

As set out in the Regulations¹, the College of Opticians of Ontario's (the College) Quality Assurance program consists of Continuing Education (CE) designed to promote the continuing competence and continuing quality improvements of optician registrants. The Quality Assurance Committee (QAC) is responsible for administering the Quality Assurance (QA) Program and determining which CE activities achieve the objectives of the program.

This policy outlines for CE providers the process and criteria by which the QAC will recognize CE as "accredited" activities. The QAC accredits CE solely for the purpose of ensuring that high quality CE is available in order to facilitate registrant engagement in the QA Program. Accreditation of CE does not indicate College endorsement of any products, services or companies associated with the accredited activity.

Accreditation Process and Criteria

The QAC will consider requests for CE accreditation in the following delivery formats: live presentations (e.g. seminars, lectures, workshops); live-broadcast presentations (e.g. webinar); and distance learning (e.g. internet, videos, print). From time to time, as it deems necessary, the QAC may consult qualified third party professionals to determine whether a CE activity meets the criteria below. CE providers that wish to change the delivery format of an accredited CE activity (e.g. from live presentation to distance learning) must resubmit the course material to the QAC for approval.

The following process and criteria apply to the accreditation of CE activities in **all** delivery formats:

- The activity must be an organized, evidence-based program that will contribute
 to the advancement of professional competency and scientific knowledge in the
 practice of opticianry, and be designed to reflect the educational needs of
 registrants.
- 2. CE providers must identify the competencies covered within the activity (see NACOR Appendix or <u>National Competencies</u> for Canadian Opticians, 4th Edition).
- 3. Course content must be presented in an objective manner.
- 4. Course content must not include any material considered discriminatory under the *Ontario Human Rights Code* and/or unprofessional.
- 5. Accreditation will only be granted to activities that are available to all registrants of the College.
- 6. CE providers must demonstrate that they have relied upon objective, neutral and reliable sources to support the course content (see Appendix A, Accreditation Checklist).

¹ RHPA, s80.1(a)and O.Reg 219/94 8 (1)i



- 7. CE content must have as its primary purpose the advancement of professional competency and scientific knowledge in the practice of opticianry, and must not primarily be for the purpose of endorsing a specific product or brand.
- 8. Requests for accreditation must be accompanied by an accreditation request form and the accreditation review fee. The accreditation fee is non- refundable, regardless of the QAC's accreditation decision, and is charged in accordance with the College's by-laws and the review timeline requested by the provider².
- 9. New CE accreditation requests must be substantially different from any previous CE submission by the same provider.
- 10. The CE provider must ensure that all material submitted to the QAC for accreditation is an exact copy of what is actually presented toregistrants.
- 11. An acceptable CE presenter must be either: a) a *registered* optician, medical doctor, optometrist; b) an instructor at a recognized academic institution; or c) have at least five years of work experience in their field of specialization.
- 12. An acceptable CE presenter must not engage in conduct or behaviour that is unprofessional and/or discriminatory.
- 13. Accreditation granted by the QAC applies for three years from the date the activity is accredited.
- 14. CE providers shall supply registrants who participate in accredited CE activities with verification of attendance documentation³ which serves as evidence of successful completion of the CE activity.
- 15. The CE must be approved as accredited by the QAC at the time the course is offered (i.e. the QAC will not back-date any accreditations).
- 16. The promotion and advertising of CE seminars and conferences must adhere to the criteria as outlined below.

² The Standard Accreditation Review Fee will be waived for CE activities that meet the following criteria:

^{1.} The activity was granted accreditation by the QAC between October 1, 2017 and October 1, 2020;

^{2.} The activity would have been eligible for a one-time renewal of three additional years under the policy as it was at the time of initial accreditation; and

^{3.} The request for accreditation is accompanied by payment of the Accreditation Renewal Fee set out in the by-laws.

³ Previously referred to as a "Credit Slip"



Professional and Anti-Discriminatory Expectations

In accordance with criteria 3 required of all accredited CE activities, presentation material must not contain any unprofessional or discriminatory content. Any unprofessional and/or discriminatory material identified in an accreditation request will be brought to the attention of the continuing education provider for revision prior to any accreditation decision being made by the QAC.

In addition, the QAC expects all CE presenters to act in a professional manner at all times during the presentation of an accredited activity. CE presenter behaviour will be monitored as outlined in the ongoing accreditation monitoring section of this policy.

The QAC reserves the right to determine what material and/or presenter behaviour is classified as unprofessional or discriminatory.

Live and Live-Broadcast Presentations Criteria

In addition to the requirements for all CE, the following criteria are specific to CE that is delivered in-person (e.g. seminars, lectures, workshops) or by live-broadcast (e.g. webinar):

1. CE in this category must consist of a minimum actual presentation time (not including set-up or question and answer period) as follows:

CE Actual Presentation Time	Question and Answer Period	Accredited CE Value Awarded
At least 25 minutes	5 minutes	½ hour
At least 50 minutes	10 minutes	1 hour
At least 80 minutes	10 minutes	1½ hour
At least 110 minutes	10 minutes	2 hours

- Submissions must include: A biography or curriculum vitae submitted for every presenter; and a complete copy of all media that will be presented (e.g. PowerPoint presentation, videos, etc); and complete information about how the CE provider will endeavor to make the CE available to all Ontario opticians.
- 3. In the case of a **practical workshop**, submissions must include: a list of all of the equipment that is to be used, and the individuals that will provide instruction or guidance at each workstation.
- 4. In the case of a **live-broadcast**, submissions must include: information satisfactory to the QAC about how optician participation will be tracked (e.g. monitoring registrant log-in/log- out, optician participation in chat forum, etc.)



Distance Learning Criteria

In addition to the requirements for all CE, the following criteria are specific to CE that is delivered via distance learning formats (e.g. internet, videos, print):

- CE in this category must consist of written course material that is a minimum of 2000 words or 50 minutes of audio content. Every 2000 words or 50 minutes of audio content will be considered for 1 accredited CE hour.
- Submissions must include: a detailed description outlining the proposed course content; and a means of assessing optician participation in the CE activity (e.g. a test). Any assessment must contain materials that accurately reflect the activity's content. The submission must also include complete information about how the CE provider will endeavor to make the CE available to all Ontario opticians.
- Opticians engaging in distance learning CE must achieve a minimum score of 70% on any assessment in order to receive the verification of attendance documentation.

Verification of Attendance Documentation Requirements

Verification of attendance documentation ensures that opticians are able to accurately track completion of their own CE activities, and are able to provide evidence to the College about their compliance with the QA program requirements.

CE providers must ensure that a registrant has actually attended or participated in 80% of the CE in order to issue the registrant a verification of attendance document.

All CE providers are required to supply opticians with verification of attendance documentation upon satisfactory completion of accredited CE. CE providers may design their own documentation, provided that it contains the following information:

- 1. The full name, College registration number, and signature of the optician who participated in the activity;
- 2. The title of the activity and the accreditation activity number assigned by the College;
- 3. The name of the CE provider, the name of the CE provider's representative, along with their signature and contact information.



CE Provider Records

The College encourages CE providers to maintain and ensure the availability of attendance records to opticians and the College. The College would recommend that CE providers retain records for a period of 6 years.

Ongoing Accreditation Monitoring

To ensure the quality, accuracy, and professionalism of CE after the materials have been accredited by the QAC, the College may send a representative to attend an accredited activity to ensure presentation content is consistent with the original submission and that presenters are acting in a professional manner at all times while presenting accredited activities. If any inconsistencies between the submission and the presentation are observed or where unprofessional and/or discriminatory content is identified, the QAC will provide the CE provider with notice of its concerns and ask for a resolution. In some cases, the QAC may suspend the accreditation granted until all concerns are resolved.

Where serious concerns present themselves or where a CE provider is unable to rectify any concerns identified by the QAC, the QAC may provide the CE provider with notice of its intention to rescind the accreditation. The QAC reserves the right to suspend accreditation during the notice period. The CE provider will be given at least 30 days to resolve the concerns to the QAC's satisfaction. If the concerns are not resolved by the end of the notice period, the QAC will rescind the accreditation and notify the CE provider.

Promotion and Advertising of Accredited CE

CE providers of accredited activities offered in Ontario are encouraged to make reasonable attempts to notify all opticians in Ontario of the availability of their CE activities. It is recommended that promotional materials include: information about the educational objectives of the CE, the target audience, the name of the presenter and their credentials, and a complete description of the steps the optician must take to successfully complete the CE.

Accreditation Categories

The QAC will accredit CE activities for the following categories:

1. **Eyeglasses (EG):** Content may include, but is not limited to: fabrication, fitting techniques, and emerging technology related to eyeglasses.

- 2. **Contact Lens (CL):** CE content may include, but is not limited to: fabrication, fitting techniques and emerging technology related to contact lenses.
- 3. Eyeglass/Contact Lens (EG/CL): CE content may include, but is not limited to: ocular anatomy; physiology of the eye; ocular structures and systems; visual anomalies and the impact on dispensing to patients; low vision evaluation and dispensing; and patient management.
- 4. Eyeglass/Contact Lens/Refraction (EG/CL/RF): CE content may include, but is not limited to: ocular anatomy; physiology of the eye; the visual pathway; ocular structures and systems; pharmacology and impact on dispensing to patients; accommodation and vision acuity evaluation (including ophthalmic instruments used to evaluate visual acuity); ocular motility; visual anomalies and the impact on dispensing to the patient; low vision evaluation and dispensing; and patient management.
- 5. **Professional Growth (PG):** CE content may include but is not limited to topics associated with professional practice such as patient relations, regulatory updates, health and safety, jurisprudence, communications, economic trends to adapt to change, business management, CPR & first aid courses.

Accreditation Decisions

The QAC may approve, defer or refuse accreditation. The QAC may defer making a decision about accreditation if it believes additional information is required, in which case, the QAC will require the submission of outstanding information within 15 days. A second review fee will not be charged.

The QAC may refuse accreditation to a CE activity if the activity is deemed insufficient, in terms of either its quality, content or in its duration, or if the QAC determines that the CE does not comply with the accreditation criteria. In cases where the QAC refuses accreditation, it will provide the CE provider with reasons for the refusal. The CE provider may request a review of the QAC decision in writing within 30 days of receipt of notice that the QAC has refused accreditation. The review is subject to a non-refundable accreditation review fee

Accreditation Checklist

The following checklist is used as a guide by the Quality Assurance Committee when reviewing application for accreditation. The checklist is provided for guidance purposes only and does not constitute a strict or complete interpretation of the Accreditation Policy.

Criteria	Yes	No	N/A	Notes/Comments
Content is evidence based				
Course contents are supported by data.				
The sources for the data are cited.				
The sources cited are reliable (e.g. scientific				
journal) and objective.				
The contents avoid making unfounded/				
unsupported assertions.				
Content relates to RO competencies				
The course content reasonably relates to				
identified competencies for ROs.				
Content is presented in an objective manner				
Material is presented objectively.				
The contents are presented in a manner that is				
balanced/neutral.				
Speaker/Presenter validation				
The CE provider has demonstrated that they have				
relied upon objective, neutral and reliable sources				
to support the course content.				
Speakers/Presenters meet specified criteria				
Speaker/presenter is either (a) Registered				
optician, optometrist or medical doctor OR (b)				
instructor at a recognized academic institution OR				
(c) at least 5 years experience in field of				
specialization.				
Speaker/presenter has not previously been				
reported for engaging in unprofessional or				
discriminatory conduct during a previous CE				
presentation.				
Content is not discriminatory or unprofessional				
Text used is professional and free of content that				
could considered discriminatory on the basis of				
factors such as race, gender, sex, disability, age,				
sexual orientation, etc.				
Images used are professional and free of content				
that could considered discriminatory on the basis				
of factors such as race, gender, sex, disability, age, sexual orientation, etc.				
Availability				
Availability				

CE is Available to all Registered Opticians.		
Proprietary/commercial content		
The course has as its primary purpose the advancement of professional competency and scientific knowledge in the practice of		
opticianry, and is not primarily for the purpose of endorsing a specific product or brand.		



National Competencies for Canadian Opticians

4th Edition

October 2019

Contents

Acknow	vledgements	4
Preamb	ole	7
Purp	ose	7
Deve	elopment Process	7
Struc	ture	7
Com	petency Statements and Practice Illustrations	8
Domair	n 1. Professional Practice	9
1.1	Professionalism and Ethics	9
1.2	Informed Consent	14
1.3	Privacy, Confidentiality, and Record Keeping	15
1.4	Patient and Workplace Safety	
1.5	Jurisprudence and Regulatory Policies	
1.6	Scope of Practice	19
1.7	Maintaining Competence	20
Domair	n 2. Refraction	22
2.1	Anatomy and Pathology	22
2.2	Optics	23
2.3	Equipment and Tools	24
2.4	Infection Control	25
2.5	Needs Assessment	26
2.6	Patient Communication	29
2.7	Continuing Care	29
Domair	1 3. Eyeglasses and Low Vision	31
3.1	Anatomy and Pathology	31
3.2	Optics	32
3.3	Equipment and Tools	33
3.4	Infection Control	35
3.5	Needs Assessment	37
3.6	Prescription Interpretation and Lens Duplication	40
3.7	Lens and Frame Selection	41
3.8	Ordering	43
3.9	Inspection and Industry Standards	44
3.10	Verifying Fit and Patient Success	44
3.11	Patient Communication	45
3.12	Continuing Care	47
3.13	Low Vision	49

National Competencies for Canadian Opticians (4th Edition)

Domain 4	4. Contact Lenses	52
4.1	Anatomy and Pathology	52
4.2	Optics	54
4.3	Equipment and Tools	55
4.4	Infection Control	56
4.5	Needs Assessment	58
4.6	Prescription Interpretation and Lens Selection	60
4.7	Ordering	62
4.8	Inspection and Industry Standards	63
4.9	Verifying Fit and Patient Success	63
4.10	Patient Communication	
4.11	Continuing Care	67

Acknowledgements

The project to create the 4th edition of the *National Competencies for Canadian Opticians* was undertaken under the leadership of NACOR (Jodi Dodds) with support from Wickett Measurement Systems (John Wickett). Spanning more than a year, the project could not have succeeded without the contributions of experts from across Canada. Those who drafted content or who acted as reviewers or validators are listed below. Not listed here are the 1,747 opticians who took the time to complete the validation survey that was so essential to ensuring that the approved competencies reflect actual practice. Many thanks to all for their considerable effort, time, and expertise.

