

<b>Ulster University</b>
<b>Report of the outcomes of the adaptation to the GOC education &amp; training requirements</b>
<b>Postgraduate Certificate in Independent Prescribing for Optometrists</b>
<b>ULS-IP1-ETR</b>
<b>Report confirmed by GOC 05 December 2025</b>

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# SECTION ONE – ABOUT THIS DOCUMENT

## 1.1 ABOUT THIS DOCUMENT

This report outlines the outcomes of the review of Ulster University's (provider) adapted Postgraduate Certificate in Independent Prescribing for Optometrists qualification (qualification) against the *Requirements for Approved Qualifications in Additional Supply (AS), Supplementary Prescribing (SP) and/or Independent Prescribing (IP)* (January 2022).

It includes:

- Feedback against each relevant standard (as listed in the Adaptation Form).
- The status of all the standards reviewed as part of the adaptation process (which includes the formal response process).
- Any action Ulster University is required to take.

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## SECTION TWO – PROVIDER DETAILS

2.1 TYPE OF PROVIDER	
<b>Provider</b> <i>Sole responsibility for the entire route to registration.</i>	<input checked="" type="checkbox"/>
<b>Awarding Organisation (AO)</b> <i>Sole responsibility for the entire route to registration with centres delivering the qualification(s).</i>	<input type="checkbox"/>

2.2 CENTRE DETAILS	
Centre name(s)	Not applicable.

2.3 EXTERNAL PARTNERS DELIVERING AND/OR MANAGING AREAS OF THE QUALIFICATION
Not applicable.

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## SECTION THREE – QUALIFICATION DETAILS

3.1 QUALIFICATION DETAILS	
Qualification title	Postgraduate Certificate in Independent Prescribing for Optometrists
Qualification level	Level 7 (Regulated Qualifications Framework [RQF])
Duration of qualification	One academic year
Number of cohorts per academic year	One
Month(s) of student intake	September
Delivery method(s)	Blended learning
Alternative exit award(s)	No alternative exit awards
Total number of students per cohort	15

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## SECTION FOUR – SUMMARY OF THE OUTCOMES OF THE ADAPTATION PROCESS

4.1 QUALITY ASSURANCE ACTIVITY	
Type of activity	Review of the provider's adapted Postgraduate Certificate in Independent Prescribing for Optometrists qualification against the <i>Requirements for Approved Qualifications in Additional Supply (AS), Supplementary Prescribing (SP) and/or Independent Prescribing (IP)</i> (January 2022).

4.2 GOC REVIEW TEAM	
Officer	Georgia Smith – Education Development Officer
Manager	Lisa Venables – Education Development Manager
Decision maker	Samara Morgan – Head of Education & CPD
Education Visitor Panel (panel) members	<ul style="list-style-type: none"> <li>• Professor Andy Husband – Lay Chair</li> <li>• Dr David Hill – Optometrist / Independent Prescribing Optometrist member</li> <li>• Kiki Soteri – Optometrist / Independent Prescribing Optometrist member</li> <li>• Pam McClean – Optometrist / Independent Prescribing Optometrist member</li> </ul>

4.3 SUMMARY OF CONDITIONS AND RECOMMENDATIONS	
Conditions	The qualification has been set <b>one</b> condition against the following standards: <ul style="list-style-type: none"> <li>• S3.6</li> </ul>
Recommendations	The qualification has been set <b>two</b> recommendations against the following standards: <ul style="list-style-type: none"> <li>• S3.5</li> <li>• S3.12</li> </ul>
<p><b>Commentary against all of the standards reviewed are set out in section 4.4.</b></p> <p>The qualification will remain subject to the GOC's quality assurance and enhancement methods (QAEM) on an ongoing basis.</p>	

4.4 STANDARDS OVERVIEW	
<p>The standards reviewed as part of the adaptation process for approved qualifications (as outlined in the Adaptation Form*) are listed below along with the outcomes, statuses, actions, and any relevant deadlines. Actions may include the following:</p> <ul style="list-style-type: none"> <li>• A <b>condition</b> is set when the information submitted did not provide the necessary evidence and assurance that a standard is met; further action is required.</li> <li>• A <b>recommendation</b> is set when the information submitted currently provides the necessary evidence and assurance that a standard is met. However, the GOC has identified this may be an area that could be enhanced or that will need to be reviewed to ensure the standard continues to be met.</li> </ul>	

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- **No further action** is required – the information submitted provides the necessary assurance that a standard is met.

