

University of Central Lancashire
Report of the outcomes of the adaptation to the GOC education & training requirements
Master of Optometry (MOptom)
CLN-OP1-ETR
Report confirmed by GOC 18 April 2024

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SECTION ONE – ABOUT THIS DOCUMENT

1.1 ABOUT THIS DOCUMENT

This report outlines the outcomes of the review of the University of Central Lancashire's (provider) adapted Master of Optometry (MOptom) qualification (qualification) against the *Requirements for Approved Qualifications in Optometry and Dispensing Optics* (March 2021).

It includes:

- Feedback against each relevant standard (as listed in Form 2a or the merged Adaptation Form – ADP-FRM).
- The status of all the standards reviewed as part of the adaptation process (which include the formal response process).
- Any action the University of Central Lancashire is required to take.

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SECTION TWO – PROVIDER DETAILS

2.1 TYPE OF PROVIDER	
Provider <i>Sole responsibility for the entire route to registration.</i>	<input checked="" type="checkbox"/>
Awarding Organisation (AO) <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
As part of the qualification, the College of Optometrists (CoO) will be delivering the Clinical Learning in Practice (CLiP) scheme.

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SECTION THREE – QUALIFICATION DETAILS

3.1 QUALIFICATION DETAILS	
Qualification title	Master of Optometry (MOptom)
Qualification level	Level 7
Duration of qualification	3 years
Number of cohorts per academic year	One
Month(s) of student intake	September
Delivery method(s)	Blended learning
Alternative exit award(s)	PG Diploma Applied Vision Sciences (requires 120 credits at level 7)
Total number of students per cohort	20

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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 Master of Optometry (MOptom) qualification against the <i>Requirements for Approved Qualifications in Optometry and Dispensing Optics</i> (March 2021).

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 Development
Education Visitor Panel (panel) members	<ul style="list-style-type: none"> Jane Andrews – Lay Chair Professor Brendan Barrett – Optometrist member Dr Graeme Kennedy – Optometrist and Independent Prescribing Optometrist member Julie Hughes – Dispensing Optician member

4.3 SUMMARY OF CONDITIONS AND RECOMMENDATIONS	
Conditions	The qualification has been set four conditions against the following standards: <ul style="list-style-type: none"> S2.5 S3.4 S3.17 S3.19
Recommendations	The qualification has been set no recommendations.
Commentary against all of the standards reviewed are set out in section 4.4.	
The qualification will remain subject to the GOC’s quality assurance and enhancement methods (QAEM) on an ongoing basis.	

4.4 STANDARDS OVERVIEW	
The standards reviewed as part of the adaptation process for approved qualifications (as outlined in Form 2a or in the Adaptation Form*) are listed below along with the outcomes, statuses, actions, and any relevant deadlines. Actions may include the following:	
<ul style="list-style-type: none"> A condition is set when the information submitted did not provide the necessary evidence and assurance that a standard is met; further action is required. A recommendation 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. No further action is required – the information submitted provides the necessary assurance that a standard is met. 	

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*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
- Standard three - assessment of outcomes and curriculum design: S3.2, S3.8, S3.9, S3.10, S3.11, S3.12, S3.13, S3.20, S3.21
- Standard four - management, monitoring and review of approved qualifications: S4.6, S4.7, S4.8, S4.9, S4.10, S4.11, 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 optometry or dispensing optics](#) webpage.