Participant Organization		Province	Role
Lisa Bannerman	Lisa Bannerman College of Opticians of British Columbia		Regulator, Steering
Jeannie Barr	Northern Alberta Institute of Technology	AB	Educator
Cathy Beaulieu	College of Opticians of Ontario	ON	Industry
Jennifer Bishop	Opticians Association of New Brunswick	NB	Association
Sandra Blanchette	Alberta College and Association of Opticians	AB	Developer
Diana Carver	PEI Dispensing Opticians Association	PE	Association
Brian Chapell	Douglas College	ВС	Educator
George Colgan	Alberta College and Association of Opticians	AB	Regulator
Nathalie Cormier Collège Communautaire du Nouveau- Brunswick		NB	Educator
Julie Cyr	Collège Communautaire du Nouveau- Brunswick	NB	Educator
Robert Dalton Opticians Association of Cana		NS	Association
Jodi Dodds	National Association of Canadian Optician Regulators	MB	NACOR
Peggy Dreyer	College of Opticians of Ontario	ON	Developer
Pat Driscoll	Opticians Association of New Brunswick	NB	Regulator
Michaël Dumoulin	La Cité College	ON	Educator
Carol Ellerbeck	Opticians of Manitoba	MB	Regulator
Bill Fedrau Opticians Association of Canad Saskatchewan Chapter		SK	Steering, Association
Manon Fontaine Cégep Régional de Lanaudière a L'Assomption		QC	Educator
Cynthia Fortier Cégep Garneau QC		QC	Educator
Amber Fournier Ontario Opticians Association ON		Association	
Michelle Gennutt Saskatchewan College of Opticians		SK	Industry

Fernand Ghobril Ordre des opticiens d'ordonnances du Québec		QC	Regulator
Robert Grimard Opticians Council of Canada		QC	Industry, OCC Executive
Erik Hahn National Association of Canadian Optician Regulators		NS	Industry, Educator
Jaime Hay	National Association of Canadian Optician Regulators	MB	NACOR
Melonie Hebert	Opticians Association of New Brunswick	NB	Regulator
Karen Hirshfeld	Georgian College	gian College ON	
Maureen Hussey	College of Opticians of Alberta	AB	Regulator, Developer
Paul Johnson	Saskatchewan College of Opticians	SK	Regulator
Sheri Jones	Saskatchewan College of Opticians	SK	Regulator
Lorne Kashin	Ontario Opticians Association	ON	Industry, Association
Zulfikar Kasmani	Ontario Opticians Association	ON	Association
Fazal Khan	College of Opticians of Ontario	ON	Regulator, Steering
Ingrid Koenig	College of Opticians of Ontario	ON	Developer, Industry
Michelle Kushnir	College of Opticians of Ontario	ON	Developer
Catherine Labrecque- Rowntree	Ontario Opticians Association	ON	Association
Marie-Pier Lamarre	Cégep Régional de Lanaudière à L'Assomption	QC	Educator
Pierre Landry	Collège Communautaire du Nouveau- Brunswick	NB	Educator
Renée Lavallée	La Cité College	ON	Educator
Martin Lebeau Ontario Opticians Association		ON	Association
Bob Lee Opticians Association of New Bro		NB	Regulator
Chris Lee	College of Opticians of British Columbia	BC	Regulator
Chantal Lepage	La Cité College	ON	Educator
Glenna Locke	Nova Scotia College of Dispensing Opticians	NS	Regulator, Steering
Annie Ma	Opticians of Manitoba	MB	Industry
Kathleen MacLeod	Stenberg College	BC	Educator
Tanya MacPhee	Nova Scotia College of Dispensing Opticians	NS	Regulator, Industry, Steering, OCC Executive
Laura Lee Macquarrie	Laura Lee Macquarrie PEI Board of Dispensing Opticians		Regulator
Nicole Maillet Collège Communautaire du Nouvea Brunswick		NB	Educator
Tony Mallette Seneca College		ON	Educator, Steering
Gary Maynard Newfoundland Guild of Dispensing Opticians		NL	Association
Kim McEachern Stenberg College		ВС	Educator, OCC Executive

David McGowan	Gowan College of Opticians of British Columbia BC Regulator		Regulator
Tatiana Mighiu	atiana Mighiu Seneca College ON		Educator
Rick Miller	Rick Miller Alberta College and Association of Opticians		Industry
David Milne	College of Opticians of Ontario	ON	Regulator
Wayne Mullen	Douglas College	ВС	Educator
Korosh Nikeghbal	Seneca College	ON	Educator
Deanne Oleksyn	Saskatchewan College of Opticians	SK	Regulator
Angela Oulton	Oulton College	NB	Educator, Steering
Heather Power	Opticians of Manitoba	MB	Regulator
Claudia Rojas	Opticians Association of Canada – BC Chapter	ВС	OCC Executive
Luc Sauvageau	Quebec Opticians Association	QC	Association
Dalie Schellen	Opticians Association of Canada	MB	Association, Steering
Tim Schmidt Georgian College ON Ed		Educator	
Shervin Shahidian Opticians of Manitoba		MB	Regulator
Paul Sim	Nova Scotia Society of Dispensing Opticians	NS	Association
Michelle Skinner	Dispensing Opticians Board of Newfoundland and Labrador	NL	Industry, Regulator
Todd Smith	Opticians Association of Canada – MB Chapter	MB	Association
Gail Stacey	Nova Scotia College of Dispensing Opticians	NS	Regulator
Derick Summers College of Opticians of Ontario ON D		Developer	
Yasmeen Syed	Seneca College	ON	Educator
Dean Thompson	Alberta College and Association of Opticians	AB	Regulator
Jim Thompson	Alberta College and Association of Opticians	AB	Regulator
Bryan Todd	College of Opticians of Ontario	ON	Regulator
Dennis Tse College of Opticians of Ontario ON		Regulator	
Cara Vezina Ontario Opticians Association ON		ON	Industry, Association
Rob Vezina College of Opticians of Onta		ON	Regulator
Marian Walsh Dispensing Opticians Board of Newfoundland and Labrador		NL	Regulator
Sandi Williamson College of Opticians of Alberta AB		Regulator	
Melanie Woodbeck	College of Opticians of Ontario	ario ON Developer	

Preamble

Purpose

The primary purpose of the *National Competencies for Canadian Opticians* is to define what is required for safe and effective practice as an optician in Canada. The competency profile defines the profession and the expectations for professionals. This document is not intended to directly serve as a teaching or testing tool, but rather as the basis for how teaching and assessment will be constructed. To take this one step further, the competency profile will not say how something should be taught or how it should be tested, but rather stipulates that a specific competency should be covered adequately in training and in testing so that the public can have confidence in opticians.

The competency profile has the following applications:

- To form the basis for the accreditation requirements for opticianry programs in Canada.
- To form the basis for the blueprints of what is tested on the national examinations.
- To form the basis for the blueprints of what is tested on the Prior Learning Assessment and Recognition examinations.

Generally, when applied to opticianry examinations, the competency profile defines the limit of what can be tested (if it is not in the profile, it cannot be on the exam). When applied to education, it defines the minimum of what must be taught (if it appears in the profile, it must be covered in some way in education) but there is nothing to stop any teaching program from going beyond that scope.

Development Process

This competency profile was developed through an iterative process starting in May 2018 and culminating in October 2019. Association, educator, and regulatory stakeholders were included at all phases, and multiple rounds of feedback were sought to continuously refine the scope and wording of the competencies and practice illustrations. Importantly, the content of the 4th Edition was based in part on the foundation established in the 3rd Edition, combined with work completed in 2017 to refine Refraction competencies. The work of all these subject matter experts was put before all opticians across Canada (excepting Quebec) in a nationwide survey to gather the data on which final validation rested.

Full details on the process are contained in a technical report provided to NACOR.

Structure

This competency profile is organized by domain. The major domains are as follows:

- 1. Professional Practice
- 2. Refraction
- 3. Eyeglasses and Low Vision
- 4. Contact Lenses

Professional Practice applies to all opticians. The remaining domains apply based on province and the specific licence held by the optician.

Within each domain are categories. These categories reflect the primary groupings of competencies and are

ordered approximately as the competencies are typically carried out in practice. This structure is for convenience only and does not offer guidance on the order in which practice steps should occur with a specific patient.

Competency Statements and Practice Illustrations

Competencies take the form of "do something, to something, for some reason" or "in a particular manner"; they should be considered to start with "Has the ability to." The competencies are exhaustive and are intended to be non-overlapping within a Domain. The competencies are intended to reflect the underlying abilities that are required of opticians if they are to practise safely and effectively.

Practice illustrations take the form of "does something" and describe a specific observable behaviour. The intent of the practice illustrations is to provide examples of observable actions that could be taken as evidence that an optician has the required underlying ability (competency). Importantly, these are examples only and make no attempt to cover every potential demonstration of a competency. Illustrations are sometimes repeated if the same action or activity could demonstrate more than one competency.

Domain 1. Professional Practice

These competencies focus on running a professional healthcare practice within a regulatory framework and on the general competencies expected of a licensed optician.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
1.1	Professionalism and Ethics	
1.1.1	Integrate ethics into professional practice as a basis for all decisions and actions.	 Accepts responsibility for their mistakes. Provides care to a patient* with a disability in a respectful manner that accommodates the disability. Installs dispensing tables that are appropriate for patients with disabilities. Recommends a low-cost option for eyewear where effective. Informs a patient how to contact the regulator if the patient is not satisfied with the quality of care. Incorporates cultural safety and humility in opticianry practices. Becomes informed about and understands the history and ongoing effects of colonization on the Indigenous People of Canada, including disparities of power in patient-provider relationships.

^{*} If the patient is unable to effectively advocate for themselves, a family member or other caregiver may play an appropriate role in the optical dispensing process. In those circumstances, the word "patient" in this document may be taken to mean "patient or caregiver."

Compe Has the	etency e ability to:	Practice Illustrations This ability is demonstrated when an optician:	
1.1.2	Practise within applicable regulatory standards of practice and in accordance with the applicable regulatory code of ethics.	 Prepares and directs third-party billing competently and accurately. Uses the title Licensed or Registered Optician. Reports any incident of unauthorized use of the title to the appropriate regulatory body. Obtains consent before touching a patient's face. Advertises and expresses claims within the limits of standards, the code of ethics, and applicable provincial legislation. Refers any incompetent, illegal, or unethical conduct by a colleague (regulated or non-regulated) or other health personnel to the appropriate authority. Reports any incident of unauthorized practice to the appropriate regulatory body. Maintains complete patient records and retains them for the duration specified in the appropriate provincial standard. 	
1.1.3	Recognize that the optician is bound firstly by their obligation to the patient and not by self-interest or the interest of the employer.	 Refuses employment that limits professional independence to act with good judgement and integrity. Sells the product that is best for the patient, not the most expensive or most readily available. Presents grievances to the employer or resigns if forced to work counter to a patient's best interest. Evaluates and prioritizes a patient's needs in the development of the treatment plan. Will not provide treatment inconsistent with the needs and/or wants of a patient. Recognizes the role of the optician in public protection by interpreting the rules in favour of a patient's best interest. 	

Compe Has the	tency e ability to:	Practice Illustrations This ability is demonstrated when an optician:
1.1.4 S	erve as a patient advocate with other members of the	• Refers a patient to the appropriate member of the team for skills beyond the optician's competency level.
	eye-care team.	 Consults with and seeks recommendations from different members of the team to determine the best course of action for a patient.
		 Assists a patient in managing multiple practitioners in the healthcare team by ensuring understanding of results.
		 Advises a patient to see their physician when discrepancies in prescriptions arise.
		 Confirms accuracy of prescriptions when concerned about potential mistranscribing.
		 Identifies and reports to a patient and other practitioners inconsistencies and unexpected visual fluctuations that could indicate pathologies.
		 Supervises a student closely to ensure that patient needs are appropriately addressed.
1.1.5	Manage professional boundaries when dealing with patients, co-workers, and other professionals.	 Demonstrates clear understanding of power imbalance by encouraging a patient to express their concern if the patient is uncomfortable with any actions the optician performs.
		 Exercises care in maintaining personal space by ensuring patient is informed and comfortable with actions the optician is performing.
		• Refrains from connecting with patients on socialmedia.
		• Seeks consent before touching a patient's head or face.
		 Refrains from commenting on personal or life choices of patients, colleagues, or other professionals.
		• Refrains from sharing personal information with patients.
		Refrains from exchanging gifts with patients.
		 Refrains from entering a romantic or sexualrelationship with a patient.
		 Avoids treating a family member where it would give rise to a potential conflict of interest or violation of applicable legislation.

