



OPTOMETRY EXAMINING
BOARD OF CANADA

BUREAU DES EXAMINATEURS
EN OPTOMÉTRIE DU CANADA

OEBC EXAM REPORT

Prepared for:

Exam Candidates

Fall 2022 – Spring 2023 Administrations

August 2023

Use of this document —It should be read in conjunction with the OEBC Blueprint.
Reported items vary from administration to administration.

OEBC Exam Blueprint

The competency model reflects the overall knowledge, skills and behaviours required to practice as an optometrist. The exam components drawn from the question/item bank evaluate the knowledge, skills, and abilities relevant to optometry practice at the entry-to-practice level.

The OEBC exam blueprint:

- Ensures its entry-to-practice examination represents the essential elements for safe and effective patient care and health care in Canada
- Outlines the exam structure—cases selected per domain and practice area, see *Table 1 - Case Selection by Prime Practice Area*
- Outlines the topic areas, see [Appendix A - Topic Matrix](#) of the Blueprint
- Informs candidates about what the exam could test and the weighting of each area
- Guides OEBC in designing exams comparable from one time to the next
- gives all candidates equal opportunity to show whether they have the competencies necessary to practice optometry safely and effectively

Table 1 – Case Selection by Prime Practice Area

Domains Practice Areas	Written Cases	OSCE Stations
1.0 Clinical Expertise	88%	83%
Assessment (1.1-1.3)	31%	33%
Diagnosis & Planning (1.4-1.6)	28%	17%
Patient Management (1.7-1.11)	29%	33%
2.0 Communication	-	*
3.0 Collaboration	5%	-
4.0 Patient-centred Care	3%	17%
5.0 Professionalism	-	*
6.0 Scholarship	2%	-
7.0 Practice Management	2%	-

Note - cases/stations are selected based on the prime practice area

* See [Appendix B - Patient Interactions Assessment Scale](#)

The process of examination design depends on sampling from all the possible activities represented by the competencies. OEBC selects cases for the written exam and OSCE stations to match the Blueprint requirements by prime case areas and the Topic matrix. However, cases draw from competencies within multiple domains. Therefore, the exams do not cover all blueprint items. OEBC balances each exam for conditions and skills assessed.

Competency Model and Indicators

Competencies for Optometry

DOMAIN — represents an area of practice. Key competencies within the domain describe how optometrists integrate and apply knowledge and skill in their practice.

KEY COMPETENCIES — are observable abilities of an optometrist, integrating multiple components such as knowledge, skills, values, and attitudes. There are numerous competencies per domain. While these cannot be exhaustive given the complexity of professional practice, they represent frequently performed essential behaviours. Key competencies represent the core of practice.

ENABLING COMPETENCIES — are sub-competencies representing specific knowledge, skills, and actions that facilitate competence. These essential skills are pervasive in an optometrist's work and demonstrate competency components. Multiple enabling competencies illustrate the key competency statements.

INDICATORS — are specific observable and measurable examples of activities, actions, skills or behaviours that demonstrate the existence or achievement of entry-to-practice competency. Multiple indicators are used to assess a candidate's performance relevant to the case or station.

The first three levels present the full competency model for optometry. OEBC maintains specific performance indicators at the entry-to-practice level for its examinations within its assessment context. The indicators are mapped to the appropriate enabling competency used in the exam. Reporting in this report is aggregated to the Key Competency level.

Summary Reports

Pass/Fail Report

Written	First Time Writers	All Writers
Total Attempts	138	146
Pass	130	137
Fail	8	9
Pass Rate	94%	94%

OSCE	First Time Writers	All Writers
Total Attempts	113	131
Pass	95	108
Fail	18	23
Pass Rate	84%	82%

Top Five Competencies¹

Rank	#	Competency	Score
1	1.5.	Formulate a final diagnosis taking into account the patient data and differential diagnosis.	83%
2	1.7.	Recognize ocular, visual or systemic conditions that require assessment, co-management or management by other professionals.	82%
3	1.2.	Apply clinical judgment and diagnostic assessments to formulate an initial, secondary, and differential diagnosis based on the initial case history.	81%
4	4.4.	Ensure continuing patient participation in the shared decision-making model for ongoing treatment and management plans.	80%
5	4.1.	Collaborate with the patient on the development of management options that correspond to their overall well-being and general health and overall lifestyle and socio-economic realities.	79%

