasks.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Explain terms "focal length" and "focal power" correctly. (AC 2.1)
2. Give a clear account of lens thickness and why it would be impacted by a change in curvature of prescription. (AC 2.2)
3. Calculate focal length and power in a given scenario and show working. (AC 2.3)
4. Give details of the types of astigmatism and the differences between them. (AC 2.4)
5. Give a clear account to of how spectacle lenses will work in correcting astigmatism. (AC 2.5)
6. Select and justify the most suitable option of spectacle frames and lenses for a patient. (AC 2.6)

### **Learning outcome 3: Understand the properties of different spectacle lens material**

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learner's understanding of spectacle lens materials, the resulting visual effects and how they would provide solutions for non-tolerance of such effects.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Identify at least 2 possible lens materials and be able to compare the properties of those lens materials and any resulting visual effects. (AC 3.1 and 3.2)
2. Give a detailed account of how the learner would deal with a situation of non-tolerance in relation to lens material. (AC 3.3)

#### **Learning outcome 4: Understand ophthalmic prescriptions and use of lenses for different prescriptions**

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learners' understanding of prescriptions and the terms used. For the "demonstrate" assessment criteria a suitable assignment would require the learner to carry out and evidence the completion of relevant tasks.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Recognise terms in a prescription and give an account, in the learner's own words, of the terminology, and its meaning, used by the optometrist. (AC 4.1)
2. Demonstrate, through calculation, the transposition of a prescription from one sphero-cyl form to another. (AC 4.2)
3. Provide options for the addition of prism to a patient's lens by giving details of the types of optical prism available. (AC 4.3)
4. Give an account of why a prescription would contain prism. (AC 4.4)

## Unit 3: The Sight Test and Low Vision Service

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Level: **3**

Unit type: **Mandatory**

Guided learning hours: **20**

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### Unit introduction

This unit enables learners to gain knowledge and understanding of the sight test and optical services for patients with low vision.

You will study the legal and professional framework that influences optical practice and the provision of low vision services. You will learn about the sight test in detail, studying the history and symptoms, the common tests completed, and the documents used. The procedures for both ocular and medical emergencies relating to customers attending the optical practice will be covered. Learners will also study the common causes of visual impairment, the impact this can have on a customer's life, and the availability of products and services for these customers.

### Learning outcomes and assessment criteria

To pass this unit, learners need to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

Learning outcomes		Assessment criteria	
1	Understand the professional structure surrounding the sight test and low vision assessment	1.1	Describe the role of different professions working in the provision of eye care and low vision services
		1.2	Explain the purpose of documents used within optical practice
		1.3	Describe the common terminology relating to visual impairment: <ul style="list-style-type: none"><li>• severely sight impaired (blind)</li><li>• sight impaired (partially sighted)</li></ul>
		1.4	Explain the role and responsibilities of the assistant in optical practice

Learning outcomes		Assessment criteria	
2	Understand the procedures and terminology associated with a sight test	2.1	Explain the purpose of history and symptoms at a sight test
		2.2	Identify terminology used in relation to refraction
		2.3	Explain the common tests which form part of the sight test
		2.4	Describe the information contained within a prescription
3	Understand the results of tests used in the sight test and advice given	3.1	Explain the results which will impact the dispensing of spectacles and/or contact lenses to the customer
		3.2	Outline services to which a customer may be referred for further treatment
		3.3	Describe how the results of the sight test should be communicated to the customer and other members of the team
4	Understand the basic principles of managing emergency ocular and medical problems relating to customers attending the optical practice	4.1	Describe medical emergencies that are most likely to happen to individuals attending the optical practice
		4.2	Explain what procedures should be followed in a medical emergency
		4.3	Describe how to differentiate between urgent and non-urgent ocular situations
		4.4	Describe how to take action in an ocular emergency
5	Understand issues associated with visual impairment	5.1	Explain the common causes of visual impairment
		5.2	Describe the signs and symptoms of common causes of visual impairment
		5.3	Describe the impact of visual impairments on individuals' lifestyles
6	Understand the products and services available to help customers with visual impairment	6.1	Describe products and services available for customers with visual impairment
		6.2	Describe where customers with visual impairment can access information and advice

## Unit content

### What needs to be learned

#### Learning outcome 1: Understand the professional structure surrounding the sight test and low vision assessment

##### 1A Role of different professions

- Optometrists: refraction and dispensing, examine eye health
- dispensing opticians: advise on, supply and fit glasses
- contact lens optician: fit and supply contact lenses
- ophthalmologists: diagnose and treat (surgical and medical) eye disease
- orthoptists: non-surgical assessment and management of disorders of binocular vision, squints and amblyopia
- ophthalmic nurses: care and management of individuals with eye disease or injury
- rehabilitation workers: identify and deliver interventions to assist individuals with visual impairment to maximise independence
- social workers: organising support at home
- general practitioners: support with eye problems and other medical conditions
- carers: personal assistance
- occupational therapists: support individuals to assist with daily activities
- voluntary workers: support with daily activities

##### 1B Documents

Identify and explain purpose of:

- customer record: customer details; reason for visit; history and symptoms; results of examination; prescription; fees paid; invoicing.
- NHS forms: GOS form
- vouchers: help towards cost of glasses/contact lenses

##### 1C Common terminology

- Sight impaired (partially sighted): when the customer has:
  - a visual acuity from 3/60 to 6/60 with a full field
  - up to 6/24 with moderate restriction of visual field, opacities in the media or aphakia
  - 6/18 or better with a gross field defect (e.g. hemianopia) or a marked constriction of the field (e.g. glaucoma or retinitis pigmentosa)

## What needs to be learned

- Severely sight impaired (blind): when the customer has:
  - a best corrected visual acuity below 3/60 or 1/18
  - a best corrected visual acuity better than 3/60 but below 6/60 with a very restricted visual field

### 1D Roles and responsibilities

- Customer service; welcoming patients; advisor; maintenance of records; pre-screening; liaison with practice staff; responsibility for appointments; dispensing; stocking; ordering; health and safety; taking payments; dealing with concerns/issues/problems.

## Learning outcome 2: Understand the procedures and terminology associated with a sight test

### 2A History and symptoms

- Pre-existing conditions; medication; lifestyle; medical and ocular history; family history; wellbeing; issues; expectations

### 2B Terminology

- Axis; optical centre; concave lens; convex lens; sphere; cylinder.

### 2C Common tests

- Anatomical examination; visual acuity tests (refraction, retinoscopy); visual fields; tonometry; pupil response; ocular motility; eye alignment/movement; keratometry

### 2D Features of a prescription

- Identification of which eye/s
- dioptres (the unit used to measure the correction)
- Sph: 'spherical' portion of the prescription which is the degree of short-sightedness or long-sightedness
- Cyl: 'cylinder' or degree of astigmatism present
- axis is a number anywhere between 0 and 180 degrees - orientation of the astigmatism
- 'prism' indicates the amount of correction that may be needed to align the image on the retina to manage diplopia

## Learning outcome 3: Understand the results of tests used in the eye examination and advice given

### 3A Results impacting dispense

- Changes in refractive error; disease; illness; abnormalities; review of prescription; treatment options available; further testing

## What needs to be learned

### 3B Services

- Dispense; orthoptist; ophthalmologist; GP; eye hospital

### 3C Communication of results

- Customer: verbal communication; written confirmation; clarity; privacy; respond to queries; aftercare; encouraging questions; avoid use of jargon/terminology that could confuse the customer
- Colleagues: test results; recorded in customer record; clarity; roles and responsibilities

## Learning outcome 4: Understand the basic principles of managing emergency health problems relating to individuals attending the optical practice

### 4.A Medical emergencies

- Sprains; strains; falls; trips; fainting; seizure; chest pains; breathing difficulties; inform first aider

### 4B Procedures in medical emergency

- Use of effective communication; assess situation; inform first aider; reassure patient; call emergency services; clear area; support casualty; report/record incident; contact relatives/next of kin

### 4C Differentiate between non-urgent and urgent ocular situations

- Assess situation and ask relevant questions; completion of triage form; knowledge of signs and symptoms of ocular emergency (sudden loss of vision; pain; double vision; flashing lights or floaters; distorted vision); pre-existing conditions; needs; check patient records; seek assistance from a registered colleague; urgency; prescriptions

### 4D Ocular emergency

- Complete triage form; inform optometrist

## Learning outcome 5: Understand issues associated with visual impairment

### 5A Common causes

- Detached retina; glaucoma; age-related macular degeneration; cataracts; diabetic retinopathy; vein occlusions; injury

### 5B Signs and symptoms

- Retinal detachment: floaters, flashes, blurred/distorted vision, shadow
- glaucoma: few early symptoms, affects peripheral vision first
- age-related macular degeneration: reduced central vision
- cataracts: blurred vision



## What needs to be learned

- diabetic retinopathy: blurred vision
- retinitis pigmentosa: reduction in peripheral vision
- vein occlusions: floaters, blurred vision
- stroke: blurred vision, visual field loss

### 5C Impact on lifestyle

- Impact on working life; social life; independence/dependence; self-esteem; self-worth; psychological impact/mental health; risk; dignity; resources; finance

## Learning outcome 6: Understand the products and services available to help customers with visual impairment

### 6.1 Products and services

- Products: low vision aids; long cane; guide dog; glasses; contact lenses
- Services: support groups; carers; social services; third sector organisations; occupational therapists; funding; benefits; medication; surgery; treatment; rehabilitation; adaptations

### 6.2 Information and advice

- Support groups/networks; local hospital eye service clinics; Royal National Institute of Blind People (RNIB)

## Essential information for tutors and assessors

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### Essential resources

There are no special resources needed for this unit.

### Assessment

This unit is internally assessed. To pass this unit, the evidence that learners present for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria.

The assessment for this unit should be set in a specific organisational context, it should draw on learning from the unit and be designed in a way that enables learners to meet all the assessment criteria.

A recommended assessment approach is given below. Centres are free to create their own assessment as long as they are confident it enables learners to provide suitable and sufficient evidence to meet the stated standard of the assessment criteria and achieve the learning outcomes.

### **Learning outcome 1: Understand the legal and professional framework surrounding the sight test and low vision assessment**

Learning outcome 1 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assessment to cover this learning outcome could be a short question and answer paper, assessing the learner's understanding of the legal and professional framework surrounding the sight test.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details of the role of different professions working in the provision of eye care and low vision services, using the learner's own words (AC1.1)
2. Provide details of the purpose of documents used within optical practice (AC1.2)
3. Provide details of the common terminology used to describe visual impairment (AC1.3)
4. Provide a clear account of their role and responsibilities in optical practice (AC1.4)

## **Learning outcomes 2 and 3**

Learning outcomes 2 and 3 assess knowledge, so written evidence from the learner will be needed.

An example of a suitable assessment to cover this learning outcome could be a discussion with an optometrist. The learner would be expected to provide details of the sight test, including history and symptoms and the common tests completed. The learner should be able to explain which results from the sight test would impact the dispensing of spectacles and/or contact lenses. The learner should cover the possible outcomes of the sight test and will be asked to explain the features of a prescription and identify relevant terminology used.

