

# Quality in Optometry in Wales

## *A toolkit for clinical governance in optometric practice*

### Part 3 – Interactive toolkit

This interactive toolkit will help you develop all aspects of clinical governance in your practice. There is a series of hyperlinks to take you forwards and backwards through the document. Clicking a hyperlink next to a question will take you to an action point giving advice on how to deal with that particular aspect of clinical governance. The action points have many external web links to a vast array of resources and documents available online. In the longer term, this toolkit will be developed to allow you to print a completed questionnaire.

NB This interactive toolkit addresses only core standards from “Healthcare Standards for Wales” (2005) at this time, i.e. standards representing legal or mandatory requirements and good clinical practice. Work is in progress to extend the toolkit to include the ‘developmental’ standards. The document, “Healthcare Standards for Wales”, is available from the Health of Wales Information Service (HOWIS) website by clicking: <http://www.wales.nhs.uk/sites3/page.cfm?orgid=465&pid=8970>

[Click Here to Start the Interactive Toolkit](#)

Priority Level 1 – Core Standards – legal or mandatory requirements

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
2	Does the practice offer patients equal access to services as required by the Disability Discrimination Act?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 1</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
2	Has the practice recently reviewed access? If no:				If Yes click <a href="#">Here</a>
	Has it done so in the past?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 2</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
2	Is the practice DDA compliant? If no:				If Yes click <a href="#">Here</a>
	Is there a system in place to ensure reasonableness of access?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 3</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
3	Do optometrists and dispensing opticians in the practice understand and comply with the GOC rules on referral?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 4</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
4(c) 4(d)	Does the practice have policies on mandatory Health and Safety requirements?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 5</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
6(a)	Does the practice have information on GOS sight test entitlement?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 6</a>
	Does the practice have information on WECI entitlement?				
	Does the practice have information on GOS voucher entitlement?				

Priority Level 1 – Core Standards – legal or mandatory requirements

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
6(b)	Does the practice have a contact lens specification form? If yes:				If No or Don't Know go to <a href="#">Action Point 7</a>
	Does it include the expiry date, re-examination date and your GOC number?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 7</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
8(b)	Does the practice operate equal opportunities and equal employment policies for staff?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 8</a>
10	Does the practice operate equal opportunities and access policies for people accessing healthcare?				

Priority Level 1 – Core Standards – legal or mandatory requirements

Second Domain: Clinical Outcomes

Standard	Questions	Yes	No	Don't know	Action Points
11(b)	Is a supervising optometrist present in the practice at all times? If no:				If Yes click <a href="#">Here</a>
	Are systems in place to ensure that delegated functions are not carried out without supervision?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 9</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
15(b) 15(c)	Does the practice have a formal complaints procedure? If yes:				If No or Don't Know go to <a href="#">Action Point 10</a>
	Is it available in writing for members of staff to access?				If Yes click <a href="#">Here</a>
	Does the practice have patient information material describing the procedure?				
	Does it give information about complaints advocacy support provided by Community Health Councils in Wales?				If No or Don't Know go to <a href="#">Action Point 10</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
15(d)	Have you been informed of a policy for managing poor performance in your area: If yes:				If No or Don't Know go to <a href="#">Action Point 11</a>
	Has the practice been provided with a copy of the policy?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 11</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
18	Does the practice have a computer system? If yes:				If No click <a href="#">Here</a>
	Is a systematic backup policy in place?				If Yes click <a href="#">Here</a>
	Is the policy available for staff to reference				If No or Don't Know go to <a href="#">Action Point 12</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(a)	Does the practice have glazing facilities? If yes:				If No click <a href="#">Here</a>
	Has the practice completed an RG2 document and submitted it to the MHRA?				If Yes click <a href="#">Here</a>
	Does the practice display a certificate of conformity?				If No or Don't Know go to <a href="#">Action Point 13</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(a)	Is equipment decontaminated before inspection, service, repair or disposal?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 14</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(d)	Do you dispose of POMs by incineration?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 15</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(d)	Does your practice have a refuse collection contract with your landlord, local authority or other suitable service provider?				<p>If Yes click <a href="#">Here</a></p> <p>If No or Don't Know go to <a href="#">Action Point 16</a></p>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(d)	Does your practice undertake any blood tests? If yes:				If No click <a href="#">Here</a>
	Are sharps and contaminated products disposed of using a sharps and clinical waste collection service?				If Yes click <a href="#">Here</a>  If No or Don't Know go to <a href="#">Action Point 17</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
26	Does the practice have a data-management policy?				If Yes click <a href="#">Here</a>
	Are patient records/data secured, e.g. by locks, passwords, access rights?				If No or Don't Know go to <a href="#">Action Point 18</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
26	Is the practice registered under the Data Protection and Freedom of Information Acts?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 19</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
26	Does the practice have a registered Freedom of Information publication scheme?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 20</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
27(b)	Does the practice undertake POS checks?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 21</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
27(d)	Is a member of staff responsible for assessing risks and acting on any findings?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 22</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
27(d)	Have risk assessments been undertaken?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 23</a>

Priority Level 1 – Core Standards – legal or mandatory requirements

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
27(d)	Does the risk management policy include the reporting of patient safety incidents?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 24</a>

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
2	Does the practice provide domiciliary services? If no:				If Yes click <a href="#">Here</a>
	Does the practice refer patients to a domiciliary provider?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 25</a>

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
3	Are optometrists in the practice conversant with emergency treatment pathways operating locally?				If Yes click <a href="#">Here</a>  If No or Don't Know go to <a href="#">Action Point 26</a>
3	Is written information on local emergency care arrangements available to locums working in the practice?				

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
3	Does the practice provide information for out of hours care of contact lens patients?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 27</a>

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
4(b)	Is there sufficient privacy for patients during dispensing, POS checks and any diagnostic tests that are performed outside the consulting room?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 28</a>

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
5(a)	Are the reception areas and consulting rooms clean?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 29</a>

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
5(c)	Are hand-washing facilities or alcohol-based gel available in the consulting room?				<p>If Yes click <a href="#">Here</a></p> <p>If No or Don't Know go to <a href="#">Action Point 30</a></p>
5(c)	Does the practice have hand-washing facilities and/or access to alcohol-based gel for staff and patients?				
5(c)	Does the practice have disposable towels for hand drying?				