Standard no.	S2.1
Standard description	Selection and admission criteria must be appropriate for entry to an approved qualification leading to registration as an optometrist or dispensing optician, including relevant health, character, and fitness to train checks. For overseas students, 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.
Status	MET – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • The provider's 'Academic Regulations'. • The provider's 'Admissions Policy and Applicant Complaints Procedure'. • The provider's 'MOptom Programme Specification'. • The provider's 'MOptom Course Handbook 2023'. <p>The information reviewed evidenced, amongst other elements, that the provider:</p> <ul style="list-style-type: none"> • Confirms that only UK based students are permitted entry onto the qualification and therefore has appropriate, clear and comprehensive entry and IELTS requirements*. • Has an appropriate admissions process. <p>This standard will be monitored as part of ongoing quality assurance activity.</p> <p>*Presently the provider has a generic, university wide IELTS entry level of 6 or 6.5 for postgraduate students which does not currently apply to this</p>

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	qualification because it only accepts UK based students. The provider must inform the GOC Education team via the notification of reportable events and changes process should the qualification begin admitting overseas students.
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Standard no.	S2.5
Standard description	Recognition of prior learning must be supported by effective and robust policies and systems. These must ensure that students admitted at a point other than the start of a programme have the potential to meet the outcomes for award of the approved qualification. Prior learning must be recognised in accordance with guidance issued by the Quality Assurance Agency (QAA) and/or Office of Qualifications and Examinations Regulation (Ofqual)/Scottish Qualifications Authority (SQA)/Qualifications Wales/Department for the Economy in Northern Ireland and must not exempt students from summative assessments leading to the award of the approved qualification, unless achievement of prior learning can be evidenced as equivalent.
Status	NOT MET – a condition is set
Deadline	Thursday 11 April 2024
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • A completed 'Template 4 – assessment strategy'. • A completed 'Template 5 – module outcome map' • Narrative provided in support of a further information request. • Narrative provided in support of the formal response process. <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"> • How the University's APL policy is applied to the qualification. • The decision-making process for setting an entrance exam for external applicants. <p>Although a condition has been set, the panel and executive note that the provider has evidenced their RPL policy within the admissions criteria however further assurance is required from the provider to understand how this is applied to the qualification and how and why the decision around different entry requirements between internal and external candidates was made.</p> <p>Possible types of evidence that can be submitted (but not limited to) are evidence that shows:</p> <ul style="list-style-type: none"> • How the University's APL policy will be applied specifically to the qualification.

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	<ul style="list-style-type: none"> How the decision was made to set an entrance exam for external candidates, including how the preferential treatment between internal and external candidates has been reviewed.
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Standard no.	S3.1
Standard description	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 students' achievement of outcomes at the required level (Miller's Pyramid) and how this leads to an award of an approved qualification.
Status	MET – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> A completed 'Template 2 - criteria narrative'. A completed 'Template 4 – assessment strategy'. A completed 'Template 5 – module outcome map'. A completed 'Template 8 – mapping to indicative guidance'. The provider's 'Academic Regulations'. The provider's 'MOptom Programme Specification'. The provider's 'MOptom Course Handbook 2023'. <p>The information reviewed evidenced, amongst other elements:</p> <ul style="list-style-type: none"> How the assessments lead to the awarding of the approved qualification.

Standard no.	S3.3
Standard description	The approved qualification must provide experience of working with: patients (such as patients with disabilities, children, their carers, etc); inter-professional learning (IPL); and team work and preparation for entry into the workplace in a variety of settings (real and simulated) such as clinical practice, community, manufacturing, research, domiciliary and hospital settings (for example, Harden's ladder of integration ¹⁰). This experience must increase in volume and complexity as a student progresses through a programme.
Status	MET – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> A completed 'Template 2 - criteria narrative'. A completed 'Template 4 – assessment strategy'. A completed 'Template 5 – module outcome map'. Narrative provided in support of a further information request.

