

# Re:View

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#### Profile feature on Matthew Corbett

We find out about Matthew and his research into dietary supplements for Age-related Macular Degeneration

## An interview with Jill Kemp

'The students are our customers and will always come first'

#### Actively promoting continuous development

John Hardman talks about Boots Opticians investment in student dispensing opticians

## Actively promoting continuous development

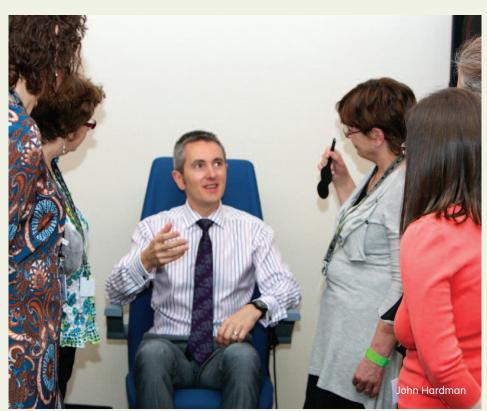
John Hardman talks about Boots Opticians investment in student dispensing opticians

John Hardman is the professional programmes tutor for dispensing at Boots Opticians. He says, "I've been in optics for 20 years and now I am responsible for 'all things dispensing related', whether that be student dispensing opticians (SDO) courses, training or support. I am also a National NVQ assessor and internal verifier, an ABDO examiner, practice visitor and supervisor.

John started his working life in the hospitality industry, but began to look for his next move. He says, "I reviewed my qualifications with a view to pursuing a career in a field that held great interest for me. At the time Dollond & Aitchison, which became part of Boots Opticians, were advertising for student management trainees. Following discussions with my local family optician I found that I had the qualifications necessary, with maths and physics being my strongest subjects at school, to apply. I studied at Bradford College on a three-year course whilst working at the Liverpool city centre practice. I was more than comfortable working with the public and had many years' experience in management so that aspect of the programme was beneficial in reinforcing my existing knowledge. The biggest learning curve for me was the technical aspect of the course, along with returning to study so long after I had left college. I had to be disciplined to allocate plenty of time for the weekly course papers, locking myself away on my days off!"

Boots has been investing in the number of student dispensing opticians it employs. John says, "Professional Programmes, where I am now based, covers both dispensing and optometry training. In my role I have taken on the challenge of our student dispensing opticians programme. We reviewed the current processes in place and identified an opportunity to take on a greater number of students, with the help and support of ABDO College. This resulted in an intake of 63 students in December which is well above the previous years' figure of 24. It's a huge investment by Boots, highlighting how strongly we view the role of dispensing opticians within the business. Boots actively promotes continuous development and it is wonderful to see so many of our outstanding colleagues being rewarded following successful completion of their apprenticeships to now commence their course at ABDO College."

John has helped build some very close relationships with ABDO whilst fulfilling his roles as an ABDO practical examiner and ABDO College trustee. He says, "Speaking with my peers, both within ABDO and within the industry as a whole, I gathered feedback on student and employer experiences with the



## Another milestone year

various colleges. The standard of training and support with ABDO College is second to none, being purpose built to develop the best dispensing opticians for the future of our profession. It helps both the business and students to learn while working as they can relate the theory with the practical application, putting their knowledge into practice to the benefit of customers and other colleagues.

"At Boots we aim to employ the best colleagues with the highest possible standard of learning at any level. The quality of programme provided by ABDO College ticks another box in Boots' requirements. We need to look after the interests of all parties, giving colleagues the best possible experience. We also want them to learn together rather than spread them around the UK. This helps them to build relationships with their peers whilst ensuring the same high standard is maintained for all."

John is excited about the future for optical training. He says, "One of my aims is to continue developing close relationships with ABDO and ABDO College, with a view to investing in the interests of both our current and future dispensing opticians. A number of ABDO colleagues have recently supported our annual Boots Conferences, helping in the delivery of a series of hugely successful paediatric workshops around the country. I personally wish to thank them all. There were some long journeys and some even longer days without lunch breaks!"



