

# Re:View

Keeping excellence in your sights | April 2014 | Issue 17

Contamac become ABDO College sponsors

Why the company sees DOs as key influencers in the contact lens world

### Profile feature on Daniel Smithard

We find out about Dan and his research into UV-blocking contact lenses

### Debra Teasdale interview

We don't simply train people... we educate, support, facilitate and enable professionals

### A terrific atmosphere with a great bunch of students



At the end of January it was my very great pleasure to present students with their Foundation Degree certificates at an awards ceremony held in Godmersham. A brief report and photos of this excellent evening are included in this issue. There was a terrific atmosphere with a great bunch of students whose thirst for knowledge only being matched by their thirst for something a little stronger at the post awards party! I am certain I will be seeing them all again in Canterbury Cathedral later this year when they are conferred with their FBDO qualification and I know they would join me in thanking all the staff at the College for the optical education they have received.

This is a particularly full edition of *Re:View* which includes three very different articles. Debra Teasdale, Dean of the Faculty of Health and Social Care at CCCU, talks about her relationship with ABDO College and how they produce not just students with a degree but rounded individuals who obtain employment opportunities in either the academic or retail side of the dispensing profession.

Daniel Smithard is a recent student at Godmersham (in fact he is currently undertaking the Contact Lens Certificate course having attained his BSc (Hons) and FBDO qualifications last year) who is now helping out back at his Alma Mater, yet another poacher turned gamekeeper. Dan tells us about his research into UV-blocking contact lenses.

We are always delighted to welcome new sponsors to ABDO College and on the contact lens theme Martin Conway from Contamac, who produce specialist lens materials, tells us how contact lens fitting is not all about daily disposables.

The College and Bookshop will be exhibiting at both the ABDO conference in Kenilworth at the end of March and at Optrafair London in April, please come and say hello to our team and I look forward to seeing you on our stands at both these events.

ITN's involvement with ABDO moves to the next level when they will be filming at ABDO College on March 12th, perhaps I'll try and get a job as an extra... enjoy your read!

Huntly Taylor FBDO, Chairman, ABDO College Board of Trustees

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### Contamac become ABDO College sponsors

The company sees DOs as key influencers in the contact lens world

ABDO College and Contamac have had a positive connection for a number of years, and Martin Conway, Professional Services – Vision Care at the company has been instrumental in developing the relationship.



Contamac recently joined the official list of ABDO College sponsors and in this article you can learn more about one of the leading manufacturers of specialist lens materials, we also find out why the company sees dispensing opticians as key influencers in the contact lens world.

Contamac is a family-run UK company making specialist polymers used in the manufacture of contact lenses. It was founded by John McGregor who still runs the business, and had its 25th anniversary in 2012. You may not have heard of Contamac, but you have probably used lenses made from its materials which are distributed all over the world. Martin Conway says, "Contamac has around 35-40 per cent of the world-wide market in specialist lens materials, making the business number two or three in the field. Add in our intraocular lens business and we're the largest player."

The majority of contact lenses fitted nowadays are made by big moulding companies who are increasing their reach as technology has developed to allow moulded torics and multifocals, so moulded lenses can cover more prescriptions with good quality, reproducible, cheaper daily disposables. At one stage the specialist area was being squeezed, but Martin Conway has seen this change. He explains, "There is a lot of professional time involved in supplying contact lenses and a huge dropout rate - probably around 20 per cent. There are almost as many people dropping out as are entering the market, so right now the number of wearers is pretty static. Look more closely at the figures, however, and you can see that there are a significant percentage of patients that are not well served. Have you had someone come to your practice saying that they have tried contact lenses two or three times without success? Big moulding companies in the main only offer lenses in one diameter, and sometimes in only one base curve. There is still plenty of business in servicing patients who may have a larger or smaller than average cornea, or a condition such as keratoconus who are not suited by the 'one size fits all' approach. This is why our specialist lens customers are doing well – there was a drop in business some years ago but specialist lens companies that have kept pace with developments in the field such as Ortho Keratology and scleral lens designs are now enjoying growth that many of the larger companies would envy."

