California State Board of Optometry
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DEPARTMENT OF CONSUMER AFFAIRS • CALIFORNIA STATE BOARD OF OPTOMETRY
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ISSUE MEMORANDUM

DATE	August 25, 2023
TO	Board Members, California State Board of Optometry (CSBO)
FROM	Gregory Pruden, Executive Officer
SUBJECT	Agenda Item #5 – Department of Consumer Affairs Update

A. Executive Office

The Board will hear from a representative of the Department of Consumer Affairs Executive Office.

B. Budget Office

i. Fund Condition

The Board will hear from a representative of the Department of Consumer Affairs Budget Office.

C. Presentation from DCA OPES re: Occupational Analysis of the Optometric Assistant Profession and Scope of Practice of Opticianry

The Board will hear from a representative of the Department of Consumer Affairs Office of Professional and Examination Services.

Attachment: Occupational Analysis of the Optometric Assistant Occupation and Opticianry Scope of Practice Study

California State Board of Optometry

OCCUPATIONAL ANALYSIS OF THE OPTOMETRIC ASSISTANT OCCUPATION AND OPTICIANRY SCOPE OF PRACTICE STUDY

CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS

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CALIFORNIA STATE BOARD OF OPTOMETRY

OCCUPATIONAL ANALYSIS OF THE OPTOMETRIC ASSISTANT OCCUPATION AND OPTICIANRY SCOPE OF PRACTICE STUDY

April 2023

CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS

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This occupational analysis report is mandated by California Business and Professions BPC § 139 and by DCA Licensure Examination Validation Policy OPES 22-01.

EXECUTIVE SUMMARY

As part of its 2021–2025 Strategic Plan, the California State Board of Optometry (Board) is evaluating the role of unlicensed individuals working as optometric assistants. The purpose of the evaluation is to identify overlap in the scope of practice of three opticianry occupations: optometric assistant, spectacle lens dispenser (SLD), and contact lens dispenser (CLD), and to determine whether any health and safety concerns necessitate a new licensing system.

The Board requested that the California Department of Consumer Affairs' Office of Professional Examination Services (OPES) conduct an independent review and evaluation of the scope of practice of the optometric assistant, SLD, and CLD occupations. The first step of the review was separate occupational analyses (OAs) of the three occupations. The purpose of an OA is to define an occupation in terms of the critical tasks that workers must be able to perform safely and competently.

OPES completed OAs of the SLD and CLD occupations in 2019. The OA of the optometric assistant was completed in 2022, and the results are provided in this report. The results of the optometric assistant OA provide a description of practice for the optometric assistant occupation.

For the optometric assistant OA, OPES test specialists began by researching the occupation and conducting telephone interviews with optometric assistants working in California. The purpose of these interviews was to identify the tasks performed by optometric assistants and to specify the knowledge required to perform these tasks safely and competently. Using the information gathered from the research and the interviews, OPES test specialists developed a preliminary list of tasks performed by optometric assistants, along with statements of the knowledge needed to perform those tasks.

In February 2022, OPES test specialists facilitated a workshop with optometric assistants, or subject matter experts (SMEs), with diverse backgrounds in the occupation (e.g., location of work, years working). The SMEs reviewed, refined, and finalized the preliminary lists of tasks and knowledge statements. The SMEs also linked each task with the knowledge statements required to perform that task and reviewed the demographic questions to be used in a two-part OA questionnaire.

After the workshop, OPES test specialists developed the OA questionnaire to be completed by a sample of optometric assistants statewide. In the first part of the OA questionnaire, optometric assistants were asked to provide demographic information related to their work settings and job. In the second part, optometric assistants were asked to rate specific tasks by frequency (i.e., how often the optometric assistant

performs the task in their current work) and importance (i.e., how important the task is to effective performance in the optometric assistant's current work).

In September 2022, on behalf of the Board, OPES sent an email to 7,535 optometrists for whom the Board had an email address on file, asking them to forward the online OA questionnaire to optometric assistants working in their office. It is unknown how many optometric assistants were forwarded the questionnaire.

A total of 86 optometric assistants responded to the OA questionnaire. Because the total number of optometric assistants in the State of California is unknown, OPES could not determine what percentage of the total number of optometric assistants responded to the survey. OPES evaluated the demographic data from all 86 respondents. However, only 33 of 86 respondents indicated that they did not possess CLD or SLD certifications. To provide a more accurate picture of the optometric assistant duties, OPES used data from these 33 respondents in the data analysis, including data from questionnaires that contained incomplete responses.

OPES test specialists performed data analyses of the task ratings obtained from the OA questionnaire respondents. The task frequency and importance ratings were combined to derive an overall criticality index for each task.

Once the data were analyzed, OPES test specialists conducted a second workshop with SMEs in October 2022. The SMEs evaluated the criticality indices and determined whether any tasks and knowledge statements should be excluded from the optometric assistant description of practice. Due to a lack of consensus among the SMEs, the small number of SMEs who attended the workshops, and the low number of survey respondents, tasks and knowledge statements with low criticality indices were also presented to a group of optometrists in December 2022. OPES asked the optometrists which opticianry professional performed these tasks in their work setting. The optometrists indicated if each task was performed by an optometric assistant, an SLD, a CLD, or an optometrist. Based on the responses from the optometrists and on previously gathered information, no tasks and no knowledge statements were excluded from the description of practice.

The SMEs in the October 2022 workshop also established the final linkage between tasks and knowledge statements, organized the tasks and knowledge statements into content areas, and defined those content areas. The SMEs then determined the content area weights for the optometric assistant description of practice.

The optometric assistant description of practice is structured into four major content areas weighted relative to the other content areas. Two of the major content areas have subareas. The description of practice identifies the tasks and knowledge critical to safe and competent practice of the optometric assistant occupation in California.

OVERVIEW OF THE DESCRIPTION OF PRACTICE

CONTENT AREA	PERCENT WEIGHT
01 PATIENT ASSESSMENT – This area describes the optometric assistant's knowledge of performing tests to determine the patient's current eye health and vision needs; and of determining the patient's insurance coverage.	40
02 SPECTACLE FITTING – This area describes the optometric assistant's knowledge of determining, adjusting, and providing education regarding the types of spectacle lenses best suited for the patient based on the optometrist's recommendation and the patient's needs.	15
03 CONTACT LENS EVALUATION – This area describes the optometric assistant's knowledge of determining, fitting, and providing training regarding the types of contact lenses best suited for the patient based on the optometrist's recommendation and the patient's needs.	15
04 OFFICE MANAGEMENT – This area describes the optometric assistant's knowledge of managing office supplies and patient documentation, including keeping and transmitting patient records while maintaining privacy requirements.	30

In February 2023, OPES test specialists facilitated a workshop with SMEs consisting of two optometrists, two SLDs, and four SLDs/CLDs. The purpose of the workshop was to conduct an opticianry scope of practice study to evaluate the optometric assistant description of practice against the CLD and SLD descriptions of practice. For each task in the optometric assistant description of practice, the SMEs discussed if that task is and should continue to be performed by optometric assistants, if the task is performed by CLDs or SLDs, or if the task is performed by optometric assistants and CLDs or SLDs but should only be performed by CLDs or SLDs.

When determining whether a specific task should be performed by optometric assistants, CLDs or SLDs, the SMEs considered specific knowledge and training, and whether performing the task posed a safety concern to patients. Based on the discussion, 25 tasks on the optometric assistant description of practice were identified as tasks that are safety concerns and should only be performed by CLDs or SLDs. Also, four additional tasks were identified as missing from the optometric assistant description of practice. The SMEs recommended adding them.

After the review of the optometric description of practice was completed, the SMEs engaged in a discussion regarding what changes to the optometric assistant, CLD and

SLD professions, if any, would increase public safety. The SME consensus was that a clear definition of the role of optometric assistants should be established, and optometric assistants should be registered with the Board to ensure the role is adhered to. The definition of the role should detail the tasks optometric assistants can perform and the intent of the tasks. No changes to the SLD and CLD professions were recommended by the SMEs.

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CHAPTER 1 | INTRODUCTION

PURPOSE OF THE STUDY

As part of its 2021-2025 Strategic Plan, the California State Board of Optometry (Board) is evaluating the role of unlicensed individuals working as optometric assistants. The purpose of the evaluation is to identify overlap in the scope of practice of three opticianry occupations: optometric assistant, spectacle lens dispenser (SLD), and contact lens dispenser (CLD) and to determine whether any health and safety concerns necessitate a new licensing system.

The Board requested that the California Department of Consumer Affairs' Office of Professional Examination Services (OPES) conduct an independent review and evaluation of the scope of practice of the optometric assistant, SLD, and CLD occupations. The first step of the review was separate occupational analyses (OAs) of the three occupations. OPES completed OAs of the SLD and CLD occupations in 2019. The results of this optometric assistant OA provide a description of practice for the optometric assistant occupation. The purpose of this OA is to define the optometric assistant occupation in terms of the critical tasks that workers must be able to perform safely and competently.

PARTICIPATION OF SUBJECT MATTER EXPERTS

California optometric assistants participated as subject matter experts (SMEs) during the OA to ensure that the description of practice directly reflects current optometric assistant work in California. These SMEs represented the occupation in terms of geographic location of work and years of experience. The SMEs provided technical expertise and information during interviews and workshops. During interviews, the SMEs provided information about their work tasks and the knowledge required to perform those tasks safely and competently. During workshops, the SMEs developed and reviewed the tasks and knowledge statements describing the optometric assistant occupation, organized the tasks and knowledge statements into content areas, evaluated the results of the OA, and developed the optometric assistant description of practice. Recruiting enough SMEs to participate was difficult because optometric assistants are unlicensed and unregistered.

ADHERENCE TO LEGAL STANDARDS AND GUIDELINES

OAs conducted in the State of California must follow professional guidelines and technical standards to be valid. The following laws and guidelines are authoritative:

- California BPC § 139.

- 29 Code of Federal Regulations Part 1607 – Uniform Guidelines on Employee Selection Procedures (1978).
- California Fair Employment and Housing Act, Government Code § 12944.
- Principles for the Validation and Use of Personnel Selection Procedures (2018), Society for Industrial and Organizational Psychology (SIOP).
- *Standards for Educational and Psychological Testing* (2014), American Educational Research Association, American Psychological Association, and National Council on Measurement in Education.

For an OA to meet these standards, it must identify the occupational activities required for safe and effective entry level practice.

DESCRIPTION OF OCCUPATION

The optometric assistant occupation is unlicensed and unregistered. BPC § 2550(g) defines "unregistered" individuals who work with contact lenses and spectacle lenses as follows:

> (g) "Unregistered individual" means an individual who is not registered with the board pursuant to this chapter. The unregistered individual may perform any of the following:
>
> (1) Fitting and adjusting of spectacle lenses under the direct responsibility and supervision of a duly registered spectacle lens dispenser pursuant to Section 2559.1.
>
> (2) Fitting and adjusting of contact lenses under the direct responsibility and supervision of a duly registered contact lens dispenser pursuant to Section 2560.

Existing law authorizes an optometric assistant, under the direct responsibility and supervision of an optometrist or ophthalmologist, to perform preliminary subjective refraction procedures in connection with finalizing subjective refraction procedures performed by an ophthalmologist or optometrist, subject to prescribed conditions. Those conditions include a requirement that the optometric assistant have at least 45 hours of documented training in subjective refraction procedures acceptable to the supervising ophthalmologist or optometrist. Assembly Bill 2574 was passed in 2023 and it authorizes the training to include performing preliminary subjective refraction procedures consistent with existing law to accomplish that training.

CHAPTER 2 | OCCUPATIONAL ANALYSIS QUESTIONNAIRE

SUBJECT MATTER EXPERT INTERVIEWS

OPES conducted telephone interviews with three optometric assistants working in California. During the semi-structured interviews, these optometric assistants were asked to identify major content areas of work and the tasks performed in each area. The SMEs were also asked to identify the knowledge necessary to perform each task safely and competently.

TASKS AND KNOWLEDGE STATEMENTS

To develop preliminary lists of tasks and knowledge statements, OPES test specialists integrated information gathered from the SLD and CLD OA reports, laws and regulations, national-level OA program information, and the SME interviews. The statements were organized into major content areas of work.

In February 2022, OPES test specialists facilitated a workshop to review, refine, and finalize the preliminary lists of tasks and knowledge statements. Six SMEs from diverse backgrounds (e.g., years working and geographic location) participated in the workshop. During the workshop, the SMEs evaluated the tasks and knowledge statements for technical accuracy, level of specificity, and comprehensiveness of assessment of work. In addition, the SMEs evaluated the organization of tasks within content areas to ensure that the content areas were independent and non-overlapping.

During the workshop, the SMEs also performed a preliminary linkage of the tasks to the associated knowledge statements. The linkage was performed to identify the knowledge required for performance of each task and to verify that each identified knowledge statement was important for safe and effective performance as an optometric assistant. Additionally, the linkage ensured that all tasks were linked to at least one knowledge statement and that each knowledge statement was linked to at least one task. Finally, the SMEs reviewed and revised the proposed demographic questions for an online OA questionnaire and evaluated the scales that would be used for rating tasks and knowledge statements.

OPES test specialists used the final list of tasks, demographic questions, and rating scales to develop the questionnaire to be completed by a sample of optometric assistants statewide.

QUESTIONNAIRE DEVELOPMENT

OPES test specialists developed the questionnaire to solicit optometric assistants' ratings of the tasks and knowledge statements. The surveyed optometric assistants were instructed to rate how often they perform each task in their current work (Frequency) and how important each task is to effective performance of their current work (Importance). The OA questionnaire also included a demographic section designed to obtain relevant occupational background information. The OA questionnaire can be found in Appendix E.

CHAPTER 3 | RESPONSE RATE AND DEMOGRAPHICS

SAMPLING STRATEGY AND RESPONSE RATE

In September 2022, on behalf of the Board, OPES sent an email to 7,535 optometrists for whom the Board had an email address on file. The email asked the optometrists to forward the online OA questionnaire to optometric assistants working in their office. It is unknown how many optometric assistants were forwarded the questionnaire. The email invitation is provided in Appendix D.

A total of 86 optometric assistants responded to the OA questionnaire. Because the total number of optometric assistants in the State of California is unknown, it is unknown what percentage of the total number of optometric assistants responded to the survey. Data from all 86 respondents are presented in the demographics section below. However, only 33 of 86 respondents indicated that they did not possess CLD or SLD certifications. Data from these 33 respondents were used in the data analysis, including data from questionnaires that contained incomplete responses. The percentages in the data for each demographic question below are based on the number of respondents to that question. The number of respondents is shown in the table for each set of data.

DEMOGRAPHIC SUMMARY

As shown in Table 1 and Figure 1, the responding optometric assistants reported a range of years of experience. The largest portion of respondents (60.8%) reported working as an optometric assistant for 5 years or fewer, while 19.6% reported working for 6–10 years.