2015 sees ABDO College start the year with its highest ever number of students. So it's good to see the profession

has renewed commitment to investing in student DOs and this is highlighted in the feature with John Hardman of Boots Opticians in this issue of *Re:View*.

I would like to take this opportunity to warmly welcome Jill Kemp to the ABDO College team. Jill joined us in November and takes over the role of head of operational services – you can find out more about Jill on pages 8 & 9. A new feature for *Re:View* is 'Quick tips', in the first of the series Gill Elstub outlines how to conduct a successful presentation. In our regular profile feature you can read the findings of Matthew Corbett's research into dietary supplements for AMD.

I also send my personal congratulations to Joseph Smith on attaining the Stepper Prize – as featured on page 3.

Interest in ABDO College courses is currently running high and we hope that 2015 will prove to be another milestone year.

Huntly Taylor FBDO, Chairman, ABDO College Board of Trustees

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#### ABDO College

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## Quick tips

There is an enormous amount of expertise within ABDO College staff and ABDO members. In this new series of features for 2015 we draw on this knowledge to share tips, tricks and advice that will help you whether you are in practice or studying.

We are all called upon to do presentations, either as part of our studies or later when communicating about optics to local groups, or perhaps to promote a good cause. Here are tips from ABDO College lecturer Gill Elstub about what works for her and the students on her course.

Gill Elstub says, "I have sat through some poor presentations and also some good presentations. The main thing regarding a presentation is to prepare, as Geoff Petty 'Teaching Today' states: "Fail to prepare and you prepare to fail". I have seen many people think because they know a topic they will be able to deliver it well and this is not always the case." Preparation for a talk firstly may involve taking all the different topics and sub topics that you want to cover and noting them down. Use a mind map or spider diagram to help you expand your ideas and check that you have covered everything. Think about the aim of your talk and what you want people to come away with. Most people will only retain two or three key points from a presentation: make sure that you have planned the main points to take this into account.

Before you go straight in to creating your slides, think about how people learn. Some people learn through listening, others through vision, both of which can be covered by a traditional slide presentation. Other people, however, learn through doing, which can be more challenging. Think about how you can get your audience to be more than passive recipients of your talk. Can you create a quick poll at the start to find out how much people know about the subject? Are there visual aids that you can use to make your talk more memorable? Or is there something that you can pass round to every participant, giving them a chance to have a hands on experience?

The other element to think about in your presentation is whether you are telling a story. Every presentation, and every story, needs a start, a middle and



Gill Elstub

need to have minimal information on them. These should be cues for the speaker to talk. The speaker should know exactly what they want to add to each slide but do not want to be in a situation where they are reading from the slides." Gill adds, "Make the slides

'The slides which you are presenting from need to have minimal information on them. These should be cues for the speaker to talk.'

an end. On top of that, a good story has a plot, heroes, villains and cliffhangers. Don't let your presentation be a bland recital: think about how you can compel the audience to listen to every word.

Once you have done that, it's time to start creating your slides. When preparing your slides, Gill Elstub advises, "The slides which you are presenting from clear, not overcrowded and aim for the time to be approximately 1–2 minutes per slide."

Alongside your slides you might want to create a script for yourself. Don't read straight from this script, but practice it out loud so you have in mind what you are going to say. Incorporate some improvisation and leave room for spontaneity. Think about questions the audience might ask and how you could respond to them too. As you practice you will find that you get to know your talk, and you may want to adapt it. Then, finally, make some prompt cards with a few words on each to help you stay on track. Don't take notes of the whole thing: it is very hard for the audience to concentrate all the way through if you read your notes word for word unless you are an extremely compelling presenter and storyteller.

If you are unsure about the timing of your presentation, Gill suggests: "When speaking plan how long the presentation should last. Practising speaking it out loud first to determine if you are making yourself clear. Also you can check how long the presentation should last. Be enthusiastic when you are talking to engage others. People only concentrate for 40 minutes tops so need to have something which breaks up a lecture after about 30 minutes. Try to talk at an even pace and not too fast."