Martin Conway is a DO contact lens fitter himself. He says, "I'm from an older generation and trained in the seventies when soft lenses were just coming into their own. Scleral lenses were still in use and it is second nature to me to fit GPs. I've spent time in industry and in practice before joining Contamac three years ago. Contamac were looking for a professional services person: I wondered at first why they were looking for a contact lens practitioner, but over the last three years I've moved from part time to full time as my role has grown. I have helped take the company's knowledge of the industry beyond the factory gate. The presence of myself and my equivalent colleague in the US has given Contamac an insight into the practice, and the needs of the profession so we can better anticipate those needs and feed that information back to the Research and Development team."

In his role at Contamac, Martin has been facilitating the growth of the specialist lens industry. He says, "We're encouraging the development of novel designs. A laboratory in Brazil may need a toric lens and not have the design available – but we might be in touch with a lab in Europe that has a great design without the ability to market it world-wide. Contamac can put them in touch with the lab in Brazil to the benefit of both businesses. The European lab gets a royalty, the Brazilians increase their product portfolio."

Martin has seen contact lens practice change enormously over the time he has been in the profession, and he has concerns. He says, "What hasn't survived is the skill set amongst optometrists and contact lens opticians. I still find those who have never fitted GP, scleral or multifocal lenses." This concern is what has lead Martin to work closely with ABDO College. He explains. "Most of the students coming through contact lens training will never buy a product directly from Contamac, so we were not a brand they would get to know. Now, working with ABDO College, we can make sure students are aware of specialist products.

Most DOs who fit contact lenses will pass through ABDO College, and we estimate that nowadays 65–70 per cent of lenses in the UK are fitted by DOs. The relationship with ABDO College allows us to touch base with students and remind them about the rewards of the specialist area, both professional and commercial. Talking to practitioners, there are many differences between optometrists who are fitting contact lenses straight out of university and most dispensing opticians who have had a number of years in practice before making a considered decision to specialise in this field. They understand that there is both more fun and more interest in fitting specialist lenses, and my role is to communicate what the specialist lens industry can offer. We see the relationship with ABDO College as an efficient way of involving ourselves with potential specialist contact lens opticians." Contamac has invested in the ABDO College contact lens clinic. Martin comments, "We want students to see the name Contamac, especially in the UK where we're based. We'd like them to view us as a point of contact. Visit our website for links to manufacturers. case studies and information about the contact lens industry here and overseas. That's really where we see our role, bringing together the contact lens professional with the specialist lens supplier. Most of our labs are quite small. They don't do mass marketing, but in my professional services role I try to support them, talking about their products to professionals. Unless that relationship is successful, Contamac isn't successful. My message to any contact lens optician is that going through ABDO College is only the start. Get in touch with specialist labs and learn about the full scope of what you can offer."



The ABDO College Contact Lens Certificate course provides an ideal opportunity for opticians to further their career by specialising in contact lenses. The course leads to the ABDO Level 6 Certificate in Contact Lens Practice qualification, enabling registration on the General Optical Council specialty register for contact lens dispensing.

To find out more contact the ABDO College Courses Team on 01227 738 829 (Option 1), or email info@abdocollege.org.uk.

### Daniel Smithard

We find out about Dan and his research

In this issue of *Re:View* you can read Daniel Smithard's paper, '*The efficacy of ultra violet blocking contact lenses at preventing ophthalmohelioses induced by peripheral light focussing on the anterior segment*', adapted from his final year BSc dissertation. Dan is currently combining continuing research work with time in practice, a position at ABDO College as a lab technician, and studying for his contact lens qualification. Read on to find out more about how he started in optics and where he is heading in the future.

Like many people, Daniel didn't plan a career as a dispensing optician. He says, "I studied philosophy at Reading and aimed to work with the police but that fell through with fewer vacancies due to the recession. I found a job as an optical assistant in a Boots practice in Thornton Heath and I was quickly introduced to a lot of information about lenses. I found there was much more to spectacles than I'd thought. I could see the benefits for patients and felt that I wanted to learn more. I'd started the job in the summer, and spotted that there were a few weeks before the BSc course in ophthalmic dispensing started. I applied right away: picking that particular course was an easy choice to make. ABDO College was the only place that did the BSc rather than the diploma. I also grew up in Kent and my family lived down the road."