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	<p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification provides students with access to an appropriate range of patients. • The qualification integrates IPL appropriately.
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Standard no.	S3.4
Standard description	<p>Curriculum design, delivery and the assessment of outcomes must involve and be informed by feedback from a range of stakeholders such as patients, employers, students, placement providers, commissioners, members of the eye-care team and other healthcare professionals. Stakeholders involved in the teaching, supervision and/or assessment of students must be appropriately trained and supported, including in equality and diversity.</p>
Status	NOT MET – a condition is set
Deadline	Monday 15 July 2024
Rationale	<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"> • A completed ‘Template 2 - criteria narrative’. • Narrative provided in support of a further information request. • Narrative provided in support of the formal response process. <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"> • How stakeholders have been consulted on the qualification design and delivery. • How feedback from stakeholders has been used to develop the qualification design and delivery. <p>Although a condition has been set, the panel and executive acknowledge that the provider has made progress in meeting this standard and has ensured stakeholders involved in teaching and supervision of the qualification have been appropriately trained. However further assurance is required from the provider regarding how stakeholders will be involved with the design and delivery of the qualification and where their feedback has been reviewed and implemented.</p> <p>Possible types of evidence that can be submitted (but not limited to) are evidence that shows:</p> <ul style="list-style-type: none"> • How stakeholders will be involved with the design and delivery of the qualification. • Specific examples highlighting how and where stakeholder feedback has been reviewed and implemented into the design and delivery of the qualification.

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Standard no.	S3.5
Standard description	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.
Status	MET – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • A completed 'Template 4 – assessment strategy'. • A completed 'Template 5 – module outcome map'. • The provider's 'MOptom Programme Specification'. • The provider's 'MOptom Course Handbook 2023'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification includes a range of assessment methods. • Compensation is not allowed within the restrictions of this standard.

Standard no.	S3.6
Standard description	Assessment (including lowest pass) criteria, choice, and design of assessment items (diagnostic, formative and summative) leading to the award of an approved qualification must seek to ensure safe and effective practice and be appropriate for a qualification leading to registration as an optometrist or dispensing optician.
Status	MET – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • A completed 'Template 4 – assessment strategy'. • A completed 'Template 5 – module outcome map'. • The provider's 'Academic Regulations'. • The provider's 'MOptom Programme Specification'. • The provider's 'MOptom Course Handbook 2023'. <p>The information reviewed evidenced, amongst other elements that:</p> <ul style="list-style-type: none"> • The types and range of assessment methods are appropriate to the approved qualification.

Standard no.	S3.7
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Standard description	Assessment (including lowest pass) criteria must be explicit and set at the right standard, using an appropriate and tested standard-setting process. This includes assessments which might occur during learning and experience in practice, in the workplace or during inter-professional learning.
Status	MET – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • A completed 'Template 4 – assessment strategy'. • A completed 'Template 5 – module outcome map'. • Narrative provided in support of a further information request. • Narrative provided in support of the formal response process. • The provider's 'Academic Quality Assurance Manual'. • The provider's 'School of Medicine Quality Management Framework 2022-23'. <p>The information reviewed evidenced, amongst other elements that:</p> <ul style="list-style-type: none"> • The types and range of assessment methods are appropriate to the approved qualification. • The provider has adequately explained the training of teachers and supervisors.

Standard no.	S3.14
Standard description	There must be a range of teaching and learning methods to deliver the outcomes that integrates scientific, professional, and clinical theories and practices in a variety of settings and uses a range of procedures, drawing upon the strengths and opportunities of context in which the qualification is offered.
Status	MET – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • A completed 'Template 4 – assessment strategy'. • A completed 'Template 5 – module outcome map'. • A completed 'Template 8 – outcome mapping to indicative guidance'. • Narrative provided in support of a further information request. • Narrative provided in support of the formal response process. • The provider's 'MOptom Course Handbook 2023'. • The provider's 'MOptom Programme Specification'.

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	<p>The information reviewed evidenced, amongst other elements that:</p> <ul style="list-style-type: none"> • The qualification includes a range of teaching, learning and assessment methods.
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Standard no.	S3.15
Standard description	In meeting the outcomes, the approved qualification must integrate at least 1600 hours/48 weeks of patient-facing learning and experience in practice. Learning and experience in practice must take place in one or more periods of time and one or more settings of practice.
Status	MET – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • A completed 'Template 4 – assessment strategy'. • A completed 'Template 5 – module outcome map'. • The provider's 'MOptom Course Handbook 2023'. <p>The information reviewed evidenced, amongst other elements that:</p> <ul style="list-style-type: none"> • The qualification includes the required minimum 1600 hours/48 weeks of patient-facing learning and experience in practice.

