



*UNDERSTANDING PATIENT
BEHAVIOUR IN OPTICIANS:
FACTORS, RESPONSES, AND
COMPLAINT PREVENTION*

C-106662

INTRODUCTION

- Understanding patient behaviour, managing complaints, and taking proactive steps to avoid them is a topic that concerns every optician, optometrist, and eyewear professional:
- Patients' behaviour can be influenced by a variety of personal situations, and how we respond to their needs and concerns can significantly impact their experience

FACTORS INFLUENCING PX BEHAVIOUR

Personal Situations:

- a. Economic Factors: Patients' financial situations can affect their choice of eyewear and willingness to invest in quality products.
- b. Health Conditions: Visual impairments, eye diseases, or comorbid health issues can influence patient behaviour and expectations.
- c. Emotional States: Anxiety, stress, or other emotional states may affect how patients communicate and engage during their visit.
- d. Lifestyle and Hobbies: Patients' activities and interests play a role in their eyewear preferences.

*PREVIOUS
EXPERIENCES
&
EXPECTATIONS*





Previous Experiences:

- a. Positive Experiences: Patients who have had good experiences at an optician's are more likely to return and refer others.
- b. Negative Experiences: Past negative encounters, such as rude staff or incorrect prescriptions, can lead to apprehension.

Expectations:

- a. Communication: Patients may have varying levels of knowledge about eyecare, leading to differing expectations about the examination and eyewear.
- b. Speed of Service: Some patients prioritize quick service, while others value thoroughness.

Discussion Points:

- What are the key steps when responding to a complaint?
- What are the key steps to avoid complaints arising?



KEY STEPS TO RESOLVE COMPLAINTS:

Acknowledgment:

Active Listening: Show empathy and attentiveness when patients voice concerns.

Timely Response: Address complaints promptly to prevent escalation.

Resolution

Identify the Issue: Clearly understand the problem by asking open-ended questions.

Provide Solutions: Offer practical and mutually acceptable solutions.

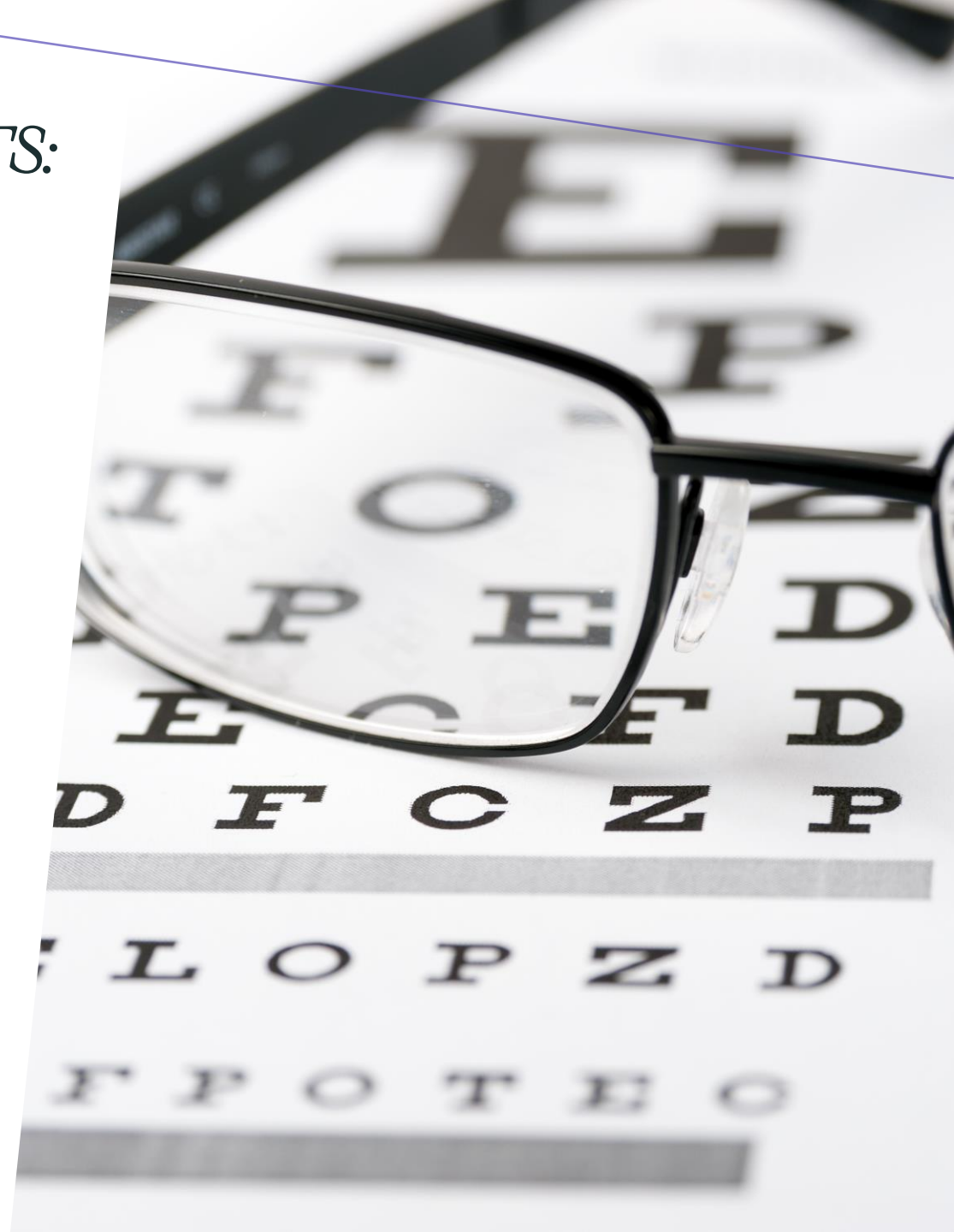
Follow-Up: Ensure the issue is resolved and check in with the patient after.