Compe Has the	etency e ability to:	Practice Illustrations This ability is demonstrated when an optician:
1.1.6	Recognize ethically challenging situations that could put the patient at risk.	 Identifies and documents a situation that could have been misinterpreted. Has record of a structured and documented process for managing ethically challenging situations. Designs layout of workspace and exam rooms to provide privacy, safety, and comfort for patients. Seeks guidance from other professionals in identifying or addressing an ethically challenging situation. Documents a potential, perceived, or actual conflict of interest.
1.1.7	Manage ethically challenging situations methodically and transparently to protect the patient.	 Corrects a patient's misunderstanding about the patient's relationship with the optician immediately and firmly to avoid a boundary violation. Refers their spouse to an alternate practitioner and records this in the patient record. Refuses requests to fraudulently bill third-party insurance. Declines social invitations that may cross boundaries.
1.1.8	Communicate with patients and others clearly, truthfully, and transparently.	 Makes advertising claims that are evidence-based and that comply with regulations and standards. Ensures social media communication is truthful and accurate. Ensures all marketing information is truthful and easily understandable. Promotes self and practice truthfully and transparently.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
1.1.9	Maintain a professional relationship with other members of the healthcare team to facilitate management of the patient's overall eyehealth needs.	 Shows respect for opticianry and other professions through pleasant dealings with the team. Actively participates in team meetings. Participates in the development of a neworganizational policy. Takes into consideration and respects the opinions of others in relation to the care of a patient. Participates in team care by freely providing information and practice-specific skills. Identifies their role within the team to ensure responsibility is taken for actions. Liaises professionally with a patient's medical practitioners as required. Seeks consultation and recommendations from different members of a patient's healthcare team. Employs proper telephone etiquette with other health professionals.
1.1.10	Maintain a referral network to facilitate meeting all of the patient's eye-health needs.	 Maintains up-to-date contact information for other health professionals. Responds in a timely manner to requests from other health professionals. Speaks respectfully and professionally of other healthcare practitioners.
1.1.11	Engage in business practices that are truthful and professional.	 Develops clear policies on business activities, warranties, guarantees, and refunds. Ensures all marketing materials are consistent with business practice policies. Conducts quarterly staff training to ensure compliance with business practice policies. Upholds a quotation to a patient even though another staff member made an error with the quotation.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
1.2 l	nformed Consent	
1.2.1	Adhere to regulatory, legislative, and standards requirements relating to informed consent.	Demonstrates an understanding of the principles of obtaining consent by explaining steps of treatment before asking permission to perform an action.
	informed consent.	 Refers to legislation, regulatory standards, and guidelines when unsure of consent requirements.
		Requests permission to move a patient's hair to adjust eyewear.
		Informs a patient that the optician will need to touch the patient to insert contact lenses.
		Seeks a patient's written consent to request transfer of the patient record.
1.2.2	Exercise the process of obtaining informed consent.	Provides options to a patient with sufficient information to allow for balancing of pros and cons of each.
		Demonstrates an understanding of the difference between implied and informed consent by having a patient read and sign authorizations before treatment.
		 Identifies situations where informed consent may be problematic and takes appropriate steps to ensure patient understanding.
		Demonstrates knowledge of the substitute decision-makers hierarchy by allowing a patient to make decisions that they are capable of making before turning to the assistant.
		 Uses the services of a translator to help a patient provide informed consent whenever possible, ensuring that the patient is the one making the decisions.
		Engages a patient in an informed consent process that respects balance of power and cultural differences.
1.2.3	Ensure the patient's informed consent throughout patient	Has an established written protocol to collect consent at all required stages of patient interaction.
	engagement.	Obtains consent to disclose and release patient information at each post-care interaction.
		Demonstrates an understanding that consent is not a blanket for all processes by receiving specific consent when performing financial transactions after treatment.

Competency Has the ability to:	Practice Illustrations This ability is demonstrated when an optician:
1.2.4 Explain information in plain language to ensure patients understand their options.	 Communicates with a patient and/or caregiver. Checks for understanding during a patient interaction and re-explains as necessary to achieve understanding.
	Assesses a patient's level of understanding and uses the appropriate level of technical and plain language.

1.3 Privacy, Confidentiality, and Record Keeping

1.5	rivacy, confidentiality, and	i Necola Neeping
1.3.1	Apply privacy legislation related to patient care.	Follows regulatory requirements related to confidentiality and privacy with respect to storage and destruction of patient information.
		 Ensures that a privacy policy is in place that meets all applicable privacy legislation.
		Collects only necessary personal information about a patient.
		 Obtains and documents proper consent when sharing and disclosing information.
		Securely destroys all patient information after applicable retention period has ended.
1.3.2	Maintain confidentiality of all patient information.	Verifies that only the intended person receives confidential information.
		Checks that others cannot overhear the conversation when collecting information from a patient.
		• Takes all necessary precautions to ensure stored patient personal information is secure, in both paper and electronic formats.
		 Expends best effort to ensure privacy of patients when collecting personal information.
		Applies password protection to computer systems.
1.3.3	Document patient care in a clear and understandable	 Maintains patient records in either French or English. Ensures that when a hand-written record is kept it is
	format.	legible.
		Uses only those shorthand comments that are universally understood by all opticians (e.g., VA and PD).
		 Makes notes with sufficient detail to allow another optician to continue effective treatment of a patient in the optician's absence.

Compe Has the	etency e ability to:	Practice Illustrations This ability is demonstrated when an optician:
1.3.4	Maintain records consistent with federal and provincial legislation and standards of practice.	 Ensures records are safeguarded against unauthorized access by locking filing cabinets and password protecting electronic files. Disposes of records through shredding or deletion so that they cannot be retrieved by any means. Retains records for the period stipulated by the jurisdiction. Ensures a patient's name and address are clearly documented. Records only the information needed to perform treatment. Accurately records history, measurements, and management plan for each patient. Records the name of the practitioner carrying out treatment.
1.3.5	Release records in accordance with federal and provincial legislation and standards of practice.	 Transfers patient records in a timely manner when requested. Provides a patient with access to their record on request and according to legislative and regulatory requirements. Refuses to allow access to patient records by a third party unless permitted by legislation.
1.4 Patient and Workplace Safety		
1.4.1	Contribute to a workplace that is free from all forms of harassment.	Establishes or advocates for a policy for dealing with potential situations where staff feel unsafe in the work environment, taking into account the Canadian Human Rights Act and applicable provincial and federal laws.

- Participates in applicable workplace anti-harassment training.
- Has read and completed a workplace anti-harassment policies and protocols training module.
- Reports any instances of harassment in accordance with anti-harassment policies.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
1.4.2	Adhere to polices, standards, and procedures as they relate to patient and workplace safety.	 Engages in work safety training (e.g., WHMIS, fire drills). Deals with acetone and cleaning products according to applicable safe material handling requirements. Integrates safety practices into daily activities by surveying the workplace and correcting any hazards found. Monitors and responds to vendor recalls and Health Canada alerts. Monitors changes in regulations and standards related to public health. Takes appropriate actions to consistency align practice
		 environment and established policies with legislation and standards (e.g., labour laws, safety legislation, industry standards). Participates in quality improvement initiatives. Develops or advocates for organizational policies that support public protection. Demonstrates use of fire extinguishers. Has access to emergency telephone numbers. Removes unsteady chairs from the clinic. Child-proofs the clinic.
1.4.3	Manage abusive and aggressive behaviour to provide a safe work environment.	 Reports any abusive behaviour by a colleague to the appropriate personnel (e.g., supervisor, manager). Attempts to de-escalate a verbal conflict in the work environment, understanding cultural differences and the possibilities of misinterpretation of intentions. Attempts to de-escalate a conflict with a patient/caregiver and if need be, refer the patient to an alternate practitioner.
1.4.4	Follow provincial government procedures in response to contagious outbreaks.	 Regularly disinfects contact lens equipment and area to avoid transfer of infectious agents. Monitors changes in regulations and standards related to public health. Has a documented emergency response plan. Frequently washes hands, especially between patients. Keeps hand disinfectant readily available to staff and patients.

Has the ability to:		This ability is demonstrated when an optician:	
1.5	1.5 Jurisprudence and Regulatory Policies		
1.5.1	Adhere to all provincial regulatory policies.	 Remains physically present when student opticians are dispensing. Holds appropriate professional liability insurance. Provides service in the language(s) mandated by the province. 	
1.5.2	Adhere to all applicable provincial and federal legislation.	 Stores health information securely. Provides the patient record when requested by a patient. Where mandated, provides ramps for accessibility to store or clinic entrance. 	
1.5.3	Maintain awareness of changes in regulations and legislation.	 Monitors for changes to applicable standards of practice and guidelines. Seeks and reviews information from the regulatory body and other sources (e.g., professional associations). Attends continuing education programs that provide relevant legislative updates. Ensures office policies and practices are reviewed and updated after a relevant legislative change is enacted. Conducts or participates in office training regarding relevant legislative updates. 	
1.5.4	Communicate title and credentials accurately.	 Communicates to the public, in writing, and/or verbally the professional designation Licensed or Registered Optician. Accurately communicates differences between opticians and other healthcare and eye-care practitioners. Ensures that a patient understands that opticians cannot diagnose an eye health condition. Clearly displays any professional credential identification, such as wall certificate or ID badges. Communicates professional credentials on stationery. 	
1.5.5	Report misconduct to the appropriate body.	 Can identify what types of conduct constitute professional misconduct. Demonstrates an understanding of the optician's reporting obligations. Reports misuse of the Licensed or Registered Optician title by a colleague who does not hold that title to appropriate regulatory body. Reports another optician's professional misconduct to the appropriate regulatory body in a timely manner. 	

Practice Illustrations

Competency

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
1.6	Scope of Practice	•
1.6.1	Recognize personal and professional limits in relation to patient and regulatory expectations.	 Reflects on and evaluates own practice by participating in a professional competency plan. Obtains external feedback from peers or patients to support self-reflection. Accepts a delegation only through clear and established lines of authority. If scleral contact lens fitting is beyond the optician's professional ability, refers a patient to a colleague who specializes in this type of contact lens fitting.
1.6.2	Practise within the scope of practice and professional competence.	 Engages in continuing professional education to ensure current knowledge, skill, and judgement within the optician's areas of practice. Refuses to perform a refraction unless specifically permitted by legislation and regulatory body. Refuses to fill a contact lens Rx if the optician does not have adequate and current knowledge, skill, or judgement to provide this service. Informs a patient that the optician is not authorized to perform an eye exam and refers the patient to an optometrist. Refers a patient to another optician if not sufficiently skilled in dispensing scleral (or other specialized) lenses.
1.6.3	Seek assistance or refer to other professionals when required to provide the best care for the patient.	 Seeks assistance from another health professional when unclear on the appropriate clinical course of action. Refers a patient for consultation or treatment when conditions are present that exceed the optician's scope, knowledge, skill, or expertise. Refers a patient to a medical doctor when changes in Rx indicate the possibility of blood sugar disorders.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
1.6.4	Educate the employer, colleagues, and the public on the role of the optician.	 Explains the similarities and differences among opticians, ophthalmologists, and optometrists in a meaningful way to the employer or patient.
		 Accurately communicates the limits of the scope of practice to a patient.
		 Makes the employer aware of the limitations when care is provided by an unregulated worker.
		 Identifies to a patient when care is provided by a regulated or unregulated worker and educates the patient on the difference.
		Uses their title regularly when interacting with patients.
1.7 N	Maintaining Competence	
1.7.1	Adapt practice in response to new products and technologies so that suitable options are	 After completing a professional development course, incorporates a new technology, policy, or protocol into their practice.
	available to patients.	 Uses modern and properly functioning tools and equipment.
		 Advocates for resources that support advancement in technology to encourage better service for patients with physical disabilities.
		 Identifies a safety concern and takes appropriate action to implement new technology to address the issue.
		 Identifies a patient who could benefit from a new lens technology.
		• Practises verifying the accuracy of new lens technologies.
		 Practises new measurement techniques and knows their uses.
1.7.2	Incorporate lessons learned from everyday practice experiences into future practice.	 Makes note in the patient record of a challenging interaction, reflects on the impact of professional behaviours and communication skills used, and records insights for future interactions.
	•	 Uses past experiences as training scenarios during a workplace training session.
		 Collaborates with colleagues to identify alternative approaches for the future when a patient interaction does not go well.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
1.7.3	Engage in continuous learning to maintain and enhance ability to serve patients.	 Engages in continuing professional development as required by the regulatory body. Investigates and engages in monthly training sessions with sales representatives related to new products and technologies. Subscribes to e-newsletters to keep up to date on evolving contact lens options for patients with keratoconus.

Domain 2. Refraction

These competencies focus on the specific needs related to performing refraction. All refracting opticians are expected to demonstrate all of these competencies.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
2.1	Anatomy and Pathology	
2.1.1	Demonstrate an understanding of the visual pathway.	 Recognizes disruptions in vision caused by disease or accident. Demonstrates an understanding of the process of the retina transducing an image into electrical pulses using rods and cones to transmit to the brain. Explains the optical chiasm and its function on binocular vision. Describes the function of the occipital lobe in processing visual stimuli.
2.1.2	Demonstrate an understanding of the ocular system.	 Identifies in detail the anatomy of the eye. Demonstrates an understanding of the effect of different refractive media on the refraction of light in the eye. Identifies emmetropic and ametropic eyes.
2.1.3	Demonstrate an understanding of the anatomy of the eye.	 Identifies in detail the parts of the eye and adnexa. Identifies the extraocular muscles. Identifies the anatomy of the posterior and anterior segments of the eye.
2.1.4	Demonstrate an understanding of the impact of systemic diseases and medications.	 Recognizes disruptions in vision caused by diabetes. Demonstrates an understanding of pharmacology and systemic drug interactions. Refers a patient with high tonometry results.
2.1.5	Demonstrate an understanding of the impact of ocular pathologies and conditions.	 Recognizes disruptions in vision caused by glaucoma. Recognizes disruptions in vision caused by photophobia. Recognizes disruptions in vision caused by cataracts. Demonstrates an understanding of the impact of ocular pathologies and conditions on binocular vision.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
2.1.6	Demonstrate an understanding of external factors affecting the eye.	 Demonstrates an understanding of environmental effects causing dry eye symptoms. Demonstrates an understanding of the symptoms of digital eye strain. Recognizes the effects of high-energy visible light and ultraviolet light.
2.1.7	Demonstrate an understanding of visual fields.	 Recognizes disruptions in vision caused by macular degeneration and glaucoma. Can identify acute retinal conditions requiring immediate medical referral. Performs a confrontational visual field test to determine if a patient meets the minimum requirement for a driver's licence classification.
2.1.8	Demonstrate an understanding of binocular function and ocular motility.	 Performs cover and uncover tests to determine phorias and strabismus. Describes the importance of maintaining focus on an object with both eyes, creating a single-visual image. Demonstrates an understanding of the effects of disruption of binocular vision on depth perception.
2.2	Optics	
2.2.1	Demonstrate an understanding of monocular and binocular vision.	 Can explain the difference between monocular and binocular vision and their effects on depth perception and spatial awareness. Demonstrates an understanding of the learned ability of adaptation to monovision. Performs spatial testing using the stereo fly test or other test.
2.2.2	Demonstrate an understanding of geometric optics.	 Demonstrates an understanding of the schematic eye. Explains the difference between convex and concave lenses and their relevance to refraction. Demonstrates an understanding of how light is focused on the fovea.