Standard no.	S3.16
Standard description	Outcomes delivered and assessed during learning and experience in practice must be clearly identified within the assessment strategy and fully integrated within the programme leading to the award of an approved qualification.
Status	MET – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • A completed 'Template 5 – module outcome map'. • A completed 'Template 4 – assessment strategy'. • A completed 'Template 5 – module outcome map'. • A completed 'Template 8 – outcome mapping to indicative guidance' • Narrative provided in support of a further information request. • Narrative provided in support of the formal response process. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has clearly demonstrated how the learning outcomes will be assessed.

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	<ul style="list-style-type: none"> The types and range of assessment methods are appropriate to the approved qualification.
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Standard no.	S3.17
Standard description	The selection of outcomes to be taught and assessed during learning and experience in practice and the choice and design of assessment items must be informed by feedback from stakeholders, such as patients, students, employers, placement providers, members of the eye-care team and other healthcare professionals.
Status	NOT MET – a condition is set
Deadline	Monday 15 July 2024
Rationale	<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"> A completed 'Template 2 - criteria narrative'. A completed 'Template 4 – assessment strategy'. A completed 'Template 5 – module outcome map'. Narrative provided in support of a further information request. Narrative provided in support of the formal response process. <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"> How stakeholders (both internal and external) have been consulted on the assessment design. <p>Although a condition has been set, the panel and executive acknowledge that the provider has made progress in meeting this standard and note that the provider has a variety of stakeholders able to provide feedback on the design and delivery of the qualification. However further assurance from the provider is required to understand how stakeholder feedback has been used and/or sets out how it will be used in the future to develop the design and delivery of the qualification and the formal process for doing so.</p> <p>Possible types of evidence that can be submitted (but not limited to) are evidence that shows:</p> <ul style="list-style-type: none"> How stakeholders have been or will be consulted on the qualification design and delivery. How feedback from stakeholders will be used to develop the qualification design and delivery. The formal process for collecting and analysing stakeholder feedback.

Standard no.	S3.19
Standard description	The collection and analysis of equality and diversity data must inform curriculum design, delivery, and assessment of the approved qualification. This analysis must include students' progression by protected characteristic. In addition, the principles of equality, diversity and inclusion

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	must be embedded in curriculum design and assessment and used to enhance students' experience of studying on a programme leading to an approved qualification.
Status	NOT MET – a condition is set
Deadline	Monday 15 July 2024
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • Narrative provided in support of a further information request. • Narrative provided in support of the formal response process. <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"> • How protected characteristics are monitored and reviewed to determine whether the protected groups are progressing evenly through the qualification. • The process for the formal review of the collected data and identification of remedial actions. • EDI data has not been considered in the development, design, or construction of the qualification. <p>Possible types of evidence that can be submitted (but not limited to) are evidence that shows:</p> <ul style="list-style-type: none"> • How you collect and consider the data on student progression and performance by protected characteristics e.g., through a formalised process. • Examples showing how qualification level EDI data has been considered in the development, design or construction of the qualification. • The processes in place to support the consideration of qualification level EDI data in the development, design or construction of the qualification.

Standard no.	S4.1
Standard description	The provider of the approved qualification must be legally incorporated (i.e., not be an unincorporated association) and provide assurance it has the authority and capability to award the approved qualification.
Status	Met – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • The provider's 'Academic Regulations'. • The provider's 'Academic Quality Assurance Manual'.

