

JOB DESCRIPTION

|  |
| --- |
| **JOB DETAILS**  |
| **Job Title**  | Optometrist Advanced |
| **Reports to**  | Head of Service - Optometry  |
| **Band**  | Band (Subject to formal matching) |
| **Department/Directorate**  | Specialist Surgery  |

|  |
| --- |
| **JOB PURPOSE**  |
| To provide a range of core and specialist optometric services and extended roles supporting the Ophthalmology clinics at the West of England Eye Unit/ Nightingale Hospital/Axminster Hospital/Tiverton hospital / North Devon District Hospital/ Bideford Hospital/ South Molton Eye Clinic and other community locations as required.To work as an autonomous practitioner in accordance with professional & regulatory body guidelines and codes of practice (The College of Optometrists and General Optical Council) and statutory Trust requirements.  To participate in undergraduate and post-graduate teaching programmes for student and qualified health professionals in the Eye Clinic.To support clinical audit and research as required.To undertake administrative duties as required ensuring safe and effective service delivery.To contribute to teaching of medical and non-medical staff within the Ophthalmology department. |
| **KEY WORKING RELATIONSHIPS**  |
| Areas of Responsibility: Core and extended optometry roles, training, service development and administrative duties. The post holder is required to deal effectively with staff of all levels throughout the Trust as and when they encounter on a day to day basis. In addition, the post holder will deal with the wider healthcare community, external organisations and the public. This will include verbal, written and electronic media. Of particular importance are working relationships with:

|  |  |
| --- | --- |
| **Internal to the Trust**  | **External to the Trust**  |
| * Directorate Manager Specialist Surgery
 | * All managers and profession allied to medicine
 |
| * Clinical Service Manager Ophthalmology
* Lead Clinician
 | * Support services e.g. ROVIs/ROVICs/ECLOs
 |
| * Head of service – Optometry, Medical Optometrist, Optometrist Advanced, Optometrist Specialist, Optometrist, Optometrist Entry, Dispensing optometrist, Orthoptists, Ophthalmic medical and nursing staff, Technical support staff, admin staff
 | * Primary care services, GPs, Devon LOC
* Schools for children with SEND.
 |
|  |  |

 |
| **ORGANISATIONAL CHART**  |
| Solid line denotes line managementDashed line denotes clinical supervision. |
| **KEY RESULT AREAS/PRINCIPAL DUTIES AND RESPONSIBILITIES** |
| * To provide clinical care autonomously and in association with ophthalmologists, orthoptists, ophthalmic nurses and other professional and non-professional eye clinic staff.
* To make clinical decision management decisions for patients requiring an advanced optometrists’ knowledge and experience.
* To take on extended roles within the ophthalmology department, for example within medical retinal/macula, glaucoma, corneal, paediatric and cataract clinics.
* To participate and contribute to training and teaching or other professionals, non-professional eye clinic staff and students.
* To lead a specialist area of core Optometry
* To adapt communication style appropriately to effectively communicate with all professional and non-professional staff both within and outside of the trust, patients, students and carers to promote the best patient care, and service delivery and development.
* To be responsible for managing own clinical workload in an adaptable manner and planning the service for sub specialist area of leadership.
* To contribute to the development of department policies, protocols, clinical guidelines and patient information.
 |
| **FREEDOM TO ACT**  |
| * To work as an autonomous practitioner with direct patient care
* To undertake specialist extended clinical optometry roles working to consultant approved protocols and management guidelines
* To work alongside Ophthalmologists in the consultant led paediatric, glaucoma, medical retina/macula, corneal, emergency, pre and post-operative cataract clinics.
* To lead a specialist area of core Optometry
 |
| **COMMUNICATION/RELATIONSHIP SKILLS**  |
| * To communicate effectively with the optometric team and promote good communication within the team. To effectively discuss highly complex and sensitive ocular and medical conditions and clinical data with colleagues (doctors, orthoptists, optometrists, nurses etc.) to promote the best care for a patient.
* To communicate effectively with all patients and carers to ensure understanding of their condition and gaining informed consent for assessment and recommended treatment. Adapting their communication style as required to promote the best understanding and support for the patient in the presence of difficult and upsetting information, complex medical conditions and potential communication barriers for example learning difficulties, dementia etc.
* To communicate effectively with health care & other professionals involved with caring for the patient, to ensure their understanding of the nature of any ocular disorder and how it will impact upon their other healthcare needs and daily life
* To communicate effectively with other colleagues both within the eye unit and externally concerning service delivery and development
* To contribute to the production and review of patient information leaflets
* To communicate effectively with visiting students. To provide them with teaching, advice and reassurance throughout the training programme
* To refer on to Eye Clinic Liaison Officer/Advanced Ophthalmic Technician for patient support and know when registration as sight impaired/severely sight impaired is appropriate.
 |
| **ANALYTICAL/JUDGEMENTAL SKILLS** |
| * To make patient-centred judgements on management in the presence of uncertainty (e.g. Patients unable to co-operate fully in clinical assessments)
* Specialist clinical examinations will be comprehensive, acting within guidance from national recommendations to aid in the management of complex cases.
* To analyse, interpret and act upon complex multifactorial patient-related information, in order to determine the most appropriate action where multiple clinical management options exist (e.g. Deciding alongside the Consultant Ophthalmologist whether to list a patient for surgery, laser, or adjust medication; and what impact the decision could have upon the patient’s sight, lifestyle, and well-being)