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
6(b)	Does the practice have patient literature on a range of ocular conditions?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 31</a>

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
6(b)	Does the practice offer copy referral letters to the patient?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 32</a>

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
6(c)	Do you give patients opportunities to discuss and agree options relating to their care?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 33</a>

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
7	Does the practice participate in WECI or co-management schemes? If yes:				If No click <a href="#">Here</a>
	Are patients encouraged to contribute to their care plans?				If Yes click <a href="#">Here</a>
	Are patients provided with opportunities and resources to develop competence in self-care?				If No or Don't Know go to <a href="#">Action Point 34</a>

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
8(d)	Do members of staff have a confidentiality clause in their contracts of employment?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 35</a>

Priority Level 2 – Core Standards – good clinical practice

First Domain: The Patient Experience

Standard	Questions	Yes	No	Don't know	Action Points
8(d)	Is the record storage area accessible to the public?				<p>If No click <a href="#">Here</a></p> <p>If Yes or Don't Know go to <a href="#">Action Point 36</a></p>

Priority Level 2 – Core Standards – good clinical practice

Second Domain: Clinical Outcomes

Standard	Questions	Yes	No	Don't know	Action Points
11(c)	Does the practice record the CET and/or CPD achievements of optometrists and dispensing opticians?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 37</a>

Priority Level 2 – Core Standards – good clinical practice

Second Domain: Clinical Outcomes

Standard	Questions	Yes	No	Don't know	Action Points
12(b)	Are systems in place to ensure that professional notifications and guidance is disseminated to all optometrists working in the practice?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 38</a>

Priority Level 2 – Core Standards – good clinical practice

Second Domain: Clinical Outcomes

Standard	Questions	Yes	No	Don't know	Action Points
12(b)	Are practitioners aware of the reasons and the codes for 'early' sight tests?				If Yes click <a href="#">Here</a>
	Do all practice staff have access to sight test frequency information?				If No or Don't Know go to <a href="#">Action Point 39</a>

Priority Level 2 – Core Standards – good clinical practice

Second Domain: Clinical Outcomes

Standard	Questions	Yes	No	Don't know	Action Points
12(b)	Does your practice participate in local shared care or co-management systems? If yes:				If No click <a href="#">Here</a>
	Are the relevant protocols available for reference in the practice?				If Yes click <a href="#">Here</a>
	Are all staff to whom these are relevant aware of the location of these protocols?				If No or Don't Know go to <a href="#">Action Point 40</a>

Priority Level 2 – Core Standards – good clinical practice

Second Domain: Clinical Outcomes

Standard	Questions	Yes	No	Don't know	Action Points
12(b)	Is your practice aware of NICE guidelines relating to PDT and Refractive Surgery?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 41</a>

Priority Level 2 – Core Standards – good clinical practice

Second Domain: Clinical Outcomes

Standard	Questions	Yes	No	Don't know	Action Points
12(d)	Do you have a patient consent policy for issuing duplicate spectacle or contact lens prescriptions to colleagues?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 42</a>

Priority Level 2 – Core Standards – good clinical practice

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
17	Does the practice have a chaperone policy?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 43</a>

Priority Level 2 – Core Standards – good clinical practice

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(a)	Are instruments regularly wiped with disinfectant?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 44</a>

Priority Level 2 – Core Standards – good clinical practice

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(a)	Do you check all prescriptions before dispensing?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 45</a>

Priority Level 2 – Core Standards – good clinical practice

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(a)	Do you have your equipment regularly serviced and keep a log of equipment maintenance checks?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 46</a>
19(a)	Do you calibrate your equipment regularly?				

Priority Level 2 – Core Standards – good clinical practice

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(b)	Does the practice use a contact tonometer or any other instrument which contacts the eye? If yes:				If No click <a href="#">Here</a>
	Are College of Optometrists' guidelines for decontamination or disposability followed?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 47</a>

Priority Level 2 – Core Standards – good clinical practice

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(b)	Does the practice use any special diagnostic hard or RGP contact lenses? If yes:				If No click <a href="#">Here</a>
	Are these decontaminated according to College of Optometrists' Guidelines?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 48</a>

Priority Level 2 – Core Standards – good clinical practice

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(c)	Are ophthalmic drugs stored safely and in accordance with the manufacturer's recommendations?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 49</a>

Priority Level 2 – Core Standards – good clinical practice

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
19(c)	Are all single-dose drugs (e.g. minims) used once and then discarded?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 50</a>

Priority Level 2 – Core Standards – good clinical practice

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
21(a)	Has the practice checked registration details of all professional staff, including locums?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 51</a>

Priority Level 2 – Core Standards – good clinical practice

Third Domain: Healthcare Governance

Standard	Questions	Yes	No	Don't know	Action Points
21(b)	Does the practice have professional guidance and codes of conduct available for reference by professional staff?				If Yes click <a href="#">Here</a> If No or Don't Know go to <a href="#">Action Point 52</a>

<p><b>ACTION POINT 1</b> Does the practice offer patients equal access to services as required by the Disability Discrimination Act?</p>	<p>NO or Don't Know</p>	<p>The requirements of the Disability Discrimination Act will determine how accessible a practice can be reasonably made. "Reasonable" changes are expected to be made to ensure equality of access. <b>To ensure compliance:</b> Practices should from time to time review accessibility and take measures to improve access where this is possible. Further information on access can be found at the Disability Rights Commission: <a href="http://www.drc-gb.org">www.drc-gb.org</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

<p><b>ACTION POINT 2</b> Has the practice recently reviewed access or has it done so in the past?</p>	<p>NO or Don't Know</p>	<p>The requirements of the Disability Discrimination Act will determine how accessible a practice can be reasonably made. "Reasonable" changes are expected to be made to ensure equality of access. <b>To ensure compliance:</b> Practices should from time to time review accessibility and take steps to improve access where this is possible. If advice is needed on modifying a practice then information can be found at the centre for accessible environments: <a href="http://www.cae.org.uk">www.cae.org.uk</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

**ACTION POINT 3**

Is the practice DDA compliant or is there a system in place to ensure reasonableness of access?

NO  
or  
Don't  
Know

The requirements of the Disability Discrimination Act will determine how accessible a practice can be reasonably made. "Reasonable" changes are expected to be made to ensure equality of access.

**To ensure compliance:**

Practices should from time to time review accessibility and take steps to improve access where this is possible.

An LHB may from time to time wish to gather information about which practices have, for instance, wheelchair access or steps, whether practices have a hearing loop system, someone who sign or protocols dealing with the hearing impaired and advice for those who are visually impaired. (Practices are not obliged to provide this information to LHBs.)

