

University of Manchester
General Optical Council (GOC) Full Approval Visit
M.Sci Optometry
23 & 24 June 2020 (2 days)

Date report completed	3 July 2020
Report confirmed by GOC	2 November 2020

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PART 1 – VISIT DETAILS

1.1 Provider details	
Address	School of Health Sciences University of Manchester Carys Bannister Building Dover Street Manchester M13 9PL
Responsible officer	Christine Dickinson
Responsible officer telephone	0161 306 3874
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1.2 Programme details	
Programme title	Optometry
Programme type	M.Sci – 4 year undergraduate Masters
Current approval status	Full approval
Approved student numbers	Approved student numbers - 12 per cohort

1.3 GOC Education Visitor Panel (the panel)	
Chair	Sally Powell - Lay member
Visitors	Markham May - Lay member Richard Allen – Optometrist/IP Brendan Barrett - Optometrist
GOC representative	Ella Pobee - Approval & Quality Assurance Officer

1.4. Purpose of the visit	
Visit type	Quality Assurance Visit
<p>The purpose of this full approval quality assurance visit is to review the University of Manchester's (the University) M.Sci Optometry programme (the programme) against the requirements, as listed in the GOC's Accreditation and Quality Assurance Handbook: Routes to Registration in Optometry 2015 ('the Handbook') and the GOC Education A&QA-Supplementary Documents-List of Requirements.</p> <p>As part of this review, the panel carried out the following visits (see Appendix 1 for further information):</p> <ul style="list-style-type: none">• Practice placement visits on various dates between January and March 2020.• Observation of a summative objective structured clinical examination (OSCE), a scripted record examination, refraction sessions and a portfolio briefing and related assessment and teaching activities with students on 31 January 2020.• Observation of the viva-voce examinations on clinical case management between 22 and 24 April 2020. Due to the COVID-19 emergency these took place virtually.• Head office visit on 23 & 24 June 2020. Due to the COVID-19 emergency this visit took place remotely.	

The COVID-19 emergency resulted in the Examinations Board meeting scheduled for 19 June 2020 being cancelled. The GOC was informed that the meeting will proceed once students have completed the practical examinations. These examinations will take place once Government guidance declares it safe to do so. The panel will need to attend the Examinations Board as part of the current quality assurance activity.

PART 2 – VISIT SUMMARY

2.1 Visit outcomes & summary of panel recommendations to the GOC	
Requirements	9 requirements are identified as deficient/unmet. 6 actions are set.
Student numbers	Outgoing cohort - 4 students Incoming cohort - 3 students
Next visit	As part of the <i>current</i> quality assurance activity, the panel needs to: <ul style="list-style-type: none">attend the postponed Examinations Board. The panel recommends that: <ul style="list-style-type: none">the next full visit takes place in November 2023.in future, the programme is reviewed alongside the University's BSc Optometry programme, with an extended agenda to ensure an adequate number of days to review both programmes.
Factors to consider when scheduling next visit e.g. when students are in, hospital, audit etc.	A full visit to the programme must include: <ul style="list-style-type: none">The observation of at least one OSCEVisits to all practices while students are on placementObservation of the practical examinationsObservation of the Examinations BoardA full, head office visit. This should be carried out once all the visits listed above have concluded so that they can be discussed during this visit.

PART 3 – CONDITIONS, RECOMMENDATIONS & COMMENDATIONS

3.1 Conditions set at this visit	
Conditions are applied to training and assessment providers if there is evidence that the GOC requirements are not met. The conditions (unmet requirements) for this visit are set out below along with the actions that are required to meet the requirement.	
Requirement	Requirement description
OP2.13 &	The provider must have adequate resources for the appointment, training, and review of assessors and any management of them (e.g. lead assessors and the appointment of external examiners).
OP3.4 &	Supervisors must be provided with and apply agreed criteria when determining whether an episode is safe.
OP3.5 &	Providers must ensure that external practice providers are made aware of their responsibilities for creating the right environment for effective practice-based learning to take place.
OP3.6 &	The provider must ensure that supervisors receive comprehensive guidance and training to ensure they fully understand their responsibilities and obligations
OP4.4 &	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).
OP5.10 &	The provider must have an effective mechanism to identify risks to the quality of the education and training provided and to identify areas requiring development
OP5.11	The provider must maintain effective governance arrangements to support relationships with any external parties responsible for delivering elements of the route to registration, specifically including practice-based learning.
Action 1	A comprehensive placement supervisor handbook containing guidance on roles and responsibilities, with particular emphasis on the sign-off of core competencies must be submitted.
Action 2	Training, that contains an explanation of roles and responsibilities and the signing-off of core competencies, must be delivered to all placement supervisors.
Date due	<ul style="list-style-type: none"> • Action 1 must be completed by 31 January 2021 • Action 2 must be completed by 1 April 2021
Rationale	<p>The panel acknowledges the positive relationships the programme team has established with the current placement providers which have contributed to an excellent student experience. However, the panel is concerned about the lack of formal policies and processes governing the provision and evaluation of placements, and the evaluation of student experience and attainment within placements.</p> <p>The panel heard of rare situations in which students were supervised by individuals with no previous experience of the programme and difficulties arose as there was no written information available to support them in their</p>

