



OPTOMETRY EXAMINING
BOARD OF CANADA

BUREAU DES EXAMINATEURS
EN OPTOMÉTRIE DU CANADA

OEBC PERFORMANCE REPORT 2024-25

Prepared for OEBC Candidates

August 2025

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

Summary

The purpose and scope of the OEBC exam report: This document is an essential report on candidates' performance on the OEBC entry-to-practice examination. It is intended to help students prepare for their board exams, emphasizing their integral role in the process.

The structure and content of the OEBC exam: The OEBC exam, designed with fairness in mind, consists of two components: a Written Exam and an OSCE (Objective Structured Clinical Examination). The exam is based on a blueprint that outlines the domains, practice areas, and topics relevant to optometry practice in Canada. It also assesses the candidates' communication, collaboration, patient-centred care, professionalism, and scholarship skills.

The pass/fail report and the historical performance by school year: The pass/fail report shows the number and percentage of candidates from the program who passed or failed the written exam and the OSCE, compared to all candidates. The historical performance by school year shows the pass/fail rates of the program's candidates over the past seven years.

The domain/practice area report and the patient interaction assessment scale report: The domain/practice area report shows the average scores of the program's candidates on each domain and practice area of the exam, compared to the peer mean of all successful first-attempt candidates. The patient interaction assessment scale report shows the average scores of the program's candidates on each item of the scale that evaluates their interaction with a patient at each OSCE station.

The competency report and the top and bottom five competencies: The competency report shows the average scores of the program's candidates on each key competency of the exam, compared to the peer mean of all successful first-attempt candidates. The top and bottom five competencies show the program's candidates' highest and lowest average scores, respectively.

NOTES

1. The "Peer Benchmark" is the mean score of all successful first-attempt candidates. This benchmark provides a standard for comparison, allowing you to assess how your program's candidates performed relative to their peers.
2. To provide full feedback, OEBC reports all instances where competency was measured. However, some may not be statistically significant. This note highlights that not all competencies are equally weighted in the exam, and some may have been assessed less frequently than others. For example, when a competency was only evaluated once, the score may be 100% or 0%. The peer benchmark would provide more helpful information.
3. In 2023-24, students could attempt the Written Exam and OSCE at any time during their final year. For the 2024-25 administrations, students may challenge the Written Exam at the Spring Administration before their final year. The OSCE may be challenged at any time during the student's final year. These changes were implemented to provide students with more flexibility in scheduling their exams and align with the optometry profession's evolving needs.
4. Candidates who were unsuccessful on a component of the exam receive a feedback report similar to this one, demonstrating our commitment to their success and assisting them in preparing for a subsequent attempt.

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 administration to administration 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.

Pass Rate Reports

Table 1 – Pass Rates by Academic Year – 2019-2020 to 2024-2025

Academic Year	Written					OSCE			
	First-Time Writers	Pass Rate	All Writers	Pass Rate		First-Time Writers	Pass Rate	All Writers	Pass Rate
2024-2025	180	95.6%	195	94.9%		135	93.3%	154	90.9%
2023-2024	153	94.1%	167	92.2%		117	86.3%	137	85.4%
2022-2023	138	94.2%	147	93.9%		112	84.8%	130	83.1%
2021-2022	138	89.1%	152	88.2%		123	85.4%	163	79.8%
2020-2021	158	93.0%	173	92.5%		110	78.2%	131	77.9%
2019-2020	170	98.2%	177	96.0%		127	85.0%	152	77.6%

