



Optometrists and Dispensing Opticians Board

Te Poari o ngā Kaimātai Whatu me ngā Kaiwhakarato Mōhiti

CONSULTATION ON CHANGES TO OPTOMETRIST SCOPES OF PRACTICE

Released: 14 November 2016

Submissions Due: 23 December 2016

Executive Summary

The Optometrists and Dispensing Opticians Board (the Board) is seeking your views on a proposal to reduce its four current scopes of practice for the optometry profession to one general scope.

The Board has wanted to rationalise the scopes for some time to make sure that all new optometrists added to the register meet the same standard, wherever they have been educated. Four scopes of practice in a small profession can also be confusing to the public.

The proposal is to create one general scope, with the addition of a separate time-limited scope to allow overseas optometrists who don't have the qualifications to prescribe therapeutic medicines, to up-skill to the current New Zealand and Australian standard. It closes a loophole whereby overseas applicants are able to register with a lower level qualification than that required of New Zealand and Australian graduates.

If the proposal is approved, all currently registered optometrists would transfer to the new General Scope of Optometry and conditions would be applied to the scope of practice of some practitioners in order that they can be deemed safe to practise in the scope. Optometrists without qualifications to prescribe therapeutic medicines, for example, would have a condition applied to their scope of practice indicating to the public that they may not prescribe medicines. Those originally registered in an Educator scope of practice would similarly have a condition applied indicating to the public that they are restricted to working in an educational setting.

The principle aim of scopes of practice under the Health Practitioners Competence Assurance Act 2003 (HPCA Act) is to provide a transparent framework so that health professionals and consumers of health and disability services can easily know the parameters a health professional is competent to work within and can be assured of their competence¹. It is intended that the General Scope of Optometry would encompass the full breadth of optometry, so the purpose of any conditions imposed would be to identify to health professionals and the public areas of practice where a practitioner was not authorised by the Board as competent to practice.

¹ The *Health Professionals Competency Assurance Bill Discussion Paper*, published in September 2000.

In developing this proposal, the Board considered feedback from earlier consultations, changes in the health care environment in New Zealand, a change to registration standards in Australia as well as the legal framework and guiding principles of the HPCA Act.

Before answering the questions in response to this proposal, please ensure you have read all the contents of this consultation paper.

Background

Role of the Board

The Board is responsible under the HPCA Act for protecting public health and safety by ensuring that optometrists are competent and fit to practise.

The Board provides this assurance through a number of processes, including registration. It sets, or prescribes, the qualifications required for registration to ensure that practitioners are competent to perform the tasks associated with their profession to protect public safety.

The Board is also responsible for recognising, accrediting and monitoring educational institutions and degrees, courses of studies, and programmes leading to registration.

Current scopes of practice

Currently, optometrists are registered in one of four scopes of practice. These scopes recognise different qualifications and roles in the profession. The wording and qualifications for each scope are set out in Appendix 2. The scopes are:

1. Scope of Practice for Optometrists
2. Scope of Practice for Optometrists (TPA [Therapeutic Prescribing Agent] endorsement)
3. Scope of Practice for Educator in Optometry
4. Scope of Practice for Educator in Optometry (TPA endorsement)

Throughout this paper, Scopes 1 and 3 will be referred to as the non-TPA or non-therapeutic scope and 2 and 4 will be referred to as the TPA or therapeutic scope.

Over two-thirds of practising optometrists are registered in the therapeutic scope. This is because, for over a decade, the Bachelor of Optometry (required by all New Zealand graduates applying for registration) has been a qualification that includes prescribing of therapeutic medicines. The number of optometrists registered in this scope is growing annually.

Numbers in the non-therapeutic scope are declining steadily through retirement and natural attrition. Optometrists from overseas who do not have qualifications in ocular therapeutics join this scope each year, but the numbers are very small, with an average of only three or four applying for registration annually.

There are currently only four practitioners in the educator scopes of practice. The original intention of these scopes was to allow the University of Auckland to employ experienced optometry teachers from overseas without those teachers first having to sit the examination of the Optometry Council of Australia and New Zealand (OCANZ). It was felt that the well supported and supervised environment they would be going into would ensure the safety of the New Zealand public.