	<p>roles. The majority of placement supervisors currently in place, however, are highly experienced and aware of the needs of students and the programme.</p> <p>The programme lead informed the panel that a new placement provider has been identified for academic year 2021/22 and that discussions are being held about expanding the programme. The panel is concerned to ensure that any new placement providers are fully equipped to provide a high standard of supervision.</p> <p>The panel was informed the programme team does not provide placement supervisors with specific criteria outlining how the competencies can be deemed attained. It is felt there is no need for this as the current placement supervisors are highly experienced and consider students' attainment holistically. The panel acknowledges this but requested that the creation, in partnership with the placement providers, of such criteria be considered as a way of ensuring consistent criteria which are set at an appropriate level. This is especially important as new placement providers are recruited.</p> <p>To ensure standardisation of training and assessment the panel found the need for the development of a comprehensive placement supervisor handbook containing guidance on roles and responsibilities and the sign-off of core competencies and the delivery of associated training across all placement supervisors.</p>
Action 3	A robust governance mechanism that identifies the potential risks that may affect the quality of the programme and the areas that require development must be implemented and evidenced.
Date due	18 December 2020
Rationale	<p>Through discussions with external stakeholders and the programme team, the panel was able to identify that feedback is captured and used to implement changes and improvements to the programme. However, there is a lack of evidence of how this is implemented. Additionally, the panel did not see evidence that the programme is considered within the University's internal, formal governance and reviewing mechanisms. Thus, the panel requests feedback processes are formalised.</p> <p>The panel was concerned that the needs and issues of the programme are currently subsumed into those of the BSc Optometry programme.</p>
Action 4	The programme team must submit signed contracts with the placement providers.
Date due	18 December 2020
Rationale	<p>Although the programme has developed positive relationships with the practices that provide placements, no formal contracts or memoranda of understanding have been signed. Such agreements must be established to ensure that external parties are aware of their obligations to provide adequate clinical experience, ensure equal learning opportunities for all students, and to maintain the safety of patients and students when the students are in practice.</p> <p>Additionally, the programme lead informed the panel that a new placement provider has been identified for academic year 2021/22 and that discussions are being held about expanding the programme further. The panel is</p>

	<p>concerned to ensure that any new placement providers are fully aware of their obligations.</p> <p>The deadline reflects the panel's understanding of the potential effects of the COVID-19 emergency on obtaining confirmation of placements. The provider is expected to provide a sufficient risk assessment and contingency plan in the event the requirement is unable to be met (or appears that it will not be met).</p>
OP5.4 &	The external examiners' remit must include all the professional requirements of the programme including any clinical portfolios.
OP5.7	The remit of the Examination and Award Boards must include the consideration of both academic and professional requirements.
Action 5	The external examiners must be given the opportunity to provide the required oversight on both the professional and academic requirements of the programme.
Action 6	The external examiners must be provided with bespoke induction and training that focuses on the specific needs and requirements of the programme.
Date Due	Action 5 must be completed by 31 January 2021 Action 6 must be completed by 31 January 2021
Rationale	<p>Although the external examiners are responsible for both the BSc Optometry and M.Sci Optometry programmes delivered by the University, discussions identified that they have minimal involvement with the programme. Currently, involvement is limited to carrying out vivas for students who obtain borderline grades on the M.Sci programme, and this occurs infrequently.</p> <p>The panel considers direct external examiner involvement with the programme is essential in order to meet GOC requirements and would be of great value to the programme. Areas of involvement should include (but are not limited to):</p> <ul style="list-style-type: none"> • Placements • Sign-off of competencies and patient episodes, and general consideration of the attainment of the professional requirements and practical experience • Practical and written assessments <p>The panel requests that the programme team re-evaluates the roles of the external examiners, for example, ensuring the needs of the programme are specifically mentioned in employment literature to ensure individuals are aware of the need to have the necessary level of oversight over, and input into, the programme.</p> <p>If the needs of the programme cannot be met with the existing resource, the panel requests the programme team considers the need for an additional external examiner solely for the programme to ensure the specific needs of, and issues related to, the programme are sufficiently catered for.</p>

