

Teesside University
GOC PROVISIONAL APPROVAL QUALITY ASSURANCE VISIT
BSc (Hons) Clinical Optometry
30 & 31 January 2024

Report confirmed by GOC	18 April 2024
--------------------------------	----------------------

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	3
1.5 Programme history	3
PART 2 – VISIT SUMMARY	5
2.1 Visit outcomes	5
2.2 Previous conditions	5
2.3 Previous recommendations	6
2.4 Non-applicable requirements	6
2.5 Unable to assess requirements	7
PART 3 – CONDITIONS, RECOMMENDATIONS & COMMENDATIONS	8
3.1 Conditions set at this visit	8
3.2 Recommendations offered at this visit	9
3.3 Commendations made at this visit	10

PART 1 – VISIT DETAILS

1.2 Programme details	
Programme title	BSc (Hons) Clinical Optometry
Programme description	<ul style="list-style-type: none"> The BSc (Hons) Clinical Optometry programme is a three-year, full-time programme that adheres to the standard academic year. Teesside University delivers the theory element of the route to registration including all stage one competencies. Upon successful completion of the programme students can progress onto the Scheme for Registration delivered by the College of Optometrists (CoO). The CoO is responsible for the clinical placement, all stage two competencies and the qualifying examinations.
Current approval status	Provisionally approved (PA)
Approved student numbers	24

1.3 GOC Education Visitor Panel (EVP)	
Chair	Carl Stychin – Lay Chair
Visitors	John Deane – Lay Member Graeme Kennedy – Optometrist / Independent Prescribing Optometrist Brendan Barrett – Optometrist Graeme Stevenson – Dispensing Optician / Contact Lens Optician
GOC representative	Georgina Carter – Operations Manager – Education & CPD (interim)
Observers	N/A

1.4 Purpose of the visit	
Visit type	PROVISIONAL APPROVAL QUALITY ASSURANCE VISIT
<p>The purpose of this provisional approval quality assurance revisit was to review:</p> <ol style="list-style-type: none"> Teesside University's (University) BSc (Hons) Clinical Optometry programme (programme) against the requirements, as listed in the <i>GOC's Temporary Accreditation and Quality Assurance Handbook: Routes to Registration in Optometry 2020</i> (handbook) and the <i>GOC Education A&QA-Supplementary Document-List of Requirements</i> (list of requirements). <p>The visit took place in person.</p>	

1.5 Programme history		
Date	Event type	Overview
02/02/2023	Visit	A provisional approval quality assurance visit took place.
09/05/2023	Change	The Provider informed the GOC of a change regarding a reduction in teaching hours for some modules for the next academic year. This was noted.

11/05/2023	Conditions	Two new conditions, regarding the submission of course materials, were set by the executive, as per the provisional approval process.
25/07/2023	Administration	A provisional approval quality assurance visit was scheduled for 30 & 31 January 2024.
22/08/2024	Change	The provider informed the GOC of a change to Year 1 placement start dates and reduction of total number of placement days to 10. This was noted.

PART 2 – VISIT SUMMARY

2.1 Visit outcomes	
The panel recommended that provisional approval for Teesside University's BSc (Hons) Clinical Optometry programme should continue. The panel set two new conditions, with two requirements deemed unmet, and offered three recommendations. The panel were pleased to see the collegial and supportive environment fostered by the Optometry programme team.	
Summary of recommendations to the GOC	
Previous conditions	Previous conditions, that remained OPEN, were not reviewed by the panel as part of this visit.
New conditions	Two requirements are deemed UNMET and therefore two conditions are set. See part 3 for more information.
New recommendations	Three recommendations are offered. See part 3 for more information.
Commendations	One commendation is offered. See part 3 for more information.
Actual student numbers	2023/24 Year 1 – 26 Year 2 – 8 Year 3 – N/A
Approval/next visit	The next visit will take place by February 2025, in line with the GOC's provisional approval quality assurance process
Factors to consider when scheduling next visit e.g. when students are in, hospital, audit etc.	The visit should be scheduled to factor in: <ul style="list-style-type: none"> • time to speak to students from all cohorts. • time to speak to external examiners. • the implementation of the GOC's new Education and Training Requirement's (ETRs)