De-escalation:

Stay Calm: Maintain composure and professionalism during difficult interactions.

Empathize: Put yourself in the patient's shoes to better understand their perspective.

Apologize: Offer a sincere apology when appropriate.



KEY STEPS TO AVOID COMPLAINTS:

Staff Training:

Customer Service Skills: Equip staff with effective communication and interpersonal skills.

Product Knowledge: Ensure staff can educate patients on eyewear options.

Quality Assurance:

Accurate Prescriptions: Double-check prescriptions to minimize errors.

Eyewear Selection: Offer a variety of quality eyewear options to meet diverse needs.

Clear Communication:

Informed Consent: Explain procedures, costs, and expectations to patients.

Follow-Up Instructions: Provide clear post-visit guidance.

Feedback Mechanisms:

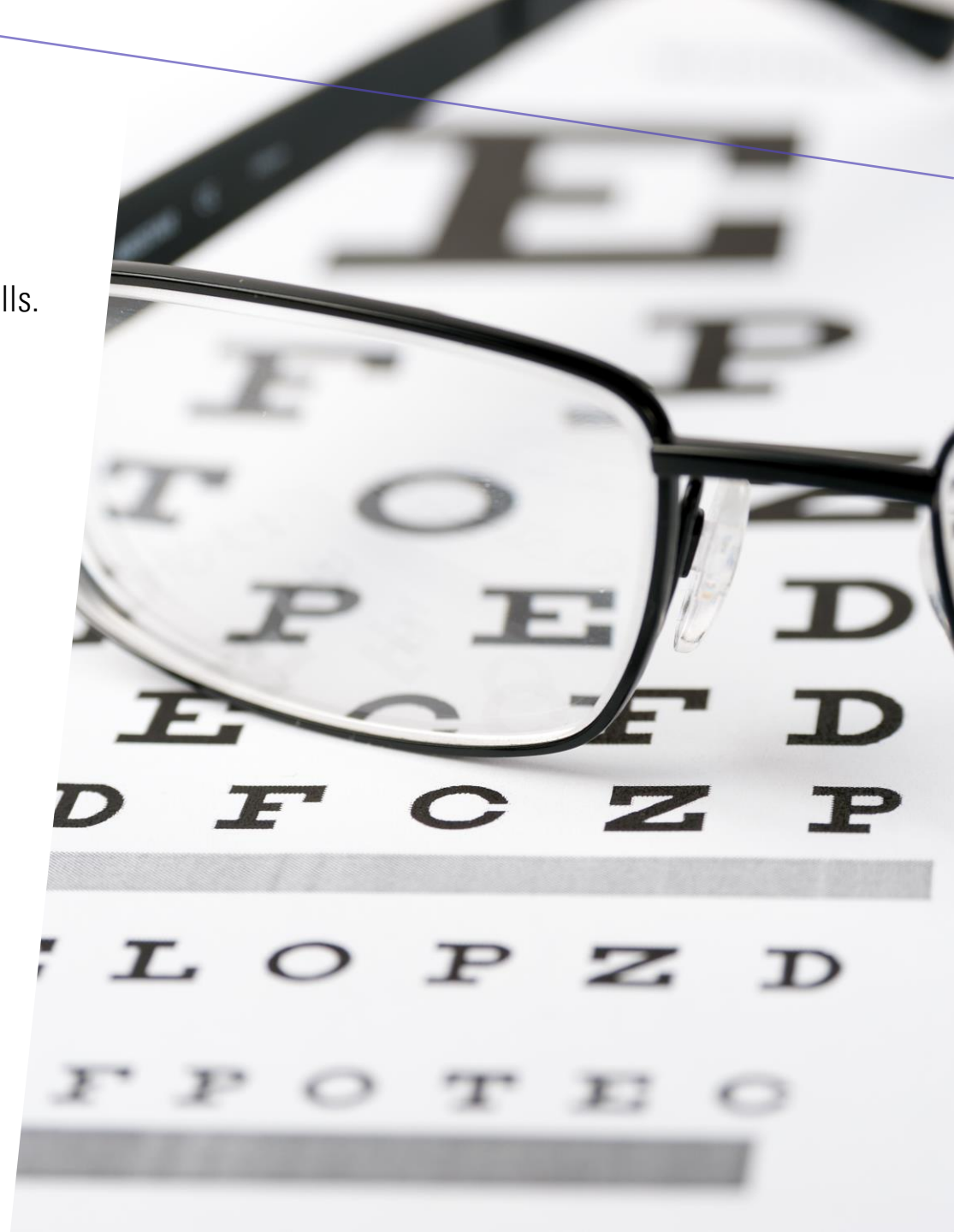
Surveys: Collect patient feedback to identify areas for improvement.

Regular Meetings: Hold team meetings to discuss feedback and implement changes.

Empowerment:

Patient Education: Educate patients about eyecare to manage expectations.

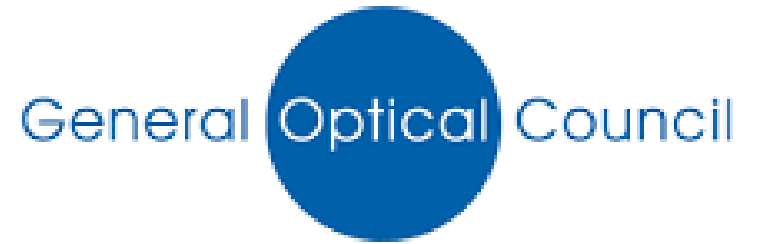
Choice Empowerment: Involve patients in decisions about their eyewear.





- In the world of optics, understanding patient behaviour, responding effectively to complaints, and proactively avoiding issues are pivotal for creating a positive patient experience
- By considering personal situations, responding empathetically to complaints, and implementing preventive measures, opticians can not only enhance patient satisfaction but also build lasting relationships and foster trust within the community
- Remember, patient-centered care is not just a slogan; it's the foundation of a successful optician's practice

- The General Optical Council is the regulatory body for optometrists, dispensing opticians, and optical businesses in the United Kingdom
- The GOC provides guidelines for handling complaints within the optical profession
- Here is an overview of the correct complaints procedure and guidance outlined by the GOC: By following these procedures and guidance from the General Optical Council, optical practices can effectively address and resolve complaints while upholding the standards of practice and maintaining trust and confidence among patients



Standards for optometrists and dispensing opticians

18. Respond to complaints effectively

- Operate a complaints system or follow the system that your employer has in place, making patients aware of their opportunities to complain to yourself or your employer. At the appropriate stage in the process, the patient should also be informed of their rights to complain to the General Optical Council or to seek mediation through the Optical Consumer Complaints Service.
- Respect a patient's right to complain and ensure that the making of a complaint does not prejudice patient care.
- Respond honestly, openly, politely and constructively to anyone who complains and apologise where appropriate.
- Provide any information that a complainant might need to progress a complaint, including your General Optical Council registration details and details of any registered specialty areas of practice.