[Return](#) to Checklist

YES

Take no action

<p><b>ACTION POINT 4</b> Do optometrists and dispensing opticians in the practice understand and comply with the GOC rules on referral?</p>	<p>NO or Don't Know</p>	<p>When referring a patient through the appropriate pathway an optometrist must adhere to the rules relating to injury or disease of the eye. It is the duty of all optometrists to ensure that they understand and comply with the rules. <b>To ensure compliance:</b> Ensure that all optometrists working in the practice understand the regulatory requirements and their obligations in relation to the referral of patients. A copy of the rules may be found on the GOC website at: <a href="http://www.optical.org/index_files/legislation/disease1999.doc">www.optical.org/index_files/legislation/disease1999.doc</a> The College of Optometrists guidance on referring may be found at: <a href="http://www.college-optometrists.org/">www.college-optometrists.org/</a> AOP advice on referral can be found at: <a href="http://www.aop.org.uk/1121789288.html">http://www.aop.org.uk/1121789288.html</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

**ACTION POINT 5**

Does the practice have policies on mandatory Health and Safety requirements?

NO  
or  
Don't  
Know

Basic Health and Safety Executive (HSE) regulations require a practice to have policies dealing with hazardous substances, cross-infection control, toilet/washroom facilities, as well as clothing, changing, eating facilities. Statutory requirements exist, making risk assessments in Health and Safety, COSHH, mandatory on all businesses.

**To ensure compliance:**

Ensure the practice complies with all statutory obligations for Health and Safety. For more information go to the HSE website:

<http://www.hse.gov.uk/risk/>

<http://www.hse.gov.uk/coshh/assess.htm>.

[Return](#) to Checklist

YES

Take no action

<p><b>ACTION POINT 6</b> Does the practice have information on GOS sight test, WECl and GOS voucher entitlement?</p>	<p>NO or Don't Know</p>	<p>Posters must be displayed and leaflets available in public areas regarding GOS services. It is good practice to display information on WECl and any other local optometric services e.g. cataract assessment. <b>To ensure compliance:</b> Ensure that relevant posters are displayed as required. Copies can be obtained from your BSC or LHB.</p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

**ACTION POINT 7**

Does the practice have a contact lens specification form and if so, does it include the expiry date, re-examination date and your GOC number?

NO  
or  
Don't  
Know

The patient should be given a written specification for their contact lenses, to allow duplication of the lenses, when fitting is completed. The specification should include the expiry date and the fitter's personal details including their GOC number

**To ensure compliance:**

Ensure that all patients are given a copy of their contact lenses' specification sufficient to allow duplication of the lens once they have been satisfactorily fitted.

Pro-forma contact lens specification forms can be found at:

<http://www.college-optometrists.org/index.aspx/pcms/site.publication.otherguidance/>

or:

[http://www.aop.org.uk/services/services\\_misc.html](http://www.aop.org.uk/services/services_misc.html)

Further information on the legal aspect of contact lens fitting and supply can be found on the AOP website:

[http://www.aop.org.uk/uploaded\\_files/advice\\_on\\_sale\\_or\\_supply\\_of\\_contact\\_lenses.pdf](http://www.aop.org.uk/uploaded_files/advice_on_sale_or_supply_of_contact_lenses.pdf)

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 8**

Does the practice operate equal opportunities and equal employment policies for staff and equal opportunities and access policies for people accessing healthcare?

NO  
or  
Don't  
Know

All employers and providers of healthcare are required by law not to discriminate on the basis of gender, race, ethnic background, age, and disability, both in terms of employment and access to services.

**To ensure compliance:**

Practices should provide equal opportunities for all staff and patients and comply with anti-discrimination legislation. General information may be found at the Government's [Rights and Responsibilities website](#)

Further information on each of the main acts is available at the following web addresses:

Disability Discrimination Act: <http://www.drc-gb.org>

Sex Discrimination and Equal Pay Acts: <http://www.eoc.org.uk>

Race Relations Act: <http://www.cre.gov.uk>

Human Rights Act: <http://www.yourrights.org.uk>

Age Discrimination: <http://www.dti.gov.uk/employment/discrimination/age-discrimination/index.html> or

<http://www.businesslink.gov.uk/bdotg/action/layer?r.l2=1073877851&r.l1=1073858787&r.s=sm&topicId=1074003268>

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 9**

If a supervising optometrist is not available at all times when the practice is open, are systems in place to ensure that delegated functions are not carried out without supervision?

NO  
or  
Don't  
Know

Where tasks within the sight test, or dispensing to restricted groups, are delegated to others, practitioners must ensure that those undertaking the delegated tasks are appropriately trained. At all times a supervising optometrist or dispensing optician (for dispensing to restricted groups) must be present in the practice.

**To ensure compliance:**

Ensure either:

1. That an optometrist or dispensing optician (for dispensing to restricted groups) is available within the practice during opening hours; or
2. That no delegated tasks are undertaken when an optometrist or dispensing optician (for dispensing to restricted groups) is not present in the practice.

The College of Optometrists have advice on [delegation](#) and [supervision](#). Guidance as to who can or cannot carry out specific delegated tasks, and under what circumstances, should be available in writing within the practice.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 10**

Does the practice have a formal complaints procedure?

Is it available in writing for members of staff to access?

Does the practice have patient information material describing the procedure?

Does the practice complaints procedure give information about complains advocacy support provided by Community Health Councils in Wales?

NO  
or  
Don't  
Know

The practice must have a formal written complaints policy and appoint a complaints manager, even an independent practitioner working alone. Details of the procedure must be made available to patients including the name of the complaints manager. These are requirements of the GOS Terms of Service.

**To ensure compliance:**

Draw up your own written complaints procedure or adapt the model procedure published by the AOP. This may be downloaded from the AOP website at:

<http://www.aop.org.uk/1157457175.html>

Further information and guidance may also be found at:

<http://www.wales.nhs.uk/sites3/page.cfm?orgid=420&pid=15494>

Designate a complaints manager, even if this is you, and record that information.

Ensure that details of the procedure are available for patients if they request them; this should preferably be in writing.

Your complaints procedure should give information about complaints advocacy support provided by Community Health Councils in Wales. See:

<http://www.wales.nhs.uk/sites3/home.cfm?ORGID=236>

Your LHB should offer training to primary care staff on how to deal with difficult patients.

Your LHB should have an optometric adviser to assist in dealing with complaints.

[Return](#) to Checklist

YES

Take no action

<p><b>ACTION POINT 11</b>  Have you been informed of a policy for managing poor performance in your area?  Has the practice been provided with a copy of the policy?</p>	<p>NO  or  Don't  Know</p>	<p>Your LHB will have developed a policy on managing poor performance in conjunction with the Regional/Local Optometric Committee. All practices affected by the agreed policy should have a copy.  <b>To ensure compliance:</b>  Contact your ROC/LOC or LHB and ask for a copy of the document (or check their websites). If a local policy does not exist the AOP has a model policy for use by ROCs/LOCs and LHBs at:  <a href="http://www.aop.org.uk/primary/about_1043066462.html">http://www.aop.org.uk/primary/about_1043066462.html</a>  Your LHB should have an optometric adviser to assist in dealing with concerns and issues of performance.</p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

**ACTION POINT 12**

If the practice has a computer system, is there a systematic back up policy in place?

