

DRAFT Assurance and Enhancement Method 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.]

About this document

This document, 'Assurance and Enhancement Method for Approved Qualifications' describes how we will gather evidence to decide whether qualifications leading to registration as either a Dispensing Optician or an Optometrist meets our outcomes for registration and standards for approved qualification in accordance with the Opticians Act 1989 (as amended 2005). This document, combined with two other documents; 'Outcomes for Registration' and 'Standards for Approved Qualifications' will replace our Quality Assurance Handbooks for optometry and ophthalmic dispensing, including the list of required core-competences and the numerical requirements for students' practical experiences contained within the handbooks.

In preparing this document we were advised by two Expert Advisory Groups (EAGs) to ensure our proposed assurance and enhancement method protected and benefited the public, safeguard patients and secured the health of service-users. We would like to thank everyone who took the time to help us develop our proposals.

The document will remain under review, and feedback and suggestions for improvements are welcome, and should be directed, in the first instance, to the GOC Education Manager education@optical.org.

Introduction

This new assurance and enhancement method is one of the three key 'Education Strategic Review' (ESR) deliverables, alongside the 'Outcomes for Registration' and 'Standards for Approved Qualifications.'

The design of our new assurance and enhancement method supports our outcomes-orientated approach and moves away from seeking assurance that our requirements are met by measuring inputs to an emphasis on evidencing outcomes, very much in line with approaches taken by other statutory healthcare regulators, professional and chartered bodies. This document describes the processes we will follow to receive and assess evidence from a single point of accountability (SPA) for approval of a qualification leading to registration as either a Dispensing Optician or an Optometrist, including evidence requirements, reviews, monitoring and appeal.

The method statement does not attempt to describe every permutation of assurance and enhancement. Instead, it establishes the framework for gathering and assessing evidence to inform a decision as to whether to approve a qualification, and sets out the arrangements for annual, thematic, sample-based and periodic reviews, as well as our process for managing serious concerns, and the type and range of evidence a single point of accountability may consider providing to support this process. Underpinning our approach is a greater emphasis on the views of patients, service users, the public, commissioners and employers, as well as the views of students and previous students in the evidence we consider, to ensure the qualifications we approve are responsive to the rapidly changing

landscape in the delivery of eye-care services across the United Kingdom as well as the needs of patients and service users. Higher Education across the United Kingdom is also undergoing rapid change, not least as a result of the COVID-19 emergency, and coupled with increased expectations of the student community and their future employers, we are sensitive to the demands of the context of delivery of approved qualifications.

Two documents underpin our assurance and enhancement methodology. They are;

Outcomes for Registration

'Outcomes for Registration' describe the knowledge, skill and behaviour individuals must meet in order to register as either a Dispensing Optician or an Optometrist. GOC approved qualifications¹ prepare students to meet these outcomes for entry to the register. Each outcome is described using a level based on an established competence and assessment hierarchy known as 'Miller's Pyramid of Clinical Competence' and are organised under seven categories: Person Centred Care, Communication, Lifelong Learning, Ethics and Standards, Risk, Clinical Practice, Leadership and Management.

Standards for Approved Qualifications

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 the 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).

Legal basis for Assurance and Enhancement

Our powers to undertake assurance and enhancement are described in Sections 12 and 13 of the Opticians Act 1989 (as amended 2005). The act requires GOC to approve qualifications which *'appears to the Council to be granted to candidates who reach such a standard of proficiency at a qualifying examination as to secure to them adequate knowledge and skill for the practice of their profession'* and appointing visitors (which we call 'Education Visitors') to report to the GOC on the *'nature of the instruction given,'* the *'sufficiency of the instruction given'* and *'the assessments on the results of which approved qualifications are granted'* as well as *'any other matters'* that GOC may decide.

