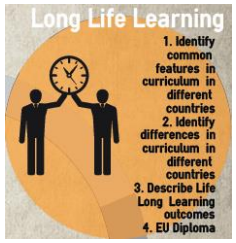

2017 ESA

JOINT MEETING ESA/AAPOS

Contribution of education in Orthoptics for a better public health to eye care in Europe

Carla Lança[1], Manuel Oliveira[1], Odile Van Daele[2], Jacques Dangla[3], Ingrid van Wijnen-Segeren[4]

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There is no actual or potential conflict of interest in relation to this presentation

Introduction

- Orthoptic education varies widely across the world, with countries offering hospital-based training courses whilst others offer bachelor or master level programs within the university sector (Scheetz, Konstandina Koklanis, & Morris, 2013).

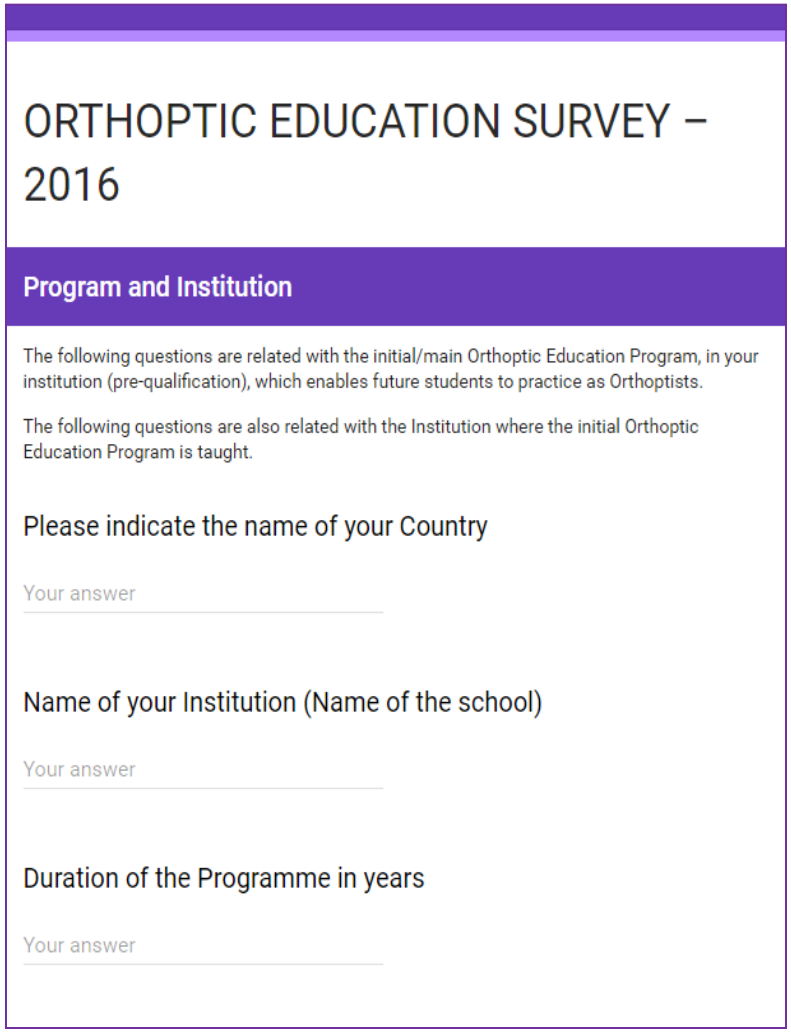
Purpose:

- To provide a description about Orthoptic Education across Europe;

- To identify the level of competency proficiency (CP) for different curriculum topics in Orthoptics.

Methods

- An online survey was conducted to inquire members of the education educational wing of OCE.
- The survey included questions about the programs and curricula.



ORTHOPTIC EDUCATION SURVEY – 2016

Program and Institution

The following questions are related with the initial/main Orthoptic Education Program, in your institution (pre-qualification), which enables future students to practice as Orthoptists.

The following questions are also related with the Institution where the initial Orthoptic Education Program is taught.

Please indicate the name of your Country

Your answer

Name of your Institution (Name of the school)

Your answer

Duration of the Programme in years

Your answer

Methods

- The CP (competency proficiency) Scale was used as an instrument to measure the ability to demonstrate a competency on the job, from 1 - “Fundamental Awareness” to 5 - “Expert”.