Bottom Five Competencies²

Rank	#	Competency	Score
1	1.1.	Obtain an accurate case history to determine a holistic understanding of the patient's ocular, visual, systemic and familial medical history, current status of visual tasks, and other non-medical factors in order to establish an understanding of the primary concern and general needs.	66%
2	1.11.	Prescribe therapeutic pharmacological agents, conduct in-clinic therapeutic treatments, or refer for surgical interventions to treat ocular conditions as appropriate to provincial regulation.	74%
3	1.8.	Prescribe spectacle, contact lens therapy, vision therapy, myopia control, visual training for refractive disorders.	74%
4	1.4.	Conduct eye examinations to assess and diagnose refractive disorders, diseases, and dysfunctions of the eye and vision system.	75%
5	1.6.	Formulate and modify a treatment and management plan considering patient responses, priorities and limitations, and past treatments.	75%

¹ Based on the highest average scores of all first-attempt candidates

² Based on the lowest average scores of all first-attempt candidates

Domain/Practice Area Report

Peer mean – the mean score of all successful first-attempt candidates

KEY COMPETENCY	Written	OSCE	Aggerate
NUMBER	130	95	225
1.0 Clinical Expertise³	79%	74%	77%
Assessment	79%	63%	72%
Diagnosis & Planning	80%	75%	78%
Patient Management	76%	78%	77%
2.0 Communication	-	78%	78%
3.0 Collaboration	79%	-	79%
4.0 Patient-Centred Care	84%	81%	82%
5.0 Professionalism	-	77%	77%
6.0 Scholarship	67%	-	67%
7.0 Practice Management	-	-	-

Report by Patient Interaction Assessment Scale

A candidate's interaction with a patient is evaluated at every OSCE station. The scoring rubric is set out in Appendix B of the Blueprint.

Peer Mean – the mean score of all successful first-attempt candidates

Patient Interaction Scale Item	Peer Mean
NUMBER	95
Empathy	3.84
Coherence	3.74
Non-verbal	3.92
Verbal	3.89
Trust	3.85
Honesty & Integrity	3.90
Focus on the Patient	3.95
Respect	4.02

³ The Clinical Expertise domain has three practice areas: Assessment, Diagnosis & Planning, and Patient Management

Detailed Report

Peer Mean – the mean score of all successful first-attempt candidates

Program – the mean score of first-attempt candidates

Key Competency Report

KEY COMPETENCIES	Written	OSCE	Aggregate
NUMBER	130	95	225
1.0 CLINICAL EXPERTISE	79%	74%	77%
ASSESSMENT	79%	63%	72%
1.1 Obtain an accurate case history to determine a holistic understanding of the patient’s ocular, visual, systemic and familial medical history, current status of visual tasks, and other non-medical factors in order to establish an understanding of the primary concern and general needs.	-	66%	66%
1.2 Apply clinical judgment and diagnostic assessments to formulate an initial, secondary, and differential diagnosis based on the initial case history.	82%	-	82%
1.3 Identify urgent ocular and medical conditions requiring urgent vs. emergency care and triage accordingly.	-	-	-
DIAGNOSIS & PLANNING	80%	75%	78%
1.4 Conduct eye examinations to assess and diagnose refractive disorders, diseases, and dysfunctions of the eye and vision system.	79%	72%	76%
1.5 Formulate a final diagnosis taking into account the patient data and differential diagnosis.	84%	85%	84%
1.6 Formulate and modify a treatment and management plan considering patient responses, priorities and limitations, and past treatments.	76%	77%	76%
1.7 Recognize ocular, visual or systemic conditions that require assessment, co-management or management by other professionals.	74%	96%	83%
PATIENT MANAGEMENT	76%	78%	77%
1.8 Prescribe spectacle, contact lens therapy, vision therapy, myopia control, visual training for refractive disorders.	76%	76%	76%
1.9 Educate patient regarding treatment and management options.	71%	84%	76%

