COLLEGE OF OPTICIANS
OF ALBERTA

Standards of Practice

April 2023

INTRODUCTION **3**
COA MISSION, VISION, VALUES **4**
STANDARD 1: PROFESSIONALISM **6**
Compliance with Legislation 6
Collaboration with Colleagues 7
Working within Scope of Practice 7
Professional Identification 9
Professional Independence 9
STANDARD 2: COMPETENCE **10**
Participation in Continuing Competence Program 10
Working within Competence Limitations 13
Referral to an Appropriate Regulated Health Professional 13
STANDARD 3: PRACTICE MANAGEMENT **14**
Dispensing Facility 14
Workplace Safety and Infection Control 14
Privacy 15
Supervision of Students and Other Opticians 15
Third Party Agreements and Billing 17
Equipment Requirements 18
STANDARD 4: RECORD KEEPING **20**
Contents of Records 20
Record Retention and Destruction 25
Closing a Dispensing Facility or Retiring 26
Records in a Collaborative Practice 27
Privacy and Security of Records 27
STANDARD 5: COMMUNICATION **28**
Communication 28
Marketing and Promotion 28
Restricted Titles 28
Websites 29
STANDARD 6: DISPENSING OF OPTICAL DEVICES **30**
The Eyeglass Prescription 30
Dispensing or Re-fitting of Eyeglasses 31
Contact Lens Fitting 32
Contact Lens Continuing Care Assessments 34
Dispensing Contact Lenses 35
Verifying and Dispensing Eyeglasses 35
Verifying and Dispensing Low Vision Devices 36
STANDARD 7: REFRACTING **37**
Requirements for Refracting Opticians 37
Referrals 37
Prescriber Signatures 37
Refraction Records 38
STANDARD 8: PROFESSIONAL BOUNDARIES **39**
Definitions 39
Boundaries 40
Reporting 43

Standards refer to the minimum acceptable level of performance, qualifications, and professional practice required of opticians to ensure services that are ethical and safe for Albertans. This document also includes practice guidelines to be used in conjunction with professional judgement and critical thinking skills in the provision of care as regulated health professionals.

Introduction

Opticians in Alberta are regulated health professionals under the Health Professions Act (the "HPA") and must be registered with the College of Opticians of Alberta (the "COA") in order to provide services to the public. All registered members of the COA must meet competency based educational requirements and pass practical examinations related to dispensing (OSCE). Registration also requires that opticians keep their knowledge and skills current through continuing competency development.

The standards of Practice (the "Standards") for Alberta Opticians should be used in conjunction with the COA Code of Ethics and Bylaws, Opticians Profession Regulation (the "Regulations"), HPA, and other applicable legislation to offer the best possible eye-health services to the public in Alberta.

Opticians may work independently and/or as part of an inter-professional team to provide assistive, safe, and ethical services to the public. As the working environments for opticians are varied, the application of the Standards will depend on the type of dispensing facility an optician is working in.

As per the HPA practice statement, opticians do one or more of the following:

- Based on an optical prescription, design, supply, prepare, adjust, and dispense optical appliances and prostheses, including corrective lenses
- Promote eye health and the correct use of optical appliances and prostheses through education of consumers and regulated members
- Perform refractions and identify the need for corrective lenses
- Conduct or collaborate in optical related research
- When providing professional services referred to in this section, conduct assessments and make referrals where appropriate
- Provide restricted activities authorized by the regulations

In accordance with section 133 of the HPA, the COA is responsible for the development, establishment, and maintenance of the standards of opticianry in Alberta to ensure the quality of practice of the profession. Opticians are expected to know, understand, and comply with the Standards. The Standards are the minimum requirements for the profession and are

designed to:

- Provide guidance and performance expectations for how opticians will conduct themselves in their practice
- Act as a reference for the public and the profession for the expectation of quality of care
- Act as a reference to benchmark opticians' conduct during the review of professional conduct issues

The purpose of the layout chosen for these standards is to provide guidelines without being so detailed as to be restrictive in the opticians' application of professional judgement and critical thinking. Standards need to be reviewed and revised on a regular basis due to changes in technology and professional regulations.

For each standard listed, there is a basic statement of principle, followed by a more detailed application to provide a clearer understanding of best practices for the profession. Practice guidelines are to be used by the regulated members of the COA as a reference to specific standards.

COA Mission, Vision, Values

Mission
Our mission is to protect the public through proactive regulation of registered opticians. Our primary concern is patient health and safety. We protect the public by overseeing and regulating the opticianry profession in Alberta.

Vision
Our vision is that registered opticians offer quality patient care through safe, competent, and ethical practice. We strive to achieve our vision through accountability and accessibility to the public and a commitment to progressive regulatory governance.

Values
The COA is built on these six pillars of integrity:

- **Accountability** We hold ourselves accountable to the public and take responsibility for the practice of opticians in the province.
- **Ethicality** We take the ethical responsibilities of health professionals seriously and ensure our conduct and the conduct of the profession are held to high standard.
- **Fairness** We treat all stakeholders equally and with respect and are committed to operating with integrity, objectivity, and fair-mindedness.
- **Effectiveness** We constantly strive to improve our effectiveness as a regulatory body and monitor trends and best practices in regulation to achieve our strategic objectives.

- **Openness** We believe that fostering an open dialogue with stakeholders supports our performance and we encourage active participation in Council and committee meetings.
- **Transparency** We commit to transparency for the public, registrants, and other stakeholders and make information about our activities and operations publicly available.

Standard 1: Professionalism

An optician must act in a professional manner and meet the ethical and legal requirements of the profession.

Application of Standard 1

Compliance with Legislation

1.1 An optician must practice in accordance with all legislation that governs their practice and ensures patient safety.

Guideline for Standard 1.1

Legislation includes, but is not limited to:

- *Health Professions Act* (HPA) – Regulates health professions in Alberta. Note specifically Schedule 16.
- *Opticians Profession Regulation* (the "Regulations") – The Regulations address register categories, registration requirements, equivalent jurisdictions, substantial equivalence, and restricted titles.
- *Health Information Act* (HIA) – Sets out the rules for the collection, use, disclosure and protection of health information that is in the custody or under the control of a custodian. Opticians are considered custodians of health information in Alberta.
- *Personal Information Protection Act* (PIPA) – Alberta's private sector privacy law. It applies to provincial private sector organizations, businesses and, in some instances, to non-profit organizations for the protection of personal information and to provide a right of access to an individual's own personal information.
- *Health Professions Restricted Activity Regulation* – Restricted activities are high risk activities performed as part of providing a health service that requires specific knowledge and skills to be carried out safely. Restricted activities are not linked to any health profession and several regulated health professionals may perform a particular restricted activity.
- *Alberta Human Rights Act* – The purpose of the *Alberta Human Rights Act* is to ensure that all Albertans are offered an equal opportunity to earn a living, find a place to live, and enjoy services customarily available to the public without discrimination.
- COA Code of Ethics – Established to provide ethical guidance to Alberta opticians
- COA Standards of Practice (this document).

