

BRIEFING NOTE

TO: Board of Directors

FROM: Clinical Practice Committee

DATE: December 5 and 6, 2022

SUBJECT: 16.0 Standard 8 Refraction and Refracting Status

☒ For Decision

☐ For Information

☐ Monitoring Report

Purpose:

To review and approve the proposed recommendation that Standard 8: Refraction and, as a result, the refraction designation be “sunset” be circulated for stakeholder feedback.

Background:

Refracting versus Prescribing

Refraction, sometimes referred to as a vision test, is a test which determines whether corrective lenses are required and what the power of these lenses should be, if needed. Refraction is not considered a controlled act under the *Regulated Health Professions Act (RHPA)*.

By contrast, a prescription is the end result of an eye examination consisting of a refraction and an eye health examination (to detect any conditions or diseases) performed by an authorized prescriber, an optometrist or medical doctor. Prescribing and communicating diagnosis is a controlled act.

Under the *Opticianry Act, 1991*, registered opticians are prohibited from dispensing eyeglasses, contact lenses or subnormal vision devices except on the prescription of an optometrist or medical doctor.

History of Refraction

Over the years, concerns were raised by the Ministry of Health that the public may confuse refraction with prescribing. In addition, optometrists identified they had concerns that opticians may use refractometry to generate or alter a prescription without the involvement of a physician or optometrist. There were further concerns raised by optometry that eye diseases may go undiagnosed if patients opted to receive a refraction only in order to purchase eyewear and did not receive a full ocular health exam. The Ministry of Health directed the COO to collaboratively develop Standards to address refraction and, until such time, the Ministry directed the COO to restrict its registrants from performing refractions.

The COO made efforts to collaborate with other stakeholders on developing a Standard, but at the time, key stakeholders were not willing or able to engage in meaningful collaboration. As a result, the College

independently developed and approved a Refraction Standard in September 2008 and began issuing refraction designation to those registrants that completed refraction education.

In February 2009, the Ministry of Health and Long-Term Care requested the College take immediate steps to prohibit the performance of refractometry and altering prescriptions by registrants. The College continued to issue refraction designations.

In July 2009, the Ministry of Health and Long-Term Care issued an order to the COO that it immediately cease granting refraction status to its registrants. This administrative hold on approving further registrants as “refracting opticians” remains in place today. Opticians who had received approval to refract as of July 2009 were able to continue performing refractions as per Standards developed by the COO.

Standard 8: Refraction

Standard 8: Refraction was first approved in 2008 and aims to separate the performance of the public domain of refraction from the controlled act of prescribing. This standard allows those opticians who are certified to refract while restricting their performance of prescribing.

Registrants with refracting status continue to be permitted to refract as long as they comply with the requirements set out in the Standard including completing 2 additional continuing education hours annually and completing a Patient Acknowledgement Form for each patient they perform a refraction on. These forms must be submitted to the College on a quarterly basis.

Initially, 41 opticians (RO) registered for refracting status. Currently 10 are permitted to refract; the remaining are either no longer practising or, have signed an undertaking not to refract.

Of the ROs permitted to refract, the majority chose to continue with quarterly reporting as, although they may not be actively refracting, they want to keep the option open.

Standard 10: Delegation

The practice environment has changed significantly in the past decade. As of 2014, the College of Optometrists has updated its Professional Misconduct regulation to allow optometrists to work in shared practice environments with opticians. This has created interprofessional collaboration opportunities where opticians can have optometrists work in their practice as an independent contractor as well as allowing for optometrists to hire opticians in their place of practice.

This resulted in a rise in conduct and practice advice inquiries about collaborative practice environments and tasks related to “pre-testing”. Pre-testing consists of a variety of tests, which may include refraction, to gather information as part of a comprehensive eye examination performed by a prescriber. Pre-tests do not typically include tasks that are considered controlled acts under the *Regulated Health Professions Act, 1991* (RHPA) and can be performed by an optician under the assignment of an optometrist or physician.

