

<b>Cardiff University</b>
<b>GOC Full Approval Quality Assurance Visit</b>
<b>PgCert Therapeutic Prescribing</b>
<b>19 and 20 April 2023</b>

<b>Report confirmed by GOC</b>	Click or tap to enter a date.
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## PART 1 – VISIT DETAILS

1.2 Programme details	
Programme title	PgCert Therapeutic Prescribing
Programme description	The programme consists of three modules held over 1 calendar year.
Current approval status	Fully approved (FA)
Approved student numbers	This programme has a cohort cap of 72 per annum, confirmed by the EVP during the visit.

1.3 GOC Education Visitor Panel (EVP)	
Chair	Jane Andrews
Visitors	Kiki Soteri – Optometrist / Independent Prescribing member Pam McClean – Optometrist / Independent Prescribing member Will Naylor – Lay member
GOC representative	Lamine Kherroubi – Education Officer
Observers	Shaun de Riggs - Education Officer

1.4 Purpose of the visit	
Visit type	FULL APPROVAL QUALITY ASSURANCE VISIT
Visit format	VIRTUAL
<p>The purpose of this full approval quality assurance visit was to:</p> <ol style="list-style-type: none"> <li>1. review the Cardiff University's PG Cert in Therapeutic Prescribing programme (the programme) to ensure it meets the requirements as listed in the <i>GOC's Independent Prescribing Handbook 2008</i> (Handbook) and the <i>GOC Education A&amp;QA-Supplementary Documents – List of Requirements</i> (list of requirements).</li> <li>2. Consider whether the programme sufficiently meets the GOC's requirements for it to continue to be granted full approval.</li> </ol> <p>This visit took place remotely.</p>	

<b>1.5 Programme history</b>		
<b>Date</b>	<b>Event type</b>	<b>Overview</b>
February 2018	Visit	A full quality assurance visit took place in February 2018 to review the programme and assess whether the programme sufficiently meets the GOC's standards to allow a first cohort of students to graduate from the programme. Full approval was granted.
11 March 2019	Change	Cardiff University requested an increase in student numbers from the GOC, however this request was later withdrawn by the provider as the anticipated increase in student numbers did not materialise at that time.
April 2020	Change	Due to the COVID-19 pandemic, Cardiff University requested a change to their delivery including introducing computer-based exams off campus and online teaching. The change was approved by the GOC Education department.
14 August 2020	Change	Due to the ongoing COVID-19 pandemic, Cardiff University requested an extension to their existing contingencies previously approved by the GOC Education department in April 2020. The GOC Education department approved this extension.
14 August 2020	Change	Cardiff University requested an increase in student numbers from the GOC from 48 to 72 per year. The GOC Education department approved this increase.

## PART 2 – VISIT SUMMARY

<b>2.1 Visit outcomes</b>	
<p>The panel was pleased to see the programme had a positive atmosphere as demonstrated by the programme team and supporting staff.</p> <p>The panel set <b>no</b> new conditions and made <b>one</b> recommendation to further develop the programme. <b>Two</b> commendations were offered.</p> <p>The panel was satisfied that the programme met the regulator’s standards and should continue to be fully approved, advising the next visit to take place within five years.</p>	
<b>Summary of recommendations to the GOC</b>	
<b>Previous conditions</b>	There were <b>no</b> previous conditions. Details regarding the previous conditions are set out in section <b>2.2</b> .
<b>New conditions</b>	<b>No</b> new conditions were set.
<b>New recommendations</b>	<b>Two</b> new recommendations were set. Details regarding the recommendations are set out in section <b>3.2</b> .
<b>Commendations</b>	<b>Two</b> commendations were offered. Details regarding the commendation are set out in section <b>3.3</b> .
<b>Actual student numbers</b>	<b>Year 1 – 74</b>
<b>Approval status</b>	The programme remains fully approved.
<b>Next visit</b>	The panel recommended that the qualification should be visited <b>within the next 5 years</b> .
<b>Factors to consider when scheduling next visit e.g., when students are in, hospital, audit etc.</b>	The PGCert will be subject to the GOC’s current quality assurance activities until the qualification has been taught out entirely.

<b>2.2 Previous conditions</b>
The conditions listed below are extracted from the report of 26 February 2018
There were no conditions set at the previous visit.

<b>2.3 Previous recommendations</b>
The recommendations listed below are extracted from the report of 26 February 2018
There were no recommendations offered at the previous visit.

<b>2.4 Non-applicable requirements</b>
<p>The panel recommends that some requirements be deemed fully or partially non-applicable to the current programme due to the structure and division of roles between Cardiff University and College of Optometrists (CoO) for example:</p> <ul style="list-style-type: none"> <li>• The University exclusively provides the theory aspect of the route to registration.</li> <li>• The CoO is responsible for the clinical placement and ensuring all the elements of portfolio are completed under supervision.</li> <li>• The administration of the Therapeutic Common Assessment Framework (TCAF) is the responsibility of the CoO.</li> </ul> <p>Additionally, the panel recommends that some requirements be deemed non-applicable to the programme as:</p>

