Approval process report

University of Liverpool, Orthoptics 2022

Executive Summary

This report covers our review of the MSc Orthoptics (Full Time Accelerated) at the University of Liverpool. Through our review, we did not set any conditions on approving the programme, as the education provider demonstrated it met our standards through documentary evidence. This report will now be considered by our Education and Training Panel who will make a final decision on programme approval.

There are no referrals to other processes and no outstanding issues, although the visitors did make two recommendations.

Previous consideration	Not applicable – this approval process followed the submission of an approval request form by an established provider.
Decision	The Education and Training Committee (Panel) is asked to decide whether the programme is approved.
Next steps	Subject to the Panel's decision, the programme will commence in September 2023.

Included within this report

Section 1: About this assessment

About us

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

This is a report on the approval process undertaken by the HCPC to ensure that the University of Liverpool and programmes detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the University of Liverpool and programmes approval / ongoing approval.

Our standards

We approve education providers and programmes that meet our education standards. Individuals who complete approved programmes will meet proficiency standards, which set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:
- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

Providers and programmes are approved on an open-ended basis, subject to ongoing monitoring. Programmes we have approved are listed on our website.

The approval process

Institutions and programmes must be approved by us before they can run. The approval process is formed of two stages:
- Stage 1 – we take assurance that institution level standards are met by the institution delivering the proposed programme(s)
- Stage 2 – we assess to be assured that programme level standards are met by each proposed programme

Through the approval process, we take assurance in a bespoke and flexible way, meaning that we will assess whether providers and programmes meet standards

based on what we see, rather than by a one size fits all approach. Our standards are split along institution and programme level lines, and we take assurance at the provider level wherever possible.

This report focuses on the assessment of the self-reflective portfolio and evidence.

How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint partner visitors to design quality assurance assessments, and assess evidence and information relevant to the assessment. Visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make the decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee takes decisions through different levels depending on the routines and impact of the decision, and where appropriate meets in public. Their decisions are available to view on our website.

The assessment panel for this review

We appointed the following panel members to support this review:

Robert MacKinnon	Lead visitor, Hearing Aid Dispenser
Paul Bates	Lead visitor, Paramedic
Helen Orton	Advisory visitor, Orthoptist
Niall Gooch	Education Quality Officer

During the conflict of interest process, the provider noted that Helen Orton was affiliated with the University of Liverpool, although not this particular programme, and that this might create the appearance of a conflict of interest. We attempted to recruit another specialist orthoptist visitor but were unable to do so.

We determined that the most appropriate way to manage this potential conflict while retaining appropriate professional input from an orthoptist was to keep Helen Orton in place but to bring in an additional educationalist Lead visitor to ensure balanced and transparent but effective scrutiny. We therefore recruited Robert MacKinnon in addition to Paul Bates and Helen Orton. All three visitors reviewed the whole submission, but Helen Orton had a particular focus on the profession-specific content.

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers 15 HCPC-approved programmes across 5 professions, and including 2 Prescribing programmes. It is a Higher Education provider and has been running HCPC approved programmes since 1993.

Practice areas delivered by the education provider

The provider is approved to deliver training in the following professional areas. A detailed list of approved programme awards can be found in Appendix 1 of this report.

	Practice area	Delivery level		Approved since
Pre-registration	Occupational therapy	☒Undergraduate	☒Postgraduate	1998
	Orthoptist	☒Undergraduate	☐Postgraduate	1992
	Physiotherapist	☒Undergraduate	☒Postgraduate	1999
	Practitioner psychologist	☐Undergraduate	☒Postgraduate	1993
	Radiographer	☒Undergraduate	☒Postgraduate	1993
Post-registration	Independent Prescribing / Supplementary prescribing			2017
	Orthoptist Exemptions			2019

Institution performance data

Data is embedded into how we understand performance and risk. We capture data points in relation to provider performance, from a range of sources. We compare provider data points to benchmarks, and use this information to inform our risk based decisions about the approval and ongoing approval of institutions and programmes.

