PROGRAMME SPECIFICATION

1. Overview

Programme Title	MSc Public Health for Eye Care
Academic Year	2027-28
Cohort Entry Points	Annually in September
Programme Director	John Buchan
Awarding Body	London School of Hygiene & Tropical Medicine
Teaching Institution	London School of Hygiene & Tropical Medicine
Faculty	Infectious and Tropical Diseases
Length of Programme	Full-time Taught Masters programmes: 12 months Split-study Taught Masters programmes: 24 months
Mode of Delivery	Intensive
Maximum Period of registration	Full-time: 3 years Split-study: 5 years
Language of Study	English
Entry Requirements	Please refer to the specific programme entry requirements here.
Award Titles	Master of Science in Public Health for Eye Care Exit Awards: Postgraduate Diploma in Public Health for Eye Care (120 credits) Postgraduate Certificate in Public Health for Eye Care (60 credits)
Total Credits	**CATS:** 180 **ECTS:** 90
Accreditation by Professional	N/A

Statutory and Regulatory Body	
Relevant PGT QAA Benchmark Statement and/or other external/internal reference points	N/A
Framework for Higher Education Qualifications Level (FHEQ)	Level 7
Re-sit Policy	https://www.lshtm.ac.uk/sites/default/files/academic-manual-chapter-08a.pdf
Extenuating Circumstances Policy	https://www.lshtm.ac.uk/sites/default/files/academic-manual-chapter-07.pdf
Date of Introduction of Programme	October 1995

2. Programme Description, Aims & Learning Outcomes

Programme Description
This programme provides current or aspiring eye health care professionals or researchers with the knowledge and skills required to reduce blindness and visual disability in their populations by developing an evidence-based public health approach for the control and management of blinding eye diseases. It enables students to contribute effectively at a local, national and international level in research, training and service delivery.
Educational aims of the programme
The aim of the programme – consistent with the LSHTM's mission to improve health worldwide – is to equip current or aspiring health professionals and researchers with the knowledge, understanding and skills to reduce blindness and visual disability locally, nationally or internationally, training them to be public health oriented, evidence-based, evidence-gathering, innovators and leaders in planning, delivery and evaluation of constantly-improving eye health care services for the entire population, both inside and beyond the doors of

their institutions; promoting a local, national and international network of health professionals, to improve vision and prevent blindness in the world.

Programme Learning Outcomes

By the end of the programme, students will be expected to achieve the following learning outcomes – drawing on material taught across different elements and assessed in a variety of ways.

(i) describe the epidemiology of the major blinding eye diseases;
(ii) design and interpret studies to assess public health eye care needs using appropriate research methods;
(iii) critically appraise evidence and select appropriate public health interventions for the major blinding eye diseases;
(iv) design a comprehensive eye care programme for appropriate preventive and therapeutic measures for a community;
(v) develop the tools for, and skills of; resource mobilisation, management and evaluation of local comprehensive eye care programmes and integration into health systems.

Teaching and Learning Strategy

The programme will be taught through a variety of teaching methods including: lectures, quizzes, articles or research papers to read and critically appraise, small group seminars, field trips, practical exercises and groupwork with peers. Live teaching will be complemented with directed self-study along with individual tutorials and supervisory meetings particularly pertaining to the research project. All elements of the programme have specific *intended learning outcomes*, with content designed to help students achieve these outcomes. Students are expected to learn through both directed and self-directed study.

Assessment Strategy

The programme learning outcomes are assessed through individual module assessments. The assessments methods used may include essays, other written coursework, written exams, practical exams, groupwork, or presentations. A research project dissertation report will also be assessed. Such tasks are designed to assess, via the most appropriate method, whether learning objectives have been met.

3. Programme Structure and features, modules, credit assignment and award requirements:

Full-time Masters	Term 1	Term 2	Term 3	Total Credits
Compulsory Modules	3	2		90
Recommended Modules		2		30
Project			1	60

Module information is correct at the time of publication, but minor amendments may be made subject to approval as detailed in Chapter 3 of the LSHTM Academic Manual. Elective modules listed are indicative and may change from year to year. https://www.lshtm.ac.uk/study/courses/changes-courses

Term	Slot	Module Code	Module Title	Module Type (compulsory or recommended)	Credits (CATS)
1	AB1	tbc	Epidemiology and Statistics for Public Health	Compulsory	15
1	AB1	tbc	Health economics, systems, and policy (HESP)	Compulsory	15
1	AB1	3408	Global Eye Health: Foundations, Epidemiology and Research Evidence Generation	Compulsory	30
2	C1	TBD	Epidemiology and Statistics for Public Health 2	Recommended	15
2	C1	1701	Reviewing the Literature	Recommended	15
2	C1	TBD	Intermediate Epidemiologic Methods	Recommended	15
2	C2	3409	Childhood Eye Disease, Ocular Infections and Non-Communicable Eye Diseases	Compulsory	15
2	D1	3407	Implementing Eye Care: Skills and Resources	Compulsory	15
2	D2	1301	Environmental Epidemiology	Recommended	15

2	D2	3189	Ethics, Public Health & Human Rights	Recommended	15
2	D2	2437	Epidemiology of Infectious Diseases	Recommended	15

Contact time

Student contact time refers to the tutor-mediated time allocated to teaching, provision of guidance and feedback to students. This time includes activities that take place in face-to-face contexts such as on-campus lectures, seminars, demonstrations, tutorials, supervised laboratory workshops, practical classes, project supervision and external fieldwork or visits, as well as where tutors are available for one-to-one discussions and interaction by email. Module contact time will be defined in the individual module specifications and provided to students at the start of their programme.

This definition is based on the one provided by the Quality Assurance Agency for Higher Education (QAA) Explaining contact hours (2011). Student contact time, together with time allocated for independent study and assessment, determines the total student study hours for a module or programme. Although there are separate hours allocated for each of these activities, they should always be clearly linked together to support effective learning.

The London School of Hygiene and Tropical Medicine (LSHTM) defines high quality contact time as structured, focused, purposeful and interactive.