Is the policy available for staff to reference?

NO  
or  
Don't  
Know

Practices with computer systems should ensure that data is backed up in a systematic and regular manner. This is particularly important if patient records are stored electronically. Back up procedures should be documented and available for reference by practice staff.

**To ensure compliance:**

It should be possible to restore either the whole system or just one particular record. Backups should be made on a daily basis.

Full computer backup of your records should be conducted every night, and disaster recovery protocols in place in the event of a major system problem, using fireproof storage. Backups should be checked monthly to ensure they are valid and correct, and all computers are health checked monthly and protected by the most sophisticated anti-virus software available. Computers and networks connected to the internet should be protected by a firewall.

Connecting for Health have produced a booklet of advice for GPs on data backup and disaster recover including guidance on setting up a suitable backup routine. The booklet may be accessed at:

<http://www.connectingforhealth.nhs.uk/nhais/downloads/disrecovdefault>

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 13**

If the practice has glazing facilities, have you completed an RG2 document and submitted it to the MHRA?

Do you display a certificate of conformity?

NO  
or  
Don't  
Know

The practice is responsible for ensuring that any spectacles produced by an in-house glazing facility comply with all the relevant requirements of the Medical Devices regulations.

**To ensure compliance:**

Firstly draw up a written statement to this effect (a self declaration). The practice must then register the glazing facility with the Medicines & Healthcare Products Regulatory Agency (MHRA) by completing and returning form RG2. This need only be done once.

More information can be obtained from the MHRA website:

[http://www.mhra.gov.uk/home/idcplg?IdcService=SS\\_GET\\_PAGE&nodeId=185](http://www.mhra.gov.uk/home/idcplg?IdcService=SS_GET_PAGE&nodeId=185)

Form RG2 can be downloaded from:

[http://www.mhra.gov.uk/home/idcplg?IdcService=GET\\_FILE&dDocName=con007514&RevisionSelectionMethod=Latest](http://www.mhra.gov.uk/home/idcplg?IdcService=GET_FILE&dDocName=con007514&RevisionSelectionMethod=Latest)

Completed RG2 forms should be returned to the Registration Scheme Office at: Medicines & Healthcare products Regulatory Agency

European and Regulatory Affairs

Market Towers

1 Nine Elms Lane

London

SW8 5NQ

Following registration a certificate to show conformity with the regulations must be displayed in the workshop.

[Return to Checklist](#)

YES

Take no action

**ACTION POINT 14**

Is equipment decontaminated before inspection, service, repair or disposal?

NO  
or  
Don't  
Know

All medical equipment that is due to be inspected, serviced, repaired or disposed of must be decontaminated beforehand. This is to ensure that there is no risk to anyone handling the equipment.

**To ensure compliance:**

Equipment that comes into contact with healthy skin may be satisfactorily decontaminated by normal cleaning. Any equipment being serviced, repaired, sold or discarded should be cleaned beforehand. Further advice may be obtained from the MHRA at:

[http://www.mhra.gov.uk/home/idcplg?IdcService=SS\\_GET\\_PAGE&useSecondary=true&ssDocName=CON007315&ssTargetNodeId=572](http://www.mhra.gov.uk/home/idcplg?IdcService=SS_GET_PAGE&useSecondary=true&ssDocName=CON007315&ssTargetNodeId=572)

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 15**

Do you dispose of POMs by incineration?

NO  
or  
Don't  
Know

POMs used by optometrists are not considered hazardous but must be disposed of by incineration.

**To ensure compliance:**

Ensure that all unwanted POMs are disposed of by incineration. This facility is unlikely to be available in an optometric practice; a local GP surgery may be prepared to accept these for disposal. Your LHB may arrange a collection service. Alternatively your local authority may dispose of general refuse by incineration or a commercial waste disposal contractor can be engaged.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 16**

Does your practice have a refuse collection contract with your landlord, local authority or other suitable service provider?

NO  
or  
Don't  
Know

Your practice should have a refuse collection contract with your landlord, local authority or other suitable service provider.

**To ensure compliance:**

Arrange a refuse collection contract with a suitable provider.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 17**

If your practice undertakes blood tests, are sharps and contaminated products disposed of using a sharps and clinical waste collection service?

NO  
or  
Don't  
Know

Any practice undertaking blood tests, e.g. for diabetes, should ensure it is included in a sharps and clinical waste collection service from an approved contractor.

**To ensure compliance:**

The collection and disposal of hazardous clinical waste is the responsibility of the waste producer, however this may be organised by your LHB on behalf of contractors, including optometry practices, in its area.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 18**

Does the practice have a data-management policy?

Are patient records/data secured, e.g. by locks, passwords, access rights?

NO  
or  
Don't  
Know

Practices should have a data-management policy including details on appropriate record keeping, access to and security of records, data back up, retention and disposal of records.

**To ensure compliance:**

Draft a document outlining your policy with regard to data management. For help and guidance consult the following documents

[http://www.college-optometrists.org/objects\\_store/Record%20Keeping.pdf](http://www.college-optometrists.org/objects_store/Record%20Keeping.pdf)

[http://www.optometry.co.uk/articles/docs/760e139e9b05f7cd8f0a893c6253eb1a\\_warburton20040820.pdf](http://www.optometry.co.uk/articles/docs/760e139e9b05f7cd8f0a893c6253eb1a_warburton20040820.pdf)

[www.aop.org.uk/1103558674.html](http://www.aop.org.uk/1103558674.html)

[Return](#) to Checklist

YES

Take no action

<p><b>ACTION POINT 19</b> Is the practice registered under the Data Protection and Freedom of Information Acts?</p>	<p>NO or Don't Know</p>	<p>Practices should comply with statutory requirements under the Data Protection and Freedom of Information Acts. <b>To ensure compliance:</b> Ensure you meet your statutory obligations. Further information can be obtained from the AOP website: <a href="http://www.aop.org.uk/services/services_1037114662.html">http://www.aop.org.uk/services/services_1037114662.html</a> Or direct from the Information Commissioners office: <a href="http://www.ico.gov.uk/">http://www.ico.gov.uk/</a> Or the Freedom of Information website run by the Department of Constitutional Affairs: <a href="http://www.foi.gov.uk/index.htm">http://www.foi.gov.uk/index.htm</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

