



<b>Aston University</b>
<b>Report of the outcomes of the adaptation to the GOC education &amp; training requirements</b>
<b>Master of Optometry (MOptom)</b>
<b>AST-OP1-ETR</b>
<b>Report confirmed by GOC – 25 April 2024</b>

## TABLE OF CONTENTS

<b>SECTION ONE – ABOUT THIS DOCUMENT</b> .....	<b>3</b>
1.1 ABOUT THIS DOCUMENT .....	3
<b>SECTION TWO – PROVIDER DETAILS</b> .....	<b>4</b>
2.1 TYPE OF PROVIDER .....	4
2.2 CENTRE DETAILS .....	4
2.3 EXTERNAL PARTNERS DELIVERING AND/OR MANAGING AREAS OF THE QUALIFICATION.....	4
<b>SECTION THREE – QUALIFICATION DETAILS</b> .....	<b>5</b>
3.1 QUALIFICATION DETAILS.....	5
<b>SECTION FOUR – SUMMARY OF THE OUTCOMES OF THE ADAPTATION PROCESS</b> .....	<b>6</b>
4.1 QUALITY ASSURANCE ACTIVITY .....	6
4.2 GOC REVIEW TEAM .....	6
4.3 SUMMARY OF CONDITIONS & RECOMMENDATIONS.....	6
4.4 STANDARDS OVERVIEW.....	6

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

## SECTION ONE – ABOUT THIS DOCUMENT

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### 1.1 ABOUT THIS DOCUMENT

This report outlines the outcomes of the review of Aston University's adapted Master of Optometry (MOptom) 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).
- The status of all the standards reviewed as part of the adaptation process (which includes the formal response process).
- Any action Aston University is required to take.

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

## SECTION TWO – PROVIDER DETAILS

2.1 TYPE OF PROVIDER	
<b>Provider</b> <i>Sole responsibility for the entire route to registration</i>	<input checked="" type="checkbox"/>
<b>Awarding Organisation (AO)</b> <i>Sole responsibility for the entire route to registration with centres delivering your qualification(s)</i>	<input type="checkbox"/>

2.2 CENTRE DETAILS	
<b>Centre name(s)</b>	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.

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

## SECTION THREE – QUALIFICATION DETAILS

3.1 QUALIFICATION DETAILS	
Qualification title	Master of Optometry (MOptom)
Qualification level	Regulated Qualifications Framework (RQF) Level seven
Duration of qualification	Four years
Number of cohorts per academic year	One
Month(s) of student intake	September
Delivery method(s)	Full time
Alternative exit award(s)	<ul style="list-style-type: none"> <li>• Certificate of Higher Education (untitled).</li> <li>• Diploma of Higher Education (untitled).</li> <li>• Bachelor of Science in Ophthalmic Science.</li> </ul>
Total number of students per cohort	140 (+/- 10%)

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

## SECTION FOUR – SUMMARY OF THE OUTCOMES OF THE ADAPTATION PROCESS

4.1 QUALITY ASSURANCE ACTIVITY	
Type of activity	Review of Aston University’s (university) adapted Master of Optometry (MOptom) qualification (qualification) against the <i>Requirements for Approved Qualifications in Optometry and Dispensing Optics</i> (March 2021).

4.2 GOC REVIEW TEAM	
Officer	<ul style="list-style-type: none"> <li>Allison Siveyer – Education Manager</li> <li>Ella Pobee – Education Development Officer</li> </ul>
Manager	Lisa Venables – Education Development Manager
Decision maker	Sam Morgan – Head of Education & CPD Development
Education Visitor Panel (panel) members	<ul style="list-style-type: none"> <li>Jane Andrews – Lay chair</li> <li>Will Naylor – Lay member</li> <li>Maryna Hura – Dispensing Optician member</li> <li>Professor John Siderov – Optometrist member</li> <li>Brian McCotter – Optometrist member</li> </ul>

