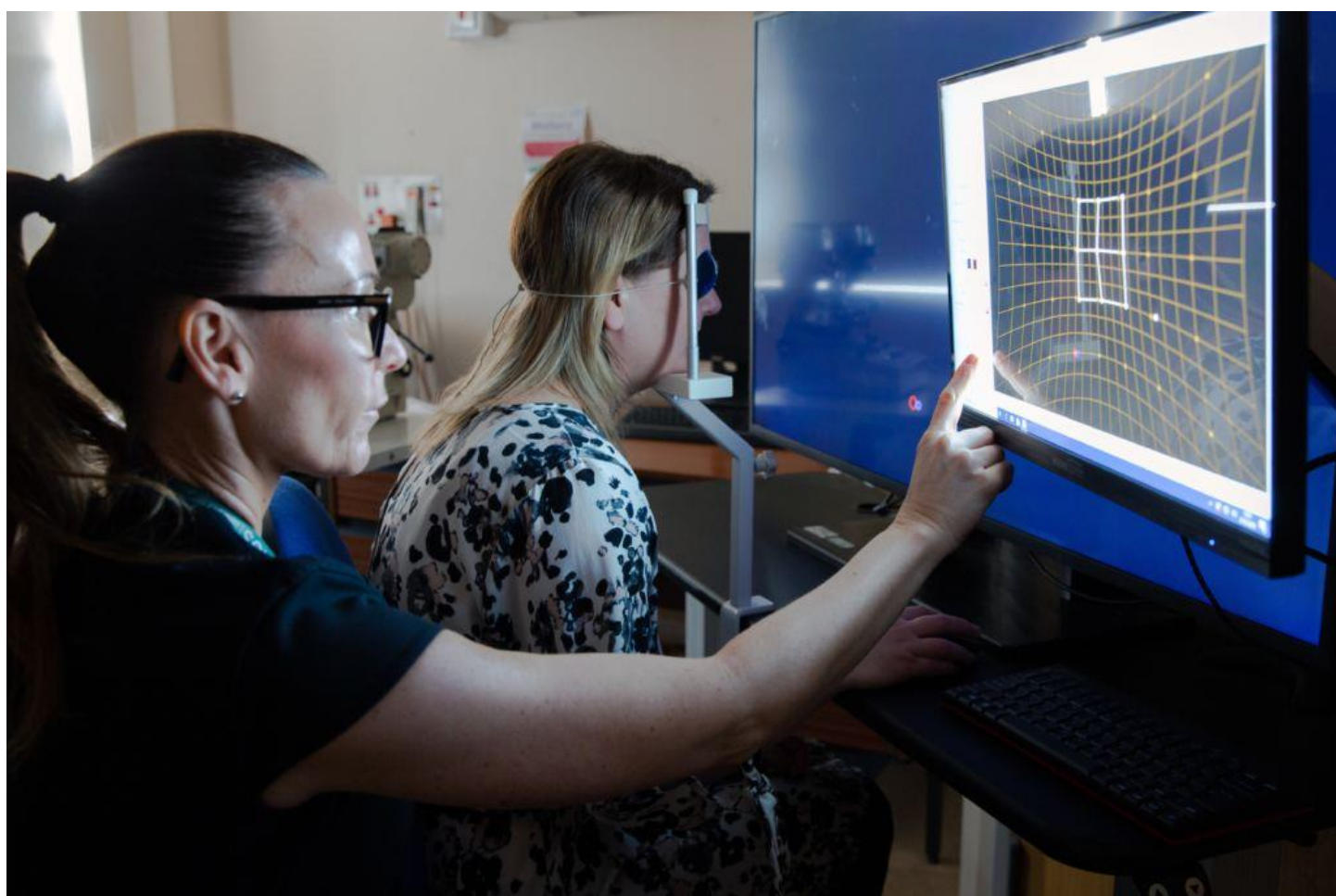


Scoping of the non-registered orthoptic workforce to facilitate career development and progression



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Introduction

Health Education England (HEE) funded an eight-month project which was undertaken by The British and Irish Orthoptic Society (BIOS), to look at various aspects of the non-registered/support workforce within orthoptics.

