



ECOO NEWSLETTER

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MESSAGE FROM DR CINDY TROMANS, ECOO PRESIDENT



Since, the last newsletter much has changed in our lives and businesses due to the COVID-19 outbreak, and although we are all emerging from the pandemic and lockdown at different stages, there is now some hope that at least a 'new normal' is establishing itself for most of us.

Unfortunately, this meant the ECOO General Assembly and European Academy of Optometry and Optics meeting could not be held in Helsinki as planned, but we did hold an extraordinary virtual GA which received very positive feedback. Obviously, this was no substitute for our usual meeting where we could hold workshops and hear guest speakers, but we are addressing this through holding a number of webinars over the early summer and autumn. We have had a successful webinar supported by the World Health Organisation (WHO) on COVID-19 and the World Report on Vision. Our Swedish colleagues have also shared their experiences on their lobbying efforts on Vision and Driving at national level, which is timely and useful in light of the forthcoming public consultation on the EU Driving License Directive. Finally, we were excited to learn more about digital health tools used in our practices and what the European Commission is planning in the next years on this front.

Other sessions will follow, including a deep dive into the Medical Devices Regulation (MDR) requirements and the launch of the much anticipated 2020 edition of the Blue Book!

As the Autumn General Assembly will be held in an online format as well, we are currently finalising the plans for these upcoming meetings. Please rest assured that we continue working hard on your behalf, as we navigate our way out of these unprecedented times.

I am looking forward to engaging with all of you over the next months. In the meantime, I trust that you will find this newsletter edition insightful!

Cindy

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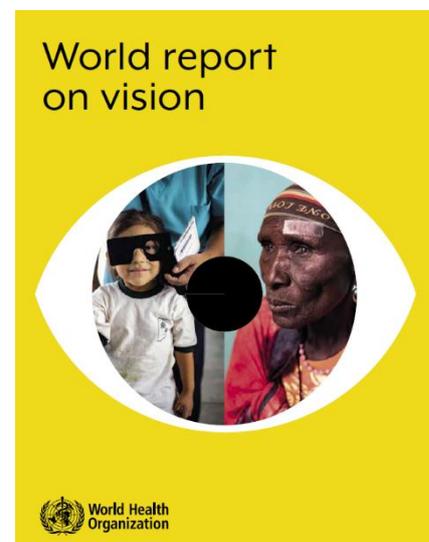
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Highlights from online focus sessions with members

How can countries better integrate eye care into primary care services?

With the COVID-19 pandemic, countries across Europe have taken different measures to prevent the spread of the novel coronavirus, with a varying impact on the services opticians and optometrists provide. In some countries, shops and practices had to close, in others they could provide emergency services only and in others they were considered essential services and should remain open. Experts have warned that a surge in the number of people with sight loss due to missed eye care might be observed.

In this context, ECOO invited its members to a conversation with Dr. Alarcos Cieza and Dr Silvio Mariotti from the World Health Organisation (WHO), who talked about the **recommendations from the World Report on Vision**. With COVID-19, these recommendations are more important than ever. COVID-19 showcases that being integrated in the healthcare sector is important as it ensures preparedness and sustainability. Furthermore, it strengthens the argument that services provided at primary eye care level are fundamental. Too often, eye care operates in parallel and without connection to the health care sector. In addition, the professions of optometrists and opticians are not recognised everywhere. The lack of integration also extends to data, which is not integrated in the global health information system of countries. COVID-19 has shown it is important to provide the services close to where the people are. Finally, all sectors, including eye care, are learning from the pandemic and introduce new ways of working, such as teleconsultations and other digital tools. It will be worth analysing after COVID-19 what alternative approaches are worth maintaining.



As countries are slowly starting to resume their activities, the patient-centred approach does not change, but the new context needs to be taken into account. Implementing adequate measures will help position the eye care practitioners as a reference that can be trusted and reached out to safely. The WHO considers optometrists and opticians as being first line service providers in the health care sector.

Common sense and evidence - the Swedish way to improve road safety



Despite good vision being such a logical requirement for driving, vision standards are not the same throughout Europe and in fact do not meet the minimum requirements outlined in the EU Driving License Directive in several countries. Sweden is one of the few countries in Europe without any law on regular health or eyesight test for those with drivers' licences A and B, while about 70% of European countries do.

“Vision Zero”, as the Swedish approach to road safety thinking is called, will be difficult to achieve if the person driving is not guaranteed to have adequate visual acuity. Since 2014, the Swedish Industry of Optometry has engaged in a proactive advocacy campaign for mandatory eyesight tests for everyone age 45+ with A and B driving licences, to be repeated every 10 years upon renewal of the license. Apart from visual acuity, glare sensitivity and contrast vision checks would also be included as part of the requirements.