Competency Has the ability to:	Practice Illustrations This ability is demonstrated when an optician:
2.2.3 Apply current ophthalm theories and mathemat calculations to produce refractive specifications	lenses, and prism.Can describe the effects of vertex distances on resultant
2.3 Equipment and Too	s
2.3.1 Verify the calibration of operating equipment.	 Calibrates a keratometer using a steel ball. Confirms software is up to date on digital equipment. Runs calibration tests periodically. Sets monoculars on a slit-lamp to ensure stereo perception.
2.3.2 Choose the equipment required to perform a refraction.	 Uses a lensometer to measure a patient's current eyeglasses. Adjusts a phoropter and provides reasons why it might be used. Identifies the uses of each group of trial lenses, including accessory lenses. Uses an autorefractor to perform objective refraction for a patient with spherical or astigmatic refractive errors. Uses a retinoscope in conjunction with a phoropter or trial lens set to perform minus or plus cylinder retinoscopy for patients with simple hyperopic astigmatism, compound hyperopic astigmatism, simple myopic astigmatism, compound myopic astigmatism, or mixed astigmatism.
2.3.3 Recognize and name the equipment used in pract	

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
2.3.4	Maintain equipment in safe operating condition.	 Checks power cords and connecting cords. Calibrates equipment regularly. Uses dust covers. Cleans and disinfects equipment between patients.
2.3.5	Operate the equipment necessary to perform a refraction.	 Operates an autorefractor. Performs retinoscopy. Identifies and demonstrates the uses of the parts and controls of a phoropter, including accessory lenses. Demonstrates the use of a schematic eye to perform refraction.
2.3.6	Analyze the results found using refraction equipment.	 Transposes between plus and minus cylinder. Verifies unexpected results. Identifies whether a patient has aniseikonia or anisometropia. Assesses the adaptation of a patient when there is a large discrepancy between an old and a new Rx.
2.4	Infection Control	

2.4.1 Follow infection control and prevention measures to maintain a hygienic environment.

- Adheres to infection prevention and control measures established by jurisdiction and national regulatory bodies (Optical Laboratories Association, Health Protection Branch of Health Canada, and Canadian Standards Association).
- Takes appropriate action to consistently align practice environment and policies with legislation and standards (e.g., labour laws, safety legislation, industrystandards).
- Follows Health Canada's recommendations for handwashing between patients.
- Enforces hand-washing by staff.
- Ensures appropriate infection control signage is visible to staff.
- Ensures equipment is disinfected between patients.
- Integrates infection control and prevention measures.
- Maintains a clean and safe office environment.

Competency		Practice Illustrations
Has th	e ability to:	This ability is demonstrated when an optician:
2.4.2	Recognize infection hazards so that preventive measures can be implemented.	 Demonstrates situational awareness by observing the environment, anticipating potential risks, and seeking assistance when needed.
		 Advocates for changes when risks are identified by recommending interventions.
		Documents and tracks incidents.
		Participates in quality improvement initiatives.
		Ensures the premises do not present a physical safety hazard.
2.4.3 Address contagious outbreaks to avoid spreading illness to	Implements procedures to react to an acute infectious disease outbreak.	
	others.	Washes/sanitizes hands prior to touching patients.
		Enforces hand-washing by staff.
		Disposes of waste appropriately and hygienically.
		Ensures equipment is disinfected between patients.
	 Adheres to infection prevention and control measures established by jurisdiction and national regulatory bodies (Optical Laboratories Association, Health Protection Branc of Health Canada, and Canadian Standards Association). 	
		Reschedules appointments to avoid spread of illness.
		Wears a mask and gloves to avoid contamination.
2.4.4	Demonstrate proper disinfection techniques for	Cleans the forehead rest, chin rest, cheek rest, and eyepieces with disinfectant.
	refraction equipment prior to	Cleans the hand-held occluder with disinfectant.
each patient's use.	each patient's use.	Disinfects the tonometer prior to each patient's use.
	Disinfects trial frames prior to use with each patient.	
2.5	Needs Assessment	
2.5.1 Compile a patient history to determine whether to proceed with the refraction.	 Performs symptomology assessment of medical considerations needing more thorough coverage (e.g., multiple sclerosis, diabetes, chemotherapy, corneal disease, cataracts). 	
		Determines a patient's ability to participate in the refraction process.
		Assesses a patient's previous ocular history.
	Assesses history provided by a previous practitioner and	

infection.

determines whether additional information is required.Does not refract a patient who presents with an active eye

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
2.5.2	Document patient information	Charts the date, chief complaint, and duration for each
	clearly and concisely.	visit.
		Charts the medications a patient is taking.
		 Records patient information so that another eye-care professional will be able to interpret the patient's information.
		Records information in English or French.
		Records the follow-up care plan for a patient.
2.5.3 Use objective techniques to identify and quantify ametropia.	identify and quantify	Uses streak retinoscopy to determine neutrality, refine neutrality, and neutralize and find sphere and cylindrical power.
		 Uses an autorefractor to perform objective refraction for a patient with spherical or astigmatic refractive errors.
		 Performs an objective assessments of refractive errorusing a retinoscope and the phoropter.
	• Tests versions by assessing the 9 positions of gaze to detect weakness of extraocular muscles.	
		Uses the Hirschberg corneal reflex test to assess for eye alignment deviations.
		Uses the Krimsky corneal reflex test to measure for eye alignment deviations.
		 Assesses for a heterotropia (tropia) using the unilateral cover test.
	• Uses the alternating cover test to assess for a heterophoria (phoria).	
_	Use subjective techniques to identify and quantify	Conducts visual acuity testing for distance and near, with and without correction.
		Performs fogging monocularly to determine most plus/least minus.
		Performs the bichrome (red-green) test.
		Performs the Jackson cross cylinder test.
		Performs astigmatic chart testing monocularly.
		Performs binocular balance testing using prism dissociation.
		 Measures a tropia or phoria using the alternating cover test with prisms.
		• Uses the Worth 4-dot test to assess suppression of either eye.
		Sets up Risley prisms for vergence testing.
		Performs lateral vergence testing.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
2.5.5	Assess accommodation to quantify near correction.	 Measures the amplitude of accommodation using the Donders/pushup/proximity method and the minus lens to blur method. Determines the reading addition power at the distance(s) required by a patient for near activities. Determines the amplitude of accommodation considering the patient's age.
2.5.6	Identify previously diagnosed visual deficiencies to set realistic patient expectations.	 Consults the patient history to determine ocular conditions that may adversely affect visual outcomes. Educates a patient about previously diagnosed visual deficiencies and how they will affect visual outcome. Counsels a patient to accept realistic expectations.
2.5.7	Conduct pupil testing to identify the need for referral.	 Conducts pupillary assessment for direct and consensual responses. Records symmetry of pupils for comparison to pastand future result. Records pupil size to identify irregularities requiring referral.
2.5.8	Perform confrontation field testing to identify the need for referral.	 Understands and performs manual perimetry. Understands and performs auto-perimetry. Refers a patient if abnormalities are identified.
2.5.9	Recognize significant signs and symptoms in relation to the patient's eyes to identify the need for referral.	 Uses an ophthalmoscope to view the red reflex and the retina. Identifies eye abnormalities. Recognizes significant signs and symptoms in relation to a patient's eye and general health found incidental to the refraction. Conducts pinhole acuity testing at distance with or without correction. Uses tonometry to test intraocular pressure for screening purposes.
2.5.10	Produce a refractive specification sufficient to fulfill an eyeglass or contact lens order.	 Produces a refractive specification that includes sphere, cylinder, axis, and add. Notes prism, including power and direction. Records best corrected visual acuity.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
2.6	Patient Communication	
2.6.1	Establish mutual understanding with the patient to build rapport and set expectations.	 Explains the limitations of a refraction specification. Educates a patient based on the patient's wants and the limitations imposed by ocular conditions. Demonstrates to a patient that the patient's needs come first.
2.6.2	Set expectations to facilitate patient adaptation to their visual abilities and eyewear.	 Explains to a patient the visual effects of the refraction specification. Explains to a patient that magnified images may appear closer. Explains eyeglass options to a patient based on refraction results.
2.6.3	Demonstrate an understanding of surgical and non-surgical alternatives to eyewear to respond to patient enquiries.	 Demonstrates an understanding of laser refractive surgery. Demonstrates an understanding of intraocular lenses. Demonstrates an understanding of orthokeratology.
2.6.4	Discuss with the patient systemic diseases and ocular conditions and their effect on vision to assist in setting patient expectations.	 Advises a patient that cataracts will affect their visual acuity. Explains to a patient with keratoconus that the patient may require contact lenses for optimal vision. Explains to a patient with uncontrolled diabetes that the patient's vision may fluctuate.
2.6.5	Verify that communications to the patient have been fully understood.	 Probes for understanding when educating patients and setting realistic expectations. Repeats important information or instructions to a patient. Clarifies that the refractive specifications can be used for eyeglasses or contact lenses. Prompts open-ended questions regarding the refraction procedure.
2.7	Continuing Care	
2.7.1	Develop a plan of care stemming from refraction if required to promote and maintain ocular health.	 Demonstrates an understanding of the elements of a plan of care stemming from refraction. Determines the follow-up interval. Refers a patient to appropriate practitioner as necessary.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
2.7.2	Troubleshoot adaptation problems to maximize patient comfort and visual acuity.	 Instructs a patient on proper lid hygiene care. Instructs a patient on use of rehydrating drops. Modifies the refraction specification to ease accommodation when patient's refraction has changed substantially.
2.7.3	Develop an effective referral network to support the patient and maintain ocular health.	 Maintains an ongoing working relationship with an ophthalmologist and/or optometrist. Creates a referral letter template. Identifies the closest emergency rooms. Identifies other healthcare professionals in the community for referrals as necessary.