To account for this, Standard 10: Delegation was developed and approved by the Board in 2020. Standard 10 addresses the giving and receiving of delegation by opticians. This standard addresses the

performance of refraction by opticians (with or without refracting designation) under the delegation or assignment of a prescriber, as part of pre-testing.

These 2 standards that address refraction have caused confusion among the registrants.

For Consideration:

At their meeting October 27, 2022, the Committee considered whether:

- Standard 8 continued to reflect current practice environments
- Opticians with refracting statuses would be prevented from doing anything should Standard 8 be removed
- there remained a need for the refraction designation
- Standard 10 adequately addressed refraction,

To better understand how and when opticians were refracting, the College engaged in stakeholder consultation. Opticians with refracting status were invited to participate in a Focus Group where they were asked specific questions related to why they chose to seek refracting status, whether they currently refract, what barriers they face and, whether Standard 10 allows them to do what they currently do.

In addition, to assess the continued relevance and effectiveness of Standard 8, all registrants were invited to participate in a survey.

When reviewing the feedback received the Committee noted:

- Stand-alone refraction has caused confusion for opticians and the public
- Opticians with refracting status find Standard 8 restrictive – it does not fit their practice model and the paperwork is onerous and prohibitive
- Very few ROs with refracting status are actually refracting and none of them appeared to be able to point to anything that they are currently doing in their practice that they wouldn't be able to do within the parameters for accepting delegation or assignment in the manner contemplated by Standard 10
- Participants did not appear to identify any compelling reasons why refraction status remains necessary
- When probed, opticians with refracting status actually seemed to want the ability to prescribe, which would be a scope expansion and is not currently on the table

The Committee noted that it is important to keep in mind:

- Refraction is not a controlled act
- With the introduction of Standard 10, all opticians are able to refract under assignment/delegation
- Under no circumstance can an optician (including a refracting optician) dispense an optical appliance without a valid prescription by an authorized prescriber
- Refraction is not prescribing, ROs cannot make/dispense glasses from the results

- Scope expansion is not part of the current discussion
- Eliminating Standard 8 will not take away the ability for an optician to complete manifest over-refractions (MOR) when fitting eyeglasses and/or contact lenses

The following chart outlines some of the considerations with respect to sunseting the refraction standard and designation or maintaining the status quo:

Sunset Refraction Status and Standard 8	Remain Status Quo
Would relieve tension with optometrists	Creates tension with optometrists
Would foster trust with the Ministry of Health	Lack of clarity; confusion between Standard 8 and Standard 10
Would provide greater clarity for registrants	If being used, it is typically being done incorrectly
Eliminates the misconception there exists a path to scope expansion	Administratively, it is a lot of work reviewing the forms and keeping an eye on this small number
Removes the requirement of additional continuing education for those who have refracting status	Causes challenges in a collaborative work environment due to confusion and lack of clarity around what ROs can/cannot do
Eliminates paperwork which was identified as a barrier by participants of the focus group	

Public Interest Considerations:

Stakeholders have voiced concerns over public confusion between prescribing and refracting and the possibility of undetected eye disease in the event a patient does not receive a regular eye health examination. It is imperative that refracting is clearly defined and that the issue of eye health is addressed.

There is already confusion amongst patients with regards to the difference between opticians, optometrists, and ophthalmologists. Differentiating between refraction and prescribing adds further confusion.

The Committee noted that there does not appear to be a negative impact to the public by eliminating Standard 8 and, as a result “sunsetting” the refraction designation.

Diversity, Equity, and Inclusion Considerations:

Updating the standard of practice to be consistent with today’s practice environment may result in increased access to eye care services.

Recommendations/Action Required:

The Committee proposes that Standard 8 and, as a result, the refracting designation be sunset and would like feedback from the Board prior to circulating this proposal for stakeholder feedback.