This data is for existing provision at the institution, and does not include the proposed programme(s).

Data Point	Bench-mark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	525	475	2022	This is a disparity of 50 here but this does not necessarily indicate a problem with any specific programme, and the visitors did not consider that it raised any issues with their view of this particular proposed programme.

Learners – Aggregation of percentage not continuing	3%	1%	2019-2020	This 1% figure suggests that the provider performs well in enabling and supporting learners to continue on their programmes.
Graduates – Aggregation of percentage in employment / further study	94%	95%	2019-2020	This figure suggests that the provider does well in supporting graduates into the workplace or into further study.
Teaching Excellence Framework (TEF) award	Silver		June 2018	Silver is a strong result in the TEF. This suggests a high level of teaching expertise at the provider.
National Student Survey (NSS) overall satisfaction score (Q27)	77.1%	69.2%	2022	The provider scored well below the benchmark here. However, this does not necessarily indicate a problem that is relevant to the assessment of this specific new provision. In the 2021-22 performance review cycle the visitors explored this low score through a quality activity and it was established that it was largely due to specific difficulties on one programme rather than any systemic issues.
HCPC performance review cycle length			2022	During the 2021-22 performance review cycle the visitors recommended that the provider should next go through performance review in the 2025-26 academic year.

The route through stage 1

Institutions which run HCPC-approved provision have previously demonstrated how they meet institution-level standards. When an existing institution proposes a new programme, we undertake an internal review of whether we need to undertake a full partner-led review against our institution level standards, or whether we can take assurance that the proposed programme(s) aligns with existing provision.

As part of the request to approve the proposed programme(s), the education provider supplied information to show alignment in the following areas.

Admissions

Findings on alignment with existing provision:
- **Information for applicants** –
  - The proposed new programme sits within the School of Health Sciences (SHS), and will follow existing policies laid out at the institution and School level. Applicants or those interested in applying for the new programme can access the required infomaiton on the institution website. The website contains information relating to the programme, entry criteria, and the costs based on individual circumstances. of the
  - This aligns with our understanding of how the education provider runs. We determined the proposed programmes would be managed in a way which is consistent with the definition of their institution..
  - **Assessing English language, character, and health** – The proposed new programme will closely follow existing institutional approaches, according to the provider submission. Applicants will have to meet the requiredthreshold for IELTS (International English Language Testing System) which is an average of 7 with no individual component below 6.5.
  - Applicants must pass a Disclosure and Barring Service check and complete an occupational health check to gain entry onto the programme.. These requirements are in line with current arrangements on existing approved programmes and so we can be satisfied that they are appropriate and that there was no need for further exploration.
  - **Prior learning and experience (AP(E)L)** –The proposed new programme will use the provider's institutional policy, under which individual applicants who may be eligible to have some AP(E)L taken into account will have their cases assessed on an individual basis. This procedure is in line with existing approaches at the provider, and there were no concerns that needed to be addressed through stage 1 or in future processes.
  - **Equality, diversity and inclusion** – At the institutional level, the provider has established policies in relation to equality, diversity and inclusion (EDI). The University of Liverpool are associated with, for example, the Athena SWAN Charter, the Bambis Breastfeeding Mayoral Charter, and the organisation Disability Confident. They are also accredited as Stonewall Diversity Champions. These memberships strongly indicates that the provider is committed to promoting EDI. This new programme will be aligned with the existing EDI arrangements. We did not consider that there was any need to explore this area further or to raise any more issues.

Non-alignment requiring further assessment: None.

Management and governance

Findings on alignment with existing provision:
- **Ability to deliver provision to expected threshold level of entry to the Register[1] –**

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[1] This is focused on ensuring providers are able to deliver qualifications at or equivalent to the level(s) in SET 1, as required for the profession(s) proposed

The provider is a large higher education institution (HEI) already delivering multiple HCPC-approved and other allied health professions (AHPs) programmes .. There are processes in place for internal review of programmes, and these processes have been considered in previous approvals of programmes at the provider. These approaches will be used for the new programme, which means that we can be confident that there is no need for further exploration.