The discussion would be followed by short answer questions to provide evidence of their learning.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details of the purpose of the history and symptoms during sight test (AC2.1)
2. Identify terminology used in relation to refraction (AC2.2)
3. Provide details of the common tests which form part of the sight test (AC2.3)
4. Give a clear account of the features of a prescription (AC2.4)
5. Give a clear account of the results which will impact the dispensing of spectacles and/or contact lenses to the customer, in the learner's own words (AC3.1)
6. Outline services to which a customer may be referred for further treatment (AC3.2)
7. Provide details of how the results of the sight test should be communicated to the customer and other members of the team (AC3.3)

## **Learning outcome 4: Understand the basic principles of managing emergency ocular and medical problems relating to individuals attending the optical practice**

Learning outcome 4 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assessment to cover this learning outcome could be a short training session for colleagues. The learner should identify those medical emergencies that are most likely to happen to customers in optical practice and the relevant procedures that should be followed. The session should also provide details on how to differentiate between urgent and non-urgent ocular situations and how to act in an ocular emergency.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details of medical emergencies that are most likely to happen to individuals attending the optical practice (AC4.1)
2. Give a clear account of the procedures which should be followed in a medical emergency (AC4.2)
3. Provide details on how to differentiate between urgent and non-urgent ocular situations (AC4.3)
4. Provide details of how to act in an ocular emergency, using the learner's own words (AC4.4)

### **Learning outcome 5: Understand issues associated with visual impairment**

Learning outcome 5 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assessment to cover this learning outcome could be a short question and answer paper, assessing the learner's understanding of the issues associated with visual impairment. As part of this, learners could be presented with different case scenarios and asked to identify the impact of their visual impairment on their lifestyle.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give a clear account of common causes of visual impairment (AC5.1)
2. Provide details of the impact of visual impairments on individuals (AC5.2)

### **Learning outcome 6: Understand the products and services available to help patients with visual impairment**

Learning outcome 6 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assessment to cover this learning outcome could be the development of an information leaflet highlighting the products and services available to customers with visual impairment and how to signpost them to available advice and information.

The discussion would be followed by short answer questions to provide evidence of their learning.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details of the products and services available for patients with visual impairment (AC6.1)
2. Provide details of where customers with visual impairment can access information and advice, using the learner's own words (AC6.2)

## Unit 4: Contact Lens Service

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Level: **3**

Unit type: **Mandatory**

Guided learning hours: **24**

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### Unit introduction

The aim of this unit is to enable the learner to gain knowledge and understanding of contact lens types and the journey a customer would take in order to wear contact lenses safely and effectively, as an optical correction.

In this unit, you will learn about the legal requirements for contact lens supply and how practitioners appropriately select the best contact lens product for an individual. Focusing on the role of the optical assistant, you will explore functions that are delegated to you throughout the customer journey and understand the importance of your support in ensuring safe and effective wear and care.

### Learning outcomes and assessment criteria

To pass this unit, learners need to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

Learning outcomes		Assessment criteria	
1	Understand the requirements of the contact lens customer journey	1.1	Explain the legal and professional requirements for the sale and supply of contact lenses including the roles and responsibilities of those involved.
		1.2	Describe the contact lens customer journey from initial fitting to aftercare
		1.3	Explain factors which suggest contact lenses may be beneficial for an individual
		1.4	Explain the reasons why an individual would choose to wear contact lenses
		1.5	Explain the limitations of wearing contact lenses
		1.6	Demonstrate delegated tasks within the contact lens journey for an individual

Learning outcomes		Assessment criteria	
2	Understand the appropriate selection of contact lenses for an individual	2.1	Describe key characteristics of materials used in contact lenses in relation to their performance
		2.2	Outline the options for wear of soft contact lenses
		2.3	Explain the contact lens specification and the information it must contain.
		2.4	Explain the information required to order contact lenses for an individual
3	Understand contact lens care and how to improve wearer compliance	3.1	Describe the requirements of contact lens care
		3.2	Explain the consequences of poor contact lens care
		3.3	Describe different types of products used by contact lens wearers in relation to: <ul style="list-style-type: none"> <li>• product components</li> <li>• product functions</li> <li>• available comfort products</li> </ul>
		3.4	Explain ways to ensure an individual complies with the handling and care regime provided.
4	Understand how to support safe and effective contact lens wear	4.1	Explain how patients may need to adapt to contact lens wear
		4.2	Explain how to encourage safe and effective contact lens wear
		4.3	Demonstrate the safe technique for contact lens: <ul style="list-style-type: none"> <li>• insertion</li> <li>• removal</li> <li>• re-centration</li> </ul>
		4.4	Describe common problems associated with contact lens wear

## Unit content

What needs to be learned
<b>Learning outcome 1: Understand the requirements of the contact lens customer journey</b>
<b>1A Sale and Supply of Contact Lenses</b> <ul style="list-style-type: none"><li>Fitting; aftercare; role of Contact Lens Optician (CLO); Optometrist (OO); specification requirements; insertion and removal; documentation; dos and don'ts; lens hygiene; patient declarations; sale of solutions</li></ul>
<b>1B Contact Lens Customer Journey</b> <ul style="list-style-type: none"><li>In date sight test prescription; fitting; specification; insertion and removal; wearing schedule; follow up; aftercare</li></ul>
<b>1C Contact Lens Benefits</b> <ul style="list-style-type: none"><li>Factors: lifestyle; prescription suitability; age; safety; occupation; increased field of view</li><li>Benefits: appearance; comfort; increased field of view</li></ul>
<b>1D Reasons for wear</b> <ul style="list-style-type: none"><li>Appearance; dislike spectacles; high prescription, lens thickness; sports; correction preference; occupation e.g. if safety eyewear needs to be worn or mask; no fogging</li></ul>
<b>1E Limitations of Contact Lenses</b> <ul style="list-style-type: none"><li>Costs; prescription suitability; comfort; pathology; ocular conditions; hygiene; age; rigorous cleaning and handling; reduced visual acuity</li></ul>
<b>1F Delegated Tasks</b> <ul style="list-style-type: none"><li>Tasks performed by assistant:<ul style="list-style-type: none"><li>insertion and removal</li><li>complete documentation e.g customer declarations</li><li>cleaning and handling demonstration</li></ul></li></ul>
<b>Learning outcome 2: Understand the appropriate selection of contact lenses for an individual</b>
<b>2A Contact Lens Materials</b> <ul style="list-style-type: none"><li>Rigid gas permeable (RGP) lenses are made from a rigid material, and are particularly suitable for astigmatism, keratoconus</li><li>Soft lenses are made from hydrogel, a soft, flexible plastic. Materials include silicone hydrogel, which enables more oxygen to the eye than the traditional hydrogel contact lenses.</li></ul>

## What needs to be learned

- Hard lenses are rarely used, made from PMMA, which is a rigid plastic that does not enable oxygen to pass through to the eye.

### 2B Soft Lens Options

- Daily; Monthly; Two weekly; Extended wear; Coloured; Tinted

### 2C Contact Lens Specification

- Patient's name and address; date of birth; practitioner/registration number in the General Optical Council's register; practice address; name of practice; date of fitting; details of lenses fitted; date the specification expires; any other information necessary; prescription; lens diameter; base curve; recall period for aftercare.

### 2D Contact Lens Ordering

- Patient details; lens powers; diameter; base curve; material; brand; frequency of wear; cleaning products where applicable

## Learning outcome 3: Understand contact lens care

### 3A Contact Lens Care

- Handling; fitting; cleaning; soaking; solutions; disposal; storage; cleaners; ; hygiene; disinfect; protein removal; infection control.

### 3B Consequences of Poor Cleaning and Handling

- Infection; irritation; redness; swelling; allergy; impact on vision; injury; build-up of protein/lipids; itching; burning; tearing; foreign body sensation; pain; dry eyes; scratches to lenses; replacements required; right and left eyes mixed up resulting in dizziness; headaches.

### 3C Contact Lens Products

- Products: solutions; cases; comfort drops; lid hygiene products
- Components: hydrogen peroxide; disinfectant
- Functions: disinfecting; removal of proteins; removal of lipids; cleaning; comfort; compatibility; storage; buffers.
- Comfort: drops, gels.

### 3D Compliance

- Demonstration of appropriate methods; consequences of poor compliance; regular support and appointments offered; change of lens modality if cannot comply



## What needs to be learned

### Learning outcome 4: Understand how to support safe and effective contact lens wear

#### 4A Contact Lens Adaption

- Fitting; use; maintenance; aftercare; risk; infection control; field of vision; reduced visual acuity

#### 4B Safe Wear

- Demonstration; verbal and written advice; guidance; follow-up appointments; contact details; importance of maintenance/cleanliness; leaflets; wearing schedule adherence; change of modality if poor compliance

#### 4C Contact Lens Handling

- Insertion: wash hands with soap; dry hands with tissue not towel; remove one lens from case; place lens on index finger (right lens on the right hand); use left hand to hold both eyelids open; resist urge of blinking; place the lens on the cornea; slowly let go of eyelids held apart; can roll eyes to remove the bubble underneath the lens; blink gently a few times. Repeat for the other eye.
- Removal: wash and dry hands; use the index finger of opposite hand to pull up upper eyelid; use the middle finger of dominant hand with the contact on it to pull lower eyelid down; look up and slide the contact lens down, then pinch it out.
- Re-centration: locate lens on eye; slide to bottom part of eye; hold lens in place with gentle pressure in most temporal position; slide lens up to corneal surface.
- Techniques and methods can be adapted to the needs of the patient.

#### 4D Common Problems

- Loss, insertion; removal; re-centration; infection; irritation; allergy; impact on vision; injury; build-up of protein/bacteria; itching; burning; tearing; foreign body sensation; dry eyes; scratches to lenses; replacements required; adaptation to contact lenses; headaches; reactions to solutions

## Essential information for tutors and assessors

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### Essential resources

Learners undertaking this qualification will need access to an optical practice and a registered dispensing optician/ optometrist.

Staff supervising this unit should be occupationally competent and registered with the General Optical Council. They should have recent experience of optical practice and be able to demonstrate evidence of continuing professional development in order to maintain their registration with the General Optical Council. Exceptions to the requirement for registration may apply in Ireland.

### Assessment

This unit is internally assessed. To pass this unit, the evidence that learners present for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria.

The assessment for this unit should be set in a specific organisational context, it should draw on learning from the unit and be designed in a way that enables learners to meet all the assessment criteria.

A recommended assessment approach is given below. Centres are free to create their own assessment as long as they are confident it enables learners to provide suitable and sufficient evidence to meet the stated standard of the assessment criteria and achieve the learning outcomes.

#### **Learning outcome 1: Understand the requirements of the contact lens customer journey.**

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learners' understanding of the requirements for sale and supply of contact lenses, the customer journey and the benefits and limitations to contact lens wear. Questions may be case based where appropriate. For the "demonstrate" assessment criteria a suitable assignment would require the learner to carry out and evidence the completion of relevant delegated tasks.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details of the legal and professional requirements for the supply of contact lenses and the role of the individuals involved. (AC 1.1)
2. Give an account of the journey a customer would go through in order to be provided with contact lenses. (AC1.2)

3. Provide details of the benefits of contact lenses for a wearer. (AC 1.3)
4. Give reasons why an individual may choose to wear contact lenses. (AC1.4)
5. Provide details of the limitations of contact lens wear. (AC 1.5)
6. Carry out delegated tasks such as appointment booking, declarations, handling demonstrations. (AC 1.6)

### **Learning outcome 2: Understand the appropriate selection of contact lenses for an individual.**

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learners' understanding of the materials, wearing frequencies and specification for contact lenses.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give a clear account of the available contact lens materials, their characteristics and wearability. (AC 2.1)
2. Give a brief description of the options of wear for soft contact lenses. (AC 2.2)
3. Provide details of the terms and information which must be contained in a contact lens specification. (AC 2.3)
4. Provide details of the information required for the ordering process for a given contact lens. (AC 2.4)

### **Learning outcome 3: Understand Contact Lens Care**

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learners' understanding of contact lens care and the products available.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give a clear account of the requirements for contact lens care in relation to handling, cleaning and hygiene. (AC 3.1)
2. Provide details of the consequences of poor contact lens compliance. (AC 3.2)
3. Give details of available products, their components and functions. (AC 3.3)
4. Provide details of ways to encourage compliance when handling and cleaning lenses,

#### **Learning Outcome 4: Understand how to support safe and effective contact lens wear.**

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learners' understanding of how to support and encourage safe and effective contact lens wear in the role of the learner. For the "demonstrate" assessment criteria a suitable assignment would require the learner to carry out and evidence the completion of relevant delegated tasks.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details of how to ensure a wearer adapts well to contact lenses. (AC 4.1)
2. Provide details of how, in the role of the learner, they can encourage safe and effective wear. (AC 4.2)
3. Demonstrate the insertion and removal technique used with a patient. (AC 4.3)
4. Give an account of problems associated with contact lens wear. (AC 4.4)

## Unit 5: Supporting the Provision of Spectacle Frames

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Level: **3**

Unit type: **Mandatory**

Guided learning hours: **18**

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### Unit introduction

The aim of this unit is to enable learners to develop a knowledge and understanding of spectacle frames, the materials they are made from, the considerations of an assistant when selecting and adjusting them and the British Standard of measurement.