Make requests via senior ophthalmologists for appropriate patient investigations including CT/MRI, blood investigations, fluorescein angiography, indocyanine green angiography, stroke/TIA assessment etc., relating to the presenting pathology and to aid the diagnostic process or treatment plan |
| **PLANNING/ORGANISATIONAL SKILLS** |
| * To be responsible for prioritising and managing own clinical workload
* Working in a clinical environment, as a team member, considering ongoing variations in supervision and teaching requirements whilst continuing to deliver all aspects of sub-specialist care efficiently, without loss of effectiveness or clinical accuracy in order to ensure high clinical quality and productivity
* To practice within agreed protocols for both department and sub-specialist clinical areas as agreed with other Service Leaders
* To indicate to the lead clinicians and management for improvements that can be made to the running of the service
* To meet professional requirements regarding the safety and management of patients
* To plan the service and programme of care for sub specialist area of leadership
 |
| **PATIENT/CLIENT CARE**  |
| Provide an extensive range of core, specialist and extended role optometry services. **CORE ROLE*** + **Refraction**: Routine and complex diagnostic and therapeutic refraction of adults, children and babies and when required for a patient under anaesthesia in the operating theatre or recovery room
	+ **Fundus and media examination**: Using indirect and direct methods as appropriate
	+ **Medical contact lenses**: Specialised assessment, fitting and aftercare of patients with complex corneal and refractive pathologies. Lenses such as, keratoconus, post-graft fittings and bandage. Assessment and correction and appropriate onward referral of contact lens related problems and pathologies
	+ **Visual Impairment Rehabilitation**: Assessment, prescribing and dispensing of complex low vision aids for the visually impaired. Signposting and appropriate onward referral for non-optical appliances. Clinical liaison with ECLO, SSS, social services, voluntary organisations, LOC and other service providers as well as primary care optometrists.
	+ **Visual field assessment and analysis**: Humphrey and Bjerrum fields. DVLA field testing when required.
	+ **Colour vision testing**: Including use of 100 hue, D15
	+ **Standard and complex spectacle dispensing:** Includingptosis props, recumbent spectacles, paediatric dispensing and adjustment if this cannot be provided by the GOS
	+ **Additional Investigative techniques:** Corneal topography/interpretation. IOL master for specialist protocols (Marfan’s screening)
	+ **Orthoptic/optometry led paediatric refraction clinic.** Working to set protocols to provide full co-managed care, and specialist paediatric assessment and advice referring to consultant when medical or surgical intervention is required
	+ **Glaucoma co-management**: Working to the practitioner led shared care protocol for stable glaucoma and ocular hypertension patients
	+ **Ectasia Monitoring:** Working to agreed protocols to monitor and/or refer patients with ectasia /corneal conditions.
	+ **Imaging:** Specialist knowledge of ocular imaging and psychophysical tests such as OCT/Tomography and visual fields to assess and manage complex ophthalmic patients

 **SPECIALIST EXTENDED ROLE*** Scleral contact lens fitting including moulding procedures as necessary
* Paediatric contact lens fitting, management and follow up
* Extended wear contact lens fitting and monitoring and follow up
* Autonomous refraction clinics at Specialist Schools as required
* Children’s Low Vision
* Ectasia Diagnostic Clinic