- **Sustainability of provision** –
    - o The proposed new programme is at Master's level. The provider has been deliveringan undergraduate level programme in orthoptics for over thirty years. This strongly indicates they have valuable institutional experience and expertise in delivering professional training in this area. The cohort size on the undergraduate programme has gradually expanded over its lifetime and staffing has been increased accordingly. The provider are also recruiting additional staff to contribute the delivery and management of this new MSc programme.
    - o Additionally, the provider is a large and well-established university, with strong internal procedures for ensuring quality and appropriate compliance on its programmes. This means that we can be confident there are no concerns or difficulties regarding sustainability of the new programme.

- **Effective programme delivery** –
    - o There are several internal procedures at the provider to ensure that programmes are being delivered effectively and appropriately. The Postgraduate/Undergraduate Education Committee sits within the School of Health Sciences (SHS) and oversees the development of programmes, and the appropriate implementation of quality and standards policies, teaching and assessment. The SHS's Annual School Action Plan is designed to make sure that programmes are responsive to National Student Survey feedback.
    - o The institution-level Curriculum Board and Scrutiny Panel provide oversight for other aspects of the programme. These arrangements, laid out by the provider, are in line with our understanding of how the provider operates. They will provide effective internal monitoring and so we do not need to explore this area further at this stage or in future stages.

- **Effective staff management and development** –
    - o Continuing professional development (CPD) is managed internally within the providerm bythe Centre for Innovation in Education and the Academy. All staff members within the provider are given opportunities to enhance their own skills in teaching and in research. It is compulsory for all teaching staff to go through a particular programme to support their skills. They are also required to haver quarterly meetings about their development needs and to have regular professional development reviews. In light of these arrangements, which will apply to the new programme, there were no concerns in this area and no issues which needed further investigation at this stage or at a future one.

- **Partnerships, which are managed at the institution level** –
    - o The provider already delivers an undergraduate programme in orthoptics. We were able to clarify with them through stage 1 that they will be using, and building upon, existing partnerships with

stakeholders, such as providers of practice-based learning, to support this programme. There are established mechanisms at the institution level to support, manage and develop stakeholder relationships, and the way these will be used on the proposed programme are closely aligned with approaches on existing approved programmes. Given these processes and arrangements, we did not consider it necessary to examine any further aspects of this area.

Non-alignment requiring further assessment: None.

<u>Quality, monitoring, and evaluation</u>

Findings on alignment with existing provision:
- **Academic quality** –
  - All programmes at the provider are subject to the University of Liverpool Quality and Enhancement Framework (QEF). This framework enables the provider to monitor the quality and effectiveness of individual programmes, and their adherence to relevant standards and requirements in the PSRB (Professional, Statutory and Regulatory) sphere. The proposed new programme will also come under the oversightof the QEF. This aligns closely with the HCPC understanding of how the institution works with regard to existing programmes. We therefore had no outstanding issues to explore regarding this area at this stage.
  - **Practice quality, including the establishment of safe and supporting practice learning environments** – It is an institutional requirement for all programmes to work closely with the relevant professional bodies to ensuring safe and supportive environments in practice-based learning. For this programme, there will be a requirement for anyone involved in clinical teaching on the programme to have passed either the British and Irish Orthoptic Society (BIOS) course, or the University of Liverpool Clinical Teaching Module. This is similar to the arrangements in existing provision at the provider, and is appropriately aligned with our understanding of how the provider ensures practice quality. The provider also clarified through stage 1 that there were annual audits of clinical teaching environments. Given this arrangement, we did not have any additional areas to explore in this section, either at stage 1 or later.
- **Learner involvement** –
- There are three key channels which are listed below on the proposed programme which sets the requirements for learner involvement.
  - the staff-student liaison committee, which receives feedback from learners.
  - , there is learner representation on the programme management team.
  - Third, learners have the opportunity to evaluate individual modules.

