

MALAYSIAN OPTICAL COUNCIL MEDICAL PRACTICE DIVISION MINISTRY OF HEALTH MALAYSIA

OPTOMETRY COMMUNITY SERVICE GUIDELINES (ORGANIZED BY NON -GOVERNMENTAL ORGANIZATIONS (NGO) AND PRIVATE OPTOMETRY PRACTITIONERS)

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1. INTRODUCTION

Malaysian Optical Council (MOC) is mandated to carryout its activities and govern its registered practitioner in a manner that protects and serves the public interest. The goal of these Guidelines is to maintain appropriate standards of professional competence and ethical conduct by registered practitioners of the Malaysian Optical Council. Optician and Optometrist are defined a registered practitioner with the MOC.

Guidelines are meant to provide guidance and direction as to the scope of services that registered practitioners and authorized to provide and the manner in which those services are provided. It is incumbent upon each practitioner to exercise professional judgement when determining the current and future needs of each individual patient.

Guidelines are in constant evolution to reflects advances in optometric and medical science, development of innovative technology and updates to legislative scopes of practice.

2. OBJECTIVES

i. General Objectives

To standardize the application process for the organization and involvement of optometry practitioners in a vision screening program

ii. Specific objective

Explain the application method as well as the conditions that must be complied with by the organizer and optometry practitioner.

3. SCOPE

These guidelines apply to optometry practitioners and organizers responsible throughout the organization of the vision screening program is carried out.

4. TERMINOLOGY

i. Community service (Optometry) Services volunteered by individuals or an organization. A programs organize to detect eye problems among the public which aim to enlighten the load, provide benefits,

and well-being to the community without coercion from any party and not motivated by profit or political goals.

ii. Non-government organization

(NGO)

Established organizations aim to maintain or strive for a goal or any issue who have an interest in a society.

NGOs in principle act voluntarily, without coercion from any party and not a profit motivated or political

purposes.

iii. Optical premise Stores that have optometry practitioners and render

optometry services to the public.

iv. Optometry practitioners An optician or optometrist registered with the

Malaysian Optical Council (MOC)

v. Registered optician An optician registered under section 18 of the Optical

Act 1991

vi. Registered optometrist An optometrist registered under section 19 of the

Optical Act 1991

5. METHOD OF APPLICATION

i. Application for permission to carry out activities must be made **ONE (1) MONTH BEFORE THE PROGRAM** is held.

ii. Organizers need to fill in the Optometry Community Services Application Form (Refer Appendix 1) and send it by email to the official email of the Malaysian Optical Council: moc@moh.gov.my

6. TERMS & PROTOCOLS

i. TERMS

There are a number of conditions and criteria that are set and need to be adhered to before any vision screening is organized, namely:

- a. No sale of optical products / contact lenses was carried out
- b. No issuence prescription of glasses to the public during screening
- c. **Any case referral** to the optical premise/hospital **should be informed to and** prior consent should be obtained from the referred party.
- d. Conducted by optometry practitioners:
 - i. Registered optometrist with valid Annual Certificate of Practice (APC)
 - ii. Registered optician with valid Annual Certificate of Practice (APC).

ii. PROTOCOL

Protocol before the program commenced (Refer to Appendix 2: Flow Chart)

- a. Submit the application form for permission to run the program to the MOC and local council of the community involved.
- b. Inform and obtain consent from the optical premise/ health clinic to receive referral cases from the program.
- c. Perform vision screening as planned and refer patients in need of follow -up treatment to the appropriate optical premises/health clinic.

7. PARTIES WHO CAN APPLY TO ORGANIZE AND INVOLVE IN THE PROGRAM

Non -governmental organizations (NGOs); must collaborate with any:

- i. Hospital / Medical Center (Eye);
- ii. Optical premise;

who has an optometry practitioner.

8. FOLLOW -UP TREATMENT

Refer detected cases to ophthalmologist and optometry clinic (Hospital or health clinic government/private or nearby optical premises) for follow-up treatment. List of referred patients are given to community representatives (if any) for acknoledgement.

9. REFERENCES

- 1. Optical Act 1991
- 2. Optical regulations 1994

APPENDIX 1

OPTOMETRY COMMUNITY SERVICES APPLICATION FORM

Program Name	:
Date	:
Time	
Location	:
Organizer	
Target group (Number)	:
List of activity:	:
(Please attach list of activities /	
Tentative programs)	
Name of Organizer	
Address of the Organizer	
Email & Contact No.	
Other Parties Involved	:
(Hospital /Eye Center / Optical	
Premises)	
**If available	
List of Optometry Practitioners	: 1.
Involved	
(Full Name and MOC Registration	2.
No.)	
** Please Make Attachments If	
Necessary	
Optical Premises Referred For	
Follow -up Treatment	
**If available	
Name of applicant	;
	•
Date	;

Notes:

- 1. This application must reach the Malaysian Optical Council (MOC) office **ONE (1) MONTH BEFORE** the date of the activity is held.
- 2. Refer to the Guidelines for Organizing and Participating in Vision Screening Programs as a Service Community for more information.

APPENDIX 2

FLOW CHART: PROTOCOL BEFORE THE PROGRAM IS HELD

The organizer fills in the **OPTOMETRY COMMUNITY SERVICES APPLICATION FORM**

The organizers need to ensure that the program is run by Optometry Practitioner. Provide tentative programs and lists optometry practitioners involved along the application form

The organizers sent the form to Majlis Optik Malaysia **ONE**(1) MONTHS BEFORE the program is held.

The organizers reached an agreement with the health clinic/hospital and optical premises to receive patients who referred for follow -up treatment

The organizers need to make sure to make references for the cases which needs to be referred