Studying dispensing optics was a great contrast to Daniel's previous studies, but he found he had some useful skills to transfer across too. He explains, "My philosophy degree helped with the essay writing, but all the maths and physics, learning about refraction of light, and tracing rays was very different. And by coincidence my undergraduate dissertation topic at Reading had been on George Berkeley and his theory of perception and how we see things. If I knew then, what I know now, my dissertation would have been a very different thing."

As anyone who has completed their qualifications while working knows, studying in your spare time is a challenge. Daniel says, "As well as having to remember formulae, for example, I had to do a certain amount of work each Daniel's interest in contact lenses made it straightforward to know what he wanted to do for his dissertation. He says, "Contact lenses have fascinated me, right from my first job at Boots." Daniel goes on to explain, "I'm a keen cvclist and I wanted to know more about whether athletes who are outdoors all day should be wearing contact lenses to protect their eyes. Also, we make recommendations in practice, but does the research back this up?" Summing up the findings from his paper, 'The efficacy of ultra violet blocking contact lenses at preventing ophthalmohelioses induced by peripheral light focussing on the

'I really wanted a first, and decided that I needed to do something that interested me. If you don't pick a topic you're interested in, it's harder to stick at and you won't get such a good grade'

night. After not studying for a year it was a complete paradigm shift. As long as you are organised it's okay." In his first year Daniel continued to work as an optical assistant but he obtained a position as a student dispensing optician which gave him more of the support that he needed. He says, "I moved to Specsavers in Epsom, where I still work three days a week. It has been a great place to work. As a student DO, they expected me to have questions. I'm now working on the contact lens course and offer clinics at that practice too which is great." anterior segment, Daniel says, "As long as the lens covers the limbus it stops cell damage and the development of, for example, pinguecular, pterygium or lens opacities. Beyond that, though, you still need other protection to protect the lids, and the surrounding skin."

Daniel found that there was a lot of research looking at the effectiveness of UV protection in contact lenses. He says, "Contact lens and anterior eye magazine did a UV special which was very relevant. I was looking for the five best articles with good statistical analysis. There was a lot out there,

#### **PROFILE FEATURE CONTINUED – DANIEL SMITHARD**

#### Official ABDO College sponsors

The ABDO College Board of Trustees and staff would like to thank its official sponsors for their generous and continued support:

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For further information on ABDO College sponsorship opportunities contact Michael R Potter FBDO on 01227 733 913 or email at mpotter@abdo.org.uk.



Dan Smithard (right) with ABDO President, Peter Black, at the 2013 ABDO graduation ceremony

the main issue was finding the most relevant and best written ones. After assessing the current research I found that the main thing that's missing is that nothing has been done in vivo. There has been research on mannequins, on rabbits, and in the lab. However you can't irradiate people for research purposes, but can only infer from results whether it is effective in humans." Daniel's project has fuelled a long term interest in research. He has advice to anyone else looking to choose their dissertation topic. He says, "I really wanted a first, and decided that I needed to do something that interested me. If you don't pick a topic you're interested in, it's harder to stick at and you won't get such a good grade." Daniel continues to combine research interests with work. He says, "I'm working with Darren Shickle and Kate

Springett, writing articles for educational journals about spectacle compliance in children so we can look at increasing compliance. We want to interview children, parents and teachers. The current data isn't UK based. We need to know whether children are doing worse at school. This is only an initial project and there is scope for much more." Daniel has continued his links with Canterbury Christ Church University too. He says, "I have just started some other research work for the diagnostic radiography department at CCCU on inter-professional placements. This shows that DO qualifications are transferrable skills across departments and in other fields so one is not limited to optics if one wanted to move sideways." In the future Daniel would like to continue to combine work in practice with study towards a PhD.

