

AARON'S UPDATE

Newsletter Number 29

Summer 2015

Northumberland 
Care Trust
Innovation in Practice Awards



Outstanding
Optometrist
of the Year

INDEPENDENT
Prescribing
OPTOMETRISTS

Extending the Role of Community Based Eyecare

Congratulations.

Debbie Liu joins the ranks of Medical Optometrists, licenced to prescribe drugs independently of a GP.

After 3 years of intense study via Caledonia University, Debbie Liu has passed the 'Final Common Assessment' to become qualified as an Independent Prescribing Optometrist. Debbie joins Peter Frampton who gained his IP qualification in 2009.

The need for change

The need to change the way optometry works has been evident for many years; but change takes time. It was in 2009 the law was introduced allowing accredited optometrists to prescribe drugs; allowing eye conditions to be treated independently of a GP.

While Peter and Debbie have the educational accreditation to prescribe drugs for ocular conditions, Clinical Commissioning Groups (CCGs) have not, as yet, considered a budget or need for these innovative services. Some optometrists wonder why work for the qualification at all since, they believe, a cash strapped NHS is unlikely to ever fund these innovations. **Attaining IP qualifications has not been an easy journey. The first hurdle to achieve was passing exams which covered pharmacology, immunology, ocular / general pathology as well as general medicine. This was all carried out at Caledonia University but still did not allow the student to practice as a medical optometrist.**



Sunderland Eye Infirmary

The 'Final Common Assessment' administered by the College of Optometrists must be successfully completed; no easy task when the pass mark is usually over 75%. However this exam cannot be taken without completing time under the supervision of an Ophthalmologist. This is a daunting, and difficult to access, task. We are very fortunate to have an excellent working relationship with Sunderland Eye Infirmary.

We must thank Mr Scott Fraser, Consultant Ophthalmologist at Sunderland Eye Infirmary, for his support. Some hospitals are closing their doors to these innovative, community centred schemes as they are seen as competition. A view not held by most GPs who whole heartedly support our commitment to community care. If it had not been for Mr Fraser, and his colleagues, Debbie may not have been able to sit the final exam and all the hard work would have been wasted.

IP and you: benefits for the profession and the patient: Page 2 for details

Six years since 2009: where do 'Medical Optometrists' stand

So why haven't more optometrists pursued these qualifications?

It is sad but true, a common reason for not pursuing extra skills is simply financial. Why go through a tough, time consuming and expensive process which will not necessarily be remunerated? Until the NHS guarantees payment, these optometrists will not consider tackling the new skills.

There are certainly times we feel quite despondent about the speed of change; often delayed by the optometry profession itself! Other optometrists certainly don't want the added responsibilities, wishing to remain as screeners, identifying abnormalities and referring these patients to the Eye Hospital. Referring everyone in this way carries a significant cost to the community as the GP surgeries are charged, and is certainly less convenient for the patient. To be treated locally improves access to care, promptness of care and appropriateness of care for the patients; and is a primary goal of the NHS.

Peter Frampton, who wrote and organised an acute eye management scheme as long ago as 2006 has helped prepare a new scheme for CCGs to consider. GPs are very keen to pursue alternative service models promising to enhance patient care. Optometrists, specialising in the eye and possessing the appropriate equipment and educational standards, can assess and treat eye conditions while releasing GPs to concentrate on other health issues.

Peter Frampton is proud to say every GP approached, including Lintonville, Guidepost, Seaton Park, Cocquet Medical Group, to act as referee for the proposed service agreed. Their support reflects their trust in our abilities. Trust which only comes after years of cooperation and support from both sides.

Regardless of the current lack of official NHS funded services there are immediate reasons why prescribing rights enhance our patient care.

Immediate Impact on Contact Lens Practice

With deregulation of contact lens sales we have, for years now, separated professional fees from the actual contact lens costs.

clarity

The most important item purchased as part of our professional service, called Clarity, is 'Access to Independent Prescribing Optometrists'. Our policy ensures a professional member of staff is always on the premises during opening times and if you present as an emergency you WILL be seen. Debbie and Peter alternate days ensuring all our contact lens patients have immediate access to Medical Optometrists and Prescription Drugs. As rare as these episodes may be it is important for contact lens practitioners to deal with them promptly without referral to a hospital.



Access to Prescription Only drugs means our contact lens patients can be cared for even more promptly and efficiently. We believe optometrists have a moral obligation to become IP in order to be better equipped to manage our contact lens patients.

When prescribing becomes mainstream contact lens practitioners may well be considered negligent if they do not possess prescribing rights.

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