



City Research Online

City, University of London Institutional Repository

Citation: Harper, R. A. & Lawrenson, J. G. (2018). Rapid expansion of optometry student numbers in the UK: potential for significant risk. *Ophthalmic & Physiological Optics*, 38(5), pp. 471-473. doi: 10.1111/opo.12585

This is the accepted version of the paper.

This version of the publication may differ from the final published version.

Permanent repository link: <https://openaccess.city.ac.uk/id/eprint/20859/>

Link to published version: <https://doi.org/10.1111/opo.12585>

Copyright: City Research Online aims to make research outputs of City, University of London available to a wider audience. Copyright and Moral Rights remain with the author(s) and/or copyright holders. URLs from City Research Online may be freely distributed and linked to.

Reuse: Copies of full items can be used for personal research or study, educational, or not-for-profit purposes without prior permission or charge. Provided that the authors, title and full bibliographic details are credited, a hyperlink and/or URL is given for the original metadata page and the content is not changed in any way.

City Research Online:

<http://openaccess.city.ac.uk/>

publications@city.ac.uk

Guest Editorial for OPO - Draft

Rapid expansion of optometry student numbers: Potential for significant risk

Population ageing and capacity within ophthalmic healthcare provision are familiar interwoven topics. The challenges facing eye care providers, including optometry, are considerable. Most would argue that some growth in the number of optometry professionals in the overall workforce delivering eye care is essential, although in the UK and elsewhere there might be reasonable debate about whether more optometrists with entry level training, working within traditional sight testing arrangements, is what is required. Conversely, there is a valid case for upskilling a proportion of the profession through postgraduate training to provide enhanced community eye care services that would meet the growing needs of an aging population. Companion changes in the pattern of working practices, including changes in the demographics of the profession itself and the potential for an increase in part time working, adds further complexity to our understanding of the future full time equivalent workforce required. There is, as yet, no high quality data on the future workforce requirement within UK optometry set against anticipated future demand for optometry services. The Optical workforce survey, published in 2015¹ and led by the College of Optometrists in partnership with other stakeholders, found that, when weighed against preferences for flexible working, changes to service delivery structures, and key demographic changes in the population, optometry may be facing an *undersupply* of the optometric workforce overall, but that there may be pockets of regional oversupply, and more marked undersupply in some geographical areas. This survey was based upon questionnaire data from 2000 College members, ~32% of whom responded, and the report noted further urgent investigation was required. Despite a dearth of evidence, the optometric workforce has grown dramatically over the last 20 years. During the period 2000-2017, there has been a ~75% increase in the number of registered optometrists from 8,646 in 2000 to 15,151 in 2017², whereas the population grew by ~ 12% over the same period³. Optometry undergraduate provision in the UK has witnessed a significant growth in recent years, and this growth looks set to rise very steeply in the near future, with an unprecedented expansion of the number of providers of optometric undergraduate training. Twenty years ago, graduating optometrists moving into pre-registration placements numbered ~250 post-graduate (pre-registration) optometrists, with today's cohort size seeing a threefold increase over time to the current figure of ~750 trainees registering with the College's the Scheme for Registration, an annual figure which looks set to rise sharply in the next decade.