### The efficacy of ultra violet blocking contact lenses at preventing ophthalmohelioses induced by peripheral light focussing on the anterior segment

by Daniel Smithard BA(Hons) BSc(Hons) FBDO

Traditionally sunglasses have been worn to protect from sun exposure, however studies have shown that wearing sunglasses could actually increase UV-induced eye damage (Tuchinda *et al* 2006). The ocular advantages of UV-blocking contact lenses are in shielding the limbus to prevent PLF (Kwok *et al* 2004) and the resultant damage and division of limbal and stem cells.

It is well established that both acute and chronic UVR (ultraviolet radiation) exposure can lead to various ophthalmohelisoses (ophthalmic pathologic conditions due to solar radiation) in the anterior segment. Repeated exposure causes short term issues and long term permanent damage, from mild irritations such as excessive blinking, photophobia, or corneal sensitivity, to more serious concerns as cataract, ptergyium, conjunctival cancer, and cancer of the eyelids or surrounding areas (Marchitti et al 2011). Peripheral light focussing (PLF) is the phenomenon of light incident on the temporal cornea focussed by the peripheral anterior eye across to the nasal limbus (Sasaki et al 2011). Indeed it has been calculated that light intensity at the nasal limbus is around 20x that of the incident light intensity (Coroneo 1991).

Traditionally sunglasses have been worn to protect from sun exposure, however studies have shown that wearing sunglasses could increase UV-induced eye damage (Tuchinda *et al* 2006) due to prevention of the natural pupillary contraction (squinting) that occurs on excessive exposure to bright light (Sliney 2005). Although sunglasses do block UVA and UVB radiation to the eyes (Rosenthal et al 1988), poor quality sunglasses that are not wraparound may result in higher doses of UVR to the ocular tissues due to PLF (Tuchinda et al 2006). In comparison, the ocular advantages of UV-blocking contact lenses are in shielding the limbus to prevent PLF (Kwok et al 2004) and the resultant damage and division of limbal and stem cells. A study by Sliney (2011) shows UVB transmittance limited to 1 per cent and UVA to below 5 per cent in most UVabsorbing contact lens materials, although the interpalpebral conjunctiva and eyelids would require additional measures.

When working in practice it is easy to recommend a product to a patient without actually knowing its efficacy and I felt it was important to determine whether UV-blocking contact lenses were effective. Further to this, I was interested to know whether athletes such as cyclists or runners, outside for hours at a time, were getting enough protection from their sunglasses alone or whether wearing contact lenses would provide necessary additional protection.

The results of studies on rabbit corneas in vivo and clinical lab or mannequin based studies have shown that UVblocking contact lenses covering the limbus not only protect the cornea from PLF but also from general UVR exposure. As UV-blocking contact lenses covering the limbus provide the most complete protection to the anterior segment, this allows the user to stay outdoors for longer periods as the UV-absorbing capacity brings levels down to what is considered safe. The implications of this are multi-faceted; UV-blocking contact lenses may be suitable for both emmetropic and ametropic children by reducing lifetime ocular exposure to UVR, for patients with aphakia, and patients exposed to unsafe levels of UVR in occupational or recreational situations. For the optical practice, increasing public and practitioner awareness is critical – with emphasis on the importance of the need for safety measures against UVR exposure and education on how this may be achieved.

#### AIM

With PLF an intense beam of UVR crosses the temporal cornea and strikes basal and unprotected stem cells around the nasal limbus and crystalline lens. As a result, conditions such as pinguecula, pterygium, and cortical lens opacities can be seen. The aim is to establish whether UV-blocking contact lenses are effective at reducing this damage. The hypothesis is that UV-blocking contact lenses will prevent ophthalmohelioses produced by PLF. The null hypothesis is that UV blocking contact lenses will have no effect on preventing ophthalmohelioses produced by PLF.

#### METHOD

Articles were critiqued and analysed according to a critical framework by Cormack (2000) to determine strength and relevance. Boolean operators were used to enable specific searches through online databases so that information gathered was written to an appropriate academic standard – systematic reviews, cohort studies, randomised and case control studies preferred. One limitation was a lack of articles documenting experimentation on human subjects in a controlled environment due to ethical concerns about intense UV exposure. An inclusion/exclusion table was created to determine the strongest and most relevant literature for critique to prove or disprove the hypothesis.