3.2 Recommendations offered at this visit	
The panel offers the following recommendations to the provider. Recommendations indicate enhancements that can be made to a programme that are not directly linked to compliance with GOC requirements	
<p>OP3.7 &</p> <p>OP3.8 &</p> <p>OP3.9 &</p> <p>OP3.10 &</p> <p>Recommendation 1</p>	<p>The provider must ensure students receive comprehensive guidance and support throughout any periods of practice-based learning.</p> <p>The responsibilities for practice-based learning must be clearly set out and explained to the student.</p> <p>Students must be clearly informed of their individual rights and responsibilities in the clinic environment.</p> <p>Students must be provided with clear and comprehensive information about the complaints process and how to report a concern regarding the practice-based learning to the provider.</p> <p>Although students are provided with information in a variety of ways this can sometimes lead to confusion. Currently, students do not receive a detailed student handbook for year 4 of the programme. Panel discussions highlighted the need for comprehensive, written communication, guidance and support to be provided to students before commencing the final year to give clarity on all on aspects of placements, including student roles and responsibilities, student/supervisor roles and relationships, using SharePoint and other data systems, recording patient episodes and competency assessment, and developing the research project.</p>
<p>OP4.2</p> <p>Recommendation 2</p>	<p>Assessment methods must be in line with current practice and routinely monitored, quality assured and developed.</p> <p>The panel was unable to determine the <i>formal</i> governance structure that is employed to quality assure and develop programme assessments; for example, the external examiners are not involved in, and do not have full oversight of, the programme's assessment procedures. Additionally, assessment methods by placement supervisors should be understood and applied consistently across all placement providers. They should be appropriate to the learning outcomes and subject to a quality assurance process through routine monitoring by the University and its placement partners.</p> <p>NB This recommendation is linked to Actions 2 & 3 listed above</p>
<p>OP5.1 &</p> <p>OP5.2</p> <p>Recommendation 3</p>	<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> <p>The views of external stakeholders must inform the future development of programme design, content and delivery.</p> <p>The panel was unable to fully determine the <i>formal</i> feedback processes used to quality assure and develop the assessments in conjunction with all external stakeholders. The panel recognises obtaining anonymous feedback from students is problematic due to the cohort size. There should be a framework for regular systematic</p>

	feedback from all those involved in the programme which respects confidentiality and robustly identifies strengths and areas for improvement.
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3.3 Commendations made at this visit

The panel wishes to commend the following areas:

- The variety of teaching and learning methods used to deliver the learning outcomes (OP1.1)
- The personal & professional development module in year 4 which provides excellent opportunities for students to acquire the skills and attitude necessary to develop across the course of their careers

Appendix 1: M.Sci Optometry Visit Schedule

1. The **head office visit** carried out on 23 & 24 June 2020:
 - 1.1 consisted of meetings with programme staff, students and external examiners associated with the MSci Optometry award.
 - 1.2 was held remotely by videoconference owing to the ongoing restrictions caused by the Covid-19 emergency.

2. The observation of the **practical examinations** between 22 and 24 April 2020:
 - 2.1 involved a sub-panel consisting of the chair and an optometrist
 - 2.2 was held remotely by videoconference owing to the ongoing restrictions caused by the Covid-19 emergency.
 - 2.3 the examinations took the form of viva examinations
 - 2.4 The panel found:
 - the viva examinations were conducted appropriately
 - students' discussions of cases provided were of a good standard
 - further information is required about the marking process.

3. **Practice placement visits** on various dates between January and March 2020:
 - 3.1 involved individual (lay, optometrist and dispensing optician) members of the panel visiting each year 4 student during their respective placements
 - 3.2 involved panel members meeting with students separately and with their supervisors
 - 3.3 the panel members reviewed documentation including:
 - case records
 - records of the professional requirements attainment
 - student/supervisor meeting minutes
 - 3.4 students were observed engaging in patient interaction
 - 3.5 the panel found:
 - the practice placements to be well equipped
 - supervisors were highly experienced and knowledgeable
 - positive working relationships between supervisors and students
 - 3.6 The panel identified the need for further information on practices placement numbers

4. The observation of a formal summative **objective structured clinical examination, a scripted record examination, refraction sessions and a portfolio briefing** on 31 January 2020:

4.1 involved a sub-panel consisting of the chair and an optometrist member

4.2 the sub-panel observed the stations and the group feedback session on the evidence-based clinical case management examination.

4.3 The sub-panel found:

- arrangements were clear and timing kept efficiently
- examiners were professional and avoided inappropriate prompting while still interacting as required
- students were aware of GOC competences and the significance of their completion

4.4 The panel requested the following further information:

- marking criteria
- a more detailed list of assessments clearly showing formative and summative components