Collaboration with Colleagues

1.2 An optician must respect the dignity and professional status of and professional relationships with their colleagues. This includes other regulated and unregulated staff.

1.3 For the provision of appropriate services, an optician may release information to colleagues as permitted or required by legislation.

Guideline for Standard 1.3

The information that pertains to the release of health information is found in the Health Information Act. Section 35 of the HIA notes that custodians may release health information without the consent of a patient for several reasons. One such reason noted is *to a person who is responsible for providing continuing treatment and care to the individual.*

If another regulated health professional requests information on a patient that may assist the professional with providing continuing treatment or care, the optician may release that information without the consent of a patient. Requirements for documenting this release of information may be found in Standard 4, which addresses record keeping.

1.4 An optician must only provide services that are required to address the needs or reasonable requests of a patient.

1.5 An optician must only continue to provide services to a patient where such need is indicated and where the services continue to be effective.

Working within Scope of Practice

1.6 An optician must only practice within their scope and only perform restricted activities they are authorized and competent to perform in accordance with the HPA, the Health Professions Restricted Activity Regulation, and the COA Standards of Practice.

1.6.1 An optician must be registered with the College in accordance with the Regulations to perform the restricted activity of dispensing corrective lenses for the purpose of dispensing eyeglasses.

1.6.2 An optician must be registered with the College in accordance with the Regulations and the Health Professions Restricted Activity Regulation to perform the restricted activity of dispensing corrective lenses for the purpose of

dispensing contact lenses, and to use rose Bengal or ophthalmic preparations of lidocaine in combination with fluorescein to stain eye tissue.

1.6.3 An optician registered as a provisional optician may only perform the restricted activity of dispensing corrective lenses for the purpose of dispensing eyeglasses under supervision.

1.6.4 An optician who has applied for advanced authorization to dispense contact lenses and who has not yet completed the competency examination required by the Council ("provisional contact lens practitioner") may only perform the restricted activity of dispensing corrective lenses for the purpose of dispensing contact lenses and to use rose Bengal or ophthalmic preparations of lidocaine in combination with fluorescein to stain eye tissue under supervision.

1.6.5 An optician may supervise a student enrolled in an optician program, a provisional optician, or provisional contact lens practitioner in accordance with Standard 3.9.

Guideline to Standard 1.6

Refer to the Health Professions Restricted Activity Regulation to review the restricted activities opticians are authorized to perform.

The Health Professions Restricted Activity Regulation states that only regulated members of each health profession "may perform the restricted activities within the practice of the respective profession" as set out in the regulation. Regulated members of the College include Registered Opticians (RO), Registered Contact Lens Practitioners (RCLP), and provisional opticians working under the supervision of a registered professional.

The Regulation also specifies that regulated members must:

- Perform only those activities that they are authorized and competent to perform and that are appropriate to the practice of the profession
- Perform the restricted activity in accordance with the standards of practice of the profession
- Meet the requirements for demonstrating competence as established the by the Council

1.7 An optician is responsible for reporting incidents of unauthorized practice to the College of Opticians of Alberta.

Guideline to Standard 1.7
Unauthorized practice includes:

- Unregulated staff performing restricted activities
- Regulated health professionals working outside their competence or performing restricted activities they are not authorized to perform

Professional Identification

1.8 An optician must clearly communicate restricted titles and credentials.

Guideline to Standard 1.8
Refer to the Opticians Profession Regulation and Standard 5.8 for more information on restricted titles.

1.9 An optician is responsible for reporting any incidents of unauthorized use of the restricted titles to the College of Opticians of Alberta.

Guideline to Standard 1.9
Refer to the Opticians Profession Regulation and Standard 5.8 for more information on restricted titles.

1.10 An optician must display their registration documents as approved by council and as required in section 36(5) of the Health Professions Act at the dispensing facility they primarily practice in.

Professional Independence

1.11 An optician must not practice under conditions that compromise their professional independence, judgement, or integrity.

1.12 An optician must not impose upon others conditions that compromise their professional independence, judgement, or integrity.

Standard 2: Competence

An optician must maintain competence in order to best serve patients and protect the public.

Application of Standard 2

Participation in Continuing Competence Program

2.1 An optician registered on the general register or courtesy register must evaluate and update their knowledge and competency through mandatory participation in the college-approved Continuing Competence Program to ensure continuing competency.

2.1.1 An optician must complete Continuing Competence Program requirements in each successive three-year cycle, which begins on the commencement date established by the Registrar.

2.1.2 An optician must complete the following mandatory Continuing Competence Program requirements as approved by the Council:

2.1.2.1 Competency assessment(s) for eyeglass, contact lens, and refraction assigned based on area of practice,

2.1.2.2 A learning plan to log and reflect upon continuing competence activities.

2.1.3 An optician must, upon the request of the Registrar, submit supporting continuing competence documentation for up to five years following the end of the 3-year cycle to which the documents relate.

2.1.4 An optician must adhere to any conditions imposed by the Registration and Competence Committee for failure to complete the requirements set out in Standard 2.1. In accordance with the HPA, this may include but is not limited to:

2.1.4.1 Practicing under supervision,

2.1.4.2 Limiting practice to specified professional services or areas of practice,

2.1.4.3 Refraining from performing specified restricted activities,

2.1.4.4 Refraining from engaging in sole practice,

2.1.4.5 Submitting to additional practice visits or other assessments,

2.1.4.6 Reporting to the Registrar on specified matters on specified dates,

2.1.4.7 Practicing under a permit that is valid only for a specified purpose and time,

2.1.4.8 Refraining from supervising students, other members, or other health professionals, and

2.1.4.9 Completing continuing competence requirements within a specified time.

2.1.5 An optician must participate in periodic audits carried out by the Registration and Competence Committee to verify compliance with program requirements as approved by the Council:

2.1.5.1 An optician must submit to the Registration and Competence Committee any supporting information or documentation requested as part of the audit process.

2.1.6 As part of the Continuing Competence Program, an optician must participate in practice visits assigned by the Registration and Competence Committee:

2.1.6.1 An optician must submit to the practice reviewers engaged by the Registration and Competence Committee any supporting information or documentation requested as part of the practice visit process.

2.1.6.2 An optician must provide practice reviewers with access to the dispensary in which they practice for the purpose of observing practice procedures and the practice environment.