Presentation skills can be an essential part of a DO's skill set, and these points should help you. Practice makes perfect, however, so look for further opportunities to get up and talk. Spreading the word about the role of the registered dispensing optician is vital, and if every member speaks to one group a year, knowledge of what we do should grow. ABDO has prepared some PowerPoint presentations for you to adapt for your own use which are available to download from the ABDO website at www.abdo.org.uk.

## ABDO College student receives the Stepper Prize

ABDO College student Joseph Smith is the latest winner of the Stepper Prize, which is awarded for the highest mark in the ABDO Preliminary Qualifying Practical Examination.

During his recent block release studies at Godmersham, Joseph, who works for Specsavers in Bathgate, received the prize from Richard Crook of Stepper (UK) Ltd.

Joseph commenced his career in optics back in 1996 and is now currently working towards attaining the FBDO qualification. Encourage to enter optics by a friend in the profession, Joseph has previously worked for Optical Express and he has now been with Specsavers for the past five years. He is keen water sports enthusiast and prior to optics worked as a steward in a leisure centre.

In addition to Richard Crook, Joseph was also congratulated by Jo Underwood, ABDO College Principal and fellow students also on block release.



Jo Underwood, Joseph Smith and Richard Crook

## Matthew Corbett

We find out about Matthew and his research

In this regular profile feature, we find out more about the research projects completed by students on the BSc in Ophthalmic Dispensing course run by ABDO College in conjunction with Canterbury Christ Church University.

Matthew Corbett is a dispensing optician at Caskie Opticians, Limavady Valley, Northern Ireland, and he qualified last summer. He says, "From school I had planned on studying optometry, but I didn't get the grades and did biological sciences instead. On completing my degree I took a job for a family friend as a lab technician at Caskie Opticians. He then approached me about the dispensing course which I hadn't heard about myself. It seemed like a great way to get a degree while working. I was keen to learn more about optics, both to pursue my original interests and also because it would help my work in practice."

Matthew studied part time, and says, "Block release was great. I thought I was going to be one of the younger ones on the course, but there were lots of people in my age group. They really helped me throughout the course. Being completely new to the optics world I was extremely lucky to meet a group of people who would not only help me through the assignments and exams but that would also remain great friends afterwards."

As part of the BSc course each student has to carry out an individual research project on a topic of their choice. Many choose something that is of relevance to their day to day practice. Matthew says, "I found in practice that more and more people ask not just about eye conditions but what they can do to improve their eye health. We sell the vitamins, and I knew that they helped but I didn't know how. As people asked more in-depth questions and wanted to know which of the different brands would be better for their needs, I wanted to be able to answer them honestly, rather than say I didn't know



and I'd have to go and look it up. I was discussing my individual study with my supervisor, and explained that I wanted it to be as relevant as possible. AMD is one of the most common causes of sight loss, and there was new research out on the use of vitamins, so there were plenty of up to date papers on the topic." Matthew set to work looking at the research on the subject. He says, "I only took one year out between finishing my biological sciences degree and starting to study ophthalmic dispensing, so that stood me in good stead and I found it easy to source relevant papers."

Matthew's research was based on the fact that that AMD affects such a large proportion of low vision patients that it is inevitable in the role of a dispensing optician that questions on the effectiveness of dietary supplements will be encountered. He says, "Whilst the treatment and management of pathologies has been seen by many as the sole responsibility of the patient's GP, studies have shown that for increased patient satisfaction and care an interdisciplinary approach should be used. In order to effectively work alongside and support the professionals involved outside of practice a greater depth of knowledge is now expected in all aspects of care. As such it is essential that as dispensing opticians we are able to answer any concerns or questions an anxious patient with AMD may have regarding possible supplements and their use.

"The GOC professional code of conduct lays out what is expected of a registered dispensing optician and can be applied to such a situation. Point 8 highlights the importance of keeping professional knowledge and skills up to date. In such a rapidly evolving profession new technologies and medication mean a patient would be poorly served by a professional whose knowledge was out of date. Point 10 and 11 of the code raise the ethical issues which can arise from the supply of supplements. The call to be honest, trustworthy and ensure that financial dealings do not compromise the interests of the patient would indicate that the distribution of supplements without an understanding of their effectiveness should be avoided."

