

University of Central Lancashire (UCLan)
GOC PROVISIONAL APPROVAL QUALITY ASSURANCE VISIT
MSci Optometry
6 – 7 July 2021

Report confirmed by GOC	20 September 2021
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TABLE OF CONTENTS

PART 1 – VISIT DETAILS	3
1.2 Programme details	3
1.3 GOC Education Visitor Panel (EVP)	3
1.4 Purpose of the visit	4
1.5 Programme history	4
PART 2 – VISIT SUMMARY	5
2.1 Visit outcomes	5
2.2 Previous conditions	6
2.3 Previous recommendations.....	8
2.4 Non-applicable requirements	8
2.5 Navigating this report	9
PART 3 – CONDITIONS, RECOMMENDATIONS & COMMENDATIONS.....	10
3.1 Conditions set at this visit.....	10
3.2 Recommendations offered at this visit	10
3.3 Commendations made at this visit	12

PART 1 – VISIT DETAILS

1.2 Programme details	
Programme title	MSci Optometry
Programme description	A two-year blended-learning MSci Optometry programme, forming part of a route to registration for optometrists.
Current approval status	Provisionally approved (PA)
Approved student numbers	Approved for 20 students

1.3 GOC Education Visitor Panel (EVP)	
Chair	Vincent McKay (Lay Member)
Visitors	Sarah Fishburn (Lay Member) Maryna Hura (Dispensing Optician) Pam McClean (Optometrist) Brian McCotter (Optometrist) Graeme Stevenson (Dispensing Optician)
GOC representative	Richard Calver (Approval and Quality Assurance Officer)

1.4 Purpose of the visit	
Visit type	PROVISIONAL APPROVAL QUALITY ASSURANCE VISIT
<p>The purpose of this provisional approval quality assurance visit was to:</p> <ol style="list-style-type: none"> 1. review UCLan's MSci Optometry programme to ensure it meets the requirements as listed in the GOC's <i>Temporary Accreditation and Quality Assurance Handbook: Routes to GOC Registration for Optometrists (2020)</i> (handbook) and the <i>GOC Education A&QA-Supplementary Documents-List of Requirements</i> (requirements); and 2. make a recommendation to the GOC on its approval status. <p>Owing to the ongoing COVID-19 emergency, this visit took place remotely.</p>	

1.5 Programme history		
Set out a chronology of the key events affecting the programme in the last FIVE years, including any visits and key events.		
Date	Event type	Overview
25/03/2019	Visit	A GOC approval visit recommends the MSci Optometry award be granted provisional approval, alongside the BSc (Hons) Ophthalmic Dispensing award.
10/07/2019	Event	Council awards provisional approval of this programme.
04/09/2019	Event	An EVP sub-panel inspected the pre-clinical facilities and noted that they were incomplete, failing to meet requirement OP2.1. UCLan later submitted photographic evidence that further work had completed the facilities, and the EVP deemed this requirement 'met'.
09/2019	Event	UCLan commences delivery of this programme alongside the BSc (Hons) Ophthalmic Dispensing award.
29/01/2020	Change	UCLan's internal revalidation divided the BSc (Hons) and MSci awards into two distinct programmes from September 2020. There are no changes to the syllabus and assessments of either award.
05/05/2020	Visit	A GOC provisional approval quality assurance visit recommends that provisional approval should continue, setting seven actions to meet unmet requirements.
09/2020	Event	UCLan admits the second cohort of students to the programme.

PART 2 – VISIT SUMMARY

2.1 Visit outcomes	
<p>Following consideration of documentation submitted prior to this visit, and discussions held during the visit with staff, students, external examiners and practice mentors, the EVP recommends that:</p> <ol style="list-style-type: none"> 1. the MSci Optometry programme meets all but one of the GOC requirements for a programme delivering training as part of a route to registration for optometrists; and 2. the programme’s provisional approval should continue; and 3. one condition is set in relation to one unmet requirement. <p>The Panel makes three recommendations to enhance the delivery of the programme, and offers one commendation.</p> <p>The EVP considers that it is currently too early to recommend full approval for this programme as students have not yet submitted assessments for the Evidence Based Practice module and, consequently, not all modules have been delivered to completion. The EVP would like to inspect a sufficient number of Evidence Based Practice results in January 2022 to gain assurance that all modules have been delivered at least once before an approval recommendation is made. This visit can also be used to meet the clinic manager and, if physical visits are possible, to see the clinics in operation.</p>	
Summary of recommendations to the GOC	
Previous conditions – met/unmet	<p>Five previous conditions were MET before the visit, and were not considered at this visit.</p> <p>One previous condition was deemed MET at this visit.</p> <p>One previous condition was deemed UNMET at this visit, and is superseded by a new condition.</p>
New conditions	<p>The EVP recommends that:</p> <ul style="list-style-type: none"> • one requirement is UNMET • one new condition is set, superseding a previous unmet requirement <p>Details regarding the conditions are set out in Part 3.</p>
New recommendations	<p>The EVP recommends that three recommendations are offered.</p> <p>Details regarding the recommendations are set out in Part 3.</p>
Commendations	<p>The EVP offers one commendation.</p>

	Details regarding the commendation are set out in Part 3 .
Current student numbers	Year 1: 20 students Year 2: 15 students
Approval/next visit	January 2022
Factors to consider when scheduling next visit e.g. when students are in hospital, audit etc.	The visit should ideally coincide with students' residential blocks and include an observation of the Eye Health Clinic in operation.