Domain 3. Eyeglasses and Low Vision

These competencies focus on the requirements to dispense eyeglasses and sub-normal vision devices. All opticians need to demonstrate all of these competencies.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.1	Anatomy and Pathology	
3.1.1	Demonstrate an understanding of the visual pathway.	 Recognizes disruption in vision caused by disease or accident. Describes the anatomy of the visual pathway. Educates a patient that the eye is like a camera.
3.1.2	Demonstrate an understanding of the ocular system.	 Educates a patient with accommodation issues on how the crystalline lens works and explains how this affects the patient's accommodation for reading or near vision. Educates a patient on what 20/20, 20/30, and 20/80 visual acuity means. Discusses with a patient the reduction in visual acuity caused by cataract development in the ocular system. Describes Gullstrand's eye.
3.1.3	Demonstrate an understanding of the anatomy of the eye.	 Educates a patient about the risks of ultraviolet light on the ocular structure. Educates a patient about presbyopia. Explains to a patient the meaning of astigmatism. Describes the structures of the eye (e.g., lens, retina). Demonstrates an understanding of the eyeball and adnexa.
3.1.4	Demonstrate an understanding of the impact of systemic diseases and ocular pathologies on eye health and vision.	 Offers recommendations to correct aniseikonia. Identifies disruptions in vision caused by diabetes and educates the patient accordingly. Advises urgent treatment for children experiencing strabismus. Refers a patient with hypertension when changes in vision occur. Refers a patient experiencing the onset of scleritis.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.1.5	Recognize the effects of categories of medication that have a potential effect on vision and ocular health.	 Demonstrates an understanding of the use of medications on glaucoma. Educates a patient about the benefits of vitamins for agerelated macular degeneration and its treatment. Educates a patient about the decreased tearing and dryness associated with antidepressants. Educates a patient about the potential side effects of medications they are taking, such as dryness of the eye or fluctuating vision.
3.1.6	Demonstrate an understanding of external factors affecting the eye.	 Educates a patient about the risks of ultraviolet light on the ocular structure and makes recommendations accordingly. Educates a patient about the harmful effects of high-energy visible light and offers options for protection. Educates a patient about the adverse effects of digital eye strain and offers appropriate options.
3.1.7	Demonstrate an understanding of when it is necessary to refer.	 Refers a patient with hypertension when changes in vision occur. Refers a patient with diabetes for regular eye exams. Refers a patient experiencing sudden vision changes to their optometrist or emergency room. Refers a patient presenting with symptoms similar to those of conjunctivitis to their optometrist or emergency room. Refers a patient experiencing flashes of light to emergency room.
3.2 (Demonstrate an understanding of geometric optics.	 Selects the correct refractive index to minimize thickness based on a patient's Rx. Takes an optical centre measurement and monocular pupillary distances to provide the greatest opportunity for fusion for an anisometropic patient. Checks a patient's previous eyewear to confirm base curves to ensure successful adaption to new eyeglasses.
3.2.2	Demonstrate an understanding of physical lens properties and their effects on optics.	 Selects the correct lens material for Rx needs while taking into account the effects of Abbe values on high-power prescriptions. Educates a patient on the effects of wrap on optical prescriptions and sets appropriate expectations while minimizing optical distortions. Identifies chromatic aberrations and suggests solutions.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.2.3	Apply knowledge of monocular and binocular vision to the	Ensures that appropriate progressive lens designs are selected for monocular patients.
	dispensing of appropriate lenses.	Determines the presence of anisometropia or antimetropia resulting in aniseikonia and makes recommendations accordingly.
		 Demonstrates knowledge of producing aniseikonic eyeglasses to balance retinal image sizes to maximize binocular vision.
3.2.4	Demonstrate an understanding of lens treatments and their	Explains to a patient the advantages and disadvantages of polarization and makes recommendations about its use.
	effect on optics.	 Explains to a patient the advantages and disadvantages of anti-reflective coatings and makes recommendations on their use.
		Guides a patient in the selection of optical tints, taking into account the visual effects and benefits of each.
		 Advises a patient regarding driver's licence requirements and refers to the correct member of the healthcare team.
		Recommends eyeglass solutions to deal with photophobia.
		 Makes recommendations in regards to sun lens tints to enhance vision.
3.2.5	Apply appropriate mathematical calculations for	Chooses a frame that appropriately minimizes lens thickness.
	lens layout and edging.	Selects frames that work within laboratory limitations related to lens diameters in progressive addition lenses.
		 Designs aesthetically pleasing eyewear that takes into account the effects of prism on lens thickness.
		 Chooses a frame with a pupillary distance similar to the patient's to minimize lens thickness.
		Selects frames in which the effective diameter meets the lens diameter availability.
3.3 E	Equipment and Tools	
3.3.1	Verify the calibration of operating equipment.	Calibrates a lens clock using a known flat surface, such as a mirror.
		Calibrates a lens clock prior to checking base curves on existing eyeglasses.
		Focuses the eyepiece and zeroes out the lensometer before neutralizing or checking eyeglasses.
		Confirms calibration of the pupilometer using the built-in calibration tool prior to taking a patient's pupillarydistance.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.3.2	Choose the equipment required for fitting eyeglasses to the patient.	 Uses nylon-tipped tools to ensure frame surfaces are not marred during adjustments. Uses a lensometer or digital lensometer to neutralize lenses. Uses a frame-warming device for adjustments. Uses tools (e.g., screwdrivers, files) to align a frame on a patient's face.
3.3.3	Identify and name the equipment used in practice.	 Converses with colleagues using profession-specific terminology. Documents equipment names accurately in records. Explains tools and equipment to a patient in plain language.
3.3.4	Operate manual and automated equipment necessary for practice.	 Demonstrates proper and accurate use of appropriate tools (e.g., pupilometer, lens clock, thickness calipers). Takes a pupillary distance with a ruler and penlight and/or a pupilometer. Neutralizes a patient's eyeglasses efficiently and correctly using a manual and an automated lensometer.
3.3.5	Maintain equipment in safe operating condition.	 Uses alcohol wipes to clean the pupilometer before taking a patient's pupillary distance. Checks temperature of the dye-pot unit to ensure it is operating in the safe range. Verifies that electrical cords are intact.
3.3.6	Interpret the results found using optical equipment and tools.	 Demonstrates proper and accurate use of a lensometer to neutralize a lens and interpret the findings. Demonstrates proper and accurate use of appropriate tools (e.g., pupilometer, lens clock, thickness calipers) and interprets the findings accurately. Recognizes dissimilar monocular pupillary distances and knows when they are required in manufacturing. Recognizes dissimilar segment heights and fits progressive lenses accordingly.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.4 I	nfection Control	
3.4.1	Recognize infection hazards so that preventive measures can be implemented.	 Demonstrates situational awareness by observing the environment, anticipating potential risks, and seeking assistance when needed. Advocates for changes when risks are identified by recommending interventions. Documents and tracks safety incidents, including falls,
		injuries, etc.Ensures the premises do not present a physical safety hazard.
3.4.2	Demonstrate proper disinfection techniques for equipment and dispensing area.	 Ensures all solutions are properly sealed and have not expired. Educates a patient on the proper use of ophthalmic appliances to prevent infection. Educates staff on proper sterilization techniques Sanitizes equipment prior to touching patients. Disinfects lenses, tools, and instruments. Disinfects dispensary following known cases of infection.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.4.3	Follow infection control and prevention measures to maintain a hygienic environment.	 Takes appropriate actions to consistently align practice environment and policies with legislation and standards (e.g., labour laws, safety legislation, industrystandards). Follows Health Canada's recommendations for handwashing between patients. Participates in quality improvement initiatives. Washes/sanitizes hands prior to touching patients. Enforces hand-washing by staff. Disposes of waste appropriately and hygienically. Maintains the dispensary to a "hospital clean" standard. Maintains sample frames on display in a hygienic fashion. Disinfects dispensary following known cases of infection. Removes waste daily. Does not allow food in laboratory areas. Ensures appropriate infection control signage is visible to staff. Ensures equipment is disinfected between patients. Adheres to infection prevention and control measures established by jurisdiction and national regulatory bodies (Optical Laboratories Association, Health Protection Branch of Health Canada, and Canadian Standards Association). Advocates for organizational policies that support public protection.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.4.4	Address contagious illness within the work environment to avoid spreading illness to	 Keeps abreast of public safety alerts and infectious disease outbreaks. Limits patient access to a specific area of the dispensary.
	others.	Sanitizes any area a patient has touched.
		Washes/sanitizes hands after making contact with a patient.
		Sanitizes all tools used while assisting a patient.
		 Refuses to engage in contact with or be in close proximity to a patient without proper infection control devices in cases of personal illness or sickness.
		Wears a mask to prevent the spread of airborne bacteria.
		Washes hands repeatedly and always prior to touching a patient.
		Stays secluded when infectious.
		Has a documented emergency response plan.
		Implements procedures to react to an acute infectious disease outbreak.
		Monitors changes in regulations and standards related to public health.

3.5 Needs Assessment

- 3.5.1 Collect information from the patient regarding their visual needs and what they expect from their vision correction.
- Collects subjective information from a patient regarding their visual needs and what they expect from their vision correction.
- Actively listens to a patient's concerns and self-described symptoms.
- Actively listens to determine a patient's wants and preferences.
- Determines a patient's frustrations with previous vision solutions and records these in the patient record.
- Observes physical factors (e.g., head tilt, head position when walking, height of the person) and uses this information when taking measurements.
- Observes condition of current ophthalmic appliance and takes this into account when making new recommendations on durability and scratch resistance.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.5.2	Document objective and subjective information from the patient to reference when recommending eyewear.	 Records answers to specific lifestyle questions, including information about work and leisure needs. Records previous Rx information and optical history. Records the neutralization of previous eyeglasses in the patient record. Documents any information about current medication use. Documents any anomalies in health history and family history. Records all patient information in English or French. Updates the patient record to reflect patient needs and preferences. Updates the patient record to reflect patient concerns with existing vision solutions. Records in the patient record fitting recommendations based on physical posture and head tilt. Documents the type of work a patient does. Documents a patient's hobbies. Documents potential hazards found in a patient's workplace or hobbies. Records specific information, including focal distances, lighting, etc.
3.5.3	Determine external influences on patient vision to provide better recommendations.	 Collects information from a patient on ergonomic factors relevant to vision (e.g., computer distance and position, lighting, telephone/headset). Asks a patient about their hobbies and sports. Asks a patient about their work environment (e.g., office, construction, night work). Asks about potential hazards in a patient's workplace, including, but not limited to, high-energy visible light, ultraviolet light, digital fatigue, dust and debris, and safety concerns.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:	
3.5.4	Understand patient expectations related to their visual needs and visual acuity to ensure they are met or the expectations are modified.	 Conducts an assessment to determine a patient's wants, needs, and knowledge. Actively listens to determine patient's wants and preferences. Determines a patient's frustrations with previous vision solutions and records their frustrations in the patient record. Uses active listening to ensure a patient's expectations are understood. Uses lifestyle questions to determine a patient's needs and expectations. 	
3.5.5	Take accurate measurements with the appropriate tools to facilitate final frame and lens selection.	 Takes accurate pupillary distances, segment heights, and ocular centres. Takes position of wear measurements to maximize a patient's vision when fitting digital progressive lenses. Measures segment heights to the lowest point of the eyewire with an optically appropriate ruler/measuring device. Calibrates and focuses the lensometer prior to neutralizing or checking orders. Ensures equipment is in good working order. Ensures appropriate measurement techniques are followed. Accurately performs optical and frame measurements (e.g., segment height for all types of multifocal lenses, optical centre height, pantoscopic tilt, vertex distance, monocular pupillary distance – both distance and near, and frame wrap). Determines the working focal length and measures accordingly. Ensures that they and the patient are on a level plane prior to taking any measurements. Ensures that the eyeglass frame has been pre-adjusted for fit prior to taking any measurements. 	
3.5.6	Collect information on the patient's wearing environment to adjust recommendations to best fit the patient's needs.	 Determines occupational, hobby, and recreational needs. Discusses appropriate working distances for specific occupations, such as an IT professional or a plumber. Recommends safety glasses for an electrician. 	

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.5.7	Obtain relevant optical and health history to allow the optician to make better recommendations.	 Asks questions about a patient's previous Rx andoptical history. Asks questions about a patient's health history and family history.
		 Asks questions about a patient's lifestyle, includingwork and leisure needs. Obtains information about current medication use.
		Neutralizes previous eyeglasses.

3.6 Prescription Interpretation and Lens Duplication

3.0 F	Prescription interpretation a	and Lens Dupilcation
3.6.1	Demonstrate an understanding of the components of a	Educates a patient about anomalies of the eye that require corrective lenses.
	prescription.	• Evaluates the values in the optical Rx (i.e., sphere, cylinder, axis, prism, add power).
		 Recognizes ametropia and its characteristics from an Rx and makes recommendations accordingly.
		Determines the characteristics of a patient's old lenses.
		Evaluates changes in the correction.
		Advises refractive index changes based on Rx power.
		 Is aware of chromatic aberration concerns and advises appropriately.
		Advises a presbyopic patient when progressive addition lenses will not be an effective solution.
3.6.2	Demonstrate an understanding of the relationship between prescription requirements and lens selection for the best	Recommends the correct index for high-power prescriptions.
		Recommends dissimilar refractive indexes when appropriate.
	possible visual acuity.	Recommends the correct index for low-power prescriptions to maximize visual acuity.
3.6.3	Obtain lens specifications to duplicate eyeglasses.	Neutralizes a patient's eyeglasses for duplication.
		Sets a segment height to best match previous heights.
		Uses a lens clock to determine previous base curve.

Compe Has the	etency e ability to:	Practice Illustrations This ability is demonstrated when an optician:
3.7 L	ens and Frame Selection	
3.7.1	Jse assessment data to support lens and frame recommendations.	 Uses patient pupillary distance and Rx to make lens and frame selection. Recommends appropriate ophthalmic appliances based on identified needs for occupation and hobbies. Addresses patient concerns about vision and/or ophthalmic appliances.
3.7.2	Apply current relevant ophthalmic theories using mathematical calculations to select appropriate frames and lenses.	 Chooses an appropriate frame size to centre a patient's pupillary distance on high-power prescriptions. Chooses a frame shape that minimizes edge thickness on high-myopic prescriptions. Performs the correct compensation calculations to maximize visual acuity with high-wrap/curved frames.
3.7.3	Demonstrate an understanding of the relationship between prescription requirements and lens and frame characteristics to ensure aesthetic and functional eyewear.	 Selects appropriate frames for the Rx. Advises when a frame/lens combination will result in an unwearable product, whether because of poor optics, excessive thickness, or it being something the lab cannot create. Identifies limiting factors of the Rx and patient physiology (e.g., pupillary distance, height). Selects the appropriate lens type (e.g., lens design, thickness, base curve, refractive index).
3.7.4	Recommend appropriate frame choices based on the patient's requirements and preferences.	 Recommends hypoallergenic frame materials for a patient with a metal allergy. Recommends safety material frames for contact sports. Considers work and leisure needs, as well as physiology and previously gathered information, when making recommendations to a patient. Demonstrates an understanding of the benefits and limitations of various frame materials and conveys this to a patient when making recommendations (e.g., spring hinges for reading glasses).

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.7.5	Recommend appropriate lenses based on the patient's requirements and preferences.	 Makes recommendations that incorporate environmental factors (e.g., computer distance, lighting, working outdoors). Offers recommendations for leisure needs (e.g., sun, sports). Identifies the need for safety products and makes recommendations (e.g., electricians need non-conductive frames). Applies Canadian Standards Association (CSA) and American National Standards Institute (ANSI) standards to the selection of safety eyewear. Chooses safety materials such a polycarbonate (or other similarly impact-resistant materials) for industrial uses. Ensures children are provided with safety materials to offer maximum protection. Matches index suggestions to total power to ensure a balance between maximum visual clarity and thickness.
3.7.6	Balance recommended frame and lens options to meet the patient's requirements and preferences.	 Ensures the frame pupillary distance matches the patient's pupillary distance, within tolerance, for a patient with a strong Rx. Ensures the depth of the frame meets the minimum requirement for a progressive lens design. Selects a safety frame for impact-resistant lenses.
3.7.7	Recommend lens treatments based on patient needs to enhance aesthetic and visual outcome.	 Educates a patient about the benefits and limitations of photochromic lenses. Educates a patient about the benefits and limitations of polarized lenses. Educates a patient about the benefits of various tint colours. Educates a patient about lens treatment advantages and limitations.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
	Ordering	
3.8.1	Confirm the accuracy and completeness of the order before sending.	 Ensures the correct frame model is ordered. Ensures the correct size is ordered. Ensures the correct colour is ordered. Ensures the correct lens material is ordered. Ensures the correct lens treatment is ordered. Ensures the correct Rx is ordered. Ensures the correct measurements are provided with the order.
3.8.2	Provide required information to suppliers to complete the eyeglasses.	 Conveys the correct lens material and design to the laboratory for completion. Provides the supplier with the correct frame information for manufacturing. Provides the supplier with the correct Rx information. Provides the supplier with the correct measurements. Knows whether to indicate that the lenses is to be surfaced or stock and is aware of the effect this will have on the final product. Orders the correct base curve to match the frame-lens combination. Recommends alternates if the preferred lens material is unavailable. Specifies the optical measurements to ensure maximum visual acuity (e.g., pupillary distance, segment height, optical centre height, base curve, vertex distance, pantoscopic tilt, frame wrap, frame dimensions, and centre thickness). Specifies lens type, materials, coatings, and finishing. Provides frame specification (e.g., model number, size, and colour).