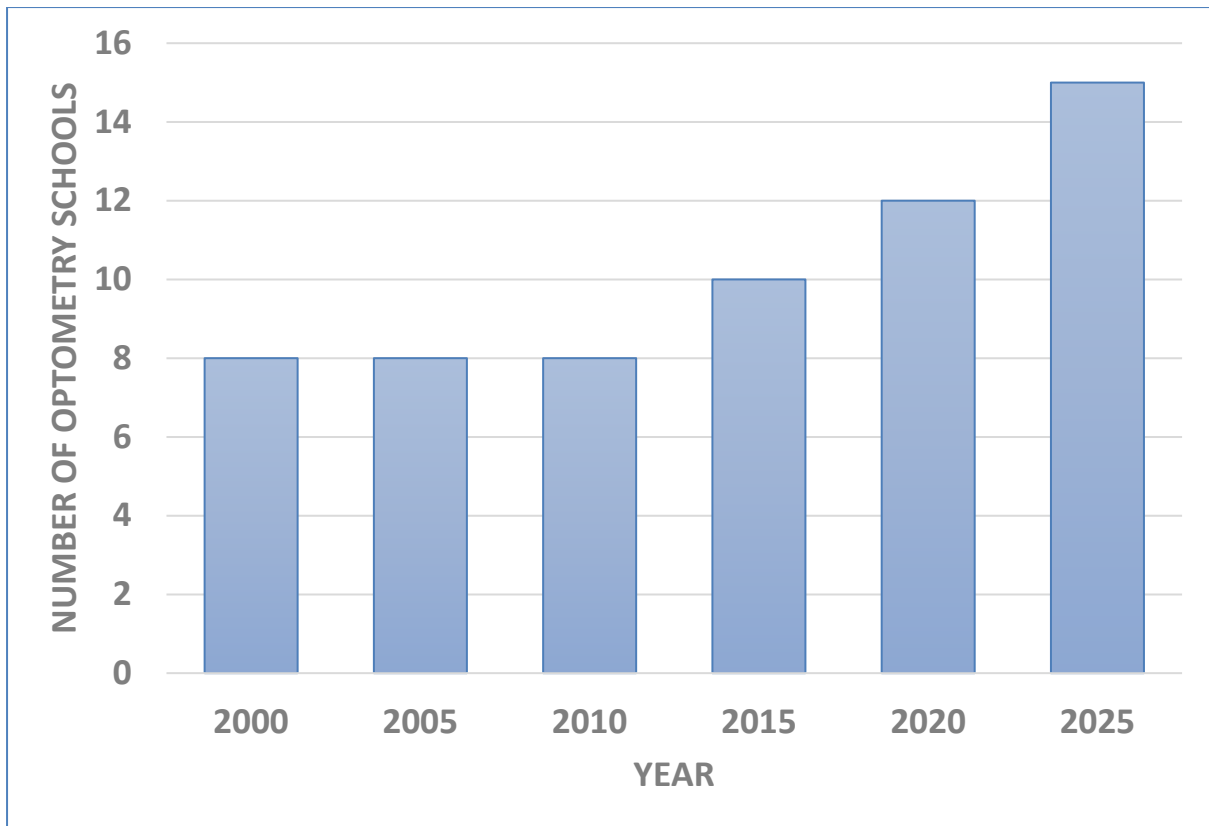


Figure 1. Actual and projected growth in the number of training providers 2000 to 2025, a percentage increase substantially in excess of projected population growth during the same timeline (Source: Office for National Statistics).

The traditional educational provision from Aston University, the University of Bradford, Cardiff University, City University of London, Glasgow Caledonian University and the University of Manchester was augmented by the University of Ulster in 1995, Anglia Ruskin University in 1998 and subsequently Plymouth University in 2011. Further optometry programmes at the University of Hertfordshire and the University of Portsmouth have a student intake and provisional approval status from the UK regulator, the General Optical Council (GOC). These eleven UK training providers will be joined by the University of the West of England this year, with a further five providers apparently expressing an interest in developing optometry programmes and/or recruiting academic staff for such course development. By 2025 there is a realistic prospect that there will be at least 15 UK universities offering optometry training programmes, a trajectory that is well in excess of population growth (Figure 1).

This expansion in optometry undergraduate provision in the UK has international parallels. Australia's traditional optometry programmes at the University of Melbourne, Queensland University of Technology and the University of New South Wales have been joined by provision from Deakin University, Flinders University and the University of Canberra, the latter currently seeking accreditation for their course by the Optometry Council of Australia

and New Zealand (OCANZ). Healy et al⁴ have published a study modelling the results of the relationship between the projected Australian optometric workforce and projected demand for optometric services for the period 2011 to 2036. Under any of the demand and supply projection scenarios the authors describe in their paper, there was a significant predicted *oversupply* of optometrists with respect to predicted demand for services in 2036. In September 2014 a position statement from Optometry Australia stated that it is not in the interests of optometry students, the public, Government, or the optometry profession, to support growth in the optometry workforce beyond growth in service demand⁵. Optometry Australia went on to state that public university funding systems for optometry student placements should be amended to facilitate the balance between enrolment and graduation numbers to ensure the supply of optometrists matches the projected demand for services and that restrictions should be put in place to prevent the establishment of new schools of optometry. In the United States six new optometry colleges opened in the last decade with other institutions stating intentions to develop courses, and as in the UK, some established providers have expanded the number of places available in the past decade. The US experience appears to bear out the fact that while the number of optometry places has risen, the applicant volume, in relative proportion, is smaller. A recent analysis in Review of Optometry⁶ illustrated that an expansion that began in 2009 in the US saw 449 more optometry 'seats' being available in 2017, a 31% growth. There appears to be clear evidence of fewer applicants per place and a lowering of entry standards to fill the available places.