Standards for optometrists and dispensing opticians

19. Be candid when things go wrong

- Be open and honest with your patients when you have identified that things have gone wrong with their treatment or care which has resulted in them suffering harm or distress or where there may be implications for future patient care. You must:
 - Tell the patient or, where appropriate, the patient's advocate, carer or family that something has gone wrong.
 - Offer an apology.
 - Offer appropriate remedy or support to put matters right (if possible).
 - Explain fully and promptly what has happened and the likely short-term and long-term effects.
 - Outline what you will do, where possible, to prevent reoccurrence and improve future patient care.
- Be open and honest with your colleagues, employers and relevant organisations, and take part in reviews and investigations when requested, and with the General Optical Council, raising concerns where appropriate. Support and encourage your colleagues to be open and honest, and not stop someone from raising concerns.

1. Initial Contact and Informal Resolution:

- Encourage the patient to raise their concerns directly with the optometrist or dispensing optician involved or with the practice manager.
- The practice should have a clear and accessible complaints process that patients can follow.
- At this stage, most complaints can be resolved informally through open communication and addressing the issue promptly.

2. Formal Complaints Procedure:

- If the patient is not satisfied with the initial response or if the complaint is of a serious nature, they may choose to escalate it to a formal complaint.
- The practice should have a written complaints policy, and the patient should be informed about how to make a formal complaint.
- The complaint should be made in writing, including a clear description of the issue and any relevant supporting documents or evidence.

3. Investigation and Response:

The practice should acknowledge receipt of the formal complaint within a specified timeframe (usually within a few working days).

An investigation into the complaint should be conducted by an impartial individual within the practice or by an external party.

The investigation should aim to establish the facts surrounding the complaint.

A written response should be provided to the complainant within a reasonable timeframe, usually within 20 working days. The response should include:

- An explanation of the findings from the investigation.
- Any remedial actions taken or planned.
- Information on how to escalate the complaint if the patient remains dissatisfied.

4. Escalation to the Optical Consumer Complaints Service (OCCS):

- If the patient is not satisfied with the practice's response or if the complaint involves a potential breach of the GOC's Standards of Practice, they can escalate the complaint to the OCCS.
- The OCCS is an independent body that provides mediation and dispute resolution services for optical complaints.



5. Reflection and Improvement:

- Practices should use complaints as an opportunity for reflection and improvement.
- Regularly review and update complaints policies and procedures based on feedback and experiences.

6. Maintaining Records:

- Maintain detailed records of all complaints, including the nature of the complaint, actions taken, and outcomes.
- Records should be kept confidential and in compliance with data protection regulations.

7. Patient Feedback:

- Encourage patients to provide feedback, both positive and negative, to help improve the quality of care and service provided.

8. Monitoring and Reporting:

- Practices should monitor and report on complaints as part of their governance and quality assurance processes.
- Serious complaints or those involving potential professional misconduct should be reported to the GOC as required by their guidelines.

Discussion Points:

For each of the following scenarios discuss the following:

- Root cause of the complaint
- How it could have been avoided
- How you will resolve the complaint



Miss. Jackson, a 35-year-old patient, recently visited your practice for a dispense with an outside Rx. She received her new specs but started experiencing blurry vision and headaches after receiving her new glasses.

The incorrect prescription resulted in discomfort and hindered her daily activities, such as reading and driving. Miss. Jackson felt frustrated and dissatisfied with her eyewear, which negatively impacted her quality of life.





RESOLUTION OPTIONS

- 1. Acknowledgment: Our staff should actively listen to Miss. Jackson's concerns and express empathy for her discomfort.
- 2. Verification: Review the prescription and conduct another comprehensive eye examination to confirm the error.
- 3. Correction: Provide Miss. Jackson with the correct prescription glasses free of charge and ensure the accuracy of the new lenses.
- 4. Follow-Up: Schedule a follow-up appointment to verify the effectiveness of the new glasses and ensure her satisfaction.