In this unit, you will learn which materials are commonly used in spectacle frame manufacture and their properties. You will explore the components of spectacle frames and the importance of correct fit and adjustment. You will apply the British Standards of frame measurement to your role and learn how to perform a quality inspection so that any spectacle frame received by an individual is fit for purpose and meets relevant standards.

### Learning outcomes and assessment criteria

To pass this unit, learners need to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

Learning outcomes		Assessment criteria	
1	Understand the materials used in spectacle frames	1.1	Identify the materials used in the manufacture of spectacle frames
		1.2	Describe the properties of spectacle frame materials
		1.3	Explain the advantages and disadvantages of different spectacle frame materials
2	Understand how spectacle frames are selected and adjusted	2.1	Describe the adjustable components of spectacle frames
		2.2	Explain the considerations that need to be made when selecting a frame for a patient, in relation to: <ul style="list-style-type: none"><li>• frame fit</li><li>• positioning</li></ul>

Learning outcomes		Assessment criteria	
		2.3	Explain the adjustments that are regularly performed to ensure a good frame fit.
		2.4	Describe the consequences of a poorly fitted frame.
3	Understand the British Standard of measurement of spectacle frames and how it applies to dispensing	3.1	Demonstrate how to measure spectacle frames to British Standards
		3.2	Describe the checks made on each component of spectacle frames during quality inspection.
		3.3	Explain how to measure the vertical heights multifocal lenses
		3.4	Explain the importance of accurate measurements and fitting for progressive lenses

## Unit content

What needs to be learned
<b>Learning outcome 1: Understand the materials used in spectacle frames</b>
<b>1A Frame Materials</b> <ul style="list-style-type: none"><li>Types of plastics e.g. cellulose acetate, cellulose propionate; types of metals e.g. stainless steel, titanium; recognition of material; features.</li></ul>
<b>1B Properties of Materials</b> <ul style="list-style-type: none"><li>Plastics: adjustment temperatures; stability; durability; glazing temperature; melting point; strength; hypo-allergenic; weight</li><li>Metals: durability; appearance; hypo-allergenic; weight; corrosion resistant; flexibility; glazing temperature.</li></ul>
<b>1C Advantages</b> <ul style="list-style-type: none"><li>Choice; preference; lightweight; comfortable; durable; strong; prescription suitability</li></ul>
<b>1D Disadvantages</b> <ul style="list-style-type: none"><li>Expensive; weak; flexible; fragile; uncomfortable; appearance; prescription unsuitability.</li></ul>
<b>Learning outcome 2: Understand how spectacle frames are selected and adjusted to ensure fit for purpose</b>
<b>2A Spectacle Frame Components</b> <ul style="list-style-type: none"><li>Frame front; nose pads; bridge; joints; sides; temple tips; drop</li></ul>
<b>2B Considerations for Frame Selection</b> <ul style="list-style-type: none"><li>Positioning: eyes central, plastic bridge in contact with wearer's nose all the way round; Correct width; not touching cheeks</li><li>Frame Fit: nose pads adjustable; temple width correct; correct or adjustable length to bend; length of drop approximately 30mm</li></ul>
<b>2C Adjustments</b> <ul style="list-style-type: none"><li>Nose pads and arms; length to bend; length of drop; angle of side; temple width; pantoscopic tilt adjusted to 10 degrees; vertex distance (BVD)</li></ul>
<b>2C Consequences of a poor fit.</b> <ul style="list-style-type: none"><li>Discomfort; eyes not in correct position causing blurred vision; measurements unaligned; breakage; lenses appearing too weak or too strong due to change in vertex distance</li></ul>

## What needs to be learned

### Learning outcome 3: Understand the British Standard of measurement of spectacle frames and how it applies to dispensing.

#### 3A Frame Measurement

- Use of horizontal centre line (HCL) as point of reference
- crest height - the vertical distance measured from the HCL to the mid-point of the lower edge of the bridge
- angle of side - the vertical angle between a normal to the back plane of the front and the line of the side when opened (10mm)
- length to bend – length of side from dowel point to bend (135-145mm in adult);
- length of drop – length from bend to tip of side (30mm)
- head width - width from ear point to ear point (deduct 10mm for compensation)
- BVD adjusted to tested distance. adjust to recommended measurements where necessary

#### 3B Quality Inspection

- Tension of spring joints; tension of closing blocks; lens security; cosmetic appearance; symmetry between right and left sides; measurements and adjustments maintained

#### 3C Measurement of Multifocals

- Bifocals; accurate frame fit; ask patient about use of bifocals; segment type; segment top; binocular pupillary distance; patient's posture when standing and sitting; lower limbus to the bottom of the lens
- Progressives; accurate frame fit; consult with patient regarding lens type and use; natural head position of patient; sit at eye level with patient; monocular pupillary distance, measure the height from the pupil centre to the deepest point of the frame in each eye

#### 3D Importance of Measurements

- Three prescriptions to be accurately placed in the lens; patient could look through wrong prescription; distortion in distance; headaches; reduced field of view; unable to use near zone; safety e.g. driving; loss of confidence with lens type



## Essential information for tutors and assessors

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### Essential resources

Learners undertaking this qualification will need access to an optical practice and a registered dispensing optician/ optometrist.

Staff supervising this unit should be occupationally competent and registered with the General Optical Council. They should have recent experience of optical practice and be able to demonstrate evidence of continuing professional development in order to maintain their registration with the General Optical Council. Exceptions to the requirement for registration may apply in Ireland.

### Assessment

This unit is internally assessed. To pass this unit, the evidence that learners present for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria.

The assessment for this unit should be set in a specific organisational context, it should draw on learning from the unit and be designed in a way that enables learners to meet all the assessment criteria.

A recommended assessment approach is given below. Centres are free to create their own assessment as long as they are confident it enables learners to provide suitable and sufficient evidence to meet the stated standard of the assessment criteria and achieve the learning outcomes.

### Learning outcome(s) 1. Understand the materials used in spectacle frames

An example of an assignment to cover this learning outcome could be to construct a table of at least 8 frame materials (4 metal, 4 plastic) with columns for properties, advantages and disadvantages. The learner must complete the table providing details for each column. The table can then be used for reference by the learner to identify frame materials for selected frames, explaining the advantages and disadvantages of each material in a discussion with their supervisor.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Identify the material that a frame is manufactured from the give details of its features. (AC 1.1)
2. Give a clear account of the properties of at least 8 materials (4 plastic, 4 metal). (AC 1.2)
3. Provide details of advantages and disadvantages of each material, including benefits and limitations for a wearer. (AC 1.3 and 1.4)

## **Learning outcome(s) 2. Understand how spectacle frames are selected and adjusted to ensure fit for purpose.**

An example assignment to cover this learning outcome could be a practical exercise involving selecting an appropriate frame for a subject, carrying out the correct measurements and making the necessary adjustments to ensure a good fit. The learner could also give a written account of their measurements, considerations, components adjusted, consequences if not done accurately and provide photographic evidence of their selected frame before and after fitting.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give a clear account of the components of the frame that required adjustment. (AC 2.1)
2. Provide details of any considerations in relation to frame selection and positioning. (AC 2.2)
3. Provide details of adjustments performed and the reasons for them. (AC 2.3)
4. Give an account of the consequences of a poorly fitted frame. (AC 2.4)

## **Learning outcome(s) 3. Understand the British Standard of measurement of spectacle frames and how it applies to dispensing**

An example assignment to cover this learning outcome could be a series of practical exercises, one involving selecting an appropriate frame for a subject, carrying out the correct measurements and making the necessary adjustments to ensure a good fit. The second one involving selecting an appropriate frame for multifocal lenses, carrying out the necessary measurements and given a written account of the importance of the accuracy of those measurements. The final exercise could be to carry out a quality inspection on 10 pairs of completed spectacles and provide photographic evidence of their findings.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Demonstrate the measurement of spectacle frames to British Standards. (AC 3.1)
2. Give an account of the components of the spectacles checked in a quality inspection. (AC 3.2)
3. Provide details on how to measure vertical heights for multifocal lenses and the importance of the accuracy. (AC 3.3 and 3.4)

## Unit 6: Principles of Light Applied to Optics

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Level: 2

Unit type: **Mandatory**

Guided learning hours: 9

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### Unit introduction

This unit introduces the learner to the principles of light relevant to optics.

You will study the key concepts relating to the propagation and movement of waves, including interactions with objects. Learners will learn how to calculate the velocity, frequency and wavelength of waves. The types of electromagnetic radiation will also be studied. Learners will consider the effect of this radiation on the eye and how best to protect them from the damaging effects.

### Learning outcomes and assessment criteria

To pass this unit, learners need to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

Learning outcomes		Assessment criteria	
1	Understand basic principles of light	1.1	Explain key concepts relating to the propagation, properties and movement of waves
		1.2	Explain the relationship between the properties of a wave: <ul style="list-style-type: none"><li>• Frequency</li><li>• Velocity</li><li>• Wavelength</li></ul>
		1.3	Describe the interaction of light waves with objects in their path
2	Understand the electromagnetic spectrum and how it affects the human eye	2.1	Outline the components of the electromagnetic spectrum that would have long-term effects on the pathology of the eye
		2.2	Describe how to protect the eye against the effects of electromagnetic radiation
		2.3	Describe the components of the visible spectrum

## Unit content

What needs to be learned
<b>Learning outcome 1: Understand basic principles of light which are relevant to optical theory</b>
<b>1A Key concepts</b> <ul style="list-style-type: none"><li>• Propagation: speed; index of refraction; refraction; reflection; diffraction; interference</li><li>• Properties: travel; can be bent (refraction); reflected; energy; speed</li><li>• Movement of light waves: bending; angle of refraction; reflection; scattering</li></ul> <b>1B Properties of a wave</b> <ul style="list-style-type: none"><li>• Frequency; velocity; wavelength; <math>v = f\lambda</math></li></ul> <b>1C Interactions between light waves and objects</b> <ul style="list-style-type: none"><li>• Different material densities; altered speed; refraction; liquids; glass; Perspex</li><li>• Solids; smooth surface: reflection; rough surface: scattering</li><li>• Interference; spatial pattern of the waves</li></ul>
<b>Learning outcome 2: Understand the electromagnetic spectrum and how it affects the human eye</b>
<b>2A Electromagnetic radiation</b> <ul style="list-style-type: none"><li>• Effects on the eye by UV and IR: categorisation required- UVA, UVB, UVC; can cause cataract; damage to tissue around the eye; pterygium; skin cancer; age-related macular degeneration</li></ul> <b>2B Protect the eye</b> <ul style="list-style-type: none"><li>• Protection against UV and infrared radiation; UV filters; G15 tints; transitions lenses; polarising lenses; wide-brimmed hat or cap; large sunglasses; shaded areas</li></ul> <b>2C Visible spectrum</b> <ul style="list-style-type: none"><li>• The section of the electromagnetic radiation spectrum visible to the human eye; red; orange; yellow; green; blue; violet</li></ul>

## Essential information for tutors and assessors

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### Essential resources

There are no special resources needed for this unit.

