

ne of the major issues facing Ireland's optical profession is how it will be regulated as a result of the move to abolish the 1956 Opticians Act and hence the Opticians Board.

On the positive side, 2011 saw the introduction of the first 'sharedcare' type scheme between the Health Service Executive and the Association of Optometrists Ireland (AOI). Following a realisation that the waiting list in Cork University Hospital had lengthened considerably, negotiations between local GPs and staff at the hospital were widened to include an optometry representative and this led to approximately 5,000 patients being screened by optometrists in the community. The scheme has received enormous praise from the local medical community, despite some initial reservations from ophthalmic physicians in the area. The project marks a landmark in the development of the profession in Ireland, driven by the input of former AOI Council member Sue Doherty.

It has long been a goal of the profession in Ireland and specifically of the AOI to lobby for amendment of the Opticians Act to bring the legislation more into line with that applying to other professions in Ireland such as the changes to the Medical Practitioners Act 2007 and the Pharmacy Act 2007. Major areas of weakness in the 1956 Opticians Act in comparison to the newer legislation cited above, include poor fitness to practise provisions and over-representation of ophthalmologists on the Council. Such a review of the legislation would be hugely beneficial in making arrangements for future schemes like the one in Cork.

Surprise move

There was considerable surprise when it was announced in November 2008 that as part of a programme to reduce the number of government quangos, the Opticians Board was being abolished (along with the Opticians Act) and the professions brought under the banner of the Health & Social Care Professionals (HSCP) Council; optometry and dispensing were not the only bodies covered by the announcement.

The Opticians Board was initially contacted to discuss implementation, but the AOI, as the professional representative body for Irish optometrists, made strong representations on the importance of the issue and was included as part of

Reforming optics

Martin O'Brien reports on the legislative changes affecting the optical profession in Ireland



Moves to amend legislation have been held up by a change in government the negotiations. The Department of Health & Children (DoHC) sought submissions from interested parties and the Irish Association of Dispensing Opticians (IADO) also made detailed representations.

The AOI and the IADO have been at great pains to point out the differences between our professions and the other groups included under the HSCP Act, in particular the areas of dispensing of spectacles and contact lenses. Department of Health officials repeatedly stated that it was not the intention of the process to deregulate the sale or supply of spectacles or contact lenses either by design or error. Initial indications are that there may be legislation in the pipeline that will soon give a clear indication of the results of these discussions and negotiations.

One of the reasons the process has had a hiatus was the change in government in Ireland earlier this year, which led to a certain amount of upheaval in the public service. One significant thing to emerge was the appointment of Rosin Shortall as minister of state for primary care. Minister Shortall has already met with a deputation from the AOI and the wide-ranging discussion was seen as beneficial and informative. It is hoped that the relationship can be fostered to provide the public with increased access to optometry services.

The HSCP Act has led to the spectre of the abolition of the Opticians Board,

but the Board still remains effectively the regulator for the professions in Ireland. It regularly undertakes a review of the rules under which the professions operate. In the past year it published revised rules which included a relaxation on advertising, reflecting the recommendations of the Competition Authority. The new rules also change the position in relation to optometric provision of orthoptic treatment, with optometrists no longer requiring medical approval to commence orthoptic treatment where the optometrist is satisfied that there is no medical risk to the patient ie for convergence problems.

In late 2010 the AOI facilitated a group of independent members to form a new body, Eyezone. This is a branding exercise to allow economies of scale for independent practices to advertise nationally and express a consistent message. Eyezone has developed a number of relationships to offer discounts and promotions to the independent sector. It is a separate entity from the AOI with its own staff. The project has been well supported and has run a number of successful promotional campaigns.

Driving tests

Late 2010 and early 2011 also saw the Road Safety Authority change the rules on driver vision screening in Ireland to comply with Directive 2009/113/EC. For the first time, Irish optometrists are now able to certify drivers for Group 2 (commercial) licences. Unfortunately, the RSA rushed out the new guidelines and this has led to considerable confusion over exactly what tests are required to complete the required form (D.502). However, the Royal College of Physicians of Ireland (RCPI) has put together a multi-disciplinary committee of medical specialists to develop new guidelines on all aspects of 'medical fitness to drive' which includes the eye examination, and to assist the newly appointed director of traffic medicine Professor Des O'Neill in his role. In another first, optometry is represented on this committee.

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