

# An all-round education

Rory Brogan speaks to Dr Kamlesh Chauhan, head of The Vision Care Institute, which has recently celebrated its first anniversary as a UK education provider

**W**ith a PhD and a career of over 20 years in optometric training, it was no surprise that the role as head of Johnson & Johnson's Vision Care Institute (TVCI) at Wokingham in Berkshire would appeal to optometrist Dr Kamlesh Chauhan.

Dr Chauhan, who studied optometry at Glasgow Caledonian, followed by a postgraduate at Manchester's UMIST on accommodation and flicker, was latterly at Dollond & Aitchison in a training role for pre-reg optometrists. He has also been a Boots tutor practitioner based at UMIST where he was able to organise in-house continuing education and training as well as conducting research on vision and driving. Although not heavily involved in the contact lens side of training, he has taught in instrumentation and statistics, the influence of which can be detected in his current role. In addition to being the vice president of the College of Optometrists, he has been vice chair of its education committee, a role that included work on the new Objective Structured Clinical Examinations, also the subject of training at TVCI.

## Educational challenge

While working as professional services manager at D&A over 10 years, results from the pre-reg programme went from being lower than the average at 23 per cent to a 65 per cent pass rate. When the post of head of the Institute came up at the Pinewood Campus in October 2008, Dr Chauhan was ready for a change. 'At that time I decided I wanted a move for more of a challenge and was offered the role, which came just before the announcement of the merger between Boots and D&A.'

He added that, with the demands for pre-reg training being reasonably standard year-in, year-out, the TVCI



**TVCI head  
Dr Kamlesh  
Chauhan**

post gave a good opportunity to do something different, with a free rein to set up new educational events. Having delayed his start date so that he could see through his last group of pre-reg students and complete his programmes in Manchester, Dr Chauhan officially joined TVCI in August 2009.

One of the most immediate differences between his new post and his previous role is the fact that, with a 40-year span from the ages of 25-65, the TVCI's target group is much larger. 'It's a much more diverse group of people to think about educating, while not ignoring those undergraduates and postgraduates.'

The main aim of the training being offered is to achieve patient satisfaction, in a way that is as innovative as possible. This he describes as important, given that so much CET is readily available today. Education at TVCI is developed by going to eye care practitioners and asking for their educational requirements, so that they remain engaged and interested in optometry.

One idea that was to develop out of the practitioner feedback is the current back-to-work course for the increasing

number of people who have taken career breaks. 'People go to education events and while the theory is useful and helps them understand, they felt they were missing competencies. At Pinewood the facilities give the opportunity for practitioners to see how a procedure is carried out on television, they can ask questions and go on to gain hands-on experience in our clinics. Telling someone how it is done is one thing. Showing them is one step beyond. That's what we're really trying to achieve.'

Training can also include improving communication skills with contact lens patients, who are now much better versed in availability of product as a result of the web, which has changed the dynamics of the relationship.

'Also, legally, things have changed a lot in the past five years, so we try to make sure we give ECPs confidence to go back to practice and be enthusiastic.'

## Vision care mission

Dr Chauhan points out that TVCI is not named The Contact Lens Institute, and as such the training is across the board in vision care, ranging from contact tonometry, which ECPs may not have done for some time, to indirect ophthalmoscopy. 'The typical practitioner does not spend all day doing contact lenses. If you have a contact lens patient with a red eye you also have to look at what else could cause that. Practitioners also have to make sure they are looking after their contact lens patients completely – it's not just about a lens and how it works on the eye.'

Further developments planned for TVCI will include taking on new instrumentation from Topcon for posterior and anterior eye ocular coherence tomography, video keratoscopes, a wavefront analyser and a vision field analyser. Looking ahead there are plans to work with other education providers, for

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example getting a non-optometric university to cover communication skills in a clinical setting, as well as having an ophthalmologist speak on working alongside ECPs.

TVCI can tailor-make courses for large optical groups through to smaller chains, and, appreciative of the fact that smaller practices cannot close down for a day to let all their staff attend, it also offers to train the trainer.

Being able to compare the training experience achievable in practice and university settings with TVCI, Dr Chauhan believes the facilities at Pinewood give a unique offering, in particular the hands-on training that can be offered with six slit-lamp video cameras across its clinics. This enables ECPs to record images that they can take back to practice on a USB stick to educate staff and patients.

Dr Chauhan adds that so far the feedback is extremely gratifying, and as a good statistician, he has figures to show that the courses are working: 'We have clear metrics in place to measure the difference before and after training, with a 30 per cent improvement in competence.'

He adds that one of his highlights is that after the training, participants think TVCI education is more independent and credible than before, and not there to push Acuvue lenses. 'That's something we're very proud of,' he says.

Another statistical highlight is the net provider score. This measures on an 11-point scale, whereby anyone from 0-6 is considered a detractor, 7-8 are ambivalent and these are taken away from the results of people who score the training experience as 9-10. 'The standard goal is 50 per cent and we get 76 per cent, which is an amazing score,' he explains.

Negative scores on the anonymous feedback are also welcome as it means the organisers can take measures to improve and evolve the offer, from the training down to the hotel facilities. 'It is important that we get genuine comments,' says Dr Chauhan.

One further advantage of TVCI, he adds, is that the trainers actually work as clinicians in their own practices, so that they have experienced what they are talking about. 'Peer to peer learning is very important.'

Another success towards the end of the first year was the 'Friends Reunited' style two-day course for 20 optometry graduates from the Glasgow College class of 1980, 30 years on (*Optician* 16.04.10). These



Ian Davies, vice president EMEA, takes a course in the auditorium

Optometry Reunited events can also be organised with other groups, for example the recently qualified, and gives ECPs the opportunity to learn from each other, how contemporaries do things in practice. Dr Chauhan explains that bringing together groups like this means that the dynamic is relaxed and attendees immediately learn from each other in what can be a very intensive training session.

## Website development

The institute's website is also developing, so that delegates can receive follow ups to their training

at regular intervals. 'This makes it a "living course". For example, 12 months ago we may not have been aware of developments but you can target them now.'

Other challenges are to keep the education up to date, and do things differently, which fits in with the company ethos that you challenge everything to make sure it is going in the correct direction. 'That internal challenge is useful and it drives everyone.' This, he says, also relates to research and development, a constant need to improve product.

In terms of keeping the education fresh, there are pilot courses where different approaches to training can be carried out. He gives the example of talking about contrast and showing what a patient experiences in a tangible way, or discussing UV-blocking contact lenses and having a demonstration of sun block. When covering wettability, there will be examples of different materials for people to touch and understand. 'If you were to give someone a contact lens from 15 years ago and one in the latest technology, the reality is the difference may not be that great. We're giving the ECP a way of communicating these things.'

The offering at TVCI isn't always entirely new, though, as it also revisits and changes programmes, responding to feedback. 'The courses evolve over the period of existence, making them better and more effective.'

'If we don't fulfil patient satisfaction by getting people to use these skills in practice, we've not achieved our purpose,' he says. ●



Education offers hands-on experience