#### FINDINGS

Analysis of literature has shown that UV-blocking contact lenses covering the limbus protect the cornea from damage. Data has shown statistically that exposure to UVA (p<0.0002), UVB (p<0.0001), and UVC (p<0.05) was significantly reduced when UV-blocking contact lenses were worn and intensity of UVA PLF at the nasal limbus (p<0.02) was also reduced.

The hypothesis has been proven true that UV-blocking contact lenses inhibit PLF, however they are not a stand-alone solution. The most complete UVR protection can only be achieved with a combination of measures to provide the best protection to ocular media surrounding the cornea. If UV-blocking contact lenses are to be considered the lead devices in ocular protection, their efficacy needs to be determined with further research using randomised doubleblind, in vivo human studies. The implications of future data could be far reaching – it may be possible to recommend lifestyle changes to patients and increase the uptake of UV-blocking contact lenses.

Ultra-violet radiation (UVR) reaching the Earth can be split into three categories. UV-C (290–200nm) has short wavelengths which generally do not penetrate the atmospheric ozone layer, while up to 90 per cent of UV-B (320–290nm) is absorbed by atmospheric ozone and oxygen (Chandler 2011). UV-A (400–320nm) is not greatly reduced by the atmosphere and represents 90 per cent of the UVR reaching Earth, therefore the eye is exposed to majority UV-A and a small portion UV-B (Taylor 1989).

PLF circumvents the normal protection of the limbal cells, and as stem cells are capable of division, alteration by UVR could result in a mass of cells traversing the limbal barrier and invading the cornea – resulting in pterygium. Further to this, a secondary light-focussing effect by light incident more anteriorly results



in light focussed through the pupil onto the crystalline lens equator stem cells. As a result, early onset cortical lens opacities can be seen (Coroneo 2011).

Walsh *et al* (2001) experimented on 12 human subjects and results for 10 of those show that UVR intensity on a nasal sensor placed at the anterior segment was significantly higher than at a temporal sensor (p<0.05). The statistical results are justified by the authors as standard deviation has been performed about the mean of five samples taken for each sensor on each test subject. The conclusion that UVR is refracted across the eye by the cornea to focus at higher intensity at the nasal limbus is internally consistent with data provided, and a similar study by Coroneo (1991) states the UVR increase at the nasal limbus is up by a factor of 18–20 (no statistical analysis provided). This



greater intensity of UVR is a factor in cell damage leading to the formation of pinguecula at the nasal conjunctiva and cornea. Walsh *et al* (2001) also state that UV-blocking contact lenses prevent UVR refraction across the cornea but provide no statistical analysis or relevant data to justify this to the reader. Thus the reader cannot use this study to conclude conclusively the effectiveness of UV-blocking contact lenses.

Kwok *et al* (2003) report that UV-blocking contact lenses significantly reduce the intensity of UVA (p<0.02) and UVB (p<0.056) PLF at the nasal limbus compared to subjects wearing sunglasses or contact lenses with no UV-blocking properties. This is consistent with Tuchinda *et al* (2006) and other studies (Hedblom EE 1961) showing that wearing sunglasses is ineffective when compared to the ocular advantage of UV-blocking contact lenses shielding the limbus to prevent PLF (Kwok *et al* 2003) due to the prevention of squinting and resultant development of ophthalmohelioses. The statistical analysis is highlighted but there is no information as to how statistics were calculated, sample sizes, or repetition of the experiment to reduce error and so internal consistency of results is not clear.