This matches our understanding of how other HCPC-approved provision at the provider works, and so we can conclude that the new arrangements align with the existing ones. In light of this we considered that there was no requirement for further investigation in this area,   either at stage 1 or later.

- **Service user and carer involvement** –There will be service user representation on the programme management team. Additionally, service users have been involved with programme development and will have opportunities to contribute to ongoing development. Service users will also be invited to take part on clinical assessment on the programme, to provide opportunities for their specific input in determining learners' knowledge and skills. These arrangements are similar to those on other programmes at the provider, and are required by the School of Health Sciences. Therefore we considered that no further investigation was required at this stage, or later, and that there is clear alignment between existing arrangements at the provider and the ones intended for this programme.

Non-alignment requiring further assessment: None.

<u>Learners</u>

Findings on alignment with existing provision:
- **Support** –
  For the new programme the arrangements for learner support will be closely modelled on those existing institutional arrangements. These are mostly intended to be handled at programme level, by the staff who are most familiar with individual learners and their needs. However, there are other support options across the institution, such as at the level of the School of Health Sciences and at the level of the university itself. Based on the information provided, these will the same as the arrangements in other areas of the provider's HCPC-approved provision. There is close alignment here and so no further investigation is needed.
- **Ongoing suitability** –
  The arrangements for monitoring the ongoing suitability of learners on this programme will be closely matched to those on other HCPC-approved programmes at the provider. The provider intends to use learners' performance in forma assessment, and their annual self-reporting, as methods to ensure that learners are continuing to meet the academic and professional standards for the programme. This matches our understanding of the provider's approach across its provision, and therefore we did not need to investigate any aspects of the approach further.
- **Learning with and from other learners and professionals (IPL/E)** –
  Interprofessional learning (IPL) is organised and co-ordinated at the level of the School of Health Sciences (SHS). Due to the provider having a wide range of allied health professional programmes, this approach should enable learners from this programme to learn with and from learners and practitioners from a number of relevant professions. The intended approach for the proposed programme is in line with our understanding of how the provider manages IPL on its other HCPC-approved provision. This means that we were satisfied that further investigation was not required and that the new programme would be able to work effectively.
- **Equality, diversity and inclusion** –
  As noted above, there is evidence the provider is committed to ensuring equality, diversity and inclusion (EDI) at the institutional level.   Individual programmes are required to follow the relevant policies in their engagement with learners. The provider's membership of schemes such as the Stonewall

Diversity Champions initiative suggests that there is a culture in which EDI issues are taken seriously. The provider states that the new programme will follow the existing institutional approach, which is taken by current HCPC-approved provision. Therefore we considered that there was appropriate alignment between the new proposal and the provider's institutional approach, with no need for further investigation.

Non-alignment requiring further assessment: None.

<u>Assessment</u>

Findings on alignment with existing provision:
- **Objectivity** – Similarly to the current programmes delivered by the provider, the proposed new programme will adopt the Liverpool University Framework for Postgraduate Modular Provision and the Code of Practice on Assessment. Through stage 1, we clarified withWe clarified with the provider how these policies function. They informed us the policies commit individual programmes to regular review of the fairness and appropriateness of their assessments, and to ensuring marking and moderation are undertaken in a transparent, objective and reasonable way. The provider's Postgraduate/Undergraduate Education Committee monitors adherence to these policies. The feedback from the institution feedsinto improvement mechanisms such as the Annual School Action Plan. In light of these arrangements, which align with our understanding of existing HCPC provision, we considered that no further investigation was needed.
- **Progression and achievement** – Similarly to the above, there is institutional oversight to ensure learners are provided with clear opportunities to progress and achieve on programmes. The new programme will be overseen in the same way by the Liverpool University Framework for Modular Provision and the Code of Practice on Assessment. Learners will have opportunities to raise concerns if they consider they are not able to progress appropriately, or if they are not being given chances to demonstrate their learning. Additionally, the provider states that the programme staff will regularly review their arrangements in these areas, and will have feedback from various sources in line with Liverpool's institutional arrangements noted through this section. We concluded therefore that in this area there was appropriate alignment for the new programme to existing institutional arrangements.
- **Appeals** – Arrangements for academic appeals at the provider are laid out in the Liverpool University Framework for Modular Provision and the Code of Practice on Assessment. Learners will be able to access information about appeals through the programme handbook and via online sources. The new programme will have these same procedures relating to appeals as the other HCPC-approved programmes and other allied health profession provision. Therefore, we considered that alignment in this area was strong and that no further investigation was needed.