Compe Has the	tency e ability to:	Practice Illustrations This ability is demonstrated when an optician:	
3.9 l	3.9 Inspection and Industry Standards		
3.9.1 \	Perify the accuracy of the received order against the patient record.	 Analyzes and verifies the powers to ensure that they are within ANSI tolerance. Confirms that measurements received are as ordered. Confirms that correct edge and centre thicknesses were received. Ensures lens materials and treatments are as ordered. Verifies lens type is as ordered (e.g., brand, flat top, office lens). 	
3.9.2	Ensure eyeglasses meet standard tolerances.	 Applies standard tolerance chart to every order received from the laboratory. Verifies monograms and CSA requirements. Confirms that correct edge and centre thicknesses were received. Measures and verifies that the lenses are fabricated and mounted in the eyeglass frame within standardtolerance. Visually inspects the lens surface for imperfections. 	
3.9.3	Ensure eyeglasses are in standard bench alignment to ready them for placement on the patient.	 Adjusts frames to standard bench alignment. Confirms 4-point touch. Confirms temples open perpendicular to the frame front. Confirms nosepad splay angle. 	
3.9.4	Perform final visual inspection of eyeglasses before dispensing.	 Verifies the frame specifications (e.g., size, colour, model). Inspects for proper lens installation. Checks the frame surface for imperfections or damage. 	
3.10 V	erifying Fit and Patient Su	ccess	
3.10.1	Perform appropriate adjustments to ensure optimal positioning of the eyeglasses on the patient.	 Performs appropriate adjustments to correct misalignment. Ensures fit is square on a patient's face, touching at the bridge and crux of the ears. Uses instruments or tools to adjust the eyeglasses to maximize their effectiveness for a patient. Adjusts temple bend, nosepads, pantoscopic tilt, and frame wrap to fit the eyeglasses to a patient to maximize effectiveness. 	

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.10.2	Confirm that the eyeglasses meet the patient's needs and the expected visual acuity.	 Performs an assessment to collect subjective and objective information to ensure maximum visual acuity. Confirms the fit of the eyeglasses on a patient. Confirms visual acuity at distance with a Snellen chart. Confirms visual acuity for reading with a reading card. Records a patient's visual acuity in the patient record. Verifies that a patient finds the frame comfortable in situ. Requests feedback from a patient about whether the vision device meets their expectations.
3.11 P	atient Communication	
3.11.1	Communicate the advantages and limitations of products to patients clearly and meaningfully.	 Explains the limitations of eyeglass designs to maximize patient success. Explains the adjustment process for specific corrective lenses (e.g., progressive addition lenses) to promote successful adaptation. Educates a patient based on the patient's wants and the product's limitations. Reviews any limitations of the product to reinforce previous conversations and set patient expectations.
3.11.2	Advise the patient about care and cleaning of their eyeglasses to prolong eyeglass life and functionality.	 Teaches the correct care and cleaning of eyewear. Shows a patient how to clean lenses. Advises a patient about limitations of new eyeglasses (e.g., not leaving them in the car in the summer, not cleaning with window cleaner, taking care around heat sources). Provides handouts, directions to a website, instructions, and/or follow-up care. Discusses misuse and abuse of eyeglasses. Provides written material about the basics necessary for care of eyeglasses.
3.11.3	Demonstrate an understanding of surgical and non-surgical alternatives to eyeglasses to make the patient aware of all vision correction options.	 Demonstrates an understanding of laser refractive surgery. Demonstrates an understanding of intraocular lenses. Demonstrates an understanding of orthokeratology. Recommends contact lenses as an option to an eligible patient.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.11.4	Adapt communications to meet the needs of each patient.	 Adjusts teaching/training based on demographics and physical factors (e.g., age group, vision or hearing impairment, literacy level, language, cognitive impairment). Uses appropriate supporting materials. Presents diagrams, leaflets, and a range of different explanations to educate a patient in various learning styles. Uses a variety of demonstration techniques, including repeat demonstration. Collaborates with patients and caregivers to develop a patient-centred teaching plan. Recognizes factors influencing learning and adjusts teaching/training accordingly. Provides materials appropriate to the audience (e.g., correct literacy level, readability, font size, and format).
3.11.5	Establish mutual understanding with the patient to build rapport and set expectations.	 Clarifies expectations that affect the service (e.g., warranties, follow-up care, visual acuity). Clarifies time frame to produce eyeglasses prior toordering to set patient expectations. Sets patient expectations about time and work involved in patient-related tasks.
3.11.6	Encourage the patient to engage in appropriate follow-up care to maintain optimum performance of the eyeglasses.	 Recommends a reasonable follow-up schedule for a patient. Reinforces the value of the follow-up schedule when a patient returns for adjustments. Invites a patient back for regular adjustments. Recommends regular ocular health assessments. Recommends proper eyeglass maintenance techniques to a patient.
3.11.7	Discuss the visual effects of the patient's systemic diseases and ocular conditions to assist in setting expectations.	 Explains the ocular impact of a particular disease, condition, drug, or treatment. Educates a patient about potential solutions to their symptoms. Advises a patient with age-related macular degeneration that they will have impairment of their central and midfield of vision. Advises a patient with glaucoma that they may experience reduced peripheral vision.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.11.8	Manage situations in which patient expectations cannot be met to promote patient satisfaction.	 Explains to a patient normal adaptation to corrective lenses (e.g., lens materials, Rx changes, size of frame, optical situations). Probes for understanding when educating patients and setting realistic expectations. Identifies and manages escalating emotions.
3.11.9	Verify that communications to the patient have been fully understood.	 Probes for understanding when educating patients and setting realistic expectations. Highlights important instructions in writing. Clarifies the difference between progressive and photochromic lenses.
3.12 C	Continuing Care	
3.12.1	Identify patient concerns at follow-up assessment to create an action plan.	 Checks the fit of a patient's eyewear to address their complaint and find an appropriate solution. Actively listens to a patient's concerns/frustrations with their eyewear. Probes with questions to learn more about a patient's concerns with their eyewear.
3.12.2	Determine patient compliance with the care and use of the eyeglasses to identify the need for re-education.	 Explains limitations of progressive lenses vs. office lenses. Explains limitations of working distance with single-vision readers and with intermediate and distance eyeglasses. Reinforces the importance of using two hands to put on and remove eyeglasses. Reinforces the importance of proper lens care and use of an eyeglass case to limit scratches.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.12.3	Resolve concerns presented at follow-up to promote patient comfort and optimum vision.	 Adjusts eyewear to correct problems. Makes repairs as necessary. Checks quality of coatings to ensure optics are still acceptable. Recommends new eye exam if appropriate and if there are changes in vision. Makes physical modifications to the fit of the opticaldevice to correct patient concerns. Adjusts temple tip fit. Adjusts nosepad fit on a patient's bridge. Ensures the frame sits squarely on the patient. Applies professional judgement to determine whether frames can be repaired. Recommends plastic frames for a patient with a metal allergy. Recommends progressive lenses for a patient complaining of not being able to read using distance glasses.
3.12.4	Maintain the functionality of the eyeglasses to promote patient comfort and optimum vision.	 Discusses misuse and abuse of eyewear. Cleans eyeglasses in a sonic bath. Reshapes frames to combat widening and loosening. Tightens screws and oils hinges as appropriate. Changes nosepads when discolouration begins.
3.12.5	Perform appropriate repairs to fix damaged or broken frames.	 Selects the appropriate repair method (e.g., soldering, replacing). Replaces missing or worn nosepads. Restrings semi-rimless frames. Inserts replacement temple screws.
3.12.6	Perform lens insertion and removal on various frame types.	 Changes the chassis and plugs on rimless eyeglasses. Restrings the nylon on a semi-rimless frame and reinserts the lenses. Appropriately reinserts the lenses in an acetate frame.
3.12.7	Document patient visits to allow for effective continuity of care.	 Documents a patient returning for routine adjustments and care. Records patient concerns in patient record. Records recommendations made in patient record. Records repairs made in patient record. Records warranty information in patient record.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.13 L	ow Vision	
3.13.1	Demonstrate an understanding of the effects of specific diseases that contribute to vision loss.	 Obtains relevant information (e.g., type of disease, best corrected visual acuity) from a clinical referral to add to the continuum of care for a low-vision patient. Sets patient expectations when best visual acuity is less than 20/20 corrected. Prepares a patient for the central vision loss caused by macular degeneration and teaches the patient to use their peripheral vision. Educates a patient about the limitations in peripheral vision caused by glaucoma. Researches a patient's disease and its potential effects on the patient's vision.
3.13.2	Recognize signs and symptoms specific to low vision to identify a patient as having reduced functional vision.	 Records the observation that a patient shields their eyes, wears sunglasses continuously, avoids windows, etc. Documents a patient's position to read distance and near eye charts. Notes a patient's ability to view close objects and track material.
3.13.3	Conduct a detailed relevant visual history to determine previous successful and failed attempts to address low vision.	 Discusses treatments a patient receives from other sources. Determines a patient's specific problem areas and goals. Examines devices a patient is currently using. Records the devices' effectiveness. Records magnification of devices.
3.13.4	Conduct a low-vision assessment to determine visual restrictions to evaluate the functional vision a patient demonstrates.	 Performs a confrontational field test and records results. Performs a contrast sensitivity test and records results. Performs an Amsler grid test for macular degeneration patients and records results. Identifies where residual vision is and records results. Records best corrected visual acuity. Determines the presence of other contributing health and cognitive factors that affect low-vision assessment.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
3.13.5	Identify functional limitations of visual impairment to advise about devices and techniques suitable for vision enhancement.	 Assesses a patient's ability to read everyday items(e.g., food packages, medication labels, mail). Notes if a patient shuffles, has an unusual head posture, or appears clumsy. Examines how well a patient uses residual vision. Selects devices that are not hand-held for a patient with a hand tremor.
3.13.6	Evaluate the probability of success for alternative devices based on patient capacity and resources.	 Enquires about personal interests (e.g., hobbies, sporting involvement, social functions). Selects potential devices that include ones affordable to the patient. Incorporates a patient's cognitive function and willingness to receive rehabilitation into the selection of suitable devices. Demonstrates an understanding of the emotional stress for a patient/family/caregiver dealing with vision loss. Shows an understanding/sensitivity/empathy for a patient's emotional state. Shows an understanding of the psychological effects of low vision.
3.13.7	Educate patients on proper use of devices to achieve the desired visual outcome.	 Discusses with a patient the variables (e.g., quality, intensity, and position of the light source) that affect the use of the device. Teaches a patient how to control the size and distance of objects being viewed. Establishes a performance baseline with a device.
3.13.8	Engage patients in decision- making to help them make informed choices that meet the patient's goals.	 Helps a patient prioritize visual goals of distance or near correction. Considers flexibility of devices for specific needs foroffice use. Suggests aids that help normalize a patient's life through their ability to use aids during daily tasks.

Competency Has the ability to:	Practice Illustrations This ability is demonstrated when an optician:
3.13.9 Generate preferred solutions for low-vision patients that meet their current visual needs.	 Demonstrates 2 or 3 optical and non-optical aids for specific tasks. Communicates advantages and disadvantages of selected choices. Uses optical formulas to calculate probable required magnification. Uses optical formulas to calculate optimal viewing distances. Demonstrates an understanding of different filters and how they may benefit each type of patient experiencing low vision.
3.13.10 Implement a continuum of care plan to maintain optimal functional vision for low-vision patients.	 Supplies a patient with a general checklist or instructions on care and use of the devices. Discusses additional uses for the devices. Reminds a patient of scheduled follow-up appointment. Recommends regular follow-up with the patient's healthcare provider.
3.13.11 Monitor low-vision patients for changes in vision resulting in the need to alter the devices being used.	 Consults annually with a low-vision patient on whether devices still meet their needs. Enquires whether a patient feels their ability to function normally has changed. Reassesses a patient's best corrected visual acuity. Reassesses a patient's reading speed and tracking ability.
3.13.12 Identify new technology or devices that may be beneficial to new and existing patients.	 Researches devices with higher ranges of magnification, greater contrast choices, or easy mounting capability. Communicates with manufacturers and distributers of low-vision devices. Attends trade shows at which low-vision products are demonstrated.

Domain 4. Contact Lenses

These competencies focus on the requirements to dispense contact lenses. All opticians licensed to dispense contact lenses must demonstrate all of these competencies.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.1	Anatomy and Pathology	
4.1.1	Demonstrate an understanding of the visual pathway.	 Recognizes disruptions in vision caused by disease or accident. Describes the anatomy of the visual pathway.
		Educates a patient that the eye is like a camera.
4.1.2	Demonstrate an understanding of the ocular system.	Educates a patient about the risks of ultraviolet light on the ocular structure and makes recommendations accordingly.
		Educates a patient with accommodation concerns on how the crystalline lens works and explains how this affects their accommodation for reading or near vision.
		• Educates a patient on what 20/20, 20/30, 20/80 visual acuity means.
		Describes Gullstrand's eye.
4.1.3	Demonstrate an understanding of the anatomy of the eye.	Discusses with a patient the reduction in visual acuity caused by cataract development in the ocular system.
		 Educates a patient about presbyopia and offers recommendations for its management.
		Demonstrates an understanding of the anterior segment and related structure of the surrounding eye area.
		Explains to a patient the meaning of astigmatism and its treatment.
		Describes the structures of the eye (e.g., lens, retina).
		Demonstrates an understanding of the eyeball and adnexa.