Table 2 – Pass Rates by Program Group – Administrations – 2019-2020 to 2024-2025

Academic Year (9-1/8-31)	Program Group	First-Time Writers Written Exam	Written Exam Pass Rate	First-Time Writers OSCE	OSCE Pass Rate
2024-2025	All	180	95.6%	135	93.3%
2024-2025	ACOE_CA	130	97.7%	99	96.0%
2024-2025	ACOE_US	39	87.2%	25	80.0%
2024-2025	ACOE_NO	11	100.0%	11	100.0%
2023-2024	All	153	94.1%	117	86.3%
2023-2024	ACOE_CA	122	95.9%	86	91.9%
2023-2024	ACOE_US	18	83.3%	19	57.9%
2023-2024	ACOE_NO	13	92.3%	12	91.7%
2022-2023	All	138	94.2%	112	84.8%
2022-2023	ACOE_CA	113	97.3%	86	94.2%
2022-2023	ACOE_US	18	77.8%	20	50.0%
2022-2023	ACOE_NO	7	85.7%	6	66.7%
2021-2022	All	138	89.1%	123	85.4%
2021-2022	ACOE_CA	114	92.1%	96	88.5%
2021-2022	ACOE_US	17	76.5%	19	78.9%
2021-2022	ACOE_NO	7	71.4%	8	62.5%
2020-2021	All	158	93.0%	110	78.2%
2020-2021	ACOE_CA	117	94.9%	74	85.1%
2020-2021	ACOE_US	19	78.9%	15	53.3%
2020-2021	ACOE_NO	22	95.5%	21	71.4%
2019-2020	All	170	98.2%	127	85.0%
2019-2020	ACOE_CA	128	99.2%	85	90.6%
2019-2020	ACOE_US	14	92.9%	14	50.0%
2019-2020	ACOE_NO	28	96.4%	28	85.7%

Domain/Practice Area Report

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

The mean score of all first-time candidates is used for comparative purposes between administrations.

Table 3 – Performance by Domain

Key Competency	Written		OSCE		Aggregate	
	Peer Mean	Program's Candidates	Peer Mean	Program's Candidates	Peer Mean	Program's Candidates
Number	170	3	126	3	296	6
1.0 Clinical Expertise	78%	80%	75%	82%	77%	81%
Assessment	77%	74%	78%	83%	77%	79%
Diagnosis & Planning	79%	82%	81%	82%	80%	82%
Patient Management	77%	77%	70%	82%	74%	80%
2.0 Communication	88%	87%	77%	76%	84%	81%
3.0 Collaboration	99%	100%	66%	51%	85%	76%
4.0 Patient-Centred Care	89%	83%	78%	78%	85%	80%
5.0 Professionalism	82%	100%	79%	78%	81%	89%
6.0 Scholarship	85%	75%	-	-	85%	75%
7.0 Practice Management	70%	100%	-	-	70%	100%

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-time candidates

First-time Candidates – the mean score from all first-time candidates

Table 4 - Performance - Patient Interaction Scale Item

Patient Interaction Scale Item	Peer Mean	Program's Candidates
NUMBER	126	3
Empathy	3.79	3.72
Coherence	3.77	3.72
Non-verbal	3.91	3.92
Verbal	3.88	3.72
Trust	3.84	3.78
Honesty & Integrity	3.89	3.86
Focus on the Patient	3.92	3.86
Respect	3.96	4.00

Competencies

Top/Bottom Five Competencies

Based on the highest average scores of first-attempt candidates.

Table 5 - Top Five Competencies

Top Five Competencies	Competency Number	Performance
Interact with patients and the public, following professional and ethical standards.	5.2	93%
Practice with accountability to the patient, the profession and society.	5.1	92%
Establish and maintain a safe practice for patients and colleagues, both physically and psychologically.	5.3	89%
Integrate and apply newly acquired evidence-based optometric knowledge, clinical skills and techniques in own practice.	6.2	88%
Refer patients for secondary, specialized care that may need further treatment or management outside the scope of practice for optometry.	3.2	88%

Table 6 – Bottom Five Competencies

Top Five Competencies	Competency Number	Performance
Interact with patients and the public, following professional and ethical standards.	5.2	93%
Practice with accountability to the patient, the profession and society.	5.1	92%
Establish and maintain a safe practice for patients and colleagues, both physically and psychologically.	5.3	89%
Integrate and apply newly acquired evidence-based optometric knowledge, clinical skills and techniques in own practice.	6.2	88%
Refer patients for secondary, specialized care that may need further treatment or management outside the scope of practice for optometry.	3.2	88%

Key Competency Report

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

First-time Candidates – the mean score of all first-time candidates

Blank cells mean that there were fewer than five scoring items related to the key competency, so the data is excluded.

