

**Association
of Optometrists**
**Record Keeping
&
Professional Responsibilities
(Litigation!)**

**Presentation to
Employed Optometrists Conference**

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Record Keeping & Professional Responsibilities

Why do we keep records?

- Patient benefit
- DEFENCE OF OPTOMETRIST

Computerised or on paper?

Content remains the same

What records do we keep?

EVERYTHING

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Record Keeping & Professional Responsibilities

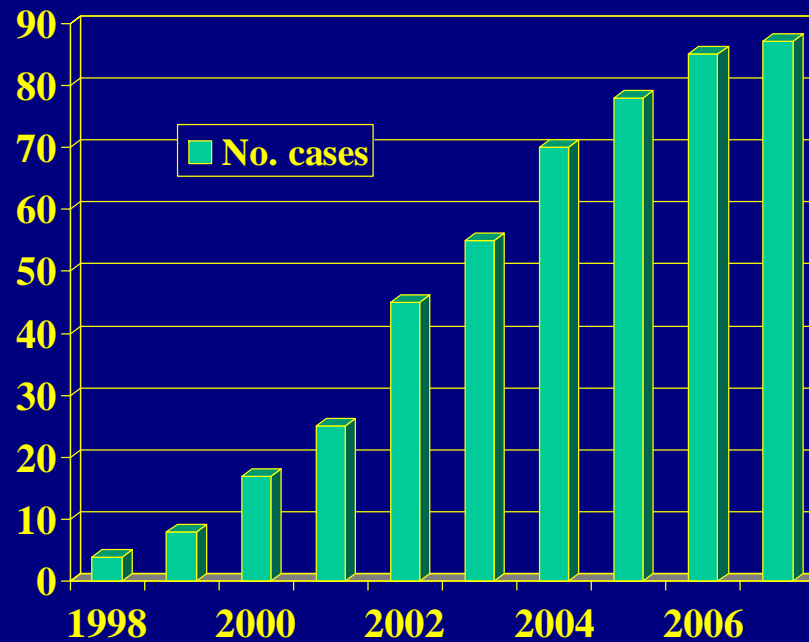
Attacks

- Px complaint
- GOC
- Solicitors
- PCO's
- OCCS
- Healthcare Commissioner

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- **Current GOC Trends**

