



Anglia Ruskin University
GOC FULL APPROVAL QUALITY ASSURANCE VISIT
Foundation Degree (FdSc) in Ophthalmic Dispensing
3 July and 4 July 2024

Report confirmed by GOC	13 November 2024
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PART 1 – VISIT DETAILS

1.2 Programme details	
Programme title	Foundation Degree (FdSc) in Ophthalmic Dispensing
Programme description	<ul style="list-style-type: none"> • Three years, full time. • Blended learning, including two residentials per trimester. • Integrated theoretical and practical learning, including online teaching, work-based learning, practical project work, coursework, assignments, and portfolio development. • Assessments include written examinations, in-class tests, coursework, and Objectively Structured Clinical Examinations (OSCE).
Current approval status	Fully approved (FA)
Approved student numbers	60 students per cohort.

1.3 GOC Education Visitor Panel (EVP)	
Chair	<ul style="list-style-type: none"> • Carl Stychin, Lay chair.
Visitors	<ul style="list-style-type: none"> • Maryna Hura, Dispensing Optician. • Mark Chatham, Dispensing Optician and Contact Lens Optician. • Brendan Barrett, Optometrist. • Andy Husband, Lay member.
GOC representative	<ul style="list-style-type: none"> • Shaun de Riggs, Education Operations Officer.

1.4 Purpose of the visit	
Visit type	FULL APPROVAL QUALITY ASSURANCE VISIT
<p>The purpose of this full approval visit was to:</p> <ol style="list-style-type: none"> 1. Review Anglia Ruskin University's Foundation Degree (FdSc) Ophthalmic Dispensing programme to ensure it meets the requirements as listed in the GOC's <i>Dispensing Handbook 2011</i> and the GOC Education A&QA - <i>Supplementary Documents - List of Requirements</i> (Ophthalmic Dispensing Requirements). <p>This visit took place in-person.</p>	

1.5 Programme history		
Date	Event type	Overview
18 and 19 April 2019	Visit	The EVP recommended that full approval of ARU's FdSc Ophthalmic Dispensing programme should continue. The EVP did not recommend any conditions (no GOC requirements were deemed as unmet), providing three recommendations, and offered three commendations.
30 April 2024	Visit	Sub Panel OSCE observation visit for the programme.
June 2024	Administration	Sub Panel review (remote) of students' portfolios for the programme.

PART 2 – VISIT SUMMARY

2.1 Visit outcomes	
The EVP set four new conditions, with four requirements deemed unmet, and offered two recommendations and one commendation.	
Summary of recommendations to the GOC	
Previous conditions	No previous conditions.
New conditions	<p>The EVP recommends that:</p> <ul style="list-style-type: none"> • Four requirements are deemed UNMET • Four conditions are set. <p>Details regarding the conditions are set out in Part 3.</p>
New recommendations	<p>The EVP recommends that:</p> <ul style="list-style-type: none"> • Two recommendations are offered. <p>Details regarding the recommendations are set out in Part 3.</p>
Commendation	<p>The EVP recommends one commendation.</p> <p>Details regarding the commendation is set out in Part 3.</p>
Actual student numbers	<p>2023/24</p> <p>Year 1: 0</p> <p>Year 2: 17</p> <p>Year 3: 24</p> <p>Year 4: N/A</p>
Approval/next visit	By July 2029
Factors to consider when scheduling next visit e.g. when students are in, hospital, audit etc.	<ul style="list-style-type: none"> • ARU's Foundation Degree (FdSc) in Ophthalmic Dispensing programme is not accepting new students as the provider began delivering a new BSc Ophthalmic Dispensing course in 2023/2024. The BSc Ophthalmic Dispensing course is a qualification adapted to the GOC's new education and training requirements (ETR) and was not reviewed as part of this visit. • The next visit should be scheduled to factor in the implementation against the ETR.

2.2 No conditions were set at the last visit on 18 and 19 April 2019.

2.3 Previous recommendations

The recommendations listed below are extracted from the report of the 18 and 19 April 2019 quality assurance visit.

Description	Comments
1. Consideration is given to the appointment of additional technical support.	The EVP did not identify any issues of concern regarding this recommendation at this visit.
2. All future annual monitoring submissions to the General Optical Council must provide component marks for each element of the assessment in each module that together make up the final module mark (external examiner input required).	The EVP did not identify any issues of concern regarding this recommendation at this visit.
3. The University continues to monitor and develop its policies and processes for effective communications with practice supervisors.	The EVP did not identify any issues of concern regarding this recommendation at this visit.

