LOOKING BEYOND THE LIGHT-BULB

IN PARTS 1 and 2, I made predictions for conventional workloads, and discussed problems regarding the projection of future demands for sight testing. In the final part, I present my conclusions after looking briefly at possible future developments concerning optometry.

Competition for future optometric practice

With job opportunities in decline it is to be expected that other occupations will be eyeing the work that OOs currently undertake and wondering whether they might carry it out themselves. For example, if unemployment amongst those medically qualified continues to increase then one would expect more interest in sight-testing from this quarter. Recently it has been very stable with around 950 OMPs working in the Health Service. Heightened interest could take the form of more doctors taking part in testing and/or increased testing rates from those already involved compared with optometrists. Either way the effect might be to reduce the 6,200 OOs' share in the work. Thus, it might well mean that the Table 3 figures represent a rather too

optimistic picture. There have also been suggestions that special arrangements should be instituted to enable more of the 3,000 dispensing opticians to become qualified. Then there are the 700 orthoptists. If there were significant changes in this area then there certainly would not be enough work to go round and unemployment could become a reality for some ophthalmic opticians. We are all aware of the opinions of those who say that you do not need to be registered in order to be 'qualified' to test eyes, even that 'self-testing' in many cases is quite reasonable. Technological advance with automatic refractors and other computer controlled equipment will continue to bring the day closer when patients are allowed to obtain their prescriptions from un-registered testers. No one knows when this will be but it will of course mean that optometrists will then be in competition with the less qualified. Forewarned is forearmed. Virtually all work can become de-skilled. No profession has an absolute right to exist. Everyone is aware of the problems that computers have brought and continue to bring to the printing industry. Are yesterday's candle-makers today's light-bulb

manufacturers?

There are those (students among them) who believe that degree courses should more closely reflect optometry as it is practised today with more repetitive practical work permitting the refinement of procedures and routines. But such a narrow view of vocational training would appear dangerous in the long term. It must be remembered that in practice the undergraduate's teaching year is only of the order of 25 weeks long with contact-with-staff time usually limited to 25 hours or less per week. More time just refracting and dispensing must mean less time on other work—a balance must be kept. (Of course, one would expect students to practice their clinical skills outside of timetabled periods and many will gain valuable work experience during their vacations. The pre-registration year is presently the main period for students to practice and refine what they have learned.)

It is clear that there is scope for improvement on the conventional optometric front. We have already commented upon the apparent neglect of paediatric optometry. Contact lens work is an obvious area where growth will continue and there

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was only one voice in the OFT report which did not see un-qualified fitting as a danger at the present time. But are there any other aspects of vision care which should warrant greater attention from the educationalists?

Need for innovation

The philosophy behind creating degree courses in ophthalmic optics in this country back in 1964 was that the profession should not remain static but should evolve. Of course, there are many outside of optics who see in such an attitude a selfish and narrow-minded professionalism designed to boost the monopoly of optometrists in whatever activities they can corner (eg perhaps ex optometry journalist Watts, 1979). But it would seem clear that optometry needs to expand and develop in order to survive. In a article, Harding (1984) recent opined that ophthalmic optics would have no future if by the year 2025 practices were similar to today's (see also Charman, 1984). Echoing the deliberations of earlier writers, he suggested that ophthalmic opticians should be carrying out more preschool screening, be more involved with ophthalmologists, neurologists and neurosurgeons in assessment and diagnosis, and be concerned with visual prosthetic devices.

There may be political difficulties with the details of some of Professor Harding's suggestions, but the point that education must be broad and innovative is sound. Ophthalmic optics/optometry degrees are vocational, but they are also interdisciplinary areas of study. A strong educational base must be maintained and we should not be afraid of experimentation.

Of course it is no good educating the next generation of professionals and abandoning the previous. More emphasis needs to be placed on maintaining and improving its knowledge and skills with mid-career training/ continuing education, a view which the profession at large appears to share (French and Loran, 1983d) with 70 per cent ^)f graduates favouring mandatory further education.

One of the dangers of unplanned increases in recruitment is that they may lead to the need for later cutbacks and the higher education system does not lend itself easily to stop-go policies. It would appear that the general view at present taken by the UGC is that large units are most efficient. Thus any cuts would be likely to take the form of attempts to close down small departments rather than reductions in the intakes of the large. (We have seen this with the moves to close Pharmacy at Herriot-Watt and a report suggested that four of the 36 UK architecture schools should close.) As there are only six UK optometry departments, the loss of just one would be a serious blow to the innovative potential upon which the profession depends. A variety of approaches is an invaluable feature for evolution.

Conclusions

The main stimulus to increase recruitment at present is probably economic and comes from the entrepreneurs and those who have staff vacancies. But any additional professional recruitment cannot be short-term. You cannot say today 'We could do with a few hundred extra OOs/ and then say in a few years' time 'We could do with a few hundred less' . . . and present knowledge suggests this would be the consequence of an increase today. The onus is on those who favour an increase to prove that there has been a substantial change in the FTE values which would warrant it and to prove that this need is not a short term one.

The consequences of too high a recruitment are to be seen in pharmacy where male chauvinists have recently blamed relatively low pay on the numbers of women pharmacists available instead of the numbers of pharmacists of both sexes.

The last thing that we should be doing at present is increasing recruitment to the profession. We must consider the conventional and radical futures of optics. It would be worthwhile to find out more about the work patterns of today's optometrists and the characteristics of today's patients and non-patients, and give more thought to the nature of future vision care. We should be investing more in research and education, and the future of the profession.

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