



Feedback Report

Candidate Name:	Sample Report	Candidate ID:	009999
Exam Component:	Written Exam	Exam Date:	
Status	Minimum Performance Level — Not Met		

The Purpose and Limitations of This Feedback Report

This feedback report is provided to support candidates who did not meet the Minimum Performance Level on the OEBC Written Examination. It summarizes performance across assessed content areas and competencies and is intended to help guide focused preparation for a future attempt.

This report is **not** a grading rubric and cannot be used for rescoring requests or appeals related to exam integrity, item construction, or scoring decisions. The OEBC Written Examination is a **criterion-referenced assessment**. Performance is evaluated against a predefined, evidence-based entry-to-practice standard, not compared with other candidates. Results are therefore reported only as **meeting** or **not meeting** the Minimum Performance Level.

Where provided, peer mean values reflect the average performance of successful first-time candidates. These values are included for context only. They do **not** represent passing thresholds, minimum standards, or predictors of future exam outcomes.

Overview of the Written Exam

The OEBC Written Examination is a summative assessment that evaluates whether candidates demonstrate the foundational knowledge and clinical reasoning required for safe, effective, and independent entry-to-practice in optometry.

Examination content is developed in accordance with the OEBC Exam Blueprint to ensure alignment with current regulatory expectations and practice standards. While individual questions may vary between exam administrations, all content areas and competencies are assessed against consistent standards.

Scoring and Reporting

Candidate responses are scored using standardized procedures supported by psychometric analysis to promote fairness, reliability, and validity. Examination results reflect overall performance across all assessed content areas, not performance on individual questions or topics. Item-level results are not reported.

How to Use This Feedback Report

This report is intended to support focused preparation by highlighting **patterns of performance** across content areas and competencies. It should be used as a guide for study planning, not as a diagnostic or evaluative tool.

Results are most meaningful when reviewed in aggregate, with attention to areas of consistent strength and areas that may benefit from further development.

What this report helps you do

- Identify domains and practice areas where performance was consistently lower relative to peer mean benchmarks
- Understand, at a high level, how your performance compares with that of successful first-time candidates
- Set informed study priorities aligned with the structure and weighting of the Written Examination

What this report does not do

- Provide item-level or question-specific feedback
- Explain how individual questions were scored
- Allow calculation or reconstruction of a total exam score

Candidates are encouraged to focus on overall trends and patterns rather than individual percentages.

Interpreting Your Results Effectively

When reviewing your Written Examination feedback, focus on **patterns across domains and competencies**, rather than isolated scores.

Candidates often benefit from:

- Identifying domains or practice areas where performance is consistently below peer mean benchmarks
- Noting whether lower performance appears across multiple related competencies, which may indicate broader gaps in knowledge application
- Using the Exam Blueprint to understand how different domains and practice areas are weighted on the examination

The Written Examination assesses a broad range of entry-to-practice knowledge. Comprehensive preparation across all assessed areas is essential, even where some areas appear stronger than others. Percentages are provided to support high-level comparison and should be interpreted in the context of the overall exam structure.

Level of Feedback information

Tables 2 and 3 provide feedback at the domain, practice area, and key competency levels. To be reportable, a domain, practice area, or key competency must be assessed at least five times on the examination. Areas assessed fewer than five times are not reported and are shown as a dash (–).

Some key competencies are not measured on the Written Examination. These may be assessed in other exam components or may be beyond the entry-to-practice level. These competencies are marked as NM (not measured).

Using the Feedback Tables

The feedback tables summarize your performance at the overall, domain, practice area, and key competency levels.

To use these tables effectively:

- Begin with domains and practice areas where performance is notably lower than peer mean benchmarks
- Look for clusters of related competencies with consistently lower performance, rather than focusing on individual rows
- Consider how these areas align with the Exam Blueprint and your study approach

Domains, practice areas, or competencies may not be reported if they were assessed fewer than five times or were not measured in this exam component. These are indicated by a dash (–) or NM.

Table 1 – First-Time Candidates Who Met the Minimum Performance Level

This table shows the percentage of first-time candidates who met the minimum performance level on the Written exam at this administration. This information is provided for general context only and reflects overall exam outcomes rather than individual performance. It should not be used to interpret your results or predict future outcomes.