2.1.6.3 An optician must comply with one or more of the following within a period of time specified by the Registration and Competence

Committee if the results of the practice visit are unsatisfactory:

2.1.6.3.1 Correct any deficiencies identified in the practice visit,

2.1.6.3.2 Complete specific continuing competence requirements or professional development activities within a specified period of time,

2.1.6.3.3 Complete examinations, testing, assessments, training, work experience, education, or counselling,

2.1.6.3.4 Practice under the supervision of another regulated member for a specified period of time,

2.1.6.3.5 Limit their practice to specified professional services, restricted activities, or practice settings,

2.1.6.3.6 Refrain from practicing specified professional services, restricted activities, or in specified practice settings,

2.1.6.3.7 Refrain from supervising other opticians, students, or other persons providing professional services as directed by the Registration and Competence Committee,

2.1.6.3.8 Report to the Registration and Competence Committee on specified matters on specified dates.

2.2 An optician must maintain current knowledge of legislation, standards, guidelines and policies.

2.3 An optician is responsible for maintaining their competence.

Guideline for Standard 2.3
An optician must remain aware of and conversant with new techniques, technology and equipment in the provision of products and services for the public.

Working within Competence Limitations

2.4 An optician must only perform tasks which they have sufficient knowledge, skill and judgement to perform competently and safely.

Guideline for Standard 2.4

As an example, if a contact lens practitioner has limited or no experience fitting scleral contact lenses, they should only do so if working in conjunction with another regulated health professional who is authorized and has these skills and experience.

Referral to an Appropriate Regulated Health Professional

2.5 Referrals must be made to other regulated health professionals when the condition or status of a patient falls outside an optician's scope of practice, education or competence.

Standard 3: Practice Management

An optician must understand the ethical and legal clinical requirements of professional practice.

Application of Standard 3

Dispensing Facility

3.1 In order to provide services to patients, an optician must own, be employed in or have access to a dispensing facility, which may include a mobile service.

3.2 An optician must display their registration documents as approved by council and as required in section 36(5) of the HPA, at the dispensing facility they primarily practice in.

Workplace Safety and Infection Control

3.3 An optician must adhere to the Alberta Occupational Health and Safety Act, Regulation and Code to ensure workplace safety.

Guidelines for Standard 3.3
https://www.alberta.ca/ohs-act-regulation-code.aspx/

3.4 An optician must take reasonable and appropriate measure to minimize the risk of contamination and subsequent transmission of infectious agents within their dispensing facility to assure health and safety for both patients and staff.

Guidelines for Standard 3.4
An optician must always follow routine practices and precautions including hand washing and appropriate waste disposal. Protocols should be put into place to outline frequency and specific responsibility for cleaning and disinfection of the dispensing facility and instruments.

Additional resources and information for COA regulated members regarding safety and infection control include:

- **Government of Canada Resources**
  - Hand Hygiene Practices in Health Care Settings
  - Routine Practices and Additional Precautions for Preventing the Transmission of Infection in Healthcare Settings
- **Alberta Health Services Resources**
  - Infection Prevention and Control (Includes: resource manuals, routine practices and best practice recommendations, hand hygiene, equipment

cleaning, and education and training)

3.5 An optician must have access to hot and cold running water, or as in the case of a mobile facility, some alternative option for hand hygiene in the dispensing facility.

Guideline for Standard 3.5
An example of an alternative option for hand hygiene would be using alcohol-based hand rub (ABHR).

Privacy

3.6 An optician must perform services in an area of the dispensing facility with consideration to the privacy of a patient and to a patient's confidentiality.

3.7 An optician must ensure reasonable steps have been taken to securely store patient records in the dispensing facility.

Guideline for Standard 3.7
For more information about records management, refer to Standard 4.

3.8 An optician must know who the privacy officer is in the dispensing facility.

Guideline for Standard 3.8
Every dispensing facility must have a privacy officer. A privacy officer means a person designated by an organization to routinely handle health information, and to develop, implement, and oversee the organization's compliance with legislations including that noted in the Health Information Act.

- All staff should know who that person is and how to contact them
- Customers have a right to this information and must be provided with it upon request

Supervision of Students and Other Opticians

3.9 An optician may supervise a student enrolled in an optician training program, a provisional optician, an optician subject to a condition of supervision, or an optician registered on the courtesy register who must practice under supervision if the optician is authorized to perform the restricted activity being supervised in accordance with Standard 1.6.

3.9.1 An optician who consents to serve as a supervisor in accordance with 3.9.2. must be:

3.9.1.1 Present in the room and available to assist the student or optician being supervised, or

3.9.1.2 On-site and available for consultation if the optician is of the opinion that the student or optician being supervised is able to safely and competently perform the restricted activity being performed.

3.9.2 An optician who consents to serve as a supervisor in accordance with Standard 3.9 must:

3.9.2.1 Ensure that the student or optician being supervised is familiar with, and practices in accordance with, the Standards,

3.9.2.2 Notify the Registrar if the student or optician being supervised is no longer working under their supervision.

Guideline for Standard 3.9

An optician acting as the supervisor of a student, provisional optician, provisional contact lens practitioner, or another optician or contact lens practitioner takes responsibility for all duties performed by that student or practitioner being supervised and is required to train them to the best of their ability.

3.10 As a regulated health professional, an optician may direct unregulated staff to assist in the dispensing facility by performing unrestricted activities under their direction.

Guideline for Standard 3.10

This may include but is not limited to activities such as:

- Answering phones and booking appointments
- Assisting a patient in choosing a frame
- Handing out product put aside for a patient by a regulated health professional
- Selling non-prescription sunglasses, ready-made readers or other products including contact lens solutions, lens cleaners, or accessories
- Performing financial transactions or accounting

Unregulated staff may also be directed to perform these activities by another regulated health professional, including an optometrist or ophthalmologist.

Third Party Agreements and Billing

3.11 An optician must ensure all fees are explained to patients and that they have highlighted where contracts do not cover complete costs.

Guideline for Standard 3.11

Any differences between the posted prices and the amounts covered by a third-party contract are to be accepted by a patient prior to the provision of any service related to the dispensing of an optical device.

3.12 An optician who chooses to opt in or participate in third party contracts is responsible for understanding and adhering to all agreements.

3.13 An optician who chooses to opt out of agreements completed by the Negotiations Committee for the College of Opticians of Alberta must advise patients prior to the ordering of any optical devices.

3.14 An optician who chooses to opt out of an agreement completed by the Negotiations Committee for the College of Opticians of Alberta must opt out of the entire agreement.

Guideline for Standard 3.14

An optician may not just do the lucrative jobs and refuse those that will cost the optician money. As an example, an optician could not decide to only do single vision jobs under the Alberta Human Services Contract, but not accept those patients who require multi-focal lenses.

3.15 An optician may sign insurance forms or submit insurance claims on behalf of the patient to assist a patient in ethically using their medical benefits.

Guideline for Standard 3.15

An optician must ensure any forms or submissions accurately reflect the products or services provided, including but not limited to:

- the patient for whom the product or service was provided,
- the amount billed (this must accurately reflect any receipts issued and include only products or services that have been provided), and
- dates of service

An optician must also inform the insurance company if a product that they submitted to the insurance company on behalf of the patient has been returned.

Equipment Requirements

3.16 An optician working in a dispensing facility must have access to ophthalmic instrumentation appropriate to the services that are offered at that facility.