The act also gives powers to GOC to approve *'any institution where the instruction given to persons training as opticians appears to the Council to be such as to secure to them adequate knowledge and skill for the practice of their profession'*

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

Under section 8(1) of the Opticians Act 1989 (as amended 2005) '*persons*' with an approved qualification '*granted to him after receiving instruction from one or more of the institutions so approved*' and '*adequate practical experience in the work of an Ophthalmic [now referred to as Optometrists] or Dispensing Optician*' are entitled to be registered in the appropriate register.

Assurance and Enhancement

Assurance evidences that qualifications delivered by a single point of accountability meet our minimum requirements for '*adequate knowledge and skill.*' These minimum requirements are described in accordance with the Opticians Act 1989 (as amended 2005) in our document '*Outcomes for Registration.*' A quality enhancement process goes further than establishing that minimum standards are met. Enhancement helps us demonstrate we are meeting our statutory obligation to understand both the '*nature*' and the '*sufficiency*' of instruction provided and in the assessment of students, and provides an opportunity to foster innovation, enhance the quality and responsiveness of provision to meet the needs of patients, public and service users, as well as share good practice.

Geographic Scope

The GOC may approve qualifications delivered and/or assessed outside of the United Kingdom which meet our standards and outcomes, provided the qualifications are taught and assessed in English. (*Check: English/Welsh Language requirements*). Assurance and enhancement activity undertaken outside the United Kingdom will be charged for on a full cost recovery basis.

Assurance and Enhancement Method Statement

Approved qualifications must meet the criteria set out in the following two documents;

- Outcomes for Registration, approved by GOC Council on XX date, which describe the knowledge, skill and behaviour individuals must meet in order to register as either a Dispensing Optician (Ophthalmic Dispensing) or an Optometrist in the United Kingdom.
- Standards for Approved Qualifications, approved by GOC Council on XX date, which describe the expected context for the delivery and assessment of the outcomes by a single point of accountability (SPA).

Timescale (Implementation)

All new qualifications leading to registration as a Dispensing Optician (Ophthalmic Dispensing) or an Optometrist applying for GOC approval at or after 1st March 2021 (*date subject to consultation*) will be expected to meet the outcomes for registration and standards for approved qualifications.

The process for applying for our approval of qualifications after 1st March 2021 (*date subject to consultation*) is described in section XX.

All currently approved qualifications leading to registration as a Dispensing Optician (Ophthalmic Dispensing) or an Optometrist have three options;

- a. Choose to 'teach out' existing programmes to a timescale approved by us, alongside developing, seeking approval for and recruiting to a 'new' approved qualification (which meets the outcomes for registration and standards for approved qualifications).
- b. Develop, seek approval for and recruit to a 'new' approved qualification (which meets the outcomes for registration and standards for approved qualifications) and migrate some or all of the existing cohorts onto the 'new' approved qualification whilst 'teaching out' the remainder, to a timescale approved by us.
- c. Choose to 'teach out' existing programmes to a timescale approved by us and partner with another organisation or institution to develop, seek approval for and recruit to a 'new' approved qualification (which meets the outcomes for registration and standards for approved qualifications).

Exceptions will be dealt with on a case-by-case basis.

The processes and requirements contained in the current Quality Assurance Handbook will apply to all existing GOC approved qualifications during the teach out or migration phase until currently approved qualifications cease to exist, although the expectation is that students on existing programmes should benefit from new teaching, assessment, interprofessional learning (IPL), work-based learning (WBL), experiential learning and placement opportunities if it is feasible to do so. In addition, and in consultation with providers, we will set out a timescale for when recruitment of new students to currently approved qualifications for ophthalmic dispensing or optometry will cease.

Scope of Evidence

The outcomes for registration and standards for approved qualifications are each supported by an evidence framework (which will be published on the GOC website and available to

SPAs on request) which providers are expected to complete to demonstrate their qualification meets our requirements.

