

# PAC 2020

Online Professional Advancement Conference

## Highlights On Demand

Recorded lecture:

**Avoiding  
unnecessary  
complaints during  
the COVID-19  
pandemic - the  
same but different!**

Workbook

# CET information

Author Richard Edwards

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Accreditation 1 non-interactive CET point

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Duration 1 hour

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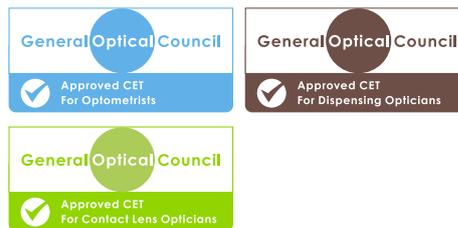
Reference C-76582

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Modality



Audience



Competencies



# Summary

This session is designed to increase registrants' ability to manage communications effectively during the COVID-19 pandemic and avoid unnecessary escalation of issues to the GOC or OCCS. It also seeks to improve confidence in clinical decision-making in COVID /post COVID environment and deepen understanding of the specific challenges it poses, and enhance record keeping to promote effective multidisciplinary working.

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## Author

### Richard Edwards

Richard Edwards qualified as an optometrist in 1987 and was Director of Professional Services at Boots Opticians before launching OPTOMISE Consulting in 2014. Richard is Professional Advisor to the Optical Consumer Complaints Service, chairs the Optical Confederation Education Committee and is a member of the GOC Companies Committee.

Richard also works on a consultancy basis for the GOC Policy team and FODO.

Richard has also lead the Learning & Development function at Boots, has broad experience of L&D facilitation and now lectures internationally in the area of complaint resolution. He is also a former member of the CBI Education & Skills committee working with Government ministers to influence the national skills agenda.

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## Learning objectives

2.8.1 Practitioners will have an enhanced understanding of issues relating to record keeping which may be problematic during COVID-19 and understand how to avoid them

1.2.1 Optometrists and CLOs will have an enhanced understanding of communication techniques to manage complaints effectively and avoid unnecessary escalation of an issue

2.10.4 Optometrists will have a deeper understanding of how to work effectively in sharing information as part of a multidisciplinary eyecare team while following appropriate procedures for care during COVID-19

91.2 Dispensing opticians will have an understanding of how to communicate effectively with a parent/carer to avoid unnecessary escalation of a concern relating to a paediatric dispense

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# References and guidance

Guidance on preparing for local lockdown College of Optometrists 31 July 2020

Optometric Primary Eyecare during COVID Pandemic College of Optometrists July 2020

Clinical Triage form template College of Optometrists August 2020

OCCS Annual Report OCCS July 2020

Coaching for performance John Whitmore 1996

C-75966 Practice Safely during COVID College of Optometrists

C-75974 Telephone Consultations during COVID College of Optometrists

C-73445 Coaching in Optometry OCCS December 2019

C-75318 Domiciliary Care in COVID Pandemic OCCS March 2020

Efron & Morgan Rethinking contact lens aftercare Clinical & Experimental Optometry 2017

Mehrabian, Albert; Wiener, Morton (1967) "Decoding of Inconsistent Communications" J Personality and Social Psychology. 6 (1): 109–114

GOC Documents:

- Joint regulatory statement on COVID-19
  - Joint regulatory statement on remote consultations and prescribing
  - Statements on
    - supply of spectacles and contact lenses during the COVID-19 emergency
    - contact lens aftercare during the COVID-19 emergency
    - registrants working in different settings
    - verification of CL specifications in COVID-19
    - infection prevention and control in COVID-19
    - reopening of optical practices (12 and 24 June)
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# Case 1

'I feel like my head is going to explode and I was also told a retinal photo would be chargeable'

This patient called your practice for advice. As a contact lens wearer initially reporting gritty feeling of lenses at work she was put through to the CL department where the CLO completed the attached triage form.

Discussion set up - How will you manage this patient today?