In terms of education achieved, Table 2 and Figure 2 show that 51.4% of the respondents reported receiving on-the-job-training, while 22.9% reported holding a Bachelor's degree, and 17.1% reported holding an Associate degree.

Table 3 and Figure 3 show that a large proportion of optometric assistants (33–42%) reported holding a contact lens dispenser (CLD) certification, a spectacle lens dispenser (SLD) certification, or a dispensing optician certification.

Of the respondents, 74.5% reported private practice as their primary work setting, while 11.8% reported retail as their primary work setting, as seen in Table 4 and Figure 4.

Table 5 and Figure 5 show that the majority of respondents (64.7%) reported 1–3 other optometric assistants in their primary work setting, and 21.6% reported 4–6 other optometric assistants in their primary work setting. Table 6 and Figure 6 show that 40.4% of the respondents reported 1–3 spectacle lens dispensers in their primary work

setting. Table 7 and Figure 7 show that 42.6% of the respondents reported 1–3 contact lens dispensers in their primary work setting.

Table 8 and Figure 8 show that 51% of respondents reported working 30–39 hours per week as an optometric assistant, while 25.5% of respondents reported working 40 or more hours per week, and 11.8% reported working 20–29 hours. Table 9 and Figure 9 show that 73.1% of the respondents reported working in an urban setting and 26.9% reported working in a rural setting.

A breakdown of the respondents by region can be found in Table 10.

TABLE 1 – YEARS WORKING AS AN OPTOMETRIC ASSISTANT

YEARS	NUMBER (N)	PERCENT
0–5 years	31	60.8
6–10 years	10	19.6
11–20 years	6	11.8
More than 20 years	4	7.8
Total	51	100.0

FIGURE 1 – YEARS WORKING AS AN OPTOMETRIC ASSISTANT

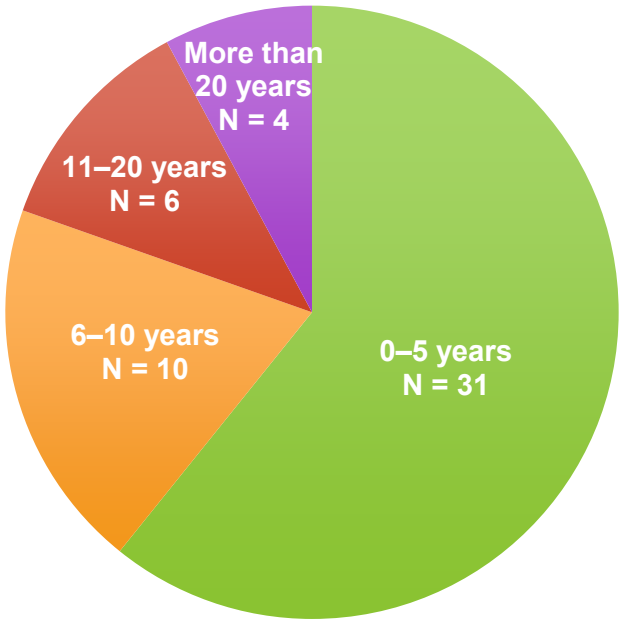

TABLE 2 – EDUCATION ACHIEVED

EDUCATION	NUMBER (N)	PERCENT*
On-the-job training	36	51.4
Vocational program	6	8.6
Associate degree	12	17.1
Bachelor's degree	16	22.9
Master's degree	1	1.4
Doctorate	2	2.9
Other	3	4.3

*NOTE: Respondents were asked to select all that apply.

FIGURE 2 – EDUCATION ACHIEVED

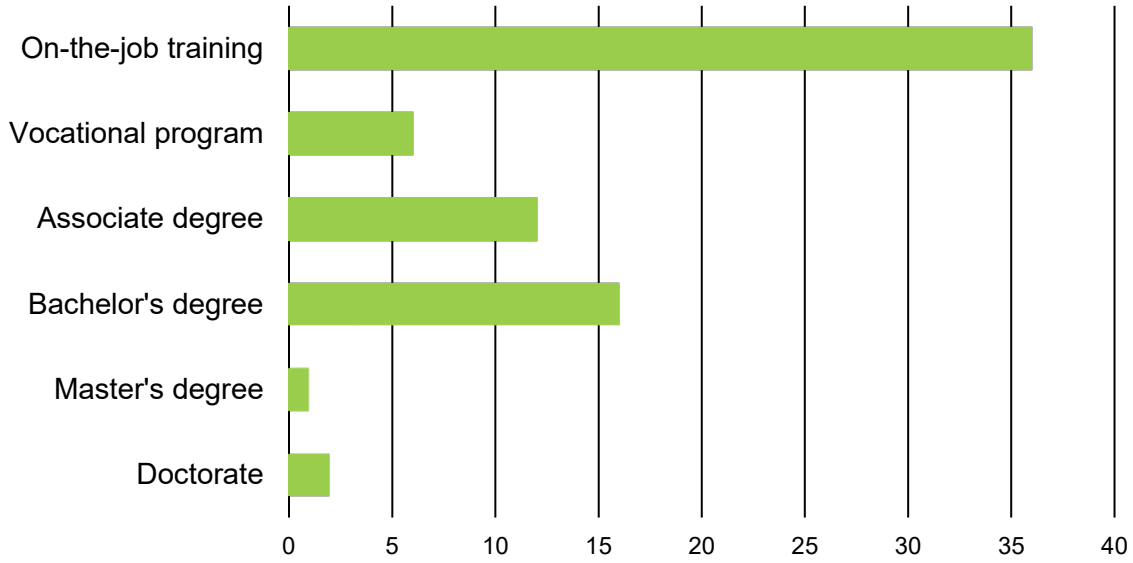

TABLE 3 – CERTIFICATIONS HELD

CERTIFICATIONS	NUMBER (N)	PERCENT*
Contact Lens Dispenser (CLD)	8	33.0
Spectacle Lens Dispenser (SLD)	10	42.0
Dispensing Optician	10	42.0
Certified Paraoptometric (CPO)	4	17.0
Certified Ophthalmic Assistant (COA)	3	13.0
Certified Ophthalmic Medical Technician (COMT)	1	4.0
Ophthalmic Scribe Certification (OSC)	1	4.0
Other	9	38.0

*NOTE: Respondents were asked to select all that apply.

FIGURE 3 – CERTIFICATIONS HELD

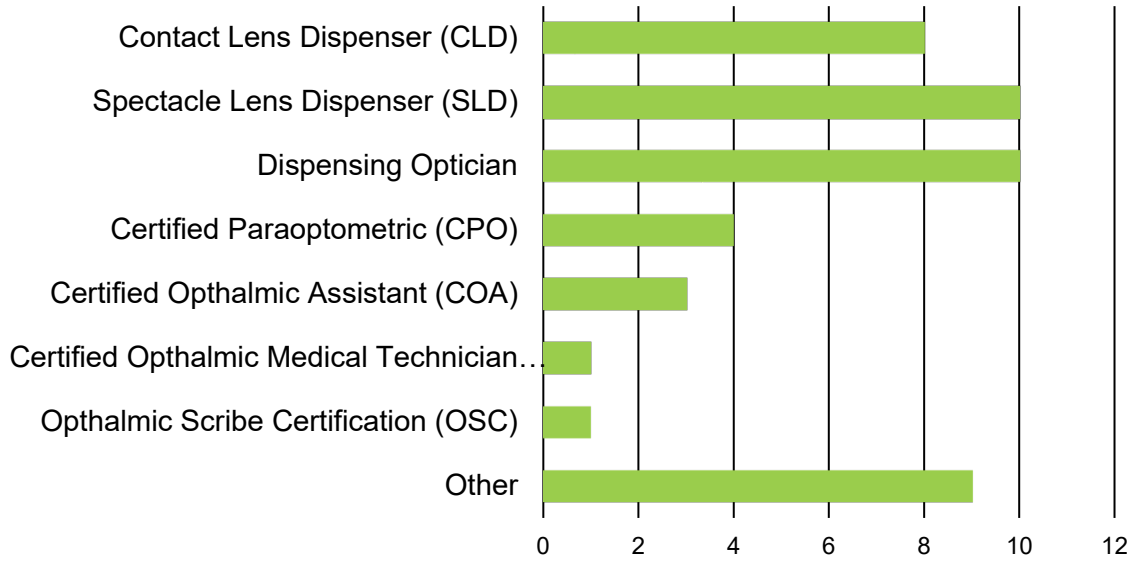

TABLE 4 – PRIMARY WORK SETTING

WORK SETTING	NUMBER (N)	PERCENT
Private practice	38	74.5
Retail	6	11.8
Partnership	1	2.0
Group practice	1	2.0
Corporation	1	2.0
HMO facility	1	2.0
Military/veterans' hospital or clinic	1	2.0
Other	2	3.9
Total	51	100*

*NOTE: Percentages do not add to 100 due to rounding.

FIGURE 4 – PRIMARY WORK SETTING

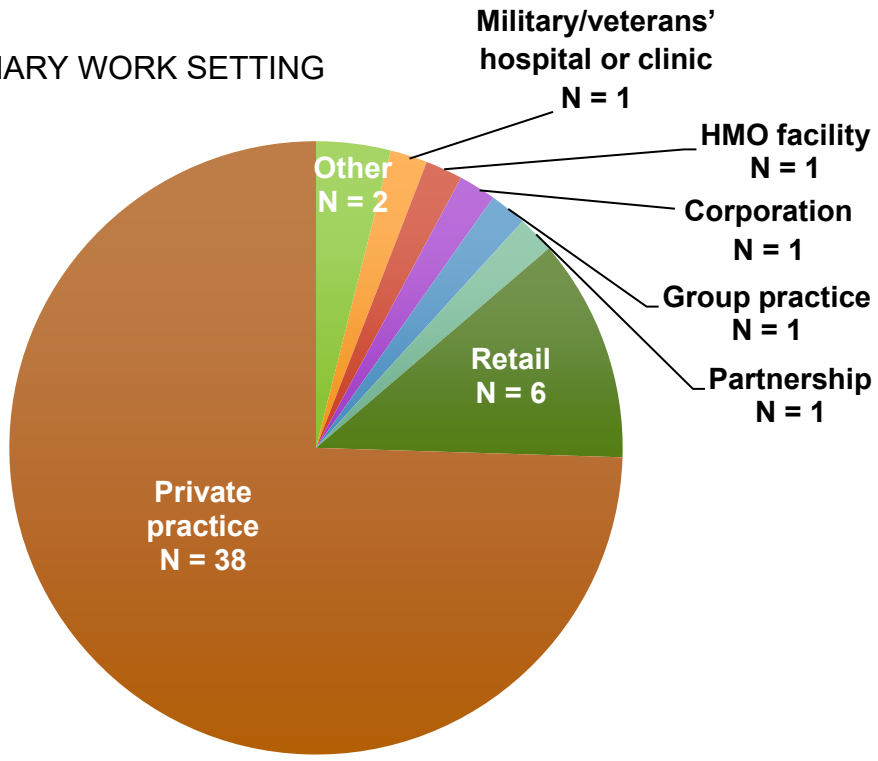

TABLE 5 – OTHER OPTOMETRIC ASSISTANTS IN WORK SETTING

NO. OF OPTOMETRIC ASSISTANTS	NUMBER (N)	PERCENT
0	4	7.8
1–3	33	64.7
4–6	11	21.6
7 or more	3	5.9
Total	51	100.0

FIGURE 5 – OTHER OPTOMETRIC ASSISTANTS IN WORK SETTING

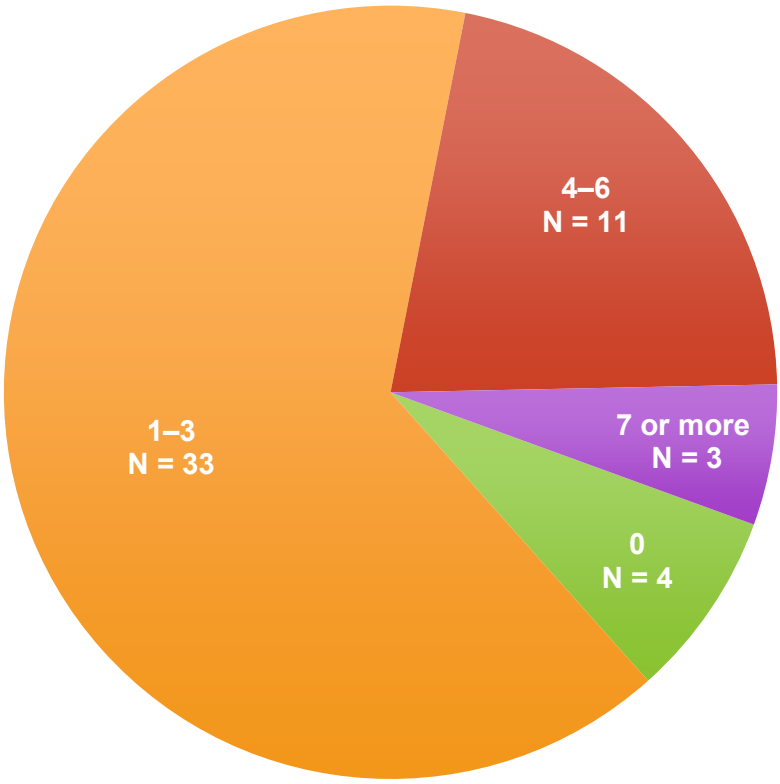

TABLE 6 – SLDs IN PRIMARY WORK SETTING

NUMBER OF SLDs	NUMBER (N)	PERCENT
0	25	53.2
1–3	19	40.4
4–6	3	6.4
Total	47	100.0

FIGURE 6 – SLDs IN PRIMARY WORK SETTING

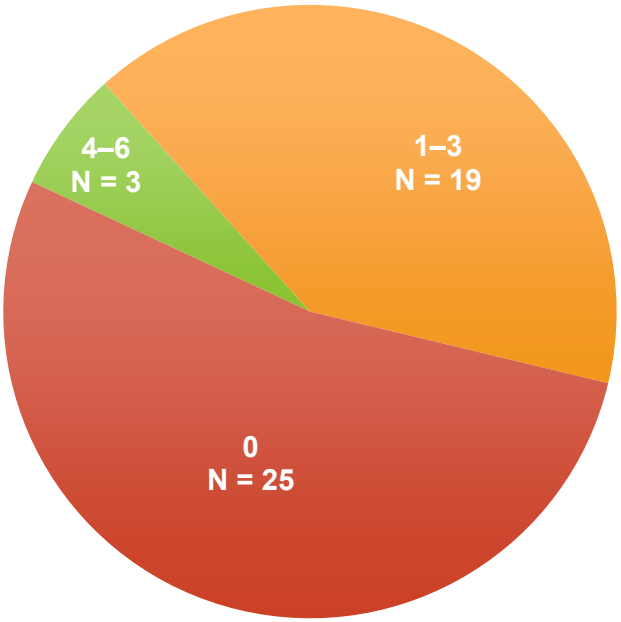

TABLE 7 – CLDs IN PRIMARY WORK SETTING

NUMBER OF CLDs	NUMBER (N)	PERCENT
0	26	55.3
1–3	20	42.6
4–6	1	2.1
Total	47	100.0

FIGURE 7 – CLDs IN PRIMARY WORK SETTING

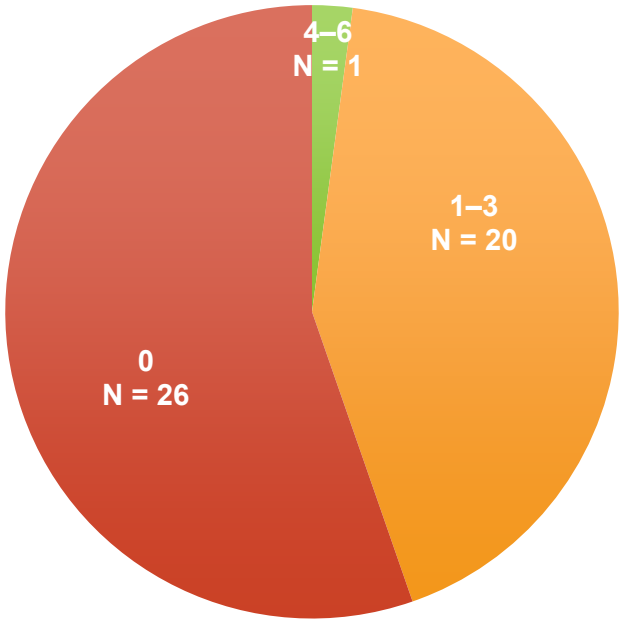

TABLE 8 – HOURS WORKED EACH WEEK AS AN OPTOMETRIC ASSISTANT

HOURS WORKED	NUMBER (N)	PERCENT
9 hours or fewer	2	3.9
10–19 hours	4	7.8
20–29 hours	6	11.8
30–39 hours	26	51.0
40–49 hours	12	23.5
50 or more hours	1	2.0
Total	51	100.0