<b>A1.3</b>	Provisional approval must be in place prior to advertising the qualification and recruiting the first cohort of students.
<b>A4.3</b>	Providers must take reasonable steps to support students with their GOC registration and assure the GOC of their due diligence in confirming that all of their students are registered.
<b>A5.1</b>	Student optometrists or dispensing opticians must always make sure a patient knows their student status.
<b>A5.2</b>	The award of qualifications using the protected title of optometrist and dispensing optician is limited to qualifications approved by the GOC as meeting the professional standards required.
<b>A5.3</b>	Students who gain sufficient academic credits to receive an award but do not meet the professional requirements must receive an alternative award to that approved by the GOC. The alternative award must not use the protected title of optometry/dispensing optician.
<b>IP3.2</b>	Students must receive comprehensive clinical practice.
<b>IP3.3</b>	It will normally be for the student to arrange the clinical practice placement and the appropriate mentorship during the placement, and to inform the College of Optometrists (the College) (and the provider, as appropriate) of the details.
<b>IP3.4</b>	The clinical practice placement must normally be undertaken in the UK.
<b>IP3.5</b>	The clinical practice placement should be spent in a hospital eye service or specialist general practice under the supervision of a designated ophthalmologist, and provide the experience stated in the patient experience requirements.
<b>IP3.6</b>	Where there is an issue requiring resolution concerning the suitability of a practice placement, the issue and supporting evidence must be referred to the GOC for arbitration.
<b>IP3.7</b>	The student must make suitable arrangements for their mentorship
<b>IP3.8</b>	The choice of mentor and the environment in which the mentorship will be delivered must be recorded by the College (and the provider, as appropriate).
<b>IP3.9</b>	The student must register with the College in advance of commencing their practice placement, providing details of the mentorship.
<b>IP3.10</b>	The designated mentor must provide supervision, support and appropriate clinical exposure so that the student can develop links between theory and practice.
<b>IP3.11</b>	The provider must ensure that the mentor is sufficiently familiar with the requirements of the training programme and the need to achieve the stated learning outcomes and competencies.
<b>IP3.12</b>	The PBL must ensure that the student is competent in the assessment, diagnosis and management of the ophthalmic conditions for which the optometrist intends to prescribe.
<b>IP3.13</b>	The PBL must ensure that the student is able to recognise those sight threatening conditions that should be referred.
<b>IP3.14</b>	The PBL must ensure that the student is able to consult effectively with patients.
<b>IP3.15</b>	The PBL must ensure that the student is able to monitor the response to treatment to review both the working and differential diagnosis, and to modify treatment or refer/consult/ seek guidance as appropriate.
<b>IP3.16</b>	The PBL must ensure that the student makes clinical decisions based on and with reference to the needs of the patient.
<b>IP3.17</b>	The PBL must ensure that the student critically analyses and evaluates his or her ongoing performance in relation to prescribing practice.
<b>IP3.19</b>	Clinical training must be structured to ensure that each student is exposed to sufficient numbers of patients presenting with the conditions that he or she will manage therapeutically. In addition, the student must be exposed to a range of ophthalmic conditions so as to develop differential diagnostic skills.

<b>IP3.20</b>	Each student must maintain a log book of practice evidence to verify that learning outcomes and core competencies have been achieved.
<b>IP3.21</b>	The log book must contain details of all patients seen, signed off by the mentor, and an indication of the actual involvement of the student in each patient episode.
<b>IP3.22</b>	Full information regarding each patient's clinical presentation, management and follow-up must be provided.
<b>IP3.23</b>	A reading log of the literature that has been used by the student to inform his or her understanding of prescribing practice must be provided.
<b>IP3.24</b>	The log book must evidence that the student has critically reflected on his or her own performance and show evidence of personal and professional development.
<b>IP3.25</b>	A summary sheet showing where in the log book the evidence for the achievement of learning outcomes can be found must be provided.
<b>IP3.26</b>	The student's involvement in the patient care episodes described in the log book must be signed off by the supervising medical practitioner.
<b>IP3.27</b>	The log book must be submitted to the examiners prior to the final assessment.
<b>IP6.1</b>	Optometrists must successfully complete the Common Final Assessment of Competence.
<b>IP7.3</b>	The choice of mentor and the environment in which the mentorship will be delivered must be recorded by the College (and the provider, as appropriate)
<b>IP7.6</b>	In order to maintain currency of knowledge, no more than two years may elapse between the student's completion of the theoretical element of the programme and the commencement of their clinical placement.
<b>IP7.7</b>	No more than two years may elapse between the student's completion of the clinical placement and their taking the College's Therapeutic Final Common Assessment [TCFA] (or suitable and approved alternative).

## PART 3 – CONDITIONS, RECOMMENDATIONS & COMMENDATIONS

<b>Conditions</b> are applied to training and assessment providers if there is evidence that the GOC requirements are not met.
<b>Recommendations</b> indicate enhancements that can be made to a programme, these may not be directly linked to compliance with GOC requirements.
<b>Commendations</b> identify areas of good practice where the programme exceeds GOC requirements for approval.

<b>3.1 Conditions set at this visit</b>
The unmet requirements for this visit are set out below along with the conditions that are required to meet the requirements.
No conditions were set at this visit.

<b>3.2 Recommendations offered at this visit</b>	
The EVP offers the following recommendations to the provider.	
<b>IP1.10</b>	Learning strategies and assessment methods must be appropriate for the material being taught and the learning outcome that is being tested.
<b>Recommendation 1</b>	The Panel recommends that the provider demonstrates their vigilance toward the possibility of Artificial Intelligence (AI) adversely impacting exam results.
<b>Rationale</b>	The Panel noted that 65% of the end of module assessment results came from invigilated online examinations which although time boxed, were not tightly timed. The panel noted that the checks that are carried out on the results (EEs, Exam Board etc) do not focus on addressing the risks of student cheating. However, since 35% of the results are drawn from the case reports, there are clearly options for additional checks to identify cheating – whether from the way the exams are held, to comparative checks of the results between the two forms of assessment. Due to this method’s vulnerability to AI, the panel recommends that the provider introduces and evidences such checks going forward.

<b>3.3 Commendations made at this visit</b>
The panel wishes to commend the following areas: <ul style="list-style-type: none"> <li>the positive teaching and learning atmospheres provided to students.</li> <li>the provider’s continued support in ensuring that face-to-face days are implemented as part of the programme.</li> </ul>