The Trans-Tasman relationship

The Board has a very close relationship with the Optometry Board of Australia (OBA). As optometry is a small profession, OCANZ was established, as an independent external agency, to assess optometry programmes in Australia and New Zealand and provide reports on their suitability for accreditation with the two boards. It provides assurance to the boards that graduates are effectively competently prepared for entry to the profession.

OCANZ ensures standards are the same in both countries. This is important as under the Trans-Tasman Mutual Recognition Act 1997 (TTMR) someone registered to practise an occupation in one country is entitled to practise an equivalent occupation in the other country, without further testing or examination.

New Zealand registration for other overseas-qualified optometrists

The Board has appointed OCANZ as the body that examines the competence of overseas-qualified² practitioners who wish to work as optometrists in New Zealand, to ensure they have the requisite knowledge and skill to practise safely.

Most overseas-educated optometrists currently seek registration in the Board's non-therapeutic scope. To be eligible to register in this scope of practice, the current requirement is that they need to pass the OCANZ Competency in Optometry Examination (COE). While this is a prescribed qualification, it is not subject to the same accreditation standards as the university programmes which all include prescribing of therapeutic medicines. It is essentially an assessment against the standard of the former non-therapeutic degrees.

This is problematic as all other new registrants are assessed to the higher therapeutic standard and it is arguably inappropriate and unfair to have one standard for New Zealand and Australian graduates and a lower threshold for others.

The Board could ask OCANZ to amend the COE to include the Advanced Certificate in Ocular Therapeutics (ACOT), which would provide educational equivalence. However, this change would be disproportionately expensive as the Board accepts on average only three or four new registrants a year through the OCANZ pathway. The cost to develop a combined examination would need to be met by the Board and ultimately New Zealand practitioners and is not seen as an appropriate use of practitioner funds.

The new solution being proposed in this consultation ensures overseas-educated practitioners meet the same registration standard as New Zealand and Australian graduates. Essentially, it allows for provisional registration and the ability to practise under supervision while up-skilling to the same standard as New Zealand and Australian practitioners being added to the Register.

This section may help you answer question 4 in the consultation

² Overseas-qualified – when mention of ‘overseas-qualified’ or ‘overseas-educated’ applicants is made in this consultation document this refers to optometrists who completed their optometry qualification outside of New Zealand and Australia.

Developing the new proposal

In developing the new proposal the Board considered

- Feedback from earlier consultations;
- Changes in the health care environment in New Zealand;
- Change to registration standards in Australia;
- The legal framework of the HPCA Act.

Feedback from earlier consultations

The Board has conducted three preliminary rounds of consultation and the feedback and findings from this process have shaped this new proposal. The Board has carefully considered all submissions. Key messages received by the Board in these submissions (which, please note, are not the Board's comments) included:

- *Current divisions of practising optometrists into different but predominantly overlapping scopes of practice are inefficient, lack clarity and are not understood by the public.*
- *Multiple scopes for a small profession put the responsibility onto the health consumer to first determine the clinical skill of the optometrist, rather than the consumer simply having confidence in any registered practitioner.*
- *Requiring currently registered New Zealand practitioners to up-skill to a therapeutic qualification would be an inefficient use of resources.*
- *Practitioners in the non-TPA scope, including OCANZ pass applicants, are familiar with and experienced in meeting the requirements of the local environment. They have participated in clinical diagnostic continuing professional development (CPD) and are diagnosing and managing patients safely and competently within their scope.*
- *The years of experience of those who are not TPA endorsed are worth just as much as the knowledge of the recently graduated TPA endorsed optometrist with limited practical skill.*
- *Assessment of overseas practitioners should be to the current contemporary standard required of all graduates of New Zealand and Australia. It would not be fair to either the applicants or the New Zealand and Australian education providers, to register overseas graduates at a lower level than that required of local graduates.*