"The following Optical Confederation (OC) guidance changes traditional thinking on some aspects of handling non-tolerance. In essence it states that when a practice accepts a "walk-in" prescription then they should also accept responsibility for financing and managing any non-tolerance issues.

It is not good for the patient, or for the image of the profession, to have patients getting bounced back and forth between practices. It is also unsatisfactory to expect the prescriber to fund replacement lenses when they had no control over the supply"

"It is the responsibility of the dispensing practice to resolve any non-tolerance issue and if necessary to issue a new dispense. They have the contract with the patient and they should ensure that the patient has spectacles that are fit for purpose. Regardless of the reason, in any situation where the patient is unhappy with the spectacles they purchase or the service they receive, the overriding priority must be to resolve the situation:

- In a way that causes least inconvenience to the patient
- Without undermining the patient's confidence in the optical sector, by for example calling into question the competence and professionalism of colleagues in other practices.

The dispensing practice should always act in the best interests of the patient; they might therefore, with the patient's consent, contact the original prescriber to ensure there is no reason to suspect there might be a clinical reason for the non-tolerance"



A patient comes in for a routine eye examination. The patient has been coming to the practice since childhood and is now 25. Since their last visit the patient now identifies as a female and will begin the process of gender reassignment soon.

The patient asks the receptionist to change their gender status on the records before going in for the eye examination. The receptionist advises that the optometrist would have to change the records.

During the examination the patient advises the optometrist of the situation, as previously discussed with the receptionist. The Optometrist changes the patient's name on the record but not the title and gender. During the handover the Optometrist accidentally calls the patient Mr Smith.

After the dispensing process is completed the patient receives a text message a week later for "Mr Smith" advising to book a collection appointment.

Upon attending the collection appointment the patient is unhappy about the situation and wants to make a formal complaint as they feel they have been discriminated against.

Gender Reassignment

“(1) A person has the protected characteristic of gender reassignment if the person is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex.

(2) A reference to a transsexual person is a reference to a person who has the protected characteristic of gender reassignment.

(3) In relation to the protected characteristic of gender reassignment—

1.a reference to a person who has a particular protected characteristic is a reference to a transsexual person;

2.a reference to persons who share a protected characteristic is a reference to transsexual persons.”

<https://www.legislation.gov.uk/ukpga/2010/15/section/7>



HM Government

Gender Recognition Act 2004

“In 2004 the Gender Recognition Act was established and from then on permitted gender changes to be recognised lawfully/formally using a Gender Recognition Certificate (GRC). Official records, including medical records, cannot be changed without the patient presenting a GRC, where they have had their change in gender lawfully recognised. Only from then on, the new gender can be referred to legally in the records, from the date on the GRC.”

<https://www.abdo.org.uk/wp-content/uploads/2020/03/Gender-Recognition-Guidance-FINAL.pdf>