\*The following standards listed were **not** reviewed as part of the adaptation process but are monitored as part of the GOC's Quality Assurance and Enhancement Methods (QAEM):

- Standard one - public and patient safety: S1.1, S1.2, S1.3, S1.4
- Standard two - admissions of students: S2.2, S2.3, S2.4, S2.6
- Standard three - assessment of outcomes and curriculum design: S3.7, S3.8, S3.9, S3.10, S3.16, S3.17
- Standard four - management, monitoring and review of approved qualifications: S4.1, S4.4, S4.5, S4.6, S4.7, S4.8, S4.9, S4.10, S4.12
- Standard five - leadership, resources and capacity: S5.3, S5.4, S5.5

Further details on the evidence that the provider was required to complete or submit as part of the education and training requirements (ETR) adaptation process can be found on our [qualifications in additional supply \(AS\), supplementary prescribing \(SP\) and/or independent prescribing \(IP\)](#) webpage.

<b>Standard no.</b>	S2.1
<b>Standard description</b>	Selection and admission criteria must be appropriate for entry to an approved qualification for specialist entry to the GOC register (AS, SP and/or IP categories) including relevant health, character and fitness to practise checks. For overseas trainees, this should include evidence of proficiency in the English language of at least level 7 overall (with no individual section lower than 6.5) on the International English Language Testing System (IELTS) scale or equivalent.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>• A completed 'Template 2 – criteria narrative'.</li> <li>• The provider's 'Course Document' which outlines confirmation that: <ul style="list-style-type: none"> <li>○ Overseas students applying to the qualification must demonstrate evidence of proficiency in the English language of at least level 7 overall (with no individual section lower than 6.5) on the International English Language Testing System (IELTS) scale or equivalent.</li> </ul> </li> <li>• Narrative provided in support of the formal response process including: <ul style="list-style-type: none"> <li>○ Details of the admissions and verification checks carried out by the Admissions Department and Course Director respectively.</li> </ul> </li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The provider has appropriate, clear, and comprehensive entry admissions criteria.</li> </ul>

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	<ul style="list-style-type: none"> <li>The provider has appropriate, clear, and comprehensive entry and IELTS requirements.</li> </ul>
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<b>Standard no.</b>	S2.5
<b>Standard description</b>	Recognition of prior learning must be supported by effective and robust policies and systems. These must ensure that trainees admitted at a point other than the start of a programme have the potential to meet the outcomes for the award of the approved qualification. Prior learning must be recognised in accordance with guidance issued by The Quality Assurance Agency for Higher Education (QAA) and/or The Office of Qualifications and Examinations Regulation (Ofqual) / Scottish Qualifications Authority (SQA) / Qualifications Wales / Department for the Economy in Northern Ireland and must not exempt trainees from summative assessments leading to the award of the approved qualification. (If necessary, separate arrangements will be made for the safe transition of trainees who have not yet completed GOC-approved therapeutic prescribing qualifications programmes prior to the introduction of the new outcomes and standards.)
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>A completed 'Template 2 – criteria narrative'.</li> <li>The provider's 'Recognition of Prior Learning Policy'.</li> <li>The provider's 'Course Document' which outlines confirmation that: <ul style="list-style-type: none"> <li>Trainees who are successful in their RPL application will not be exempt from undertaking all summative assessments.</li> </ul> </li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>The provider's recognition of prior learning (RPL) criteria and process is fairly and consistently applied.</li> </ul>

