

DRAFT Standards for Approved Qualifications [Work-in-progress; version for Council, 13th May 2020]

[NOTE: This document is work-in-progress and still subject to further fine-tuning by our two Expert Advisory Groups (EAGs), consultation and verification. To be added; contents page, paragraph numbering and chapter headings.]

Introduction

Outcomes for Registration describe the knowledge, skill and behaviour individuals must meet in order to register as either a Dispensing Optician (Ophthalmic Dispensing) or an Optometrist. GOC approved qualifications¹ prepare students to meet these outcomes for entry to the register.

This document, the 'Standards for Approved Qualifications' describe the expected context for the delivery and assessment of the outcomes by a single point of accountability (SPA). We will use these standards, along with the outcomes, to decide whether to approve a qualification leading to registration as a Dispensing Optician or an Optometrist. The standards include requirements SPAs must meet to deliver an approved qualification; including protecting public and patients, curriculum design and delivery, assessment of outcomes and quality control. There are five standards, each supported by criteria which must be met if a Single Point of Accountability is to award a GOC-approved qualification.

'Standards for Approved Qualifications' will apply to approved qualifications leading to either registration as a Dispensing Optician or an Optometrist, and a modified version will apply to programmes leading to Contact Lenses Optician (for Dispensing Opticians) and Therapeutic Prescribing (for Optometrists) (Additional Supply, Supplementary Prescribing & Independent Prescriber). The standards are organised under the following headings:

1. Public and Patient Safety
2. Admission of Students
3. Assessment of Outcomes and Curriculum Design
4. Management, Monitoring and Review of Approved Qualifications
5. Leadership, Resources and Capacity

Assurance and Enhancement Design

Assurance and enhancement describes how we will gather evidence to decide whether qualifications delivered by a single point of accountability meet the outcomes and standards. Once designed, it will describe the procedures we will follow to receive and assess evidence from a single point of accountability for approval of a qualification, including evidence requirements, visits, annual, thematic, sample-based and periodic review and appeals.

¹ Act gives GOC powers to 'approve' 'qualifications'

Standards for Approved Qualifications

(Notes/ questions are indicated in italics)

Standard 1 - Public and Patient Safety

Approved qualifications must be delivered in a context which assures public and patient safety.

Criteria to meet this standard:

S1.1 - There must be policies and systems in place to ensure students understand and adhere to GOC's Standards of Practice.

S1.2 - There must be policies and systems in place to address concerns about student's fitness to practise. Where concerns are raised, they must be investigated and action taken, and reported to GOC as required. *(We know we need to work further to establish when student FtP needs to be escalated to GOC, and what can be resolved locally by the SPA)*

S1.3 – There must be policies and systems in place to ensure students do not put at risk patients or the public. This means that anyone who teaches, assesses, supervises, employs or works with students must ensure students practice safely and that students only undertake activity within their limits of competence, and are supervised at all times when with patients.

S1.4 - There must be policies and systems in place to ensure students on programmes leading to an approved qualification in Optometry or Ophthalmic Dispensing (Dispensing Opticians) understand it is an offence not to be registered as a student with the GOC.

Standard 2 – Admission of Students

Recruitment, selection and admission of students must be transparent, fair and appropriate for admission to a programme leading to registration as an Optometrist or Dispensing Optician.

Criteria to meet this standard:

S2.1 - 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 and character checks. *(To check – English language requirements)*

S2.2 – Recruitment, selection and admission processes must be fair, transparent and comply with relevant legislation, including equality and diversity. Selectors should be trained to apply selection criteria fairly, including training in equality, diversity and unconscious bias.

S2.3 - Information provided to applicants must be accurate and include the academic and professional entry requirements required for entry to the approved qualification; a description of the selection process and any costs associated with making the application; the approved qualification's approved status and the total costs/ fees for the approved qualification. If offers are made to applicants who do not meet published academic and professional entry requirements, the rationale for making such decisions must be explicit.

S2.4 – Recognition of prior learning, where offered, must be supported by effective and robust policies and systems which ensures students admitted at a point other than the start of a programme are able to meet the outcomes upon award of the approved qualification. Prior learning must be recognised in accordance with requirements set by the QAA and/or Ofqual/ SQA/ Qualification Wales and must not normally exempt students from summative assessments leading to the award of the approved qualification, unless summative assessments which form part of the recognition of prior learning can be evidenced as equivalent.

Standard 3 – Assessment of Outcomes and Curriculum Design

The approved qualification must be supported by an integrated curriculum and assessment that ensures students who are awarded the approved qualification meet all the outcomes at the required level (Miller's triangle; knows, knows how, show how & does).

Criteria to meet this standard:

S3.1 – There must be a clear assessment strategy for the award of an approved qualification. The assessment strategy must describe how the outcomes will be assessed, how assessment will measure student's achievement of outcomes at the required level (Miller's triangle) and how assessment leads to an award of an approved qualification.