### Assessment

This unit is internally assessed. To pass this unit, the evidence that learners present for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria.

The assessment for this unit should be set in a specific organisational context, it should draw on learning from the unit and be designed in a way that enables learners to meet all the assessment criteria.

A recommended assessment approach is given below. Centres are free to create their own assessment as long as they are confident it enables learners to provide suitable and sufficient evidence to meet the stated standard of the assessment criteria and achieve the learning outcomes.

### Learning outcome 1: Understand basic principles of light

Learning outcome 1 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learners' understanding of the basic principles of light. The learner would be asked to calculate the velocity, frequency and wavelength of a wave and upload their calculations as evidence.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give a clear account of key concepts relating to the propagation, properties and movement of waves, using the learner's own words (AC1.1)
2. Calculate velocity, frequency and wavelength of a wave (AC1.2)
3. Provide details of how light waves interact with objects in their path (AC1.3)

## **Learning outcome 2: Understand the electromagnetic spectrum and how it affects the human eye**

Learning outcome 2 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, assessing the learners' understanding of the electromagnetic spectrum and how it affects the eye.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Outline the different types of electromagnetic radiation and their effects on the human eye (AC2.1)
2. Provide a clear account of the methods of protection relating to electromagnetic radiation in optical dispensing (AC2.2)
3. Provide details of the components of the visible spectrum (AC2.3)

## Unit 7: Roles and Responsibilities in Optical Practice

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Level: **3**

Unit type: **Mandatory for Optometric Clinical Assistant**

Guided learning hours: **33**

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### Unit introduction

This unit enables learners to gain the knowledge and understanding of the principles and responsibilities of their role, including delegated functions and health and safety procedures.

You will study the principles of effective communication, learning about how to adapt your communication to different situations in optical practice. You will learn about the tasks commonly delegated to an assistant, looking at the purpose of the task, customer selection and the relevant workplace procedures. You will learn how to perform four delegated tasks (non-contact tonometry, visual field testing, digital fundus imaging and a colour vision test) and understand how to provide the results of these in the correct format. The importance of the customer record will also be covered, along with any relevant health and safety procedures.

### Learning outcomes and assessment criteria

To pass this unit, learners need to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

Learning outcomes		Assessment criteria	
1	Understand features of effective communication in optical practice	1.1	Describe elements and styles of communication
		1.2	Explain the principles of effective communication
		1.3	Explain how to adapt communication to different situations relating to optical practice
		1.4	Explain how communication can be used to give a customer a positive experience
		1.5	Explain how to provide accurate clinical information to: <ul style="list-style-type: none"><li>• customers</li><li>• colleagues</li></ul>

Learning outcomes		Assessment criteria	
2	Understand the principles and procedures involved in tasks supported by the assistant	2.1	Explain the purpose of non-contact tonometry to include how and why the instrument is used
		2.2	Describe the significance of intraocular pressure
		2.3	Identify the sources of error in non-contact tonometry
		2.4	Explain how to correct sources of error in non-contact tonometry
		2.5	Demonstrate non-contact tonometry, following workplace procedures
		2.6	Explain the purpose of visual field testing to include: <ul style="list-style-type: none"> <li>• why a visual field test may be performed</li> <li>• how the visual field instrument is used</li> </ul>
		2.7	Demonstrate a visual field test, following workplace procedures
		2.8	Explain how to minimise sources of error in visual field screening
		2.9	Describe common causes of visual field loss
		2.10	Identify terms used in relation to visual field assessment
		2.11	Explain the purpose of digital fundus imaging to include the: <ul style="list-style-type: none"> <li>• importance of imaging</li> <li>• different methods of image capture</li> </ul>
		2.12	Demonstrate the accurate capture of a digital fundus image following workplace procedures
		2.13	Identify key structures on digital fundus images
3	Understand clinical measurements performed in the consulting room	3.1	Identify charts used for people who cannot use the Snellen chart: <ul style="list-style-type: none"> <li>• young children</li> <li>• non-verbal</li> <li>• those who are unable to read English</li> </ul>
		3.2	Explain the most common inherited colour vision defect, including the prevalence, and significance for: <ul style="list-style-type: none"> <li>• customer lifestyle</li> <li>• customer occupations</li> </ul>



Learning outcomes		Assessment criteria	
		3.3	Demonstrate the colour vision test most commonly used in own workplace
		3.4	Describe binocular vision
		3.5	Identify common tests for stereopsis
4	Understand the information required for delegated or supported tasks	4.1	Demonstrate how to record the results of common delegated tasks including information given by the customer
		4.2	Explain the information contained within a customer record and its importance
		4.3	Identify common terms and abbreviations used in optometric services
		4.4	Describe the information about tests that can be communicated to the customer by an assistant
		4.5	Identify who can discuss the results of a test with a customer
5	Understand selected health and safety procedures and standards	5.1	Explain the procedures involved in maintaining the consulting room
		5.2	Explain the procedures for infection control and hygiene
		5.3	Explain the importance of good hygiene practice including hand washing

## Unit content

What needs to be learned
<b>Learning outcome 1: Understand features of effective communication in optical practice</b>
<b>1A Communication elements and styles</b> <ul style="list-style-type: none"><li>• Elements: language; tone and intonation; body language; active listening; open and closed questions; non-verbal communication; observation</li><li>• Styles: passive; assertive; aggressive</li></ul>
<b>1B Effective communication</b> <ul style="list-style-type: none"><li>• Shared understanding; exchange of information; clear delivery; questioning; match language to the individual; concise; accurate; use of body language; positive approach; clarifying understanding; intonation; active listening; respect; repetition of important messages</li></ul>
<b>1C Adapt communication</b> <ul style="list-style-type: none"><li>• Approach adapted to the situation; active listening; observe body language; match language and message to the individual; check understanding; acknowledgement of content of discussion; use of aids to reinforce message; encouragement; awareness of needs/preferences</li></ul>
<b>1D Positive experience</b> <ul style="list-style-type: none"><li>• Positive approach; sharing of information; confirm understanding; advice; guidance; support</li></ul>
<b>1E Accurate clinical information</b> <ul style="list-style-type: none"><li>• Maintenance of own knowledge/competence/practice; checking details/data; sources of information; clear; concise; accurate</li><li>• Customer: verbal; clear; accurate; refer to optometrist to discuss results</li><li>• Colleague: completion of customer record; complete; concise; accurate</li></ul>
<b>Learning outcome 2: Understand the principles and procedures involved in tasks supported by the assistant</b>
<b>2A Non-contact tonometry</b> <ul style="list-style-type: none"><li>• Measures intraocular pressure; machine called tonometer; does not touch eye; uses a puff of air to flatten the cornea; no need for numbing eye drops;</li></ul>
<b>2B Intraocular pressure</b> <ul style="list-style-type: none"><li>• Fluid pressure inside the eye; detection of glaucoma; ocular hypertension; detection of other pathologies like retinal detachment; intraocular pressure can vary depending on the time of day</li></ul>

## What needs to be learned

### 2C Sources of error

- Faults with equipment; issues with customer fixation; customer behaviour (e.g. blinking, jumping or squeezing lids together)

### 2D Correct sources of error

- Maintenance of equipment; explanation of test to customer; ensure accurate positioning of customer; repeat readings

### 2E Perform non-contact tonometry

- Preparation of machine; explanation of test to customer; positioning; hygiene; repetition of readings; recording results

### 2F Visual field testing

- Measures extent of a customer's peripheral vision; can detect dysfunction in central/peripheral vision which may be caused by various conditions such as age-related macular degeneration, optic neuropathy, retinal detachment; confrontational visual field testing and use of an Amsler grid; results are used to determine field of vision
- Reasons visual field test may be performed include risk of glaucoma, vascular disease, suspected tumours, unexplained headaches, retinal disease, suprathreshold tests; threshold tests

### 2G Perform a visual field test

- Preparation of machine; explanation of test to customer; hygiene; recording results

### 2H Minimise sources of error

- Effective communication; check equipment; correct use of equipment; check results; positioning; lighting; refractive error

### 2I Common causes

- Glaucoma; cataract; vascular diseases; tumours; retinal disease; hereditary disease; optic neuritis and other inflammatory processes; nutritional deficiencies; toxins; drugs

### 2J Terms used

- Scotoma: a partial loss or blind spot in an otherwise normal visual field

### 2K Digital imaging

- non-invasive; photographic record; able to view changes over time; disease progression; digital fundus photography captures a 2D image; optical coherence tomography (OCT) captures a 3D cross-section of the retina

What needs to be learned
<p><b>2L Accurate capture</b></p> <ul style="list-style-type: none"> <li>Preparation of machine; explanation of test to customer; positioning; hygiene; ensure key structures are visible; repeat images if unclear</li> </ul> <p><b>2M Key structures</b></p> <ul style="list-style-type: none"> <li>Optic nerve head, macula, fovea, retinal vascular structure</li> </ul>
Learning outcome 3: Understand clinical measurements performed in the consulting room
<p><b>3A Charts</b></p> <ul style="list-style-type: none"> <li>Kay picture test; Sheridan-Gardiner test (matching test)</li> </ul> <p><b>3B Colour vision defects</b></p> <ul style="list-style-type: none"> <li>Red-green colour defects; more prevalent in males</li> <li>Impact: may affect job opportunities as unable to differentiate between colours; health and safety; well-being; opportunities; hobbies; art; map reading; can impact learning</li> </ul> <p><b>3C Perform colour vision test</b></p> <ul style="list-style-type: none"> <li>Explanation of test to customer; recording results</li> </ul> <p><b>3D Binocular vision</b></p> <ul style="list-style-type: none"> <li>Both eyes working together to create a single image; depth perception</li> </ul> <p><b>3E Common tests for stereopsis</b></p> <ul style="list-style-type: none"> <li>Titmus Fly Test; TNO Stereo Test; Frisby Stereo Test; Lang Stereo Test</li> <li>Optical assistants should not offer any advice on the results of clinical tests</li> </ul>
Learning outcome 4: Understand the information required for delegated or supported tasks
<p><b>4A Record the results</b></p> <ul style="list-style-type: none"> <li>Accuracy; confidentiality; legibility</li> </ul> <p><b>4B Customer record</b></p> <ul style="list-style-type: none"> <li>Date of test; customer details; test results; clinical details; dispensing details; identification of people responsible for tests/assessments/recording; prescriptions; referral; advice given; recall period</li> </ul>

## What needs to be learned

### 4C Common terms and abbreviations

- Terms: depth perception; visual acuity; floaters; flashes; retinal detachment; macular degeneration; glaucoma; ocular hypertension; diabetic retinopathy
- Abbreviations:
  - ABDO, Association of British Dispensing Opticians
  - AOP, Association of Optometrists
  - GOC, General Optical Council
  - GP, General practitioner
  - IOP, intraocular pressure
  - VA, visual acuity
  - VF, visual field
  - Rx, prescription
  - Px, patient
  - DV, distance vision
  - NV, near vision
  - RE, right eye
  - LE, left eye
  - BE, both eyes
  - PD, interpupillary distance
  - Add, reading addition
  - OH, ocular history
  - FOH, family ocular history
  - NPC, near point of convergence
  - CD, cup to disc ratio (used when describing the appearance of the optic nerve head)

### 4D Information about tests

- Process of testing; problems with testing
- Optical assistants should not offer any advice on the results of clinical tests

### 4E Discuss test results

- Optometrist will go through the results of all tests during the sight test

## What needs to be learned

### Learning outcome 5: Understand selected health and safety procedures and standards

#### 5A Maintaining the consulting room

- Hygiene; health and safety; infection control; maintenance of equipment; stock maintenance and control; accessibility of records/information

#### 5B Infection control and hygiene

- Hand hygiene; waste disposal; sterility; personal protective equipment; disinfection

#### 5C Importance of good hygiene

- Reduce risk of infection to customer/staff; prevent cross-contamination

## Essential information for tutors and assessors

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### Essential resources

For this unit, learners will need access to a non-contact tonometer and a visual field machine.