<b>Standard no.</b>	S3.1
<b>Standard description</b>	There must be a clear assessment strategy for the award of an approved qualification. The strategy must describe how the outcomes will be assessed, how assessment will measure trainees' achievement of outcomes at the required level (Miller's Pyramid) and how this leads to an award of an approved qualification.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>A completed 'Template 2 – criteria narrative'.</li> </ul>

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	<ul style="list-style-type: none"> <li>• A completed 'Template 4 – assessment strategy'.</li> <li>• A completed 'Template 5 – module outcome map'.</li> <li>• The provider's 'Course Document' which outlines: <ul style="list-style-type: none"> <li>○ The proposed assessment strategy.</li> <li>○ The assessment handbook.</li> <li>○ Qualification regulations.</li> </ul> </li> <li>• The provider's 'Ulster University Assessment Code of Practice' document.</li> <li>• The provider's 'mapping of GOC learning outcomes' document which outlines the: <ul style="list-style-type: none"> <li>○ Module each learning outcome will be assessed and;</li> <li>○ which assessment methods will be used.</li> </ul> </li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The provider has a clear assessment strategy mapped against learning outcomes.</li> </ul>
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<b>Standard no.</b>	S3.2
<b>Standard description</b>	The approved qualification must be taught and assessed (diagnostically, formatively and summatively) in a progressive and integrated manner. The component parts should be linked into a cohesive programme (for example, Harden's spiral curriculum), introducing, progressing and assessing knowledge, skills and behaviour until the outcomes are achieved.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>• A completed 'Template 2 – criteria narrative'.</li> <li>• A completed 'Template 4 – assessment strategy'.</li> <li>• A completed 'Template 5 – module outcome map'.</li> <li>• The provider's 'Course Document' which outlines confirmation of the course structure.</li> <li>• The provider's 'Mapping of GOC Learning Outcomes to Adapted IP Programme' document.</li> <li>• The provider's assessment rubrics.</li> <li>• Narrative provided in support of the formal response process including: <ul style="list-style-type: none"> <li>○ Confirmation of the in-person activities conducted as part of the qualification e.g., the placement module.</li> </ul> </li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The provider has an appropriate and consistent assessment strategy mapped against the learning outcomes.</li> <li>• The provider has appropriate assessment methods for the qualification.</li> </ul>

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<b>Standard no.</b>	S3.3
<b>Standard description</b>	Curriculum design and the assessment of outcomes must involve and be informed by feedback from a range of stakeholders such as patients, employers, trainees, commissioners, placement providers, members of the eye-care team and other healthcare professionals.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>• A completed 'Template 2 – criteria narrative'.</li> <li>• A completed 'Template 5 – module outcome map'.</li> <li>• The provider's 'Course Document'.</li> <li>• The provider's 'Employers Liaison Minutes'.</li> <li>• The provider's 'Patient Liaison Board Minutes June 2023'.</li> <li>• The provider's 'Patient Liaison Board Minutes June 2024'.</li> <li>• The provider's 'Placement Handbook for Independent Prescribing'.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• There was an appropriate level of engagement with a variety of stakeholders.</li> <li>• It is clear where feedback has been used in the design and delivery of the qualification.</li> </ul>

<b>Standard no.</b>	S3.4
<b>Standard description</b>	The outcomes must be assessed using a range of methods and all final, summative assessments must be passed. This means that compensation, trailing and extended re-sit opportunities within and between modules where outcomes are assessed is not permitted.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>• A completed 'Template 2 – criteria narrative'.</li> <li>• A completed 'Template 4 – assessment strategy'.</li> <li>• A completed 'Template 5 – module outcome map'.</li> <li>• The provider's 'Course Document'.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The provider utilises a clear range of assessment methods.</li> <li>• All final summative assessments must be passed.</li> <li>• Trailing and extended resit opportunities are not permitted.</li> </ul>