 **EXTENDED ROLE*** To develop and undertake specialist extended clinical optometry roles in the diagnosis and management of patients within the medical retinal/macula, glaucoma, corneal, paediatric, cataract clinics; working to Consultant approved protocols and management guidelines.
* To work alongside Ophthalmologists in the consultant led paediatric, glaucoma, medical retina/macula, anterior segment/corneal clinics and/or cataract pre and post assessment clinics.
 |
| **POLICY/SERVICE DEVELOPMENT**  |
| * To contribute to the development, implementation and review of optometric departmental policies, protocols and clinical guidelines
* Ensure that the service is delivered in accordance, professional, statutory body and Trust guidelines
* Maintain ongoing professional development with objectives and development plan determined by the appraisal system. Provide documentary evidence of Continuing Professional Development and registration with the General Optical Council
* To report complaints relating to the optometry service
* To contribute to Clinical Governance guidelines
* To represent the department externally at local/regional meetings regarding optometry service if required
 |
| **FINANCIAL/PHYSICAL RESOURCES**  |
| * To contribute to the maintenance and ordering of stock in the optometry department
* To ensure that optometric physical assets and stock are secure and maintained correctly
* To promote cost reduction initiatives without affecting the quality of the services provided
 |
| **HUMAN RESOURCES**  |
| * To supervise entry level optometrists, less experienced optometrists, nurses and medical students
* To contribute to the development of training programmes
* To contribute to the development of professional knowledge and skill of other staff in the Optometric team
* To contribute to the training of other team members to maintain professional standards
* To contribute to teaching programmes for entry level optometrists visiting the Eye Unit
* To participate in teaching programmes for other healthcare students and other professionals.
* To assist with supervision of optometric work when required, and patient-related administrative duties of optometrists

  |
| **INFORMATION RESOURCES**  |
| * To keep full and complete patient records, on paper and/or by data entry to electronic patient records, of each patient’s examination results, diagnosis and management/treatment and to verify successful data entry of ancillary clinical information entered by supporting technical staff
* To maintain optometric patient database records (e.g. Low Vision loans, Contact Lens patient information, ectasia monitoring)
 |
| **RESEARCH AND DEVELOPMENT**  |
| * To personally participate in continuing professional development (CPD) as required by the General Optical Council
* To contribute and participate in local optometric audit programmes necessary to improve patient care and service development
* To contribute to research trials as & when necessary and maintain GCP training as required
* To represent the department by presenting scientific material and the results of clinical audits if required
 |
| **PHYSICAL SKILLS** |
| * Working at speed will be important in certain clinical situations e.g. EUA (Examination under anaesthetic)
* Working with precision and accuracy when using specialist ophthalmic equipment for patient assessment.
 |
| **PHYSICAL EFFORT** |
| * Patient examination frequently requires uncomfortable working positions, e.g. leaning forward, kneeling, and working whilst maintaining awkward posture, especially with babies and patients with disabilities and whilst manipulating equipment
* Manual handling is regularly required to transfer patients from wheelchair to examination chair, pushing patients in wheelchairs and movement of equipment such as visual field machines
 |
| **MENTAL EFFORT** |
| * Clinical work requires frequent concentration and mental effort to ensure correct investigation and precise measurements
* Undertakes frequent (at least half worked shifts) and prolonged (a requirement to concentrate continuously for more than half a shift) concentration during a clinical session for the purpose of clinical decision making. Carrying out clinics where simultaneous analysis of multiple data, records and analysis is required such as medical retina review and glaucoma clinic and a paediatric clinic when trying to assess a child at speed whilst keeping then calm and being mindful of their siblings with occasional unpredictable interruption.
* Managing competing demands of providing the service on a daily basis
* Provide a flexible approach in order to cover the duties of the department
* Ability to frequently use and concentrate for long periods using IT systems and ophthalmic diagnostic equipment.
* Frequently managing to maintain concentration despite interruptions during clinical assessment
 |
| **EMOTIONAL EFFORT** |
| * Frequently (once a week or more) working with patients who may have a poor visual prognosis or significant visual loss requiring support and empathy (such as low vision clinics and glaucoma follow up clinics)
* Frequently (once a week or more) delivering and working with patients in the aftermath of bad news (such as being told they are no longer within the visual standard required for driving or no longer eligible for treatment due to poor visual prognosis).
* Maintain a professional approach at all times
* Ability to cope and deal with areas of conflict.
 |
| **WORKING CONDITIONS** |
| * More than occasional contact with patients, body fluids, infection and unpleasant smells. For example, contact with a patient’s tears during a contact lens fitting.
* Working with patients with occasional challenging behaviour.
* There may be occasional exposure to fleas, lice, childhood illnesses etc.
* Occasional exposure to patients with poor hygiene and exposure to chemicals
 |
| **OTHER RESPONSIBILITIES**  |
| Take part in regular performance appraisal.Undertake any training required in order to maintain competency including mandatory training, e.g. Manual HandlingContribute to and work within a safe working environment You are expected to comply with Trust Infection Control Policies and conduct him/herself at all times in such a manner as to minimise the risk of healthcare associated infectionAs an employee of the Trust, it is a contractual duty that you abide by any relevant code of professional conduct and/or practice applicable to you. A breach of this requirement may result in action being taken against you (in accordance with the Trust’s disciplinary policy) up to and including dismissal.You must also take responsibility for your workplace health and wellbeing:* When required, gain support from Occupational Health, Human Resources or other sources.
* Familiarise yourself with the health and wellbeing support available from policies and/or Occupational Health.
* Follow the Trust’s health and wellbeing vision of healthy body, healthy mind, healthy you.
* Undertake a Display Screen Equipment assessment (DES) if appropriate to role.
 |
| **DISCLOSURE AND BARRING SERVICE CHECKS**  |
| This post has been identified as involving access to vulnerable adults and/or children and in line with Trust policy successful applicants will be required to undertake a Disclosure & Barring Service Disclosure Check. |
| **GENERAL**  |
| This is a description of the job as it is now. We periodically examine employees' job descriptions and update them to ensure that they reflect the job as it is then being performed, or to incorporate any changes being proposed. This procedure is conducted by the manager in consultation with the jobholder. You will, therefore, be expected to participate fully in such discussions. We aim to reach agreement on reasonable changes, but if agreement is not possible, we reserve the right to insist on changes to your job description after consultation with you.Everyone within the Trust has a responsibility for, and is committed to, safeguarding and promoting the welfare of vulnerable adults, children and young people and for ensuring that they are protected from harm, ensuring that the Trusts Child Protection and Safeguarding Adult policies and procedures are promoted and adhered to by all members of staff. At the Royal Devon, we are committed to reducing our carbon emissions and minimising the impact of healthcare on the environment, as outlined in our Green Plan available on our website. We actively promote sustainable practices and encourage colleagues to explore and implement greener ways of working within their roles. |