HM Government

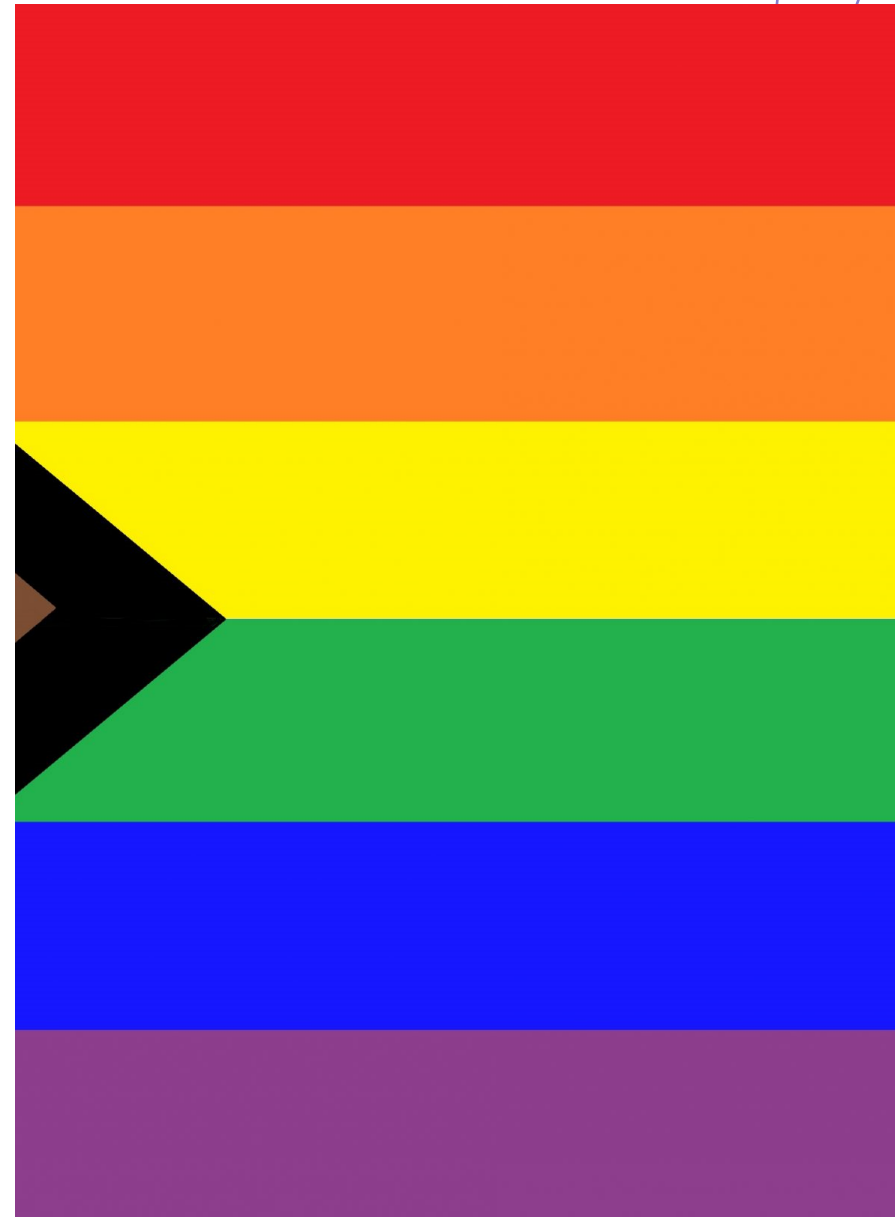
Communication Is Key

Although the gender cannot be legally changed on a medical record without a Gender Recognition Certificate, the title could be changed and notes added to the record to ensure all staff are aware of the patient's preferred pronouns.

This must be communicated with the patient so all parties understand the legality regarding medical records.

Although the patient has the right to gender reassignment and to be treated fairly without discrimination, the sex you are born with can have implications with regards to medical conditions. For example, being female is a risk factor for closed angle glaucoma(1) so it is important from a healthcare perspective to have the relevant knowledge to provide the best care for the patient.

Although this information is relevant to the health record we must respect the patients privacy (GOC standard 14) so this information should not be shared with members of staff who are not part of the clinical process.



Mr Thompson came into your practice for an eye examination after noticing a small blurred area in the vision of their right eye and occasional floaters.

After completing the test the optometrist doesn't notice any signs of pathology and advises the patient to update spectacles.

After trying the new spectacles for the patient notices that the problem is not resolving and seeks a second opinion. After visiting his local opticians they detect a small retinal hole following a dilated eye exam and using OCT and refer the patient to an ophthalmologist for treatment.

Mr Thompson then returns to your practice to complain that this was not detected by your optometrist and wants to make a formal complaint. Mr Thompson is adamant that his vision has been irreparably damaged and wants to escalate the complaint to the governing bodies.





After speaking to your optometrist it was established that no dilation took place as patient was unsure when the floaters first started and as the patient was driving she decided it would be best not to dilate.

After conducting a review of the records there was no mention of this conversation with the patient documented.

Your optometrist is upset by the complaint and feels that it is unfair as the practice doesn't have an OCT to detect these problems. She asks you to support her and is worried she will end up in front of a fitness to practice panel.