4.3 SUMMARY OF CONDITIONS & RECOMMENDATIONS	
The qualification has been set <b>three</b> conditions against the following standards: <ul style="list-style-type: none"> <li>S3.6</li> <li>S3.7</li> <li>S3.19</li> </ul>	
The qualification has been set <b>one</b> recommendation against the following standard: <ul style="list-style-type: none"> <li>S3.5</li> </ul>	
Commentary against all the standards reviewed is 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*) are listed below along with the outcomes, statuses, actions, and any relevant deadlines. Actions may include the following: <ul style="list-style-type: none"> <li>A <b>condition</b> is set when the information submitted did not provide the necessary evidence and assurance that a standard is met; further action is required.</li> <li>A <b>recommendation</b> 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; further action is required.</li> <li><b>No further action</b> is required – the information submitted provides the necessary assurance that a standard is met.</li> </ul>	

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

\*The following standards listed below were **not** reviewed as part of the adaptation process but are monitored as part of the GOC's QAEM:

- Standard one - public and patient safety S1.1, S1.2, S1.3, S1.4
- Standard two - admission 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 university was required to complete or submit as part of the education and training requirements (ETR) adaptation process can be found here <https://optical.org/en/publications/qualifications-in-optometry-or-dispensing-optics/>

<b>Standard no.</b>	S2.1
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• The university's optometry specific webpage.</li> <li>• Narrative provided in support of a further information request.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that the university:</p> <ul style="list-style-type: none"> <li>• Has appropriate, clear and comprehensive entry and IELTS requirements.</li> <li>• Has an appropriate admissions process.</li> </ul>

<b>Standard no.</b>	S2.5
<b>Standard description</b>	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

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

	approved qualification, unless achievement of prior learning can be evidenced as equivalent.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• The university's optometry specific webpage.</li> <li>• Narrative provided in support of a further information request.</li> <li>• Narrative provided in support of the formal response process.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The university has an appropriate accreditation of prior learning policy and an appropriate process for implementing it.</li> </ul>

<b>Standard no.</b>	S3.1
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A 'programme specification' document' that outlined the qualification's: <ul style="list-style-type: none"> <li>○ Learning outcomes across the course of delivery.</li> <li>○ Assessment types.</li> <li>○ Regulations.</li> </ul> </li> <li>• Qualification module specifications.</li> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• A completed 'Template 4 – assessment strategy'.</li> <li>• A completed 'Template 5 – module outcome map'.</li> <li>• A completed 'Template 8 – outcome mapping to indicative guidance'</li> <li>• Narrative provided in support of a further information request.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The university has a comprehensive and clear assessment strategy (see S3.6 for details on additional information that is required).</li> <li>• The assessments lead to the awarding of an approved qualification.</li> </ul>

<b>ADT-RPT Report of the outcomes of the adaptation to the GOC education and training requirements</b>			
Version	v1.0	Date version approved	29 January 2024
Version effective from	January 2024	Next review date	January 2025



<b>Standard no.</b>	S3.3
<b>Standard description</b>	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). This experience must increase in volume and complexity as a student progresses through a programme.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• Qualification module specifications.</li> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• A completed 'Template 4 – assessment strategy'.</li> <li>• A completed 'Template 5 – module outcome map'.</li> <li>• Narrative provided in support of the formal response process.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• Students will engage in IPL with a range of other health professionals and health students.</li> <li>• The qualification provides students with sufficient patient experience and indicates how this is linked to assessment.</li> </ul>

<b>Standard no.</b>	S3.4
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• Narrative and documentation detailing stakeholder committees, groups, and engagement.</li> <li>• Narrative and documentation about the training of supervisors.</li> <li>• Narrative and documentation provided in support of a further information request.</li> </ul>