2.2 Previous conditions		
The conditions listed below are extracted from the report of Click or tap to enter a date.		
Requirement number	Condition number and description	Status
Action 1 (Reqs. A5.1 OP3.1, 3.2, 3.5, 3.6, 3.7, 3.8, 3.9, 5.1, 5.2)	<p>The programme team should produce a clear framework for workplace/experiential/practical learning in the interests of patient safety and to ensure consistency of students' learning experience in their workplaces. This framework should include:</p> <ol style="list-style-type: none"> 1. defining the role of the mentor and the purpose of students' workplace learning; 2. defining the students' rights, responsibilities and the activities they are expected to engage with in their workplaces, ensuring that they comply with GOC standards, recognise the limits of their knowledge and skills, and explicitly communicate the implications of their status to patients; 3. explaining 1 and 2 above clearly to mentors and students; 4. providing updated training for mentors and clinic supervisors to reflect the restricted conditions likely to apply after the current Covid-19 emergency; 5. establishing and maintaining formal training and communication with mentors, including soliciting feedback, which should feed into the 	Based on consideration of evidence submitted by programme team, this condition was deemed MET by the executive prior to this visit taking place, and was not reviewed by the EVP at this visit.

	<p>programme's QA and governance system.</p> <p>The framework must include the key dates by which time the relevant actions will have been carried out.</p> <p>The framework must be submitted to the GOC by Monday 20 July 2020 and items 1-4 must be implemented in time for the 2020/21 academic year.</p> <p>The programme team must provide the GOC with evidence that these items have been implemented by Monday 7 September 2020.</p> <p>The programme team must also provide the GOC with an update on the implementation of all items of the framework by Monday 26 October 2020.</p>	
Action 2 (Req. OP5.11)	The programme team must confirm the data sharing agreement with the College of Optometrists.	Based on consideration of evidence submitted by programme team, this condition was deemed MET by the executive prior to this visit taking place, and was not reviewed by the EVP at this visit.
Action 3 (Req. OP2.2)	Confirm that a clinic manager is in post.	Based on consideration of evidence submitted by programme team, this condition was deemed UNMET by the EVP at this visit (see Section 3.1).
Action 4 (Req. OP2.9)	Confirm that a GOC-registered replacement member of staff is in post.	Based on consideration of evidence submitted by programme team, this condition was deemed MET by the executive prior to this visit taking place, and was not reviewed by the EVP at this visit.
Action 5 (Req. OP2.1, 2.12, 6.1, 6.2)	The programme team must submit to the GOC a report on the current status of the Eye Health Clinic and patient base, with contingency plans to provide students with adequate clinical	Based on consideration of evidence submitted by programme team, this condition was deemed MET by the executive prior to this visit

	experience if the clinic and patient base remain unsuitable at the beginning of the 2020/21 academic year.	taking place, and was not reviewed by the EVP at this visit.
Action 6 (Req. OP1.6)	The programme team should identify where opportunities for multi-disciplinary learning will be accessed by the next cohort of students, and offer such opportunities in timetabled residential blocks during the 2020/21 academic year.	Based on consideration of evidence submitted by programme team, this condition was deemed MET by the EVP at this visit.
Action 7 (Req. D3.20)	The programme team must submit to the GOC a plan to improve communications with mentors, explaining how to improve mentors' understanding of their own duties and their students' progress. This must be implemented in time for the 2020/21 academic year.	Based on consideration of evidence submitted by programme team, this condition was deemed MET by the executive prior to this visit taking place, and was not reviewed by the EVP at this visit.

2.3 Previous recommendations

The recommendations listed below are extracted from the report of Click or tap to enter a date.

Description	Comments
None set	Not applicable

2.4 Non-applicable requirements

The EVP recommends that some requirements be deemed non-applicable to the programme at this stage due to its structure and the differing, but overlapping, roles and responsibilities of UCLan and the College of Optometrists, for example:

- UCLan only provides the taught aspect of the route to registration.
- It is the responsibility of the College of Optometrists to oversee the period of supervised practice and ensure that all aspects of this period are completed under supervision.
- It is the responsibility of the College of Optometrists to assess students' competence against the GOC's Stage 2 Competencies and inform the GOC when competence has been achieved.
- It is the responsibility of the College of Optometrists to confirm that students achieve the minimum patient experience required by the GOC.