Principles of examining a patient who presents with flashes and floaters

A256

If you are unable to carry out an adequate examination when you examine a patient who presents with flashes and/or floaters, you must refer the patient to a practitioner who is competent to do this.

A257

You should ensure that front line or support staff are trained to deal with such a patient who contacts the practice. Patients should be told a diagnosis cannot be reached without an examination.

A258

If you carry out an examination, you should continue until you detect a problem and can make a diagnosis or have sufficient evidence to decide what action to take.

A259

- 1.If you suspect a retinal break or tear, you should, as a minimum: take a detailed history and symptoms, looking for particular risk factors
- 2.examine the anterior vitreous to look for pigment cells
- 3.perform a dilated fundal examination, using an indirect viewing technique
- 4.give appropriate advice to the patient, which you back up with written information.

A260

You should follow local protocols for the management and referral of these patients.

A261

You should keep full and accurate records of all patient contact.



THE COLLEGE OF
OPTOMETRISTS

1. Acknowledge the Complaint Promptly: Optometrists should acknowledge the complaint as soon as possible, typically within three working days of receiving it. This initial communication should express empathy and a willingness to address the issue.

2. Investigate Thoroughly: Optometrists should conduct a thorough investigation into the complaint. This may involve reviewing the patient's records, examination notes, and any relevant evidence. It is essential to identify the nature of the missed pathology and the circumstances surrounding it.

3. Maintain Patient Confidentiality: Optometrists must ensure that patient confidentiality is maintained throughout the complaints process. Avoid discussing patient-specific details with anyone not directly involved in the investigation.

4. Communication with the Patient: Maintain open and transparent communication with the patient who made the complaint. Keep them informed about the progress of the investigation and the steps being taken to address their concerns.

5. Apologize if Necessary: If the investigation reveals that there was indeed a failure in detecting pathology, optometrists should offer a sincere apology to the patient. Acknowledging the mistake and expressing regret can go a long way in resolving complaints.

6. Rectify and Learn: Take steps to rectify any identified issues or shortcomings in the optometry practice. This may include additional training, improved record-keeping, or changes to examination protocols. It's crucial to use the complaint as an opportunity for learning and improvement.



Association of
Optometrists

7. Report to Regulatory Bodies: If the missed pathology is of a serious nature or could impact patient safety, optometrists should report the incident to the General Optical Council (GOC), which is the regulatory body for optometrists in the UK. Compliance with reporting requirements is essential.

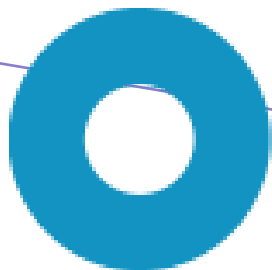
8. Offer Resolution: Depending on the nature of the complaint and the investigation's findings, offer a resolution to the patient. This could involve further examinations, referrals to specialists, or additional services as deemed necessary.

9. Document the Process: Maintain comprehensive records of the complaint, investigation, actions taken, and communications with the patient. This documentation is essential for accountability and future reference.

10. Review and Improve: Periodically review the practice's procedures and protocols to prevent similar incidents in the future. Continual professional development is essential to stay up-to-date with the latest diagnostic techniques and best practices.

11. Seek Legal and Insurance Advice: If necessary, consult with legal counsel and your professional indemnity insurance provider for guidance on handling the complaint and any potential legal implications.

12. Maintain Professionalism: Throughout the process, optometrists should maintain professionalism, respect patient rights, and act in accordance with the highest ethical standards.



Conclusion:

In the world of optometry, understanding patient behaviour, responding effectively to complaints, and proactively avoiding issues are pivotal for creating a positive patient experience. By considering personal situations, responding empathetically to complaints, and implementing preventive measures, opticians can not only enhance patient satisfaction but also build lasting relationships and foster trust within the community. Remember, patient-centred care is not just a slogan; it's the foundation of a successful optician's practice.



E Y E  A R E

The logo for 'EYE CARE' features the word 'EYE' in blue, a stylized green and blue eye icon, and the word 'CARE' in blue. The letters are spaced out and in a clean, sans-serif font.