KEY COMPETENCIES	Written	OSCE	Aggregate
1.10 Educate the patient about lifestyle choices and their impacts on ocular health.	-	-	-
1.11 Prescribe therapeutic pharmacological agents, conduct in-clinic therapeutic treatments, or refer for surgical interventions to treat ocular conditions as appropriate to provincial regulation.	76%	73%	74%
2.0 COMMUNICATION	-	78%	78%
2.1 Establish and maintain relationships with patients and, when required, their families, caregivers, or substitute decision-makers through communication skills and strategies.	-	78%	78%
2.2 Convey diagnosis, prognosis, and management options comprehensively, logically and clearly to patients, and if authorized, to their families, caregivers, or substitute decision-makers.	-	78%	78%
2.3 Establish and maintain open, respectful and supportive relationships with staff, colleagues and other health care providers through communication skills and strategies.	-	-	-
2.4 Use culturally sensitive and inclusive language, communication strategies and non-verbal communication in all professional interactions.	-	-	-
3.0 COLLABORATION	79%	-	79%
3.1 Identify the appropriate healthcare professional(s) for patient referral and consultation purposes, including other optometrists.	-	-	-
3.1 Refer patients for secondary, specialized care that may need further treatment or management outside the scope of practice for optometry.	78%	-	78%
3.2 Co-manage patients with other healthcare professionals in the circle of care when appropriate.	-	-	-
4.0 PATIENT-CENTRED CARE	84%	81%	82%
4.1 Collaborate with the patient on the development of management options that correspond to their overall well-being and general health and overall lifestyle and socio-economic realities.	-	81%	81%
4.2 Include the patient in a shared decision-making process that will determine the course of treatment and follow-up.	-	-	-

KEY COMPETENCIES	Written	OSCE	Aggregate
4.3 Recognize when a patient's family, caregivers or substitute decision-maker should be involved with decision-making, and obtain valid consent.	-	-	-
4.4 Ensure continuing patient participation in the shared decision-making model for ongoing treatment and management plans.	-	81%	81%
4.5 Educate patients regarding their overall health and how it, and lifestyle factors, can impact the health of their eyes and vision.	-	-	-
4.6 Promote patient health and safety, incorporating considerations of patients' ocular and visual health as well as their overall physical, psychological, and general well-being.	-	-	-
5.0 PROFESSIONALISM	-	77%	77%
5.1 Practice with accountability to the patient, the profession and society.	-	77%	77%
5.2 Interact with patients and the public, following professional and ethical standards.	-	77%	77%
5.3 Establish and maintain a safe practice for patients and colleagues, both physically and psychologically.	-	-	-
5.4 Maintain personal, physical and mental self-care.	-	-	-
6.0 SCHOLARSHIP	67%	-	67%
6.1 Maintain and continuously update professional knowledge through reviews of the scientific literature in support of evidence-based practice.	-	-	-
6.2 Integrate and apply newly acquired evidence-based optometric knowledge, clinical skills and techniques in own practice.	-	-	-
6.3 If relevant and within scope, critically review and apply information from other healthcare disciplines to enhance own practice and patient care.	-	-	-
6.4 Enhance professional practice with ongoing learning and continuing education in keeping with provincial regulatory requirements.	-	-	-
6.5 Share information and knowledge on clinical practice, new procedures and emerging technologies to contribute to the practice of others and promote the profession.	-	-	-

KEY COMPETENCIES	Written	OSCE	Aggregate
7.0 PRACTICE MANAGEMENT	-	-	-
7.1 Provide services consistent with the optometric needs of the community.	-	-	-
7.2 Ensure the availability of physical and human resources required for practice.	-	-	-
7.3 Manage workflow effectively.	-	-	-
7.4 Recognize and adhere to legislation relevant to optometric business practice.	-	-	-
7.5 Maintain insurance and risk management procedures relevant to optometric business practice.	-	-	-