The Allied Health Professions (AHP) support workforce make a significant contribution to AHP services. Supporting them to maximise their capability is crucial to enable AHP services to meet rising population and person demand whilst supporting wider workforce transformation. The AHP support workforce possess skills and experience that are essential to delivering safe, effective, and productive AHP services however, this contribution frequently goes unrecognised.

[The Cavendish Review \(2013\)](#) drew attention to a lack of consistency in training and job roles, which resulted in some support workers feeling 'undervalued and overlooked' and it was recommended that it was 'time to start seeing these support workers as a strategic resource, to both the NHS and social care'.

According to NHS Employers, more than a third of the NHS's workforce is made up of support workers in band 1-4 roles (Snell, Laura and Grimwood, Tom 2020). The priority for BIOS was to understand the diverse skill set of this orthoptics workforce and identify, support, and facilitate future development and career progression.

The 4 main parts to the BIOS project were:

- Host an online conference to explore and celebrate the non-registered workforce diversity of skills and knowledge and identify the needs of this workforce.
- Commission a report to identify the current scope of practice for the orthoptic non-registered workforce.
- Support work to develop job descriptions with the goal to have non-registered orthoptic profiles approved by the Job Evaluation Group (JEG) for national use.
- Colleagues in Wales have developed a support worker educational and competency framework and training. BIOS to collaborate with Welsh colleagues for this training to extend across the UK workforce, so building a career path from band 2 upwards.

A recent position statement from a collaboration of professional bodies, including BIOS stated that "As Professional Bodies and Trade Union partners for the Allied Health Professions (AHPs), we aim to ensure that the knowledge, skills, attributes and experience of the AHP non-registered (support) workforce are fully utilised. This calls for a UK wide commitment from employers, policy makers and workforce planners in England, Northern Ireland, Scotland, and Wales to take action to grow and develop the AHP support workforce".

Project activity

Online conference

The orthoptic non-registered workforce online event on 26 November 2020 was joined by 58 attendees and celebrated the diversity of the current orthoptic support workforce by highlighting the wide range of tasks and the levels of responsibility that they hold.

National survey on scope of practice for orthoptic support workers

A questionnaire was developed in December 2020 with the aim to scope the current non-registered orthoptic workforce specifically in relation to roles, responsibilities, job titles, formal training opportunities and support, and locally developed protocols and competencies.

BIOS received a 35% response rate from 159 Trusts or Boards across England, Wales, Scotland, and Northern Ireland.

In services where there are no orthoptic support staff or where this workforce is not managed by orthoptists, then a non-response was expected. It is difficult to accurately determine the exact number of ophthalmology departments in the UK that employ support workers. Taking this into consideration, BIOS deemed this response rate to be satisfactory.

Questionnaire Results:

Banding

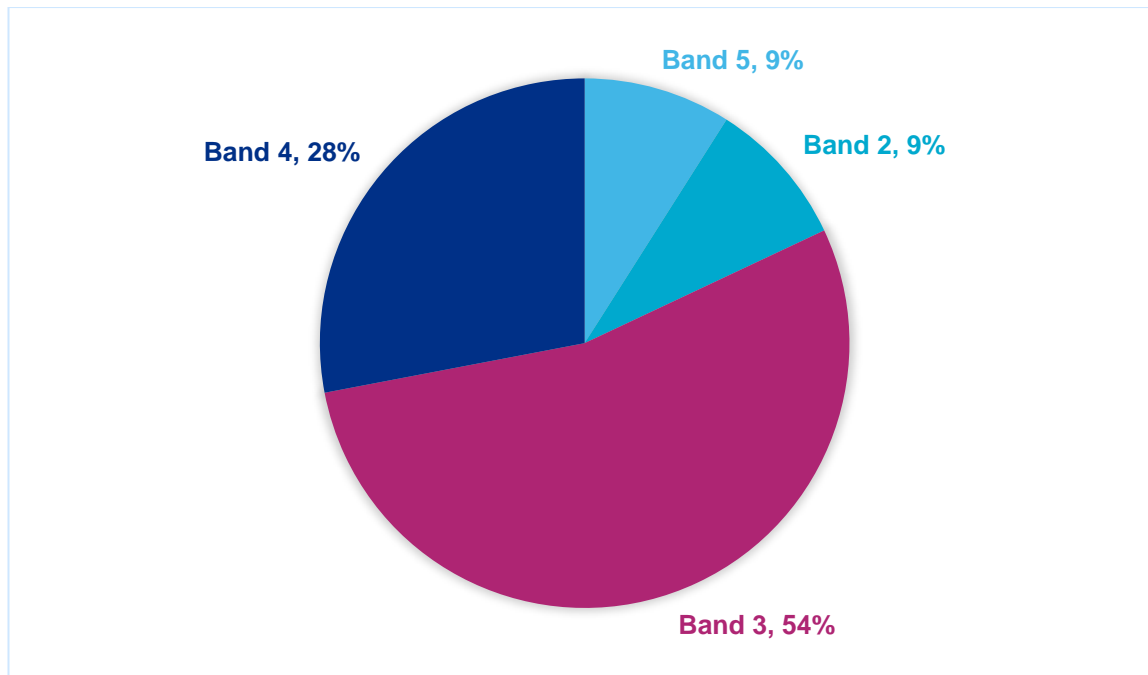
The results showed that the total number of orthoptic support workers from participating organisations was 179 (head count rather than whole time equivalent, WTE).

Dr Laura Snell and Dr Tom Grimwood from the Health and Social Knowledge exchange (HASKE) at the University of Cumbria, produced the [HASKE report](#), which suggested there were 14,679 AHP support staff in England alone, of which 348 WTE were from the orthoptic support workforce. Therefore, it is anticipated that the number of orthoptic non-registered workforce across the UK is much higher than demonstrated from this questionnaire.

BIOS noted that it is currently difficult to accurately map the size and scope of the support workforce due to the limited data available at both national and regional levels. As noted in section 3.2 of the HASKE report, orthoptists and their support workforce are not explicitly recorded through ESR data, making the task of identifying the numbers accurately even more difficult.

The BIOS questionnaire findings indicated that the current cohort of the support workforce are employed on Agenda for Change (AFC) banding levels 2 to 5, with **82%** being a band 3 or 4.

Figure 1: Distribution of bandings



Band 2 = **17 (9%)** Band 3 = **96 (54%)** Band 4 = **50 (28%)** Band 5 = **16 (9%)**

Job titles

The most common job titles:
Orthoptic Technician
Orthoptic Assistant
Orthoptic Helper
Orthoptic Healthcare Support worker
Ophthalmic Technician
Ophthalmic Assistant

Other job titles included: Vision Screener, Ophthalmic support worker, Glaucoma technician, and Photographer.

These findings are in agreement with the HASKE report, which found a significant variation in job titles amongst all AHP support workers, so this is not specific to orthoptics.

This lack of standardisation can result in two support workers having different titles despite their jobs being the same and conversely, they might have the same titles but undertake very different roles.

Tasks

There were 31 different clinical tasks/roles identified as being undertaken by the orthoptic support workforce, in addition to 10 non-clinical tasks.

These tasks ranged from core/generic ophthalmic skills for example, visual field testing and Ocular Coherence Tomography (OCT) scans of the retina, to more bespoke orthoptic skills such as paediatric vision testing and Lees chart assessments. There was also a wide range of sub-specialist involvement including, contact lens and glaucoma clinics and cataract pre-assessment clinics.

Many of the conditions now being seen in orthoptics/ophthalmology are ongoing, chronic conditions such as glaucoma and age-related macular degeneration. These also require significant imaging and investigations as part of the wider ophthalmic assessment, often performed by support staff.