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<b>Standard no.</b>	S3.5
<b>Standard description</b>	Assessment (including lowest pass) criteria, choice and design of assessment items (diagnostic, formative and summative) leading to the award of an approved qualification must ensure safe and effective practice and be appropriate for a qualification for specialist entry to the GOC register (AS, SP and/or IP).
<b>Status</b>	<b>MET – a recommendation is set</b>
<b>Deadline</b>	Response to the recommendation to be submitted by Monday 28 September 2026.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included but was not limited to:</p> <ul style="list-style-type: none"> <li>• A completed 'Template 2 – criteria narrative'.</li> <li>• A completed 'Template 4 – assessment strategy'.</li> <li>• A completed 'Template 5 – module outcome map'.</li> <li>• The provider's 'Course Document'.</li> <li>• The provider's 'Mapping of GOC Learning Outcomes to Adapted IP Programme' document.</li> <li>• The provider's assessment rubrics.</li> <li>• Narrative provided in support of the formal response process including: <ul style="list-style-type: none"> <li>○ Further information on the placement module.</li> </ul> </li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The provider's choice and design of assessment items and assessment criteria is appropriate.</li> <li>• Whilst teaching, learning and assessment methods for trainees with specific needs may be modified, the outcomes cannot be modified and must be met in full.</li> </ul> <p>Although the information reviewed provided sufficient assurance that this standard is met, a <b>recommendation</b> has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> <li>• Evidence that the OSCE placement module assessment has been developed around specific station examples, demonstrating how the range of stations will assess specific learning outcomes.</li> <li>• Evidence that the module examiners have been provided with appropriate pass/fail criteria for the OSCE placement module.</li> </ul>

<b>Standard no.</b>	S3.6
<b>Standard description</b>	Assessment (including lowest pass) criteria must be explicit and set using an appropriate and tested standard-setting process. This includes assessments which occur during learning and experience in practice.
<b>Status</b>	<b>NOT MET – a condition is set</b>

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<b>Deadline</b>	Monday 28 September 2026
<b>Rationale</b>	<p>The evidence did not provide the necessary assurance and therefore this standard is NOT MET.</p> <p>Supporting evidence reviewed included but was not limited to:</p> <ul style="list-style-type: none"> <li>• A completed 'Template 2 – criteria narrative'.</li> <li>• A completed 'Template 4 – assessment strategy'.</li> <li>• A completed 'Template 5 – module outcome map'.</li> <li>• The provider's 'Course Document'.</li> <li>• The provider's 'Mapping to GOC Learning Outcomes to Adapted IP Programme' document.</li> <li>• Narrative provided in support of the formal response process including: <ul style="list-style-type: none"> <li>◦ An assessment rubric for the portfolio assessment.</li> </ul> </li> </ul> <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> <li>• The standard setting process used to develop the assessment criteria, including the lowest pass.</li> </ul> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> <li>• Evidence demonstrating the standard setting process used to develop the assessment criteria (including lowest pass) for the placement module within the qualification.</li> </ul> <p>Although a <b>condition</b> has been set, the GOC notes the progress the provider has made towards meeting this standard through providing clarity surrounding its placement module, including the assessment rubric for the coursework assessment. Further assurance is required regarding the standard setting process used to develop this module.</p>

<b>Standard no.</b>	S3.11
<b>Standard description</b>	A range of teaching and learning methods must be used to deliver the outcomes.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>• A completed 'Template 2 – criteria narrative'.</li> <li>• A completed 'Template 4 – assessment strategy'.</li> <li>• The provider's 'Course Document' which outlines the:</li> </ul>