Optometrist - the CLO has come to you for advice

Dispensing Optician - as Manager the CLO has come via yourself so you have convened case discussion to agree next steps

Contact Lens Optician - you did the triage consultation call

Triage form:

Clinical telephone/video review		THE COLLEGE OF OPTOMETRISTS	
Patient name:	Miss EKW	Patient Identifier:	
Contact details:	07743 382 XXX	Date of birth:	18/8/94
Relevant OH:		Date of last sight test:	2019
Reason for contacting the practice		Junior Doctor working long hours on COVID ward.	
Recent onset of severe headache - 24 hours			
Existing spectacle prescription (if relevant) CL wears - 'Gritty' at work			
Right:	-1.00/-0.75 x 90	Previous VA	2/5
Left:	-1.00/-0.50 x 85	Previous VA	4/5
Telephone/ video consultation (delete as appropriate)			
History and symptoms		Have you experienced any of the following? N/R/L	
Acute onset of headache (like 'subarachnoid') Concern re intra-cranial pressure. Wants eye test to check optic discs. no other health symptoms		Eye pain: <input type="checkbox"/>	
Patient self-estimated VA (Same/ <del>little worse</del> / much worse than previous)		Photophobia: <input type="checkbox"/>	
Right	Left	Haloes around lights: <input type="checkbox"/>	
		Recent trauma: <input type="checkbox"/>	
		Distortion in vision: <input type="checkbox"/>	
		Recent onset floaters: <input type="checkbox"/>	
		Red eye: <input type="checkbox"/>	
		Sudden change in VA: <input type="checkbox"/>	
		GH/Medications: Hodgkins in 2012	
Recommendations (tick)			
Sight/life threatening?: Refer to eye casualty		Minor eye condition: Advise to self-manage	
Potentially sight/life threatening?: Book urgent optom review		Non urgent condition: Book appt in 6/12	
Advice given:			
Signature: GOC:		Date:	

# Notes

1. What are the factors indicating an examination is appropriate?

2. What are factors against bringing them in?

3. What are you going to do?

4. How do you explain to a patient any differences in the content of the examination to their last visit?

5. How do you explain the benefits of OCT and how do you explain to those that may be eligible for NHS care that this is not covered within their entitlement, in a way that avoids the risk of a complaint?

6. If you chose to bring them in would you have acted differently if this had occurred in late March 2020, when the Covid-19 infection rate was at its highest in the UK?

# Case 2

## 'Your optician is withholding the lenses I have paid for'

You are the practice director and you receive the following complaint

### Complaint to OCCS

As a loyal patient of yours I have happily been wearing daily disposable lenses for several years. I have regularly seen Miss M for my annual check ups.

As you know I work as a nurse in a care home and due to current work commitments I have been unable to get in for my annual check for a few weeks but I need my lenses for work and am about to run out.

When I called the practice to send my lenses the lady apologised as she was just back from maternity leave so she checked my records and informed me I had to come in for a check up as the practice is now open again. As a single working parent I simply cannot get in for a check up at the moment. I am also uncomfortable with making non essential trips into town.

This position now leaves me with no choice but to go online and order some lenses myself. The online supplier has made it so easy that I will not be coming back to your practice in the future.

You are withholding my lenses, lenses that I have already paid for.

### What complainant wants

I want a refund of the direct debits paid over the past 3 months and to be removed from your recall system

### Clinical synopsis

- Daily lens wearer - records indicate some evidence of overwear in the past and CLO recorded advice to reduce wearing time over last two years
- Three months beyond specification expiry
- Superficial epithelial staining recorded at last CL check
- Dry eye symptoms at work towards the end of a shift

# Notes

1. What are the key clinical considerations to consider in this case?

2. What are the non-optical factors to consider in this case?

3. Can I, and how will I, secure that resolution? How do I 'calibrate & balance' risk in this scenario?

4. What are the key insights from the case and how will I share this with my team?

# Case 3 - The Festering Complaint

Time Travel - imagine it is 15 April 2020 and you are the store director who receives this complaint via OCCS

## Complaint to OCCS

You diagnosed my six year old daughters eyes wrong and when putting glasses on her said its normal when she said "I can't see any thing" I was told she will be fine so I had to pay for a private test and buy lenses to rectify the error.