<p><b>ACTION POINT 20</b> Does the practice have a registered Freedom of Information publication scheme?</p>	<p>NO or Don't Know</p>	<p>All practices should have a publication scheme which sets out what information will be made available to the public and this must be registered with the Information Commissioner. <b>To ensure compliance:</b> Develop a publication scheme for the practice which meets the requirements detailed above. The scheme must then be registered and should be available to any member of the public who wishes to see it. If the practice has a website then you might consider making the policy available online. A model publication scheme and the registration form can be found on the AOP website: <a href="http://www.aop.org.uk/primary/about_1065009874.html">http://www.aop.org.uk/primary/about_1065009874.html</a> More information can be obtained from the Information Commissioners office: <a href="http://www.ico.gov.uk/">http://www.ico.gov.uk/</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

<p><b>ACTION POINT 21</b> Does the practice undertake POS checks?</p>	<p>NO or Don't Know</p>	<p>Point of Service (POS) checks ensure that where possible patients show evidence of entitlement to GOS services. Undertaking POS checks is a requirement of the GOS Terms of Service.</p> <p><b>To ensure compliance:</b> Ensure that all members of staff seek evidence of entitlement for every GOS patient seen. If this is not available then a mark should be made in the "Evidence not seen" graphic.</p> <p>Further information may be found in "Making Accurate Claims in Wales" details of which are on the AOP website: <a href="http://www.aop.org.uk/11690401695604.html">http://www.aop.org.uk/11690401695604.html</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

<p><b>ACTION POINT 22</b> Is a member of staff responsible for assessing risks and acting on any findings?</p>	<p>NO or Don't Know</p>	<p>Practices should undertake risk assessments and manage perceived risks. Statutory requirements exist, making risk assessments in Health and Safety and COSHH, mandatory on all businesses.</p> <p><b>To ensure compliance:</b> Undertake a risk assessment for your practice. For guidance on how to undertake a risk assessment go to: <a href="http://www.college-optometrists.org/objects_store/RiskManagementModule.pdf">http://www.college-optometrists.org/objects_store/RiskManagementModule.pdf</a> For more information on statutory obligations on businesses go to the HSE website: <a href="http://www.hse.gov.uk/risk/index.htm">http://www.hse.gov.uk/risk/index.htm</a> <a href="http://www.hse.gov.uk/coshh/assess.htm">http://www.hse.gov.uk/coshh/assess.htm</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

<p><b>ACTION POINT 23</b> Have risk assessments been undertaken?</p>	<p>NO or Don't Know</p>	<p>Practices should undertake risk assessments and manage perceived risks. Statutory requirements exist, making risk assessments in Health and Safety and COSHH, mandatory on all businesses.</p> <p><b>To ensure compliance:</b> Undertake a risk assessment for your practice. For guidance on how to undertake a risk assessment go to: <a href="http://www.college-optometrists.org/objects_store/RiskManagementModule.pdf">http://www.college-optometrists.org/objects_store/RiskManagementModule.pdf</a> For more information on statutory obligations on businesses go to the HSE website: <a href="http://www.hse.gov.uk/risk/index.htm">http://www.hse.gov.uk/risk/index.htm</a> <a href="http://www.hse.gov.uk/coshh/assess.htm">http://www.hse.gov.uk/coshh/assess.htm</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

**ACTION POINT 24**

Does the risk management policy include the reporting of patient safety incidents?

NO  
or  
Don't  
Know

Practices should undertake risk assessments and manage perceived risks.  
**To ensure compliance:**  
Develop a risk management policy. For guidance go to the College website:  
[http://www.college-optometrists.org/objects\\_store/RiskManagementModule.pdf](http://www.college-optometrists.org/objects_store/RiskManagementModule.pdf)  
Statutory requirements exist, making risk assessments in Health and Safety, COSHH, mandatory on all businesses.  
For more information go to the HSE website:  
<http://www.hse.gov.uk/risk/index.htm>  
<http://www.hse.gov.uk/coshh/assess.htm>  
A risk management policy should also include the reporting of patient safety incidents locally (to agreed protocols) and/or to the National Patient Safety Agency (NPSA).  
<http://www.npsa.nhs.uk/health/reporting/reportanincident>  
The College of Optometrists has published advice on the NPSA and reporting adverse incidents. It may be found at:  
[http://www.college-optometrists.org/objects\\_store/steps.pdf](http://www.college-optometrists.org/objects_store/steps.pdf)  
NB. Incident reports sent to the NPSA will be held in an anonymous format.  
If you have concerns about the safety of a regulated product, such as a drug, contact lens solution or device then it should be reported to the Medicines & Healthcare Products Regulatory Agency (MHRA). The MHRA accepts online reporting on their website at:  
[http://www.mhra.gov.uk/home/idcplg?IdcService=SS\\_GET\\_PAGE&nodeId=285](http://www.mhra.gov.uk/home/idcplg?IdcService=SS_GET_PAGE&nodeId=285)

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 25**

If the practice does not provide domiciliary services do you refer patients to a domiciliary provider?

NO  
or  
Don't  
Know

Not every practice will wish to provide domiciliary services, or be contracted to do so. If you are unwilling or unable to provide services to the housebound yourself you should have in place arrangements by which patients can be referred to a suitable domiciliary provider. Your LHB may wish to establish which practices provide domiciliary services, or for a practice that doesn't, how they direct a patient to a practice that does.

**To ensure compliance:**

You should hold a list of contact details for mobile contractors or be able to direct patients to a contact at your LHB.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 26**

Are optometrists in the practice conversant with emergency treatment pathways operating locally? Is written information on local emergency care arrangements available to locums working in the practice?

NO  
or  
Don't  
Know

When referring a patient through the appropriate care pathway an optometrist must adhere to the rules relating to injury or disease of the eye. It is the duty of all optometrists to ensure that they understand and comply with the rules. Access times for treatment routes are the responsibility of each individual LHB. It is helpful to patients, and beneficial to good clinical care, if optometrists are aware of local waiting times for secondary care. Expected waiting times for secondary care can be found at:

<http://www.statswales.wales.gov.uk/index.htm> or [www.drfooster.co.uk](http://www.drfooster.co.uk)

**To ensure compliance:**

Optometrists should be aware of the emergency routes for referral in their local NHS hospital trust(s) and be able to offer alternatives if the local NHS hospital trust cannot provide treatment within an appropriate timescale.

The College of Optometrists guidelines on emergency patient care should be used to inform the decision making process:

[http://www.college-optometrists.org/coo/download.cfm?uuid=5652CF3A-150B-60F2-9BF67D6E1BFA23D5&type=ethics\\_guidelines](http://www.college-optometrists.org/coo/download.cfm?uuid=5652CF3A-150B-60F2-9BF67D6E1BFA23D5&type=ethics_guidelines)

There should be written information in every practice to ensure that locums and other staff are aware of local procedures for referral of patients with ocular conditions requiring emergency care. This should be in a fixed and accessible location.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 27**

Does the practice provide information for out of hours care of contact lens patients?