The top 10 clinical tasks overall for bands 2-5	
1.	Visual field testing (VF)
2.	OCTs (Ocular Coherence Tomography)
3.	Vision testing adults
4.	Focimetry
5.	Fundus photography
6.	Dilation
7.	IOPs (IntraOcular Pressures)
8.	Biometry
9.	Colour vision testing
10	(equal) Vision screening and history taking

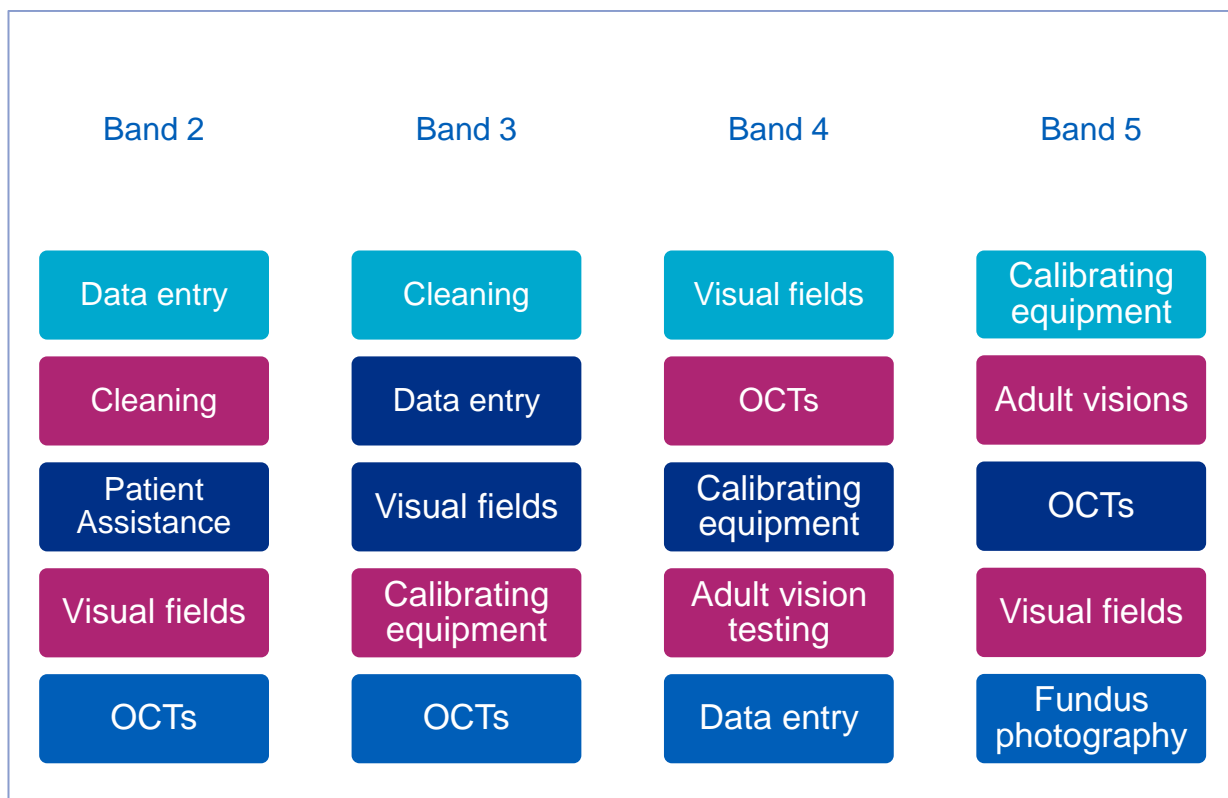
It was noted that there was an overlap and variation between roles and responsibilities for the different banding of staff.