Fredrik Thunell, CEO Swedish Industry of Optometry and Kathrin Österlund-Rud Pedersen, former Political Advisor to the Swedish Minister of Infrastructure and Transport, explained to ECOO members the hard work that has gone into meeting these objectives: investment, patience and a common approach with other stakeholders. A series of three studies were commissioned in order to provide evidence to Swedish policymakers. As part of the campaign, policymakers were also put on a test drive with reduced visual acuity and an instructor. This practical experience acted as an eye opener, coupled with a simulator study, which indicated among others how reaction times were impacted for those with visual acuity below 0,5. The Swedish Industry of Optometry will continue to advocate for change.

Digital i-health: is the future here now?

With most countries in Europe implementing varying degrees of lockdown measures to prevent the spread of the novel coronavirus, healthcare professionals have been turning to patient screening via telephone, WhatsApp, Zoom and have started using new digital screening tools or basic e-prescriptions. While COVID-19 has opened the door for widespread adoption of digital tools, the practice is not new. Hans Torvald Haugo, leader of the DSM sub-committee in ECOO, brought perspectives on practice and regulation of digital health tools in an online session with members. Ms Naima Mohamed Ahmed, an optometrist from Norway who uses digital tools in her daily practice, talked about her experience using a health tech system called “Eye check system”, which offers a digital bridge between opticians, GP, and eye-doctors, in the form of a cloud-based platform for sharing pathology findings. Explaining how the tools work, she showed the benefits the tools brings to patients (including quicker treatment and follow-up), optometrists (easier follow-up) and the overall healthcare system (more use of the primary eye health care and minimal costs and better time management).

Dr. Ceri Thompson, Deputy Head of Unit eHealth, Wellbeing and Ageing at the European Commission’s DG CNECT, explained what the Commission’s ambitions in terms of the regulatory framework around digital health in order to reap the benefits of new technologies and increase efficiencies for the health sector.

Vienna becomes home to first accredited institution with the European Qualification in Optics

ECOO is proud to announce that the Optometrie & Horakustik Initiative (OHI) in Vienna, Austria, has become the first institution accredited with the European Qualification in Optics, which is designed to be the basic entry standard for opticians in Europe and encourage professional bodies and training institutions to develop beyond this standard.

“We commend the OHI for this important achievement in establishing a standard for optics in Austria, which will have a positive impact for the public, the profession and for students. OHI has joined ECOO in this pilot accreditation, and we thank them for their collaboration and hard work throughout the process. With their help we have been able to extract key lessons which will bring value to the work going forward with other institutions across Europe. We will resume preparations for a workshop on this standard in optics at OCCSEE, which will be held in October in Croatia”, said Dr Robert Chappell, Chair of the Board of Management of the European Diploma in Optometry and Qualification in Optics.

“We are extremely proud to have achieved a successful accreditation of OHI with the European Qualification in Optics, meeting the standard developed by ECOO. The accreditation is a competency and outcomes-based process, and will help us train the next generation of opticians in Austria”, said Harald Belyus and Walter Gutstein, from the Optometrie & Horakustik Initiative (OHI) in Vienna.

Read more from the OHI at: www.ohi.at/newegr



ON THE EU AGENDA

EU4Health

The COVID-19 pandemic has revealed a need to strengthen crisis management and health systems throughout Europe. [EU4Health](#) is part of the EU's response to this challenge, committing to invest €9.4 billion in the period 2021-2027 to boost EU's preparedness for major cross border health threats and make sure health systems are resilient and can face epidemics as well as long-term challenges such as an ageing population and inequalities in health status. It is worth noting that tackling non-communicable diseases (including diabetes) forms a key part of the EU4Health programme.

Demographic change

In its first-ever report on the [Impact of Demographic Change](#), the European Commission highlights considerable differences in demographic change across regions, as well as the need to address its impact on growth and sustainability, employment, health and long-term care in different parts of Europe. The report is complemented with country fact sheets and a full statistical breakdown. With regard to health, the report points out that the growing burden of chronic diseases will also be a challenge for Europe's healthcare systems, accounting already for 70-80% of healthcare costs. The demand for professional staff is expected to rise in line with the demand for health and long term care. This report kicks-starts the Commission's work on demographic change and will notably provide the foundation for the upcoming Green Paper on Ageing and Long-term Vision for Rural Areas expected for 2021 and led by [Commissioner Dubravka Šuica](#). ECOO will be an advocate for vision to be taken into account in the work on demography and ageing.

