Harmonising Optical and Optometric Education in Europe

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What is Universal Eye Health

ensuring that all people have access to needed promotive, preventive, curative and rehabilitative health services, of sufficient quality to be effective, while also ensuring that people do not suffer financial hardship when paying for these services.” This means all people should enjoy access to the best quality health care without risk of impoverishment. This aspect is key to the implementation of the Global Action Plan.
WHO – Universal Eye Health Statistics

- 285 million blind or visually impaired globally
- 80% is avoidable
- 90% live in developing countries
- Target to reduce by 25% by 2019
- This means all people should enjoy access to the best quality eye health care without risk of impoverishment. This aspect is key to the implementation of the Global Action Plan.
Global Causes of Visual Impairment (Including Blindness)

- Childhood blindness: 1%
- Diabetic Retinopathy: 1%
- Corneal Opacity: 1%
- Trachoma: 1%
- Age-related Macular Degeneration: 1%
- Glaucoma: 2%
- Undetermined: 18%
- Uncorrected Refractive Errors: 42%
- Cataract: 33%
WHAT DOES THIS MEAN FOR THE WORLD OF OPTICS?
The Role of Optics and Optometry

- 123 Million visually impaired through refractive error
- 517 Million presbyopes without spectacles
- Primary Care
  - Ageing population
  - Diabetic Retinopathy
  - Glaucoma
  - Macula Degeneration
  - Cataract
Europe is facing an invisible epidemic, with an estimated 20.4 million people in the whole of Europe suffering from serious vision impairment - including 2.7 million who are blind. Without adequate action, these worrying numbers will only increase with the rise of diabetes and the aging population. Shamefully, two-thirds of these cases could actually be prevented or treated and are not.
ECV Priorities for Europe -

- Improve the vision and eye health of the peoples of Europe as an economic and public health priority
- Tackle the rapidly increasing scale and costs of preventable eye loss now and in the future
- Protect and support the rights of people with, or at risk of, sight loss
Emerging Challenges

- If you are aged 50 – 69 then you have a 1 in 10 chance of having a disabling vision disorder
- Aged >70 and it rises to 4 in 10
- Presently around 18% of the European Population is >65 years old
- By 2050 around 30% of the population will be >65 years old
- There are 30 million diabetics in the EU increasing to 35 million by 2030
- Increase in visual impairment due to DR
- 1 in 10 Diabetics has sight threatening DR
Benefits of improving eye health and vision

- Significant health, welfare and productivity saving
- Social and economic inclusion and well being of individuals and families
- Better mental health – sight loss leads to depression
- Good vision prevents accident risks
- Importance of good vision for children
- Promotion of gender equality
Mission

- To eliminate avoidable blindness and visual impairment in Europe.
- To create a harmonised professional and educational system for optometry and optics based on the European Diploma in Optometry and Optics.
- To develop the scope of practice for optometrists and opticians to the degree that the same high standards apply and are mutually recognised in all European countries.

VISION

To improve vision and eye health by providing high-quality, cost-effective optometric and optical services across Europe.
A Vision of Optometry and Optics in Europe

- The harmonisation of optometric and optical qualification in Europe
- The achievement of a common scope of practice
- The free movement of optometric and optical professionals
- The creation of a ladder of qualification
Service Steps

- Optical Support Staff
- Optical technicians
- Glazing production
- Dispensing Optician
- Optometrist Eye examinations
- Refraction
- Contact Lenses
- Recognition of ocular anomalies
- Referral
- Treatment of Ocular disease
- Optometrist Diagnostic drugs
- Pathology Therapeutics prescribing

Supply of spectacles
Ladder of progression

European Diploma in Optometry

European Qualifications in Optics

Part A
Part B
Part C

European Diploma Framework

Accreditation process

European Qualification in Optics Framework
Why an ECOO Accreditation scheme?

- All European Optometry/Optics programmes can be compared against the same benchmark, the European Diploma.
- There is a rationale for offering exemptions from parts, or all, the European Diploma Examinations to graduates of appropriate programmes.
- National “competent authorities” might find it easier to evaluate the training of applicants from another EU country – this will help to facilitate the free movement of professionals.
- Training Institutions are encouraged to match their programmes to the competency based European Diploma and the Qualification in Optics – this will help to harmonise Optometry and Optics within Europe.
WCO has adopted the broad competencies of **dispensing, refracting, prescribing and the detection of disease/abnormality** as the minimum required for individuals to call themselves an optometrist.
WCO Categories of Optometric Services

1. Optical Technology Services
2. Visual Function Services
3. Ocular Diagnostic Services
   a) without drugs  b) with drugs
4. Ocular Therapeutic Services