Component	Percentage Meeting the Minimum Performance Level
Written Exam	91%

Table 2 – Domains and Practice Areas

This table shows the percentage of available points you achieved in each domain and practice area, compared with peer mean benchmarks. Some areas contribute more points than others, so focus on overall patterns rather than individual percentages.

- “–” indicates that this entry-to-practice competency was not measured during this exam
- “NM” indicates the competency/summary is not measured in this component of the exam

Domains <i>Practice Areas</i>	Your Score	Peer Mean
Clinical Expertise	65%	83%
Assessment	65%	82%
Diagnosis & Planning	55%	84%
Patient Management	65%	80%
Communication	60%	87%
Collaboration	85%	85%
Patient-Centred Care	63%	86%
Professionalism	75%	88%
Scholarship	90%	85%
Practice Management	70%	83%

Please refer to the Blueprint for more information regarding the distribution of examination content.

Table 3 – Key Competency Report

This table provides a detailed summary of your performance in the entry-to-practice competencies assessed in the OSCE, compared with peer mean benchmarks. Peer mean values are included for context, consistent with the interpretive guidance outlined earlier in this report.

- “–” indicates that this entry-to-practice competency was not measured during this exam
- “NM” indicates the competency/summary is not measured in this component of the exam

Key Competency	Your Score	Peer Mean
1.0 CLINICAL EXPERTISE	65%	83%
ASSESSMENT	65%	82%
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.	55%	85%
1.2 Apply clinical judgment and diagnostic assessments to formulate an initial, secondary, and differential diagnosis based on the initial case history.	66%	83%
1.3 Identify urgent ocular and medical conditions requiring urgent vs. emergency care and triage accordingly.	72%	80%
DIAGNOSIS & PLANNING	55%	84%
1.4 Conduct eye examinations to assess and diagnose refractive disorders, diseases, and dysfunctions of the eye and vision system.	61%	81%
1.5 Formulate a final diagnosis taking into account the patient data and differential diagnosis.	51%	87%
1.6 Formulate and modify a treatment and management plan considering patient responses, priorities and limitations, and past treatments.	56%	82%

Key Competency	Your Score	Peer Mean
1.7 Recognize ocular, visual or systemic conditions that require assessment, co-management or management by other professionals.	-	-
PATIENT MANAGEMENT	65%	80%
1.8 Prescribe spectacle, contact lens therapy, vision therapy, myopia control, visual training for refractive disorders.	75%	79%
1.9 Educate patient regarding treatment and management options.	58%	85%
1.10 Educate the patient about lifestyle choices and their impacts on ocular health.	55%	75%
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.	86%	81%
2.0 COMMUNICATION	60%	87%
2.1 Establish and maintain relationships with patients and, when required, their families, caregivers, or substitute decision-makers through communication skills and strategies.	48%	89%
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.	70%	84%
2.3 Establish and maintain open, respectful and supportive relationships with staff, colleagues and other health care providers through communication skills and strategies.	68%	83%
2.4 Use culturally sensitive and inclusive language, communication strategies and non-verbal communication in all professional interactions.	55%	87%
3.0 COLLABORATION	85%	85%
3.1 Identify the appropriate healthcare professional(s) for patient referral and consultation purposes, including other optometrists.	88%	84%
3.1 Refer patients for secondary, specialized care that may need further treatment or management outside the scope of practice for optometry.	86%	85%
3.2 Co-manage patients with other healthcare professionals in the circle of care when appropriate.	81%	86%
4.0 PATIENT-CENTRED CARE	63%	86%
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.	55%	87%
4.2 Include the patient in a shared decision-making process that will determine the course of treatment and follow-up.	66%	88%
4.3 Recognize when a patient's family, caregivers or substitute decision-maker should be involved with decision-making, and obtain valid consent.	60%	83%
4.4 Ensure continuing patient participation in the shared decision-making model for ongoing treatment and management plans.	62%	81%
4.5 Educate patients regarding their overall health and how it, and lifestyle factors, can impact the health of their eyes and vision.	63%	89%