FIGURE 8 – HOURS WORKED EACH WEEK AS AN OPTOMETRIC ASSISTANT

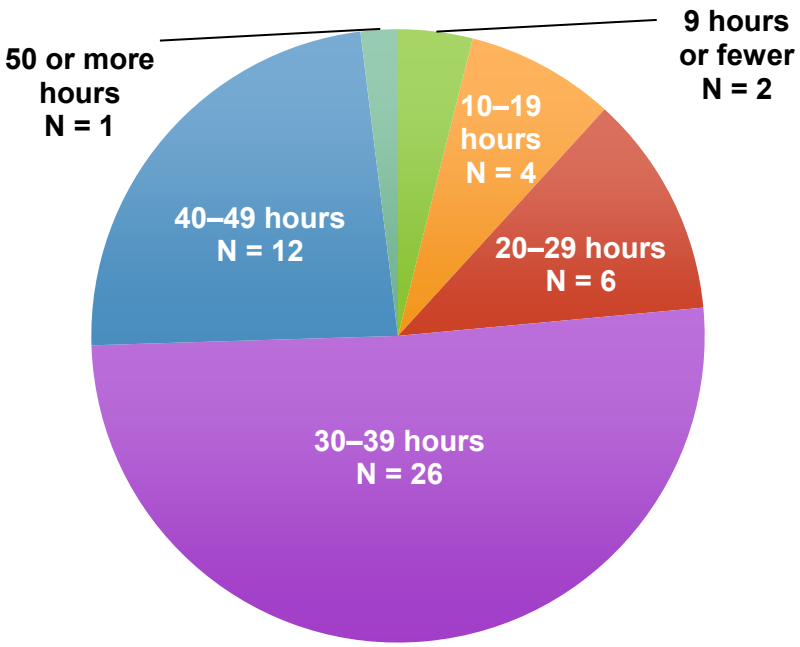

TABLE 9 – PRIMARY WORK SETTING LOCATION

SETTING	NUMBER (N)	PERCENT
Urban (more than 50,000 people)	38	73.1
Rural (fewer than 50,000 people)	14	26.9
Total	52	100.0

FIGURE 9 – PRIMARY WORK SETTING LOCATION

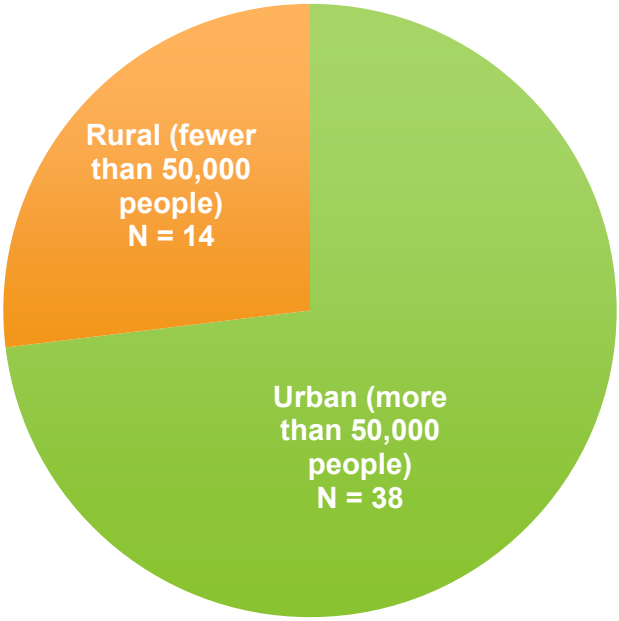

TABLE 10 – RESPONDENTS BY REGION

REGION NAME	NUMBER (N)	PERCENT
Los Angeles County and Vicinity	18	36
San Francisco Bay Area	15	30
San Joaquin Valley	2	4
Sacramento Valley	2	4
San Diego County and Vicinity	7	14
Shasta-Cascade	2	4
Riverside and Vicinity	2	4
Sierra Mountain Valley	2	4
Total	50	100

CHAPTER 4 | DATA ANALYSIS AND RESULTS

RELIABILITY OF RATINGS

OPES evaluated the task ratings obtained by the questionnaire with a standard index of reliability, coefficient alpha (α), that ranges from 0 to 1. Coefficient alpha is an estimate of the internal consistency of the respondents' ratings of the tasks. A higher coefficient value indicates more consistency between respondent ratings. Coefficients were calculated for all respondent ratings.

Table 11 displays the reliability coefficients for the task rating scale in each content area. The overall ratings of task frequency and task importance across content areas were highly reliable (Frequency α = .972; Importance α = .972). These results indicate that the responding optometric assistants rated the task statements consistently throughout the questionnaire.

TABLE 11 – TASK SCALE RELIABILITY

CONTENT AREA	NUMBER OF TASKS	α FREQUENCY	α IMPORTANCE
01 PATIENT ASSESSMENT	16	.914	.919
02 SPECTACLE FITTING	24	.979	.978
03 CONTACT LENS EVALUATION	16	.856	.838
04 OFFICE MANAGEMENT	14	.862	.846
Overall	70	.972	.972

TASK CRITICALITY INDICES

To calculate the criticality indices of the tasks, OPES test specialists used the following formula. For each respondent, OPES first multiplied the frequency rating (Fi) and the importance rating (Ii) for each task. Next, OPES averaged the multiplication products across respondents as shown below.

Task criticality index = mean [(Fi) X (Ii)]

The tasks were sorted in descending order by their criticality index and by content area. The tasks, their mean frequency and importance ratings, and their associated criticality indices are presented in Appendix B.

OPES test specialists facilitated a workshop with four SMEs in October 2022. The purpose of this workshop was to finalize the essential tasks and knowledge required for safe and competent practice of the optometric assistant occupation. The SMEs reviewed the mean frequency and importance ratings for each task as well as the criticality index for each. The SMEs identified several tasks with low criticality indices (09, 11, 13, 14, 41, 45, 52, 54, and 55) as not being performed by them. These 9 tasks are presented in Table 12. Although these tasks were not reported as performed by the SMEs who attended the October 2022 workshop, one SME in the February 2022 workshop indicated they performed all the tasks. In addition, some SMEs who completed the survey reported performing the tasks.

Due to the lack of consensus among the SMEs, the small number of SMEs who attended the workshops, and the low number of survey respondents, the 9 previously mentioned tasks were also presented to a group of 7 optometrists in December 2022. The optometrists were asked which opticianry professional performed these tasks in their work setting. The optometrists indicated if each task was performed by an optometric assistant, an SLD, a CLD, or an optometrist. The majority of the optometrists indicated that tasks 09, 13, 45, and 52 are performed by an optometric assistant, and that tasks 11, 14, 41, 54, and 55 are performed by an optometrist. Based on the responses from the optometrists and on previously gathered information, no cutoff value was established, and no tasks were excluded from the description of practice.

KNOWLEDGE IMPORTANCE RATINGS

To determine the importance of each knowledge statement, the mean importance rating for each knowledge statement was calculated. The knowledge statements and their mean importance ratings, sorted by descending order of mean importance and grouped by content area, are presented in Appendix C.

The SMEs who participated in the October 2022 workshop and evaluated the task criticality indices also reviewed the knowledge statement mean importance ratings. The SMEs indicated that several knowledge statements with low criticality indices (17, 24, 25, 32, 49, 54, 69, 74, 75, 89, 91, 92, 93, and 104) were not required to perform their job duties. These 14 knowledge statements are presented in Table 12. Although these knowledge statements were not reported as required by the SMEs who attended the October 2022 workshop, one SME in the February 2022 workshop indicated that all of the knowledge statements are required to perform their job duties. Due to the lack of consensus among the SMEs, the small number of SMEs who attended the workshops, and the low number of survey respondents, the 14 previously mentioned knowledge statements were also presented to the group of 7 optometrists in December 2022.

The optometrists were asked about the knowledge required to perform job duties in their work setting. The optometrists indicated if each knowledge statement was required for an optometric assistant, an SLD, a CLD, or an optometrist. The optometrists indicated that all knowledge statements were required for an optometrist. Several optometrists indicated that knowledge statements 17, 54, 89, and 104 were required for an optometric assistant, while only two optometrists indicated that knowledge statements 24, 32, 75, and 91 were required. According to the group of optometrists, knowledge statements 25, 49, 69, 74, 92, and 93 were not required for an optometric assistant. In addition, the majority said that knowledge statements 32 and 49 were required for an SLD. Based on the responses from the optometrists and on previously gathered information, no cutoff value was established, and no knowledge statements were excluded from the description of practice.

TABLE 12 TASKS AND KNOWLEDGE STATEMENTS LACKING SME CONSENSUS*

01 PATIENT ASSESSMENT

This area describes the optometric assistant's knowledge of performing tests to determine the patient's current eye health and vision needs; and of determining the patient's insurance coverage.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T09	Perform depth perception tests.	K017	Knowledge of methods and procedures for evaluating depth perception.
T11	Perform Ishihara test to screen patient for color vision deficiencies.	K024	Knowledge of types of eyedrops used for cycloplegic refraction.
T13	Apply mydriatics to dilate patient pupils.	K025	Knowledge of methods for determining prescriptions for pediatric patients.
T14	Perform cycloplegic refraction to determine patient prescription.	K032	Knowledge of ANSI standards for safety eyewear.
		K049	Knowledge of methods for identifying and calculating induced prism.
		K054	Knowledge of methods of assessing visual acuity (for example, Snellen chart, Jaeger card) during the fitting process.

NOTE: Task statements shaded in blue were identified by optometrists in the December 2022 workshop as the only tasks performed by optometric assistants and the knowledge statements shaded in blue were identified as the only knowledge required by optometric assistants.

03 CONTACT LENS EVALUATION

This area describes the optometric assistant's knowledge of determining, fitting, and providing training regarding the types of contact lenses best suited for the patient based on the optometrist's recommendation and the patient's needs.

0301 Initial Evaluation

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T41	Convert spectacle lens prescription to contact lens prescription.	K069	Knowledge of methods for modifying contact lens prescriptions to accommodate for astigmatism.
T45	Test patient visual acuity while wearing trial contact lenses.	K074	Knowledge of methods to adjust base curve measurements.
		K075	Knowledge of methods for evaluating visual acuity during the trial period.

0302 Follow-up Evaluation

T52	Test patient visual acuity after trial period to determine need for adjustments to prescription.	K089	Knowledge of methods for evaluating visual acuity after the trial period.
T54	Perform over-refraction to evaluate need for adjustments to prescription after trial period.	K091	Knowledge of methods for performing over-refraction after the trial period.
T55	Verify contact lens fit and eye health using slit-lamp.	K092	Knowledge of procedures for using a slit-lamp to assess fit of contact lenses.
		K093	Knowledge of methods for verifying contact lens fit.

NOTE: Task statements shaded in blue were identified by optometrists in the December 2022 workshop as the only tasks performed by optometric assistants and the knowledge statements shaded in blue were identified as the only knowledge required by optometric assistants.

04 OFFICE MANAGEMENT

This area describes the optometric assistant's knowledge of managing office supplies and patient documentation, including keeping and transmitting patient records while maintaining privacy requirements.

0401 Inventory

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
		K104	Knowledge of ANSI standards for contact lenses.

NOTE: Task statements shaded in blue were identified by optometrists in the December 2022 workshop as the only tasks performed by optometric assistants and the knowledge statements shaded in blue were identified as the only knowledge required by optometric assistants.

CHAPTER 5 | DESCRIPTION OF PRACTICE

TASK-KNOWLEDGE LINKAGE

The SMEs who participated in the October workshop confirmed the final linkage of tasks with associated knowledge statements. The SMEs worked collaboratively to verify that the knowledge statements that were linked to each task were critical to effective performance of that task.

CONTENT AREAS AND WEIGHTS

The SMEs in the October 2022 workshop were asked to finalize the weights for content areas that would complete the description of practice. OPES test specialists presented the SMEs with preliminary weights of the content areas. The preliminary weights had been calculated by dividing the sum of the criticality indices for the tasks in each content area by the overall sum of the criticality indices for all tasks, as shown below.

$$\frac{\text{Sum of Criticality Indices for Tasks in Content Area}}{\text{Sum of Criticality Indices for All Tasks}} = \text{Percent Weight of Content Area}$$

The SMEs evaluated the preliminary content area weights in terms of how well they reflected the relative importance of each content area to entry level practice of the optometric assistant occupation in California. Through discussion, the SMEs determined that adjustments to content area weights were necessary to more accurately reflect the relative importance of each area. A summary of the preliminary and final content area weights for the description of practice is presented in Table 13.

TABLE 13 – CONTENT AREA WEIGHTS

CONTENT AREA	PRELIMINARY PERCENT WEIGHTS	FINAL PERCENT WEIGHTS
01 PATIENT ASSESSMENT	20	40
02 SPECTACLE FITTING	31	15
03 CONTACT LENS EVALUATION	22	15
04 OFFICE MANAGEMENT	27	30
Total	100	100

During the October 2022 workshop, the content areas, subareas, and associated weights were finalized by the SMEs and form the basis of the California optometric assistant description of practice that is presented in Table 14.