Table 7 - Performance - Key Competency Report

Key Competency	Written		OSCE		Aggregate	
	Peer Mean	Program	Peer Mean	Program	Peer Mean	Program
NUMBER	170	3	126	3	296	6
1.0 Clinical Expertise	78%	80%	75%	82%	77%	81%
Assessment	77%	74%	78%	83%	77%	79%
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.	84%	83%	69%	71%	78%	77%
1.2 Apply clinical judgment and diagnostic assessments to formulate an initial, secondary, and differential diagnosis based on the initial case history.	75%	72%	85%	90%	79%	81%
1.3 Identify urgent ocular and medical conditions requiring urgent vs. emergency care and triage accordingly.	81%	83%	44%	100%	65%	92%
Diagnosis & Planning	79%	82%	81%	82%	80%	82%
1.4 Conduct eye examinations to assess and diagnose refractive disorders, diseases, and dysfunctions of the eye and vision system.	78%	82%	79%	79%	79%	81%
1.5 Formulate a final diagnosis taking into account the patient data and differential diagnosis.	85%	82%	77%	81%	82%	82%
1.6 Formulate and modify a treatment and management plan considering patient responses, priorities and limitations, and past treatments.	74%	79%	92%	100%	82%	89%

Key Competency	Written		OSCE		Aggregate	
	Peer Mean	Program	Peer Mean	Program	Peer Mean	Program
1.7 Recognize ocular, visual or systemic conditions that require assessment, co-management or management by other professionals.	76%	76%	77%	95%	76%	85%
Patient Management	77%	77%	70%	82%	74%	80%
1.8 Prescribe spectacle, contact lens therapy, vision therapy, myopia control, visual training for refractive disorders.	76%	77%	71%	90%	74%	83%
1.9 Educate the patient regarding treatment and management options.	74%	87%	73%	72%	74%	80%
1.10 Educate the patient about lifestyle choices and their impacts on ocular health.	82%	75%	8%	0%	51%	37%
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.	77%	80%	67%	68%	73%	74%
2.0 Communication	88%	87%	77%	76%	84%	81%
2.1 Establish and maintain relationships with patients and, when required, their families, caregivers, or substitute decision-makers through communication skills and strategies.	89%	100%	77%	77%	84%	88%
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.	88%	85%	78%	75%	84%	80%
2.3 Establish and maintain open, respectful and supportive relationships with staff, colleagues and other health care providers through communication skills and strategies.	-	-	-	-	-	-

Key Competency	Written		OSCE		Aggregate	
	Peer Mean	Program	Peer Mean	Program	Peer Mean	Program
2.4 Use culturally sensitive and inclusive language, communication strategies and non-verbal communication in all professional interactions.	-	-	-	-	-	-
3.0 Collaboration	99%	100%	66%	51%	85%	76%
3.1 Identify the appropriate healthcare professional(s) for patient referral and consultation purposes, including other optometrists.	-	-	-	-	-	-
3.2 Refer patients for secondary, specialized care that may need further treatment or management outside the scope of practice for optometry.	99%	100%	62%	46%	83%	73%
3.3 Co-manage patients with other healthcare professionals in the circle of care when appropriate.	-	-	94%	100%	94%	100%
4.0 Patient-Centred Care	89%	83%	78%	78%	85%	80%
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.	88%	83%	79%	78%	84%	80%
4.2 Include the patient in a shared decision-making process that will determine the course of treatment and follow-up.	94%	100%	91%	100%	93%	100%
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.	-	-	78%	77%	78%	77%

Key Competency	Written		OSCE		Aggregate	
	Peer Mean	Program	Peer Mean	Program	Peer Mean	Program
4.5 Educate patients regarding their overall health and how it, and lifestyle factors, can impact the health of their eyes and vision.	-	-	100%	100%	100%	100%
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	82%	100%	79%	78%	81%	89%
5.1 Practice with accountability to the patient, the profession and society.	84%	100%	77%	77%	81%	88%
5.2 Interact with patients and the public, following professional and ethical standards.	86%	100%	77%	76%	82%	88%
5.3 Establish and maintain a safe practice for patients and colleagues, both physically and psychologically.	-	-	91%	93%	91%	93%
5.4 Maintain personal, physical and mental self-care.	-	-	-	-	-	-
6.0 Scholarship	85%	75%	-	-	85%	75%
6.1 Maintain and continuously update professional knowledge through reviews of the scientific literature in support of evidence-based practice.	77%	56%	-	-	77%	56%
6.2 Integrate and apply newly acquired evidence-based optometric knowledge, clinical skills and techniques in own practice.	98%	100%	-	-	98%	100%
6.3 If relevant and within scope, critically review and apply information from other healthcare disciplines to enhance own practice and patient care.	-	-	-	-	-	-

Key Competency	Written		OSCE		Aggregate	
	Peer Mean	Program	Peer Mean	Program	Peer Mean	Program
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.	-	-	-	-	-	-
7.0 Practice Management	70%	100%	-	-	70%	100%
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.	70%	100%	-	-	70%	100%
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.	-	-	-	-	-	-