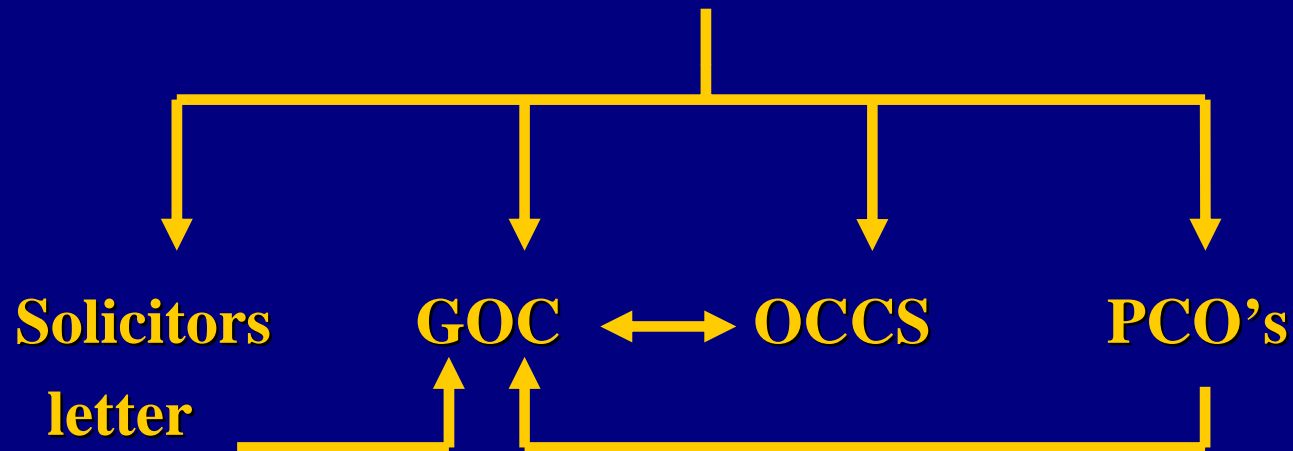


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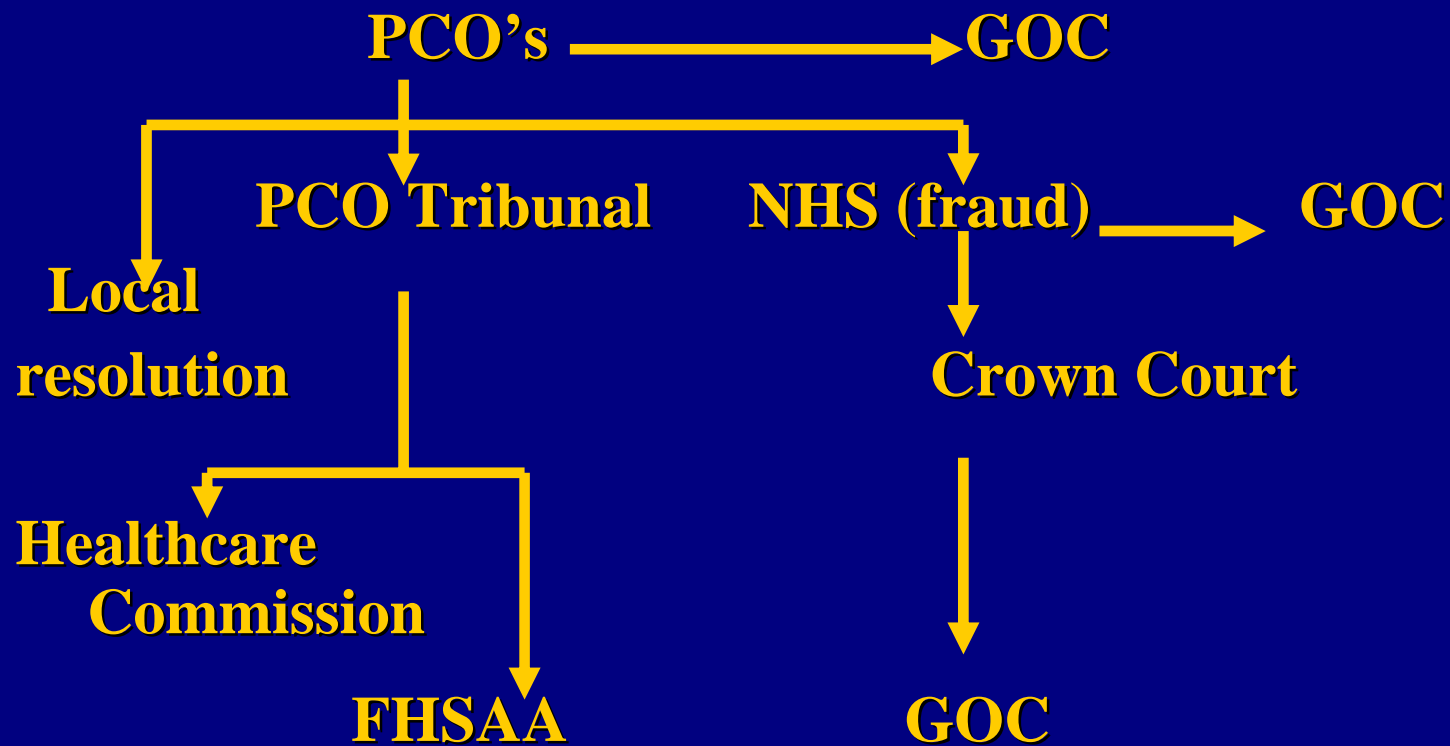
Interrelation of Complaints

Px Complaint



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Clinical record

Patient information (continued)

Family history

Ocular history

Health

Medication

- History
- Symptoms

MAKE ENTRIES IN EVERY CASE

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Clinical record

Examination

Observations – right and left

External - structures

Ocular motor

Motility

Pupils

NPC

Internal

Media

Vessels

Discs

Macula

Periphery

Note

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Clinical record

Examination (continued)

