Minor Eyes Condition Service (MECS) Training and Accreditation

There are two parts to the training and accreditation of Optometrists and Contact Lens Opticians (CLO’s) for the MECS pathway in Staffordshire. Both Optometrists and CLOs are required to undergo the same training.

The training and accreditation for MECS is overseen by the Wales Optometry Postgraduate Education Centre (WOPEC), and delivered locally by lead assessors from Staffordshire LOC.  Upon its completion, the successful practitioner is awarded the national LOCSU MECS certificate of accreditation. The first two parts are based on the course used to train optometrists who provide MECS in Wales.   Part 1 must be completed before Part 2 can be started.  A foreign body removal training workshop is provided at the same time as the Part 2 assessment.

**1)      MECS Part 1: Distance Learning Lectures**

Practitioners need to complete a course of theoretical training:

* Lectures and MCQs provided online
* 7 CET points in total
* An individualised certificate (in PDF format)

*Lectures include:*

* The cornea and corneal foreign bodies
* Sudden loss of vision
* Red eye
* Flashes and floaters
* Dry eye
* AMD overview, signs and optometric investigation
* AMD current treatments and optometric management

**2)      MECS Part 2: Practical Station Assessments**

WOPEC has previously worked together with Staffordshire LOC to organise practical assessments for Optometrists consisting of five 5 minute objective structured clinical examination (OSCE) stations, held under invigilated conditions. ABDO is working with WOPEC to provide practical assessments for CLO’s.

These are designed to assess optometrists’ skill and knowledge in the areas of referral, communication, clinical decision making and interpretation of results.  These have previously been staged in ophthalmology outpatient departments or from larger opticians’ practices

Examples of typical OSCE stations:

·         Station 1              Volk BIO

Practitioners are required to demonstrate their ability to do indirect ophthalmoscopy. A model eye will be mounted on a slit- lamp; within the model eye there are words which practitioners must transcribe correctly.

·         Station 2              Structured Viva

Practitioners are required to interpret a variety of clinical data- this may include pictures, results of clinical examinations, clinical signs, or a video of a history and symptoms.

·         Station 3              Patient interaction

An actor plays the part of the patient. Practitioners are observed interacting with the patient. They may be required to:

* Explain a diagnosis, investigation or treatment
* Decide on appropriate management with a patient
* Break bad news
* Explain a diagnosis
* Involve the patient in the decision-making
* Deal with an anxious patient
* Give advice on lifestyle, health promotion or risk factors

.          Station 4              Structured Viva

A repetition of station 2 above

.          Station 5              Referral

Practitioners are required to interpret a variety of clinical data- this may include pictures, results of clinical examinations or clinical signs. Based on the data, they may be required to write a short report or a referral letter. Alternatively, they may be required to request an emergency referral. In this scenario the assessor acts as a casualty doctor on the other end of the phone.