### Assessment

This unit is internally assessed. To pass this unit, the evidence that learners present for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria.

The assessment for this unit should be set in a specific organisational context, it should draw on learning from the unit and be designed in a way that enables learners to meet all the assessment criteria.

A recommended assessment approach is given below. Centres are free to create their own assessment as long as they are confident it enables learners to provide suitable and sufficient evidence to meet the stated standard of the assessment criteria and achieve the learning outcomes.

### Learning outcome 1: Understand features of effective communication in optical practice

Learning outcome 1 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, to include some case-based questions, assessing the learners' understanding of the importance of effective communication and adapting communications to the individual.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details of the different elements and styles of communication using the learner's own words (AC1.1)
2. Give a clear account of the principles of effective communication (AC1.2)
3. Through the consideration of different case scenarios, detail how best to adapt communication to situations which could arise in optical practice (AC1.3)
4. Give a clear account of how communication can be used to give customers a positive experience within optical practice, giving reasons to support the points made (AC1.4)
5. Give a clear account of how to provide accurate clinical information to customers and colleagues using the learner's own words (AC1.5)

## **Learning outcome 2: Understand the principles and procedures involved in tasks supported by the assistant**

Learning outcome 2 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assignment to cover this learning outcome could be a discussion with an optometrist and a practical demonstration of the stated tasks. During the discussion, the learner would be required to provide information on the purpose of both non-contact tonometry, visual field testing and digital imaging. They should be able to identify potential sources of errors and be aware of how to minimise these. Details of any relevant workplace procedures for these tasks should be provided.

The discussion would be followed by short answer questions to provide evidence of their learning.

To achieve this learning outcome, the learner must be able to demonstrate their ability to competently perform non-contact tonometry, a visual field test and accurately capture a digital fundus image (either by digital retinal photography or OCT). The practical demonstrations of these tasks should be recorded in a logbook and used as evidence to support the relevant ACs.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details on the purpose of non-contact tonometry to include how and why the instrument is used (AC2.1)
2. Provide details on the significance of intraocular pressure (AC2.2)
3. Identify potential sources of error when performing non-contact tonometry (AC2.3)
4. Give a clear account of how to correct sources of error in non-contact tonometry (AC2.4)
5. Perform non-contact tonometry following any relevant workplace procedures (AC2.5)
6. Provide details on the purpose of visual field testing (AC2.6)
7. Perform a visual field test following any relevant workplace procedures (AC2.7)
8. Give a clear account of how to minimise sources of error during visual field screening (AC2.8)
9. Provide details on the common causes of visual field loss (AC2.9)
10. Identify terms used in relation to visual field assessment (AC2.10)
11. Provide details on the purpose of digital fundus imaging (AC2.11)
12. Perform accurate capture of a digital fundus image (AC2.12)
13. Identify key structures on a digital fundus image (AC2.13)



### **Learning outcome 3: Understand clinical measurements performed in the consulting room**

Learning outcome 3 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assignment to cover this learning outcome could be the development of an information leaflet, assessing the learners' understanding of the alternatives to the Snellen chart and details on colour vision defects. The learner should also demonstrate their understanding of binocular vision and the common tests for stereopsis.

To achieve this learning outcome, the learner must also be able to demonstrate their ability to competently perform a colour vision test. The practical demonstration of this tasks should be recorded in a logbook and used as evidence to support the relevant ACs.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Identify charts used for people who cannot use the Snellen chart, including children and non-verbal customers (AC3.1)
2. Provide details on colour vision defects to include their frequency and significance for customer lifestyle and occupations (AC3.2)
3. Provide details on the colour vision test most frequently used in their workplace (AC3.3)
4. Provide a clear account of what is meant by binocular vision in the learner's own words (AC3.4)
5. Identify the common tests for stereopsis (AC2.16)

### **Learning outcome 4: Understand the information required for delegated or supported tasks**

Learning outcome 4 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assessment to cover this learning outcome could be a discussion with an optometrist and the completion of a customer record with the relevant information from delegated tasks. During the discussion, the learner would be required to describe the format of the customer record, the information contained within it and the importance of the information. The discussion should cover any common abbreviations to confirm learner understanding and the learner should be able to identify who can share information with the customer about any test results.

The discussion would be followed by short answer questions to provide evidence of their learning.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Record the results of common delegated tasks (including information given by the customer) in the format required by the learner's workplace (AC4.1)
2. Provide a clear account of the information contained within a customer record and detail why it is important (AC4.2)
3. Identify common terms and abbreviations used in optical practice (AC4.3)
4. Give details of the information that they may communicate to the customer, in their role as an assistant, about clinical tests (AC4.4)
5. Identify the role(s) within optical practice who can discuss the results of a test with a customer (AC4.5)

### **Learning outcome 5: Understand selected health and safety procedures and standards**

Learning outcome 5 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assignment to cover this learning outcome could be the development of a training session for colleagues, assessing the learners' understanding of the importance of health and safety procedures.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide a clear account of the procedures involved in maintaining the consulting room using the learner's own words (AC5.1)
2. Give details of the procedures for infection control and hygiene. Reference should be made to any relevant procedures within the learner's workplace (AC5.2)
3. Give details of the importance of good hygiene practice, including handwashing, giving reasons to support the points made (AC5.3).

## Unit 8: Procedures in Contact Lens Practice

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Level: **3**

Unit type: **Mandatory for Optometric Clinical Assistant**

Guided learning hours: **16**

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### Unit introduction

The aim of this unit is to enable learners to develop knowledge and understanding of contact lens aftercare procedures and more advanced applications of contact lenses.

In this unit, you will learn the characteristics of aftercare appointments, the information obtained and problems that can be identified during this crucial part of the customer journey. You will also learn about the use of contact lenses for patients with more complex refractive errors, such as astigmatism or presbyopia and some special uses for contact lenses, such as therapeutics.

### Learning outcomes and assessment criteria

To pass this unit, learners need to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

Learning outcomes		Assessment criteria	
1	Understand contact lens aftercare	1.1	Explain the characteristics of aftercare appointments to include: <ul style="list-style-type: none"><li>• importance</li><li>• purpose</li><li>• content</li></ul>
		1.2	Explain the role of the assistant in the aftercare of contact lenses
		1.3	Identify the information which should be obtained from and shared with the patient

Learning outcomes		Assessment criteria	
2	Understand the problems which may be detected at aftercare	2.1	Explain the problems which can occur in contact lens wear to include: <ul style="list-style-type: none"> <li>• risk factors</li> <li>• signs</li> <li>• symptoms</li> </ul>
		2.2	Describe the procedures used in aftercare to: <ul style="list-style-type: none"> <li>• detect problems,</li> <li>• assess the severity of problems</li> </ul>
		2.3	Describe instrumentation used by contact lens practitioners and their use
3	Understand contact lenses for non-spherical prescriptions and special uses	3.1	Explain the considerations of contact lens wear for patients with astigmatism
		3.2	Describe the design of contact lenses for patients with astigmatism
		3.3	Explain the methods of contact lens correction used for patients who are presbyopic
		3.4	Describe tinted and cosmetic contact lenses and their uses
		3.5	Identify the uses of therapeutic contact lenses
		3.6	Describe refractive surgery as an alternative to contact lenses

## Unit content

What needs to be learned
<b>Learning outcome 1: Understand contact lens aftercare</b>
<b>1A Aftercare characteristics</b> <ul style="list-style-type: none"><li>• Importance: continuing care; maintenance; legislator requirements; duty of care; contractual requirements; wellbeing.</li><li>• Purpose: advice; guidance; checks; assessment; comfort; vision.</li><li>• Content: assessment; checks; guidance; re-fitting if required; comfort; vision after care; cleaning/storage; contact lens check; ocular health check; removal/insertion; approval of further lenses.</li></ul>
<b>1B Assistant Role in Aftercare</b> <ul style="list-style-type: none"><li>• Advice; guidance; support; demonstration; ordering; checking lens order; appointment booking; follow ups</li></ul>
<b>1C Information Obtained</b> <ul style="list-style-type: none"><li>• Rate comfort; wearing pattern; vision; problems; adjustments; new products; assessment; solution sensitivity – any irritation?</li></ul>
<b>Learning outcome 2: Understand the problems which may be detected at aftercare</b>
<b>2A Problems</b> <ul style="list-style-type: none"><li>• Risk factors: lifestyle; overuse; infection; irritation; loss; scratching; damage; lens stuck; aftercare; storage.</li><li>• Signs: redness; puffiness; swelling; bleeding; poor vision.</li><li>• Symptoms: itching; headaches; blurred vision; dryness.</li><li>• Management: cleaning; storage; insertion; removal; disposal.</li></ul>
<b>2B Procedures</b> <ul style="list-style-type: none"><li>• Detect problems: assessment; observation; questioning; feedback; correct use of lenses; correct care of lenses; adhering to wear times.</li><li>• Assess the severity of problems: observation; feedback; inflammation; pain levels; impact on vision; issues indicated.</li></ul>
<b>2C Instrumentation</b> <ul style="list-style-type: none"><li>• Slit lamp – interaction between lens and eye, integrity of the cornea and conjunctiva, lid margin tear film</li><li>• Corneal topographer – maps corneal surface, diagnose keratoconus</li><li>• Keratometer – assess amount of astigmatism, measures curvature of anterior surface of cornea.</li></ul>

## What needs to be learned

### Learning outcome 3: Understand contact lenses for non-spherical prescriptions and special uses

#### 3A Contact Lenses for Astigmatism

- Availability; reduced vision compared to spectacles; comfort; handling to ensure correct position of insertion; position of wear

#### 3B Contact Lens design

- Toric lens; thickened using prism ballast; engraved to show meridian positions; dynamic stabilisation; rigid gas permeable

#### 3C Contact Lenses for Presbyopia

- Multifocal lenses; monovision; partial monovision contact lenses; over –readers

#### 3D Tinted and Cosmetic Lenses

- Coloured; tinted/ UV filter; photochromic; eye colour enhancement; lifestyle; comfort; preference; appearance; UV protection; leisure activities.

#### 3E Therapeutic Lenses

- Healing properties; abrasions; wound closure; application of medication; ulcers; chemical burns; lacerations; post-operative use; method of use – bandage; use in kerataconus.

#### 3F Refractive Surgery

- Any surgical procedure used to correct vision problems; vision correction surgery work by reshaping the cornea so that light travelling through it is properly focused onto the retina located in the back of the eye; other types involve replacing the eye's natural lens and inserting a powered intra ocular lens; risks and benefits of surgery.

## Essential information for tutors and assessors

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### Essential resources

There are no special resources needed for this unit.

### Assessment

This unit is internally assessed. To pass this unit, the evidence that learners present for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria.