Changes in the health care environment in New Zealand

- **Changes to the Medicines Act in 2014**
Under changes to the Medicines Act in 2014, optometrists became 'authorised prescribers', alongside general practitioners, nurse practitioners and midwives. Optometry is now perceived as a prescribing profession and the maintenance of a non-prescribing scope may be confusing for other health professions and the public.
- **The Health Workforce New Zealand (HWNZ) Eye Workforce Health Service Review**
With 'a more than adequate supply of optometrists' and a shortage of ophthalmologists, this review found optometrists could be better utilised in the assessment, treatment and management of patients with eye health care issues. It said optometrists should have the opportunity to work at the top end of their scope and this in turn would allow ophthalmologists to perform to their full potential. The review said there was a need for some hospital eye health services to move to the community where service provision by optometrists could improve access and reduce waiting times. Having optometrists doing as much as possible at the primary level was seen as essential. Unless such an approach was adopted, the review warned that New Zealand would not be able to retain a sustainable model of care. A copy of this 2010 review document can be found at:

<http://www.health.govt.nz/our-work/health-workforce/workforce-service-forecasts/eye-health-workforce-service-forecast>

Change to registration standards in Australia

The OBA has changed its general registration standard and since December 2014, those applying for registration for the first time have to hold an approved therapeutic qualification. Optometrists registered before this date who don't hold an approved therapeutic qualification are not required to undertake further study to maintain their general registration. However, they must have a notation (New Zealand equivalent of a condition) stating 'the optometrist is not qualified for endorsement for scheduled medicines and is not able to prescribe schedule 4 medicines for the treatment of conditions of the eye', added to their registration on the public register. The notation can be removed on the completion of an approved therapeutic qualification.

Overseas-qualified optometrists are able to apply for limited registration for postgraduate training or supervised practice to enable them to meet the requirements to apply for general registration later.

The legal framework of the Health Practitioners Competence Assurance Act

Section 13 of the HPCA Act sets principles to guide responsible authorities in prescribing qualifications. The qualifications must be necessary to protect members of the public, they may not unnecessarily restrict registration, and the qualifications may not impose undue costs on health practitioners or on the public.

Additionally, a review of the HPCA Act in 2010 suggested that principles were needed to guide responsible authorities when developing or reviewing scopes of practice. These principles included:

- Defining scopes to protect public health and safety rather than responding to professional preferences;
- Defining broad scopes to enable as much workforce flexibility as is compatible with protecting public safety;
- Setting qualifications that are the minimum requirements for public safety;
- Consulting widely and carefully evaluating submissions; and
- Basing decisions on the best available evidence, including from other professions.

The government is also seeking 'enabling' scopes - that is scopes of practice that describe the breadth of the profession, covering all tasks that can be undertaken by those registered within that scope of practice. A broad and flexible scope reduces the need for ongoing review in the face of changes in the external environment, models of care, optometry technology or diagnostics. Imposing conditions to restrict a practitioner's practice is seen as preferable to narrowing a scope and responding to change by the use of notations or endorsements.

In developing this proposal, the Board has taken great care to act in accordance with these principles. The Board strongly believes that TPA is the contemporary 'safe' standard for practise in New Zealand; that non-TPA practitioners with experience in the New Zealand setting are safe to continue practising with a condition placed on their scope of practice indicating that they cannot prescribe; and that candidates who qualified overseas without TPA should be required to obtain a therapeutic qualification to raise them up to the standard of a New Zealand or Australian optometry graduate before practising unsupervised in New Zealand to ensure patient safety.

The Board believes the minimum standard for the proposed General Scope for Optometry, for future registrants, should include therapeutics. This is the standard that has been deemed necessary by New Zealand and Australian universities for more than ten years and it is the current required standard for general registration in Australia.

The 2016 Proposal

As noted earlier, four scopes of practice in a small profession can be confusing to the public. The Board has wanted to rationalise the scopes for some time to ensure that all new optometrists added to the register meet the same standard, regardless of where they are educated.

What is proposed is one 'General Scope of Practice' for all optometrists, with a provisional, time-limited scope to allow time for up-skilling by new applicants without therapeutic qualifications seeking to be added to the New Zealand Register of Optometrists. With the Board only accepting some three or four new registrants through the OCANZ pathway to the non-therapeutic scope each year, it is not feasible to maintain a permanent scope of practice for such a small number.