Non-alignment requiring further assessment: None.

Outcomes from stage 1

We decided to progress to stage 2 of the process without further review through stage 1, due to the clear alignment of the new provision within existing institutional structures, as noted through the previous section

Section 3: Programme-level assessment

Programmes considered through this assessment

Programme name	Mode of study	Profession (including modality) / entitlement	Proposed learner number, and frequency	Proposed start date
MSc Orthoptics	FTA (Full time Accelerated)	Orthoptist plus POM sale/supply (OR)	20 learners, one cohort per year	25/09/2023

Stage 2 assessment – provider submission

The education provider was asked to demonstrate how they meet programme level standards for each programme. They supplied information about how each standard was met, including a rationale and links to supporting information via a mapping document.

Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their submission.

After their review of the documentation, the visitors considered that there were no areas requiring additional exploration through quality activity. They did make certain recommendations, which are set out in section 5 below.

Section 4: Findings

This section details the visitors' findings from their review through stage 2, including any requirements set, and a summary of their overall findings.

Conditions

Conditions are requirements that must be met before providers or programmes can be approved. We set conditions when there is an issue with the education provider's approach to meeting a standard. This may mean that we have evidence that standards are not met at this time, or the education provider's planned approach is not suitable.

The visitors were satisfied that no conditions were required to satisfy them that all standards are met. The visitors' findings, including why no conditions were required, are presented below.

Overall findings on how standards are met

This section provides information summarising the visitors' findings against the programme-level standards. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Findings of the assessment panel:
- **SET 1: Level of qualification for entry to the Register** –
    o this standard is covered through institution-level assessment.
    o The provider set out their policies in place in their approval request form and baselining document.
- **SET 2: Programme admissions** –
    The provider laid out a comprehensive account of their approach to recruitment in the programme handbook, addressing **SET 2.2 The selection and entry criteria must include appropriate academic and professional entry standards.** The normal criteria for this programme include an undergraduate science degree at 2:2 or above. The provider notes, however, that those with alternative qualifications, or relevant recent experience and study, will be considered on a case-by-case basis ([see the 'Admissions' section](#) in section 2 of this report, Institution-level assessment).
    o Applicants are also required to have scored 5-9 or A*-C in English Language, Maths and Science at GCSE, and to show strong familiarity with the orthoptic profession.Selection is via a values-based recruitment (VBR) interview with a combined academic-clinical panel. The visitors considered that SET 2.2 by the approach summarised above, because in their judgment it would ensure that those who entered the programme were likely to be well-positioned to successfully complete the programme, and practise safely and effectively in the profession.
    o The visitors agreed there is sufficient evidence to confirm the selection and entry criteria would allow learners to be able to meet our standards for registration upon completion of the programme.
- **SET 3: Programme governance, management and leadership** –
    The provider submitted the programme specification and the clinical placement handbook to illustrate the specific mechanisms used to ensure that they met **SET 3.5 There must be regular and effective collaboration between the education provider and practice education providers**. Practice educators, known on this programme as clinical tutors, have their own handbooks laying out what is expected of them, and how their work in practice-based learning links to the rest of the programme. There is also an annual Clinical Tutor Day, to maintain links between practice settings and the provider, and clinical tutors are able to have input to the programme formally via management meetings, and informally through the routine contacts in clinical settings.
    Through their feedback, the visitors communicated that this constituted strong evidence for mechanisms by which clinical settings kept in touch with the

provider, because there were clear and permanent formalised relationships between the provider and their practice-based learning partners.