OP6.14	Upon completion of the pre-registration placement, the provider must inform the GOC that the student has achieved professional competence at Stage 2 so as to allow them to apply for entry to the GOC Register of Optometrists.
OP6.15	Students must be assessed as competent against each of the Stage 2 GOC Core Competencies.
OP6.16	Students must acquire the minimum amount of patient experience within each patient category (attached in Appendix F).
OP6.17	Students must hold certified portfolios containing a record of both their patient experience and achievement of all core competency elements.
OP6.18	The portfolio must include evidence of how and when each individual element of competence was achieved by the individual student.

OP6.19	The portfolio must contain a case record for each individual patient episode contributing to the minimum requirements.
OP6.20	The portfolio must include evidence of the development of the student's professional judgement through critical thinking and reflection.

2.5 Navigating this report

For further information on the issues considered, and the recommendations offered, during the visit see the following sections of the report:

Visit issue	Section of report
Review of the programme to ensure it meets the requirements as listed in the handbook and the list of requirements.	Whole report
Review of the programme against the requirements to establish if these have been sufficiently met to enable a recommendation to be made to the GOC Council regarding the continuation of the programme's provisional approval.	Whole report

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.

Requirement ref. OP2.2	The programme team must consist of a sufficient number and an appropriate range of staff with the necessary skills, knowledge and experience to deliver the programme effectively and support the student capacity.
Condition 1	The programme team must confirm that a clinic manager is in place
Date due	30 September 2021.
Rationale	This requirement was deemed unmet at the previous visit in June 2020 because the provider had been unable to recruit a clinic manager for the Eye Health Clinic. The Panel understands that an offer has been made but that applicant has yet to take up the post. Therefore, this requirement remains unmet.

3.2 Recommendations offered at this visit

The EVP offers the following recommendations to the provider.

A1.2	The route to registration must be clearly communicated to prospective and current students.
Recommendation 1	All programme and marketing materials should be updated to ensure students (and prospective students) are aware that <i>all</i> elements of the MSci, <i>and</i> the College of Optometrists Scheme for Registration, must be passed for students to be eligible to register with the GOC.
Rationale	<p>The programme's final module (Evidence Based Practice) is completed in conjunction with the College of Optometrists' Scheme for Registration: students must pass this module and the Scheme for Registration to receive the MSci award and be eligible for registration with the GOC as optometrists. Students failing either Evidence Based Practice or the Scheme for Registration receive alternative awards which do not permit students to register as optometrists. It is therefore critical that students pass the final module if they intend to register as optometrists, and equally critical that they are aware of this.</p> <p>The EVP notes that the Evidence Based Practice module pack clearly states that students must pass this module. However, this statement is not apparent in other documents or online marketing materials and the EVP is concerned that some students may be unaware of this requirement. The EVP makes the above</p>

	<p>recommendation to encourage the programme team to inform students from an early stage that all elements of the programme must be passed for them to be eligible for registration.</p>
OP5.1	<p>The provider must have a clear framework for obtaining feedback on programme quality from a variety of sources including patients, students, staff, supervisors and employers.</p>
Recommendation 2	<p>The programme team should develop more formal procedures for obtaining feedback from all stakeholders and service-users, including mentors, clinic supervisors and patients.</p>
Rationale	<p>Various stakeholders, including practice mentors and clinic supervisors, spoke favourably of the programme team's willingness to receive comments on the programme. However, some stakeholders mentioned that feedback systems were informal and that they were unaware of any more formal processes for offering feedback. There was also no evidence that patients are consulted for their perceptions of students' professionalism and skills.</p> <p>The EVP notes mentors' and supervisors' high regard for the programme team, but feels that stakeholder views could be used more effectively if views were solicited more formally. The programme team may also wish to explore ways of seeking views from patients.</p>
OP4.4 & OP4.7	<p>Those responsible for the assessment and signing-off of core competencies must be suitably qualified and have the appropriate skills, experience and training required to undertake assessment (outlined in Appendix I).</p> <p>The provider must have an effective and accurate student information system to track and record the achievement of all required core competencies and patient episodes for each individual student.</p>
Recommendation 3	<p>Hospital supervisors should be given access to Meditrek, be trained in its use, and use it to directly record competencies completed in hospital clinics.</p>
Rationale	<p>The EVP was impressed by the commitment shown by the external hospital supervisors. However, these supervisors currently do not have access to UCLan's Meditrek system which is used to track students' competencies, and have to inform the programme team by email that students have completed a competency. The competency is then signed-off by the programme team.</p> <p>The EVP feels that the system for signing-off competencies completed in hospital clinics could be made more efficient and secure if the hospital supervisors had access to Meditrek. This would enable them to sign off competencies directly within the system used by other supervisors.</p>

3.3 Commendations made at this visit

The panel wishes to commend the creativity and commitment demonstrated by the hospital staff responsible for organising placements.