Within each evidence framework we have listed suggested sources of evidence which a single point of accountability (SPA) may wish to consider providing to demonstrate their qualification meets our outcomes and standards. Demonstrating that the outcomes and standards are met should not be unduly onerous for a SPA, and guidance is given below on the type of evidence SPA may like to submit as part of their application. In many cases, this evidence should be readily available standard institutional documentation which either provides context, such as published institutional-level policies, or qualification-specific information used at programme level by staff, students or stakeholders. Whilst we anticipate that the majority of evidence sources will be generic, some evidence may, by necessity, be bespoke, to support engagement with this assurance and enhancement method. However, wherever possible we have limited the requirement for bespoke evidence (for example programme mapping); and will continue to do this to ensure our assurance and enhancement method is not overly burdensome for SPAs and is proportionate to the decisions we need to make.

SPAs are encouraged to have an early conversation with our Education Team if a SPA can demonstrate that meeting a standard (but not an outcome, as all outcomes must be met) would be inappropriate given the context, duration, location or size of a qualification, to ensure appropriate application of our standards, for example, for programmes provided by specialist institutions or higher education providers outside the UK.

As an indication, evidence sources may include (but is not limited to):

In relation to the outcomes:

- Programme specifications, module descriptors, unit handbooks, module or unit evaluation reports, curricula, timetables, mapping of outcomes to programme specification, examples of teaching and assessment materials, etc.
- Description of assessment strategy and approaches to standard setting, copies of academic regulations and policies for the quality control of assessments, examples of assessment schemes, mark sheets, model answers, etc.
- External examiner reports and evidence of responses to issues raised, reports from internal and external moderators, copies of external examiner/ internal and external moderator recruitment, retention and training/support policies, examination board terms of reference, minutes, etc.
- Student feedback, and evidence of responses to issues raised.
- Evidence of stakeholder engagement and feedback in qualification design, delivery and assessment, and evidence of responses to issues raised.
- Description of facilities and resource utilisation to support the teaching and assessment of the outcomes, supervision policies, and safe practice, etc.

In relation to the standards:

- Information about the SPA, its corporate form, organisation, leadership and lines of responsibility, evidence of the contractual relationships underpinning the delivery and assessment of the award of the approved qualification, service/local level agreements, agreements between stakeholders/ placement providers, management plans, etc.

- Information about the approved qualification, its credit load, length, form of delivery, type of academic award; evidence of internal or external validation/ approval by relevant awarding body, example certificate, programme management plans, diagrams, etc.
- Copies of the SPA's admission policies, admissions data, recruitment and selection processes, application packs, RPL/APL policies, advertising and promotional activity, fee schedules, evidence of selectors' training in equality, diversity and unconscious bias, fitness to practise policies, etc.
- Evidence of engagement with service users, patients and public, employers and other stakeholders in qualification design, delivery and assessment, copies of relevant policies, stakeholder identification strategies, minutes of stakeholder engagement meetings/ events and feedback and evidence of responses to issues raised,
- Description of the SPA's quality control procedures at institutional and qualification level, evidence of responses to external examiner/ internal and external moderator reports, end of programme evaluations, NSS results, reports from other quality control or assurance bodies, and responses to issues raised, copies of student feedback, minutes of staff-student committees, and evidence of action in relation to issues raised, copies of examination regulations, examination board minutes, verification reports, etc; evidence of SPA policies and their implementation in areas such as academic misconduct, adjustments, data protection, EDI, complaints, etc,
- Description of strategies for teaching, learning and assessment, including approaches to assessment design, standard setting, assessment tariff and assessment load, the integration of professional and clinical placements; copies of placement contracts; supervision policies, evidence training of and feedback from placement providers, progression data, EDI data, etc.
- Evidence that there are mechanisms for securing sufficient levels of resource to deliver the outcomes to the required standards, including historic and projected resource allocation and review; evidence of physical and virtual learning resources, accommodation, equipment and facilities and assessment of their utilisation; copies of risk assessment and risk mitigation plans, etc.
- Evidence the staff profile can support the delivery of the outcomes and the student experience, including workload planning, staff CVs and staff deployment/ contribution to the teaching and assessment of the outcomes, staff/student ratios, copies of policies describing the training, induction and support for those supervising students, external examiners, expert patients and other stakeholders and evidence of their efficacy, etc.
- Any other evidence and SPA may like to include to demonstrate its qualification meets our outcomes and standards.