SET 3.6 There must be an effective process in place to ensure the availability and capacity of practice-based learning for all learners was addressed by giving detail of a recent project by the programme team to expand the availability of orthoptics practice-based learning placements in the region. This project was undertaken in co-operation with the British and Irish Orthoptic Society (BIOS), the professional body for orthoptists. Information was also provided about the programme team's use of technology to make more effective use of existing placement capacity.

From this evidence, the visitors considered that the provider took the maintenance and expansion of capacity in practice-based learning seriously, and that they had taken clear steps to increase capacity where necessary. The visitors understood that the provider were both growing the actual number of placements and making better use of existing placements.

SET 3.9 states **There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme**. **SET 3.10** requires **Subject areas must be delivered by educators with relevant specialist knowledge and expertise**. These two SETs were addressed by the provider supplying curriculum vitaes for the programme staff. The visitors considered that staff team was adequate in number and had all the necessary expertise to run the programme effectively.

For SET 3.12, The resources to support learning in all settings must be effective and appropriate to the delivery of the programme, and must be accessible to all learners and educators, the provider cited the relevant part of the programme specification, which outlines the various ways in which learners are enabled to access resources both in the academic and clinical settings.

The visitors concluded therefore that the provider were taking the necessary steps to ensure that learners had the best possible access to resources for the programme (3.12).

The visitors considered that all these standards were met.

- **SET 4: Programme design and delivery** –
  SET 4.1 requires **The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register**, and **SET 4.2** states **The learning outcomes must ensure that learners understand and are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics**. To address these standards the provider submitted a standards of proficiency (SOPs) mapping document and a SETs mapping document, as well as citing the programme specification and the module specifications. These showed that the provider had matched learning outcomes to the SOPs, and to individual components of the standards of conduct, performance and ethics (SCPEs).

  SET 4 also requires providers to have a curriculum that is structured and designed in such a way as to prepare learners appropriately for safe and effective practice.

  SET 4.3 states **The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance**. The provider submitted as evidence the BIOS Orthoptics

Curriculum Framework and a narrative explaining how that had been the basis of their curriculum design.

The visitors concluded from this that the provider had taken care to base the programme closely on professional body requirements, although the visitors did make a [recommendation](#) in this area.

SET 4.4 requires **The curriculum must remain relevant to current practice**, and the provider cited the sections of the clinical placement handbook which lay out the opportunities for clinical tutors to feed into programme development.

The visitors concluded that this constituted a clear formal mechanism for ensuring that developments in clinical practice would be fed back to the programme by experienced clinicians, and so the standard was met.

SET 4.5, Integration of theory and practice must be central to the programme, was addressed by reference to the content of individual modules, all of which contain both theory and practice elements. Two modules in particular – ORTH421 Orthoptic Clinical Practice and Theory I, and ORTH424 Orthoptic Clinical Practice and Theory II – are designed to give learners an understanding of the integration of knowledge and skill.

The visitors considered that the standard was met as the provider had demonstrated that theory and practice were integrated in every part of the programme, and particularly in modules dedicated to explaining how academic knowledge fed into professional practice.

SET 4.6 states **The learning and teaching methods used must be appropriate to the effective delivery of the learning outcomes**. The provider addressed this standard by citing the diverse range of methods set out in the programme specification.

The visitors concluded from this that the standard was met because the provider had an appropriately diverse range of methods would be employed, including direct teaching, workshops, and virtual sessions.

SET 4.7 requires **The delivery of the programme must support and develop autonomous and reflective thinking**. The provider sought to show they met this standard by referring to a document called Programme/Subject Component Outcomes: Learning Outcomes and Skills, as well as citing the programme specification and the modules ORTH421 and ORTH424 noted above. Together these documents set out in which parts of the programme learners were particularly required to show and continuously improve their autonomy and their reflection. The visitors considered therefore that the standard was met, because autonomous and reflective thinking were required by specific modules and without passing those modules learners would not be able to complete the programme.

