PROPOSAL FOR THERAPEUTIC QUALIFICATION AS A REQUIREMENT FOR GENERAL REGISTRATION

Optometrists Association Australia welcomes the opportunity to comment on the Optometry Board of Australia’s (OBA) Consultation Document on proposal for therapeutic qualification to be included as a requirement for general registration.

The Association represents over 3800 members being 95% of all practising optometrists. As the peak professional body for Australian optometrists the Association is committed to assisting optometrists to provide accessible quality eye health and vision care for all Australians and to assisting them achieve their aspirations for themselves, their communities and their profession.

Context

This submission accepts the OBA prediction that the number of optometrists who have therapeutic qualifications will exceed the number of those without in this decade. Currently the uptake of these qualifications varies around the country. In some states as few as 5% of registered optometrists have therapeutic endorsement while in Victoria which has had therapeutics for more than 10 years about 50% are endorsed to use and prescribe.

From 2014 all Australian and New Zealand graduates will have therapeutic qualifications included in their undergraduate training so from then therapeutic qualifications will be included in the minimum education standard for Australian optometrists.

Given there are likely to be about 250 graduates a year in Australia and New Zealand, there will be another 2,000 or so therapeutically qualified optometrists by the end of the decade without allowing for those currently registered optometrists who undergo post graduate training or overseas trained optometrists who come to practise in Australia.

It is reasonable for the OBA to consider now how it should manage the General Registration category of registration for optometrists with these projected changes in the workforce.

This submission responds to four core issues raised by the Consultation Document, namely:

- is there public benefit in optometrists having therapeutic qualifications?
- should optometrists be required to have therapeutic qualifications?
- how and when should registration arrangements require therapeutic qualifications?
- what are the impediments to implementations?

Public Benefit

There is public benefit in optometrists being qualified to prescribe and use ocular therapeutic agents. Optometrists are the front line of eye health and vision care in Australia and provided some 6.4 million services in 2009-10. The Australian Institute of Health and Welfare estimate that some 75% of primary eye care is delivered by optometrists.¹

If more optometrists have therapeutic qualifications the profession has the potential to treat commonly occurring conditions without further need for referral to a GP or ophthalmologist. To the extent that optometrists can free GPs and ophthalmologists to attend to cases which only they should treat, the public interest is better served.

The expanding scope of optometry which allows optometrists to manage eye conditions with therapeutic agents enables more timely access for the public for all eye care needs. This is particularly relevant in rural and remote Australia.

Should Optometrists Have Therapeutic Qualifications?

Optometrists should be encouraged but not compelled to obtain therapeutic endorsement.

We see the ability to prescribe and use therapeutic agents as a natural and desirable evolution of optometry as a primary health care profession. In time as more optometrists have therapeutic qualifications patients will come to expect optometrists to deliver the expanded scope of practice.

The Association encourages all members to consider how they wish to practise throughout their careers and to think about updating their skills as needed. If currently registered optometrists who do not have therapeutic qualifications decide to continue to practise without prescribing or using therapeutic ocular agents then that is entirely a decision for them to make.

How and When Should Registration Change?

Registration arrangements should allow all currently registered optometrists to practise until retirement as they do now should they elect not to become therapeutically qualified. Currently registered optometrists should be able to choose whether or not they wish to become therapeutically qualified for their own reasons and in their own time without being professionally disadvantaged or coerced.

The Association proposes registration arrangements where therapeutically qualified optometrists would be registered separately within the General Registration category from currently registered optometrists who do not acquire therapeutic qualifications and who would continue to practise as at present without prescribing or using therapeutics.

The Association recognises this will present sensitive issues for the OBA to consider, in particular how should these two types of General Registration be described in the publicly accessible register of practitioners. The Association is keen to work with OBA to ensure an appropriate solution is found.

As to timing, the Association suggests there is no urgent need to change the current arrangements and proposes any new arrangements come into force from 2014 when new Australian and New Zealand graduates entering the optometry workforce will have therapeutic qualifications.

The Association’s proposal that currently registered optometrists should be able to continue to practise as they choose should apply also to optometrists who presently hold General Registration but do not practise in clinical roles eg work in research or management. Should an optometrist who is currently registered in the General Registration category but working in a non-clinical role choose to return to clinical practise but not prescribe or use therapeutics they should be able to do so provided they meet other relevant registration requirements such as CPD and Recency of Practice.

Similarly, non-therapeutically qualified optometrists who are currently registered in the Non Practising category if previously registered but have chosen not to practise for whatever reason, wish to return they should do so on the same basis as if they had remained in practise. They too would be subject to all other relevant registration requirements.
The Association further recommends the minimum education qualification requirements should apply to all overseas trained optometrists seeking to practise in Australia from 2014. An area for further investigation is what arrangements should be made for overseas trained optometrists who wish to do post graduate training in therapeutics in Australia after 2014.

Implementation Impediments

The main impediment to more currently registered optometrists acquiring therapeutic qualifications is the lack of available course placements for post graduate training. This is especially the case for compulsory clinical placements which also are dependent on ophthalmologic support.

If the OBA adopts the Association’s proposal to enable current registrants who choose not to acquire therapeutic qualifications to continue to practise as they do now there will be no immediate pressure for large numbers to do post graduate training.

Conclusion

The Association accepts that in time most optometrists will have therapeutic qualifications and that registration arrangements should reflect that. Any such changes should allow currently registered optometrists who elect not to acquire therapeutic qualifications to continue to practise as they do now. The Association is keen to work with OBA to develop arrangements which are effective and fair to all stakeholders.

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