NO  
or  
Don't  
Know

Your practice should provide information for out of hours care for contact lens patients.

**To ensure compliance:**

Arrangements should be in place to advise contact lens patients who develop problems out of hours. Included in these arrangements should be suitable actions and referral pathways for patients with symptoms suggesting an immediately sight threatening problem.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 28**

Is there sufficient privacy for patients during dispensing, POS checks and any diagnostic tests that are performed outside the consulting room?

NO  
or  
Don't  
Know

Practices should respect patients' privacy and confidentiality.

**To ensure compliance:**

Patients' consultations should be conducted in private. If diagnostic tests are performed outside the consulting room this should not be in the view of other patients.

Your LHB will have a policy on patient confidentiality and use of records. It should make this available to all contractors and provide the contact details of the LHB's Caldicott Guardian for advice.

[Return](#) to Checklist

YES

Take no action

<p><b>ACTION POINT 29</b> Are the reception areas and consulting rooms clean?</p>	<p>NO or Don't Know</p>	<p>Your practice should provide its services in a clean, well maintained environment. <b>To ensure compliance:</b> Ensure that the practice is clean and well maintained.</p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

**ACTION POINT 30**

Are hand-washing facilities or alcohol-based gel available in the consulting room?  
Does the practice have hand-washing facilities and/or access to alcohol-based gel for staff and patients?  
Does the practice have disposable towels for hand drying?

NO  
or  
Don't  
Know

Good hygiene practices will help minimise the risk of transfer of infection to patients and healthcare providers.

**To ensure compliance:**

The College has advice on infection control:

<http://www.college-optometrists.org/coo/download.cfm?uuid=148FD55B-DA81-FC40-F8F814C43F43DDA2&type=guidance>

The Royal College of Nursing also has a wealth of information on MRSA and infection control in general.

[www.rcn.org.uk/resources/mrsa/downloads/Wipe\\_it\\_out-MRSA-guidance\\_for\\_nursing\\_staff.pdf](http://www.rcn.org.uk/resources/mrsa/downloads/Wipe_it_out-MRSA-guidance_for_nursing_staff.pdf)

Key to infection control are effective hand-washing and drying procedures. Where frequent hand-washing is impractical or undesirable, alcohol-based disinfectant hand gel is an acceptable alternative.

Again the RCN has very clear instructions on effective hand-washing:

[www.rcn.org.uk/resources/mrsa/downloads/Wipe\\_it\\_out-Good\\_practice\\_in\\_infection\\_prevention\\_and\\_control.pdf](http://www.rcn.org.uk/resources/mrsa/downloads/Wipe_it_out-Good_practice_in_infection_prevention_and_control.pdf)

[Return to Checklist](#)

YES

Take no action

**ACTION POINT 31**

Does the practice have patient literature on a range of ocular conditions?

NO  
or  
Don't  
Know

Written information on specific aspects of eye care will be of benefit to patients and assist practitioners in explaining sometimes complex clinical concepts.

**To ensure compliance:**

Display posters and/or provide leaflets and make these available in the public areas of the practice. Information on the GOS, WECl and any other local optometric services e.g. cataract schemes may be useful. These should be provided by your LHB.

Patient literature about common eye conditions and their treatment should be available. The RNIB has several leaflets available for supply:

[http://www.rnib.org.uk/xpedio/groups/public/documents/PublicWebsite/public\\_ehprofessionals.hcsp](http://www.rnib.org.uk/xpedio/groups/public/documents/PublicWebsite/public_ehprofessionals.hcsp)

The College of Optometrists also has online public information available at:

<http://www.college-optometrists.org/index.aspx/pcms/site.Role.Public>

Other sources of information may also be found at:

[http://www.eye-care.org.uk/information\\_index.php](http://www.eye-care.org.uk/information_index.php)

<http://www.stockportloc.co.uk/?page=publications>

Any patient literature should be easy to understand. There are a number of organisations that will assess documents for plain English such as the Plain Language Commission. Information on this is available at:

<http://www.clearest.co.uk/>

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 32**

Does the practice offer copy referral letters to the patient?

NO  
or  
Don't  
Know

It is a regulatory requirement to provide a written statement of the reasons for referral when a patient is referred. Patients should be offered a copy of their referral letter and written explanation if required.

**To ensure compliance:**

Make it a practice policy that all patients who are referred are given a copy of their referral letter.

More information can be found at:

<http://www.aop.org.uk/1121789288.html>

[http://www.college-optometrists.org/coo/download.cfm?uuid=833C46FD-12FB-14B4-03C0FC34F88CF339&type=ethics\\_guidelines](http://www.college-optometrists.org/coo/download.cfm?uuid=833C46FD-12FB-14B4-03C0FC34F88CF339&type=ethics_guidelines)

and

<http://www.wales.nhs.uk/sites3/page.cfm?orgid=420&pid=15492>

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 33**

Do you give patients opportunities to discuss and agree options relating to their care?

NO  
or  
Don't  
Know

Patient participation in decision making relating to their care results in increased patient knowledge, better compliance and improved outcomes.

**To ensure compliance:**

You should ensure that patients have an opportunity to discuss and agree options relating to their care, such as choice in referral (e.g. choice of provider) and treatment options.

Patients should appreciate the importance of active participation in decisions related to their health care, understand the potential risks and benefits related to available options and have the opportunity to discuss these options with you before a decision is made.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 34**

If the practice participates in WECl or co-management schemes, are patients encouraged to contribute to their care plans

Are patients provided with opportunities and resources to develop competence in self-care?

NO  
or  
Don't  
Know

Patient participation in decision making relating to their care results in increased patient knowledge, better compliance and improved outcomes. Self care is the care taken by individuals towards their own health and well being. It includes the actions people take for themselves to maintain good eye health, prevent injury, care for minor ailments and chronic conditions and maintain eye health after an acute condition or discharge from hospital. With the right support people can be empowered and learn to be active participants in improving existing symptoms, avoiding flare-ups, slowing deterioration & preventing development of complications and other conditions.

**To ensure compliance:**

You should ensure that patients have an opportunity to discuss and agree options relating to their care, such as choice in referral (e.g. choice of provider) and treatment options.

Patients should appreciate the importance of active participation in decisions related to their health care, understand the potential risks and benefits related to available options and have the opportunity to discuss these options with you before a decision is made.

You should provide patients with the opportunity and resources (e.g. written instructions) to self care for minor conditions such as blepharitis and dry eyes.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 35**

Do members of staff have a confidentiality clause in their contracts of employment?