SET 4.8, The delivery of the programme must support and develop evidence-based practice, was addressed by citing the section of the programme specification which laid out the strategies and methods used on the programme for teaching and assessment. The provider also noted that every module included reflections on evidence-based practice, with two in particular – HEAL417 and HEAL418 – requiring learners to be closely familiar with research methods.

In light of this evidence, the visitors considered that the standard was met because the importance and nature of evidence-based practice were required by the research modules in particular, and without a clear understanding of evidence in professional practice learners could not complete the dissertation component.

- **SET 5: Practice-based learning** –
  SET 5.1 states **Practice-based learning must be integral to the programme**. The provider addressed this standard by citing an overview of the academic year, and by noting that the specific practice-based learning modules ORTH421 and ORTH424 integrated practice into the programme. Learners also develop clinical skills outside formal placement settings.
  SET 5.2 requires **The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency**. The provider cited the programme specification, the clinical placement handbook and the website of the British and Irish Orthoptic Society (BIOS), in order to show that the practice opportunities that would be available on the programme would enable learners to develop the whole range of necessary skills, and to understand what was required for professional practice.
  The visitors considered that both these standards were met, because guides to the programme structure showed that practice-based learning was both fully integrated into the programme as a whole and was structured such that it would support learners' progress and achievement in the programme.

  SETs 5.5 and 5.6 address the skills and knowledge of practice educators:
  There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning, and **Practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register**. The provider addressed SET 5.5 by referring to their participation in the BIOS project (see SET 3.6 above) which seeks to ensure appropriate both sufficient placement capacity and sufficient availability of qualified clinical tutors. For 5.6, they cited the section of the clinical placement handbook which laid out the necessary qualifications and characteristics of practice educators.
  The visitors considered that these standards were met. As regards practice educators, the visitors saw that the provider had committed considerable time and resource to putting in place solid local mechanisms for maintain an appropriate number of educators, and that they had clearly set out reasonable requirements to be a practice educator on the programme. The visitors did make a recommendation under SET 5.2.
- **SET 6: Assessment** –
  SET 6.1 states **The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register**. The provider cited the programme specification and the standards of proficiency (SOPs) mapping as demonstration that their assessment approach covered all the SOPs, and that the range of assessments used would thoroughly test the learners' ability to meet the SOPs by the time they completed the programme.
  SET 6.2 requires **Assessment throughout the programme must ensure that learners demonstrate they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.** The provider noted that a number of modules addressed the standards of conduct, performance and ethics (SCPEs), and that the assessment of these modules would require learners to understand the meaning and importance of the SCPEs. The particular modules

mentioned were those related to practice and to research methods – these had the most direct relevance to professional standards like the SCPEs. The visitors considered that these standards were met. Learners' ability to meet all the standards of proficiency (SOPs) was appropriately assessed through the programme, often by more than one method or at multiple points in the programme. Additionally the visitors were satisfied from the evidence reviewed that learners' understanding of their professional role and expectations as expressed in the standards of conduct, performance and ethics (SCPEs), was clearly and appropriately assessed in the various modules.

SET 6.5 states **The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes**. To meet this standard the provider cited the module descriptors and the programme specification, which between them lay out all the assessment methods used on the programme. The provider considered that all the methods used would measure learners' achievement of the learning outcomes effectively.

The visitors considered that this standard was met, because they considered, based on the module descriptors, that the provider had appropriate assessment mechanisms in place to identify whether or not the learners had met the learning outcomes as required.

Risks identified which may impact on performance: None.

Areas of good and best practice identified through this review:

The visitors considered that there were several areas of good and best practice that should be noted.

- They would like to commend the provider on the coherence and concision of the stage 2 documentary submission.
- They considered that the provider's co-operation with the professional body, the British and Irish Orthoptic Society (BIOS), was exemplary and was likely to lead to a strong, secure programme (cf., for example, SET 3.6 in 'Findings of the assessment panel' above).
- They considered that the provider's approach to the use of technology was to be commended, particularly in relation to the expansion of practice-based learning, and to the more effective use of existing placements (again, cf. SET 3.6 in 'Findings of the assessment panel').
- They commended the provider's commitment to equitable allocation of placements among learners.