TABLE 14 CALIFORNIA OPTOMETRIC ASSISTANT DESCRIPTION OF PRACTICE*

01 PATIENT ASSESSMENT

This area describes the optometric assistant's knowledge of performing tests to determine the patient's current eye health and vision needs; and of determining the patient's insurance coverage.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T01	Verify patient insurance to determine coverage for services.	K001	Knowledge of patient insurance types to determine coverage for services.
		K002	Knowledge of different insurance plans (for example, HMO, PPO).
T02	Obtain patient medical and vision history to determine reason for current visit.	K003	Knowledge of methods for eliciting patient medical and vision history.
		K004	Knowledge of available resources for obtaining a translator to assist in obtaining patient medical and vision history.
		K005	Knowledge of medical terminology related to optometry.
		K006	Knowledge of anatomy and physiology of the eye.
T03	Determine prescription of current eyewear using a lensometer.	K007	Knowledge of methods for using a lensometer to determine prescription.
T04	Perform visual field tests.	K008	Knowledge of methods for performing visual field tests.
		K009	Knowledge of different tests used to evaluate visual field.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T05	Perform autorefraction to determine patient refractive error.	K010	Knowledge of methods and procedures for performing autorefraction.
		K011	Knowledge of tools used to perform autorefraction.
T06	Perform tonometry to determine patient intraocular pressure.	K012	Knowledge of methods and procedures for determining intraocular pressure.
		K013	Knowledge of tools used for determining intraocular pressure (for example, pressure gun, Tono-Pen®, auto tonometer).
T07	Perform optical coherence tomography (OCT) to screen for abnormalities in layers of retina.	K014	Knowledge of methods and procedures for performing optical coherence tomography.
		K015	Knowledge of signs of retinal disease.
T08	Perform fundus test to screen for retinal disease.	K016	Knowledge of methods and procedures for performing fundus test.
		K015	Knowledge of signs of retinal disease.
T09	Perform depth perception tests.	K017	Knowledge of methods and procedures for evaluating depth perception.
T10	Perform visual acuity test.	K018	Knowledge of methods and procedures for evaluating visual acuity.
T11	Perform Ishihara test to screen patient for color vision deficiencies.	K019	Knowledge of methods and procedures for evaluating color vision.
T12	Determine pupillary distance using pupillometer.	K020	Knowledge of methods and procedures for determining pupillary distance.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T13	Apply mydriatics to dilate patient pupils.	K021	Knowledge of methods for administering eyedrops.
		K022	Knowledge of types of eyedrops used for dilating pupils.
		K023	Knowledge of procedures for dilating pupils.
T14	Perform cycloplegic refraction to determine patient prescription.	K021	Knowledge of methods for administering eyedrops.
		K024	Knowledge of types of eyedrops used for cycloplegic refraction.
		K025	Knowledge of methods for determining prescriptions for pediatric patients.
T15	Evaluate contact lens wear schedule preferences, needs, and goals when patients are considering or requesting contact lenses.	K026	Knowledge of manufacturer recommended contact lens wear schedules.
		K027	Knowledge of methods for encouraging patient compliance.
T16	Provide information regarding different types of contact lenses (for example, soft vs. RGP, spherical vs. toric) and wear schedules.	K026	Knowledge of manufacturer recommended contact lens wear schedules.
		K028	Knowledge of available contact lens types and materials.

02 SPECTACLE FITTING

This area describes the optometric assistant's knowledge of determining, adjusting, and providing education regarding the types of spectacle lenses best suited for the patient based on the optometrist's recommendation and the patient's needs.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T17	Determine spectacle frame design by evaluating patient prescription and needs.	K029	Knowledge of lifestyle factors and hobbies that affect eyewear selection.
		K030	Knowledge of advantages and disadvantages of different types of spectacle frame design and materials.
		K031	Knowledge of methods for educating patients about eyewear designs and features.
		K032	Knowledge of ANSI standards for safety eyewear.
T18	Determine types of spectacle lens materials (for example, glass, CR-39, polycarbonate, trivex, high-index) by evaluating patient prescription and needs.	K029	Knowledge of lifestyle factors and hobbies that affect eyewear selection.
		K033	Knowledge of different types of lens features and their functions (for example, polarization, photochromic, anti-reflective).
		K034	Knowledge of the advantages and disadvantages of different lens materials.
		K032	Knowledge of ANSI standards for safety eyewear.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T19	Determine spectacle lens type and design (for example, single vision, multifocal) by evaluating patient prescription and needs.	K029	Knowledge of lifestyle factors and hobbies that affect eyewear selection.
		K033	Knowledge of different types of lens features and their functions (for example, polarization, photochromic, anti-reflective).
		K035	Knowledge of methods for educating patients about eyewear designs and features.
		K036	Knowledge of different designs of multifocal lenses (for example, progressive, bifocal, trifocal).
		K032	Knowledge of ANSI standards for safety eyewear.
T20	Determine secondary lens options (for example, occupational, low vision, sports vision, blue light protection) and sun protection by evaluating patient prescription and needs.	K029	Knowledge of lifestyle factors and hobbies that affect eyewear selection.
		K033	Knowledge of different types of lens features and their functions (for example, polarization, photochromic, anti-reflective).
		K035	Knowledge of methods for educating patients about eyewear designs and features.
		K037	Knowledge of the need for secondary lenses and sun protection.
T21	Convert spectacle lens prescriptions to intermediate or reading lenses.	K038	Knowledge of methods for modifying spectacle lens prescriptions for intermediate or reading powers.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T22	Determine out-of-pocket costs to assist patients with spectacle selection.	K039	Knowledge of methods for calculating out-of-pocket eyewear costs.
T23	Pre-adjust spectacle frame on patients to ensure optimal fit.	K040	Knowledge of tools used to adjust spectacle frames during pre-fitting.
		K041	Knowledge of methods for pre-adjusting spectacle frames.
T24	Fit and adjust frame on patient to ensure accurate measurement.	K041	Knowledge of methods for pre-adjusting spectacle frames.
		K042	Knowledge of the effect of frame tilt on fit.
		K043	Knowledge of tools used to adjust spectacle frames to fit patients.
T25	Measure horizontal pupillary distance to determine optical center.	K044	Knowledge of methods for using a pupillary distance ruler.
		K045	Knowledge of methods for using a pupillometer.
T26	Interpret spectacle lens prescriptions to understand vision corrections.	K046	Knowledge of how to interpret spectacle lens prescriptions.
		K047	Knowledge of methods for converting plus cylinder to minus cylinder.
T27	Identify optical center of spectacle lens using a lensometer.	K048	Knowledge of methods for interpreting lensometer findings to identify optical center of spectacle lens.
		K049	Knowledge of methods for identifying and calculating induced prism.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T28	Verify that spectacles received from laboratory match doctors' prescriptions.	K046	Knowledge of how to interpret spectacle lens prescriptions.
		K050	Knowledge of procedures for comparing spectacles received to doctors' prescriptions.
		K051	Knowledge of methods for interpreting lensometer findings to verify that lenses received from the laboratory match current prescription.
T29	Verify that spectacles received from laboratory match order specifications (frame, lens materials).	K052	Knowledge of procedures for comparing spectacles received to order specifications.
T30	Adjust spectacle frame on patient to ensure optimal fit.	K042	Knowledge of the effect of frame tilt on fit.
		K043	Knowledge of tools used to adjust spectacle frames to fit patients.
		K053	Knowledge of facial features and anatomy that affect spectacle fit.
T31	Assess patient comfort and vision clarity with new spectacles.	K054	Knowledge of methods of assessing visual acuity (for example, Snellen chart, Jaeger card) during the fitting process.
T32	Address patient concerns with spectacles.	K055	Knowledge of methods for troubleshooting common patient concerns.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T33	Identify defects (for example, crazing, distortion) in spectacle lenses.	K056	Knowledge of methods for interpreting lensometer findings to identify defects during the manufacturing process.
		K057	Knowledge of procedures for identifying lens defects.
T34	Provide patients with eyewear warranty information.	K058	Knowledge of after-sale services available to patients.
		K059	Knowledge of eyewear manufacturer warranty policies.
T35	Educate patients on the adaptation period for spectacle lenses.	K060	Knowledge of side effects during adaptation period.
T36	Educate patients on use of multifocal lenses.	K061	Knowledge of side effects of multifocal lenses during adaptation period.
T37	Train patients on methods for cleaning and maintaining spectacle lenses.	K062	Knowledge of methods and materials for cleaning and maintaining spectacle lenses.
T38	Perform common eyewear repairs to extend life of spectacles.	K063	Knowledge of parts used in eyewear repairs.
		K064	Knowledge of methods for repairing eyewear.
T39	Refer patients to prescribing doctor to address prescription problems.	K065	Knowledge of patient prescription problems that require referral to a medical professional.
T40	Refer patients to physician or ophthalmologist to address ocular health issues.	K066	Knowledge of patient issues that require referral to a physician or ophthalmologist.

03 CONTACT LENS EVALUATION

This area describes the optometric assistant's knowledge of determining, fitting, and providing training regarding the types of contact lenses best suited for the patient based on the optometrist's recommendation and the patient's needs.

0301 Initial Evaluation

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T41	Convert spectacle lens prescription to contact lens prescription.	K067	Knowledge of how to interpret contact lens prescriptions.
		K068	Knowledge of base curves, diameters, and thicknesses of contact lenses.
		K069	Knowledge of methods for modifying contact lens prescriptions to accommodate for astigmatism.
T42	Wash hands before handling contact lenses.	K070	Knowledge of methods for maintaining hygiene when handling contact lenses.
T43	Handle different contact lens types based on manufacturer’s recommendations.	K071	Knowledge of methods for handling soft contact lenses.
		K072	Knowledge of methods for handling hard contact lenses.
		K073	Knowledge of methods for handling rigid gas permeable contact lenses.
T44	Dispense trial lenses for patients based on base curve and vision correction requirements.	K074	Knowledge of methods to adjust base curve measurements.
		K068	Knowledge of base curves, diameters, and thicknesses of contact lenses.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T45	Test patient visual acuity while wearing trial contact lenses.	K075	Knowledge of methods for evaluating visual acuity during the trial period.
T46	Train patients on techniques for inserting and removing contact lenses.	K076	Knowledge of methods for training patients to insert and remove contact lenses.
		K077	Knowledge of techniques for inserting and removing soft contact lenses.
		K078	Knowledge of techniques for inserting and removing hard contact lenses.
		K079	Knowledge of techniques for inserting and removing rigid gas permeable contact lenses.
T47	Train patients on methods for cleaning contact lenses.	K080	Knowledge of contact lens solutions for cleaning and lubrication.
		K081	Knowledge of methods for cleaning contact lenses.
T48	Educate patients about contact lens wear schedules.	K082	Knowledge of contact lens wear schedules based on lens type.
		K083	Knowledge of wear schedules for extended-wear contact lenses.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T49	Educate patients about the possible adverse effects of contact lenses.	K084	Knowledge of adverse effects (e.g., eye infections) of contact lens wear.
		K085	Knowledge of adverse effects of wearing contact lenses for more hours than recommended.
		K086	Knowledge of adverse effects of not following manufacturer recommendations for extended-wear contact lenses.
T50	Educate patients about the need for secondary lens options and sun protection.	K087	Knowledge of the need for secondary lenses and sun protection when wearing contact lenses.

0302 Follow-up Evaluation

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T51	Perform follow-up assessment to evaluate comfort and fit of contact lenses.	K088	Knowledge of methods to evaluate fit of contact lens and patient comfort during follow-up consultation.
T52	Test patient visual acuity after trial period to determine need for adjustments to prescription.	K089	Knowledge of methods for evaluating visual acuity after the trial period.
T53	Verify patient ability to insert and remove contact lenses.	K090	Knowledge of methods for verifying patient ability to insert and remove contact lenses.
T54	Perform over-refraction to evaluate need for adjustments to prescription after trial period.	K091	Knowledge of methods for performing over-refraction after the trial period.
T55	Verify contact lens fit and eye health using slit-lamp.	K092	Knowledge of procedures for using a slit-lamp to assess fit of contact lenses.
		K093	Knowledge of methods for verifying contact lens fit.
		K094	Knowledge of indicators of proper contact lens fit.
T56	Provide copies of contact lens prescriptions to patients.	K095	Knowledge of laws and regulations related to providing contact lens prescriptions to patients.

04 OFFICE MANAGEMENT

This area describes the optometric assistant's knowledge of managing office supplies and patient documentation, including keeping and transmitting patient records while maintaining privacy requirements.

0401 Inventory

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T57	Manage inventory of office supplies.	K096	Knowledge of methods for tracking office supply use.
T58	Manage inventory of optometric products (for example, tools, eyedrops, lens solution).	K097	Knowledge of methods for determining rate of optometric product use.
		K098	Knowledge of available optometric supply vendors.
		K099	Knowledge of available optometric supplies.
T59	Place order for lenses including trial lenses and custom orders based on prescription.	K100	Knowledge of methods for determining when to reorder trial lenses.
		K101	Knowledge of contact lens brands most commonly used by patients.
		K102	Knowledge of methods for tracking contact lens inventory expiration dates.
		K103	Knowledge of methods for tracking contact lens product availability.
T60	Verify that patient prescriptions match the packaged contact lenses.	K104	Knowledge of ANSI standards for contact lenses.
		K105	Knowledge of methods for interpreting contact lens prescription labels.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T61	Identify defects (e.g., tears, warping) in contact lenses and notify manufacturer.	K106	Knowledge of methods for identifying defects in contact lenses.
		K107	Knowledge of contact lens manufacturer return policies.

0402 Record Keeping

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T62	Manage schedule of patient appointments.	K108	Knowledge of electronic health records (EHR) scheduling software.
		K109	Knowledge of tools used to track and schedule patient appointments.
T63	Contact insurance companies to determine patient coverage.	K110	Knowledge of insurance eligibility criteria.
		K111	Knowledge of methods for identifying patient copay.
		K112	Knowledge of methods for determining patient coverage.
		K113	Knowledge of insurance coverage categories.
		K114	Knowledge of insurance billing codes.
T64	Keep patient records in accordance with laws and regulations.	K115	Knowledge of methods for maintaining electronic health records (EHR).
		K116	Knowledge of laws and regulations related to electronic health records (EHR).
		K117	Knowledge of laws and regulations related to maintaining patient records.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T65	Obtain patient authorization to release records in accordance with laws and regulations.	K116	Knowledge of laws and regulations related to electronic health records (EHR).
		K117	Knowledge of laws and regulations related to maintaining patient records.
		K118	Knowledge of HIPAA requirements for patient consent for release of medical records.
T66	Transmit patient records in accordance with laws and regulations.	K116	Knowledge of laws and regulations related to electronic health records (EHR).
		K119	Knowledge of laws and regulations related to transmitting patient records.
		K118	Knowledge of HIPAA requirements for patient consent for release of medical records.
T67	Document prescription, assessment, and fitting information in patient records.	K120	Knowledge of medical terminology used when transcribing patient information.
		K121	Knowledge of abbreviations used when transcribing patient information.
T68	Provide billing information to patients and insurers.	K122	Knowledge of diagnosis and procedure codes used by insurance companies.
		K123	Knowledge of billing software.
T69	Provide referral information to other medical professionals.	K124	Knowledge of laws and regulations related to patient referrals.
		K125	Knowledge of methods for interpreting doctors' notes when providing referral information.