Score	Proficiency Level	Description
N/A	Not Applicable	This competency is not applicable to the Orthoptic curricula.
1	Fundamental Awareness (basic knowledge)	Common knowledge or an **understanding of basic techniques** and concepts (focus is on learning).
2	Novice (limited experience)	Level of experience gained in a classroom and/or experimental scenarios or as a trainee on-the-job. **It is expected that the Orthoptists need help** when performing this skill.
3	Intermediate (practical application)	Able to successfully complete tasks in this competency as requested. **Help from an expert may be required from time to time**, but the Orthoptist can usually perform the skill independently.
4	Advanced (applied theory)	Perform the actions associated with this skill without assistance. **Recognized within the immediate organization as "a person to ask"** when difficult questions arise regarding this skill.
5	Expert (recognized authority)	**Expert in this area**: provide guidance, troubleshoot and answer questions related to this area of expertise and the field where the skill is used.

Adapted from NIH Competencies Proficiency Scale (NIH, 2009)

Results

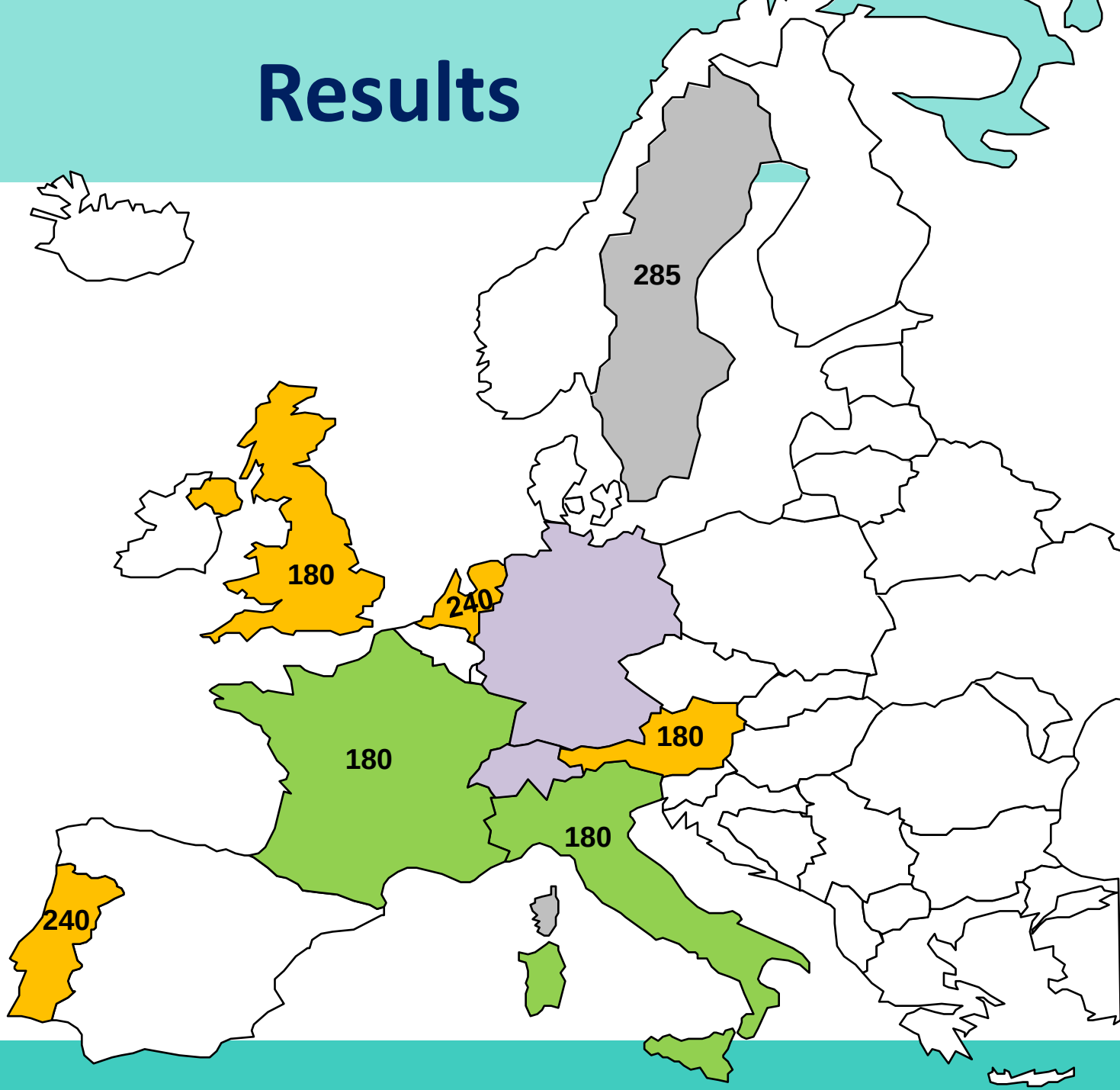
Higher education BSc degree (1st cycle)