NO  
or  
Don't  
Know

Practice staff will have access to confidential personal information about patients. Staff should have an understanding of their duty to maintain confidence. This should be able to be enforced contractually.

**To ensure compliance:**

Staff must be made aware that confidential patient information should not be accessed, discussed or transferred unless specifically relevant to a patient's care.

Develop and implement staff contracts that include an obligation to maintain confidentiality.

Guidance and a model contract of employment can be found on the AOP website: [http://www.aop.org.uk/services/services\\_1077020842.html](http://www.aop.org.uk/services/services_1077020842.html)

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 36**

Is the record storage area accessible to the public?

NO  
or  
Don't  
Know

Patient record cards should be stored safely and be inaccessible to anyone other than practice staff at all times.

**To ensure compliance:**

Patient record cards should be stored in a way that is not accessible to members of the public or patients attending the practice and should be capable of being secured when the practice is closed. This means storing them in locked cabinets and/or a locked room separated from the communal areas of the practice.

Records should not be shown, copied or given to other parties, unless a patient gives explicit consent or exceptionally if it is clearly in the patient's best interest to do so. Patients may request copies of their records. Practices may make a small administration charge to cover the cost of copying only.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 37**

Does the practice record the CET and/or CPD achievements of optometrists and dispensing opticians?

NO  
or  
Don't  
Know

**To ensure compliance:**

It is a requirement of registration that optometrists and dispensing opticians attain sufficient CET points as laid down by the GOC.

It is a good idea for the practice to keep a log of permanent staff members' CET points achievements so that owners/managers can ascertain how their staff members are performing when appraisals are carried out. This can be achieved by professional staff providing a print out of their record from the <http://www.cetoptics.com/> website.

All practitioners as well as all other members of staff should be encouraged to maintain a Personal Development Plan.

Local protocols may require optometrists working within local co-management or shared care schemes to achieve and maintain agreed standards for participation. It is good practice to keep a record of all such ongoing local training for each member of staff associated with any such scheme.

Attendance at all such CET or CPD should be traceable and logged.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 38**

Are systems in place to ensure that professional notifications and guidance is disseminated to all optometrists working in the practice?

NO  
or  
Don't  
Know

Optometrists need to be aware of nationally and locally agreed guidance when planning and delivering treatment and care.

**To ensure compliance:**

A practice should ensure that all optometrists working for it are aware of new guidance that affects the way they practice or provide patient care. This may be particularly important for locum or other part-time staff who may not be aware of locally agreed guidance, particularly when it is relevant to shared care or co-management systems they may be involved with.

A central folder containing written guidance and reference documents should be available to all members of staff in a fixed and accessible location.

Guidance is available from the optical bodies' websites:

<http://www.abdo.org.uk>

<http://www.aop.org.uk>

<http://www.college-optometrists.org>

<http://www.fodo.com>

Welsh Health Circulars providing updates and guidance from WAG and NHS Wales are available at: <http://www.wales.nhs.uk/page.cfm?orgid=1&pid=8635>

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 39**

Are practitioners aware of the reasons and the codes for 'early' sight tests?

Do all practice staff have access to sight test frequency information?

NO  
or  
Don't  
Know

Guidance on intervals for routine Sight Tests has been agreed nationally.

**To ensure compliance:**

Information on the intervals and acceptable reasons is in Appendix 1 of the All Wales Protocol and Guidance Notes for PPV available from the AOP website:

<http://www.aop.org.uk/11690406485604.html>

Guidance is included in the AOP booklet "Making Accurate Claims in Wales":

<http://www.aop.org.uk/11690401695604.html>

Guidance is also provided by the College of Optometrists in their Guidelines for Professional Conduct Chapter 22:

[http://www.college-optometrists.org/coo/download.cfm?uuid=5E44AD13-F0BE-E316-66E011B748811518&type=ethics\\_guidelines](http://www.college-optometrists.org/coo/download.cfm?uuid=5E44AD13-F0BE-E316-66E011B748811518&type=ethics_guidelines)

Practitioners must be aware of the appropriate reasons, and the codes required to annotate the GOS1 form when early re-tests are clinically necessary.

Practices should have material containing these codes and intervals available as a reference for all staff in a fixed and accessible location.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 40**

If your practice participates in local shared care or co-management systems, are the relevant protocols available for reference in the practice?

Are all staff to whom these are relevant aware of the location of these protocols?

NO  
or  
Don't  
Know

Optometrists in practice need to be aware of locally agreed guidance when planning and delivering shared care.

**To ensure compliance:**

A practice should ensure that all optometrists working for it are aware of guidance that affects the way they see patients under a shared care scheme. This may be particularly important for locum or other part-time staff who may not be aware of information relevant to shared care or co-management systems they may be involved with.

A central folder containing written guidance, protocols and reference documents should be available to all members of staff in a fixed and accessible location.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 41**

Is your practice aware of NICE guidelines relating to PDT and Refractive Surgery?

NO  
or  
Don't  
Know

This is primarily the responsibility of any organisation to which NICE Procedures relate, i.e. larger NHS organisations such as LHBs and NHS hospital trusts. However, optometrists should be aware of relevant guidance to be able to advise and refer patients appropriately.

**To ensure compliance:**

Ensure you keep up to date with relevant guidance such as that for AMD and laser refractive surgery.

[Return](#) to Checklist

YES

Take no action

**ACTION POINT 42**

Do you have a patient consent policy for issuing duplicate spectacle or contact lens prescriptions to colleagues?

NO  
or  
Don't  
Know

From time to time you may be asked to provide information to other practitioners or to unregistered suppliers. The practice should have a policy covering the dissemination of information.