ADT-RPT Report of the outcomes of the adaptation to the GOC education and 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"> <li>• Narrative and documentation provided in support of the formal response process.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The university has established constructive relationships with stakeholders.</li> <li>• The university has incorporated stakeholder feedback into the development of the qualification.</li> <li>• Training and support will be provided to those involved in supervision.</li> </ul> <p>The GOC notes that the university will be using the CoO CLiP scheme to deliver aspects of the qualification. As the university is the sole provider of this qualification and has sole responsibility for the whole route to registration it is advised to ensure that it can evidence that it will continue to monitor and evaluate the aspects of the qualification delivered by the CoO, including the training and support of those involved in supervising students.</p> <p>Possible areas of evidence that can be submitted as part of ongoing quality assurance activity include evidence that (this list is non-exhaustive):</p> <ul style="list-style-type: none"> <li>• The training of supervisors, although delegated to the CoO, has taken place.</li> <li>• Delivered training is of an appropriate standard and meets all relevant requirements.</li> <li>• The university has established appropriate governance and quality assurance methods.</li> </ul>
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<b>Standard no.</b>	S3.5
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – recommendation</b>
<b>Deadline</b>	Supporting evidence to be submitted as part of the AMR process for academic year 2023-4.
<b>Rationale</b>	<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"> <li>• A ‘programme specification’ document.</li> <li>• A completed ‘Template 2 - criteria narrative’.</li> <li>• A completed ‘Template 4 – assessment strategy’.</li> <li>• A completed ‘Template 5 – module outcome map’.</li> <li>• A completed ‘Template 8 – outcome mapping to indicative guidance’.</li> <li>• Narrative provided in support of the formal response process.</li> </ul>

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

	<p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The qualification includes a range of assessment methods.</li> <li>• Summative assessments must be passed.</li> <li>• Compensation is not allowed within the restrictions of this standard.</li> </ul> <p>The 'programme specification' document states "<i>Students are required to pass all summative assessments within each stage of the MOptom programme. There is normally no condonement/ compensation of assessment marks</i>". Within its narrative provided in support of the formal response process the university clearly states that condonement would "<i>never (be used) for a final summative assessment where a GOC outcome was being assessed</i>".</p> <p>Although the information reviewed provided sufficient assurance that this standard is MET, a recommendation has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive)</p> <ul style="list-style-type: none"> <li>• Evidence that the university has amended its programme specification, to state more clearly to students, that no condonement will be allowed for final summative assessments and the situations in which it would be permissible.</li> </ul>
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<b>Standard no.</b>	S3.6
<b>Standard description</b>	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.
<b>Status</b>	<b>NOT MET – condition.</b>
<b>Deadline</b>	Tuesday 28 May 2024
<b>Rationale</b>	<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"> <li>• A 'programme specification' document' that outlined the qualification's: <ul style="list-style-type: none"> <li>○ Learning outcomes across the course of delivery.</li> <li>○ Assessment types.</li> </ul> </li> <li>• Qualification module specifications.</li> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• A completed 'Template 4 – assessment strategy'.</li> <li>• A completed 'Template 8 – outcome mapping to indicative guidance'</li> </ul>

ADT-RPT Report of the outcomes of the adaptation to the GOC education and 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"> <li>• Narrative and documentation provided in support of a further information request.</li> <li>• Narrative provided in support of the formal response process.</li> </ul> <p>The evidence did not provide the necessary assurance that this standard is met. This was partly due to incompatible deadlines for the submission of the university's formal response and work that university intended to carry out. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> <li>• The assessment process that will be used after the piloting of the new blueprinting/standard setting processes which took place in July 2023.</li> <li>• The lowest pass marks for assessments and how they were determined.</li> <li>• Lack of clarity on assessment criteria now the standard setting trials have been completed.</li> <li>• Lack of clarity as to whether the standard setting procedures described in response to S3.7 will be applied to all assessments or just examinations.</li> </ul> <p>Possible types of evidence that can be submitted (but not limited to) are:</p> <ul style="list-style-type: none"> <li>• Updated assessment strategy.</li> <li>• Assessment planning.</li> <li>• The outcomes of the blueprinting/standard setting processes pilot for example, will the outcomes be implemented across the board, or will the current assessment process outlined in the narrative also remain in place?</li> </ul> <p>Also see S3.7.</p>
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<b>Standard no.</b>	S3.7
<b>Standard description</b>	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.
<b>Status</b>	<b>NOT MET – condition.</b>
<b>Deadline</b>	Tuesday 28 May 2024
<b>Rationale</b>	The evidence did not provide the necessary assurance and therefore this standard is NOT MET.  See S3.6 for details.