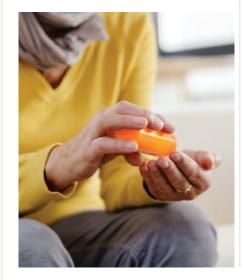
So, what next for Matthew? He says, "At the minute I'm taking a break from studying. Both the contact lens course and the low vision course interest me. In this practice the contact lens course has most relevance to me. I'm also thinking about the career progression course to become an optometrist after my supervisor suggested this. It seems like a big step now, and I'd want to do the contact lens course. I like distance learning through ABDO. The optometry progression course is almost two years full time and I'd have to move to Bradford. In the long term, though, I'm interested in the clinical side of optics. The biological sciences degree helped me when it came to studying anatomy, and it was interesting learning more about AMD for my individual study. I may end up as an eternal student! At the recent ABDO graduation ceremony, the talk let us know about what we could use our qualification for. It was quite an eye opener for me. Becoming a qualified dispensing optician opens a lot more doors now, from further study, to research, to clinical work, becoming a sales rep. It's exciting to know that there are all those opportunities out there."

## Do lutein and zeaxanthin dietary supplements help to slow the progression of Age-related Macular Degeneration?

#### By Matthew Corbett BSc(Hons) FBDO

#### INTRODUCTION

Age-related Macular Degeneration accounts for over 50 per cent of patients registered as sight impaired or severely sight impaired. One suggested cause of disease progression is the effect of oxidation brought about by free radicals. Currently there is no effective treatment available for dry AMD although the condition will not lead to total blindness. Damage due to free radicals is thought to be one possible cause of AMD and therefore work is being done to identify antioxidants which can prevent these chain reactions from occurring (Macular Society 2014). The only course of action to be taken with dry AMD is to try and slow the progression from early



stage dry AMD into advanced stage dry AMD. One such method which has been identified through varies studies is the use of nutrition and dietary supplements. Whilst the results of such studies are usually far from conclusive it is believed that a diet rich in antioxidants can help to slow this progression (Pipe and Rapley 2008).

Free radicals are formed when oxygen reacts with other molecules within the body. One such site where this can occur is in the retina as it has a high demand for oxygen due to its vascular nature (Yu and Cringle 2001). When a free radical is produced it can react with cells within the body starting a chain reaction which can alter the function of that cell preventing it from regenerating normally. Antioxidants work by protecting the body from damage caused by free radicals. Two such antioxidants, the xanthophylls lutein and zeaxanthin, are found to accumulate in the macula and are thought to protect the retina from damage of free radicals and short wavelength light. These compounds, which naturally occur in plants, are part of a group of coloured pigments known as xanthophylls. By preventing blue light from reaching the reting's underlying structures these compounds help to reduce the risk of light induced oxidative damage which could lead to AMD. Neither compound is produced by the body directly but is accumulated through diet.

#### AIN

The aim of this work therefore is to answer the question at the core of this issue and attempt to conclude on whether lutein and zeaxanthin supplements help to slow disease progression in patients with AMD.

#### **METHOD**

Topic selection was carried out by SWOT analysis to ensure relevance to not only dispensing opticians but to the practice environment. Analysis identified the strengths and opportunities afforded to the practice which could be studied. The analysis highlighted the threats and weaknesses within the practice which proved most useful in selecting a topic which could be used to improve the author's knowledge (Cottrell 2003).

Supplement use was encountered in previous work and the discovery that their effectiveness was inconclusive amongst professionals made the topic of particular interest and relevance (Sperduto, Ferris III and Kurinij 1990). Lutein and zeaxanthin effectiveness is a hotly debated topic and there have been two large scale research projects concluded within the last 15 years, Age-Related Eye Disease Studies (AREDS 1 and AREDS 2).