The 5 most common clinical tasks performed overall, broken down by each band				
	Band 2	Band 3	Band 4	Band 5
VF (Visual field testing)	11%	78%	43%	16%
OCT(Ocular Coherence Tomography)	11%	70%	56%	22%
Vision testing adult	8%	68%	52%	20%
Focimetry	9%	73%	55%	23%
Fundus photography	5%	40%	60%	30%

The top 5 non-clinical tasks performed overall

- | | |
|----|------------------------|
| 1. | Cleaning |
| 2. | Data entry |
| 3. | Calibrating equipment |
| 4. | Patient assistance |
| 5. | Ordering/stock keeping |

The most performed clinical and non-clinical roles by individual bands (in order of most frequently performed)



The findings of the HASKE report noted the diverse scope of practice within each AHP support workforce; and highlighted the lack of consistency at present, in the roles and responsibilities of the support staff at the various bands.

It has been established that support workers typically undertake a very wide range of clinical and non-clinical or administrative duties which include assisting, supporting, monitoring, and maintaining (Lizarondo et al, 2010).

Training

The [health careers website](#) indicates that level 2 certificates, level 3 diplomas, and apprenticeships are available for some non-registered allied health support workforce roles, along with level 5 foundation degrees for assistant practitioners. However, these are not profession specific for the orthoptic workforce.

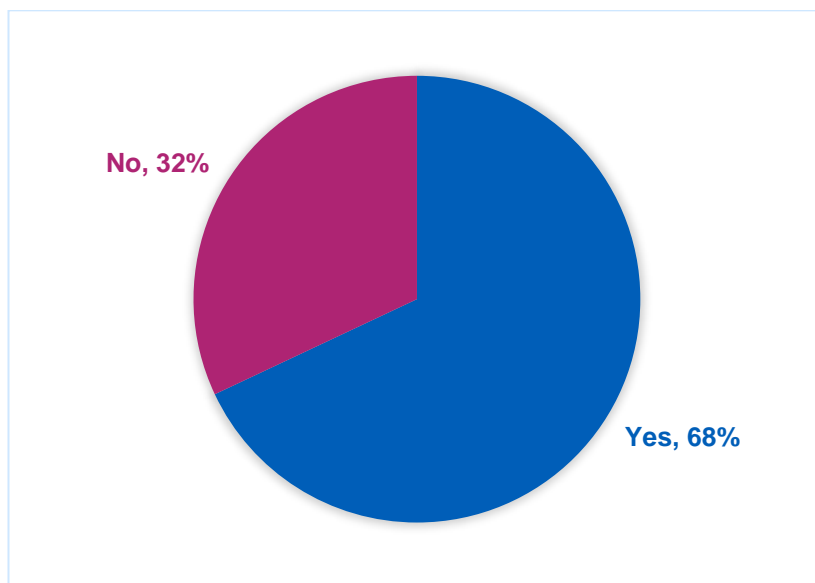
The survey indicated that:

- 16% of staff had undertaken (or currently are undertaking) apprenticeships
- 30% have local training/courses available
- 68.5% currently have local competencies/frameworks in place for this group of staff

The local competencies are developed and signed off by registered professionals, mainly registered orthoptists, specialist for a specific service, consultants, and nursing managers.

The findings showed that 68% of respondents were interested in a nationally recognised training course.

Figure 2: Interest in national course



Next steps for BIOS

Job descriptions and person specifications

BIOS will produce standardised job profiles (including titles), to support work to develop job profiles with the goal to have non-registered orthoptic profiles approved by the Job Evaluation Group (JEG) for national use.

BIOS have a large collection of job descriptions (JD) and person specifications (PS) which is used across services in the UK. These are useful reference materials and are available to share with managers wishing to develop new roles. JDs and PSs templates for Band 2,3,4 and 5 roles have been produced and will be made available on the [BIOS website](#).

The collection of JDs enabled the collection, collation, and analysis of the range of responsibilities given to non-registered staff. The collection of JDs and PSs have been sent to the national JEG who are currently reviewing them with the aim to establish the need for national profiles.