<b>Standard no.</b>	S3.14
<b>Standard description</b>	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

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

	upon the strengths and opportunities of context in which the qualification is offered.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A ‘programme specification’ document’ that outlined the qualification’s: <ul style="list-style-type: none"> <li>○ Learning outcomes across the course of delivery.</li> <li>○ Assessment types.</li> <li>○ Regulations.</li> </ul> </li> <li>• Qualification module specifications.</li> <li>• A completed ‘Template 2 - criteria narrative’.</li> <li>• A completed ‘Template 8 – outcome mapping to indicative guidance’</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• A range of teaching and learning methods have been incorporated into the qualification to deliver the learning outcomes.</li> <li>• Expertise from university-based stakeholders has been incorporated into the qualification.</li> <li>• The university has established constructive relationships with internal and external stakeholders.</li> </ul>

<b>Standard no.</b>	S3.15
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A ‘programme specification’ document.</li> <li>• A completed ‘Template 2 - criteria narrative’.</li> <li>• A completed ‘Template 5 – module outcome map’.</li> <li>• The signed and dated ‘Academic Partnership Agreement’ between the university and the CoO.</li> <li>• Narrative provided in support of a further information request.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that the qualification incorporates:</p> <ul style="list-style-type: none"> <li>• The required minimum 1600 hours/48 weeks of patient-facing learning and experience in practice.</li> </ul>

<b>ADT-RPT Report of the outcomes of the adaptation to the GOC education and training requirements</b>			
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"> <li>• A good balance of short and long-term placements.</li> </ul>
<b>Standard no.</b>	S3.16
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A ‘programme specification’ document.</li> <li>• Qualification module specifications.</li> <li>• A completed ‘Template 2 - criteria narrative’.</li> <li>• A completed ‘Template 4 – assessment strategy’.</li> <li>• A completed ‘Template 5 – module outcome map’.</li> <li>• A completed ‘Template 8 – outcome mapping to indicative guidance’.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The principles of Miller’s pyramid have been incorporated within the qualification.</li> <li>• The types and range of assessment methods are appropriate to the qualification.</li> </ul>

<b>Standard no.</b>	S3.17
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A ‘programme specification’ document.</li> <li>• Qualification module specifications.</li> <li>• A completed ‘Template 2 - criteria narrative’.</li> <li>• A completed ‘Template 4 – assessment strategy’.</li> <li>• A completed ‘Template 5 – module outcome map’.</li> <li>• Narrative and documentation detailing stakeholder committees, groups, and engagement.</li> </ul>

ADT-RPT Report of the outcomes of the adaptation to the GOC education and 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"> <li>• Narrative and documentation provided in support of a further information request.</li> <li>• Narrative provided in support of the formal response process.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The university has established constructive relationships with stakeholders.</li> <li>• The university has incorporated stakeholder feedback into the development of the qualification.</li> </ul>
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<b>Standard no.</b>	S3.19
<b>Standard description</b>	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 must be embedded in curriculum design and assessment and used to enhance students' experience of studying on a programme leading to an approved qualification.
<b>Status</b>	<b>NOT MET – condition.</b>
<b>Deadline</b>	31 August 2024
<b>Rationale</b>	<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"> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• A document titled 'Evaluation of Modules &amp; Taught Programmes' that outlines the university's Continuing Monitoring and Enhancement approach.</li> <li>• The university-wide inclusion policy.</li> <li>• Narrative and documentation provided in support of a further information request.</li> <li>• Narrative provided in support of the formal response process.</li> </ul> <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"> <li>• How the university-wide approach to equality, diversity, and inclusion (EDI) has been implemented at a qualification level.</li> <li>• How qualification level EDI data has been or will be used to inform curriculum design, delivery, and assessment.</li> </ul> <p>Possible areas of evidence that can be submitted (but not limited to) are:</p> <ul style="list-style-type: none"> <li>• How the university's established Continuing Monitoring and Enhancement approach is used to ensure that EDI data informs curriculum design, delivery, and assessment.</li> <li>• Examples of the changes made to the qualifications design, delivery and assessment as a result of learning gained from EDI data.</li> </ul>