Using Google scholar as a search engine, the terms 'AMD dietary supplements' returned 11,400 search results. Addition of the terms 'lutein' and 'zeaxanthin' narrowed the returned results to just 2,500 allowing for faster and efficient source gathering, further helped through the use of Boolean Operators (Cohen 2010). Literature was checked using the Hek and Moule framework (2006) giving the author the ability to critique the information.

The main articles used for this work are from the two large scale research projects mentioned above. These took the form of multicentre, phase III, randomised controlled trials which appear at the top of the hierarchy of evidence ensuring that the information can be perceived as authoritative (Sanson-Fisher *et al.* 2007). It is ideal that articles used are published within the last five years. Due to length of the trials however this was not possible, enrolment for AREDS 1 beginning in 1992.

#### FINDINGS

AREDS 1 was designed by the National Eye Institute in order to assess whether a daily intake of vitamins and minerals was able to slow the progression of AMD. The formula used was based off previous small clinical trials and animals studies which indicated that low levels of antioxidants and zinc could be associated with a risk of AMD. The antioxidants used were made up of vitamin C, E and beta carotene. Enrolment for the trial began in 1992 and ended in 1998, concluding in 2001 with a median follow up of 6.3 years. The 3,640 participants were divided into categories based on their current stage of AMD and were between 55 and 80 years old. Category 1 contained patients who had no AMD having either a few small or no drusen. Category 2 patients had early stage AMD having several small drusen or a few medium sized drusen in one or both eyes. Category 3 patients had intermediate AMD with many medium sized drusen or one or more large drusen in one or both eyes. Category 4 patients had advanced AMD in one eye only with either atrophy of the retinal cells or the presence of abnormal blood vessel growth. Participants were randomly given one of four possible daily supplements, zinc alone, antioxidants alone, zinc plus antioxidants or a placebo (Age-related Eye Disease Study Research Group 2001).

In category 1 and 2 too few advanced AMD events had occurred in order to reliably conclude whether the formula given slowed progression into advanced AMD. Across each of the four formula options in category 2 only 15 individuals showed progression of AMD, three of which were in the placebo category making assessment impossible for these groups. In categories 3 and 4 antioxidants alone provided a 17 per cent reduced risk of progression into advanced AMD, zinc alone gave a 21 per cent reduced risk and patients given zinc plus antioxidants showed a 25 per cent reduced risk (Age-related Eye Disease Study Research Group 2001). During AREDS 1 new findings were published suggesting that there may have been a link between beta carotene and the development of lung cancer in patients who were smokers, 2 per cent of participants, and they were withdrawn from the trial (Omenn *et al.* 1996).

In 2006 the National Eye Institution began AREDS 2 with the aim of finding out whether the addition of lutein and zeaxanthin or omega-3 acids to the AREDS 1 formula would help to further reduce AMD progression. The study also set out to assess whether the removal of beta-carotene and a lower zinc dosage would significantly affect the risk of AMD. 4,203 participants were enrolled across 82 sites. Those involved were between 55 and 85 years old and were considered to be at high risk of developing advanced AMD. Participants had either large bilateral drusen or large drusen in one eye and advanced AMD in the other (Chew et al. 2012). Again four supplements were tested. Formula 1 was the original AREDS formula given as a control. Formula 2 was the original AREDS formula plus lutein and zeaxanthin. Formula 3 was the original AREDS formula and the omega-3 acids docosahexanoic acid (DHA) and eicosapentanoic acid (EPA). Formula 4 was the original AREDS formula plus lutein,

zeaxanthin, DHA and EPA. The participants also underwent a secondary tier of randomisation. The original AREDS formula would be one of the following; formula 1 the original formula, formula 2 the original formula without beta carotene, formula 3 the original formula with lowered zinc and formula 4 the original formula without beta carotene and lower zinc (The Age-related Eye Disease Study 2 Research Group 2012).