TASK NO.	TASK STATEMENTS	K NO.	KNOWLEDGE STATEMENTS
T70	Provide patient prescription information to pharmacies.	K126	Knowledge of electronic prescribing software.
		K127	Knowledge of laws and regulations related to providing prescription information.

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CHAPTER 6 | OPTICIANRY SCOPE OF PRACTICE STUDY

In February 2023, OPES test specialists facilitated a workshop with SMEs consisting of two optometrists, two SLDs, and four SLDs/CLDs. The purpose of the workshop was to evaluate the optometric assistant description of practice against the CLD and SLD descriptions of practice. For each task in the optometric assistant description of practice, the SMEs discussed if that task is and should continue to be performed by optometric assistants, if the task is performed by CLDs or SLDs, or if the task is performed by optometric assistants and CLDs or SLDs but should only be performed by CLDs or SLDs.

When determining if a specific task should be performed by optometric assistants, CLDs or SLDs, the SMEs considered specific knowledge and training, and whether performing the task posed a safety concern to patients. Based on the discussion, 25 tasks (13, 14, 17, 18, 19, 20, 21, 23, 24, 25, 28, 29, 30, 31, 32, 33, 35, 36, 38, 41, 43, 51, 52, 55, and 61) on the optometric assistant description of practice were identified as tasks that are safety concerns and should only be performed by CLDs or SLDs. The SMEs believed that optometric assistants do not possess the necessary level of knowledge and training to safely perform them. These 25 tasks are highlighted in Appendix D. In addition, four additional tasks were identified as missing from the optometric assistant description of practice (72, 73, 74, and 75). The SMEs recommended adding these tasks to the description of practice. The tasks were subsequently added. They are also highlighted in Appendix D.

After the review of the optometric description of practice was completed, the SMEs engaged in a discussion regarding what changes to the optometric assistant, CLD and SLD professions, if any, would increase public safety. The SME consensus was that a clear definition of the role of optometric assistants should be established, and optometric assistants should be registered with the Board to ensure the role is adhered to. The definition of the role should detail the tasks optometric assistants can perform and the intent of the tasks. Additional suggestions included:

- Developing an examination which candidates would have to pass to obtain state certification/licensure
- Using an existing national paraoptometric examination which candidates would have to pass to obtain state certification/licensure
- Creating an optometric assistant apprenticeship program as pathway to optometric assistant certification/licensure

No changes to the SLD and CLD professions were recommended by the SMEs.

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CHAPTER 7 | CONCLUSIONS AND RECOMMENDATIONS

The procedures employed to perform the OA of the optometric assistant occupation were based on a content validation strategy to establish a preliminary description of practice for the optometric assistant occupation. The description of practice identifies the tasks and knowledge critical to safe and competent practice of the optometric assistant occupation in California. Results of this OA provide information regarding current work that can be used by the Board to make regulatory decisions. However, the Board should take into consideration the relatively low number of SMEs who participated in the study.

This report provides all documentation necessary to verify that the occupational analysis has been completed in accordance with legal, occupational, and technical standards.

The conclusions and recommendations resulting from the opticianry scope of practice study were based on the expert opinions of optometrists, contact lens dispensers, and spectacle lens dispensers. The SMEs identified tasks that they believe do not belong on the optometric assistant description of practice because optometric assistants do not possess the necessary level of knowledge and training to safely perform them. The SMEs made recommendations regarding the optometric assistant profession based on regulations and training implemented by other states. The SMEs recommended that a clear definition of the role of optometric assistants should be established, and optometric assistants should be registered with the Board to ensure the role is adhered to. The definition of the role should detail the tasks optometric assistants can perform and the intent of the tasks.

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APPENDIX A | RESPONDENTS BY REGION

LOS ANGELES COUNTY AND VICINITY

County of Practice	Frequency
Los Angeles	11
Orange	7
Total	18

RIVERSIDE AND VICINITY

County of Practice	Frequency
Riverside	2
Total	2

SACRAMENTO VALLEY

County of Practice	Frequency
Butte	1
Yolo	1
Total	2

SAN DIEGO COUNTY AND VICINITY

County of Practice	Frequency
San Diego	7
Total	7

SAN FRANCISCO BAY AREA

County of Practice	Frequency
Alameda	2
Contra Costa	6
Napa	2
Santa Clara	4
Solano	1
Total	15

SAN JOAQUIN VALLEY

County of Practice	Frequency
Fresno	1
Merced	1
Total	2

SHASTA-CASCADE

County of Practice	Frequency
Shasta	2
Total	2

SIERRA MOUNTAIN VALLEY

County of Practice	Frequency
El Dorado	2
Total	2

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APPENDIX B | CRITICALITY INDICES FOR ALL TASKS BY CONTENT AREA

	01 PATIENT ASSESSMENT			
	TASK	MEAN IMPORTANCE	MEAN FREQUENCY	CRITICALITY INDEX
T01	Verify patient insurance to determine coverage for services.	4.03	4.61	18.56
T05	Perform autorefraction to determine patient refractive error.	3.91	4.30	16.82
T03	Determine prescription of current eyewear using a lensometer.	3.97	4.18	16.60
T02	Obtain patient medical and vision history to determine reason for current visit.	4.00	4.06	16.24
T04	Perform visual field tests.	3.33	3.67	12.22
T06	Perform tonometry to determine patient intraocular pressure.	3.30	3.67	12.11
T16	Provide information regarding different types of contact lenses (for example, soft vs. RGP, spherical vs. toric) and wear schedules.	3.12	3.67	11.44
T15	Evaluate contact lens wear schedule preferences, needs, and goals when patients are considering or requesting contact lenses.	3.09	3.27	10.12
T08	Perform fundus test to screen for retinal disease.	2.82	3.39	9.56
T07	Perform optical coherence tomography (OCT) to screen for abnormalities in layers of retina.	2.76	3.28	9.05
T10	Perform visual acuity test.	2.70	3.00	8.09

01 PATIENT ASSESSMENT

	TASK	MEAN IMPORTANCE	MEAN FREQUENCY	CRITICALITY INDEX
T12	Determine pupillary distance using pupillometer.	2.55	2.94	7.48
T13	Apply mydriatics to dilate patient pupils.	2.27	3.12	7.09
T11	Perform Ishihara test to screen patient for color vision deficiencies.	1.97	2.27	4.48
T09	Perform depth perception tests.	1.79	1.91	3.41
T14	Perform cycloplegic refraction to determine patient prescription.	1.33	1.91	2.55

	02 SPECTACLE FITTING			
	TASK	MEAN IMPORTANCE	MEAN FREQUENCY	CRITICALITY INDEX
T35	Educate patients on the adaptation period for spectacle lenses.	2.89	3.89	11.26
T32	Address patient concerns with spectacles.	2.97	3.79	11.25
T36	Educate patients on use of multifocal lenses.	2.89	3.71	10.74
T28	Verify that spectacles received from laboratory match doctors' prescriptions.	2.71	3.89	10.56
T27	Identify optical center of spectacle lens using a lensometer.	2.69	3.66	9.83
T19	Determine spectacle lens type and design (for example, single vision, multifocal) by evaluating patient prescription and needs.	2.50	3.72	9.31
T39	Refer patients to prescribing doctor to address prescription problems.	2.57	3.61	9.28
T37	Train patients on methods for cleaning and maintaining spectacle lenses.	2.54	3.59	9.11
T40	Refer patients to physician or ophthalmologist to address ocular health issues.	2.57	3.54	9.09
T26	Interpret spectacle lens prescriptions to understand vision corrections.	2.53	3.39	8.60
T31	Assess patient comfort and vision clarity with new spectacles.	2.38	3.61	8.58
T29	Verify that spectacles received from laboratory match order specifications (frame, lens materials).	2.41	3.54	8.53
T33	Identify defects (for example, crazing, distortion) in spectacle lenses.	2.28	3.62	8.24
T17	Determine spectacle frame design by evaluating patient prescription and needs.	2.37	3.45	8.16

	02 SPECTACLE FITTING			
	TASK	MEAN IMPORTANCE	MEAN FREQUENCY	CRITICALITY INDEX
T30	Adjust spectacle frame on patient to ensure optimal fit.	2.24	3.63	8.14
T24	Fit and adjust frame on patient to ensure accurate measurement.	2.17	3.74	8.10
T18	Determine types of spectacle lens materials (for example, glass, CR-39, polycarbonate, trivex, high-index) by evaluating patient prescription and needs.	2.30	3.41	7.85
T34	Provide patients with eyewear warranty information.	2.37	3.28	7.77
T38	Perform common eyewear repairs to extend life of spectacles.	2.25	3.19	7.18
T22	Determine out-of-pocket costs to assist patients with spectacle selection.	2.20	3.25	7.15
T23	Pre-adjust spectacle frame on patients to ensure optimal fit.	2.13	3.33	7.11
T20	Determine secondary lens options (for example, occupational, low vision, sports vision, blue light protection) and sun protection by evaluating patient prescription and needs.	2.00	3.25	6.50
T25	Measure horizontal pupillary distance to determine optical center.	1.83	3.07	5.63
T21	Convert spectacle lens prescriptions to intermediate or reading lenses.	1.73	3.00	5.20

	03 CONTACT LENS EVALUATION			
	0301 Initial Evaluation			
	TASK	MEAN IMPORTANCE	MEAN FREQUENCY	CRITICALITY INDEX
T42	Wash hands before handling contact lenses.	4.43	4.89	21.67
T48	Educate patients about contact lens wear schedules.	3.68	4.46	16.42
T46	Train patients on techniques for inserting and removing contact lenses.	3.50	4.54	15.88
T47	Train patients on methods for cleaning contact lenses.	3.50	4.46	15.63
T43	Handle different contact lens types based on manufacturer's recommendations.	3.57	4.11	14.67
T49	Educate patients about the possible adverse effects of contact lenses.	3.21	4.39	14.12
T44	Dispense trial lenses for patients based on base curve and vision correction requirements.	3.46	4.04	13.98
T50	Educate patients about the need for secondary lens options and sun protection.	2.57	3.68	9.46
T45	Test patient visual acuity while wearing trial contact lenses.	1.89	2.70	5.12
T41	Convert spectacle lens prescription to contact lens prescription.	1.43	2.37	3.39

	0302 Follow-up Evaluation			
	TASK	MEAN IMPORTANCE	MEAN FREQUENCY	CRITICALITY INDEX
T56	Provide copies of contact lens prescriptions to patients.	3.85	4.07	15.69
T53	Verify patient ability to insert and remove contact lenses.	3.07	3.74	11.50
T51	Perform follow-up assessment to evaluate comfort and fit of contact lenses.	2.22	2.93	6.50
T52	Test patient visual acuity after trial period to determine need for adjustments to prescription.	1.44	2.35	3.39
T55	Verify contact lens fit and eye health using slit-lamp.	0.85	1.92	1.64
T54	Perform over-refraction to evaluate need for adjustments to prescription after trial period.	0.93	1.65	1.53

	04 OFFICE MANAGEMENT			
	0401 Inventory			
	TASK	MEAN IMPORTANCE	MEAN FREQUENCY	CRITICALITY INDEX
T60	Verify that patient prescriptions match the packaged contact lenses.	4.11	4.52	18.58
T59	Place order for lenses including trial lenses and custom orders based on prescription.	3.59	4.19	15.04
T57	Manage inventory of office supplies.	3.52	3.85	13.55
T58	Manage inventory of optometric products (for example, tools, eyedrops, lens solution).	3.15	3.70	11.66
T61	Identify defects (e.g., tears, warping) in contact lenses and notify manufacturer.	2.37	3.48	8.25
	0402 Record Keeping			
	TASK	MEAN IMPORTANCE	MEAN FREQUENCY	CRITICALITY INDEX
T64	Keep patient records in accordance with laws and regulations.	4.78	4.70	22.47
T67	Document prescription, assessment, and fitting information in patient records.	4.41	4.56	20.08
T62	Manage schedule of patient appointments.	4.41	4.52	19.91
T65	Obtain patient authorization to release records in accordance with laws and regulations.	4.15	4.48	18.59
T66	Transmit patient records in accordance with laws and regulations.	4.19	4.41	18.45
T68	Provide billing information to patients and insurers.	3.96	4.26	16.88
T63	Contact insurance companies to determine patient coverage.	3.78	4.37	16.51
T69	Provide referral information to other medical professionals.	3.33	3.96	13.21
T70	Provide patient prescription information to pharmacies.	2.67	3.48	9.28

APPENDIX C | IMPORTANCE RATINGS FOR ALL KNOWLEDGE STATEMENTS BY CONTENT AREA

01 PATIENT ASSESSMENT

	KNOWLEDGE STATEMENT	MEAN IMPORTANCE
K028	Knowledge of available contact lens types and materials.	4.19
K007	Knowledge of methods for using a lensometer to determine prescription.	4.15
K026	Knowledge of manufacturer recommended contact lens wear schedules.	4.08
K002	Knowledge of different insurance plans (for example, HMO, PPO).	4.04
K027	Knowledge of methods for encouraging patient compliance.	4.00
K005	Knowledge of medical terminology related to optometry.	3.88
K011	Knowledge of tools used to perform autorefraction.	3.88
K010	Knowledge of methods and procedures for performing autorefraction.	3.85
K001	Knowledge of insurance agreements between medical insurers and vision insurers.	3.81
K003	Knowledge of methods for eliciting patient medical and vision history.	3.77
K013	Knowledge of tools used for determining intraocular pressure (for example, pressure gun, Tono-Pen®, auto tonometer).	3.77
K021	Knowledge of methods for administering eyedrops.	3.65
K012	Knowledge of methods and procedures for determining intraocular pressure.	3.54
K006	Knowledge of anatomy and physiology of the eye.	3.50
K023	Knowledge of procedures for dilating pupils.	3.50
K008	Knowledge of methods for performing visual field tests.	3.46
K022	Knowledge of types of eyedrops used for dilating pupils.	3.46

	01 PATIENT ASSESSMENT	
	KNOWLEDGE STATEMENT	MEAN IMPORTANCE
K009	Knowledge of different tests used to evaluate visual field.	3.35
K020	Knowledge of methods and procedures for determining pupillary distance.	3.35
K016	Knowledge of methods and procedures for performing fundus test.	3.23
K004	Knowledge of available resources for obtaining a translator to assist in obtaining patient medical and vision history.	3.12
K015	Knowledge of signs of retinal disease.	3.08
K018	Knowledge of methods and procedures for evaluating visual acuity.	2.96
K019	Knowledge of methods and procedures for evaluating color vision.	2.72
K014	Knowledge of methods and procedures for performing optical coherence tomography.	2.65
K025	Knowledge of methods for determining prescriptions for pediatric patients.	2.46
K024	Knowledge of types of eyedrops used for cycloplegic refraction.	2.38
K017	Knowledge of methods and procedures for evaluating depth perception.	2.31