Educational and competency training

BIOS will work with Agored Cymru in Wales who have developed [support worker educational and competency training and framework](#). This was launched in Wales in 2015 with aims to extend this across the UK workforce to build a career path from Band 2 upwards. This framework sets out the requirements for training for essential skills, core competencies and skills relevant to the ophthalmology specific role as well as other roles within the NHS in Wales. Agored Cymru, the provider of the Welsh “[Fundamentals of Ophthalmology](#)” certificate have been approached to scope if it is possible to get the course Ofqual approved for the UK workforce to access the course (currently only approved by Qualification Wales).

BIOS are also aware of the wider [AHP Support Worker Competency, Education, and Career Development Framework](#). This contains an overarching framework and covers many non-clinical competencies, which BIOS will look to support the adoption of in the future.

Next steps for HEE

AHP Professional bodies

HEE will work with the AHP professional bodies to establish a climate that facilitates a cultural shift and greater understanding of the opportunities presented by the AHP support workforce.

HEE will work with AHP professional bodies on developing profession-specific resources to support optimisation of the support workforce.

Project Conclusions

Work completed by HEE looking at the national growth in the workforce has found that there has been a growth of 170% from 2015-2020 in the Orthoptic support workforce (from 131 in 2015 to 353 in 2020). Within the whole Orthoptic profession, in 2020 the support workforce made up 27% of the workforce, compared to just 13% in 2015, demonstrating the significant

growth of the support workforce within Orthoptics and further highlighting the need to support this valuable group of staff.

The HASKE report states that the tasks undertaken by the (wider) allied health support workforce can vary depending on their skills and qualifications, the specific department(s) in which they work and how they are managed within the healthcare team, which is reflected in the project findings for the Orthoptic support workforce.

In addition to this, the feedback from the online event and the questionnaire, demonstrated a desire for some clinical/profession-related competencies.

At all levels, staff should be appropriately educated, trained, and supervised. Support workers are crucial members of the Orthoptic profession and as such should have career development pathways. It is essential to support the capacity and capability of the Orthoptic support workforce in a safe and consistent way to allow for high quality of care.

To remove the unwarranted variations around roles and responsibilities, there is a need for clear guidance on such roles and responsibilities that the support workforce performs at each level. Ideally, such guidance should complement the [AHP support worker Competency Education and career Framework](#). This will ensure services maximise the contribution of the support workforce.

Recommendations

In the findings of the HASKE report, there was a particular emphasis on the development of niche skills to create sustainable learning for the support workers, which enables role development and fulfils the specific needs of their service.

In line with other AHPs, there is a need for further work to clarify how the non-registered workforce can work within and complement the wider orthoptic (and ophthalmology) workforce.

To further support the orthoptic (and ophthalmic) workforce, profession-specific training opportunities and bespoke clinical competencies are needed. The challenge is where and how we do this to best support education and career development of the orthoptic support workforce. Barriers and/or challenges, include the fact that orthoptics is a small profession with unique and bespoke skills, often not transferrable to the wider AHP professions. The profession currently has limited resources (both in terms of time and finance). So, any such development needs additional support to be successful.

Look at implementation of the [AHP Support Worker Competency, Education and Career Development Framework](#) within the profession.

In addition, HEE's national AHP support workforce programme will deliver:

- a readiness toolkit
- a series of Quick guides
- national procurement of level 3 senior healthcare support worker and level 5 assistant practitioner apprenticeships
- implementation webinars

BIOS will look at how best to implement these within the profession.

BIOS has provided some support worker [case studies](#) to HEE and will continue to contribute to future requests for orthoptic input:

BIOS is represented on the national steering group for the AHP support workforce programme.

Future work

- Review the current apprenticeship standards and identify if they can be adapted to be more suitable for orthoptic support workforce or include profession specific optional modules in both the Senior Health Care Support Worker level 3 Apprenticeship and Assistant Practitioner in Healthcare Level 5 apprenticeship.
- BIOS will work alongside other AHP professional bodies to deliver the HEE AHP workforce reform objectives to deliver and grow the orthoptic support workforce.
- Promote the benefits of BIOS associate membership for support workers.

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