S3.2 - Outcomes must be taught and assessed (diagnostic, formative and summative) in a progressive and integrated manner; so that the component parts, including professional and clinical experience, are linked into a cohesive programme of academic, clinical and professional study (ref – Harden's spiral curriculum) introducing, progressing and assessing knowledge, skills and behaviour until the outcomes are achieved.

S3.3 - The approved qualification must provide experience of working with patients (including patients with disabilities, children, their carers, etc); inter-professional learning (IPL); team work and preparation for entry into the workplace in a variety of settings (real and simulated) such as professional, clinical, practice, community, manufacturing, research, domiciliary and hospital settings. (*Ref-Harden's ladder of integration*). This experience must increase in volume and complexity as a student progresses through a programme and must be in addition to the experience gained in professional and clinical placements. (ref S3.14).

S3.4 – Curriculum design, delivery and the assessment of outcomes must involve and be informed by feedback from a range of stakeholders such as patients, employers, placement providers, members of the optometry 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.

S3.5 - 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 generally permitted.

S3.6- Assessment (including lowest pass) criteria, choice and design of assessment items (diagnostic, formative and summative) leading to the award of an approved qualification must ensure safe and effective practice and be appropriate for a qualification leading to registration as an Optometrist or Dispensing Optician. Summative assessments demonstrating unsafe practice must result in failure.

S3.7 – Assessments must be robust, valid and reliable. 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 professional or clinical placements, in the workplace or during inter-professional learning.

S3.8 – Assessments must be fairly conducted, ensure equity of treatment for students, reflect best practice and be routinely monitored, developed and quality-controlled. This includes assessments which might occur during professional or clinical placements, in the workplace or during inter-professional learning.

S3.9 - There must be effective and robust policies and systems in place to ensure that where appropriate, reasonable adjustments can be made to teaching and assessment to help students with specific needs demonstrate they meet the outcomes. Teaching, learning and assessment methods may be modified to ensure no student is disadvantaged.

S3.10 - There must be policies and systems in place to plan, monitor and record student's achievement of outcomes leading to the award of the approved qualification.

S3.11 – The approved qualification must be a qualification listed on one of the national frameworks for higher education qualifications for UK degree-awarding bodies² (The Framework for Higher Education Qualifications of Degree-Awarding Bodies in England, Wales and Northern Ireland which applies to England, Wales and Northern Ireland, The Framework for Qualifications of Higher Education Institutions in Scotland which applies in Scotland), or a qualification regulated by Qfqual, SQA or Qualifications Wales.

S3.12 - Outcomes must be delivered and assessed in an environment which places study in an academic, clinical and professional context, is informed by research and provides opportunities for students to develop as learners and future professionals.

S3.13 – 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 using a range of procedures, drawing upon the strengths and opportunities of the single point of accountability.

S3.14 – The approved qualification must integrate at least 1600 hours/ 48 weeks of patient-facing professional and clinical experience. Professional and clinical experience may take place in one or more 'blocks' of time and may take in one or more sectors of practice.

S3.15 – Outcomes delivered and assessed during professional and clinical experience must be clearly identified, be included within the assessment strategy and fully integrated within the programme leading to the award of an approved qualification.

S3.16 – The choice of outcomes to be taught and assessed during professional and clinical experience and the choice and design of assessment items must be informed by feedback from a variety of sources, including patients, employers, placement providers and members of the eye-care team.

S3.17 - Assessments of outcomes during periods of professional and clinical experience must be carried out by an appropriately trained and qualified GOC Registrant or other statutorily registered healthcare professional who is competent to supervise and measure student's achievement of outcomes at the required level (Miller's triangle).

S3.18 - Students must have regular and timely feedback to improve their performance, including feedback on their performance in assessments.

S3.19 – If a student studies abroad for parts of the approved qualification, the single point of accountability must be able to evidence how the outcomes studied / assessed abroad (if any) meet these standards

² **Note on Degree awarding powers** A UK higher education provider (typically a university) has the power to award degrees, conferred by Royal Charter, or under Section 76 of the Further and Higher Education Act 1992, or under Section 48 of the Further and Higher Education (Scotland) Act 1992, or by Papal Bull, or, since 1999, granted by the Privy Council on advice from QAA (in response to applications for taught degree awarding powers, research degree awarding powers or university title).

Standard 4 – Management, Monitoring and Review of Approved Qualifications.

Approved qualifications must be managed, monitored, reviewed and evaluated in a systematic and developmental way, through transparent processes which show who is responsible for what at each stage.

Criteria to meet this standard:

S4.1- The single point of accountability is responsible for the award of the approved qualification, the assessment (measurement) of students' achievement of the outcomes leading to award of the approved qualification, and the approved qualification's development, delivery, management quality control and evaluation.