02 SPECTACLE FITTING

	KNOWLEDGE STATEMENT	MEAN IMPORTANCE
K036	Knowledge of different designs of multifocal lenses (for example, progressive, bifocal, trifocal).	4.08
K029	Knowledge of lifestyle factors and hobbies that affect eyewear selection.	3.67
K046	Knowledge of how to interpret spectacle lens prescriptions.	3.54
K055	Knowledge of methods for troubleshooting common patient concerns.	3.52
K037	Knowledge of the need for secondary lenses and sun protection.	3.50
K030	Knowledge of advantages and disadvantages of different types of spectacle frame design and materials.	3.46
K061	Knowledge of side effects of multifocal lenses during adaptation period.	3.43
K051	Knowledge of methods for interpreting lensometer findings to verify that lenses received from the laboratory match current prescription.	3.42
K050	Knowledge of procedures for comparing spectacles received to doctors' prescriptions.	3.38
K060	Knowledge of side effects during adaptation period.	3.38
K033	Knowledge of different types of lens features and their functions (for example, polarization, photochromic, anti-reflective).	3.33
K052	Knowledge of procedures for comparing spectacles received to order specifications.	3.29
K039	Knowledge of methods for calculating out-of-pocket eyewear costs.	3.17
K062	Knowledge of methods and materials for cleaning and maintaining spectacle lenses.	3.17
K034	Knowledge of the advantages and disadvantages of different lens materials.	3.00
K045	Knowledge of methods for using a pupillometer.	2.96

02 SPECTACLE FITTING

	KNOWLEDGE STATEMENT	MEAN IMPORTANCE
K048	Knowledge of methods for interpreting lensometer findings to identify optical center of spectacle lens.	2.96
K056	Knowledge of methods for interpreting lensometer findings to identify defects during the manufacturing process.	2.96
K031	Knowledge of methods for educating patients about eyewear designs and features.	2.88
K035	Knowledge of methods for educating patients about eyewear designs and features.	2.88
K059	Knowledge of eyewear manufacturer warranty policies.	2.83
K043	Knowledge of tools used to adjust spectacle frames to fit patients.	2.79
K040	Knowledge of tools used to adjust spectacle frames during pre-fitting.	2.75
K041	Knowledge of methods for pre-adjusting spectacle frames.	2.75
K063	Knowledge of parts used in eyewear repairs.	2.75
K066	Knowledge of patient issues that require referral to a physician or ophthalmologist.	2.71
K064	Knowledge of methods for repairing eyewear.	2.71
K053	Knowledge of facial features and anatomy that affect spectacle fit.	2.71
K058	Knowledge of after-sale services available to patients.	2.71
K057	Knowledge of procedures for identifying lens defects.	2.71
K038	Knowledge of methods for modifying spectacle lens prescriptions for intermediate or reading powers.	2.67
K044	Knowledge of methods for using a pupillary distance ruler.	2.63

	02 SPECTACLE FITTING	
	KNOWLEDGE STATEMENT	MEAN IMPORTANCE
K042	Knowledge of the effect of frame tilt on fit.	2.50
K065	Knowledge of patient prescription problems that require referral to a medical professional.	2.38
K054	Knowledge of methods of assessing visual acuity (for example, Snellen chart, Jaeger card) during the fitting process.	2.33
K047	Knowledge of methods for converting plus cylinder to minus cylinder.	2.21
K032	Knowledge of ANSI standards for safety eyewear.	1.92
K049	Knowledge of methods for identifying and calculating induced prism.	1.83

	03 CONTACT LENS EVALUATION	
	0301 Initial Evaluation	
	KNOWLEDGE STATEMENT	MEAN IMPORTANCE
K070	Knowledge of methods for maintaining hygiene when handling contact lenses.	4.39
K076	Knowledge of methods for training patients to insert and remove contact lenses.	4.30
K077	Knowledge of techniques for inserting and removing soft contact lenses.	4.30
K085	Knowledge of adverse effects of wearing contact lenses for more hours than recommended.	4.26
K086	Knowledge of adverse effects of not following manufacturer recommendations for extended-wear contact lenses.	4.22
K080	Knowledge of contact lens solutions for cleaning and lubrication.	4.22
K081	Knowledge of methods for cleaning contact lenses.	4.22
K082	Knowledge of contact lens wear schedules based on lens type.	4.17
K071	Knowledge of methods for handling soft contact lenses.	4.13
K067	Knowledge of how to interpret contact lens prescriptions.	3.96
K083	Knowledge of wear schedules for extended-wear contact lenses.	3.91
K084	Knowledge of adverse effects (e.g., eye infections) of contact lens wear.	3.91
K068	Knowledge of base curves, diameters, and thicknesses of contact lenses.	3.87
K078	Knowledge of techniques for inserting and removing hard contact lenses.	3.70
K072	Knowledge of methods for handling hard contact lenses.	3.65

0301 Initial Evaluation

	KNOWLEDGE STATEMENT	MEAN IMPORTANCE
K073	Knowledge of methods for handling rigid gas permeable contact lenses.	3.65
K087	Knowledge of the need for secondary lenses and sun protection when wearing contact lenses.	3.52
K079	Knowledge of techniques for inserting and removing rigid gas permeable contact lenses.	3.52
K069	Knowledge of methods for modifying contact lens prescriptions to accommodate for astigmatism.	2.13
K075	Knowledge of methods for evaluating visual acuity during the trial period.	2.04
K074	Knowledge of methods to adjust base curve measurements.	1.83

0302 Follow-up Evaluation

	KNOWLEDGE STATEMENT	MEAN IMPORTANCE
K095	Knowledge of laws and regulations related to providing contact lens prescriptions to patients.	4.13
K090	Knowledge of methods for verifying patient ability to insert and remove contact lenses.	3.70
K088	Knowledge of methods to evaluate fit of contact lens and patient comfort during follow-up consultation.	2.61
K089	Knowledge of methods for evaluating visual acuity after the trial period.	2.35
K094	Knowledge of indicators of proper contact lens fit.	2.26
K093	Knowledge of methods for verifying contact lens fit.	2.04
K091	Knowledge of methods for performing over-refraction after the trial period.	1.87
K092	Knowledge of procedures for using a slit-lamp to assess fit of contact lenses.	1.74

	04 OFFICE MANAGEMENT	
	0401 Inventory	
	KNOWLEDGE STATEMENT	MEAN IMPORTANCE
K101	Knowledge of contact lens brands most commonly used by patients.	4.13
K103	Knowledge of methods for tracking contact lens product availability.	3.87
K102	Knowledge of methods for tracking contact lens inventory expiration dates.	3.83
K100	Knowledge of methods for determining when to reorder trial lenses.	3.78
K105	Knowledge of methods for interpreting contact lens prescription labels.	3.78
K096	Knowledge of methods for tracking office supply use.	3.39
K107	Knowledge of contact lens manufacturer return policies.	3.30
K099	Knowledge of available optometric supplies.	3.30
K097	Knowledge of methods for determining rate of optometric product use.	3.22
K098	Knowledge of available optometric supply vendors.	3.09
K106	Knowledge of methods for identifying defects in contact lenses.	3.09
K104	Knowledge of ANSI standards for contact lenses.	2.74

	0402 Record Keeping	
	KNOWLEDGE STATEMENT	MEAN IMPORTANCE
K110	Knowledge of insurance eligibility criteria.	4.65
K118	Knowledge of HIPAA requirements for patient consent for release of medical records.	4.61
K112	Knowledge of methods for determining patient coverage.	4.57
K113	Knowledge of insurance coverage categories.	4.57
K119	Knowledge of laws and regulations related to transmitting patient records.	4.52
K109	Knowledge of tools used to track and schedule patient appointments.	4.48
K111	Knowledge of methods for identifying patient copay.	4.48
K127	Knowledge of laws and regulations related to providing prescription information.	4.48
K117	Knowledge of laws and regulations related to maintaining patient records.	4.48
K108	Knowledge of electronic health records (EHR) scheduling software.	4.22
K124	Knowledge of laws and regulations related to patient referrals.	4.13
K120	Knowledge of medical terminology used when transcribing patient information.	4.09
K115	Knowledge of methods for maintaining electronic health records (EHR).	4.04
K116	Knowledge of laws and regulations related to electronic health records (EHR).	4.00
K121	Knowledge of abbreviations used when transcribing patient information.	3.91
K125	Knowledge of methods for interpreting doctors' notes when providing referral information.	3.91
K114	Knowledge of insurance billing codes.	3.83
K122	Knowledge of diagnosis and procedure codes used by insurance companies.	3.83
K126	Knowledge of electronic prescribing software.	3.65
K123	Knowledge of billing software.	3.52

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APPENDIX D | OPTICIANRY SCOPE OF PRACTICE STUDY*

	01 PATIENT ASSESSMENT
	TASK
T01	Verify patient insurance to determine coverage for services.
T02	Obtain patient medical and vision history to determine reason for current visit.
T03	Determine prescription of current eyewear using a lensometer.
T04	Perform visual field tests.
T05	Perform autorefraction to determine patient refractive error.
T06	Perform tonometry to determine patient intraocular pressure.
T07	Perform optical coherence tomography (OCT) to screen for abnormalities in layers of retina.
T08	Perform fundus test to screen for retinal disease.
T09	Perform depth perception tests.
T10	Perform visual acuity test.
T11	Perform Ishihara test to screen patient for color vision deficiencies.
T12	Determine pupillary distance using pupillometer.
T13	Apply mydriatics to dilate patient pupils.
T14	Perform cycloplegic refraction to determine patient prescription.
T15	Evaluate contact lens wear schedule preferences, needs, and goals when patients are considering or requesting contact lenses.
T16	Provide information regarding different types of contact lenses (for example, soft vs. RGP, spherical vs. toric) and wear schedules.
T71	Perform simple, noninvasive testing of pupils and ocular motility.
T72	Perform preliminary subjective refraction procedures in connection with finalizing subjective refraction procedures performed by an ophthalmologist or optometrist subject to set conditions.
T73	Administer non-controlled substances for ophthalmic purposes (i.e., topical anesthetics).

T74	Clean each instrument after each patient uses them.

NOTE: Tasks shaded in green were identified by SMEs in the February 2023 workshop as safety concerns that should not be performed by optometric assistants. Tasks shaded in orange were identified by SMEs in the February 2023 workshop as missing from the optometric assistant description of practice and were subsequently added.

	02 SPECTACLE FITTING
	TASK
T17	Determine spectacle frame design by evaluating patient prescription and needs.
T18	Determine types of spectacle lens materials (for example, glass, CR-39, polycarbonate, trivex, high-index) by evaluating patient prescription and needs.
T19	Determine spectacle lens type and design (for example, single vision, multifocal) by evaluating patient prescription and needs.
T20	Determine secondary lens options (for example, occupational, low vision, sports vision, blue light protection) and sun protection by evaluating patient prescription and needs.
T21	Convert spectacle lens prescriptions to intermediate or reading lenses.
T22	Determine out-of-pocket costs to assist patients with spectacle selection.
T23	Pre-adjust spectacle frame on patients to ensure optimal fit.
T24	Fit and adjust frame on patient to ensure accurate measurement.
T25	Measure horizontal pupillary distance to determine optical center.
T26	Interpret spectacle lens prescriptions to understand vision corrections.
T27	Identify optical center of spectacle lens using a lensometer.
T28	Verify that spectacles received from laboratory match doctors' prescriptions.
T29	Verify that spectacles received from laboratory match order specifications (frame, lens materials).
T30	Adjust spectacle frame on patient to ensure optimal fit.
T31	Assess patient comfort and vision clarity with new spectacles.
T32	Address patient concerns with spectacles.
T33	Identify defects (for example, crazing, distortion) in spectacle lenses.
T34	Provide patients with eyewear warranty information.

NOTE: Tasks shaded in green were identified by SMEs in the February 2023 workshop as safety concerns that should not be performed by optometric assistants.

	02 SPECTACLE FITTING
	TASK
T36	Educate patients on use of multifocal lenses.
T37	Train patients on methods for cleaning and maintaining spectacle lenses.
T38	Perform common eyewear repairs to extend life of spectacles.
T39	Refer patients to prescribing doctor to address prescription problems.
T40	Refer patients to physician or ophthalmologist to address ocular health issues.
	03 CONTACT LENS EVALUATION
	0301 Initial Evaluation
	TASK
T41	Convert spectacle lens prescription to contact lens prescription.
T42	Wash hands before handling contact lenses.
T43	Handle different contact lens types based on manufacturer's recommendations.
T44	Dispense trial lenses for patients based on base curve and vision correction requirements.
T45	Test patient visual acuity while wearing trial contact lenses.
T46	Train patients on techniques for inserting and removing contact lenses.
T47	Train patients on methods for cleaning contact lenses.
T48	Educate patients about contact lens wear schedules.
T49	Educate patients about the possible adverse effects of contact lenses.
T50	Educate patients about the need for secondary lens options and sun protection.

NOTE: Tasks shaded in green were identified by SMEs in the February 2023 workshop as safety concerns that should not be performed by optometric assistants.

	0302 Follow-up Evaluation
	TASK
T51	Perform follow-up assessment to evaluate comfort and fit of contact lenses.
T52	Test patient visual acuity after trial period to determine need for adjustments to prescription.
T53	Verify patient ability to insert and remove contact lenses.
T54	Perform over-refraction to evaluate need for adjustments to prescription after trial period.
T55	Verify contact lens fit and eye health using slit-lamp.
T56	Provide copies of contact lens prescriptions to patients.
	04 OFFICE MANAGEMENT
	0401 Inventory
	TASK
T57	Manage inventory of office supplies.
T58	Manage inventory of optometric products (for example, tools, eyedrops, lens solution).
T59	Place order for lenses including trial lenses and custom orders based on prescription.
T60	Verify that patient prescriptions match the packaged contact lenses.
T61	Identify defects (e.g., tears, warping) in contact lenses and notify manufacturer.
	0402 Record Keeping
	TASK
T62	Manage schedule of patient appointments.
T63	Contact insurance companies to determine patient coverage.

NOTE: Tasks shaded in green were identified by SMEs in the February 2023 workshop as safety concerns that should not be performed by optometric assistants.

	0402 Record Keeping
	TASK
T64	Keep patient records in accordance with laws and regulations.
T65	Obtain patient authorization to release records in accordance with laws and regulations.
T66	Transmit patient records in accordance with laws and regulations.
T67	Document prescription, assessment, and fitting information in patient records.
T68	Provide billing information to patients and insurers.
T69	Provide referral information to other medical professionals.
T70	Provide patient prescription information to pharmacies.