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	<p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has clear awarding powers and is a legally incorporated higher education institution.
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Standard no.	S4.2
Standard description	The provider of the approved qualification must be able to accurately describe its corporate form, its governance, and lines of accountability in relation to its award of the approved qualification.
Status	Met – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • The provider’s ‘Academic Regulations’. • The provider’s ‘Academic Quality Assurance Manual’. • The provider’s ‘Academic Governance Manual 2022-23’. • The provider’s ‘Approved Committee Structure 2022-23’. • The providers ‘School of Medicine Quality Management Framework 2022-23’. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has clearly defined committees and roles, including governance expectations. • The provider has clear role appointments and powers of delegation.

Standard no.	S4.4
Standard description	The provider of the approved qualification may be owned by a consortium of organisations or some other combination of separately constituted bodies. Howsoever constituted, the relationship between the constituent organisations and the ownership of the provider responsible for the award of the approved qualification must be clear.
Status	Met – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed ‘Template 2 - criteria narrative’. • Narrative provided in support of the formal response process. • The signed and finalised partnership agreement between the provider and the College of Optometrists. <p>The information reviewed evidenced, amongst other elements, that:</p>

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	<ul style="list-style-type: none"> • There is a robust framework supporting the relationship between the provider and the College of Optometrists. • There are distinguished roles and responsibilities for the provider and the College of Optometrists.
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Standard no.	S4.5
Standard description	The provider of the approved qualification must have a named person who will be the primary point of contact for the GOC.
Status	MET – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • A completed 'Form 2a - notification of proposed adaptation of programmes'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has an appropriate named person for the qualification.

Standard no.	S4.13
Standard description	There must be an effective mechanism to identify risks to the quality of the delivery and assessment of the approved qualification, ensure appropriate management of commercial conflicts of interest and to identify areas requiring development.
Status	Met – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • The provider's 'Risk Management Framework'. • The provider's 'Risk Management Policy'. • Narrative provided in support of a further information request. • Narrative provided in support of the formal response process. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has various robust mechanisms and processes for identifying and managing risks. • The provider has robust mechanisms and processes for identifying and managing conflicts of interests.

Standard no.	S5.1
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Standard description	There must be robust and transparent mechanisms for identifying, securing, and maintaining a sufficient and appropriate level of ongoing resource 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.
Status	Met – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • The provider's 'Staff CVs'. • The provider's 'Risk Management Framework'. • The provider's 'Risk Management Policy'. • Narrative provided in support of a further information request. • Narrative provided in support of the formal response process. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has adequately considered how the sourcing of supervisors and assessors will be conducted. • There are distinguished roles and responsibilities for the provider and the College of Optometrists.

Standard no.	S5.2
Standard description	<p>There must be sufficient and appropriately qualified and experienced staff to teach and assess the outcomes. These must include:</p> <ul style="list-style-type: none"> • an appropriately qualified and experienced programme leader, supported to succeed in their role; • sufficient staff responsible for the delivery and assessment of the outcomes, including GOC registrants and other suitably qualified healthcare professionals; • sufficient supervision of students' learning in practice by GOC registrants who are appropriately trained and supported in their role; and • an appropriate student:staff ratio (SSR), which must be benchmarked to comparable provision.
Status	Met – no further action is required at this stage
Deadline	Not applicable.
Rationale	<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"> • A completed 'Template 2 - criteria narrative'. • The provider's 'Staff CVs'. • Narrative provided in support of a further information request.

ADP-RPT Report of the outcomes of the adaptation to the education & training requirements			
Version	v1.0	Date version approved	29 January 2024
Version effective from	January 2024	Next review date	January 2025

	<ul style="list-style-type: none"> • Narrative provided in support of the formal response process. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification has clear and adequate leadership. • There is currently an appropriate range and number of staff to deliver the qualification. • There is an appropriately benchmarked SSR.
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ADP-RPT			
Report of the outcomes of the adaptation to the education & training requirements			
Version	v1.0	Date version approved	29 January 2024
Version effective from	January 2024	Next review date	January 2025