



**The European Council of Optometry and Optics**

**Final European Diploma in Optometry Benchmark Report  
OCULUS Erasmus + Project**

**Hyderabad University**

**April 2020**

**Assessment Panel**

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## ECOO 2<sup>nd</sup> Benchmarking activity for OCULUS project.

2<sup>nd</sup> April 2020

The OCULUS Project (**O**ptometry **C**urriculum for **L**ifelong learning through **E**rasm**US**), led by a consortium of educators from optometry schools in Europe, aims to improve and reform existing curricula of optometric education in India and Israel to raise it to a high-standard level using the European Diploma in Optometry as a benchmark.

The Board of Management of the European Diploma were asked to conduct a benchmarking procedure for the OCULUS project, both at the outset of the project, and at the end of the project when knowledge had been exchanged and initiatives implemented to enhance the optometry curriculum in the partner organisations of this project.

The first benchmarking procedure consisted of completion of a self-assessment document and a visit to each institution in 2017 to conduct an in-depth examination of the programmes.

The second benchmarking procedure is a desk-based assessment, chiefly investigating the knowledge/clinical gaps identified from the initial assessment.

Consequently, this report is using the evidence presented in written format from each institution to fulfil the OCULUS project objectives. However, we also recognise that some institutions may be interested in going through the full accreditation process for the European Diploma in Optometry (EDO), and such a process would require a site visit to provide more detailed evidence required for full accreditation.

**Key changes identified:**

Noted that changed course structure from a 5 years integrated Masters of Optometry and Vision Science to 6 years Integrated Master of Optometry. We assume that the first two years are not specific to Optometry, and the latter 4 year constitute the optometry-specific learning? A number of new courses are reported to have been added:

Second year: Ocular Biochemistry (2 credits)

Third year: Indian Medicine and Telemedicine (2 credits)

Fourth year: Introduction to Quality & Patient safety (2 credits)

Fourth year: Medical Psychology (2 credits)

*NB 2 credits in Hyderabad University equate to 3 ECTs*

Logbooks: A Portfolio of Clinical Experience, based on the format of the EDO has been adopted for the internship year. It is required that portfolio is completed with 40 in-depth patient experiences documented, as part of a log of at least 300 patients seen.

Equipment: we note that a slit lamp, visual field perimeter and fundus camera have been purchased through the OCULUS project, and that further University investment has purchased a corneal topographer, autorefractor, portable Slit lamp and computer vision therapy system.

### **Outstanding Questions/Issues:**

- Staffing. Many of the sections in the OSAT tool do not contain the name of responsible lecturer. Also, it would have been helpful to understand the course team for the optometry programme, especially as the first Benchmarking exercise noted that there was only 1 full-time member of staff.
- In the narrative comparing the first and second benchmarks there are statements that 'we have developed rubrics for assessment'. This has resulted in an amber 'some weaknesses' rating. Attachment of the assessment details could well have upgraded this to green 'satisfactory'.
- What developments have there been to internships and the monitoring of student experience during internships. One of the previous issues was that many of the internships were undertaken in a hospital setting, and while exposure to clinical cases was good, there was limited opportunity for the students being able to conduct full eye examinations. It is not clear whether there have been any changes to this.
- We appreciate the Portfolio of Clinical experience has been implemented, but there is no information about how this is assessed.
- Module/course summaries do not have any details about how the course is assessed. This would have been a helpful addition to help understand how the learning objectives of the module are met.
- It would have been helpful to have an overall map of the courses/modules within the programme.
- Several of the modules/courses codes in the action report did not tally with what had been indicated in the OSAT PDF.

## 2<sup>nd</sup> Benchmarking Opinion (2020) against the Knowledge Base and Competencies of the European Diploma in Optometry for Hyderabad University

*This opinion is based on the Panel's analysis of the documents supplied*

### Colour Coding

Knowledge Base	<b>Knowledge base</b> for European Diploma competencies
Clinical/Practical competencies	<b>Clinical/practical</b> European Diploma competencies
	Benchmarking Opinion <b>Satisfactory</b>
	Benchmarking Opinion <b>Some weaknesses</b>
	Benchmarking Opinion <b>Inadequate</b>

## PART A: Optical Technology

European Diploma Examination Sections	Self-Assessment Document Competency Areas	Provisional Opinion	
Part A	Subject 1: Geometrical Optics		
Optics Optical Technology	Subject 2: Physical Optics		
	Subject 3: Visual Optics		
	Subject 5: Optical Appliances		
	Subject 6: Occupational Optics		
	Subject 5: Optical appliances		Clinical internship – evidence of 10 dispensing episodes collected as part of Portfolio of Clinical Experience
	Subject 6: Occupational Optics		Clinical internship – evidence of 10 dispensing episodes collected as part of Portfolio of Clinical Experience. Geometric Optics Lab 1 is listed as meeting the 6.2 LO, but there is no mention of personal protective eyewear in this module. The assessment reference again links to the Clinical portfolio but there is no stipulation for every candidate to demonstrate their ability to dispensing protective eyewear.