Intra-ocular pressure

- Time of measurement
- Pressures in each eye
- Method of test

Visual Fields

- Type of test
- Findings

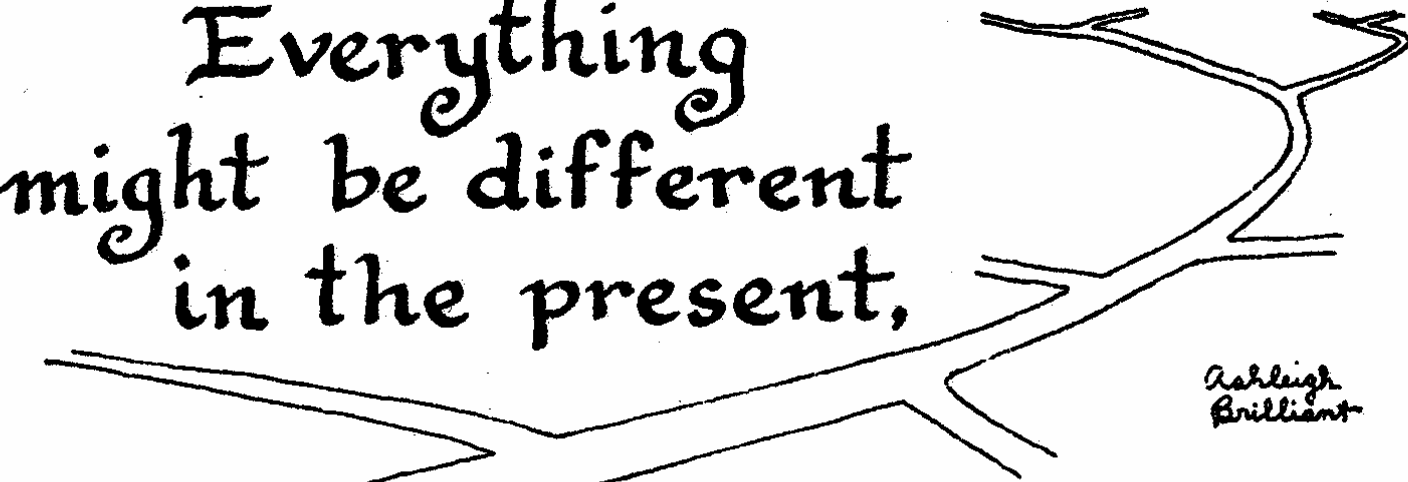
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©BRILLIANT ENTERPRISES 1976.

POT-SHOTS NO. 992.

Everything
might be different
in the present,



Ashleigh
Brilliant

if only one thing
had been different
in the past.

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Clinical record

Refraction

Vision – unaided

Record the prescription found

Visual acuity

Record prescription issued

NOTE ADVICE AND RECOMMENDATIONS

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Clinical record

Contact lenses

- Initial Appointment/New patient
 - Note when patient last had a sight test
 - All appropriate information as for spectacles
- At the end of fitting:
 - Give the Specification
 - Written instruction on use and care of lenses
 - If you are the last optometrist in a chain it is your responsibility

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Clinical record

Contact lenses Continuing Care

- Full CL examination is required
- Px compliance
- Conclusions & advice & actions
- Date of next appointment

Note if they do not attend

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Supply of Contact lenses

Supplier is now responsible for aftercare basic advice to be given to the patient on the following:

- the need for routine continuing contact lens care
- contact numbers/addresses for emergency care.

Aftercare is limited to this type of direction but should be given to the patient in writing for the protection of the supplier and NOTED on records