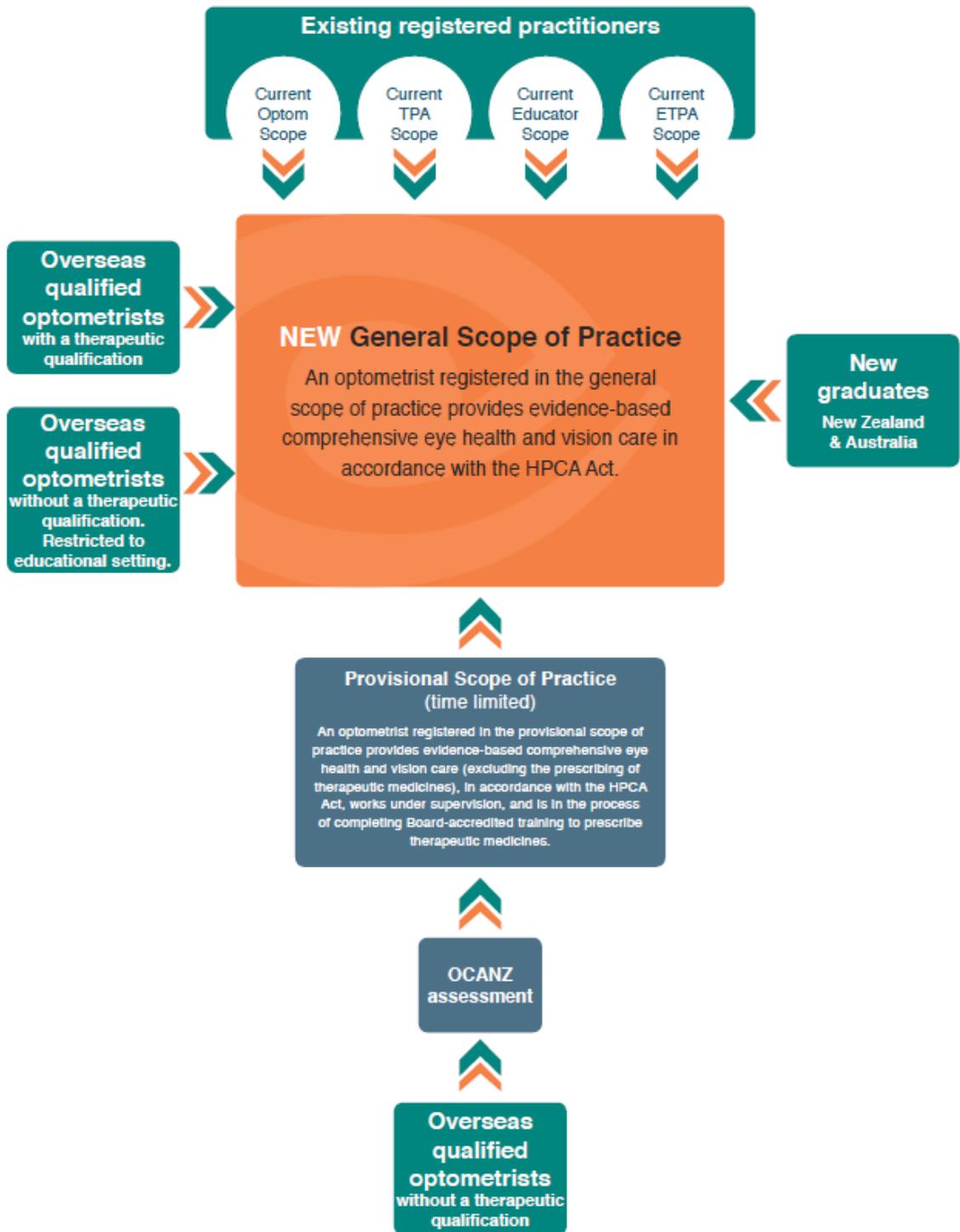
The proposal ensures that all practitioners being added to the General Scope of Optometrists in the future have equivalent qualifications. It closes a loophole whereby overseas applicants could register with a lower level qualification than the New Zealand and Australian standard.

All new registrants will be treated the same, barring the requirements of the Trans-Tasman Mutual Recognition Agreement and those wishing to work solely in an educational setting, and must hold a therapeutic qualification for entry to the General Scope of Practice.