Competency		Practice Illustrations
Has the	e ability to:	This ability is demonstrated when an optician:
4.1.4	Demonstrate an understanding	Identifies scleritis or uveitis in a patient.
	of the impact of systemic diseases and ocular	 Looks for signs of corneal erosion in patients, using fluorescein and a slit-lamp.
	pathologies on contact lens wear and ocular health.	 Advises a patient with Sjogren's syndrome that they are not a good candidate for soft contact lens as most suffer from severe keratoconjunctivitis sicca.
		 Looks for signs or episodes of episcleritis, keratitis, and keratoconjunctivitis sicca in lupus patients.
		 Uses a slit-lamp to look for signs of corneal inflammation in patients with systemic diseases.
		Identifies blepharitis using the slit-lamp illuminations.
		 Locates abrasions or foreign body staining when viewing the cornea through the slit-lamp using a blue filter once fluorescein has been applied to the eye.
		 Offers recommendations to correct aniseikonia with contact lenses.
		 Identifies meibomian gland dysfunction when seeing redness and inflammation of the lid margins whenusing diffuse illumination on the slit-lamp.
		 Identifies common eye disorders, such as pinguecula, subconjunctival hemorrhage, and conjunctivitis.
		 Examines the cornea with a slit-lamp and various illuminations for any signs of inflammation, corneal infiltrates, neovascularization, keratitis, ocular redness, and dryness.
4.1.5	Recognize potential effects of specific medications on contact	Performs tear breakup time test on all patients taking antidepressants to determine tear film quality.
lens wear and ocular hea	lens wear and ocular health.	 Educates a patient about the benefits of omega-3 supplements for dry eyes.
		 Educates a patient about the decreased tearing and dryness associated with any drug that causes dry mouth, such as antidepressants, antianxiety medications, antihistamines, and birth control.
		• Educates a patient about the effects of antidepressants and other medications on contact lens wear.

Compe Has the	tency e ability to:	Practice Illustrations This ability is demonstrated when an optician:
4.1.6	Demonstrate an understanding of external factors affecting the eye and contact lens wear.	 Educates a patient about how their environment can affect contact lenses wear. Educates a patient about the adverse effects of digital eye strain and options available to alleviate it. Educates a patient on the effect makeup can have on contact lens wear. Educates a patient on the effects of over-the-counter drugs, nutritional supplements, herbal treatments, alcohol,
4.1.7	Demonstrate an understanding of when it is necessary to refer.	 Refers a patient to an optometrist or ophthalmologist when an abrasion is more than superficial. Refers a patient with hypertension when changes in vision occur. Refers a patient experiencing the onset of scleritis. Refers a diabetic patient with vision changes.
4.2.1	Demonstrate an understanding of geometric optics.	 Selects the appropriate contact lens design for a patient's Rx. Educates a patient on the importance of a good tear film on vision and contact lens wear. Selects the appropriate contact lens design based on a patient's K-readings.
4.2.2	Demonstrate an understanding of contact lens properties and their effects on optics.	 Selects the correct lens material and modality for a patient's Rx and lifestyle. Educates a patient about environmental effects on contact lens wear, comfort, and vision. Identifies abnormalities in vision when a patient is wearing contact lenses and suggests solutions.
4.2.3	Apply knowledge of monocular and binocular vision to dispense appropriate contact lenses.	 Determines dominant and non-dominant eye by using Miles or Porta tests for eye dominance. Checks not just distance vison, but near vision in a 40+ year-old patient with an Rx increase but no prescribed add power. Discusses with a patient who has amblyopia or strabismus that contact lenses will not correct their binocular vision. Explains to a patient who has aniseikonia that they will have better binocular vision with contact lenses because the lenses will eliminate spectacle magnification.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:	
4.3 E	4.3 Equipment and Tools		
4.3.1	Identify and name the equipment used in a contact	 Converses with colleagues using profession-specific terminology. 	
	lens practice.	 Documents equipment names or abbreviations accurately in records. 	
		 Explains tools and equipment to a patient in plain language (e.g., keratometer, slit-lamp, radiuscope, lensometer, pupillary distance ruler). 	
4.3.2	Operate manual and automated equipment relevant to current contact lens practice	 Ensures equipment is in good working order, making sure machines are plugged in safely and that all lightbulbs are working. 	
	safely and accurately.	 States how the keratometer, slit-lamp, radiuscope, lens diameter gauge, and magnifier loupe are used. 	
		 Takes the base curve of a rigid gas permeable lens using the radiuscope. 	
		 Uses the lensometer to take the Rx of soft, rigid, and scleral contact lenses. 	
		Takes the lens diameter of various lens materials using a lens diameter gauge or magnifier loupe.	
4.3.3	Verify the calibration of operating equipment.	Calibrates a manual keratometer using the calibrations ball.	
		 Adjusts the eyepiece of a keratometer prior to taking corneal measurements. 	
		 Adjusts the eyepieces on a slit-lamp prior to viewing a patient's cornea. 	
		 Calibrates a radiuscope prior to taking the base curve of a rigid gas permeable lens. 	
4.3.4	Choose the equipment required for fitting contact lenses.	 Uses a keratometer or an autorefractor to take corneal readings. 	
		 Uses a slit-lamp to assess the cornea, sclera, and lid area of the eye using various illuminations. 	
		 Selects the appropriate trial lens for a patient after reviewing information collected about the patient. 	
4.3.5	Maintain equipment in safe operating condition.	Confirms all equipment plugs are in good working condition with no frayed or sliced cords.	
		 Double checks that all equipment is plugged into the appropriate outlets and that power bars are used when needed. 	
		 Double checks that there is a clear patient path to and from the equipment being used during the fitting. 	

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.3.6	Interpret the results found using optical equipment and tools.	 Uses a keratometer reading to choose the correct contact lens base curve. Applies vertex distance compensated spectacle power when choosing contact lens power.
		Uses ocular history and tear breakup time to determine the best lens material and modality.

4.4 Infection Control

4.4.1 Follow infection prevention and control measures to maintain a hygienic environment.

- Uses an alcohol-based hand sanitizer that requires hand rubbing.
- Cleans and sanitizes the contact lens training area prior to each use.
- Offers masks to patients who appear unwell or if other patients or staff are unwell.
- Ensures appropriate infection control signage is visible to staff.
- Follows Health Canada's recommendations for handwashing between patients.
- Demonstrates proper hygiene when serving patients by washing hands and ensuring equipment is disinfected between patients.
- Adheres to infection prevention and control measures established by jurisdiction and national regulatory bodies (Optical Laboratories Association, Health Protection Branch of Health Canada, and Canadian Standards Association).
- Maintains a clean and safe office environment.
- Advocates for organizational policies that supportpublic protection.
- Keeps abreast of public safety alerts and infectious disease outbreaks.
- Advocates for changes when risks are identified by recommending interventions.
- Disinfects dispensary following known cases of infection.
- Removes waste daily.
- Advocates for organizational policies that supportpublic protection.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:	
4.4.2	Recognize infection hazards so that preventive measures can be implemented.	 Keeps abreast of public safety alerts and infectious disease outbreaks. Demonstrates situational awareness by observing the environment, anticipating potential risks, and seeking assistance when needed. Advocates for changes when risks in the workplace are identified by recommending interventions. Documents and tracks safety incidents in the workplace. 	
4.4.3	Address contagious illness within the work environment to avoid infecting others.	 Has a documented emergency response plan. Takes appropriate actions to consistently align practice environment and policies with legislation and standards (e.g., labour laws, safety legislation, industrystandards). Implements procedures to react to an acute infectious disease outbreak. Monitors changes in regulations and standards related to public health. Sanitizes any area a patient has touched. Washes/sanitizes hands after making contact with a patient. Sanitizes all tools used while assisting a patient. Refuses to engage in contact with, or be in proximity to, a patient without proper infection control devices in cases of personal illness or sickness. Wears a mask to prevent spread of airborne bacteria. 	
4.4.4	Demonstrate proper disinfection techniques for equipment and fitting area prior to each patient's use.	 Cleans the keratometer, autorefractor, slit-lamp, and oculars with 6% alcohol pads, 70% ethanol, or isopropyl alcohol before each patient's use. Cleans the counters, sinks, and chairs in the contact lens room and office area daily with a disinfectant solution (chemical germicide approved and labelled for use as a sterilant/disinfectant and following label instructions). Uses disinfectant cleaner to clean pens, phones, keyboards, debit machines, etc. as needed, especially between patients who have colds or coughs. Ensures all solutions are properly sealed and have not expired. 	

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.4.5	Demonstrate proper disinfection techniques for contact lenses, cases, and fitting sets for safe reuse.	 Digitally cleans the contact lens surface with appropriate solution for brand/modality of the lens. Uses an oxidization (hydrogen peroxide) cold chemical regime for cleaning trial contact lenses that are reused, such as rigid gas permeable, scleral, speciality soft lenses, and hybrid diagnostic lenses. Uses disposable lenses only once.
4.5	Needs Assessment	
4.5.1	Obtain wearing history to learn of potential contraindications.	 Asks a patient who has previously worn contact lenses if they have any concerns or problems with current contact lenses. Asks a patient for information regarding the patient's previous contact lens and solutions use, including history or allergic reactions, sensitivities, or problems with lenses or solutions. Reviews a patient's current wear schedule/time, lens modality, frequency of lens changes, and solution being used.
4.5.2	Identify the patient's expectations and motivations for contact lens wear.	 Educates a patient based on the patient's wants and the product's limitations. Reviews with a patient what they are expecting from contact lens wear (e.g., social use, sports). Determines a patient's preferences and expectations by asking questions.
4.5.3	Collect objective medical and ocular health history information from the patient to identify contraindications.	 Asks a patient for a list of current prescribed and over-the-counter medication being used. Obtains a medical history, including systemic diseases, cancers, and eye disease or dystrophy. Asks a patient if they have had any eye surgeries or injuries. Asks a patient about any problems with dry eyes. Asks a patient if they have had amblyopia (lazy eye) or strabismus (crossed or wandering eye).

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.5.4	Collect information on the patient's wearing environment to provide recommendations that meet the patient's needs.	 Asks questions specific to lifestyle, including work and leisure needs. Finds out when and what a patient uses contact lens for. Asks a patient who wants multifocal lenses what activities they will be used for. Asks a patient about what their environment is like when wearing contact lenses to help fitter determine the best lens for the patient (e.g., whether the area they work in is dry, dusty, dirty). Consider circumstances, such as hockey or water sports, in which a patient wants to wear their contact lenses when recommending lenses.
4.5.5	Use equipment and tools to take accurate ocular measurements and readings for contact lens fitting.	 Uses a keratometer or autorefractor to take corneal measurement of the central cornea. Uses a pupillary distance ruler to measure pupil size, horizontal visible iris diameter, and fissure opening. Uses a corneal topographer to measure the corneal surface.
4.5.6	Conduct a visual acuity test to assess current vision performance.	 Performs a visual acuity assessment, distance andnear, binocular and monocular vison, using a Snellen chart. Uses other materials or environment to test vision, such as digital devices or stepping out of the contact lens fitting area to view items in a real-world setting. Performs a visual acuity test with a patient's current eyeglasses and/or contact lens on.
4.5.7	Determine dominant eye to optimize visual performance.	 Asks a patient which eye they prefer to use when looking through a camera or telescope. Determines dominant and non-dominant eye by using Myles or Porta tests for eye dominance. Asks a patient to hold a piece of paper with a hole in the centre at arm's length; the fitter will then look at the patient and ask which eye is visible to them.
4.5.8	Assess suitability of the patient for contact lens wear.	 Observes contraindicating factors such as dexterity, eyelid structure, fissure opening, pupil size, and age. Evaluates a patient's Rx for contact lens suitability. Evaluates a patient's contact lens assessment and measurements.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.5.9	Assess ocular health to determine if the patient can wear contact lenses safely.	 Assesses the eyelashes and external eyelids looking for various issues, such as meibomian gland dysfunctionand blepharitis, using a slit-lamp/biomicroscope.
		 Inverts the upper lid to view the tarsal plate/conjunctiva using a cotton swab.
		 Does a corneal and scleral assessment using a slit-lamp/ biomicroscope and using various indirect illuminations.
		• Evaluates the tear film for quality and quantity by using appropriate tests (e.g., tear breakup time and Schirmer's test).
		 Takes measurements of the pupil, visible iris diameter, and fissure opening.
4.6 F	Prescription Interpretation a	and Lens Selection
4.6.1	Demonstrate an understanding of the relationship between prescription requirements and lens selection for the best possible visual acuity.	 Reviews the Rx, corneal reading, and health of a patient with dry eyes before choosing the appropriate trial lens for the patient.
		• Gauges the manifested contact lens Rx (sphere, cylinder, axis, and add power) to ratify final contact lens power.
		 Selects the appropriate lens design and material for an astigmatic cornea considering the relationship between

of the components of a prescription.

Demonstrate an understanding

4.6.2

• Educates a patient on the components of their Rx.

of toric contact lenses before making final lenses.

corneal reading and Rx.

• Determines the characteristics of a patient's old lenses.