Skills and qualifications – focus on a New Skills Agenda

Over the past few years, the European institutions have taken various initiatives to ensure the quality of people's skills, qualifications, and training, with a growing emphasis on digital literacy. The Commission has recently launched [a New Skills Agenda](#), focused on skilling for a job. The COVID-19 pandemic has shown how digital skills were particularly important to staff in the healthcare system, public servants, students and teachers - but also for all of those who suddenly were forced to telework and use new online tools daily. The European Commission president Ursula von der Leyen has made the EU's digital transformation one of the cornerstones of the bloc's recovery strategy post-coronavirus crisis. While there is a growing need to invest in emerging technologies that shape the modern economy, such as artificial intelligence or robotics, there is still [a significant gap concerning basic digital skills](#). ECOO will analyze the opportunities to engage with the new package on Skills presented by the Commission.

Medical Devices Regulation

Although the date of application of the Medical Devices Regulation (MDR) has been delayed by a year, to May 2021, the EU institutions continue to work on its implementation to ensure that the new framework is workable in time for the revised deadline. ECOO continues to closely follow the key challenges that remain to be clarified and provides input in on relevant issues. ECOO, for instance, responded to the consultation on the Q&A regarding the classification of spectacles under the MDR and has responded to the consultation on the Guidance Document on the Classification of Medical devices. ECOO also attends all relevant MDCG (Medical Devices Coordination Group) meetings, which are now being held remotely.

The right eye care in the right place - shortening waiting times for patients in a new project in the Netherlands

By Gabrielle Janssen, OVN, Netherlands

Intensifying and formalising the cooperation between optometrists, general practitioners and ophthalmologists can offer opportunities to meet the increasing demand for care from patients with eye complaints. The Patient Association, the Dutch Ophthalmological Society (NOG) and the Optometry Association of the Netherlands (OVN) collaborate as partners to find a solution for the long access times to eye care. A new joint initiative, “The right eye care in the right place” is ready to be implemented.

Before the break out of COVID-19, it took a patient an average of 7.6 weeks (reference date February 2020) to see the ophthalmologist for a first consult. A long time considering that a patient is entitled to visit an ophthalmology outpatient clinic within four weeks.

In addition, the number of patients seeking eye care has continued to grow partially as a result of the COVID-19 crisis and the measures put in place in the Netherlands to prevent the spread of the virus.

In the future, it is likely that the demand for ophthalmological care will increase even further, due to an ageing population, early detection of disorders and better treatment options. The Public Health Foresight Study, which provides insight into the most important societal challenges for public health and health care in the Netherlands (VTV) reports that visual disorders will increase in absolute numbers from 749,500 (in 2015) to 1,139,800 (in 2040). This represents an increase of 52%. Visual disorders are at the top of the list of major health care need increases (after osteoarthritis and diabetes).

At present, the general practitioner refers all patients to the ophthalmologist. Speeding up the introduction of “The right eye care in the right place” project by setting up regional networks of general practitioners, optometrists and ophthalmologists, offers opportunities to meet this demand for care.

Due to the increase in demand for ophthalmic care, the shortage of capacity in ophthalmology is growing. With “The right eye care in the right place”, triage of specific ophthalmic problems takes place. Not all ophthalmic problems require specialist medical care. The advantage for patients is that they receive access to eye care with an optometrist closer to home, more quickly. This creates more space for treating patients with complex care requirements at the ophthalmology practice and, if consultation time per patient is increased, more time for shared decision making.

Optometrists play an important role between general practitioners and ophthalmologists. In the Netherlands, the profession of optometrist has been officially registered in the Individual Health Care Professions Act (article 34) since 2000. This means that the optometrist has a protected educational title. Optometrists have completed a four-year higher professional education course (BSc). Currently, approximately 1,350 optometrists work in the Netherlands.

Within the current project, optometrists who meet quality requirements and are affiliated with a local network of general practitioners, optometrists and ophthalmologists, can carry out ophthalmic examinations of a specific group of patients on referral from the general practitioner.

There is a specific set of symptoms optometrists can diagnose or treat within this scheme including: gradual deterioration of vision, screening for glaucoma in case of family history, dry eyes and sensation of tired eyes, or screening for diabetic retinopathy.

The general practitioner no longer refers patients with these symptoms to the ophthalmologist, but to the optometrists participating in the network. The aim is to provide as much quality eye care at the optometric practice and keep the number of patients referred to ophthalmological services limited to those patients in need of specialty care; thus keeping the number of referred patients as low as possible but as high as needed. Normally, patients should be referred by the general practitioner, but the optometrist refers directly to the ophthalmologist.

Optometrists that meet the mandatory criteria to be part in the scheme are referenced in the Quality Register. This makes it transparent and verifiable for third parties whether the optometrist meets the requirements.

The scheme has been discussed with health insurers in The Netherlands, who agree with the approach described. However, financing is a point of discussion. The NOG, OVN and The Patient Association are in negotiation with Dutch health insurers and the Dutch Healthcare Authority to work towards a nationwide uniform roll-out with the associated permanent form of funding.