Guideline for Standard 3.16

The minimum requirements for equipment for various services are as follows:

Dispensing Eyeglasses

- Lensmeter or other device for measuring the power of a lens
- Device for measuring the pupillary distance of a patient (pupilometer or pd ruler and penlight)
- Device for measuring the segment or fitting cross height for multifocal lenses
- Lens gauge/clock
- PD ruler
- Thickness calipers
- Tool to measure vertex distance
- Adjustment and bench tools
- Frame heater
- Visual acuity charts
- Tolerance chart
- Frame and lens cleaning products

Low Vision Assessment

- Near diagnostic magnification aids
- Distance diagnostic magnification aids
- Distance and near low vision charts

The standard magnification powers to determine a patient's near needs are 2X, 4X and 6X. For distance, patients usually require assistance with an intermediate distance, TV distance and infinity distance.

Contact Lens Fitting

- An instrument for measuring corneal curvature (keratometer/ophthalmometer)
- Slit lamp biomicroscope
- Lensmeter
- Access to suitable diagnostic trial contact lenses
- Disinfection equipment/solution
- Appropriate solutions, currently dated, for caring for contact lenses
- Visual acuity charts

If fitting **rigid** contact lenses, the dispensing facility must also have:

- Radiuscope or another tool to measure base curve
- Means to assess surface and edges of rigid lenses
- Trial lenses, or access to trial lenses for rigid lens fitting
- Other as required for level of services being offered
- Sodium fluorescein

3.17 An optician is responsible for ensuring that all equipment is used, disinfected, maintained according to the manufacturer's instructions, and in good, working condition.

Guideline for Standard 3.17

Additional resources and information regarding equipment and instrument maintenance and best practices can be found at Alberta Health Services Infection Prevention and Control.

Standard 4: Record Keeping

An optician must compose and retain complete, accurate and legible patient records.

Application of Standard 4

Contents of Records

4.1 Under the custodianship of an optician, patient records must include all information appropriate to the products and services being provided.

Guideline for Standard 4.1

All patient records must include:

- *Patient Demographics*
  - Patient's name, address, and telephone number if available
  - Patient identifier (example: date of birth)
  - Other information as required
- *Prescription*
  - Name/identifier of the prescriber,
  - Patient's name,
  - Patient's complete prescription, and
  - Date of examination, or
  - Prescription duplication information
- *Other*
  - Date of each service/transaction and what each transaction included
  - Identifier for the optician who performed each service/transaction or supervised a student performing the service
  - Record of any release of information to any party, including the patient or another regulated health profession (including date, reason, who released to, and authorization from the patient if needed)
  - Record of any payments including third party billing

Additional for eyeglass records

- Appropriate measurements for eyeglasses including, but not limited to:
  - Optical center placement horizontally and vertically
  - Placement of bifocal/multifocal height
  - Base curvature of lens
  - Vertex distance
- Frame specifications including manufacturer, model, size, color
- Lens specifications including type of lens, brand, and safety information if applicable
- All coatings or lens treatments

- Specific instructions given to a patient regarding the use, care, or follow up
- Record of follow up visits addressing visual problems or refitting as needed

Additional for low vision records

- A low vision assessment if completed (this may replace a prescription depending on patient)
- Appropriate measurements for any custom appliances
- Details of any handheld low vision devices including magnifiers, including:
    - Power
    - Model
    - Manufacturer
- Filter specifications (if recommended for contrast sensitivity)
- Discussions related to:
    - Expectations
    - Limitations
    - Customary adaptation period
    - Maintenance requirement
- Recommended follow-up schedule

Additional for refraction records

- Patient consent form
- Refraction results
- Name of prescriber
- Signature of prescriber
- Referral information as needed

Additional for contact lens dispensing records

- Contact lens specifications including:
    - Patient's name
    - Name and license number of the practitioner who performed the fit
    - Contact information for the practitioner who performed the fit
    - Date issued
    - Expiration date (This is left to the professional judgement of the practitioner performing the fit based on their findings during the fitting and should include a reason for the expiration date)
    - Brand name, base curve, diameter, and power of the contact lens(es)
    - Replacement schedule
    - Recommended contact lens solution
    - Any other specifications the practitioner who performs the fit deems necessary based on the prescription, type of lens, condition of the patient, etc.

Additional for contact lens fitting records

- Patient ocular, health, and family history
- Appropriate measurements and observations for contact lenses including, but not limited to:
    - Visual acuity
    - Keratometer/ophthalmometer readings
    - Observations from a slit lamp/biomicroscope evaluation including pathological or physiological anomalies
    - Bifocal/multifocal heights
    - Tear quality (TBUT)
    - Pupil size
    - Fissure size
    - Horizontal visible iris diameter
- All diagnostic contact lens specification including base curve, diameter, power, lens type (manufacturer and color if applicable)
- Assessment of diagnostic lens including:
    - Diagnostic lens appearance and movement
    - Comfort with lens on the eye
    - Monocular and binocular visual acuity
    - Any changes being made to initial diagnostic lens
- Instructions and recommendations pertaining to:
    - Insertion and removal
    - Lens care
    - Solution use
    - Replacement schedule and wear time
    - Normal and abnormal adaptive symptoms
    - Contraindications to lens use
    - How and when to access emergency care
- Expected date of follow up
- Any other evaluations performed, and all recommendations provided to a patient
- Once all services required to dispense contact lenses have been completed, the patient record should include complete contact lens specifications. Contact lens specifications must include:
    - Patient's name
    - Name and license number of the optician who performs the fit
    - Contact information for optician who performs the fit
    - Date issued
    - Expiration date (This is left to the professional judgement of the optician who performs the fit based on their findings during the fitting)
    - Brand name, base curve, diameter, and power of the contact lens(es)

        - Replacement schedule
        - Recommended contact lens solution
        - Any other specifications the optician who performs the fit deems necessary based on the prescription, type of lens, condition of the patient, etc.

Additional for contact lens follow-up records

- Changes to patient history
- Changes in eye health
- Recommendations regarding the time elapsed since a patient last met with an ophthalmologist, optometrist, or optician in person
- Assessment including but not limited to:
    - Lens appearance, fit and movement
    - Wearing time
    - Comfort with lenses in place
    - Corneal clarity and integrity
    - Comparison of corneal curvature
    - Conjunctival and lid appearance
    - Tear characteristics
    - Visual acuity
    - Compliance with past recommendations on lens handling, lens care, and replacement
- A management plan for any problems identified and for future care
- Other factors or discussions relevant to the continued use of contact lenses by the patient
- Changes made to contact lens specifications as a result of the assessment. Contact lens specifications must include:
    - Patient's name
    - Name and license number of the optician who performs the fit
    - Contact information for optician who performs the fit
    - Date issued
    - Expiration date (This is left to the professional judgement of the optician who performs the fit based on their findings during the fitting)
    - Brand name, base curve, diameter, and power of the contact lens(es)
    - Replacement schedule
    - Recommended contact lens solution
    - Any other specifications the optician who performs the fit deems necessary based on the prescription, type of lens, condition of the patient, etc.