Harris et al (2000) uses statistical analysis to present results and explains how they were determined. A comparison of lenses showed a significant difference in UVR absorption between UV-blocking and non UV-blocking in the UVA (p<0.0002), UVB (p<0.0001), and UVC spectrum (p<0.05); however no significant difference was found in UVR absorption between various non UV-blocking contact lenses (p>0.30). This leaves UV-blocking contact lenses as the best solution to PLF provided they cover the limbus, and is consistant with the study by Sliney (2011) showing UVB transmittance limited to 1 per cent and UVA to below 5 per cent in most UV-absorbing contact lens materials. Harris et al (2000) determined these statistics using a Monte Carlo simulation involving statistical sampling and standard deviation to reduce variation and anomalous

results. A comparison of means was undertaken to determine if all lens types can be considered statistically identical with respect to UV blocking and the results recorded. Thus the results can be considered internally consistent with the method of experimentation and the statistical analysis performed.

For the study by Giblin et al (2011) on rabbit eves in vivo, the authors were testing the damaging effect of UVR on corneal epithelial cells and whether UV-blocking contact lenses can prevent such damage. Statistical analysis is used, with some justified claims but others reported without any analysis. For example, the reader is told that severe lens opacification occurred 48 hours after 30 minute exposure to UVR without contact lens protection. However, with no statistical analysis it is impossible to determine reliability, correlation, or accuracy. The authors found no significant difference in the amount of dead epithelial cells in corneal epithelia of irradiated eyes wearing UV-blocking contact lenses compared to the normal eye (p>0.1) suggesting that the UV-block prevented an increase in epithelial damage. When this was conducted with a non UV-blocking contact lens and compared to an exposed irradiated eye, there was no significant difference in amounts of damage produced (p>0.1). It is concluded that a UV-blocking contact lens protected the cornea against UVB induced epithelial call damage (p<0.001) and





that there is no significant difference between a subject with an exposed eye and a non UV-blocking contact lens (p>0.1).

Finally, Chandler *et al* (2009) report on data from a sample of 12 rabbits assigned to various lens-wearing conditions and irradiated with UVR. The reader is informed that statistical analysis was performed with nonparametric statistical methods and that comparison between groups has been made using the Wilcoxon rank sum test. It is reported that there was increased corneal neovascularisation and oedema (p=0.03) in all exposed eyes and eyes with non UV-blocking contact lenses compared with lenses containing UV-blockers. There was a statistically relevant change in crystalline lens stem-cell activity and cell damage in rabbits with exposed eyes or non UV-blocking contact lenses compared with those containing UV-blockers (p=0.03). There was no statistical difference with exposed eves compared to non UV-blocking contact lenses (p=0.14). Similarly for changes in corneal apoptosis (programmed cell death), there was no statistical difference between UV-blocking contact lenses and patched eyes (p=0.99) inferring that UV-blockers prevent any exposure of the eye to UVR. There was however a statistically relevant change in corneal apoptosis between non UV-blocking contact lenses and patched eyes (p=0.03). These results are presented in graph format and are internally consistent with the experimental approach taken to data collection and the statistical analysis performed. The data conforms to results of other studies (Bergmanson et al 1987; Dumbleton et al 1991; Ahmedbhai and Cullen 1988; Bergbauer et al 1991) showing that after acute exposure, the cornea is particularly vulnerable to UV-induced damage such as epithelial shedding and corneal apoptosis. Thus wearing UV-blocking contact lenses can protect the cornea from degeneration and fragmentation caused by solar radiation.

#### CONCLUSION

This project has shown that UV-blocking contact lenses protect the cornea from damage if the limbus is covered so that cell damage is prevented. Data from articles critiqued have shown statistically that exposure of the eye to UVR was either significantly reduced or prevented when UV-blocking contact lenses were worn.

It should be noted that neither chronic nor clinical studies in humans have been performed to demonstrate that wearing UV-blocking contact lenses reduces the risk of developing cataract or other ophthalmohelioses. Association is not necessarily causation and to infer causality, randomised double-blind clinical studies with individual dose-response measurements of UVR are required in future research. The most complete measure of UVR protection can only be achieved with a combination of a wide-brimmed hat, UV-blocking contact lenses, and wrap-around sunglasses – which provides the best protection to the ocular media surrounding the cornea, as well as the protection offered to the anterior segment by UV-blocking contact lenses.