PART 3 – CONDITIONS, RECOMMENDATIONS & COMMENDATIONS

Conditions are applied to training and assessment providers if there is evidence that the GOC requirements are not met.

Recommendations indicate enhancements that can be made to a programme, these may not be directly linked to compliance with GOC requirements.

3.1 Conditions set at this visit	
The unmet requirements for this visit are set out below along with the conditions that are required to meet the requirements.	
D3.21	Effective quality assurance measures must be in place.
Condition 1	ARU is required to devise and implement a plan to ensure that potentially unsafe (“red flag”) situations are identified in the quality assurance of portfolio marking and moderation.
Date due	1 October 2024
Rationale	<p>During the review of students’ portfolios, the EVP noted that there were cases which raised potentially unsafe situations and that these were not identified by ARU’s marking and moderation process.</p> <p>At the closing meeting of the visit, the EVP advised that ARU is required to devise and implement a plan to ensure that effective quality assurance measures are in place for portfolio marking and moderation.</p>

D3.21	Effective quality assurance measures must be in place.
Condition 2	ARU is required to strengthen the rigour of the practice audit process by ensuring that the auditor selects from the totality of case records available.
Date due	1 October 2024
Rationale	<p>During the visit, the EVP were informed that as part of the practice audit process, students select eight of their case records and thereafter, the auditor reviews three of the eight case records provided. Therefore, the EVP deemed that this selection process lacks robustness and is not representative of the entire evidence base.</p> <p>At the closing meeting of the visit, the EVP advised ARU that this condition is required to ensure that effective quality assurance measures are in place to strengthen the rigour of the practice audit process.</p>

D6.2	On successful completion of the route to registration, the student must have demonstrated competence in all elements of the competency framework.
D6.9	Understanding of competencies must be evidenced through practical demonstration or by a written or oral assessment. ‘Ability to do’ competencies must be tested through practical assessment.
Condition 3	ARU is required to develop and implement a plan which strengthens the inhouse teaching and assessment of students with respect to restricted categories of patients.
Date due	1 October 2024
Rationale	During the visit, the EVP deemed that evidence of teaching and the assessment of core competencies for restricted categories of patients was indirect (e.g. low vision aids and paediatric dispensing) and therefore could not be sufficiently verified by the assessors.

	At the closing meeting of the visit, the EVP advised ARU that this condition is to ensure that students demonstrate competence in all elements of the competency framework and that the understanding of competencies must be evidenced through direct observation via practical demonstration, or by a written or oral assessment.
D6.4	The route to registration must demonstrate precisely where each element of competence is taught.
Condition 4	ARU is required to produce a mapping document detailing where each element of competence is taught and assessed.
Date due	1 October 2024
Rationale	<p>During the visit, the EVP noted that although ARU submitted a tracking document that set out where each competency is assessed, no such document was provided that detailed where the teaching and assessment of each competency takes place.</p> <p>At the closing visit, the EVP advised ARU that this condition is to ensure that the route to registration demonstrates precisely where each element of competence is taught and assessed.</p>

3.2 Recommendations offered at this visit	
The EVP offers the following recommendations to the provider.	
D4.1	Providers must indicate how the chosen methods of assessment are appropriate.
Recommendation 1	ARU articulates an assessment strategy for the Foundation Degree (FdSc) in Ophthalmic Dispensing programme as a whole.
Rationale	<p>During the visit, the EVP noted that there was a lack of clarity for the rationale of the various methods of assessment chosen for the programme.</p> <p>At the closing visit, the EVP advised ARU that this recommendation was proposed to facilitate the provider in justifying</p>

	how the chosen methods of assessment within the programme are appropriate.
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D5.2	The provider must have effective feedback procedures.
Recommendation 2	ARU develops a mechanism to formalise the process for receiving feedback from supervisors and employers.
Rationale	<p>During the visit, the EVP deemed that there was a lack of clear processes for stakeholders to provide feedback to the programme team.</p> <p>At the closing visit, the EVP advised ARU that this recommendation was proposed to facilitate the provider in ensuring that effective feedback procedures are developed to formalise the process of receiving feedback from supervisors and employers.</p>

3.3 Commendations made at this visit	
The EVP wishes to commend the following areas:	
<ul style="list-style-type: none"> • The enthusiasm and collegiality of the programme team. 	