4.2 An optician must only collect personal or health information that is necessary for the product or service being provided.

4.3 An optician must amend personal and health information in patient records as necessary.

Guideline for Standard 4.3
Corrections to paper records may be done by crossing through the text and writing in the correction, the reason for the correction (if necessary) and the date and initials for the person making the correction.

For electronic records, corrections may be made by detailing the correction, the reason (if necessary), the date and the identifier for the person making the correction.

4.4 An optician must provide patients access to their records in accordance with legislation.

Guideline for Standard 4.4
The physical records belong to the optician, but a patient in entitled to any of the information contained within their file, except under very specific circumstances outlined in the HIA. If a patient asks for their file, the optician will provide a copy for the patient but keep the original.

4.5 An optician must disclose information from patient records appropriately, in accordance with legislation.

Guideline for Standard 4.5
Information must be disclosed with the written consent of a patient. There are also some situations in which opticians can disclose health information without written consent.

Opticians may disclose personal health information of a patient to another health custodian within the circle of care without the authorization of that patient for specific health care purposes. An example could be an optician at another dispensing facility requesting contact lens specifications to offer continuing care to a patient.

When disclosing information, an optician must log or note:

- The name of the person to whom information was disclosed,

- Date,
- Purpose of disclosure, and
- Description of information disclosed.

The *Health Information Act* Sections 35-45 allows for the disclosure of health information without consent outside of the circle of care in some situations including:

- Individuals or authorized representatives of individuals (parents or other caretakers),
- Persons acting in the best interest of an incompetent individual,
- Health professional bodies, auditors, and quality assurance committees,
- Police when investigating a life-threatening injury to the individual,
- Disclosures required by other legislation (courts and subpoenas), or
- To any person if the disclosure will avert or minimize a risk of harm to the health and safety of a minor or an imminent danger to the health and safety of any person.

4.6 When working in conjunction with other regulated health professionals, an optician must identify what contribution they have made to the record as well as their name and/or license number.

Guideline for Standard 4.6

This would apply for an optician working in a dispensing facility with an optometrist, ophthalmologist, or other regulated health professional. It should be identifiable which custodian is responsible for which services. Best practice would have additions on a new sheet of paper.

Record Retention and Destruction

4.7 An optician must retain all patient records for a minimum of ten years from date of last entry.

4.8 An optician must destroy records containing personal or health information in a secure manner.

Guideline for Standard 4.8

Section 60(2) of the *Health Information Act* states that in order to prevent unauthorized access to or disclosure of health information, custodians need to consider proper disposal of records. Opticians should have a systematic plan for handling this. A scheduled and monitored plan will allow custodians to know what information was destroyed and when. An approved process for the destruction of

records after a set time shows consistency and that the dispensing facility has evaluated their policies and procedures related to health information.

Shredding is the best way to dispose of paper and other hard copy media which may contain personal or health information. Opticians need to ensure that a shredding company can offer secure destruction of the material. For computer equipment that houses personal and health information, computer hard drives should be professionally wiped clean prior to being disposed of or sold.

Closing a Dispensing Facility or Retiring

4.9 If a dispensing facility closes, an optician is responsible for ensuring that any records under their custodianship are not abandoned.

Guideline for Standard 4.9

When a dispensing facility closes it is the optician's responsibility to ensure that the records or files are securely stored for a minimum of ten years from date of last entry.

4.10 If an optician retires or leaves a job, they are responsible for ensuring that records under their custodianship are not abandoned.

Guideline for Standard 4.10

If retiring, an optician must transfer their records or files to another optician or other successor custodian including an optometrist. If leaving a job, an optician must maintain the files or transfer their records or files to another optician or other successor custodian including an optometrist.

4.11 When records have been transferred, an optician must take reasonable steps to notify patients as to where their health information is stored.

Guideline for Standard 4.11

This could be achieved by placing an ad in a local newspaper, sending a letter or email, and/or posting a sign on the door.

4.12 When records have been transferred, an optician must notify the Alberta College and Association of Opticians as to the location of the records containing their patients' health information.

Guideline for Standard 4.12

An optician can call or send written notification to the COA so that they know how to help patients if an inquiry or request for access to records is made.

Records in a Collaborative Practice

4.13 If an optician has an optometrist working in a dispensing facility they own, the optometrist is the custodian of the optometric records (which may include contact lens records if the optometrist did the fitting) and the optician is the custodian of eyeglass records and contact lens records completed by the optician.

4.14 An optician who discloses or contributes information to a health record (paper or electronic) operated by another custodian should have an information sharing agreement in place.

Guideline to Standard 4.14

An information sharing agreement (ISA) is recommended because the HIA dictates that custodians of health information have an obligation to protect the integrity, confidentiality, and accuracy of patient information and to only use or disclose that information under certain conditions and to certain individuals. Opticians are custodians under the HIA, as are optometrists and ophthalmologists.

In the case of an optician working in an optometrist owned dispensing facility, this would be different. In this case the optician is an affiliate of the optometrist who is the custodian.

Privacy and Security of Records

4.15 An optician must have adequate safeguards in place to protect the security, integrity, and confidentiality of the personal and health information of their patients. Safeguards must protect against loss, unauthorized access or use of personal and health information contained in patient records.

Standard 5: Communication

An optician must conduct all modes and methods of communication in a clear, accurate, respectful, effective, and unambiguous manner.

Application of Standard 5

Communication

5.1 When communicating with staff, patients, legal guardians, caregivers and other regulated health professionals, an optician must be clear, respectful, effective, and professional.

5.2 An optician must use appropriate language to ensure that a patient, legal guardian, or caregiver understands any recommendations, products, and services.

5.3 While a retail environment allows for refusal of service, an optician must not refuse service based upon reasons covered in the *Alberta Human Rights Act.*

5.4 An optician must respect laws and ethical boundaries in all communications.

Marketing and Promotion

5.5 An optician must ensure all marketing and promotional material is clear, accurate, truthful, complete, and not misleading.

Guideline for Standard 5.5

Marketing and promotion by an optician or on behalf of an optician must:

- be in the best interest of a patient,
- make claims only about those skills authorized by the College,
- be in good taste,
- accurately represent the value of the product or service being offered,
- maintain the integrity of the profession, and
- not claim superiority or superior results over another regulated health professional.

5.6 Fees for any products or services provided by an optician must not be misleading and must be explained to patients in advance.

Restricted Titles

5.7 Only an optician who is a regulated member in good standing with the College of Opticians of Alberta may use the titles as noted in Schedule 16 of the HPA and the

Optician Profession Regulation.

Guidelines for Standard 5.7
Any title, if it includes the word optician is restricted and may only be used by regulated members of the profession.

The titles which are restricted include:

- Optician
- Ophthalmic dispenser
- Optical dispenser
- Contact lens fitter
- Contact lens practitioner
- Contact lens dispenser
- R.O.
- R.C.L.P.
- Provisional optician

An exception would be a student of the profession registered with a training institution approved by council. These students could use the above restricted titles with the word student before the ones that are applicable.