Evidence Collection and Consideration

A decision as to whether to approve a qualification or withdraw approval from a qualification will depend upon the evidence provided. For that reason we rely on SPAs responsiveness to engage in our assurance and enhancement activity and willingness to provide the information we need to support our decision making processes.

In making our decisions we aim to apply a fair and balanced consideration of evidence, using an approach based on the stratification of risk to decide which criteria within our outcomes and standards we will require SPAs to evidence; how we will gather that evidence (the frequency and type of assurance and enhancement activity); how we will we consult our

Education Visitors in the consideration and interrogation of the evidence provided, and how this informs our decision-making.

There will be four methods of assurance and enhancement which together will provide insight as to whether a qualification meets our outcomes and standards;

- Annual return.
- Thematic review (of standards).
- Sample-based review (of outcomes).
- Periodic review (of SPAs and approved qualifications).

Assurance and Enhancement: Recommendations

Annual Return. All approved qualifications must submit an annual return, a key part of our assurance method. The specification for the annual return will be based on the evidence framework and published, along with the timeframe for the annual return, by the GOC from time to time. Failure to submit an annual return may contribute to the decision to refuse or withdraw a qualification's approval. The results of SPAs annual returns will inform our risk stratification, the timing and focus of the SPA's periodic reviews and the basis for our thematic and sample-based reviews.

Thematic and Sample-based Reviews. Thematic and sample-based reviews will be a key part of our enhancement method, providing evidence of the 'nature' and 'sufficiency' of approved qualifications and their assessment. They are primarily an enhancement activity, their focus is to draw out key themes, areas of good practice and areas for improvement in individual SPAs, across a group of SPAs, or on a regional/ national and/or UK basis. All approved qualifications must participate in thematic and sample-based reviews. The specification for a thematic review will be based on the criteria contained within the standards and published along with the timeframe for participation by the GOC from time to time. The focus of sample-based reviews will be the criteria contained within the outcomes; to better understand how a criterion is introduced, developed, assessed and integrated within an approved qualification, how a student's achievement of the outcome at the right level (at Miller's triangle) is measured and the pedagogic approaches underpinning its teaching and assessment. Like thematic reviews, the specification for a sample-based review will be published along with the timeframe for participation by the GOC from time to time. Sample-based reviews may be undertaken as part of a SPA's periodic review or undertaken directly by GOC and/or co-commissioned alongside thematic reviews by an external contractor. Alongside annual review, thematic and sample-based reviews will inform our risk stratification of approved qualifications and the timing and focus of the SPA's periodic reviews.

Periodic Review. All approved qualifications and qualifications applying for approval will be subject to periodic review. Periodic review is a 'deep dive' into an approved qualification's ability to meet the outcomes and standards. It may be desk-based, involve an on-site visit or visits, and/or physical or virtual meetings. The frequency and focus of a periodic review will be informed by the risk profile of the qualification, which includes factors such as, but not limited to; the results of annual returns, thematic and sample-based reviews, discharge of previously applied conditions and/or serious concerns review. The specification for a SPA's periodic review will be based on the evidence framework and the risk profile of the qualification. The prime purpose of a periodic review is assurance, i.e. whether minimum standards are met.

The recommendation to Council or Registrar (as appropriate) as a result of periodic review will be;

For currently approved qualifications

- a. The qualification continues to meet the outcomes and standards (subject to annual returns, thematic and sample-based reviews). Standard conditions will apply.
- b. The qualification will meet all outcomes and standards if specified conditions are met within a stated timeframe (subject to annual returns, thematic and sample-based reviews). (i.e. the qualification has not demonstrated it meets a particular outcome and/or standard.) Action must be taken by the SPA to address the condition within the stated timeframe. Standard conditions will apply.
- c. The qualification does not meet the outcomes and standards, and a redesign and/or extensive development work is likely to be necessary such that the qualification would have to reapply for approval.