Read more (in Dutch): <https://www.optometrie.nl/optometrist-nieuws/nieuw-initiatief-tegen-lange-wachttijden-in-de-oogheelkunde>

German Optometrists May Apply for RAL Quality Mark

By Wolfgang Cagnolati, chair of the GCOL

On 6 of May 2020 the RAL Deutsches Institut für Gütesicherung und Kennzeichnung e.V. (German Institute for Quality Assurance and Quality Marks) officially granted the Gütegemeinschaft Optometrische Leistungen, GGOL (Quality Association for Optometric Services) the right to award the RAL Quality Mark for Optometric Services. The [RAL Quality Mark](#) has been a well-known trademark for quality products, technical delivery conditions and services over the past 90 years. It shows that its owner adheres to strong and closely monitored quality requirements.



The GGOL is a new organisation which was founded to develop and monitor standards for delivering high quality optometric services and for the qualification of optometrists providing these services. It awards the RAL Quality Mark for Optometric Services to those optician's shops and optometry practices who not only meet these standards but whose optometrists regularly take part in continuing education. The GGOL is supported by the German Zentralverband der Augenoptiker und Optometristen (ZVA) and the Vereinigung Deutscher Contactlinsenspezialisten und Optometristen (VDCO), which are also founding members. GGOL is chaired by Wolfgang Cagnolati, formerly ECOO-President; Holger Dietze from Beuth University of Applied Sciences Berlin is responsible for the quality committee of the GGOL.

More information can be found on www.optometrist.de.

UPDATE FROM THE WORLD COUNCIL OF OPTOMETRY

Growing opportunities for optometrists worldwide

By Paul Folkesson, WCO President



During these constantly evolving times, the World Council of Optometry (WCO) understands that there is still a level of uncertainty on what the future holds. We want to ensure that we are providing sufficient support for our members, not only to provide guidance through the current situation but also to grow opportunity for optometrists worldwide.

During the pandemic and moving forward, we have included statements, global resources, social media posts, and easily sharable infographics for you to pass on to your stakeholders. We hope this information will be valuable as you develop ways in preventing the spread of COVID-19 while reopening practices, producing new protocol, and guiding others to do the same.

Additionally, the time away from our usual schedules has given us an opportunity to develop resources for our members to use. We are currently working on a Legislation, Registration, and Standards toolkit for countries with varying degrees of optometric involvement to grow within their own government. This has been spearheaded by ECOO's own Dr. Cindy Tromans along with WCO's esteemed global committee members.

In the same effort to expand membership value, we have used the time to develop a new website, which will include a "members only" section. This will be filled with valuable resources for each member to benefit from in their own work to expand optometry.

We encourage you to continue to work with your governments and other health organisations to help move us beyond this pandemic. Please check our COVID-19 news page for more information and communicate with us regarding any other resources to add to the page or how we can continue to support you.

Stay well and we wish you good health.

Sincerely,

Paul Folkesson

UPDATE FROM THE EUROPEAN ACADEMY

What are the main teaching challenges in the context of COVID-19?

As part of a series of online Special Interest Groups carried out in the past month, the European Academy of Optometry and Optics convened colleagues around Europe in a dedicated SIG on Education. More than 45 participants, including individual educators and representatives from educational organisations, connected to exchange views on how their respective universities have been developing online teaching strategies to continue theoretical classes, clinical laboratories and ensure continuity in optometry and optics education for students.



Participants shared a number of insights and concerns, including:

- Whether the decision to suspend classes was triggered by the university leadership or whether it followed from an official announcement from governments
- How fast educators and universities were prepared to move classes online, and the support they received from their respective departments
- How much of the semester had been impacted by the measures, and how to manage final year students who would need to prove their clinical competences (which would involve some work in laboratories)
- Innovative ways to conduct clinical case discussions online and engage students

The discussion triggered a fruitful discussion on how the EAOO could support educators address some of the challenges and provide a common pool of resources. A follow-on session dedicated to Education will take place later this year – watch this space! If you would like to find out more, don't hesitate to get in touch with us at admin@eao.info.

New resources added

In May 2020, ECOO created a new dedicated space on its website for COVID-19 resources, including guidance from national member associations.

New resources added:

- [Position paper on contact lens safety](#)
- [Guidance to national associations: Preparation of the optical/optometric facility in the context of gradual lifts of the state of emergency and restrictive measures at national level](#)

ECOO upcoming meetings

The ECOO Autumn General Assembly will take place online on 9 October and ECOO members will receive all the details in due course.

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Please inform us of any additions to the mailing list or of staff changes in your respective organisations. Should you have any news or updates which may be of interest to ECOO members, please contact the ECOO Secretariat: secretariat@ecoo.info

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 **VISION**