After the five years it was found that the control group had a 31 per cent probability of progression into advanced AMD, the group with added lutein and zeaxanthin had a 29 per cent probability, the group with added DHA and EPA had a 31 per cent probability and the group which took lutein, zeaxanthin, DHA and EPA had a probability of 30 per cent. The additions showed no statistically significant reduced risk of advanced AMD development when compared to the control group. For lutein and zeaxanthin 0.90, P = 0.12, for DHA and EPA 0.97, P = 0.70 and for lutein, zeaxanthin, DHA and EPA 0.89, P = 0.10. The changes to beta-carotene and zinc in the original AREDS formula also had no significant affect on the ability to prevent the progression of AMD, 1.07 p = 0.31 and 1.06 p = 0.32 respectively. Amongst participants who were not smokers there was an increased incidence of lung cancer when the formula with beta carotene was taken compared to no beta carotene, 2.0 per cent vs. 0.9 per cent (p = 0.04). 91 per cent of the participants who developed lung cancer were former smokers (The Age-related Eye Disease Study 2 Research Group 2012).

#### DISCUSSION

The results from the AREDS 1 trial indicated that daily supplements would help slow the risk of progression for those with intermediate AMD into advanced AMD by 25 per cent. There was not enough information available from those participants with no AMD, or in early stage AMD, to draw a conclusion and it therefore less likely that supplements would be recommended to these patients (Age-related Eye Disease Study Research Group 2001). A possible link between taking high doses of beta carotene and the increased risk of lung cancer was also found.

The results from AREDS 2 showed that there was no additional benefit of adding lutein, zeaxanthin, DHA or EPA to the original formula. This may be down to the dietary intake of the participants in the trial which was similar to that of well-nourished populations. The secondary randomisation of the original AREDS formula again indicated that a high dose of beta carotene within the supplement increased the risk of lung cancer among current and past smokers.

#### CONCLUSION

The purpose of this work was to find out whether or not lutein and zeaxanthin helped to slow disease progression in patients with AMD. Whilst comparison of the results from AREDS1 and AREDS2 indicate that no additional benefit is gained by adding these compounds to the existing formula, a slight reduction of progression risk was reported in patients who took the formula containing lutein and zeaxanthin without beta carotene. Whilst this was not statistically significant a formula which contains lutein and zeaxanthin in place of either beta carotene or vitamin A should be recommended to patients who are smokers, or have smoked due to the increased risk of lung cancer. Any studies found were conducted on participants who

were well nourished and therefore further study would need to be undertaken to attempt to recapitulate these results in a more generalised population where the benefits may be more apparent.

The trials also showed that there was insufficient evidence to suggest that daily dietary supplements were of any benefit to patients without AMD or in early stages of AMD and it would therefore be dishonest to recommend them to patients for the prevention of disease progression. The evidence collected was for patients suffering from Age-related Macular Degeneration and therefore no recommendation can be confidently given to younger patients suffering from juvenile forms of the condition. For patients suffering from intermediate to advanced AMD daily dietary supplements containing lutein and zeaxanthin should be advised as achieving a similar intake of these antioxidants would be an extremely difficult task due to the high dosages in question.

The deeper understanding of the theoretical and practical aspects of dietary supplementation gained from this work should allow dispensing opticians to advise each individual patient on the use of lutein and zeaxanthin supplements. The use of dietary supplements as safe and effective tools in the delay of AMD progression not only helps the individual but could have a positive effect on the economic cost such diseases place on the healthcare system.

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## An interview with Jill Kemp

'The students are our customers and will always come first'

Jill Kemp is the new head of operational services at ABDO College. She is responsible for the team that manages much of the day to day administration of ABDO College courses. Jill joins the College from Boots Opticians where she was for 22 years, most recently as practice manager in Canterbury.

Jill is a registered dispensing optician and trained full time at City and East London College. She says, "I did my pre reg with Clement Clarke in Wigmore Street. At that time a lot of the prescriptions we were dispensing came from doctors in Harley Street. In my course I had learnt a lot about the theory of dispensing, and it was great to be able to learn in practice how to use my knowledge to dispense the ideal product. That time has very much influenced my views on training, and how I view ABDO College courses. I can now see that blended learning gives the student much the best way to develop their theory knowledge in parallel to their practical knowledge. That's something that I am really passionate about."