2.2 Previous conditions		
Requirement number	Condition number and description	Status
OP2.2 OP2.4 OP2.7 OP2.9	1. The University must ensure a sufficient, and appropriately skilled and qualified, staffing base is in post, with the capacity, in accordance with the University's academic workload model, to further develop, deliver and review, all aspects of the approved programme.	This condition was deemed MET by the executive prior to this visit taking place and was not therefore reviewed by the EVP at this visit.
All relevant OP1 and OP4 requirements	2. The programme team must submit the completed programme materials for year 2/semester 1 at least two calendar months before the start of semester 1	This condition was deemed MET by the executive prior to this visit taking place and was not therefore reviewed by the EVP at this visit.

All relevant OP1 and OP4 requirements	3. The programme team must submit the completed programme materials for year 2/semester 2 at least two calendar months before the start of semester 2	This condition was deemed MET by the executive in February 2024 and was not reviewed by the EVP at this visit.
--	---	---

2.3 Previous recommendations	
Description	Comments
To continue to consider the financial barriers and support available for students to join or continue with the programme.	The panel was assured from discussions throughout the visit that this recommendation had been considered and attempts made to improve on it.
To consider appraising areas of potential academic weaknesses amongst students and respond with remedial teaching.	The panel was assured from discussions throughout the visit that this recommendation had been considered and opportunities for remedial teaching had been introduced.
To attempt to further diversify the range of placement providers currently working with the University.	The panel was assured from discussions throughout the visit that this recommendation had been considered and attempts have been, and continue to be, made to expand and diversify the pool of placement providers.
To continue to develop opportunities for multi-disciplinary teaching and learning on the programme.	The panel was assured from discussions throughout the visit that there are opportunities for multi-disciplinary teaching and learning on the current programme, and that they continue to be developed for their adaptation to the new Education and Training Requirements.
To ensure external examiners are given the opportunity to visit the provider to engage directly with staff and students on the programme.	The panel was assured by discussions with the programme team and external examiners, during the visit, that this recommendation had been taken on board.
To regularly review the database to ensure it contains a sufficient number and range of patients.	The panel was assured from discussions throughout the visit that this recommendation had been considered and attempts have been, and continue to be, made to ensure the database contains a sufficient number and range of patients.

2.4 Non-applicable requirements	
<p>The panel recommends that some requirements be deemed non-applicable to the programme due to the programme's structure and level and the differing, but overlapping, roles and responsibilities of the University and the CoO:</p> <ul style="list-style-type: none"> • the University provides the theory aspect of the route to registration including all stage one competencies. • the CoO is responsible for all stage two competencies and ensuring all the elements of the portfolio are completed under supervision. 	
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.
--------	---

2.5 Unable to assess requirements

Due to the stage of the programme the panel was unable to <i>fully</i> assess the requirements listed below as the requirements are not currently applicable or are only partially applicable. These unassessed requirements will be reviewed as part of ongoing quality assurance activity.	
OP2.12	The provider must ensure that the patient base is relative to the student cohort size and is of a sufficient volume and range to deliver the required level of experience as specified in the GOC Core Competencies and patient experience requirements.
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).
OP6.1	The provider must have an effective system in place to ensure each student has access to a sufficient range and number of patients under each category of experience.
OP6.2	If difficulty occurs in enabling the student to achieve the required patient experience, the provider must notify the GOC of the proposed alternative learning experience offered to the student to fulfil the requirements.
OP6.8	Students must have been taught and assessed as competent against each of the Stage 1 GOC Core Competencies.
OP6.9	Students must acquire the minimum amount of real patient experience with each patient group as per the competencies and patient experience requirements.
OP6.10	Students must hold certified portfolios containing a record of both their patient experience and achievement of all core competency elements.
OP6.11	The portfolio must include evidence of how and when each individual element of competence was achieved by the individual student.
OP6.12	The portfolio must contain a case record for each individual patient episode contributing to the minimum requirements.
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.