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	<ul style="list-style-type: none"> <li>Module descriptors detailing assessments and assessment methods.</li> <li>The provider's 'mapping of GOC learning outcomes' document which outlines the: <ul style="list-style-type: none"> <li>Module where each learning outcome will be assessed and;</li> <li>Which assessment methods will be used.</li> </ul> </li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>The assessment and teaching methods appear to be appropriate to deliver the learning outcomes at the required level.</li> </ul>
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<b>Standard no.</b>	S3.12
<b>Standard description</b>	To enable the development of trainees' clinical, diagnostic and prescribing skills to meet the outcomes, the approved qualification must integrate learning and experience in practice (as a guide, approximately 90 hours). The supervision of a trainee's learning and experience in practice must be co-ordinated by an appropriately trained and qualified registered healthcare professional (DPP) with independent prescribing rights.
<b>Status</b>	<b>MET – a recommendation is set</b>
<b>Deadline</b>	Response to the recommendation to be submitted by Monday 28 September 2026.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included but was not limited to:</p> <ul style="list-style-type: none"> <li>A completed 'Template 2 – criteria narrative'.</li> <li>The provider's 'Course Document'.</li> <li>The provider's 'Placement Handbook Independent Prescribing' document.</li> <li>Narrative provided in support of the formal response process including: <ul style="list-style-type: none"> <li>Details on how Designated Prescribing Practitioners (DPPs) are assessed for their suitability, training offered to DPPs, their roles, responsibilities and expectations and confirmation of trainee placement period(s).</li> </ul> </li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>There are an appropriate number of hours in practice for the trainee under the co-ordinated supervision of a DPP.</li> </ul> <p>Although the information reviewed provided sufficient assurance that this standard is met, a <b>recommendation</b> has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p>

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	<ul style="list-style-type: none"> <li>Evidence that the DPP training materials are explicit when referring to how the placement and caseload variation enables relevant experience for trainees to meet the learning outcomes.</li> </ul>
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<b>Standard no.</b>	S3.13
<b>Standard description</b>	Outcomes delivered and assessed during learning and experience in practice must be clearly identified, included within the assessment strategy and fully integrated within the programme leading to the award of an approved qualification.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>A completed 'Template 2 – criteria narrative'.</li> <li>A completed 'Template 4 – assessment strategy'.</li> <li>A completed 'Template 5 – module outcome map'.</li> <li>The provider's 'Course Document'.</li> <li>The provider's 'Mapping of GOC Learning Outcomes to Adapted IP Programme' document.</li> <li>Narrative provided in support of the formal response process including: <ul style="list-style-type: none"> <li>Confirmation of trainees' placement dates.</li> </ul> </li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>Learning and experience in practice is integrated into the qualification.</li> </ul>

<b>Standard no.</b>	S3.14
<b>Standard description</b>	The selection of outcomes to be taught and assessed during periods of learning and experience in practice and the choice and design of assessment items must be informed by feedback from a variety of sources, such as patients, employers, trainees, DPPs, members of the eye-care team and other healthcare professionals.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included but was not limited to:</p> <ul style="list-style-type: none"> <li>A completed 'Template 2 – criteria narrative'.</li> <li>The provider's 'Course Document'.</li> <li>The provider's 'Employers Liaison Board Minutes June 2023'.</li> <li>The provider's 'Patient Liaison Board Minutes June 2023'.</li> <li>The provider's 'Patient Liaison Board Minutes June 2024'.</li> <li>Narrative provided in support of the formal response process including:</li> </ul>

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	<ul style="list-style-type: none"> <li>Confirmation of the date(s) trainees can commence their placement.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>The provider has considered stakeholder feedback in the outcomes taught and assessed during learning and experience.</li> </ul>
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<b>Standard no.</b>	S3.15
<b>Standard description</b>	Equality and diversity data and its analysis must inform curriculum design, delivery and assessment of the approved qualification. This analysis must include trainees' progression by protected characteristic. In addition, the principles of equality, diversity and inclusion must be embedded in curriculum design and assessment and used to enhance trainees' experience of studying on a programme leading to an approved qualification.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>A completed 'Template 2 – criteria narrative'.</li> <li>The provider's 'Equality, Diversity and Inclusion (EDI) 2025 training schedule'.</li> <li>Narrative that outlines: <ul style="list-style-type: none"> <li>How trainees are encouraged to bring their own experiences to course and project work.</li> <li>Examples of where the curriculum design is accommodating of different needs.</li> <li>How EDI and cultural awareness have been integrated into the curriculum.</li> </ul> </li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>The provider has clearly considered EDI within its qualification design and delivery.</li> <li>It is clear how EDI has informed qualification design.</li> <li>There are clear examples of how EDI training is undertaken by staff and assessors etc.</li> </ul>

<b>Standard no.</b>	S4.2
<b>Standard description</b>	The organisation responsible for the award of the approved qualification must be legally incorporated (i.e. not be an unincorporated association) and have the authority and capability to award the approved qualification.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.