Websites

5.8 An optician who uses or is affiliated with a website or other technology interface as part of their opticianry practice must ensure that the interface meets legislated requirements and the Standards.

Guidelines for Standard 5.8
Including but not limited to:

- Complying with all applicable standards including those for marketing and promotion, privacy of personal and health information, records retention, and communication.
- Identifying the name and or license number of any optician who interacts with a patient through the website or interface.

Standard 6: Dispensing of Optical Devices

Opticians must dispense optical devices appropriate to a patient.

Application of Standard 6

The Eyeglass Prescription

6.1 An optician must use a valid eyeglass prescription in order to fabricate and dispense optical devices.

Guideline for Standard 6.1

For a prescription to be valid, it must be a duplication of a patient's existing glasses or contain the following information:

- The name/identifier of the prescriber
- The patient's name
- The patient's prescription
- The date of examination

If duplicating existing glasses, it is to be noted on the patient's record that it is a duplication, and the optician should confirm the suitability of the prescription to a patient.

6.2 An optician has a duty to inform their patients of the importance of regular eye examinations and recommend regular testing as appropriate.

Guideline for Standard 6.2

An optician must use their professional judgement, combined with patient history and employer policies when implementing this standard.

The Canadian Ophthalmological Society (COS) has a series of recommendations regarding the frequency of eye exams that includes:

An initial eye exam at six months old helps with early detection of vision problems that can contribute to developmental delays, educational setbacks and behavioural problems in children having difficulty seeing properly.

Healthy adults who do not notice anything wrong with their eyes should see an eye doctor according to this schedule:

- *Age 19 to 40: at least every 10 years*
- *Age 41 to 55: at least every 5 years*

- *Age 56 to 65: at least every 3 years*
- *Over age 65: at least every 2 years Canadians at a higher risk include:*
- *People with diabetes, thyroid disease, rheumatological diseases including lupus.*
- *People of African or Hispanic descent*
- *Anyone with a tendency toward high intraocular pressure*
- *Anyone with a family history of glaucoma, cataract, macular degeneration, or retinal detachment*
- *Anyone with a previous eye injury*
- *People taking certain medications (Plaquenil, Prednisone, Ethambutol are just a few of the medications that can affect the eyes)*
- *People already experiencing poor eyesight from any other causes including cataracts, glaucoma, macular degeneration, etc.*

These people should see an eye doctor according to this schedule:

- *Over age 40: at least every 3 years*
- *Over age 50: at least every 2 years*
- *Over age 60: at least once a year*

6.3 An optician may fill prescriptions from out of province or out of country in accordance with professional judgement.

Guideline for Standard 6.3

An optician may use their professional judgement, but the prescription must meet the requirements noted in the guideline for Standard 6.1.

Dispensing or Re-fitting of Eyeglasses

6.4 When dispensing eyeglasses, an optician must be authorized to perform this service, take all necessary measurements required for the eyeglasses, and provide appropriate professional services within their scope of practice.

Guideline for Standard 6.4

When dispensing eyeglasses, an optician must be a registered member in good standing and should, using best practices, routinely do the following:

- Evaluate every optical prescription and advise patients of suitability of lenses and frames with the knowledge of occupational needs, hobbies, and cosmetics.
- Evaluate every optical prescription and advise patient of suitability of lenses and frames with knowledge of optics and geometric physics applied to the

product purchased.

- Advise patients of the consequences of changes in their prescription regarding expectation for new eyewear purchased.
- Analyze changes in prescriptions regarding medical complications indicated.
- Endeavour to meet a patient's needs and expectations regarding safety, aesthetics, and price.
- Take all required and other appropriate measurements related to eyeglasses and note them accordingly on a patient's record as per Standard 4.
- Provide training and information as needed about use, care, and follow up of optical devices.
- Provide follow up care including adjustment and advice to make wear easier and maintenance more effective.
- Be able to recall or locate applicable information in detail on the patients' eyeglasses.
- Recognize anomalies in prescription and wearing success and refer a patient to another regulated health professional if required.
- Evaluate every pair of eyeglasses to verify the accuracy of the completed product to ensure they are as ordered and within tolerance (the COA defers to the American National Standards Institute [ANSI] ANSI Z80.1, Prescription Ophthalmic Lenses – Recommendations).
- In the case of safety eyewear, adhere to appropriate safety standards (the COA defers to the American National Standards Institute [ANSI] ANSI Z87.1, American National Standard for Occupational and Educational Personal Eye and Face Protection Devices).
- Ensure that the practice environment has appropriate tools and equipment as per Standard 3.
- Ensure that patient records are complete as per Standard 4.

Contact Lens Fitting

6.5 When completing a contact lens fitting, an optician must be authorized to perform this service, take all necessary measurements required for the type of contact lenses, and provide appropriate professional services within their scope of practice.

Guideline for Standard 6.5

When an optician is completing a contact lens fitting, the optician must be a registered member in good standing on the contact lens register and should, using best practices, routinely do the following:

- Take a patient history and determine suitability of a patient for contact lens wear including:
    - The health of the cornea, conjunctiva and lids, and integrity of the tear

layer
    - Baseline visual acuity, corneal curvature, clarity, and integrity
    - Relevant environmental, occupational, avocational, and systemic health factors
- Counsel a patient about the effects that contact lens wear may have on the health of the eye including advantages, risks of complications and limitation of contact lens wear.
- Determine what lenses are appropriate for a patient and evaluate the initial contact lenses on a patient's eyes. Subsequent modifications of the contact lens parameters must be made as required based upon factors that may include, but are not limited to:
    - Lens appearance and fitting
    - Comfort with diagnostic lens in place
    - Corneal clarity and integrity
    - Conjunctival and lid appearance
    - Tear characteristics
    - Monocular and binocular visual acuity
    - Replacement schedule
- Verify the accuracy of the contact lenses to ensure they are as ordered and within tolerance.
- Provide and record any relevant details of instructions or recommendations to a patient with respect to:
    - Hygiene
    - Lens insertion and removal
    - Lens care
    - Recommended wearing times and replacement schedules
    - Normal and abnormal adaptive symptoms
    - Contraindications to lens use
    - Progress evaluations
    - How and when to access emergency care
- Develop an appropriate ongoing patient management plan. This includes determining when a patient should return for an assessment of lens performance, adaptation, and compliance; for contact lens refills or replacement; or for further evaluation.
- Record the results of all evaluations performed and all recommendations provided to a patient.
- Once all services required to dispense contact lenses have been completed, the patient record should include complete contact lens specifications. Contact lens specifications mustinclude:
    - Patient's name

- Name and license number of the optician who performs the fit
- Contact information for optician who performs the fit
- Date issued
- Expiration date (This is left to the professional judgement of the optician who performs the fit based on their findings during the fitting)
- Brand name, base curve, diameter, and power of the contact lens(es)
- Replacement schedule
- Recommended contact lens solution
- Any other specifications the optician who performs the fit deems necessary based on the prescription, type of lens, condition of the patient, etc.