The assessment for this unit should be set in a specific organisational context, it should draw on learning from the unit and be designed in a way that enables learners to meet all the assessment criteria.

A recommended assessment approach is given below. Centres are free to create their own assessment as long as they are confident it enables learners to provide suitable and sufficient evidence to meet the stated standard of the assessment criteria and achieve the learning outcomes.

#### **Learning outcome 1 Understand Contact Lens Aftercare**

An example of a suitable assignment to cover this learning outcome could be for the learner to observe an aftercare taking place in a practice and provide a written summary of what they observed.

**To satisfy the assessment criteria for this learning outcome**, learners will:

1. Provide details on the importance, content and purpose of an aftercare appointment. (AC 1.1)
2. Provide a summary of the role of the assistant during the aftercare. (AC 1.2)
3. Show the information obtained during the aftercare appointment. (AC 1.3)

#### **Learning outcome 2 Understand the problems which may be detected at aftercare.**

An example of a suitable assignment to cover this learning outcome could be for the learner to observe an aftercare appointment taking place in a practice and provide a written account of the problems that can occur, and the procedures used to detect them.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give a clear account in their own words, of the problems that can occur in contact lens wear in relation to risk factors, signs, symptoms and management. (AC 2.1)
2. Give a clear account in their own words of how problems can be detected, and the severity assessed. (AC 2.2)
3. Give a clear account of the instrumentation used in contact lens practice. (AC 2.3)

### **Learning outcome 3 Understand contact lenses for non-spherical prescriptions and special uses.**

An example of a suitable assignment to cover this learning outcome could be a case-based question and answer paper, assessing the learner's knowledge of contact lens availability and designs for the relevant refractive errors and special uses.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details of the considerations of contact lens wear for a patient with astigmatism in relation to product availability and use. (AC 3.1)
2. Give an account of the available designs of contact lenses for astigmatism. (AC 3.2)
3. Provide details of the options for contact lenses for presbyopic patients. (AC 3.3)
4. Give an account of the uses for tinted and cosmetic lenses. (AC 3.4)
5. Give an account of the main features of the use of therapeutic contact lenses (AC 3.5)
6. Give an account of refractive surgery and its risks and benefits. (AC 3.6)



## Unit 9: Communication in Optical Customer Service

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Level: **3**

Unit type: **Mandatory for Ophthalmic Dispensing Assistant**

Guided learning hours: **18**

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### Unit introduction

As an optical assistant, you will encounter dozens of customers each day, whether making appointments, taking details, assisting the optometrist or dispensing optician, by performing certain procedures, or answering telephone enquiries. This unit enables you to gain the knowledge and understanding of the principles of communication required to communicate effectively to optical sector customers throughout the customer journey.

You will study the principles of effective communication, including language, tone and intonation. Both verbal and non-verbal elements of communication will be considered. You will learn about the importance of open and closed questioning and active listening, alongside techniques for managing challenging situations. Learners will also understand the importance of good communication when working within a team.

### Learning outcomes and assessment criteria

To pass this unit, learners need to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

Learning outcomes		Assessment criteria	
1	Understand the skills required for effective communication in optical customer service	1.1	Explain the principles of effective communication in optical customer interactions
		1.2	Explain how to adapt own communication style in an appropriate way for different customers
		1.3	Identify possible concerns that an optical customer may have
		1.4	Describe procedures for responding to customer concerns
		1.5	Explain the importance of customer records in relation to the data contained within them
		1.6	Explain the importance of good working relationships within own place of work

Learning outcomes		Assessment criteria	
2	Understand communication methods	2.1	Explain different communication methods
		2.2	Explain the benefits of good communication
		2.3	Explain the potential consequences of poor communication
3	Understand customer service in the optical sector	3.1	Describe a customer journey at own place of work
		3.2	Explain the importance of managing optical customers' expectations
		3.3	Describe how to deliver a positive customer experience
		3.4	Explain the operational standards relevant to own role
		3.5	Explain how to resolve conflict with customers or colleagues
		3.6	Explain the procedure for resolving customer complaints about spectacles or contact lenses
		3.7	Describe the principles of continuous improvement in customer service

## Unit content

What needs to be learned
<b>Learning outcome 1: Understand the skills required for effective communication in optical customer service</b>
<b>1A Effective communication</b> <ul style="list-style-type: none"><li>• Shared understanding; exchange of information; clear delivery; questioning; match language to the individual; avoid use of jargon; concise; accurate; use of body language; positive approach; clarifying understanding; intonation; active listening; respect; repetition of important messages</li></ul>
<b>1B Adapt communication</b> <ul style="list-style-type: none"><li>• Approach adapted to the situation; active listening; observe body language; match language and message to the individual; check understanding; acknowledgement of content of discussion; use of aids to reinforce message; encouragement; awareness of needs/preferences</li></ul>
<b>1C Possible concerns</b> <ul style="list-style-type: none"><li>• Test results; prescription; diagnosis; prognosis; outcomes; aftercare; cost</li></ul>
<b>1D Responding to customer concerns</b> <ul style="list-style-type: none"><li>• Listen; acknowledge concern; offer reassurance where possible; seek support as necessary</li></ul>
<b>1E Customer records</b> <ul style="list-style-type: none"><li>• Written clinical record; customer contact details; medical information; allergy information; record of test results; clinical details; dispensing details; identification of people responsible for tests/assessments/recording; prescriptions; referral; advice given; recall period; method of written communication between practice staff; critical to maintain integrity and accuracy of record</li></ul>
<b>1F Good working relationships</b> <ul style="list-style-type: none"><li>• Exchange of information between colleagues; seek advice; provide guidance; positive culture; increased customer confidence; improved customer experience; teamwork</li></ul>
<b>Learning outcome 2: Understand communication methods</b>
<b>2A Communication methods</b> <ul style="list-style-type: none"><li>• Verbal: language; tone; intonation</li><li>• Non-verbal: body language; eye contact; facial expression; posture</li><li>• Written: clarity; accuracy</li></ul>

## What needs to be learned

### 2B Good communication

- Understanding; reduction in errors/mistakes; good interpersonal skills; informed choices; customer benefits

### 2C Poor communication

- Mistakes; blame culture; misinterpretation; time wasting; question competence; ability; inconsistency; loss of customer base; negative impact on working relationships

## Learning outcome 3: Understand customer service in the optical sector

### 3A Customer journey

- Details of the journey from when the customer enters the store to when they leave; staff interactions; standard procedures completed; possible outcomes of visit; enhanced services/pathways vs. routine appointments

### 3B Managing expectations

- Customer retention; enhanced customer experience; customer engagement; customer satisfaction; duty of care; roles and responsibilities; requirements of service

### 3C Positive customer experience

- Positive approach; sharing of information; confirm understanding; advice; guidance; support

### 3D Operational standards

- Company/operational standards; health and safety; equality; data protection; customer confidentiality; infection control

### 3E Resolve conflict

- Non-aggressive approach; assertive; listen; two-way communication; identify issues; resolve issues where possible; seek advice/guidance where necessary; reporting; recording

### 3F Resolving customer complaints

- Acknowledge complaint; listen; invite customer feedback; problem solve; communicate with customer; review procedures; seek support as necessary

### 3G Continuous improvements

- Customer feedback; review; progression; adaptation; training; forward thinking; development

## Essential information for tutors and assessors

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### Essential resources

There are no special resources needed for this unit.

### Assessment

This unit is internally assessed. To pass this unit, the evidence that learners present for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria.

The assessment for this unit should be set in a specific organisational context, it should draw on learning from the unit and be designed in a way that enables learners to meet all the assessment criteria.

A recommended assessment approach is given below. Centres are free to create their own assessment as long as they are confident it enables learners to provide suitable and sufficient evidence to meet the stated standard of the assessment criteria and achieve the learning outcomes.

### **Learning outcome 1: Understand the skills required for effective communication in optical customer service**

Learning outcome 1 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, to include some case-based questions, assessing the learners' understanding of the importance of effective communication and adapting communications to the individual.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give a clear account of the principles of effective communication in optical customer interactions using the learner's own words (AC1.1)
2. Provide details of how to adapt their communication style for different customers (AC1.2)
3. Identify potential concerns of the optical customer (AC1.3)
4. Provide details of how to best respond to customer concerns, giving reasons to support the points made (AC1.4)

5. Provide details of the importance of customer records, including details of the significance of the data within them (AC1.5)
6. Give a clear account of the importance of good working relationships within their place of work (AC1.6)

### **Learning outcome 2: Understand communication methods**

Learning outcome 2 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assignment to cover this learning outcome could be a short question and answer paper, including case-based questions, assessing the learners' understanding of the benefits of good communication and identifying the consequences of poor communication.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give details of the different communication methods, using the learner's own words (AC2.1)
2. Provide a clear account of the benefits of good communication (AC2.2)
3. Give details of the potential consequences of poor communication with customers and colleagues (AC2.3)

### **Learning outcome 3: Understand customer service in the optical sector**

Learning outcome 3 assesses knowledge, so written evidence from the learner will be needed.

An example of a suitable assessment to cover this learning outcome could be a discussion with a dispensing optician, optometrist or store manager. The discussion would have to include information on the customer journey at their place of work. The learner would be required to describe the importance of managing customer's expectations and how to deliver a positive customer experience. The learner should be able to provide details of the operational standards relevant to their role and the principles of continuous improvement of customer service.

The discussion would be followed by short answer questions to provide evidence of their learning.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give a clear account of a customer journey at their place of work (AC3.1)
2. Provide details of the importance of managing optical customers' expectations, giving reasons to support the points made (AC3.2)

3. Give a clear account of how to deliver a positive customer experience (AC3.3)
4. Give a clear account of the operational standards relevant to their role and how they impact their working procedures, using the learner's own words (AC3.4)
5. Provide details of how to manage customer behaviour in difficult situations (AC3.5)
6. Provide details of the procedure for resolving customer complaints about spectacles in the learner's own words (AC3.6)
7. Give a clear account of the principles of continuous improvement of customer service in the optical practice (AC3.7)

## Unit 10: Procedures in Optical Dispensing

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Level: **3**

Unit type: **Mandatory for Ophthalmic Dispensing Assistant**

Guided learning hours: **22**

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### Unit introduction

The aim of this unit is to enable learners to develop their knowledge and understanding of ophthalmic lenses, their properties, uses and the procedures involved in dispensing them.

In this unit, you will learn about the properties of materials used in ophthalmic lens design and the effects they have on the thickness and visual performance of the lens. You will explore lens types, such as aspheric and progressive lenses, and the considerations and information required to dispense these lenses.

### Learning outcomes and assessment criteria

To pass this unit, learners need to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria determine the standard required to achieve the unit.