Section 5: Referrals

This section summarises any areas which require further follow-up through a separate quality assurance process (the approval, focused review, or performance review process).

There were no outstanding issues to be referred to another process.

Recommendations

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. They do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

4.3 The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.

Recommendation: The education provider should consider whether any changes have been made to the British and Irish Orthoptic Society (BIOS) curriculum guidance which might require adjustments to programme content.

Reason: The visitors noted that the BIOS Curriculum Framework Document, which the provider cited in their evidence for SET 4, was due for review in 2021. They considered that it would be useful for the provider to clarify for their own benefit whether this review made any changes that might need to be reflected in the programme – if they have not already done so.

5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.

Recommendation: The education provider should consider whether learners in year two of the programme might need to be supported to meet learning outcomes related to clinical practice in the end of year assessments, when those assessments take place four months after the end of the practice-based learning.

Reason: The visitors noted that in the second year of the programme the year-end assessments, which would cover some of the clinical matters covered in a practice module, were a long period of time (four months) after the end of that practice module. They considered that it may be difficult for the learners to perform to their best in the practical components of those assessments when their previous opportunity to practice those skills was four months previously.

Section 6: Decision on approval process outcomes

Assessment panel recommendation

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that all standards are met, and therefore the programme should be approved.

Education and Training Committee decision

Education and Training Committee considered the assessment panel's recommendations and the findings which support these. The education provider was also provided with the opportunity to submit any observation they had on the conclusions reached.

Based on all information presented to them, the Committee decided that the programme is approved.

Reason for this decision: The Panel accepted the visitor's recommendation that the provider and its proposed programme have demonstrated they meet our standards and should receive approval.

Appendix 1 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Diagnostic Radiography	FT (Full time)	Radiographer	Diagnostic radiographer		01/09/1993
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/01/1998
BSc (Hons) Orthoptics	FT (Full time)	Orthoptist			01/09/1992
BSc (Hons) Orthoptics	FT (Full time)	Orthoptist		POM - Sale / Supply (OR)	01/09/2016
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/1999
BSc (Hons) Radiotherapy	FT (Full time)	Radiographer	Therapeutic radiographer		01/09/1998
BSc (Hons) Radiotherapy	PT (Part time)	Radiographer	Therapeutic radiographer		01/09/2004
BSc (Hons) Therapeutic Radiography & Oncology	FT (Full time)	Radiographer	Therapeutic radiographer		01/09/2019
BSc Radiotherapy	FLX (Flexible)	Radiographer	Therapeutic radiographer		01/01/1998
Doctorate in Clinical Psychology (D.Clin.Psychol)	FT (Full time)	Practitioner psychologist	Clinical psychologist		01/01/1993
Medicine Exemptions for Orthoptists	DL (Distance learning)			POM - Sale / Supply (OR)	01/01/2019
MSc Diagnostic Radiography (pre-registration)	FTA (Full time accelerated)	Radiographer	Diagnostic radiographer		01/01/2022
MSc Non-Medical Prescribing	PT (Part time)			Supplementary prescribing; Independent prescribing	01/09/2017
MSc Occupational Therapy (pre-registration)	FT (Full time)	Occupational therapist			01/01/2022
MSc Orthoptics	FTA (Full time accelerated)	Orthoptist		POM - Sale / Supply (OR)	25/09/2023
MSc Physiotherapy (pre-registration)	FT (Full time)	Physiotherapist			01/01/2022
Pg Dip Radiotherapy	FT (Full time)	Radiographer	Therapeutic radiographer		01/01/2010
Post Graduate Diploma (PGDIP) Therapeutic Radiography & Oncology	FT (Full time)	Radiographer	Therapeutic radiographer		01/01/2021