### Foundation Degree awards event

At the end of January ABDO College held its fourth annual Foundation Degree awards event for students attending Godmersham on their final 3rd year block release session.

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Hosted by College Principal, Jo Underwood, the successful students were awarded their Canterbury Christ Church University (CCCU) foundation degree certificates by Huntly Taylor, Chairman of the ABDO College Board of Trustees.





### Foundation Degree awards

The event concluded with a lively and convival celebration party







### An interview with Debra Teasdale

Dean of the Faculty of Health and Social Care at Canterbury Christ Church University

Debra Teasdale is the Dean of the Faculty of Health and Social Care at Canterbury Christ Church University (CCCU). As part of a series of interviews with key figures in the education of dispensing opticians, Debra shares her thoughts on the challenges facing higher education, as well as the health and social care professions, with *Re:View*.



As with many of the members of the faculty at CCCU, Debra Teasdale started her professional life working in the health service. She says, "I'm an advanced neonatal nurse practitioner by profession. I joined CCCU in 2003 as a lecturer practitioner, and continued to work half of the week in the health service. I came full time to the university in 2005 as a professional lead for child nursing, and became head of the Health Wellbeing and Family Department in 2007. This department covered professions such as child nursing, midwifery, mental health, and health promotion, as well as being responsible for the Faculty's foundation degrees. It was at that point, in relation to the foundation degrees (FD), that I began to develop a relationship with ABDO College. I had oversight of development of the FD and I also became chair of examination board at ABDO College." The role of examination board chair involves overseeing all the decision making for every degree and verifying and ratifying students' results. The details of every student's achievements are presented to the exam board to make sure that the right degree classification has been awarded. Every exam board must also have external examiners, external experts in the field who are able to make comparisons between the outcomes and standards in our university and others. Debra says, "During my time as chair I got to know the ABDO College team well. We've been on quite a journey with the board, and I feel that the exam board is in a really good place, with coherent processes between ABDO College and CCCU. I've just given up that role which I am really sad about, I will miss working with the team in a fabulous location, but I've recently been promoted to be Dean so my energies now have to be focussed elsewhere."

As Dean, Debra Teasdale is the academic and professional leader for the Faculty of Health and Social Care. She is responsible for the development and implementation of Faculty strategies, for maintaining and enhancing quality and standards across the Faculty and managing Faculty business planning and resource allocation. Debra is also the senior management link for the Medway campus and the collaboration between the Universities of Greenwich, Kent and Canterbury Christ Church University and the wider community. She says, "My job as Dean is to set strategic direction and manage the resources that allow us to operate into the future. At the moment it is an interesting time. We are currently examining what we do, how we do it,

and how we are organised in order to face up and coming challenges in higher education and health and social care sectors. We want to restructure the Faculty in a way that will be beneficial for us as a faculty and at the same time contribute more externally. There are many challenges; we can already see evidence of the significant constraints on continuous development of individuals in organisations. At the same time we also see evidence of people investing in new and different things: our Faculty core professions that can have a wider breadth or adopt a different approach to interact with clients.

"For universities, we have challenges in how we are funded to provide higher education, and how education for healthcare professionals is commissioned. These later changes have taken time to embed, but we are fortunate to have a good relationship with our local NHS Trusts and with Health Education Kent, Surrey and Sussex, the commissioning body which determines the workforce

'Completing a degree is more than about the professional gain: it is an experience of transformation for the individual.'

'offer' needs to meet changing expectations. We want to promote health and well-being by ensuring that the person is at the centre of the experience at all times. A big challenge for us is preparing professionals for work within the evolving sector, as there is uncertainty in the health and social care sector about what 'services and organisations' will look like in the future. As a Faculty, we need to be nimble, to lead the way with education that will enable those in and going into the workforce to develop and function in the new and changing workplace. The depth of change is the real issue: it is system wide. We should be moving towards integrated services, and if this is the case the current professional roles will need to evolve. We may need new types of professional, including some

needs which then drive the total numbers of students that we educate. For this group it can be tricky to forecast needs when you are unsure what your future service will look like and clearly they are dealing with massive financial constraints which have to be addressed."