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

<b>Standard no.</b>	S4.1
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• 'Aston University Charter of Incorporation'.</li> <li>• The Office for Students online register.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that the university is:</p> <ul style="list-style-type: none"> <li>• An approved provider of higher education.</li> <li>• A legally incorporated higher education institution.</li> </ul>

<b>Standard no.</b>	S4.2
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• 'Aston University Charter of Incorporation'.</li> <li>• The Office for Students online register.</li> <li>• A document detailing the university's committee/governance structure.</li> </ul> <p>The information reviewed evidenced, amongst other elements, the university's:</p> <ul style="list-style-type: none"> <li>• Corporate form, governance, and lines of accountability.</li> </ul>

<b>Standard no.</b>	S4.4
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.

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



<b>Rationale</b>	<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"> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• 'Aston University Charter of Incorporation'.</li> <li>• The Office for Students online register.</li> <li>• A document detailing the university's committee/governance structure.</li> <li>• The signed and dated 'Academic Partnership Agreement' between the university and the CoO.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• There is a robust framework supporting the relationship between the university and the CoO.</li> </ul>
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<b>Standard no.</b>	S4.5
<b>Standard description</b>	The provider of the approved qualification must have a named person who will be the primary point of contact for the GOC.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• A completed 'Form 2a - notification of proposed adaptation of programmes'.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The university has an appropriate named person for the qualification.</li> </ul>

<b>Standard no.</b>	S4.13
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A risk register.</li> <li>• Contingency planning.</li> </ul>

ADT-RPT Report of the outcomes of the adaptation to the GOC education and 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"> <li>• A document titled 'Evaluation of Modules &amp; Taught Programmes' that outlines the university's Continuing Monitoring and Enhancement approach.</li> <li>• A completed 'Template 2 - criteria narrative'.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that the university has:</p> <ul style="list-style-type: none"> <li>• Various robust mechanisms and processes for identifying and managing risks.</li> </ul>
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<b>Standard no.</b>	S5.1
<b>Standard description</b>	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.
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• A risk register.</li> <li>• Contingency planning.</li> <li>• A document titled 'Evaluation of Modules &amp; Taught Programmes' that outlines the university's Continuing Monitoring and Enhancement approach.</li> <li>• Documents detailing financial forecasting and planning for the adapted qualification.</li> <li>• A document detailing the university's committee/governance structure.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that the university has:</p> <ul style="list-style-type: none"> <li>• Robust mechanisms for identifying appropriate resources from the initial stages of qualification development and on an ongoing basis.</li> <li>• Various university stakeholder groups with responsibility for the allocation, governance, and evaluation of resources.</li> </ul>

<b>Standard no.</b>	S5.2
<b>Standard description</b>	<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"> <li>• an appropriately qualified and experienced programme leader, supported to succeed in their role;</li> </ul>

ADT-RPT Report of the outcomes of the adaptation to the GOC education and 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"> <li>• sufficient staff responsible for the delivery and assessment of the outcomes, including GOC registrants and other suitably qualified healthcare professionals;</li> <li>• sufficient supervision of students' learning in practice by GOC registrants who are appropriately trained and supported in their role;</li> <li>• and an appropriate student:staff ratio (SSR), which must be benchmarked to comparable provision.</li> </ul>
<b>Status</b>	<b>MET – no further action is required at this stage.</b>
<b>Deadline</b>	Not applicable.
<b>Rationale</b>	<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"> <li>• A completed 'Template 2 - criteria narrative'.</li> <li>• A completed 'Form 2a - notification of proposed adaptation of programmes'.</li> <li>• Contingency planning.</li> <li>• The signed and dated 'Academic Partnership Agreement' between the university and the CoO.</li> <li>• Narrative and documentation about the training and support of staff and supervisors.</li> </ul> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> <li>• The qualification has leadership.</li> <li>• There is an appropriate range and number of staff to deliver the qualification.</li> <li>• The university has considered the training and support needs of university staff and those outside of the university who have responsibility for delivering elements of the qualification.</li> </ul>

<b>ADT-RPT Report of the outcomes of the adaptation to the GOC education and training requirements</b>			
Version	v1.0	Date version approved	29 January 2024
Version effective from	January 2024	Next review date	January 2025