After working at Clement Clarke, Jill spent time as a mobile dispensing optician covering practices in the south east, first for Dollond & Aitchison, then for Boots. She says, "I worked on mobile basis for Boots for about three years before becoming a practice manager for two practices in Folkestone. I then moved up and became accountable for five stores and their teams. Within my time at Boots I also managed various projects. When Boots took the laboratories out of their practices and moved their glazing to Hoya I managed the process across the south east, visiting the glazing facility in Wrexham so I could help teams understand the new processes."

Another major change that Jill has managed took place when Boots merged with Dollond & Aitchison. She says, "At the time I was managing a large city centre practice in Canterbury. It now employs around twenty six colleagues. We were one of the first practices to merge. We took the D&A practice into Boots, bringing together two cultures, two ways of working, and two customer bases. I needed to bring the two teams together. There was no blueprint as to how the new combined practice might look. We even had to bring in a new computer system with details of the Dollond & Aitchison patients, and everyone on the newly combined team had to understand both systems. It was a challenging first year, but at the end we won the practice of the year for the Boots Group."

Jill has been working at ABDO College since the start of November. She says, "At ABDO College the role of head of operational services is new to me. I'm learning every day. What I have discovered already is that there is a really capable team of colleagues in the department who understand the calendar of what's involved and are guiding me." Jill explains the main purpose of her role: "We ensure that we keep the students up to date with course work, qualifications, and liaison and tutor support. We also look after the link for the degree courses with Canterbury Christ Church University, and how the programme is run to deliver the quality of the programme to support the qualification. We manage the process right from the moment when someone initially applies. There is a whole journey, from processing that application, signing them onto the correct course, ensuring they have the right coursework and that they know



the dates for block release, and assisting people to apply for exams and monitoring their progress through the years. There are a lot of deadlines in this department! We are also the first point of contact for questions, answers and reassurance for every student."

Jill is already enjoying her beautiful new working environment at ABDO College which is set in the countryside at Godmersham. The setting complements her interests in health, wellbeing and the outdoors. She says, "Outside work, I am practice, you can only have an average number of staff in place, so there are more peaks and troughs: that was stimulating while I was there but I'm now enjoying the more structured environment. I know how many students will be on block at any one time, and I can plan and adapt in advance." She continues, "The team in the College has been really welcoming. The atmosphere is supportive, and we all have the same goal, for students to succeed. To deliver on that goal is such an amazing thing

'I can now see that blended learning gives the student much the best way to develop their theory knowledge in parallel to their practical knowledge. That's something that I am really passionate about.'

trained in Swedish body massage and reflexology. I enjoy yoga and pilates, and if it's a nice day you might find me rollerblading or riding my bike along the seafront at Sandgate."

Jill says of her first few months on the job, "Working here is a very different pace to retail. I can plan my workload, and it is more predictable – I like that I can usually see a job through from beginning to end. The students are our customers and will always come first, so there will always be times when I have to stop what I'm doing to sort something out, but it is more measured than the flow of customers in practice which can depend on the weather, when people have been paid etc. In in an amazing environment, and I love the way that we work towards setting up students for success." Jill concludes, "Now, instead of looking out at the bus station I'm looking at rolling fields. The whole environment is a world away from Canterbury city centre. There are no traffic jams and I can predict how long it will take me to get to work. I like the hustle of the city sometimes but I prefer this view. I'm happy to be here, I feel like I've been here for longer than I have. My work philosophy is that I aim to make people happy and make a difference. Treat people with respect, make them happy, and you will get the results. This feels like a place I really want to be."

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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.



## A unique career opportunity in dispensing optics

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- Block release accommodation can be provided
- Year 1 courses will commence in September 2015

#### Entry requirements

- Grade C or above GCSE in English, mathematics, science and two other subjects, including evidence of recent learning
- Applicants must be working in practice as a trainee dispensing optician for a minimum of 30 hours per week and have the support of their employer

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> For further information and application forms for this and other courses, or to request a copy of the ABDO College Prospectus, please contact the ABDO College Courses Team on 01227 738 828 (Option 1) or email info@abdocollege.org.uk

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