• Does a trial lens fitting to validate cylinder power and axis

- Evaluates changes in the correction by reviewing a patient's current Rx with the previous Rx and explains these changes to the patient.
- Assesses the values in the Rx to prescribe the best lens design (soft, rigid, spherical, toric, scleral) for apatient.
- 4.6.3 Identify irregularities in a prescription and the cornea when fitting contact lenses for best fit and vision for the patient.
- Explains the requirements of either spherical or toric lenses when a patient is on the borderline between sphere equivalent and toric.
- Explains how some anomalies of the eye can affect the fitting of contact lenses.
- Explains to a patient the anomalies of a high cylinder power Rx, noting that the patient will require toric, rigid gas permeable, or scleral contact lenses.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.6.4	Apply mathematical calculations to determine appropriate contact lens specifications.	 Converts an eyeglass Rx into a contact lens Rx using a vertex chart. Uses a vertex compensation formula to calculate effective power of contact lenses when Rx is +/- 4.00. Uses the flatter add plus or steeper add minus rule for calculating power changes when the base curve or diameter has changed enough to require a power adjustment for a rigid or scleral contact lens.
4.6.5	Select the appropriate contact lenses, considering prescription requirements and physiological findings.	 Selects the appropriate lens design and type based on a patient's ocular health, Rx, and keratometer readings. Selects appropriate options and explains them to a presbyopia patient. Suggests a single-use (1-day disposable) soft lens for a patient who does not wear contact lenses frequently. Reviews the information obtained about a patient's ocular and health history to determine what lens modality would best suit the patient. Reviews a patient's wants, needs, and expectations.
4.6.6	Apply product knowledge to select lens design, material, and modality.	 Educates a patient with dry eyes on the best lens material for the patient. Educates a patient on the best lens design to meet the patient's visual needs. Recommends a daily modality soft lens for an occasional contact lens wearer. Informs a patient with irregular corneas that rigid or scleral contact lenses will provide the best visual acuity.
4.6.7	Apply product knowledge to select the appropriate contact lens care regime.	 Recommends a multi-purpose soft lens solution to a patient using monthly disposable lenses. Recommends a peroxide cleaning system to a patient using soft contact lenses who has had protein buildup problems. Recommends the best solution for a rigid lens wearer and fully explains how to use daily cleaner and storing solution.
4.6.8	Insert a contact lens on a patient's eye safely.	 Follows Health Canada's recommendations for handwashing before application. Ensures their fingernails are an appropriate length. Ensures plunger is disinfected for application of scleral lenses.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.6.9	Remove a contact lens from a patient's eye safely.	Explains the soft lens removal procedure to a patient before removing the lenses.
		 Follows Health Canada's recommendations for hand- washing before removal.
		Uses plunger method to remove scleral or rigid gas permeable lenses.
4.6.10	Recentre a contact lens on a patient's eye safely.	For soft contact lenses, directs a patient's gaze toward a displaced lens.
		 For rigid gas permeable lenses, uses the eyelids tohelp recentre a lens.
		Lubricates contact lenses with solution to recentre.
4.6.11	Select contact lenses that take into consideration the patient's use of prescribed drugs, overthe-counter drugs, or other substances.	 Uses knowledge that drugs such as antidepressants, anti- anxiety medication, birth control, or any medication that may cause dry mouth will affect the tear film.
		Performs a tear breakup test to determine suitable Dk value lenses for a patient.
		• Examines the effects of a patient's medications on the eye when recommending a contact lens.
		 Recommends rigid gas permeable, scleral, silicone hydrogel, or daily disposable contact lenses in severedry eye cases.
4.7	Ordering	
4.7.1	Provide suppliers with the information they require to produce contact lenses.	 Provides a supplier with the brand of contact lenses. Provides a supplier with the parameters of contact lenses. Provides a supplier with a reference as to whom the contact lenses are for.
4.7.2	Confirm the accuracy and completeness of the order	Ensures that the correct base curve and diameter are ordered.
	before sending.	 Ensures that the correct power is ordered. Ensures that the correct brand and lens modality are ordered.

	etency ne ability to:	Practice Illustrations This ability is demonstrated when an optician:
	Inspection and Industry Standards	
4.8.1	Verify the accuracy of the received order against the patient record.	 Checks that the contact lens box(es) match the brand, power, and diameter ordered. Checks that the correct number of lenses or boxes were received. Marks the lenses correctly right and left for a patient. Checks to make sure expiration dates on soft contact lens boxes are acceptable and not short-dated.
4.8.2	Ensure rigid lenses meet standard tolerances.	 Uses a lensometer to verify the power of rigid gas permeable contact lenses. Uses a radiuscope to verify base curve of rigid gas permeable contact lenses. Uses a lens diameter gauge or magnifier loupe to measure lens diameter of rigid gas permeable lenses. Uses a tolerance chart to check that the lenses are within industry standards.
4.8.3	Perform final visual inspection of rigid lenses before dispensing.	 Uses a magnifier loupe to check edges of lenses. Checks that the contact lens box(es) match the brand, power, and diameter ordered. Ensures that the right lens is dotted.
4.9	Verifying Fit and Patient Su	ccess
4.9.1	Evaluate whether the contact lenses fit as expected.	 Uses a slit-lamp to view and evaluate the position, coverage, movement, and lens condition. Evaluates the fit of rigid gas permeable and scleral lenses by inserting fluorescein into the eye and viewing lenses with a slit-lamp using both white and blue filter light. Ensures that there is adequate corneal clearance for rigid lenses. Performs the pushup test while the lens is in situ. Uses a slit-lamp and narrow beam to evaluate the axis on a toric lens and apply left add right subtract if the axis marks are not sitting in the correct position.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.9.2	Evaluate whether visual acuity is as expected.	 Assesses binocular and monocular vision at distance using a Snellen chart with contact lens on the eye. Assesses binocular and monocular vision at near using a near reading card under normal lighting. Performs a manifest over-refraction using hand-held powers or a phoropter to determine how and if the lens power needs to be changed.
4.9.3	Refine lens selection when fit or visual acuity is not as expected.	 Adjusts the lens power using a manifest over-refraction. Uses hand-held powers +/- 0.25 and +/- 0.50 to achieve best vision with lenses. Selects a different lens material to help with vision problems.
4.9.4	Verify contact lens fit and comfort based on the patient's subjective responses to assess if lenses meet the patient's expectations.	 Asks a patient to describe the initial comfort of the lens. Enquires how initial vision seems and asks if it seems stable. Asks a patient if they have any problems or concerns with the contact lenses dispensed to them.
4.10 P	Patient Communication	
4.10.1	Explain contact lens options that meet the patient's needs.	 Discusses with a patient their lifestyle needs and uses for contact lenses, such as for sports and for all-day general wear. Discusses with a patient the different modalities of contact lenses that may suit their needs and ocular and health history. Educates a patient on the options available to the patient for their Rx.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.10.2 Advise patients on any limitations of the recommended contact lenses to promote continued ocular health, visual acuity, and wearing comfort.	Reviews with a patient what benefits the patient will receive and what their responsibilities are. Thursday a patient on what they about a patience for their	
	to promote continued ocular	 Educates a patient on what they should anticipate for their vision with multifocal contact lenses.
	•	 Explains to a patient that the dryness on the eye resulting from taking antihistamines can affect contact lens comfort and vision.
	 Advises a wearer of soft single-use (1-day disposable) lenses of the importance of using the lens only once and of the eye health complications that may result from reusing dirty lenses. 	
		 Educates a patient on the wear time limitation of the modality of contact lenses they are wearing.
		 Explains to a patient the importance of blinking properly, especially when using digital devices, to provide the best comfort with their contact lenses.
		 Discusses the 20/20/20 rule for digital device use to promote contact lens comfort.
		 Makes a patient aware that changes in medication, systemic diseases, and other medical issues can affect the eyes, thus affecting contact lenses wear.
		 Advises a presbyopic patient on the limitations of the various forms of contact lenses used to correct presbyopia.
		 Explains to a patient using rigid gas permeable lenses the disadvantages of dust getting under the lens and how excessive tearing can result in poor vision, lenses coming out, and sore eyes.
4.10.3	4.10.3 Demonstrate an understanding of surgical and non-surgical alternatives to contact lenses to make the patient aware of all vision correction options.	Explains the necessity of eyeglasses as an alternative to contact lenses.
		Demonstrates an understanding of laser refractive surgery.
		Demonstrates an understanding of intraocular lenses.
	•	Demonstrates an understanding of orthokeratology.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.10.4	Discuss the visual effects of the patient's systemic diseases and ocular conditions to assist in setting expectations.	 Explains the ocular impact of a particular disease, condition, drug, or treatment. Educates a patient about potential solutions to their symptoms. Advises a patient with age-related macular degeneration that they will have impairment of their central and midfield of vision. Advises a patient with glaucoma that they may experience reduced peripheral vision. Advises a more frequent follow-up regime for a patient with diabetes.
4.10.5	Provide patient-centred training on insertion and removal of contact lenses.	 Has a patient view an instructional video on the insertion, removal, care, and hygiene for the modality of contact lens they are fitted with. Explains and demonstrates insertion and removal for a patient. Repeats instructions on insertion and removal as a patient does this on their own and encourages the patient throughout these processes. Recognizes difficulties with the process of insertion and removal and suggests different options and methods to perform these actions. Supplies tools such as suction cups and a plunger for rigid gas permeable and scleral lenses. Shows a patient when a soft contact lens is the correct, and incorrect, side up for insertion and explains the problems that could arise if the lens is inserted the wrong way.
4.10.6	Provide patient-centred education on wearing schedule of contact lenses to maintain or restore ocular health.	 Explains to a patient, and gives them instructions on, the wearing schedule for new wearers. Explains the importance of following the recommended wearing schedule. Reviews wear schedule with a patient who currently wears contact lenses. Explains to a new patient adaptation symptoms for contact lenses and that they should gradually increase wear time by 2 hours daily from 4 hours the first day.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.10.7	Provide patient-centred training on safe and proper contact lens hygiene, solution usage, and storage.	 Shows and explains proper care procedures for digital cleaning, disinfection, and storage with solution after wear. Explains the importance of rubbing the lenses on removal to take the daily debris off the lenses. Shows and explains to a patient rinsing techniques for lenses prior to insertion and what to do if a lens is dropped during insertion. Shows and explains contact lens case care, washing, rinsing, and air drying and explains the importance of a clean case and case replacement. Advises a patient of signs of solution sensitivity and the importance of letting the fitter know of this problem promptly so the fitter can advise the patient on what they should do.
4.10.8	Provide the patient with a follow-up care schedule to monitor ocular health and vision.	 Sets up a follow-up appointment for review of contact lens fit. Explains to a patient how follow-up appointments will be scheduled (e.g., 2 weeks, then 3–6 months). Explains that a patient is required to get a yearly contact lens check during which the cornea's health is rechecked.
4.10.9	Verify that communications to the patient have been fully understood.	 Provides written information to a patient to review to help with communication. Prompts open-ended questions regarding contact lens care and wearing schedule. Repeats important information or instructions to a patient.
4.11 C	Continuing Care	
4.11.1	Identify patient concerns at follow-up assessment to create an action plan.	 Asks a patient how contact lenses have been working out. Asks a patient how vision has been. Asks a patient about lens comfort. Confirms with a patient the comfort of their contact lens when at work, driving, on weekends, etc. Confirms with a patient that vison remains consistent through the day and that the patient is not having any visual disturbances. Asks a patient about handling of lenses if they are a new wearer.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.11.2	Determine patient compliance with the care and wear schedule to identify the need for re-education.	 Enquires about wear time of contact lenses. Enquires about how a patient is using contact lens solutions. Enquires about how a patient is taking care of their contact lens case.
4.11.3	Resolve concerns presented at follow-up assessment to promote patient comfort and optimum vision.	 Educates a patient who is having vision problems caused by soft lens dryness because of computer use (e.g., 20/20/20 rule). Makes any lens adjustments or changes needed to improve fit and comfort. Makes power changes to lenses as needed to improve vision. Recommends changes to solution system.
4.11.4	Document patient visits to allow for effective continuity of care.	 Confirms and documents all follow-up appointments with a patient. Ensures that follow-up care notes are understandable to all who may be viewing the document. Documents information discussed at follow-up appointments.
4.11.5	Conduct a follow-up assessment to confirm lens performance, patient outcomes, and continued ocular health.	 Tests visual acuity using a Snellen chart with contact lenses on after a minimum of 4 hours to ensure visual acuity is acceptable. Does an over-refraction if visual acuity is not acceptable. Uses a slit-lamp to verify that the lenses fit properly, are not too loose or too tight, and are centred and movewell. Uses a slit-lamp exam to ensure that a patient is free of corneal changes. Assesses with a slit-lamp the axis marks of soft toric contact lenses and adjusts axis marks using left add right subtract. Inserts fluorescein into the eye and checks fluorescein patterns with a slit-lamp on rigid gas permeable and scleral lenses to verify fit. Uses a keratometer to check if a soft lens is too loose ortoo tight by viewing the mires with the contact lens on the patient's eyes. Measures the corneal surface with a keratometer to determine degree of change after removal of rigid gas permeable contact lenses.

Competency Has the ability to:		Practice Illustrations This ability is demonstrated when an optician:
4.11.6	Resolve problems identified in the follow-up assessment.	 Adjusts soft lens fit if too loose or too tight. Adjusts soft toric lens axis as needed for best visual acuity. Makes changes to rigid lenses as needed to improve fit. Changes soft lens base curve, lens design, or material to improve centration and movement.
4.11.7	Refer to appropriate healthcare professional when necessary.	 Refers a patient to an optometrist or emergency room immediately if the patient presents with a corneal abrasion. Refers a patient to an optometrist if the patient presents with bacterial conjunctivitis.
		 Refers a patient to an ophthalmologist or emergency room immediately if the patient presents with acute corneal hydrops.
		Refers a patient to an optometrist or emergency room immediately if the patient presents with corneal ulcer.