**To ensure compliance:**

Draft a consent policy for the practice. The College of Optometrists have issued guidance of inter- and intra-professional relationships and transferring of information. It may be found at:

[http://www.college-optometrists.org/coo/download.cfm?uuid=9A802CDF-E247-13EF-E71952F91965E1E5&type=ethics\\_guidelines](http://www.college-optometrists.org/coo/download.cfm?uuid=9A802CDF-E247-13EF-E71952F91965E1E5&type=ethics_guidelines)

Advice on requests for verification of contact lens specifications is available from the AOP at: <http://www.aop.org.uk/1124882095.html>

[Return](#) to Checklist

YES

Take no action

<p><b>ACTION POINT 43</b> Does the practice have a chaperone policy for dealing with children &amp; vulnerable adults?</p>	<p>NO or Don't Know</p>	<p>Practices should have a chaperone policy. <b>To ensure compliance:</b> Draft a written policy for the practice. A model policy is available at: <a href="http://www.aop.org.uk/uploaded_files/chaperoning_policy.pdf">www.aop.org.uk/uploaded_files/chaperoning_policy.pdf</a> Further information is included in the College of Optometrists Guidelines, particularly Chapter 26 dealing with Children and Vulnerable Adults – available from the College: <a href="http://www.college-optometrists.org/coo/download.cfm?uuid=6B2A63F9-E47F-EEBE-F53B103FB9D80F77&amp;type=ethics_guidelines">http://www.college-optometrists.org/coo/download.cfm?uuid=6B2A63F9-E47F-EEBE-F53B103FB9D80F77&amp;type=ethics_guidelines</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

<p><b>ACTION POINT 44</b> Are instruments regularly wiped with disinfectant?</p>	<p>NO or Don't Know</p>	<p>The practice should meet the requirements for safety of equipment to ensure that all risks associated with the use of medical devices are minimised. <b>To ensure compliance:</b> It is good practice to wipe down instrument chin and headrests and trial frames using alcohol- or chlorhexidine-based disposable wipes.</p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

<p><b>ACTION POINT 45</b> Do you check all prescriptions before dispensing?</p>	<p>NO or Don't Know</p>	<p>All devices issued to patients should be checked to ensure they are as ordered and safe to use. <b>To ensure compliance:</b> Dispensing (including contact lenses) should only be done by competent persons bearing in mind the restrictions on certain groups of patients who should only be dispensed by a registered practitioner.</p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

**ACTION POINT 46**

Do you have your equipment regularly serviced and keep a log of equipment maintenance checks?  
Do you calibrate your equipment regularly?

NO  
or  
Don't  
Know

All equipment should be regularly maintained and serviced to ensure proper calibration, measurements are accurate, prevent downtime and minimise disruption to patient care.  
**To ensure compliance:**  
Practices should be proactive rather than reactive. Develop a schedule for maintenance and servicing that enables equipment can be taken out of service when it will cause minimal disturbance to the practice, e.g. during holiday periods.

[Return](#) to Checklist

YES

Take no action

<p><b>ACTION POINT 47</b>          If the practice uses a contact tonometer or any other instrument which contacts the eye, are the College of Optometrists' guidelines for decontamination or disposability followed?</p>	<p>NO          or          Don't          Know</p>	<p>The main hazard from re-useable devices in optometric practice is vCJD. Procedures should be in place in the practice to ensure that either:</p> <ol style="list-style-type: none"> <li>1. Disposable single-use alternatives are used, such as Tonosafe tonometer heads.</li> <li>2. Contact instruments are effectively decontaminated so that cross-contamination and infection does not occur.</li> </ol> <p><b>To ensure compliance:</b>          Adopt the guidance available from the College of Optometrists which covers decontamination procedures and when single use is appropriate.  <a href="http://www.college-optometrists.org/objects_store/cjd.pdf">www.college-optometrists.org/objects_store/cjd.pdf</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

<p><b>ACTION POINT 48</b>          If the practice uses any special diagnostic hard or RGP contact lenses, are these decontaminated according to College of Optometrists' Guidelines?</p>	<p>NO          or          Don't          Know</p>	<p>The main hazard from re-useable devices in optometric practice is vCJD. Procedures should be in place in the practice to ensure that either:</p> <ol style="list-style-type: none"> <li>1. Disposable single-use alternatives are used.</li> <li>2. Non-disposable trial lenses are effectively decontaminated so that cross-contamination and infection does not occur.</li> </ol> <p><b>To ensure compliance:</b>          Adopt the guidance available from the College of Optometrists which covers decontamination procedures and when single use is appropriate.  <a href="http://www.college-optometrists.org/objects_store/cjd.pdf">www.college-optometrists.org/objects_store/cjd.pdf</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

<p><b>ACTION POINT 49</b>          Are ophthalmic drugs stored safely and in accordance with the manufacturer's recommendations?</p>	<p>NO          or          Don't Know</p>	<p>Ophthalmic drugs should be stored safely and securely.  <b>To ensure compliance:</b>          Any pharmaceuticals used in the practice should be stored according to the manufacturer's recommendation in a secure location. Note that some ophthalmic drugs require storage in a refrigerated environment.</p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

<b>ACTION POINT 50</b> Are all single-dose drugs (e.g. minims) used once and then discarded?	NO or Don't Know	Ophthalmic drugs should be used safely. <b>To ensure compliance:</b> Single-dose drugs (e.g. minims) are sterile and preservative-free. In order to minimise cross-infection risks, each unit should be discarded after a single use.
<a href="#">Return to Checklist</a>	YES	Take no action

<p><b>ACTION POINT 51</b> Has the practice checked registration details of all professional staff, including locums?</p>	<p>NO or Don't Know</p>	<p>Practices should undertake all necessary checks to ensure that professional staff are registered with the GOC. <b>To ensure compliance:</b> Practices should check registration details of all professional staff at the start of their employment and ensure that registration does not lapse, either by paying registration fees for staff or checking registration details annually in April on the GOC website: <a href="http://www.optical.org/index_files/non_members/reg_search.asp">http://www.optical.org/index_files/non_members/reg_search.asp</a></p>
<p><a href="#">Return</a> to Checklist</p>	<p>YES</p>	<p>Take no action</p>

**ACTION POINT 52**

Does the practice have professional guidance and codes of conduct available for reference by professional staff?

NO  
or  
Don't  
Know

Practices should ensure that professional staff abide by the published codes of professional practice and conduct.

**To ensure compliance:**

Practice staff should be familiar with the College of Optometrists' Code of Ethics and Guidelines for Professional Conduct and other professional guidance or codes of conduct, such as the AOP Sight Test Protocol or the GOC Code of Conduct:

[http://www.college-](http://www.college-optometrists.org/index.aspx/pcms/site.publication.Ethics_Guidelines.Ethics_Guidelines_home/)

[optometrists.org/index.aspx/pcms/site.publication.Ethics\\_Guidelines.Ethics\\_Guidelines\\_home/](http://www.college-optometrists.org/index.aspx/pcms/site.publication.Ethics_Guidelines.Ethics_Guidelines_home/)

[http://www.aop.org.uk/gos/gos\\_examine.html](http://www.aop.org.uk/gos/gos_examine.html)

[http://www.optical.org/index\\_files/news\\_room/code\\_registrants.pdf](http://www.optical.org/index_files/news_room/code_registrants.pdf)

A central folder containing written guidance, protocols and reference documents should be available to all members of staff in a fixed and accessible location.

[Return](#) to Checklist

YES

Take no action

## **Congratulations!**

You have completed the Core Standards Checklist.

The Developmental Standards Checklist is under construction.

Please check back soon.