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Dispensing record

Frame

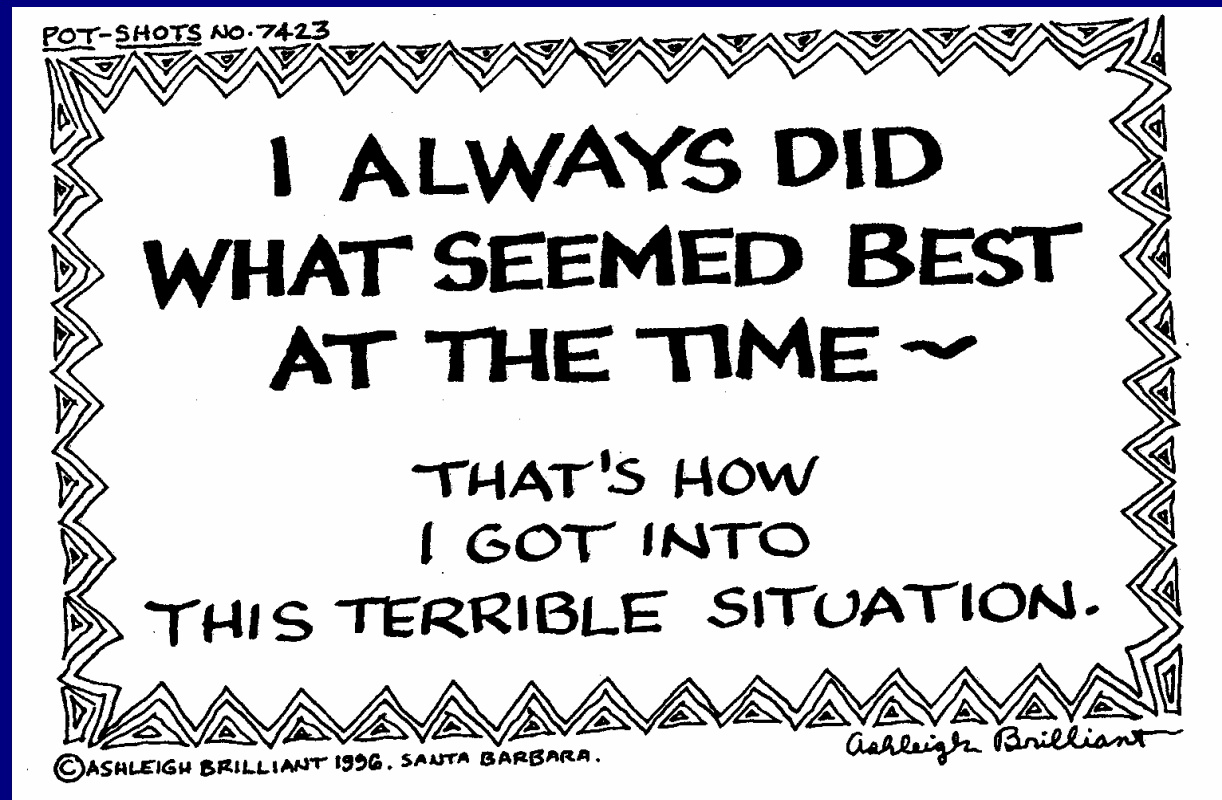
Facial measurements

Lenses

If working with optical assistant the responsibility lies with a qualified practitioner – which could be you!

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Data Protection Act 1998

Patient's consent

- Taking records, Keeping records, Passing records on to third party
- Consent at start of examination

Px's are entitled to:

- Explanation of original records
- Copies of all the records

This is not the same as patient confidentiality

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Access to medical records
(Data Protection Act 1998)

Px's are entitled to:

- Explanation of original records
- Copies of all the records

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Who owns the records?

Business

Optometrist needs access to records

Consider your position if you are a locum or employed
and change jobs

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- If you are:
 - A locum
 - An infrequent sessional optometrist
 - Working in a practice with the above
- You may have to deal with:
 - Delegated procedures or repeat procedures
eg. Fields, IOPs, pupil dilation etc.
 - Referral decisions based on the above

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If you are a locum or sessional optom
you must ensure:

- The procedures you want done are actually done!
- Your professional responsibilities cannot be delegated to unqualified staff
- You owe a duty of care to the patient.

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You cannot leave the practice and assume the patient care is someone else's responsibility:

- Leave clear instructions on the patient's record
- Communicate your requirements to the next optom (if possible)
- If not then a DO in the practice
- If not then leave written instructions with the practice owner

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If you are working in a practice that employs a sessional optom you must ensure:

- You are happy to undertake follow-on care
- Be prepared to act on changed signs/symptoms
- Professional responsibilities are clear ie:
 - Who is deciding what happens to the patient (you or the other optom)
 - Who will be referring the patient
- You are remunerated for your time and responsibility

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If you are asked to refer a patient seen by a sessional optom you must ensure:

- You are confident of the other practitioner's abilities
- You believe the data to be reliable; this must be a reasonable belief!
- You agree with the management decisions and that referral is justified

If not: you may have to defend a complaint that you don't feel is your fault

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- If you take decisions in the management of a patient there will be some transfer of either all or part of duty of care
- If you have concerns about a patient welfare or unqualified staff's actions communicate those concerns to practice professional staff in writing clearly and concisely – keep a copy for yourself.

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Record Keeping Tips

- You should keep full records of the patient's details, clinical details and dispensing details
- The records should be clearly legible
- The optometrist responsible for the examination should be identifiable from the record card
- If you have not noted down the results of a test, it is assumed you have not carried it out

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- It is no longer considered acceptable practice to use tick marks or the abbreviation 'NAD'
- Note of all advice given to the patient and any subsequent action, such as referral
- Whether you record these details on paper or electronically, the information should be the same
- When you leave the employment ensure you have access to the records

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CONTACT YOUR INSURERS IMMEDIATELY

Do **NOT** rely on your employer to deal with the matter.

If you are a locum – many practices will look to your insurance to deal with the claim

You **ARE** entitled to take your own legal advice – whatever your employer may say!

DO NOT ADOPT THE OSTRICH APPROACH