With Debra's relationship with ABDO College going back over a number of years, right from the inception of the links with CCCU, she has an excellent insight into the challenges facing optical education and service delivery. Debra says, "Transferring the challenges I have already outlined onto the optical scenario, employers want to get best value for money and they want skilled, knowledgeable practitioners of public health. I see that dispensing optician practitioners as well as all other optical practitioners have a significant role in public health which isn't being fully appreciated by the public, and not fully exploited by employers. We need an on-going dialogue with employers to allow us to think about how we can support them, amend programmes, and deliver programmes in the future that allow their businesses to be more valued by the public because they have a greater service offering. These people who walk into a practice because they are concerned about their sight may have a whole series of issues from serious pathology to normal degeneration. Any interaction with an optical practitioner is an opportunity to improve overall public health. There may even be an argument to offer services in different places to integrate them into the community, such as a GP practice."

Another key area that Debra Teasdale sees as crucial is the development of integrated services. She says, "The government vision is to see professionals working on the assets individuals have and maximise those to keep them healthy and well within their own homes rather than deteriorating. Professionals need to be able to put interventions in place to avoid admission to hospital. The optical profession needs to consider how it might change in the future to support this sort of integration."

Debra has found the experience of working with ABDO very positive. She explains, "We were very lucky that ABDO College has a stakeholder engagement forums with employers from large to small, across the sector, to have a dialogue with about those important issues. At the most recent meeting 'We don't simply train people, we educate, support, facilitate and enable professionals.'

I attended, within that room there were people who perhaps hadn't thought of the public health role of opticians, but who were very open to the idea." The optical profession's relationship with higher education is developing fast, with the foundation degree, BSc, and top up BSc for those who have a diploma in dispensing. In the future it is possible to envisage more and more opticians taking their study beyond degree level, increasing the research and evidence base available to the profession. Debra comments, "We at CCCU are here to help provide the evidence base. Some of the projects people engage in may help the business of the future. Within the MSc course in Practice Development and Innovation, for example, we can look at what is done currently and how it can develop. We offer Masters and PhDs to help individuals research. Whilst many research studies may be quantitative and scientific, there is equally room for an examination of the experience of going to an optical practice, to inform public health and move the profession towards a more significant role in that arena. Right now, dispensing optics is relatively new in the higher education sector: the opportunities are there for practitioners who want to contribute, guide and form how the profession will work in the future. This is what's great

about the partnership between CCCU and ABDO College. We both bring something different to the table. It is a successful partnership on a number of different levels. Looking back at the very first course, we helped people at ABDO College up-skill and get their own HE qualification: we now have the same situation with paramedics where people haven't been required to have a degree level qualification. It's a cascade effect. You need people to put their head above the parapet in the first place and ABDO College is doing that, supporting and leading in their area."

Returning to the relationship between CCCU and ABDO College, Debra says, "This is a really valuable partnership, in multiple ways and it is symbiotic. We both learn from each other. ABDO College gives us insight into a new sector: we give them insight into how higher education can benefit the profession. The role of higher education is truly appreciated by the profession. In the Delphi survey, looking at employment six months after graduation, 94 per cent of CCCU students are in education or employment, placing the institution 10th out of 147 universities in England. We're really proud of that and our effective partnership working with organisations such as ABDO College supports that. Beyond that, we don't simply train people. Instead we educate, support, facilitate and enable professionals. Completing a degree is more than about the professional gain: it is an experience of transformation for the individual. You aren't the same person coming out of a degree as you are when you go into it, you are so much more."

### The ABDO College scarf

The ABDO College scarf is available for both current and past students to keep warm and wear with pride! The  $10^{\prime\prime} \times 72^{\prime\prime}$  scarf is produced using Saxony wool on the front with the ABDO College logo embroidered in the central stripe and has a plain soft black fleece on the back.

The price of this top quality scarf is now £19.95 plus £2.50 postage and packing. To place your order call the ABDO College Bookshop on 01227 733 904, or order online via the ABDO College Bookshop section on the ABDO College website.









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