For qualifications applying for approval

- d. The qualification is likely to meet the outcomes and standards (subject to annual returns, thematic and sample-based reviews). Standard conditions will apply.
- e. The qualification is likely to meet the outcomes and standards if specified conditions are met within a stated timeframe (subject to annual returns, thematic and sample-based reviews). Standard conditions will apply.
- f. The qualification does not meet the outcomes and standards; a redesign and/or extensive development work is likely to be necessary such that the qualification would have to reapply for approval.

Standard conditions will be applied to approved qualifications and qualifications applying for approval, and adherence to standard conditions monitored through annual and thematic reviews.

Decision Making

A decision as to whether to approve a new qualification, i.e. a qualification not previously approved by us, will be the responsibility GOC Council. (d,e)

A decision to withdraw approval of an approved qualification, i.e. a qualification already approved by us, will be the responsibility GOC Council. (c)

All other decisions regarding approval of qualifications and applications for qualification approval will be the responsibility of the GOC Registrar. The Registrar may delegate some or all of these decisions according to our scheme of delegation. (a,b,f)

Decisions about the approval of a qualification or to withdraw or refuse the approval of a qualification will be informed by the advice of our Education Visitors. In making its decision, Council, the Registrar, and those to whom the Registrar has delegated such decisions may choose accept, reject or modify advice from our Education Visitors in relation to the qualification under consideration.

The Council, the Registrar, and those to whom the Registrar has delegated such decisions, may defer their decision to approve a qualification, or to withdraw or refuse the approval of a qualification in order to request further information/evidence from the SPA, or to consult the statutory advisory committees and/ or EVs, or seek other such advice as necessary.

Date of Approval

A decision to approve a qualification will include the date the qualification is approved from, which shall normally be date of the final examination board for the first graduating cohort of students.

Withdrawal

A SPA may, by giving notice, withdraw its qualification from our assurance and enhancement process. This means that the qualification ceases to be approved by us and students will not be eligible to register as either an Optometrist or a Dispensing Optician.

In these circumstances, the SPA must inform us how the interests of students currently studying on the approved qualification will be best served. Withdrawal from our assurance and enhancement process does not preclude the SPA from making a fresh application for qualification approval at some point in the future. In consultation with the SPA, we will set out a timescale for the SPA to join/rejoin the process.

If, through assurance and enhancement (annual return, thematic and sample-based review and/or periodic review) a SPA fails to demonstrate that their qualification meets our outcomes for registration and/or standards for approved qualifications, and/or does not co-operate with us in the discharge of our regulatory duties, we may decide to seek to withdraw our approval from its qualification. Should we decide to withdraw approval, we will follow the statutory process as outlined in the Opticians Act 1989 (amended 2005). In these circumstances, we will work closely with the SPA, who retains responsibility for and must act at all times in the best interests of students studying on the approved qualification.

SPAs have the right to appeal a decision to withdraw our approval of its qualification, in accordance with the provisions of Section 13 of the Opticians Act 1989 (amended 2005). In the event that GOC Council decides to withdraw or refuse approval of a qualification (whether entirely or to a limited extent), an appeal may be made to the Privy Council within one month of the decision of Council being confirmed to the SPA in writing.

Publication

We will publish a list of approved qualifications and reports from our assurance and enhancement activity.

Approval of New Qualifications

We have a staged approach to the approval of qualifications not currently approved by us. The number, frequency and specification for each stage will vary depending on the proposed qualification's risk stratification, which, broadly, can be summarised as;

- a. Lower risk Adapting an existing approved qualification to meet the outcomes for registration and standards for approved qualifications
- b. Lower risk 'Teaching out' or 'migrating' students from existing programmes alongside developing, seeking approval for and recruiting to a 'new' approved qualification.
- c. Medium risk 'Teaching out' or 'migrating' students from existing programmes alongside developing, seeking approval for and recruiting as the SPA for a 'new' approved qualification in a partnership or contractual arrangement with one or more other organisations or institutions.