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<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>• A completed 'Template 2 – criteria narrative'.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The provider has clear awarding powers and is a legally incorporated higher education institution.</li> </ul>
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<b>Standard no.</b>	S4.3
<b>Standard description</b>	The provider must have a named point of contact for the approved qualification.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>• A completed 'Form 2B – notification of adaptation'.</li> <li>• A completed 'Template 2 – criteria narrative'.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The provider has a suitably qualified and experienced named individual for the qualification.</li> </ul>

<b>Standard no.</b>	S4.11
<b>Standard description</b>	There must be an effective mechanism to identify risks to the quality of the delivery and assessment of the approved qualification and to identify areas requiring attention or development.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>• A completed 'Form 2B – notification of adaptation'.</li> <li>• A completed 'Template 2 – criteria narrative'.</li> <li>• The provider's 'Clinical Learning in Practice Handbook'.</li> <li>• The provider's 'School of Biomedical Sciences Risk Register'.</li> <li>• The provider's 'Course Document' which outlines staff and students' responsibilities to raise concerns.</li> <li>• Narrative provided in support of the formal response process including: <ul style="list-style-type: none"> <li>○ Details of how programme-specific risks are appropriately managed once identified.</li> </ul> </li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p>

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	<ul style="list-style-type: none"> <li>The provider has appropriate processes in place to raise, assess and mitigate risks to the qualification.</li> </ul>
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<b>Standard no.</b>	S5.1
<b>Standard description</b>	There must be robust and transparent mechanisms for identifying, securing and maintaining a sufficient and appropriate level of ongoing resources to deliver the outcomes to meet these standards, including human and physical resources that are fit for purpose and clearly integrated into strategic and business plans. Evaluations of resources and capacity must be evidenced together with evidence of recommendations considered and implemented.
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>A completed 'Template 2 – criteria narrative'.</li> <li>The provider's 'Course Document' which outlines: <ul style="list-style-type: none"> <li>The resource allocation and planning for the next five years, including details of the staff, facilities and accommodation.</li> </ul> </li> <li>The provider's 'School of Biomedical Sciences Risk Register'.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>The provider has appropriately assessed and mitigated risks.</li> <li>The provider's teaching and learning environments are suitable and have sufficient capacity for the planned trainee numbers.</li> <li>The provider has sufficient resource (human and physical) to deliver the qualification.</li> </ul>

<b>Standard no.</b>	S5.2
<b>Standard description</b>	<p>There must be a sufficient and appropriately qualified and experienced staff team. This must include:</p> <ul style="list-style-type: none"> <li>an appropriately qualified and experienced programme leader, supported to succeed in their role; and</li> <li>sufficient staff responsible for the teaching and assessment of the outcomes, including GOC registrants and other suitably qualified healthcare professionals.</li> </ul>
<b>Status</b>	<b>MET – no further action required at this stage</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> <li>A completed 'Form 2B – notification of adaptation'.</li> <li>A completed 'Template 2 – criteria narrative'.</li> <li>The provider's 'Course Document' which outlines:</li> </ul>

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	<ul style="list-style-type: none"> <li>○ The key members of staff supporting with the qualification delivery.</li> <li>○ The experience and professional backgrounds of the staff members.</li> <li>○ The resource allocation and planning for the next five years, including details of the staff, facilities and accommodation.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The qualification has appropriate leadership.</li> <li>• The provider has appropriately experienced and qualified staff members to deliver the qualification.</li> </ul>
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