S4.2 - The single point of accountability must be able to accurately describe its corporate form, its governance and lines of accountability in relation to its award of the approved qualification.

S4.3 - The single point of accountability 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.

S4.4 - The single point of accountability may be owned by a consortium of organisations or some other combination of separately constituted bodies. However constituted, the single point of accountability must be legally incorporated and the relationship between the constituent parts forming the single point of accountability must be clear.

S4.5- The single point of accountability must have a named person who will be the primary point of contact for the GOC.

S4.6 - There must be agreements in place between the different organisations/ people (if any) that contribute to the delivery and assessment of the outcomes, including during periods of integrated professional and clinical experience. Agreements must define the role and responsibility of each organisation/person, be regularly reviewed and supported by management plans, systems and policies that ensure the delivery and assessment of the outcomes meet these standards.

S4.7- There must be policies and systems in place to ensure the delivery and assessment of outcomes is systematically monitored and evaluated using best available evidence, and action taken to address concerns. Evidence will be required to show that as a minimum there are:

- Academic feedback systems for students and placement providers
- Student consultative mechanisms
- Input and feedback from external stakeholders (public, patients, employers, commissioners, former students, third sector bodies, etc.)
- Outcomes of evaluations of resources and capacity and how evaluations of resources and capacity are implemented

To ensure that;

- Provision is relevant and current, and changes are made promptly to teaching materials and assessment items to reflect significant changes in practice and/or research
- The quality of teaching, learning support and assessment is appropriate
- The quality of placements, professional and clinical experience, IPL and work-based learning, including supervision, is appropriate

S4.8 - There must be effective policies and systems in place for the selection, appointment, support, training and responsibilities of External Examiner(s) and/or Internal and External Moderator(s)/ Verifiers appointed by the single point of accountability, and for feedback on action to External Examiners and/or Internal and External Moderators/ Verifiers.

S4.9 External Examiners and/or Internal and External Moderators/ Verifiers must have the appropriate skills, training and support to carry out their role effectively.

S4.10 The single point of accountability must know how and by whom a student is being supervised during periods of professional and clinical experience. All supervisors must be trained and appropriately experienced to act as supervisors.

S4.11 – There must be effective policies and systems in place for students and for anyone who teaches, assesses, supervises, employs or works with students to provide feedback and raise concerns. Concerns, if raised, must be considered fairly and any action clearly documented.

S4.12 – There must be an effective mechanism to identify risks to the quality of the delivery and assessment of the approved qualification and to identify areas requiring development.

S4.13 – The single point of accountability must notify GOC of any major events and/or changes to the delivery, assessment and quality of the outcomes, the organisation, resourcing and constitution of the single point of accountability as well as any relevant regulatory body reviews.

Standard 5 – Leadership, Resources and Capacity

Leadership, resources and capacity must be sufficient to ensure the outcomes are delivered and assessed to meet these standards in an academic, professional and clinical context.

Criteria to meet this Standard:

S5.1 - There must be a sufficient and appropriate level of ongoing resource to deliver the outcomes to meet these standards, including physical resources that are fit for purpose.

S5.2 - There must be sufficient and appropriately qualified and experienced staff to teach and assess the outcomes, including supervision. This must include;

- An appropriately qualified and experienced programme leader, who must be a GOC registrant (Optometrist or Dispensing Optician).
- Sufficient staff responsible for the delivery and assessment of the outcomes who are GOC registrants and other suitably qualified healthcare professionals. As a minimum requirement, at steady state, least four FTE must be GOC registrants; (one of whom may be the programme leader).
- Sufficient supervision of student's professional or clinical placements by GOC registrants who are appropriately trained and supported in their role.
- Other members of the eye-care and healthcare team, who should be registered healthcare professionals.

S5.3 - There must be policies and systems in place to ensure anyone delivering an approved qualification is appropriately qualified and supported to develop in their professional, clinical, supervisory, academic and/or research roles. This must include;

- Opportunities for CPD, including personal and profession-specific development.
- Effective induction, supervision, peer support, mentoring and CPD.
- Realistic workload for anyone who teaches, assesses, supervises, employs or works with students.
- For teaching staff, opportunity to gain teaching qualifications.
- Effective appraisal, performance review and career development support.

S5.4 - There must be sufficient and appropriate learning facilities to deliver and assess the outcomes. This must include;

- Sufficient and appropriate library and other information and IT resources.
- Access to specialist resources, including textbooks, journals, internet and web-based materials.
- Specialist teaching, learning and clinical facilities to enable the delivery and assessment of the outcomes.
- Enrichment activities, which may include non-compulsory, non-assessed elements.

S5.5 - Students must have effective support for health, conduct, academic, professional and clinical issues.