As outlined in the infographic on the next page, five groups of practitioners (colour coded green) would move to the new scope in different ways:

1. New Zealand and Australian graduates, who have therapeutic qualifications, will register directly (given proof of qualification and fitness to practice).
2. All currently registered optometrists will automatically transfer to the new General Scope of Practice. Those in the current non-TPA scope will have condition(s) placed on their scope of practice. For example: 'Mrs X is unable to prescribe medicines' or 'Mr Y is unable to prescribe medicines and may only work within an educational institution.'
3. Overseas applicants with a Board-accredited therapeutics qualification will apply for registration in the new General Scope of Practice.
4. Overseas applicants without a Board-accredited therapeutics qualification will register initially in the Provisional Scope of Practice. Having satisfied up-skilling requirements within three years they can apply for entry to the General Scope of Practice.
5. Overseas applicants without a Board-accredited therapeutics qualification applying to work at the University will register in the General Scope of Practice and will have a condition attached to their scope of practice indicating that they are restricted to working in an educational setting.

Proposed changes to Optometry Scopes of Practice



Proposed changes to the wording that describes the optometry scope of practice

The Board also proposes to amend the wording that describes the scope of optometry, for greater clarity for practitioners and members of the public.

The current definition of the scope is as follows:

“The practice of optometry with therapeutic pharmaceutical agents endorsement (“TPA endorsement”) provides evidence-based comprehensive eye health and vision care, including prescribing of therapeutic medicines, in a professional and ethical manner, delivered by university-qualified optometrists.”

The Board proposes to amend this definition as follows:

“An optometrist registered in the general scope of practice provides evidence-based comprehensive eye health and vision care in accordance with the HPCA Act.

The “practice of optometry” includes:

- *prescribing any ophthalmic appliance, optical appliance, or ophthalmic medical device intended for remedial or cosmetic purposes or for the correction of a defect of sight;*
- *assessing, diagnosing, treating and managing conditions affecting the eye and its appendages;*
- *prescribing medicines whose sale and supply is restricted by law to prescription by authorised prescribers;*
- *reporting or giving advice in an ophthalmic capacity, using the knowledge, skills, attitudes and competence initially attained for the primary optometry qualification and built upon in postgraduate and continuing clinical education, wherever there could be an issue of patient health or wellbeing;*
- *signing any certificate required for statutory purposes, such as driver licensing eyesight certificates;*
- *holding out to the public, or representing in any manner that one is authorised to practise optometry in New Zealand.*

The practice of optometry goes wider than clinical optometry, and includes teaching, research, optometric or eye health management, in hospitals, clinics, general optometric practices and community and institutional contexts, whether paid or voluntary.

Additionally, clinical practice is defined as any work undertaken by an optometrist that relates to the care of an individual patient. Non-clinical practice is defined as any work undertaken by an optometrist that does not relate to the care of an individual patient.”

The proposed provisional scope of practice will have a definition similar to the above as follows:

“An optometrist registered in the provisional scope of practice provides evidence-based comprehensive eye health and vision care (excluding the prescribing of therapeutic medicines), in accordance with the HPCA Act, works under supervision, and is in the process of completing Board-accredited training to prescribe therapeutic medicines.”

This section may help you answer question 5 in the consultation

Consultation Questions

The questions in this form are designed to help you to focus your response and make it easier for us to analyse submissions. You don't have to answer every question and may add additional comments.

Please note that you do not have to provide personal information if you would prefer not to.

This submission was completed by:

Name:

Address:.....

Email:.....

Organisation:

Position:

If an email address is supplied, we will notify you of when the report of the summary of submissions is published.

To assist our analysis of responses, please identify which part of the sector your submission represents:

- | | |
|--|---|
| <input type="checkbox"/> Individual optometrist | <input type="checkbox"/> Professional organisation |
| <input type="checkbox"/> Consumer group | <input type="checkbox"/> Primary health organisation |
| <input type="checkbox"/> Government agency | <input type="checkbox"/> Maori or Pacific health provider |
| <input type="checkbox"/> Education provider | <input type="checkbox"/> Non-government organisation |
| <input type="checkbox"/> Other health practitioner | <input type="checkbox"/> Other (please specify) |

In the interests of a full and transparent consultation process, the Board intends publishing the submissions received on this consultation document on its website. However, if you as an individual or as an organisation object to this publication or to the publication of your name tick one or both of the following boxes:

I **do not** give permission for my submission to be published on-line.

I **do not** give permission for my name to be listed in the published summary of submissions.

1. One 'General Optometrist Scope of Practice'

It is proposed that all registrants will be registered in what will be called the 'General Optometrist Scope of Practice'. This is a therapeutic and prescribing scope.