**PART B: Management of Visual Problems**

European Diploma Examination Sections	Self-Assessment Document Competency Areas	Provisional Opinion	
<b>Part B</b> Refraction Binocular Vision Contact lenses Visual Perception	Subject 4: Visual Perception		
	Subject 7: Vision and Ageing		
	Subject 8: Refraction		The query on the previous benchmarking was that there was no evidence of assessment. It is noted that written examinations occur for a variety of courses relevant to specific learning outcomes (Los), but it would have been helpful for course summaries to contain information about how they are assessed. There is no mention of LO 8 cycloplegic techniques in Clinical optometry 3. There is no mention of LO 11 the Near add in Clinical optometry 4.
	Subject 9: Low Vision		
	Subject 10: Ocular Motility and Binocular Vision		
	Subject 11: Contact Lenses		

Subject 12: Investigative Techniques		<p>The query on the previous benchmarking was that there was no evidence of assessment.</p> <p>It is noted that written examinations occur for a variety of courses relevant to specific learning outcomes (Los), but it would have been helpful for course summaries to contain information about how they are assessed.</p> <p>LO 6 Pachymetry (non-contact) is indicated to be covered in the Clinical internship. How would this occur for all students? How is it assessed in a practical exam?</p>
Subject 13: Paediatric Optometry		
Subject 14: Refractive Surgery		<p>The courses indicated appear to meet the learning outcomes for this subject so the knowledge base is achieved.</p>
Subject 8: Refraction		<p>Apart from LO 1, all other LOs are reported to be achieved through the Clinical Portfolio. However, no information is given on how this is assessed. The Portfolio itself, clearly sets out what the candidate needs to achieve during their internship, and appears to be a comprehensive tool. But how are each student's specific "ability to..." conduct a range of clinical skills assessed?</p> <p>If a supervisor at the place where the internship is assessing the student, what training and guidance do they have from the University course team?</p> <p>One could argue that the focus of the Clinical Portfolio is to evidence their overarching professional experience integrating their skills and knowledge, and that this is not the same as assessing their specific 'ability to..' clinical skills. In addition, how are the course team satisfied that</p>



			all students are assessed in a similar, fair and consistent manner?
	<b>Subject 9: Low Vision</b>		Same comment as Subject 8, all LOs are listed to be achieved through Clinical Portfolio.
	<b>Subject 10: Ocular Motility and Binocular Vision</b>		There is one assessment reference provided for this subject area with six LOs, and this is for the skill of Dynamic retinoscopy. While this is relevant, it does not encompass all the LOs for this subject.
	<b>Subject 11: Contact Lenses</b>		The majority of LO's did not have any assessment references to evidence that the 'ability to...' is assessed.
	<b>Subject 12: Investigative Techniques</b>		No assessment references were included. Again, for several LO's the Clinical Portfolio is cited as the means of assessment – see comments above (subject 8)
	<b>Subject 13: Paediatric Optometry</b>		For LO1 there is a written exam as assessment reference, and this does not adequately capture this clinical skill. For the other Learning outcomes, the only assessment reference is for Dynamic retinoscopy. The Action report note that rubrics for assessment have been developed (for this and other subjects): should they have been supplied?
	<b>Subject 14: Refractive Surgery</b>		Lack of practical assessment evidence for many of the learning outcomes.

**C: General Health and Ocular Anatomy**

European Diploma	Self-Assessment Document	Provisional Opinion	
Examination Sections	Competency Areas		
<b>Part C</b>  1. Biology 2. Ocular Biology 3. Ocular Abnormality	Subject 12: Investigative Techniques		LO 10: Quantitative perimetry is not covered in Ocular disease course. Not a substantive proportion of Credits allocated for these LOs, considering the fundamental nature of the areas covered in this subject area
	Subject 15: Anatomy and Histology		
	Subject 16: Neuroscience		Now evident this subject area and Learning outcomes are covered in General anatomy and physiology courses.
	Subject 17: General Physiology and Biochemistry		
	Subject 18: Microbiology and Immunology		
	Subject 19: General Pharmacology		One module (4.5ECTs) to cover two subject areas (19 and 23) not sufficient to cover all LOs.
	Subject 20: Pathology and General Medical disorders		
	Subject 21: Epidemiology and Biostatistics		

Subject 22: Ocular Anatomy and Physiology		
Subject 23: Ocular Pharmacology		One module (4.5ECTs) to cover two subject areas (19 and 23) not sufficient to cover all LOs. No specific mention of cycloplegics or mydriatics (LO 2 & 3)
Subject 24: Abnormal Ocular Conditions		Ocular Disease 1 and 2 modules are much more comprehensive, and cover all LO's
Subject 12: Investigative Techniques		Lack of practical assessment evidence for many of the learning outcomes. A written exam is not sufficient evidence that clinical competency has been assessed. This was evident for LO 1, 2, 6, 7, 12 and 13. A rubric for Slit Lamp examination (anterior eye) was supplied and this reference was used for many LOs. However, this was not relevant for LO 5 (pupils), 8 (fundus examination), 11.
Subject 24: Abnormal Ocular Conditions		Again, for several LO's the Clinical Portfolio is cited as the means of assessment – see comments above (Section B, subject 8)