Key Competency	Your Score	Peer Mean
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.	71%	87%
5.0 PROFESSIONALISM	75%	88%
5.1 Practice with accountability to the patient, the profession and society.	72%	87%
5.2 Interact with patients and the public, following professional and ethical standards.	78%	86%
5.3 Establish and maintain a safe practice for patients and colleagues, both physically and psychologically.	75%	91%
5.4 Maintain personal, physical and mental self-care.	NM	
6.0 SCHOLARSHIP	90%	85%
6.1 Maintain and continuously update professional knowledge through reviews of the scientific literature in support of evidence-based practice.	88%	84%
6.2 Integrate and apply newly acquired evidence-based optometric knowledge, clinical skills and techniques in own practice.	86%	85%
6.3 If relevant and within scope, critically review and apply information from other healthcare disciplines to enhance own practice and patient care.	81%	86%
6.4 Enhance professional practice with ongoing learning and continuing education in keeping with provincial regulatory requirements.	95%	79%
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.	NM	
7.0 PRACTICE MANAGEMENT	70%	83%
7.1 Provide services consistent with the optometric needs of the community.	NM	
7.2 Ensure the availability of physical and human resources required for practice.	NM	
7.3 Manage workflow effectively.	NM	
7.4 Recognize and adhere to legislation relevant to optometric business practice.	70%	83%
7.5 Maintain insurance and risk management procedures relevant to optometric business practice.	NM	

Recommendations for Improvement

This section is intended to support **focused and effective preparation** for a future attempt at the OEBC Written Examination. Guidance is based on patterns of performance across domains, practice areas, and competencies, rather than individual scores.

Candidates are encouraged to review this section alongside the feedback tables, with emphasis on overall trends.

A. Interpreting Your Results

When reviewing your feedback, focus on patterns across the examination, including:

- Domains and practice areas where performance is consistently below peer mean benchmarks
- Clusters of related competencies with lower performance
- Variability across domains, which may reflect uneven preparation

Written Examination outcomes are based on **overall performance across all assessed content**.

Consistent demonstration of entry-to-practice knowledge across domains and competencies is required to meet the Minimum Performance Level.

B. Focus on Entry-to-Practice Knowledge

The Written Examination assesses whether candidates demonstrate the knowledge and clinical reasoning required for entry-to-practice in optometry.

Preparation should emphasize:

- Applying optometric knowledge to clinical and practice-based scenarios
- Using clinical information to support diagnosis, management, and professional decision-making
- Demonstrating both breadth and depth of knowledge across competencies outlined in the Exam Blueprint

Partial or uneven knowledge across key areas may negatively affect overall performance, even when some areas appear stronger.

C. Prioritizing Preparation Across Key Domains

Candidates often benefit from prioritizing preparation in areas where performance consistently falls below peer mean benchmarks, particularly when those areas contribute substantially to the examination.

These commonly include:

- Clinical Expertise (assessment, diagnosis, and management principles)
- Communication (patient education and professional responsibilities)
- Patient-Centred Care (shared decision-making and patient context)
- Professionalism (ethical practice, accountability, and patient safety)

Strengthening performance in these areas is associated with improved overall Written Examination outcomes.

D. Using the Feedback Tables Effectively

To use the tables effectively:

- Focus first on competencies where performance is substantially below peer mean benchmarks
- Identify competencies that appear across multiple domains or practice areas
- Refer to the Exam Blueprint to understand how these competencies are represented and weighted

Peer mean benchmarks are provided for interpretive context and should be considered alongside overall performance patterns.

E. Preparation Strategies

Candidates preparing for a future attempt are encouraged to:

- Use the OEBC Exam Blueprint to ensure comprehensive coverage of assessed content
- Review content systematically, with emphasis on identified areas for improvement
- Practice applying knowledge to case-based and scenario-based questions
- Use multiple study resources to support understanding across the full scope of entry-to-practice knowledge

F. Final Considerations

This feedback report is intended to support **targeted, structured preparation**. Many candidates who do not meet the Minimum Performance Level on an initial attempt demonstrate improved performance on subsequent attempts by strategically using feedback and aligning their preparation with the Exam Blueprint.

Closing Summary

This feedback report is provided to support informed study planning for a future attempt at the OEBC Written Examination. Use it to identify performance patterns, prioritize areas for further study, and guide preparation using the OEBC Exam Blueprint and other recommended resources. With comprehensive review and focused effort, many candidates can demonstrate the required level of entry-to-practice competence on future examinations.