

COMPLETING YOUR DISPENSING OPTICIAN SELF AUDIT

SOME HELPFUL HINTS

Board self audits provide one measure of ensuring practitioners are providing the minimum standards of care. Self audits are a method of systematically reviewing patient care against explicit criteria and aim to ensure practitioners are prescribing safely within their scope of practice. They are also an educative tool that may help you to reflect on and make any changes to the way you practice. You should allow sufficient time to complete the self audit – the time taken will vary depending on a number of factors including patient demographics, hours of practice, accessibility of health records etc.

If you are working in a non-traditional role and are not sure what information to provide with your self audit, please contact the Board office for further advice.

Please type your responses on the form downloaded from the Optometrists and Dispensing Opticians Board website: https://www.odob.health.nz/random_self_audits. You may need more or less space to answer these questions; please expand the space as required.

You may find the following information useful in preparing your answers to the following questions:

- Question 11: If there is no equipment that you would like to utilize in your practice that you do not currently have, please provide a comprehensive list of the dispensing equipment that your practice currently owns.
- Question 14: when discussing the suitability and uses of low vision aids describe the basic optical principles of different types of magnifiers as well as patient factors that you might consider when prescribing low vision aids for both distance and near.
- Question 15: remember to include details of contact lens insertion and removal and contact lens care solutions. If your practice has standard documentation that is provided to all contact lens patients please provide a copy of this with your self audit answers.
- Question 20: when describing considerations for paediatric dispensing include information about both frame and lens choices.
- Question 25: please provide a statement reflecting on what you have learnt from the cases supplied with your self audit.
- Question 26: cultural competence involves more than ethnicity and finding an interpreter where required. The best answers to this question show the **dispensing optician** reflects on his/her cultural awareness and incorporates this awareness into practice. Please refer to the Standards for Cultural Competency on the Board's website 'Practice Standards' page and use these to help answer this question.
- Question 27: please refer to the Standards of Ethical Conduct on the Board's website 'Practice Standards' page to help answer this question.

- Question 28: Almost all practitioners acknowledge that there are areas where they could benefit from further information or education. Identification of these areas occurs through self-reflection and audit processes and ensures improvement in patient care and outcomes.

Cases for submission:

You must submit six specific examples that demonstrate *good dispensing practice* that you have been involved in **in** the last 12 months – these should be dated prior to the date of your notification from the Board that you have been selected to complete a self audit. Each case should be accompanied by:

1. The optometrist's record card which includes the patient's case history, refractive findings including BVD of the subjective refraction where appropriate, any relevant binocular vision results e.g. the need for prism and the diagnosis and a clear statement of patient management. These details may help the Board understand why a particular lens design was chosen. Where the patient was examined at another practice, please provide a copy of the outside prescription.
2. A copy of the dispensing record and lab order showing all of the relevant measurements e.g. monocular PDs, heights, pantoscopic tilt, BVD, frame wrap etc. where appropriate.
3. A brief commentary explaining why a particular lens design was selected and what measurements were taken to ensure a good dispensing outcome for the patient.
4. Please make sure you de-identify the patient records but indicate the patient's age (or date of birth). Do not include the patient's name, address, telephone numbers or NHI number.
5. Clearly label cases e.g. Patient A, Patient B, Patient C etc. and number pages consecutively.
6. One of each of the following cases should be provided:
 - a. Single vision aspheric lenses for a prescription over ± 6.00 D (in one or both meridians) which should include a clear commentary on any adjustments to lens power required due to differences in BVD between the refracted prescription and the chosen frame.
 - b. High index lenses prescribed for a prescription over ± 6.00 D (in one or both meridians) which should include a clear commentary on any adjustments to lens power required due to differences in BVD between the refracted prescription and the chosen frame.
 - c. Occupational lenses – more correctly known as digressive lenses.
 - d. Progressive additional lenses detailing all of the measurements required for fitting the particular lens design.
 - e. Sun protection – detailing how this was provided in the lenses selected.
 - f. Grief case – which may document patient non-tolerance to a specific lens design and details the dispensing techniques utilized to bring this case to a satisfactory conclusion.
7. If necessary, provide a short commentary that may help the Board understand the circumstances surrounding the dispensing cases provided.

CHECKLIST OF ITEMS TO INCLUDE

- Completed self audit form**
- Six cases each accompanied by:
 - Optometrist's clinical record card
 - Dispensing record and lab order
 - Commentary describing dispensing choice(s)
- CPD Credit report downloaded from the **ADONZ** website
- Any additional comments that may help the Board understand your practice situation

Results of the self audit process

Usually you will receive the outcome of your self audit within a four to six week period.

1. When the Board is satisfied with the self audit you will receive a letter confirming 'The Board considers that you appear to be practicing at the required level of competence'. This wording is derived directly from the HPCA Act, which does not allow the Board to acknowledge self audits of high quality.
2. In some circumstances the Board may request further information from a practitioner including clarification of answers to self audit questions, further case examples or additional referrals and replies. Often this further information is sufficient to ensure the Board of practitioner compliance.
3. If you do receive a request for further information and are unsure what specific information is required please contact the Registration and Recertification Officer or Professional Standards Advisor who will be very happy to assist you with your query.