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.	
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.
OP2.7	Staffing levels must be increased proportionately to reflect any increase in the number of students recruited to the programme.
Condition 1	The provider must submit evidence that there is subject-specific senior leadership in place.
Date due	Monday 2 September 2024
Condition 2	The provider must submit evidence that they have developed and implemented an interim plan to cover staffing needs until a full staffing contingent is in place and update us on the status of current recruitment campaigns.
Date due	Friday 1 March 2024
Rationale	<p>During the visit, the panel heard evidence which demonstrated that the lack of senior optometry leadership is impacting the decision making, mentoring and strategic planning for the programme. The panel was also informed of the high workloads reported by staff who are balancing the delivery of this qualification alongside the design and implementation of the ETR-adapted qualification, and anticipated staffing changes.</p> <p>Whilst the current programme management is running well, the panel were informed that the provider is currently recruiting for a professorial post; the panel considered this appointment to be of significant importance to the staffing contingent (condition 1) to help address the gap between senior leadership and programme management.</p> <p>With regards to programme team, the provider must ensure that any departures from the programme team are replaced as soon as possible. The University should ensure that the quality of learning, the student experience, and support for the programme team is prioritised during times of staff changes.</p> <p>Considering the aforementioned impact that current staffing levels is having on the programme, the panel require evidence to demonstrate that an interim action plan has been developed and implemented to cover staffing needs until a full contingent is in place (and until condition 1 is met).</p> <p>Please ensure all staffing changes are reported to us through the Notification of Events and Changes process, as per our guidance.</p>

All relevant OP1 and OP4 requirements	
Condition 3	The programme team must submit the completed programme materials for year 3/semester 1 at least two calendar months before the start of semester 1
Date due	Monday 22 July 2024
Condition 4	The programme team must submit the completed programme materials for year 3/semester 2 at least two calendar months before the start of semester 2
Date due	Monday 18 November 2024
Rationale	As per our provisional approval process, these conditions are set by the Executive to ensure that the Year 3 teaching and assessment materials are appropriate and meet the GOCs standards and requirements.

3.2 Recommendations offered at this visit	
The EVP offers the following recommendations to the provider.	
OP2.11	The supervisory structure, lines of authority and responsibilities of staff members must be clearly outlined.
Recommendation 1	To consider strengthening the communication and feedback opportunities between Optometry staff and the School's management team.
Rationale	<p>Conversations held during the visit indicated that the Optometry programme team would welcome increased opportunities for engagement with senior management around personal and professional development.</p> <p>The programme team also indicated a lack of opportunities for engagement and feedback on institutional strategies which would be beneficial to ensure continuous development for the Optometry programme.</p>

OP4.5	The assessment structure and procedures must comprise formative and summative elements and provide the student with sufficient feedback, within a reasonable timeframe, to enable maximum learning and achievement.
Recommendation 2	To develop a process for the provision of generic feedback to the cohort on examination outcomes.
Rationale	<p>During the visit the panel heard students express some concern surrounding the lack of written feedback they that they receive for written examinations.</p> <p>Conversations with the programme team demonstrated that some had implemented opportunities to share generalised written examination feedback to students for their modules, but that this was not mandatory and not utilised on all modules. The panel believe it would be beneficial for this process to be formalised and implemented across all appropriate modules to assist students with understanding the rationale behind marks that they receive.</p>

OP5.1	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.
Recommendation 3	To identify mechanisms to encourage student representatives to engage with the student voice forum.
Rationale	<p>Within the pre-visit documentation and during the visit, it was demonstrated that student course representatives were offered the opportunity to attend the student voice forum to provide feedback on their programmes.</p> <p>However, during the visit, it was highlighted that the Optometry student course representatives lacked engagement with the process. The panel believe this is an important formal mechanism for students to feedback to the university and the programme and encourage the team to develop mechanisms to ensure that course representatives actively participate in this process.</p>

3.3 Commendations made at this visit

The panel commends the collegial and supportive environment fostered by the Optometry programme team.