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APPENDIX E | QUESTIONNAIRE

Optometric Assistant Occupational Analysis Questionnaire

Cover Letter

Dear Optometric Assistants,

The California State Board of Optometry (Board) is conducting an occupational analysis (OA) of the Optometric Assistant profession. The purpose of the OA is to identify the important tasks performed by currently working Optometric Assistants and the knowledge required to perform those tasks. We urgently need your input to ensure an accurate evaluation of the Optometric Assistant profession.

As part of the OA, we have developed a questionnaire to identify the important tasks that Optometric Assistants perform in the profession. The questionnaire will be available online until **October 19, 2022**, 24 hours a day, 7 days a week.

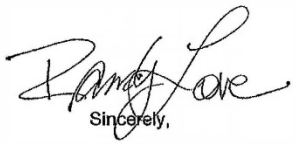
In addition to the questionnaire, the Board would like to invite you to participate in a 1-day workshop. The workshop will be held remotely (through Microsoft Teams) and is tentatively scheduled for October 28th. You will be compensated $300 for your participation. If you are interested in attending the workshop, please provide your contact information at the end of the questionnaire. Providing your contact information does not obligate you to attend. We will send you additional information about the workshop.

Please take the time to complete the questionnaire as it relates to your current work. Your responses will be kept confidential and will not be tied to any of your personal information. Individual responses will be combined with the responses of other Optometric Assistants and only group data will be analyzed.

For your convenience, you do not have to complete the questionnaire in a single session. Before you exit, complete the page that you are on. You can resume where you stopped as long as you reopen the questionnaire from the same computer and use the same web browser. The web link is available 24 hours a day, 7 days a week. The bottom of each page has a progress bar showing you what percentage of the questionnaire you have completed.

To begin the survey, please click Next. Any question marked with an asterisk must be answered before you can progress through the questionnaire. If you have any questions about the survey, please contact Ruxandra Nunn at Ruxandra.Nunn@dca.ca.gov

The Board welcomes your feedback and appreciates your time!



Sincerely,

Randy Love

Assistant Executive Officer California State Board of Optometry

Optometric Assistant Occupational Analysis Questionnaire

Part I - Personal Data

Complete this questionnaire only if you are currently working as an Optometric Assistant in California.

This questionnaire contains a broad range of tasks performed by individuals who work in optical settings. Every Optometric Assistant may not perform all of the tasks or use all of the knowledge contained in this questionnaire. However, your participation is essential, and your contribution will help establish standards for safe and effective optometric assistant practice in the State of California.

Optometric Assistant Occupational Analysis Questionnaire

Part I - Personal Data

The information you provide here is voluntary and confidential. It will be treated as personal information subject to the Information Practices Act (Civil Code section 1798 et seq.) and will be used only for the purpose of aiding in interpreting the task and knowledge ratings that are requested in Parts II and III. Please choose only one answer unless more than one is requested.

* 1. Do you currently work as an Optometric Assistant in California?

- ◯ Yes
- ◯ No

Optometric Assistant Occupational Analysis Questionnaire

Part I - Personal Data

2. How many years have you worked as an Optometric Assistant in California?

- ◯ 0-5 years
- ◯ 6-10 years
- ◯ 11-20 years
- ◯ More than 20 years

3. How many hours per week do you work as an Optometric Assistant?

- ◯ 9 hours or fewer
- ◯ 10-19 hours
- ◯ 20-29 hours
- ◯ 30-39 hours
- ◯ 40-49 hours
- ◯ 50 or more hours

4. Which title below most nearly matches your job title?

- ◯ Manager / Supervisor
- ◯ Optometric Assistant
- ◯ Technician
- ◯ Para-optometric
- ◯ Other (please specify)

5. Which of the following levels of education have you achieved? (check all that apply)

- ☐ On-the-job training
- ☐ Vocational program
- ☐ Associate Degree
- ☐ Bachelor's Degree
- ☐ Master's Degree
- ☐ Doctorate
- ☐ Other (please specify)

6. Which of the following certifications do you hold related to your work as an Optometric Assistant? (Select all that apply)

- [ ] CPO
- [ ] CPOA
- [ ] CPOT
- [ ] COA
- [ ] COT
- [ ] COMT
- [ ] Ophthalmic Scribe Certification (OSC)
- [ ] Contact Lens Dispenser
- [ ] Spectacle Lens Dispenser
- [ ] Dispensing Optician
- [ ] Other (please specify)

7. Which choice below better describes the location of your primary work setting?

- ◯ Urban (50,000 people or more)
- ◯ Rural (fewer than 50,000 people)

Optometric Assistant Occupational Analysis Questionnaire

Part I - Personal Data

8. How would you describe your primary work setting?

- ◯ Retail
- ◯ Private practice
- ◯ Partnership
- ◯ Group practice
- ◯ Corporation
- ◯ Private hospital
- ◯ HMO facility
- ◯ Military/veterans' hospital or clinic
- ◯ Federal facility (nonmilitary)
- ◯ State facility
- ◯ Other (please specify)

9. How many other O**ptometric Assistants** work within your primary work setting?

- ◯ 0
- ◯ 1-3
- ◯ 4-6
- ◯ 7 or more

10. How many SLDs work within your primary work setting?

- ◯ 0
- ◯ 1-3
- ◯ 4-6
- ◯ 7 or more

11. How many CLDs work within your primary work setting?

- ◯ 0
- ◯ 1-3
- ◯ 4-6
- ◯ 7 or more

Optometric Assistant Occupational Analysis Questionnaire

Part I - Personal Data

12. In what California county do you perform the majority of your work?

◯ Alameda	◯ Marin	◯ San Mateo
◯ Alpine	◯ Mariposa	◯ Santa Barbara
◯ Amador	◯ Mendocino	◯ Santa Clara
◯ Butte	◯ Merced	◯ Santa Cruz
◯ Calaveras	◯ Modoc	◯ Shasta
◯ Colusa	◯ Mono	◯ Sierra
◯ Contra Costa	◯ Monterey	◯ Siskiyou
◯ Del Norte	◯ Napa	◯ Solano
◯ El Dorado	◯ Nevada	◯ Sonoma
◯ Fresno	◯ Orange	◯ Stanislaus
◯ Glenn	◯ Placer	◯ Sutter
◯ Humboldt	◯ Plumas	◯ Tehama
◯ Imperial	◯ Riverside	◯ Trinity
◯ Inyo	◯ Sacramento	◯ Tulare
◯ Kern	◯ San Benito	◯ Tuolumne
◯ Kings	◯ San Bernardino	◯ Ventura
◯ Lake	◯ San Diego	◯ Yolo
◯ Lassen	◯ San Francisco	◯ Yuba
◯ Los Angeles	◯ San Joaquin	
◯ Madera	◯ San Luis Obispo	

Optometric Assistant Occupational Analysis Questionnaire

Part II - Task Ratings

INSTRUCTIONS FOR RATING TASK STATEMENTS

This part of the questionnaire contains 71 task statements. Please rate each task as it relates to effective performance of your current work as an Optometric Assistant using the Frequency and Importance scales displayed below.

FREQUENCY RATING SCALE

HOW FREQUENTLY do you perform this task in your current work?

0 - DOES NOT APPLY. I do not perform this task in my current work.
1 - RARELY. I perform this task the least often in my current work relative to other tasks I perform.
2 - SELDOM. I perform this task less often than most other tasks I perform in my current work.
3 - SOMETIMES. I perform this task as often as other tasks I perform in my current

work.
4 - OFTEN. I perform this task more often than most other tasks I perform in my current work.
5 - VERY OFTEN. This task is one of the tasks I perform most often in my current work relative to other tasks I perform.

IMPORTANCE RATING SCALE

HOW IMPORTANT is this task for effective performance in your current work?

0 - DOES NOT APPLY. This task is not required for effective performance in my current work.
1 - NOT IMPORTANT. This task is not important for effective performance in my current work.
2 - FAIRLY IMPORTANT. This task is somewhat important for effective performance in my current work.
3 - IMPORTANT. This task is important for effective performance in my current work.
4 - VERY IMPORTANT. This task is very important for effective performance in my current work.
5 - CRITICALLY IMPORTANT. This task is extremely important for effective performance in my current work.

Optometric Assistant Occupational Analysis Questionnaire

Part II - Task Ratings

Your Frequency and Importance ratings should be separate and independent ratings. Therefore, the ratings that you assign using one rating scale should not influence the ratings that you assign using the other rating scale.

If the task is NOT part of your current work, rate the task "0" (zero) Frequency and "0" (zero) Importance.

The boxes for rating the Frequency and Importance of each task have drop-down lists. Click on the "down" arrow in each box to see the rating, and then select the value based on your current work.

Optometric Assistant Occupational Analysis Questionnaire

Part II - Task Ratings

13. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance in your current work (Importance).

Patient Assessment

	Frequency	Importance
T01 Verify patient insurance to determine coverage for services.		
T02 Obtain patient medical and vision history to determine reason for current visit.		
T03 Determine prescription of current eyewear using a lensometer.		
T04 Perform visual field tests.		
T05 Perform autorefraction to determine patient refractive error.		
T06 Perform tonometry to determine patient intraocular pressure.		
T07 Perform optical coherence tomography (OCT) to screen for abnormalities in the layers of retina.		
T08 Perform fundus test to screen for retinal disease.		
T09 Perform depth perception tests.		
T10 Perform visual acuity test.		
T11 Perform Ishihara test to screen patient for color vision deficiencies.		
T12 Determine pupillary distance using pupillometer.		
T13 Apply mydriatics to dilate patient pupils.		
T14 Perform cycloplegic refraction to determine patient prescription.		
T15 Evaluate contact lens wear schedule preferences, needs, and goals when patients are considering or requesting contact lenses.		
T16 Provide information regarding different types of contact lenses (for example, soft vs. RGP, spherical vs. toric) and wear schedules.		

Optometric Assistant Occupational Analysis Questionnaire

Part II - Task Ratings

14. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance in your current work (Importance).

Spectacle Fitting

	Frequency	Importance
T17 Determine spectacle frame design by evaluating patient prescription and needs.		

T18 Determine types of spectacle lens materials (for example, glass, CR-39, polycarbonate, trivex, high-index) by evaluating patient prescription and needs.		
T19 Determine spectacle lens type and design (for example, single vision, multifocal) by evaluating patient prescription and needs.		
T20 Determine secondary lens options (for example, occupational, low vision, sports vision, blue light protection) and sun protection by evaluating patient prescription and needs.		
T21 Convert spectacle lens prescriptions to intermediate or reading lenses.		
T22 Determine out-of-pocket costs to assist patients with spectacle selection.		
T23 Pre-adjust spectacle frame on patients to ensure optimal fit.		
T24 Fit and adjust frame on patient to ensure accurate measurement.		
T25 Measure horizontal pupillary distance to determine optical center.		
T26 Interpret spectacle lens prescriptions to understand vision corrections.		
T27 Identify optical center of spectacle lens using a lensometer.		
T28 Verify that spectacles received from laboratory match doctors' prescriptions.		
T29 Verify that spectacles received from laboratory match order specifications (frame, lens materials).		
T30 Adjust spectacle frame on patient to ensure optimal fit.		
T31 Assess patient comfort and vision clarity with new spectacles.		
T32 Address patient concerns with spectacles.		
T33 Identify defects (for example, crazing, distortion) in spectacle lenses.		
T34 Provide patients with eyewear warranty information.		
T35 Educate patients on the adaptation period for spectacle lenses.		
T36 Educate patients on use of multifocal lenses.		
T37 Train patients on methods for cleaning and maintaining spectacle lenses.		
T38 Perform common eyewear repairs to extend life of spectacles.		
T39 Refer patients to prescribing doctor to address prescription problems.		
T40 Refer patients to physician or ophthalmologist to address ocular health issues.		

Part II - Task Ratings

15. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance in your current work (Importance).

Contact Lens Evaluation

Initial Evaluation

	Frequency	Importance
T41 Convert spectacle lens prescription to contact lens prescription.		
T42 Wash hands before handling contact lenses.		
T43 Handle different contact lens types based on manufacturer's recommendations.		
T44 Dispense trial lenses for patients based on base curve and vision correction requirements.		
T45 Test patient visual acuity while wearing trial contact lenses.		
T46 Train patients on techniques for inserting and removing contact lenses.		
T47 Train patients on methods for cleaning contact lenses.		
T48 Educate patients about contact lens wear schedules.		
T49 Educate patients about the possible adverse effects of contact lenses.		
T50 Educate patients about the need for secondary lens options and sun protection.		

Optometric Assistant Occupational Analysis Questionnaire

Part II - Task Ratings

16. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance in your current work (Importance).

Follow-up Evaluation

	Frequency	Importance
T51 Perform follow-up assessment to evaluate comfort and fit of contact lenses.		
T52 Test patient visual acuity after trial period to determine need for adjustments to prescription.		
T53 Verify patient ability to insert and remove contact lenses.		
T54 Perform over-refraction to evaluate need for adjustments to prescription after trial period.		
T55 Verify contact lens fit and eye health using slit-lamp.		
T56 Provide copies of contact lens prescriptions to patients.		

Optometric Assistant Occupational Analysis Questionnaire

Part II - Task Ratings

17. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance in your current work (Importance).

Office Management.

Inventory

	Frequency	Importance
T57 Manage inventory of office supplies.		
T58 Manage inventory of optometric products (for example, tools, eyedrops, lens solution).		
T59 Place order for lenses including trial lenses and custom orders based on prescription.		
T60 Verify that patient prescriptions match the packaged contact lenses.		
T61 Identify defects (e.g., tears, warping) in contact lenses and notify manufacturer.		

Optometric Assistant Occupational Analysis Questionnaire

Copy of page: Part II - Task Ratings

18. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance in your current work (Importance).

Record Keeping

	Frequency	Importance
T62 Manage schedule of patient appointments.		
T63 Contact insurance companies to determine patient coverage.		
T65 Keep patient records in accordance with laws and regulations.		
T66 Obtain patient authorization to release records in accordance with laws and regulations.		
T67 Transmit patient records in accordance with laws and regulations.		
T68 Document prescription, assessment, and filling information in patient records.		
T69 Provide billing information to patients and insurers.		
T70 Provide referral information to other medical professionals.		
T71 Provide patient prescription information to pharmacies.		

Optometric Assistant Occupational Analysis Questionnaire

Copy of page: Part II - Task Ratings

Optometric Assistant Occupational Analysis Questionnaire

Part III - Knowledge Ratings

INSTRUCTIONS FOR RATING KNOWLEDGE STATEMENTS

This part of the questionnaire contains 127 knowledge statements. Please rate each knowledge statement based on how important you believe the knowledge is for effective performance of your current work as an Optometric Assistant.

If the knowledge is NOT required for effective performance of your current work, rate the statement as "DOES NOT APPLY."

Please use the following scale to make your ratings:

IMPORTANCE RATING SCALE

HOW IMPORTANT is this knowledge for effective performance of tasks in your current work?