- dispensing
- refractive
- Prescription
- Recognition of abnormality
- Diagnosis and management of eye disease
- Diagnosis and management of eye disease using DPA's (diagnostics)
- treatment of eye disease using TPA's (therapeutics)

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## Scope of Practice of Optometry

<table>
<thead>
<tr>
<th>Box 1</th>
<th>Box 2</th>
<th>Box 3</th>
<th>Box 4</th>
<th>Box 5</th>
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</thead>
<tbody>
<tr>
<td>Turkey</td>
<td>Belgium, France, Iceland, Italy</td>
<td>Austria, Czech Rep, Denmark, Germany, Spain</td>
<td>Finland, Ireland, Netherlands, Norway, Sweden, Switzerland*</td>
<td>Australia, Canada, Colombia, New Zealand, Nigeria, UK, US</td>
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<table>
<thead>
<tr>
<th>Optician</th>
<th>Refracting Optician</th>
<th>Optometrist</th>
<th>Optometrist</th>
<th>Optometrist</th>
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<tr>
<td>dispensing</td>
<td>dispensing refraction prescription</td>
<td>dispensing refraction prescription</td>
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<tr>
<td>screening for eye disease</td>
<td>diagnosis of eye disease using DPA's (diagnostics)</td>
<td>treatment of eye disease using TPA's (therapeutics)</td>
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</tbody>
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* Diagnostics not legal.
The European Diploma in Optometry

- European syllabus
- Set at highest entry level of any European Country
- Political value
  - To establish a high standard of optometric practice
  - Possible harmonisation in the future
  - Advocacy with national governments
- Educational Value
  - To encourage the raising of educational standards
  - To meet the requirements of the Bologna Declaration
The European Diploma in Optometry

History

- 1988 – Concept agreed
- 2000 – First examinations
- 2003 – First diplomas awarded
- 2006 – GOC conditional partial approval
  Subject to proficiency in English and adequate clinical experience
- 2008 – Decision to develop Accreditation Scheme
- 2009 – Learning outcomes and competency based
- 2011/2 – Visits to three European universities
- 2012 – Final report on pilot Accreditation Scheme
The European Diploma in Optometry
Structure

- **Part A Visual Perception and Optical technology**
  - 1. visual perception
  - 2. optics
  - 3. optical appliances

- **Part B Management of Visual Problems**
  - 1. refraction
  - 2. binocular vision
  - 3. contact lenses

- **Part C General Health and Ocular Abnormality**
  - 1. biology
  - 2. ocular biology
  - 3. ocular abnormality

- Portfolio of Clinical Experience
The European Qualification in Optics (EQO)

- An entry level qualification into optometry and optics
- Sets a minimum standard for qualification as an optician
- Competency based framework - Focus on the list of skills, knowledge and outcomes you would want an individual with an appropriate qualification to have
Structure of EQO

- Includes Part A of the European Diploma
  - Subject 1: Geometrical Optics
  - Subject 2: Physical Optics
  - Subject 3: Visual Optics
  - Subject 4: Optical appliances
  - Subject 5: Occupational optics
- Extension of workshop practice
- A basic understanding of visual optics and refraction
- A basic understanding of contact lenses
- A basic understanding of ocular anatomy and ocular disorders
- A basic understanding of low vision
- Communication skills
- Business management (Commercial skills/Practice management?)
Accreditation and Benchmarking

• The Scheme can be used in two ways
  – Full Accreditation
    • The self assessment form is analysed and a preliminary opinion on recognition is given
    • A full visit takes place and a final recommendation is made
  – Benchmarking
    • The institution does not proceed with the visit but uses the preliminary opinion as the basis for developing their course to Diploma standards
Accreditation achieved

- Full Accreditation
  - Fachhochschule Nordwestschweiz Hochschule für Technik - Switzerland
  - University College of South East Norway
  - Hogeschool Utrecht Netherlands
  - Beuth University – Berlin
  - Karolinska Institute – Sweden

- Partial Accreditation
  - Olomouc – Czech Republic

- In process
  - Metropolia University – Finland
  - Oulu University - Finland
The benefits of harmonisation – a win win

- A win for the public
  - Easier access to eye care of a consistent quality at an affordable price
- A win for the professions
  - Common standards of qualification with a wider scope of practice.
  - Free movement as harmonised professions
- A win for industry
  - A more informed market for the supply of high quality equipment, spectacle frames and lenses
OUR VISION IS YOUR VISION

To improve vision and eye health by providing high-quality, cost-effective optometric and optical services across Europe.
More Information

HTTP://WWW.ECOO.INFO/EUROPEAN-DIPLOMA/