Contact Lens Continuing Care Assessments

6.6 When providing continuing care to assess an established contact lens patient, an optician must be authorized to perform this service, complete all assessments required for the type of contact lenses, and provide appropriate professional services within their scope of practice.

Guideline for Standard 6.6

An optician must be a registered member in good standing and should, using best practices, routinely do the following:

- Review the ongoing patient management plan, considering such factors as:
  - Any changes in the patient's eye health or other relevant circumstances
  - Time elapsed since the patient last met with an optician, optometrist, or ophthalmologist in person
  - Changes to occupation or other needs
- Review as appropriate:
  - The age, wearing, and replacement schedule of current contact lenses
  - The efficacy of the current lens care regime
  - Any adverse reactions associated with contact lens wear
- Assess a patient to determine relevant factors, including:
  - Lens appearance and fit
  - Wearing time
  - Comfort with lenses in place
  - Corneal clarity and integrity
  - Stable corneal curvature
  - Conjunctival and lid appearance
  - Tear characteristics
  - Visual acuity
  - Compliance with recommendations on lens handling, care, and

replacement

- Provide and implement management plans for any issues identified, making recommendations for further care and counsel a patient as necessary.
- Ensure the contact lens specifications are up to date on the patient record

Dispensing Contact Lenses

6.7 When dispensing contact lenses to any patient, an optician must be authorized to perform this service.

Guideline for Standard 6.7

An optician must be a registered member in good standing on the contact lens register.

When a patient requests contact lenses be dispensed by the optician who performed their contact lens fitting, that optician must take responsibility for the accuracy of the fitting and the resultant contact lenses dispensed.

When a patient requests contact lenses be dispensed by an optician who did not perform their contact lens fitting, that optician may use contact lens specifications provided by a qualified ophthalmologist, optometrist, or optician to dispense the contact lenses. That optician must take responsibility for the accuracy of the contact lenses dispensed in relation to the contact lens specifications.

An optician may decline to dispense contact lenses based on contact lens specifications from a qualified ophthalmologist, optometrist, or optician if their professional judgement deems any aspect of the specifications to be inappropriate for the patient.

Best practice would be for the dispensing optician to consult the prescribing ophthalmologist, optometrist, or optician to ensure that there is no relevant information in the patient record that may contravene the dispensing based on the contact lens specifications provided.

When dispensing contact lenses based on the contact lens specifications from another regulated health professional an optician must ensure patient records are complete as per Standard 4 of this document.

Verifying and Dispensing Eyeglasses

6.8 At the time of dispensing, an optician must verify the suitability of the opticaldevice.

Guideline for Standard 6.8

An optician must verify that:

- The patients' needs have been identified and discussed,
- Vision requirements have been appropriately met,
- Limitations of optical devices regarding a patients' prescription, or visual condition have been discussed,
- The patient understands the necessity of and availability of follow up care,
- Optical devices have been verified for quality, specifications and are within tolerance (the COA defers to the American National Standards Institute [ANSI] ANSI Z80.1, Prescription Ophthalmic Lenses – Recommendations), and
- The patient record is complete as per Standard 4 of this document.

Verifying and Dispensing Low Vision Devices

6.9 When assessing for and providing services for low vision, an optician must be authorized to provide this service, take any measurements required for the low vision device, and provide appropriate professional services within their scope of practice.

Guideline for Standard 6.9

An optician must be a registered member in good standing and should, using best practices, routinely do the following:

- Review with the patient any relevant environmental, occupational, avocational, and/or physical factors
- Review any referral or prescription details in accordance with the Standards
- Advise the patient regarding appropriate low vision device(s)
- Take necessary measurements
- Verify the accuracy of any device to ensure it meets applicable tolerances
- Fit and adapt the device to the patient
- Counsel the patient on aspects of device usage including expectations, limitations, usual adaptation period, and maintenance requirements

Standard 7: Refracting

An optician must obtain a Refracting Optician designation from the College and must adhere to the following criteria in order to complete a refraction.

Application of Standard 7

Requirements for Refracting Opticians

7.1 If an optician intends to refract, they must apply to the College of Opticians of Alberta for refracting designation through a process established by the COA.

7.2 An optician must ensure that they have the appropriate equipment to perform refraction.

Guideline for Standard 7.2

Refracting equipment may include, but is not limited to:

- Phoropter
- Trial lenses
- Retinoscope
- Visual acuity charts
- Automated refraction equipment

Referrals

7.3 An optician must use their professional judgement to assess any indication or complication that arises during a refraction for referral to another regulated health professional.

Guideline for Standard 7.3

This includes determining whether a stand-alone refraction is appropriate based on a patient's history and any additional indications that arise during the refraction. For examples from the Canadian Ophthalmological Society of high-risk patients and suggested timelines for referring those patients, see Standard 6.2.

Prescriber Signatures

7.4 An optician must ensure all prescriptions generated for use in preparing eyeglasses, contact lenses or subnormal vision devices are signed by a lawful prescriber and made available to the patient.

Guideline for Standard 7.4

Even if no dispensing occurs at the time of the refraction, the resultant prescription must be signed and stored on a patient record.

Refraction Records

7.5 Refraction and prescription records must include all information appropriate to the services being provided.

Guideline to Standard 7.5

For a detailed list of the requirements for all patient records, and additional requirements for refraction and prescription records, refer to Standard 4: Record Keeping.

Standard 8: Professional Boundaries

Opticians must be aware of and honour patient boundaries.

Definitions

Adult interdependent partner

Adult interdependent partner means a person as defined in section 3(1) of the Adult Interdependent Relationships Act SA 2002, c A-4.5:

3(1) Subject to subsection (2) a person is the adult interdependent partner of another person if

(a) the person has lived with the other person in a relationship of interdependence
  (i) for a continuous period of not less than 3 years, or
  (ii) of some permanence, if there is a child of the relationship by birth or adoption,
  or
(b) the person has entered into an adult interdependent partner agreement with the other person under section 7.

(2) Persons who are related to each other by blood or adoption may only become adult interdependent partners of each other by entering into an adult interdependent partner agreement under section 3.

Female Genital Mutilation

Female genital mutilation, as defined in section (1)(m.1) of the Health Professions Act RSA 2000, c h-7, means the excision, infibulation, or mutilation, in whole or in part, of the labia majora, labia minora, clitoral hood or clitoris of a person, except where valid consent is given and

(a) a surgical or other procedure is performed by a regulated member under the Health Professions Act for the benefit of the physical health of the person or for the purpose of that person having normal reproductive functions or normal sexual appearance or function, or
(b) the person is at least 18 years of age and there is no resulting bodily harm.

Patient

Patient, for the purposes of a complaint made in respect of unprofessional conduct in relation to sexual abuse or sexual misconduct, means a patient as set out in the standards of practice of a council [s. 1(x.1) HPA].