Learning outcomes		Assessment criteria	
1	Understand ophthalmic lens properties and their effects on visual performance	1.1	Explain how the following affect the performance of an ophthalmic lens material: <ul style="list-style-type: none"><li>• refractive index</li><li>• specific gravity</li><li>• V-value</li><li>• relative curvature</li></ul>
		1.2	Explain how lens thickness can be altered using different lens materials
		1.3	Calculate the finished thickness of a lens
		1.4	Explain the factors that need to be considered when dispensing high-index materials



Learning outcomes		Assessment criteria	
		1.5	Identify what information and advice needs to be given to the patient about high-index materials
		1.6	Explain the term decentration in relation to ophthalmic lenses
		1.7	Explain aberrations associated with ophthalmic lenses
2	Understand the dispensing of aspheric and progressive lenses	2.1	Describe the features and benefits of aspheric lenses
		2.2	Explain why the accuracy of measurements is important when dispensing aspheric lenses
		2.3	Describe how to use a focimeter to verify progressive lenses
		2.4	Explain the marks that are present on progressive lenses
		2.5	Explain the factors to be considered when assessing patient requirements for progressive lenses
		2.6	Explain the advice given to patients when dispensing progressive lenses to them for the first time
		2.7	Explain the considerations to be made when selecting frames in progressive lens dispensing
3	Understand ophthalmic lenses and their uses	3.1	Explain ophthalmic lens types that are available for specific occupations and lifestyle activities.
		3.2	Outline the questions asked when dispensing for: <ul style="list-style-type: none"> <li>• specific lifestyle</li> <li>• occupational purposes</li> </ul>
		3.3	Outline the following features of ophthalmic lenses: <ul style="list-style-type: none"> <li>• design</li> <li>• common lens tints</li> <li>• lens coatings</li> </ul>

## Unit content

What needs to be learned
<b>Learning outcome 1: Understand ophthalmic lens properties and their effects on visual performance</b>
<b>1A Ophthalmic Lens Materials</b> <ul style="list-style-type: none"><li>• Refractive index: classification of lens materials</li><li>• Specific gravity: density of lens materials</li><li>• V-value: dispersive power; optical clarity</li><li>• Relative curvature: gives focus or changes focus of vision</li></ul>
<b>1B Altering Lens Thickness</b> <ul style="list-style-type: none"><li>• Material density increases as lens thickness is reduced by increasing refractive index. The higher the index the thinner the lens will be.</li></ul>
<b>1C Calculating Lens Thickness</b> <ul style="list-style-type: none"><li>• Relative curvature formula; <math>RC = (n_{old} - 1) / (n_{new} - 1)</math>; expressed as percentage reduction in thickness; <math>1 - RC \times 100</math>; convert to millimetre reduction if necessary.</li></ul>
<b>1D High Index Considerations</b> <ul style="list-style-type: none"><li>• Frame choice; accuracy of measurements; vertex distance; anti-reflective coating required; cosmesis of lens; reduction in thickness; previous index patient had.</li></ul>
<b>1E High Index Information</b> <ul style="list-style-type: none"><li>• Advice in relation to increased weight of lenses; decreased impact resistance; care of anti-reflective coating; optical aberrations and colour fringes higher in high refractive index lens materials; care when driving initially; adaptation.</li></ul>
<b>1F Decentration</b> <ul style="list-style-type: none"><li>• A displacement, horizontal and/or vertical, of the centration point of a spectacle lens from the standard <b>optical</b> centre position.</li></ul>
<b>1G Aberrations</b> <ul style="list-style-type: none"><li>• Distortion - shape of image; can be pincushion or barrel; Oblique astigmatism – blurring of image; Chromatic Aberration – colour fringing; can cause eyestrain; headaches; alteration of a clear image; diplopia; colours at edge of lens.</li></ul>

## What needs to be learned

### Learning outcome 2: Understand the dispensing of aspheric and progressive lenses

#### 2A Aspheric Lenses

- Aspheric lenses: where either one, or both, surfaces are non-spherical, which means it could be toroidal or cylindrical; best form lenses; cosmetic advantages; thinner, flatter and lighter lenses; poorer off-axis performance.

#### 2B Aspheric Lens Measurements

- Lens centration; vertical; horizontal; accurate monocular pupillary distance; vertical heights; compensate measurements by deducting 1mm from vertical heights for every 2 degrees of pantoscopic tilt.

#### 2C Verification of Progressive Lenses

- Mark up lenses; correctly mount on focimeter stage; focus focimeter; verify distance prescription at distance verification ring; check near addition engraving.

#### 2D Progressive Lens Markings

- Manufacturer's engravings; fitting cross; abbreviated near addition; engraved logo.

#### 2E Considerations for Progressive Lenses

- Understanding use
- age – must be presbyopic
- may find difficult if have mobility impairment
- lifestyle - any hobbies that may be suitable for
- job role – is lens design compatible with tasks
- previous use of lenses
- leisure/sport activities - will reduction in peripheral vision present a problem
- any risk due to reduction of peripheral vision
- safety when driving
- health conditions that may make adaptation difficult due to neck movements or reduced mobility
- increased cost
- prescription suitability.

#### 2E Advice for patients

- Instructions on use; restrictions on peripheral vision; head positioning for best vision; adaption period; care when driving.

## What needs to be learned

### 2E Frame Selection

- Frame maintains adjustment; minimum fitting heights adhered to as recommended by supplier; adjustable nose pad; adjustable pantoscopic tilt; change of frame size from previous; vertex distance.

## Learning outcome 3: Understand ophthalmic lenses and their uses

### 3A Lens types

- Occupational lenses- enhanced readers, restricted distance; enlarged intermediate zones; polycarbonate material for impact resistant where safety a concern.

### 3B Lifestyle Questions

- Occupation: What does occupation involve?
- working distances
- any safety concerns?
- VDU use - how much?
- Screen position?
- risk assessments from the workplace
- legislative requirements.
- Lifestyle: Hobbies, sports
- any times that wearing spectacles present a problem?
- Periods of wear – full time/ part-time?

### 3C Spectacle Lens Features

- Design: corridor lengths; soft/hard design; freeform technology used; lens curvature; lens form.
- Tints: Dipped colour; UV protection; vacuum coated; polarised; photochromatic; comfort tint; driving specific tints.
- Coatings: Scratch resistant; anti-reflective; smudge resistant; hydrophobic.

## Essential information for tutors and assessors

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### Essential resources

Learners undertaking this unit will need access to an optical practice and a registered dispensing optician/ optometrist.

Staff supervising this unit should be occupationally competent and registered with the General Optical Council. They should have recent experience of optical practice and be able to demonstrate evidence of continuing professional development in order to maintain their registration with the General Optical Council. Exceptions to the requirement for registration may apply in Ireland.

### Assessment

This unit is internally assessed. To pass this unit, the evidence that learners present for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria.

The assessment for this unit should be set in a specific organisational context, it should draw on learning from the unit and be designed in a way that enables learners to meet all the assessment criteria.

A recommended assessment approach is given below. Centres are free to create their own assessment as long as they are confident it enables learners to provide suitable and sufficient evidence to meet the stated standard of the assessment criteria and achieve the learning outcomes.

### **Learning outcome 1 Understand ophthalmic lens properties and their effects on visual performance**

An example assignment to cover this learning outcome could be case scenarios and short answer questions where learner will select an appropriate lens for a patient based on the properties, calculate the thickness, explain any considerations and give details on information and advice given to patient.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details of refractive index, specific gravity, v-value and relative curvature in relation to ophthalmic lens materials. (AC 1.1)
2. Provide reasons for how lens thickness can be altered by changing the material. (AC 1.2)
3. Calculate reduction in lens thickness as a percentage using relative curvature formula. (AC 1.3)

4. Provide details of considerations when dispensing high-index lenses. (AC 1.4)
5. Give the purpose of information and advice given to patients on high-index materials. (AC 1.5)
6. Give an account of the term decentration in relation to ophthalmic lenses. (AC 1.6)
7. Provide details of aberrations and visual disturbances experienced by patients when using certain ophthalmic lenses. (AC 1.7)

## **Learning outcome 2 Understand the dispensing of aspheric and progressive lenses**

An example assignment to cover this learning outcome could be case scenarios where the learner will provide a written account of how they would dispense the patients contained in the scenarios with aspheric and progressive lens forms. Learner will include information on features and benefits, measurements, frame selection, advice and factors to be considered when assessing the patient's needs in each scenario.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Give a clear account of the features and benefits of aspheric lenses. (AC 2.1)
2. Provide details on the importance of the accuracy of measurements when dispensing aspheric lenses. (AC 2.2)
3. Give an account on the use of a focimeter to verify progressive lenses. (AC 2.3)
4. Provide details of the markings present on progressive lenses. (AC 2.4)
5. Provide details of the factors to be considered when assessing patient visual requirements (AC 2.5)
6. Provide details and reasons for the advice given to patients when first being given progressive lenses. (AC 2.6)
7. Provide details of the considerations for frame selection when dispensing progressive lenses. (AC 2.7)

## **Learning outcome 3 Understand ophthalmic lenses and their uses**

An example assignment to cover this learning outcome could be case scenarios where the learner will give a written account of ophthalmic lens types that would be suitable for a patient's specific lifestyle or occupation requirements, the questions the learner would need to ask the patient to ascertain these requirements and the features of these lenses including design, tints and coatings.

**To satisfy the assessment criteria for this learning outcome,** learners will:

1. Provide details of ophthalmic lens types to meet a patient's needs in a given scenario. (AC 3.1)
2. Provide details and reasons for questions asked about patient's lifestyle and occupation. (AC 3.2)
3. Give a clear description of the features of a lens type to include design, coatings and tints. (AC 3.3)

## 10 Suggested teaching resources

This section lists resource materials that can be used to support the delivery of the qualifications.

### Textbooks

Morgan, S – *The Complete Optometric Assistant* (Butterworth-Heinemann, 2008)  
ISBN 9780750688888

A H Tunnacliffe BA PhD Dip Maths DCLP FCOptom – *Essentials in Dispensing* (ABDO, 1998)  
ISBN 9780900099304

### Websites

[www.abdo.org.uk](http://www.abdo.org.uk)

Associate of Dispensing Opticians website.  
Provides support, membership, news and materials for Dispensing Opticians.

[www.jnjvisioncare.co.uk](http://www.jnjvisioncare.co.uk)

Website for Johnson & Johnson Vision.

[www.opticianonline.net](http://www.opticianonline.net)

Website providing support and news for optical professionals.

[www.zeiss.co.uk](http://www.zeiss.co.uk)

Zeiss website – provides information about news, events and research relating to optics and optoelectronics.



# 11 Appeals

Centres must have a policy for dealing with appeals from learners. Appeals may relate to assessment decisions being incorrect or assessment not being conducted fairly. The first step in such a policy is a consideration of the evidence by a Lead Internal Verifier or other member of the programme team. The assessment plan should allow time for potential appeals after learners have been given assessment decisions.

Centres must document all learners' appeals and their resolutions. Further information on the appeals process can be found in the document *Internal assessment in vocational qualifications: Reviews and appeals policy*, available on our website.

# 12 Malpractice

## Dealing with malpractice in assessment

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Malpractice means acts that undermine the integrity and validity of assessment, the certification of qualifications and/or may damage the authority of those responsible for delivering the assessment and certification.

Pearson does not tolerate actual or attempted actions of malpractice by learners, centre staff or centres in connection with Pearson qualifications. Pearson may impose penalties and/or sanctions on learners, centre staff or centres where malpractice or attempted malpractice has been proven.

Malpractice may occur or be suspected in relation to any unit or type of assessment within a qualification. For further details on malpractice and advice on preventing malpractice by learners, please see Pearson's *Centre guidance: Dealing with malpractice* available on our website.

The procedures we ask you to adopt vary between units that are internally assessed and those that are externally assessed.

Centres are required to take steps to prevent malpractice and to investigate instances of suspected malpractice. Learners must be given information that explains what malpractice is for internal assessment and how suspected incidents will be dealt with by the centre. The *Centre guidance: Dealing with malpractice* document gives full information on the actions we expect you to take.

Pearson may conduct investigations if we believe a centre is failing to conduct internal assessment according to our policies. The above document gives further information and examples, and details the penalties and sanctions that may be imposed.

In the interests of learners and centre staff, centres need to respond effectively and openly to all requests relating to an investigation into an incident of suspected malpractice.