You then closed the shop because of lockdown and because the person who did the test is on furlough so we don't know what went wrong.

## What complainant wants

I'm not sure as the stress it's caused me and family is great. We want to know why your optician got it wrong.

## Synopsis

- Father very unhappy that visual blur on collection not appropriately addressed
- Went elsewhere with new specs, reported non-adaptation and prescribed lower plus Rx (£20 for EE and £50 for new lenses)
- Practice Manager unable to answer questions about prescriptions - the optometrist who tested the daughter is on furlough and cannot be contacted

## Clinical synopsis

History and Symptoms	
Reason for Visit :	VCG - Supervisor DI RFV - First time ST Px attends tasks well at DV & NV Sx - No headaches No diplopia No Flashes No Floaters No other problem reported
General Health :	No health issues - Ft Birth No Allergies
Medication :	None taken
Ocular History :	No Ocular issues No HES No Lazy Eye
Family History :	No relevant issues No Lazy Eye No Glaucoma
Life Style :	Driver Info : Heavy Goods - No, Private - No, Public Services - No, Motorcycle - No VDU : Yes , H/Day : 2 , Occupation : FTE Hobbies :

Refracted Rx :									
	Vision	BIN Vision	Sph	Cyl	Axis	Dist VA	Dist Bin VA	N Add	Near VA
R	6/10 -2		+3.25	--	--	6/6 -2		--	N6
L	6/10 -2	6/10	+3.50	--	--	6/6 -2	6/6 -2	--	N6
	Specific Add	Reason	Prisms Distance			Prisms Near			
R	--		--	--	--	--	--	--	--
L	--	--	--	--	--	--	--	--	--

Prescribed Rx :									
	Vision	BIN Vision	Sph	Cyl	Axis	Dist VA	Dist Bin VA	N Add	Near VA
R	6/10 -2		+3.25	--	--	6/6 -2		--	N6
L	6/10 -2	6/10	+3.50	--	--	6/6 -2	6/6 -2	--	N6
	Prisms Distance		Prisms Near			Recall period			
R	--	--	--	--	--				
L	--	--	--	--	--		3		

Muscle Balance Tests	
DV Cover s Rx :	No Movement
DV Cover c Rx :	
NV Cover s Rx :	No Movement
NV Cover c Rx :	
DV Muscle Bal :	
DV F. Disparity :	

Accommodation and pupils	
Motility :	Full & Smooth
NPC :	pen to nose
Accommodation :	
Pupils :	Normal DCN PERRL No RAPD

Additional Tests	
Ishihara - Passed	Cyclo Dilation same day - leaflet given - 1 drop each eye Cyclo 1.0% / H4589N / EXP 062020 Taken -0.75 for tonus

Advice given/Action taken	
Discussed Rx with family - advised adaptation - return if does not adapt to prescription	SVD FT wear Review px in 3/12 & do stereopsis on next st Any sos come back sooner

# Notes

1. What are the key factors in this case?

2. What does the complainant want as a resolution?

3. How will I secure that resolution?

4. What are the key insights and learnings from the case?

# Reflection questions:

Your answers to these questions and the above learning objectives must be uploaded within one month of this event to the website MyGOC at [www.optical.org](http://www.optical.org) when you claim your points.

## List the main things you learned from this session

Note this should not be the learning objectives, this should be the key points you have taken from the discussion which may help you enhance the way you deal with similar cases in practice.

1.

2.

3.

## Describe how you will apply this learning in your practice

1.

2.

3.

## Has this session identified any areas where further personal learning is needed? If so, briefly describe these

## Time spent in reflection

It will take up to two weeks for the CET points to appear on your CET record at MyGOC.

Please give us feedback on this session. Contact us at [ptd.ilearn@specsavers.com](mailto:ptd.ilearn@specsavers.com)