1.1 Do you support the change from four scopes of practice to one general scope?

Yes

No

Not sure

Comment:

2. All currently registered optometrists to transfer to the new General scope

All optometrists currently registered in any one of the optometrist scopes of practice will, from the date the gazette notice takes effect, become registered in the 'General Optometrist Scope of Practice'.

Some registered practitioners, from the non-therapeutic scopes of practice, will have condition(s) associated with their scope of practice. Conditions attached to the General Scope of Practice may include:

1. May not prescribe medicines
2. Must work in an educational institution
3. May not prescribe medicines and must work in an education institution.

These conditions will be noted on the Register of Optometrists and will be visible to members of the public, employers and others in the health sector.

These practitioners will be able to apply to the Board for the removal or variation of the condition(s) on their scope of practice at any time should their circumstances or qualifications change. The Board will consider such applications on a case-by-case basis with due regard for patient safety.

2.1 Do you agree with the proposal to transfer all currently registered practitioners to the new General scope?

Yes

No

Not sure

Comment:

2.2 If your answer to 2.1 was 'Yes'. Do you agree with the proposal to manage differences in qualifications via the use of conditions on scopes of practice that members of the public, employers and others in the health sector can view?

Yes

No

Not sure

Comment:

3. Standards for new registrants

After considering earlier consultation submissions and the fact that OCANZ accredits all New Zealand and Australian universities to the therapeutic standard, the Board believes that the

required minimum, safe registration standard for the proposed General Scope for Optometry should include therapeutics. This is the standard that has been deemed necessary by New Zealand and Australian universities for over ten years and it is the current required standard for registration in Australia.

3.1 Do you think the minimum standard for new registrants should be a qualification that includes competence in ocular therapeutics?

Yes

No

Not sure

Comment:

4. A Provisional time-limited scope

A provisional time-limited scope is proposed for overseas practitioners, without a therapeutic qualification, seeking registration to practise in New Zealand.

Those who apply to register, after the change goes through, would be able to register in this scope as long as they are enrolled in an accredited programme for training in the prescribing of ocular therapeutic medicines and practise under supervision. As those wishing to complete the TPA training have to be practising, this pathway is needed so as not to unreasonably restrict the registration of persons as optometrists, while at the same time ensuring the NZ public are protected.

4.1 Do you agree with the concept of having a provisional time-limited scope to allow for up-skilling by those seeking future registration in New Zealand?

Yes

No

Not sure

Comment:

5. Wording of the scope

Attached as Appendix 1 is the proposed wording for the gazette notice for the proposed 'General Optometrist Scope of Practice', including reference to the prescribed qualifications for the scope of practice. The proposed wording for the 'General Optometrist Scope of Practice' is also noted on page 8 of the consultation document.

5.1 Do you consider that the wording for the Gazette notice provides a description of the scope of practice that is adequate and clear for members of the public, employers and others in the health sector?

Yes

No

No opinion

Comment:

5.2 If your answer to 5.1 was 'No', please explain your views or suggest changes or alternative words.

Comment:

6. Title of the scope

6.1 Would you prefer the scope to be called the Optometrist Scope of Practice?

Yes No Not sure

6.2 Would you prefer the title to be General Scope of Practice?

Yes No Not sure

6.3 Would you prefer another name for the Scope?

Yes No Not sure

Comment including suggestions for alternative titles:

7. Any other comment?

Please feel free to comment on any other relevant issue.

How to have your say

We would appreciate receiving your views on the proposed changes in electronic format.
The deadline for feedback is 23 December 2016.

Submissions can be sent to:

The Registrar
Optometrists and Dispensing Opticians Board
PO Box 9644
Wellington 6141

Email: Lindsey.Pine@odob.health.nz

What happens next?

The Board will consider responses to this consultation and if there is widespread support for the proposal, changes will be announced to the profession and published in the NZ Gazette. Please ensure that you indicate on the feedback form whether or not you are happy for your name and submission to be published.

Appendices

- Appendix 1 – Proposed wording for the amended scopes of practice
- Appendix 2 – Current wording for the optometry scopes of practice, published in the NZ Gazette 27 October 2016
- Appendix 3 – Proposed registration pathway descriptions, for publication on the Board's website