



OPTOMETRISTS
AND DISPENSING
OPTICIANS BOARD

Te Poari o ngā Kaimātai Whatu me ngā Kaiwahakarato Mōhiti

ETHICAL STANDARDS FOR OPTOMETRISTS

Purpose

These ethical standards:

- Reflect the integrity of the profession of optometry;
- Reinforce the principles on which optometrists make ethical decisions;
- Assist optometrists to adopt legitimate and professionally acceptable behaviour in their practices;
- Enable people outside the profession of optometry to evaluate optometrist behaviour within their scope of practice.

These ethical standards have been developed in conjunction with the NZAO; however, it should be noted that the Board is a regulatory authority, not a professional association, and the Board's jurisdiction in considering ethical concerns raised about individual optometrists will be primarily focused on whether that optometrist's conduct or behaviour presents a risk to public health and safety.

Please note: The ethical standards listed below offer guidance only and are not exhaustive as the ambit of human behaviour is unlimited. A breach of these standards may or may not amount to professional misconduct or other conduct deserving of disciplinary action.

Other Obligations

As well as observing these Ethical Standards, each practitioner must also comply with all relevant laws and regulations which govern the practice of optometry in the New Zealand.

Ethical Standards for Optometrists

Responsibilities to the patient

Optometrists shall

1. Always respect their patient's rights, dignity, autonomy and access to continuity of care.

2. Avoid all forms of discrimination; treating all patients, staff and kindred professionals with fairness, honesty, courtesy, respect and understanding.
3. Understand the concept of duty of care.
4. Disclose any significant proprietary interest they have in the care options recommended and not permit pecuniary gain to affect their clinical judgement.
5. Endeavour to understand each patient's cultural perspective and level of background knowledge, in order to ensure effective communication.
6. Respect the confidentiality of the information received in the course of the professional consultation, only disclosing information where the patient consents or the law requires.

Professional responsibilities

Optometrists shall

7. Promote and maintain collegial, respectful and unselfish relationships with members of their own and other health professions.
8. Practice with conscience and integrity in a manner that is in the best interest of the informed patient, enhancing the status of the profession and promoting public confidence.
9. Ensure that their practice modalities, delegations, resources and the accurate and legible recording of clinical findings, diagnosis and management reflect the current standard of care.
10. Promote and advance high standards of contemporary professional competence and knowledge, ensuring the delivery of accurate diagnoses, advice and treatment.
11. Ensure that referrals and reports to and from colleagues and other health professionals are actioned in a manner appropriate to the patient's best interests.
12. Individually and collectively, strive to advance and disseminate the knowledge and learning of the profession for the benefit of the wider community.

Optometry and business practice

Optometrists shall

13. Ensure that any arrangement to reward effort or performance does not have the potential to bias a practitioner's clinical judgment toward decisions that may not be in the patient's best interests.
14. Seek the advice of a suitable colleague or organisation if they find themselves in a position or an environment of providing compromised patient care.
15. When promoting their practice or profession, ensure any claims made are valid, truthful and reflect their status as a trusted registered health practitioner.
16. Not enter, remain in or negotiate a practising scenario where commercial imperatives including the offering of incentives have the potential to conflict with the free exercise of clinical judgment and the upholding of an uncompromised standard of care.

Approved by the Board: June 2012