### Learner malpractice

The head of centre is required to report incidents of suspected learner malpractice that occur during Pearson qualifications. We ask centres to complete Joint Council for Qualifications (JCQ) *Form M1* ([www.jcq.org.uk/exams-office/malpractice](http://www.jcq.org.uk/exams-office/malpractice)) and email it with any accompanying documents (signed statements from the learner, invigilator, copies of evidence, etc.) to the Investigations Processing team at [candidatemalpractice@pearson.com](mailto:candidatemalpractice@pearson.com). The responsibility for determining appropriate sanctions or penalties to be imposed on learners lies with Pearson.

Learners must be informed at the earliest opportunity of the specific allegation and the centre's malpractice policy, including the right of appeal. Learners found guilty of malpractice may be disqualified from the qualification for which they have been entered with Pearson.

Failure to report malpractice constitutes staff or centre malpractice.

## **Teacher/centre malpractice**

The head of centre is required to inform Pearson's Investigations team of any incident of suspected malpractice (which includes maladministration) by centre staff, before any investigation is undertaken. The head of centre is requested to inform the Investigations team by submitting a J/CQ M2 Form ([www.jcq.org.uk/exams-office/malpractice](http://www.jcq.org.uk/exams-office/malpractice)) with supporting documentation to [pqsmalpractice@pearson.com](mailto:pqsmalpractice@pearson.com). Where Pearson receives allegations of malpractice from other sources (for example Pearson staff, anonymous informants), the Investigations team will conduct the investigation directly or may ask the head of centre to assist.

Pearson reserves the right in cases of suspected malpractice to withhold the issuing of results/certificates while an investigation is in progress. Depending on the outcome of the investigation, results and/or certificates may not be released or they may be withheld.

We reserve the right to withhold certification when undertaking investigations, audits and quality assurance processes. You will be notified within a reasonable period of time if this occurs.

## **Sanctions and appeals**

Where malpractice is proven, we may impose sanctions or penalties, such as:

- mark reduction for affected external assessments
- disqualification from the qualification
- debarment from registration for Pearson qualifications for a period of time.

If we are concerned about your centre's quality procedures, we may impose sanctions such as:

- working with centres to create an improvement action plan
- requiring staff members to receive further training
- temporarily withholding certification of learners
- placing temporary blocks on registration of learners
- debarring staff members or the centre from delivering Pearson qualifications
- suspending or withdrawing centre approval status.

The centre will be notified if any of these apply.

Pearson has established procedures for centres that are considering appeals against penalties and sanctions arising from malpractice. Appeals against a decision made by Pearson will normally be accepted only from the head of centre (on behalf of learners and/or members or staff) and from individual members (in respect of a decision taken against them personally). Further information on appeals can be found in the JCQ appeals booklet: *A guide to the awarding bodies' appeals process*.

## 13 Further information and publications

- Edexcel, BTEC and Pearson Work Based Learning contact details: [qualifications.pearson.com/en/support/contact-us.html](https://qualifications.pearson.com/en/support/contact-us.html).
- Books, software and online resources for UK schools and colleges: [www.pearsonschoolsandcolleges.co.uk](http://www.pearsonschoolsandcolleges.co.uk).
- Our publications catalogue lists all the material available to support our qualifications. To access the catalogue and order publications, please visit our website.

All centres offering external assessments must comply with the Joint Council for Qualifications (JCQ) document *Instructions for conducting examinations*.

Further documents that support the information in this specification:

- *Access arrangements and reasonable adjustments* (JCQ)
- *A guide to the special consideration process* (JCQ)
- *Collaborative and consortium arrangements for the delivery of vocational qualifications policy* (Pearson)
- *UK information manual* (updated annually and available in hard copy) **or** *Entries and information manual* (available online) (Pearson).
- *Distance learning and assessment policy* (Pearson)

### Publisher information

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

# 14 Glossary

## Part A – General terminology used in specification

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Level	Units and qualifications have a level assigned to them. The level assigned is informed by the level descriptors defined by Ofqual, the qualifications regulator.
Guided learning hours (GLH)	This indicates the number of hours of activities that directly or immediately involve tutors and assessors in teaching, supervising, and invigilating learners, for example lectures, tutorials, online instruction and supervised study. Units may vary in size.
Total qualification time (TQT)	This indicates the total number of hours that a typical learner will take to complete the qualification. This is in terms of both guided learning hours but also unguided learning, for example private study, time spent in the workplace to master skills.
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	The assessment criteria specify the standard the learner is required to meet to achieve a learning outcome.
Unit content	This section sets out the required teaching content of the unit and specifies the knowledge, skills and understanding required for achievement of the unit. It enables centres to design and deliver a programme of learning that will enable learners to achieve each learning outcome and to meet the standard determined by the assessment criteria.
Summative assessment	Assessment that takes place after the programme of learning has taken place.
Valid assessment	The assessment assesses the skills or knowledge/understanding in the most sensible, direct way to measure what it is intended to measure.
Reliable assessment	The assessment is consistent and the agreed approach delivers the correct results on different days for the same learners and different cohorts of learners.

## Part B – Terms used in knowledge and understanding criteria

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Compare	Identify the main factors relating to two or more items/situations, explaining the similarities and differences or advantages and disadvantages, and in some cases say which is best and why.
Describe	Give a clear account in their own words, including all the relevant information (e.g. qualities, characteristics or events, etc.). Description shows recall and in some cases application.
Explain	Provide details and give reasons and/or evidence to support an opinion, view or argument.  OR  Provide details and give relevant examples to clarify and extend a point. This would usually be in the context of learners showing their understanding of a technical concept or principle.
Identify	Shows the main features or purpose of something. Can recognise it and/or name characteristics or facts that relate to it.
Outline	Provide a summary or overview or brief description.

# Annexe A

## Unit mapping overview

The table below shows the relationship between the new qualifications in this specification and the predecessor qualifications: Pearson BTEC Level 3 Certificate for Optometric Clinical Assistant (601/1839/8) and Pearson BTEC Level 3 Certificate for Ophthalmic Dispensing Assistant (601/1796/5) (last registration 31/12/2020).

Old units	Unit 1	Unit 2	Unit 3	Unit 4	Unit 5	Unit 6	Unit 7	Unit 8	Unit 9
New units	Unit 1	Unit 2	Unit 3	Unit 4	Unit 5	Unit 6	Unit 7	Unit 8	Unit 9
Unit 1	F								
Unit 2		F							
Unit 3			F						
Unit 4				F					
Unit 5							F		
Unit 6									
Unit 7					F				
Unit 8						F			
Unit 9								F	
Unit 10									F



## **KEY**

P – Partial mapping (some topics from the old unit appear in the new unit)

F – Full mapping (topics in old unit match new unit exactly or almost exactly)

X – Full mapping + new (all the topics from the old unit appear in the new unit but new unit also contains new topic(s))

# Annexe B

## Assessment strategy

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Assessment Principles for Qualifications that Assess Occupational Competence

**Version 4**

**November 2017**

### **1. Introduction**

- 1.1 Skills for Health is the Sector Skills Council (SSC) for the UK health sector.
- 1.2 This document sets out principles and approaches to the assessment of regulated qualifications not already described by the qualifications regulators in England, Wales and Northern Ireland. This information is intended to support the quality assurance processes of Awarding Organisations that offer qualifications in the sector and should be read alongside these. It should also be read alongside individual unit assessment requirements.
- 1.3 These principles will ensure a consistent approach to those elements of assessment which require further interpretation and definition, and support sector confidence.
- 1.4 These principles apply to qualifications and the units therein that assess occupational competence.<sup>1</sup>
- 1.5 Throughout this document the term *unit* is being used for simplicity, but this can mean module or any other similar term.

### **2. Assessment Principles**

- 2.1 Learners must be registered with the Awarding Organisation before formal assessment commences.
- 2.2 Assessment decisions for competence-based units must be made by an occupationally competent assessor primarily using evidence generated in the workplace during the learner's normal work activity. Any knowledge evidence integral to these learning outcomes may be generated outside of the work environment.
- 2.3 Assessment decisions for competence units must be made by an assessor who meets the requirements set out in the qualification's assessment strategy. Where the Awarding Organisation requires that the assessor holds, or is working toward, a formal assessor qualification, that qualification should be the

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<sup>1</sup> These are qualifications which confirm competence in an occupational role to the standards required and/or confirm the ability to meet 'licence to practice' or other legal requirements made by the relevant sector, professional or industry body.

Level 3 Certificate in Assessing Vocational Achievement. Assessors holding the D32/33 or A1 qualifications are not required to re-qualify. Where an Awarding Organisation does not expect the assessor to hold or be working toward a formal qualification we would expect that Awarding Organisation to ensure that the assessor meets the same standards of assessment practice as set out in the Learning and Development National Occupational Standard 09 Assess learner achievement.

- 2.4 Competence-based units must include direct observation<sup>2</sup> in the workplace as the primary source of evidence.
- 2.5 Simulation may only be utilised as an assessment method for learning outcomes that start with 'be able to' where this is specified in the assessment requirements of the unit. The use of simulation should be restricted to obtaining evidence where the evidence cannot be generated through normal work activity. Where this may be the case the use of simulation in the unit assessment strategy will be agreed with Skills for Health.
- 2.6 Expert witnesses can be used for direct observation where they have occupational expertise for specialist areas, or the observation is of a particularly sensitive nature. The use of expert witnesses should be determined and agreed by the assessor.
- 2.7 Assessment decisions for knowledge only units must be made by an assessor qualified to make the assessment decisions as defined in the unit assessment strategy.

### **3. Internal Quality Assurance**

- 3.1 Internal quality assurance is key to ensuring that the assessment of evidence for units is of a consistent and appropriate quality. Those carrying out internal quality assurance must be occupationally knowledgeable in the area they are assuring and be qualified to make quality assurance decisions.
- 3.2 Skills for Health would expect that where the Awarding Organisation requires those responsible for internal quality assurance to hold formal internal quality assurance qualifications that these would be the Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice or the Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice, as appropriate depending on the role of the individual. Those responsible for internal quality assurance holding the D34 or V1 qualifications are not required to re-qualify. Where an Awarding Organisation does not expect those responsible for internal quality assurance to hold or be working toward a formal internal quality assurance qualification we would expect that Awarding Organisation to ensure that those responsible for internal quality assurance meet: the standard of practice set out in the Learning and

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<sup>2</sup> Direct observation is face to face observation and must take place in the learner's workplace.

Development National Occupation Standard 11 Internally monitor and maintain the quality of assessment.

## **4. Definitions**

### **4.1 Occupationally competence:**

This means that each assessor must be capable of carrying out the full requirements within the competence unit/s they are assessing. Occupational competence must be at unit level which might mean different assessors across a whole qualification. Being occupationally competent means they are also occupationally knowledgeable. This occupational competence should be maintained through clearly demonstrable continuing learning and professional development. This can be demonstrated through current statutory professional registration.

### **4.2 Occupationally knowledgeable:**

This means that each assessor should possess relevant knowledge and understanding and be able to assess this in units designed to test specific knowledge and understanding, or in units where knowledge and understanding are components of competency. This occupational knowledge should be maintained through clearly demonstrable continuing learning and professional development.

### **4.3 Qualified to make assessment decisions:**

This means that each assessor must hold a relevant qualification or be assessing to the standard specified in the unit/qualification assessment strategy.

### **4.4 Qualified to make quality assurance decisions:**

Awarding Organisations will determine what will qualify those undertaking internal quality assurance to make decisions about that quality assurance.

### **4.5 Expert witness**

An expert witness must:

- 4.5.1 have a working knowledge of the qualification units on which their expertise is based
- 4.5.2 be occupationally competent in their area of expertise
- 4.5.3 have EITHER a qualification in assessment of workplace performance OR a professional work role which involves evaluating the everyday practice of staff.

July 2021

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