An individual becomes a patient of an optician when the optician begins to provide

professional services to the individual as described in section 3 of Schedule 16 of the Health Professions Act. The individual continues to be considered a patient for a period that expires 6 months after the optician last provided professional services to an individual.

Sexual Abuse
Sexual abuse is defined as the threatened, attempted, or actual conduct of a regulated member towards a patient that is of a sexual nature and includes any of the following conduct:

- Sexual intercourse between a patient and regulated member,
- Genital to genital, genital to anal, oral to genital, or oral to anal contact between a regulated member and a patient,
- Masturbation of a regulated member by or in the presence of a patient,
- Masturbation of a regulated member's patient,
- Encouraging a regulated member's patient to masturbate,
- Touching of a sexual nature of a patient's genitals, anus, breasts, or buttocks by a regulated member [s. 1(1) (nn.1) HPA]

Sexual Misconduct
Sexual misconduct is defined as any incident or repeated incidents of objectionable or unwelcome conduct, behaviour, or remarks of a sexual nature by a regulated member who knows or ought reasonably to know will or would cause offence or humiliation to a patient or adversely affect a patient's health and well-being but does not include sexual abuse [s.1(1)(nn.2) of HPA].

Sexual Nature
Sexual nature does not include any conduct, behaviour, or remarks that are appropriate to the services provided [s. 1(1) (nn.3) HPA].

Spouse
A spouse is a person who is legally married, considered in relation to their partner.

Application of Standard 8

Boundaries
8.1 An optician must not engage in sexual relationships with patients.

Guideline for Standard 8.1
An optician who engages in a sexual relationship with a patient commits sexual abuse. An optician who engages in the type of activities described under the definition of

sexual misconduct towards a patient engages in sexual misconduct.

It is preferable for an optician to arrange for another optician to provide professional services to the optician's spouse, adult interdependent partner, or a person with whom the optician has an ongoing pre-existing sexual relationship. However, if an optician decides to provide professional services to their spouse, adult interdependent partner, or another person with whom they have an ongoing pre-existing sexual relationship, these individuals are not considered to be "patients" for the purposes of the sexual abuse and sexual misconduct provisions in the Health Professions Act.

8.2 An optician must maintain sound professional judgement in all circumstances.

Guideline for Standard 8.2
An optician must maintain a professional relationship by treating each patient with the same standard of care. Professional judgement includes monitoring both verbal and non-verbal communication like speed and volume of speech, language (including refraining from making jokes or comments that may be perceived as inappropriate or profane), and body language (including facial expressions that may be perceived as inappropriate), therefore ensuring that all communication is respectful at all times. Clear boundaries allow a patient to trust that the optician will treat all patients with the same attention, respect, and care.

Alberta has a wide cultural mosaic which must be considered; this highlights the need for clear communication in all situations.

To avoid situations where power comes into play, standard warranty and return policies must be established and published. Preferential treatment of a patient based upon a personal relationship (familial, religious, or club related) is to be avoided.

8.3 An optician must understand and refrain from sexual misconduct towards a patient.

Guideline for Standard 8.3
Sexual misconduct could come in the form of inappropriate jokes or slurs. It could be something said directly to a patient or overheard by a patient in a dispensing facility. It could be suggestive body language making the point of a joke or it could be more personal.

Any physical contact with a patient must be appropriate for the services being provided. Always obtain consent from patients prior to contact.

If a Hearing Tribunal finds that an optician is guilty of having engaged in Sexual Misconduct, then the Hearing Tribunal must impose a suspension of the registration and practice permit for a length of time considered to be appropriate. The Hearing Tribunal may impose additional sanctions including cancellation.

A person whose practice permit and registration are cancelled as a result of a decision of unprofessional conduct based in whole or in part on sexual misconduct may not apply for the practice permit to be reissued and the registration to be reinstated until at least 5 years have elapsed from the date that the decision of unprofessional conduct was made by the Hearing Tribunal [s. 45(4) HPA].

Findings of sexual misconduct are published on the college's website for an indefinite period.

8.4 An optician must understand and refrain from sexual abuse of a patient.

Guideline for Standard 8.4
If a Hearing Tribunal finds that an optician is guilty of having engaged in Sexual Abuse, then the Registrar must cancel the registration and practice permit with no opportunity of the optician to apply for reinstatement.

A person whose practice permit and registration are cancelled as a result of a decision of unprofessional conduct based in whole or in part on sexual abuse may not apply for the practice permit to be reissued or registration to be reinstated [s. 45(3) (a) HPA]

The Hearing Tribunal may impose additional sanctions. Findings of sexual abuse are published on the College's website for an indefinite period.

8.5 An optician must understand and refrain from the procurement or performance of female genital mutilation.

Guideline for Standard 8.5
A person who has been convicted of a criminal offence related to the procurement or performance of female genital mutilation is not eligible for registration as a regulated

member of the College [s. 1.11(2) HPA].

The Registrar of the College must cancel a regulated member's practice permit and registration immediately after receiving notification of a regulated member's conviction of the procurement or performance of female genital mutilation [s. 55(1)(1.3) HPA].

If the College receives a complaint with respect to female genital mutilation, the Complaints Director must immediately report the matter to a law enforcement agency [s. 55(1)(1.1) HPA].

If a Hearing Tribunal finds that an optician is guilty of having procured or performed female genital mutilation, then the Registrar must cancel the registration and practice permit with no opportunity of the optician to apply for reinstatement.

A person whose practice permit and registration are cancelled as a result of a decision of unprofessional conduct based in whole or in part on the procurement or performance of female genital mutilation may not apply for the practice permit to be reissued or registration to be reinstated [s. 45(3)(a) HPA]

The Hearing Tribunal may impose additional sanctions. Findings of female genital mutilation are published on the College's website for an indefinite period.

Reporting

8.6 An optician must report instances of sexual abuse or misconduct and the procurement or performance of female genital mutilation.

Guideline for Standard 8.6

Regulated members have an obligation to self-report to the Registrar if found guilty of unprofessional conduct by other regulatory bodies [s. 127.1(1) HPA].

If in the course of a regulated member acting in the regulated member's professional capacity the regulated member has reasonable grounds to believe that the conduct of another member of a regulated college constitutes sexual abuse or sexual misconduct or the procurement or performance of female genital mutilation, they must report that conduct to the Complaints Director of the college of the other regulated member [s. 127.2 HPA].

An employer who has "reasonable grounds to believe" that the conduct of a regulated member constitutes unprofessional conduct based on behaviour that, in

the employer's opinion, is sexual abuse or sexual misconduct or the procurement or performance of female genital mutilation must, as soon as possible, give notice of that conduct to the Complaints Director. [s. 57(1.1 and 1.2) HPA].

Note that the definition of "employment" in s. 57(3) of the HPA is broad; it includes work as a paid/unpaid employee, consultant, contractor, or volunteer.