BSc + Post-graduate qualification

Higher Education short cycle (no academic degree)

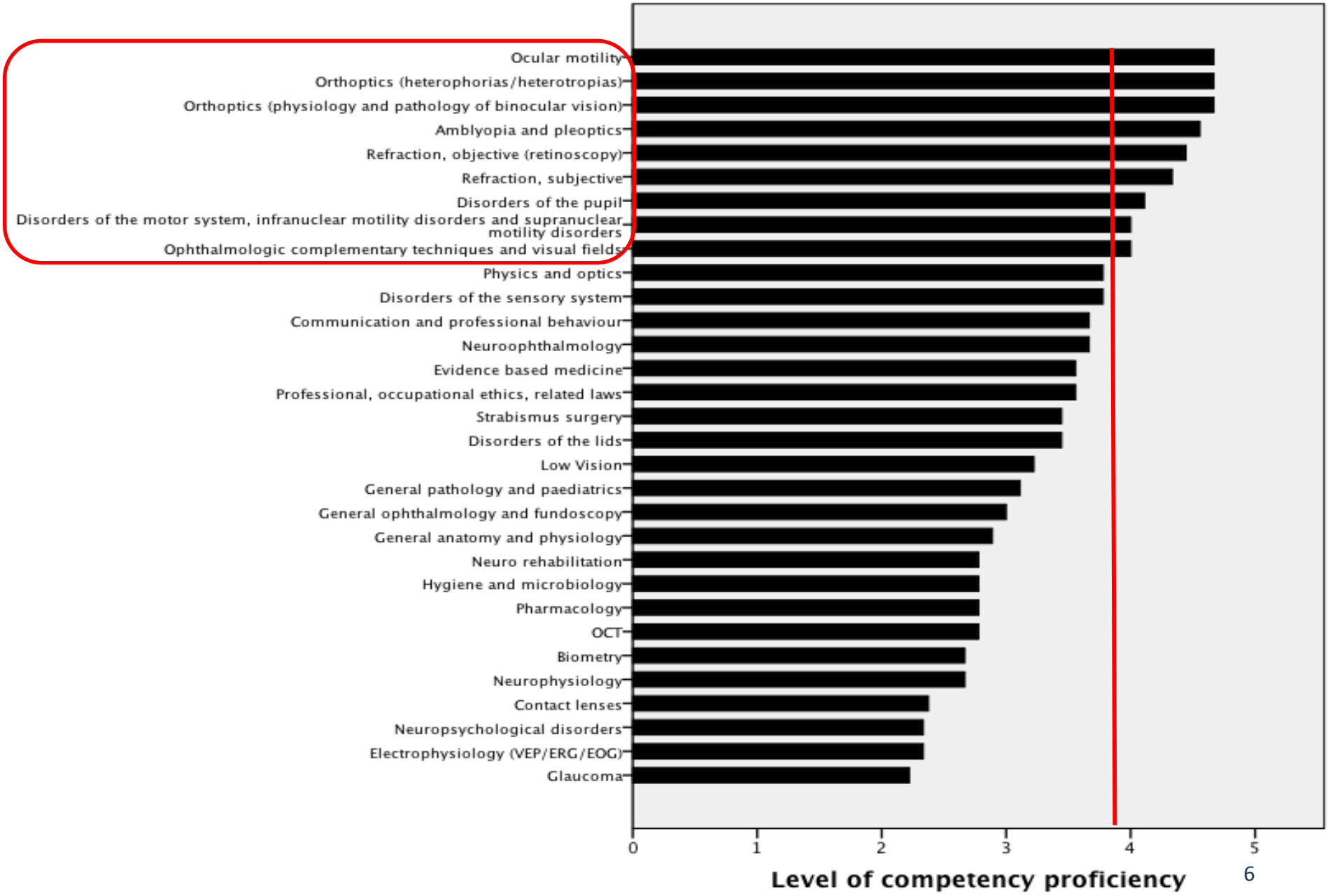
Apprenticeship programmes

ECTS

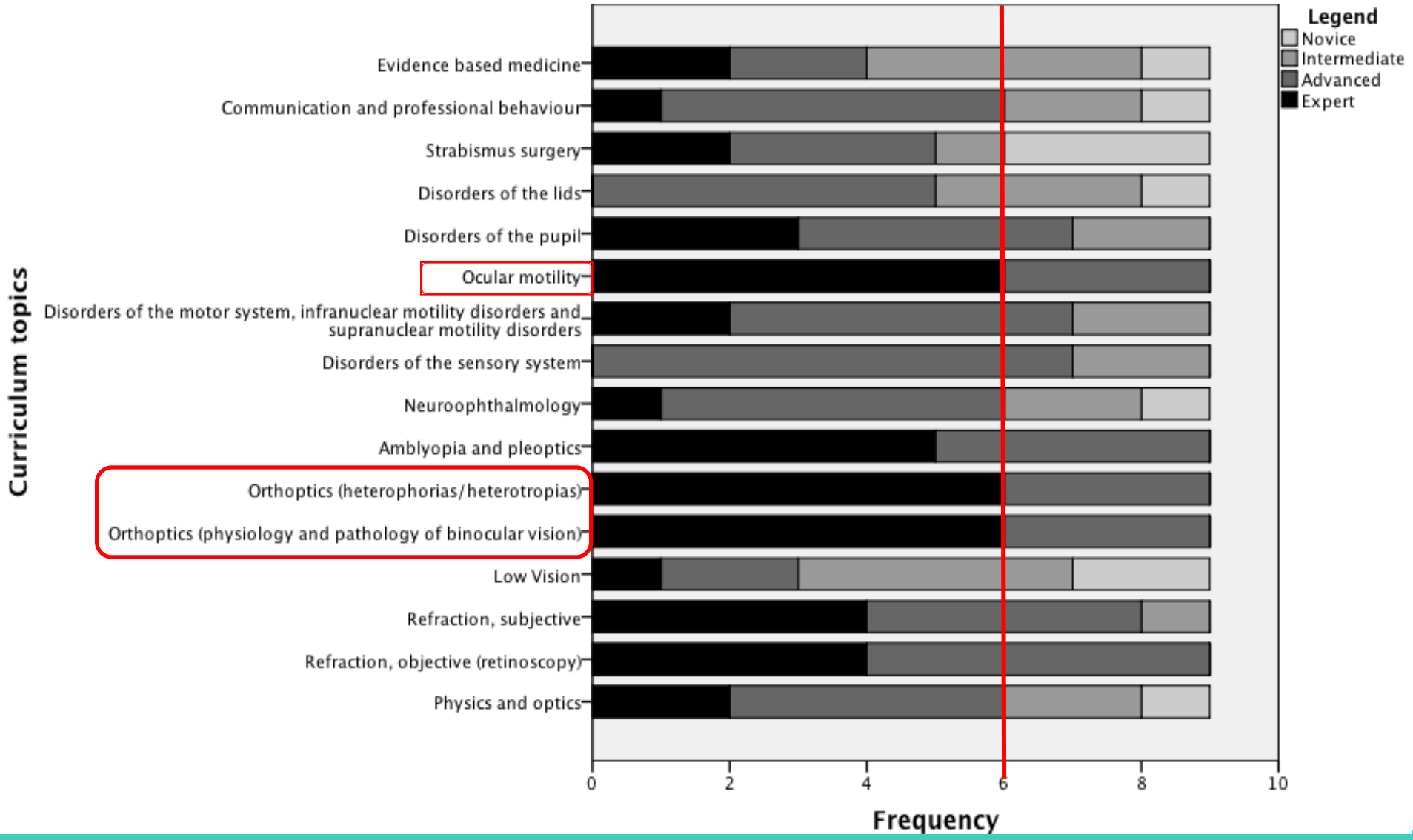


Results

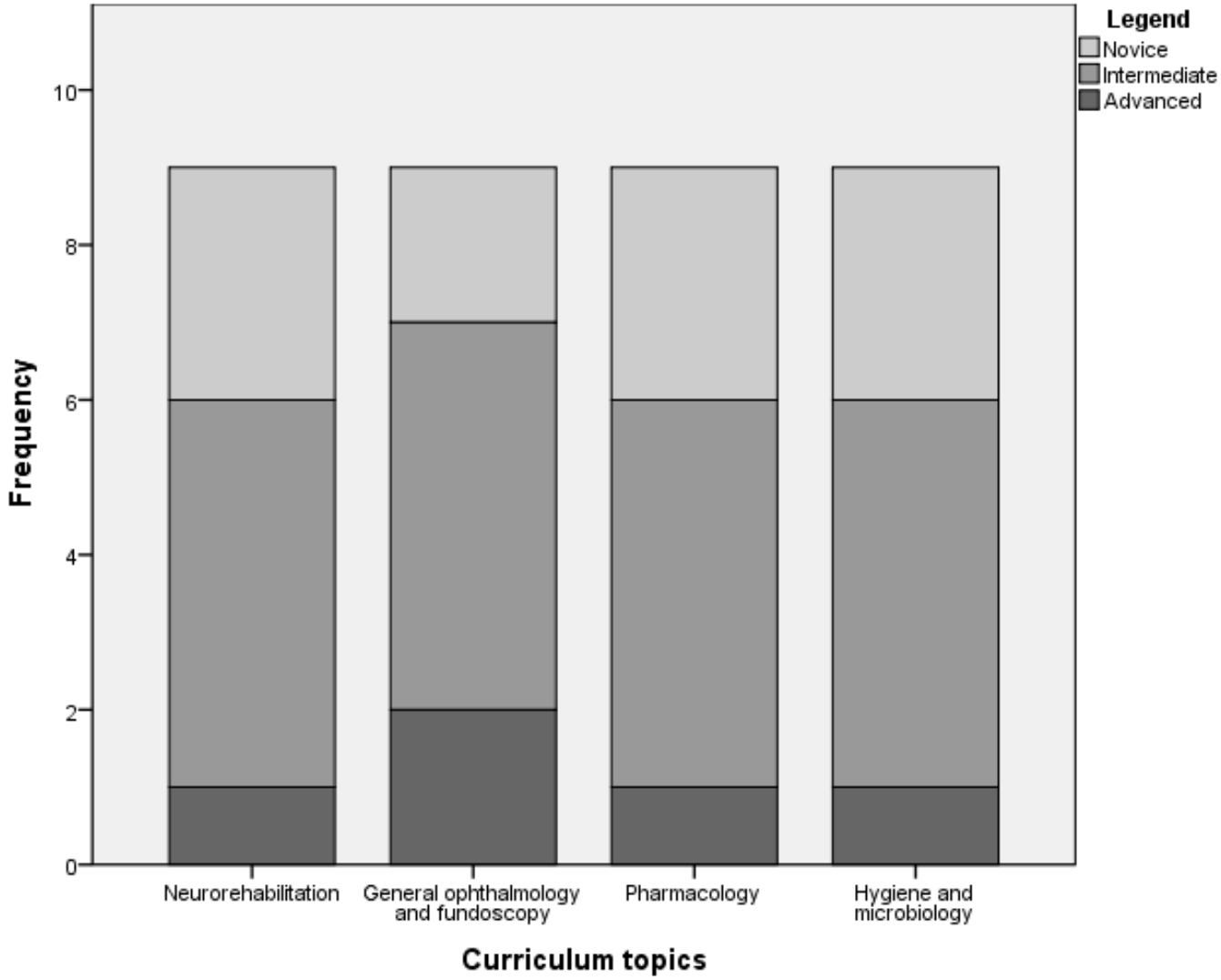
Descriptive Statistics
Mean



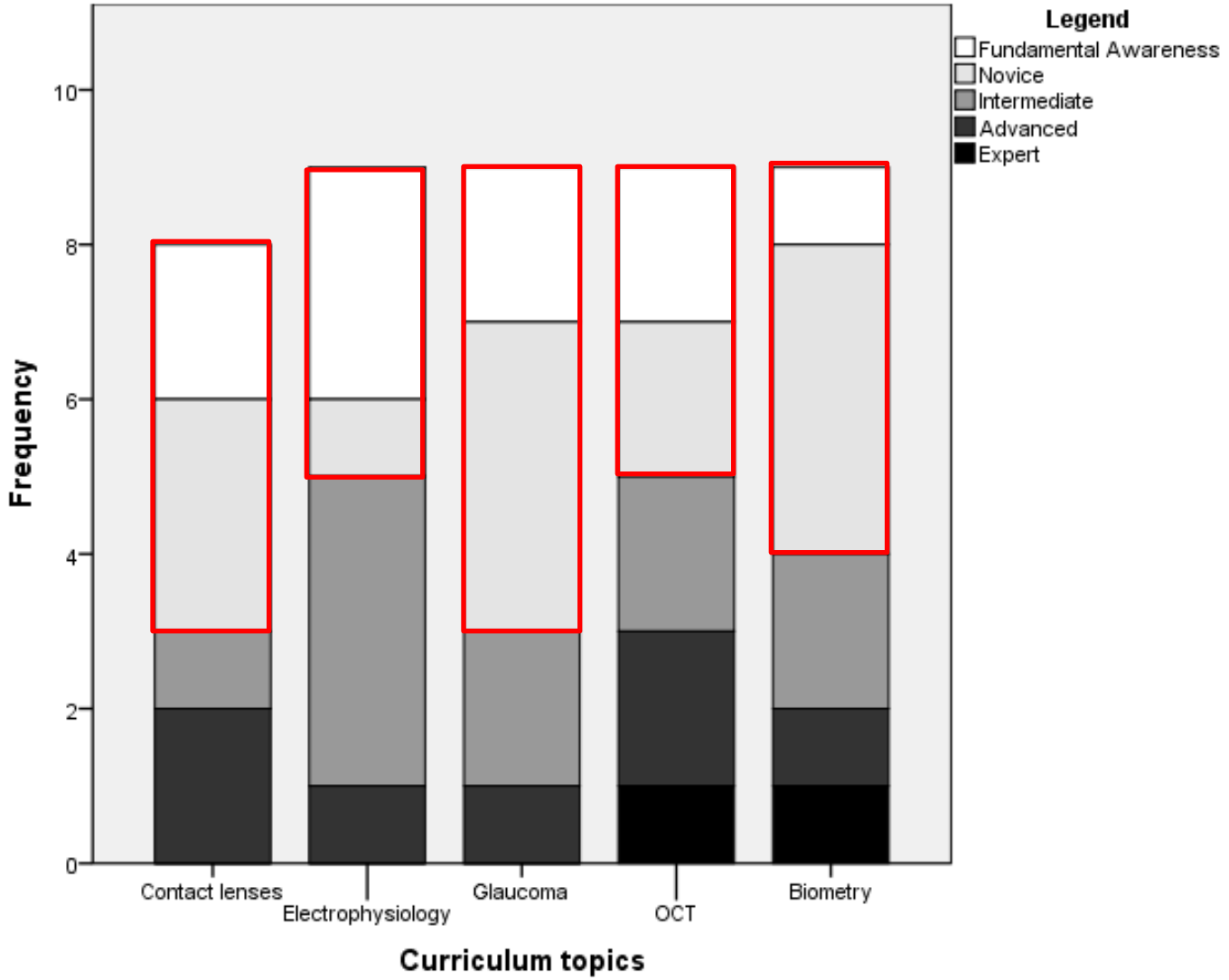
Results – Expert level



Results – Intermediate level



Results – Fundamental awareness



Results

Curriculum contents	Statistics	Duration of the Programme in years
General anatomy and physiology	r_S	0.862^{**}
	p	0.003
Refraction, objective (retinoscopy)	r_S	0.776^{*}
	p	0.014
Refraction, subjective	r_S	0.736^{*}
	p	0.024
General pathology and paediatrics	r_S	0.719^{*}
	p	0.029

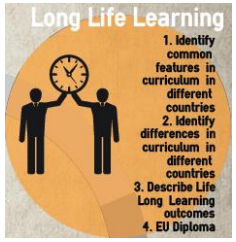
**Significant correlation at 0.01.
*Significant correlation at 0.05.

Discussion/Conclusion

- European competency levels (ECL) for education in Orthoptics can help to align the curricula with the objectives of the European health care system.

- Education is part of the contribution to improve eye care for a better public health.

- The establishment of ECL's is necessary to produce learning packages that can be accessed transnationally for curriculum development, available for teachers, students, health care staff and labour companies.



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