PERSON SPECIFICATION

|  |  |
| --- | --- |
| **Job Title** | Optometrist Advanced – Band 7 |

|  |  |  |
| --- | --- | --- |
| **Requirements** | **Essential** | **Desirable** |
| **QUALIFICATION/ SPECIAL TRAINING**BSc (Hons) OptometryRegistered with General Optical CouncilFurther postgraduate Optometric qualification or advanced clinical training and experience to Masters level or equivalentIndependent Prescribing  | EEE | D |
| **KNOWLEDGE/SKILLS**Knowledge/experience of an NHS Hospital Optometry departmentExcellent communication skillsAbility to demonstrate empathy and professionalism when delivering complex or distressing informationGood presentation skills Computer Skills including MS Word. Excel and Outlook | EEEE | D |
| **EXPERIENCE** Post qualification experiencePrevious experience in core and specialist rolesPrevious experience of participation in clinical audit and research | E | DD |
| **PERSONAL ATTRIBUTES** Ability to liaise with multi-disciplinary teamEmpathy with childrenWell-motivated and enthusiasticFlexible approach to working patterns  | EEEE |  |
| **OTHER REQUIRMENTS** Need to travel to other sites as required | E |  |

|  |  |
| --- | --- |
|  | **FREQUENCY****(Rare/ Occasional/ Moderate/ Frequent)** |
| **WORKING CONDITIONS/HAZARDS** | **R** | **O** | **M** | **F** |
|  |
| **Hazards/ Risks requiring Immunisation Screening** |  |  |  |  |
| Laboratory specimens | N |  |  |  |  |
| Contact with patients | Y |  |  |  | F |
| Exposure Prone Procedures | Y | R |  |  |  |
| Blood/body fluids | Y |  |  |  | F |
| Laboratory specimens | N |  |  |  |  |
|  |
| **Hazard/Risks requiring Respiratory Health Surveillance** |  |  |  |  |  |
|  |
| Solvents (e.g. toluene, xylene, white spirit, acetone, formaldehyde and ethyl acetate) | N |  |  |  |  |
| Respiratory sensitisers (e.g isocyanates) | N |  |  |  |  |
| Chlorine based cleaning solutions (e.g. Chlorclean, Actichlor, Tristel) | Y |  | O |  |  |
| Animals | Y | R |  |  |  |
| Cytotoxic drugs | N |  |  |  |  |
|  |  |  |  |  |
| **Risks requiring Other Health Surveillance** |  |  |  |  |
| Radiation (>6mSv) | N |  |  |  |  |
| Laser (Class 3R, 3B, 4) | N |  |  |  |  |
| Dusty environment (>4mg/m3) | N |  |  |  |  |
| Noise (over 80dBA) | N |  |  |  |  |
| Hand held vibration tools (=>2.5 m/s2) | N |  |  |  |  |
|  |
| **Other General Hazards/ Risks** |  |  |  |  |
| VDU use ( > 1 hour daily) | Y |  |  |  | F |
| Heavy manual handling (>10kg) | Y |  | O |  |  |
| Driving | N |  |  |  |  |
| Food handling | N |  |  |  |  |
| Night working | N |  |  |  |  |
| Electrical work | N |  |  |  |  |
| Physical Effort  | Y |  |  | M |  |
| Mental Effort  | Y |  |  |  | F |
| Emotional Effort  | Y |  |  |  | F |
| Working in isolation | N |  |  |  |  |
| Challenging behaviour | Y |  | O |  |  |