Interestingly, following the announcement of an increase in the number of places for medicine in the UK, a much more modest proportionate expansion than that arising in optometry has provoked concern from some about the potential for lowering of standards^{7,8}. Potential risks arising from an oversupply of optometrists from an unparalleled expansion of optometry undergraduate programmes can be argued to be considerable. Legitimate questions to arise include:

- what is the appropriate balance within the profession of entry level trained optometrists with sight testing and case finding expertise versus the number of those able to offer enhanced eye-care services (and is expansion of the former required to deal with the latter)?;
- where will the pool of university teachers with appropriate expertise and experience in academic optometry be secured from in order to fill the posts necessary to deliver optometry education in new programmes?;
- will the GOC have the requisite capacity to deliver appropriate quality assurance, whether to existing providers or to numerous new and prospective course providers seeking approval?;
- what will be the impact on the sustainability of optometry universities' research base?;

- what is the influence of the commercial sector in course provision and is this influence reasonable?;
- what weight should be placed on optometry vacancies of potential significance to the running of optometry businesses versus genuine evidence for patient led demand for community optometry eye care, in the planning of the future optometry workforce?;
- will the attractiveness of optometry for the most able students within the pool of potential applicants be negatively influenced by the potential impact of salary stagnation within a profession with an increased supply;
- will, as seen elsewhere, there be a lowering of entry requirements to fill all of the available places, particularly, it might be argued, by non-established course providers, as the ratio of applicants to places drops? And;
- will there be a lowering in the perceived standing of optometry undergraduate programmes in comparison to other healthcare programmes offered.

There has been very little open debate in the UK about the potential significant risks of the current rapid expansion of undergraduate optometry student numbers, an expansion that may not be in either the interest of the public seeking eye-care, the regulator with responsibility for public protection, optometry professionals or the wider profession. There is a clear risk of a significant decline in standards, and at a time when the profession has never before had such a great opportunity to work in improving its lot with an enhanced scope of practice for the benefit of all. With all of these potential risks, there is a pressing need for high quality research on the future optometric workforce requirements, to include input from all stakeholders, in the development of a framework for strategic workforce planning at a national level.

Robert A Harper^{1,2} and John G Lawrenson³

¹Manchester Royal Eye Hospital, Manchester Academic Health Sciences Centre, Manchester University NHS Foundation Trust

²Optometry and Pharmacy, School of Health Sciences, Faculty of Biology, Medicine and Health, Manchester University

³Division of Optometry and Visual Science, City, University of London

References:

1. The Optical workforce survey. *College of Optometrists* 2015.
2. GOC annual reports.
https://www.optical.org/en/news_publications/Publications/annual_reports_archive.cfm
(Accessed 10th July 2018).
3. Office of National Statistics.
<https://www.ons.gov.uk/generator?uri=/peoplepopulationandcommunity/populationandmigration/populationestimates/articles/overviewoftheukpopulation/mar2017/59d5bd84&format=xls> (Accessed 10th July 2018).
4. Healy E, Kiely PM, and Arunachalam D. Optometric supply and demand in Australia: 2011–2036. *Clin Exp Optom* 2015; 98: 273–282
5. Position Statement. The optometry workforce. *Optometry Australia*, September 2014.
6. Kekevia B. How the Diploma Deluge is Reshaping Optometry. *Review of Optometry* 2018 (Feb 15th)
7. Rimmer A. Five medical schools are created in England in bid to increase home grown doctors. *BMJ* 2018; 360:k1328. 10.1136/bmj.k1328 29563094
8. Harris PF. Five new medical schools: a decline in standards is inevitable. *BMJ* 2018; 361:k1868 doi: 10.1136/bmj.k1868

Biographies:

Robert Harper is an Optometrist Consultant at Manchester Royal Eye Hospital, Manchester University NHS Foundation Trust, an Honorary Professor of Optometry in the School of Health Sciences, Faculty of Biology, Medicine and Health, University of Manchester, and a Visiting Professor, Optometry, City, University of London. He trained at City, University of London and Moorfields Eye Hospital. He is a former GOC Education Panel Visitor.



John Lawrenson is Professor of Clinical Visual Science at City, University of London. He trained as an optometrist at Aston University and Moorfields Eye Hospital. He holds a PhD in Visual Science from City, University of London and a Master's degree in Evidence-based Healthcare from the University of Oxford. His primary research interests lie in the field of ophthalmic public health. He is an Editor for the Cochrane Eyes and Vision Group.