0 - DOES NOT APPLY. This knowledge is not required for effective performance of tasks in my current work.
1- NOT IMPORTANT. This knowledge is not important for effective performance of tasks in my current work.
2 - FAIRLY IMPORTANT. This knowledge is somewhat important for effective performance of tasks in my current work.
3 - IMPORTANT. This knowledge is important for effective performance of tasks in my current work.
4 - VERY IMPORTANT. This knowledge is very important for effective performance of tasks in my current work.
5 - CRITICALLY IMPORTANT. This knowledge is extremely important for effective performance of tasks in my current work.

Optometric Assistant Occupational Analysis Questionnaire

Part III - Knowledge Ratings

19. How important is this knowledge for effective performance of tasks in your current work?

Patient Assessment

	0 Does Not Apply	1 Not Important	2 Fairly Important	3 Important	4 Very Important	5 Critically Important
K001 Knowledge of insurance agreements between medical insurers and vision insurers.	◯	◯	◯	◯	◯	◯
K002 Knowledge of different insurance plans (for example, HMO, PPO).	◯	◯	◯	◯	◯	◯
K003 Knowledge of methods for eliciting patient medical and vision history.	◯	◯	◯	◯	◯	◯
K004 Knowledge of available resources for obtaining a translator to assist in obtaining patient medical and vision history.	◯	◯	◯	◯	◯	◯
K005 Knowledge of medical terminology related to optometry.	◯	◯	◯	◯	◯	◯
K006 Knowledge of anatomy and physiology of the eye.	◯	◯	◯	◯	◯	◯
K007 Knowledge of methods for using a lensometer to determine prescription.	◯	◯	◯	◯	◯	◯
K008 Knowledge of methods for performing visual field tests.	◯	◯	◯	◯	◯	◯
K009 Knowledge of different tests used to evaluate visual field.	◯	◯	◯	◯	◯	◯

K010 Knowledge of methods and procedures for performing autorefraction.	◯	◯	◯	◯	◯	◯
K011 Knowledge of tools used to perform autorefraction.	◯	◯	◯	◯	◯	◯
K012 Knowledge of methods and procedures for determining intraocular pressure.	◯	◯	◯	◯	◯	◯
K013 Knowledge of tools used for determining intraocular pressure (for example, pressure gun, Tono-Pen®, auto tonometer).	◯	◯	◯	◯	◯	◯
K014 Knowledge of methods and procedures for performing optical coherence tomography.	◯	◯	◯	◯	◯	◯
K015 Knowledge of signs of retinal disease.	◯	◯	◯	◯	◯	◯
K016 Knowledge of methods and procedures for performing fundus test.	◯	◯	◯	◯	◯	◯
K017 Knowledge of methods and procedures for evaluating depth perception.	◯	◯	◯	◯	◯	◯
K018 Knowledge of methods and procedures for evaluating visual acuity.	◯	◯	◯	◯	◯	◯
K019 Knowledge of methods and procedures for evaluating color vision.	◯	◯	◯	◯	◯	◯
K020 Knowledge of methods and procedures for determining pupillary distance.	◯	◯	◯	◯	◯	◯
K021 Knowledge of methods for administering eyedrops.	◯	◯	◯	◯	◯	◯
K022 Knowledge of types of eyedrops used for dilating pupils.	◯	◯	◯	◯	◯	◯
K023 Knowledge of procedures for dilating pupils.	◯	◯	◯	◯	◯	◯
K024 Knowledge of types of eyedrops used for cycloplegic refraction.	◯	◯	◯	◯	◯	◯
K025 Knowledge of methods for determining prescriptions for pediatric patients.	◯	◯	◯	◯	◯	◯
K026 Knowledge of manufacturer recommended contact lens wear schedules.	◯	◯	◯	◯	◯	◯
K027 Knowledge of methods for encouraging patient compliance.	◯	◯	◯	◯	◯	◯
K028 Knowledge of available contact lens types and materials.	◯	◯	◯	◯	◯	◯

Optometric Assistant Occupational Analysis Questionnaire

Part III - Knowledge Ratings

20. How important is this knowledge for effective performance of tasks in your current work?

Spectacle Fitting

	0 Does Not Apply	1 Not Important	2 Fairly Important	3 Important	4 Very Important	5 Critically Important
K029 Knowledge of lifestyle factors and hobbies that affect eyewear selection.	○	○	○	○	○	○
K030 Knowledge of advantages and disadvantages of different types of spectacle frame design and materials.	○	○	○	○	○	○
K031 Knowledge of methods for educating patients about eyewear designs and features.	○	○	○	○	○	○
K032 Knowledge of ANSI standards for safety eyewear.	○	○	○	○	○	○
K033 Knowledge of different types of lens features and their functions (for example, polarization, photochromic, anti-reflective).	○	○	○	○	○	○
K034 Knowledge of the advantages and disadvantages of different lens materials.	○	○	○	○	○	○
K035 Knowledge of methods for educating patients about eyewear designs and features.	○	○	○	○	○	○
K036 Knowledge of different designs of multifocal lenses (for example, progressive, bifocal, trifocal).	○	○	○	○	○	○
K037 Knowledge of the need for secondary lenses and sun protection.	○	○	○	○	○	○
K038 Knowledge of methods for modifying spectacle lens prescriptions for intermediate or reading powers.	○	○	○	○	○	○
K039 Knowledge of methods for calculating out-of-pocket eyewear costs.	○	○	○	○	○	○
K040 Knowledge of tools used to adjust spectacle frames during pre-fitting.	○	○	○	○	○	○
K041 Knowledge of methods for pre-adjusting spectacle frames.	○	○	○	○	○	○
K042 Knowledge of the effect of frame tilt on fit.	○	○	○	○	○	○
K043 Knowledge of tools used to adjust spectacle frames to fit patients.	○	○	○	○	○	○
K044 Knowledge of methods for using a pupillary distance ruler.	○	○	○	○	○	○
K045 Knowledge of methods for using a pupillometer.	○	○	○	○	○	○
K046 Knowledge of how to interpret spectacle lens prescriptions.	○	○	○	○	○	○
K047 Knowledge of methods for converting plus cylinder to minus cylinder.	○	○	○	○	○	○
K048 Knowledge of methods for interpreting lensometer findings to identify optical center of spectacle lens.	○	○	○	○	○	○
K049 Knowledge of methods for identifying and calculating induced prism.	○	○	○	○	○	○
K050 Knowledge of procedures for comparing	○	○	○	○	○	○

spectacles received to doctors' prescriptions.						
K051 Knowledge of methods for interpreting lensometer findings to verify that lenses received from the laboratory match current prescription.						
K052 Knowledge of procedures for comparing spectacles received to order specifications.						
K053 Knowledge of facial features and anatomy that affect spectacle fit.						
K054 Knowledge of methods of assessing visual acuity (for example, Snellen chart, Jaeger card) during the fitting process.						
K055 Knowledge of methods for troubleshooting common patient concerns.						
K056 Knowledge of methods for interpreting lensometer findings to identify defects during the manufacturing process.						
K057 Knowledge of procedures for identifying lens defects.						
K058 Knowledge of after-sale services available to patients.						
K059 Knowledge of eyewear manufacturer warranty policies.						
K060 Knowledge of side effects during adaptation period.						
K061 Knowledge of side effects of multifocal lenses during adaptation period.						
K062 Knowledge of methods and materials for cleaning and maintaining spectacle lenses.						
K063 Knowledge of parts used in eyewear repairs.						
K064 Knowledge of methods for repairing eyewear.						
K065 Knowledge of patient prescription problems that require referral to a medical professional.						
K066 Knowledge of patient issues that require referral to a physician or ophthalmologist.						

Optometric Assistant Occupational Analysis Questionnaire

Part III - Knowledge Ratings

21. How important is this knowledge for effective performance of tasks in your current work?

Contact Lens Evaluation
Initial Evaluation

	0 Does Not Apply	1 Not Important	2 Fairly Important	3 Important	4 Very Important	5 Critically Important
K067 Knowledge of how to interpret contact lens prescriptions.	○	○	○	○	○	○
K068 Knowledge of base curves, diameters, and thicknesses of contact lenses.	○	○	○	○	○	○
K069 Knowledge of methods for modifying contact lens prescriptions to accommodate for astigmatism.	○	○	○	○	○	○
K070 Knowledge of methods for maintaining hygiene when handling contact lenses.	○	○	○	○	○	○
K071 Knowledge of methods for handling soft contact lenses.	○	○	○	○	○	○
K072 Knowledge of methods for handling hard contact lenses.	○	○	○	○	○	○
K073 Knowledge of methods for handling rigid gas permeable contact lenses.	○	○	○	○	○	○
K074 Knowledge of methods to adjust base curve measurements.	○	○	○	○	○	○
K075 Knowledge of methods for evaluating visual acuity during the trial period.	○	○	○	○	○	○
K076 Knowledge of methods for training patients to insert and remove contact lenses.	○	○	○	○	○	○
K077 Knowledge of techniques for inserting and removing soft contact lenses.	○	○	○	○	○	○
K078 Knowledge of techniques for inserting and removing hard contact lenses.	○	○	○	○	○	○
K079 Knowledge of techniques for inserting and removing rigid gas permeable contact lenses.	○	○	○	○	○	○
K080 Knowledge of contact lens solutions for cleaning and lubrication.	○	○	○	○	○	○
K081 Knowledge of methods for cleaning contact lenses.	○	○	○	○	○	○
K082 Knowledge of contact lens wear schedules based on lens type.	○	○	○	○	○	○
K083 Knowledge of wear schedules for extended-wear contact lenses.	○	○	○	○	○	○
K084 Knowledge of adverse effects (e.g., eye infections) of contact lens wear.	○	○	○	○	○	○
K085 Knowledge of adverse effects of wearing contact lenses for more hours than recommended.	○	○	○	○	○	○
K086 Knowledge of adverse effects of not following manufacturer recommendations for extended-wear contact lenses.	○	○	○	○	○	○

Optometric Assistant Occupational Analysis Questionnaire

Part III - Knowledge Ratings

22. How important is this knowledge for effective performance of tasks in your current work?

Follow-up Evaluation

	0 Does Not Apply	1 Not Important	2 Fairly Important	3 Important	4 Very Important	5 Critically Important
K087 Knowledge of the need for secondary lenses and sun protection when wearing contact lenses.	◯	◯	◯	◯	◯	◯
K088 Knowledge of methods to evaluate fit of contact lens and patient comfort during follow-up consultation.	◯	◯	◯	◯	◯	◯
K089 Knowledge of methods for evaluating visual acuity after the trial period.	◯	◯	◯	◯	◯	◯
K090 Knowledge of methods for verifying patient ability to insert and remove contact lenses.	◯	◯	◯	◯	◯	◯
K091 Knowledge of methods for performing over-refraction after the trial period.	◯	◯	◯	◯	◯	◯
K092 Knowledge of procedures for using a slit-lamp to assess fit of contact lenses.	◯	◯	◯	◯	◯	◯
K093 Knowledge of methods for verifying contact lens fit.	◯	◯	◯	◯	◯	◯
K094 Knowledge of indicators of proper contact lens fit.	◯	◯	◯	◯	◯	◯
K095 Knowledge of laws and regulations related to providing contact lens prescriptions to patients.	◯	◯	◯	◯	◯	◯

Optometric Assistant Occupational Analysis Questionnaire

Part III - Knowledge Ratings

23. How important is this knowledge for effective performance of tasks in your current work?

Office Management
Inventory

	0 Does Not Apply	1 Not Important	2 Fairly Important	3 Important	4 Very Important	5 Critically Important
K096 Knowledge of methods for tracking office supply use.	◯	◯	◯	◯	◯	◯
K097 Knowledge of methods for determining rate of optometric product use.	◯	◯	◯	◯	◯	◯
K098 Knowledge of available optometric supply vendors.	◯	◯	◯	◯	◯	◯
K099 Knowledge of available optometric supplies.	◯	◯	◯	◯	◯	◯
K100 Knowledge of methods for determining when to reorder trial lenses.	◯	◯	◯	◯	◯	◯
K101 Knowledge of contact lens brands most commonly used by patients.	◯	◯	◯	◯	◯	◯
K102 Knowledge of methods for tracking contact lens inventory expiration dates.	◯	◯	◯	◯	◯	◯
K103 Knowledge of methods for tracking contact lens product availability.	◯	◯	◯	◯	◯	◯
K104 Knowledge of ANSI standards for contact lenses.	◯	◯	◯	◯	◯	◯
K105 Knowledge of methods for interpreting contact lens prescription labels.	◯	◯	◯	◯	◯	◯
K106 Knowledge of methods for identifying defects in contact lenses.	◯	◯	◯	◯	◯	◯
K107 Knowledge of contact lens manufacturer return policies.	◯	◯	◯	◯	◯	◯

Optometric Assistant Occupational Analysis Questionnaire

Copy of page: Part III - Knowledge Ratings

24. How important is this knowledge for effective performance of tasks in your current work?

Record Keeping

	0

	Does Not Apply	1 Not Important	2 Fairly Important	3 Important	4 Very Important	5 Critically Important
K108 Knowledge of electronic health records (EHR) scheduling software.	○	○	○	○	○	○
K109 Knowledge of tools used to track and schedule patient appointments.	○	○	○	○	○	○
K110 Knowledge of insurance eligibility criteria.	○	○	○	○	○	○
K111 Knowledge of methods for identifying patient copay.	○	○	○	○	○	○
K112 Knowledge of methods for determining patient coverage.	○	○	○	○	○	○
K113 Knowledge of insurance coverage categories.	○	○	○	○	○	○
K114 Knowledge of insurance billing codes.	○	○	○	○	○	○
K115 Knowledge of methods for maintaining electronic health records (EHR).	○	○	○	○	○	○
K116 Knowledge of laws and regulations related to electronic health records (EHR).	○	○	○	○	○	○
K117 Knowledge of laws and regulations related to maintaining patient records.	○	○	○	○	○	○
K118 Knowledge of HIPAA requirements for patient consent for release of medical records.	○	○	○	○	○	○
K119 Knowledge of laws and regulations related to transmitting patient records.	○	○	○	○	○	○
K120 Knowledge of medical terminology used when transcribing patient information.	○	○	○	○	○	○
K121 Knowledge of abbreviations used when transcribing patient information.	○	○	○	○	○	○
K122 Knowledge of diagnosis and procedure codes used by insurance companies.	○	○	○	○	○	○
K123 Knowledge of billing software.	○	○	○	○	○	○
K124 Knowledge of laws and regulations related to patient referrals.	○	○	○	○	○	○
K125 Knowledge of methods for interpreting doctors' notes when providing referral information.	○	○	○	○	○	○
K126 Knowledge of electronic prescribing software.	○	○	○	○	○	○

prescribing software.

K127 Knowledge of laws and regulations related to providing prescription information.	◯	◯	◯	◯	◯	◯

25. If you are interested in attending the workshop that is tentatively scheduled for October 28th, please provide your name and email address below. In the workshop, we will be reviewing questionnaire results and finalizing the tasks and knowledge statements based on their compiled ratings.

Optometric Assistant Occupational Analysis Questionnaire

Thank you!

Thank you for taking the time to complete this questionnaire. The California State Board of Optometry values your contribution.