- d. Higher risk One or more organisations or institutions with no track record of approved qualification delivery choosing to apply as the SPA to develop, seek approval for and recruit to a 'new' approved qualification.

The reason for this stratified approach is that organisations or institutions with no track record of delivering approved qualification and SPAs comprised of one or more partners or with complex contractual arrangements are more likely to be at risk of failing to meet our outcomes and standards than existing providers who are adapting existing approved qualifications within an established and resourced infrastructure, or who are developing new qualifications with much of the required infrastructure in place.

The stages are:

Stage One. Initial proposal from the SPA for the proposed qualification. This stage will explore the strategic intent for the proposed qualification, the rationale for its design, the proposed approach to the integration of clinical and professional placements and supporting infrastructure, the proposed corporate form of the SPA and its management, and how the views of stakeholders, including patients, service-users, employers, commissioners and the public will inform the development, teaching and assessment of the proposed qualification, the draft business case and an outline of the investment necessary to ensure its success, and key risks. The evidence to support stage one is normally a written submission from the SPA, based on the evidence framework, and supported by a meeting with us (at our offices or virtually) if necessary. Stage one may be repeated, particularly for applications stratified as medium or higher risk, until there is confidence the outcomes and standards are likely to be met and the SPA is ready to move onto stage two (which is a decision of the Registrar, informed by advice from EVPs). The output of stage one will be a private report to the provider.

Stage Two 2. Stage two will examine the proposed qualification design and its resourcing in more depth (including, for applications stratified as medium or higher risk, investment in key appointments and infrastructure made between stage 1 and stage 2). This stage will consider the business case, investment and proposed pedagogic approach to the integrated qualification, the development of learning, teaching and assessment strategies, the involvement of patients, service-users, employers, commissioners and the public in qualification design and proposed delivery, and preparedness for delivery for the first cohort of students, the inter-professional learning strategy and the plan for professional and clinical placements. By the end of stage two the SPA will be fully formed; all arrangements with partners (if required) will be in place, as will the investment necessary to ensure the qualification's successful implementation. The evidence to support stage two will normally a written submission from the SPA, based on the evidence framework, and supported by a meeting with us either at the GOC offices or at the SPA (or virtually) if necessary. Stage two may be repeated, particularly for applications stratified as medium or higher risk, until there is confidence the outcomes and standards are likely to be met and SPA is ready to move onto stage three (which is a decision of the Registrar, informed by advice from EVPs). The output of stage two will be a private report to the provider.

Stage Three. The purpose of stage three will be to assess the readiness of the SPA to begin recruiting students as an '*approved training establishment*' under Section 8A(2) of the Opticians Act 1989 (amended 2005). The focus will be on detailed curriculum and assessment design, the SPAs approach to recruitment and selection of students and preparedness to commence delivery of the approved qualification. Stage three will confirm that the resourcing of the qualification, as described in stages one and two, is in place (including, for applications stratified as medium or higher risk, investment in key

appointments and infrastructure made between stages two and three). By stage three the SPA will also be expected to evidence good progress in implementing plans approved at stage two. As stage three represents the highest risk to GOC in terms of its decision-making, the evidence to support stage three will normally be written submission from the SPA, based on the evidence framework and, for applications stratified as lower risk, a meeting with us either on site or at the GOC (or virtually if necessary). For applications stratified as medium or higher risk, the on-site (or virtual) visit may be based on the format of a periodic review. Stage three may be repeated, particularly for applications stratified as medium or higher risk, until there is confidence the outcomes and standards are likely to be met and SPA is ready to move onto stage four (which is a decision of the Registrar, informed by advice from EVPs). The output of stage three will permission to commence recruiting students to the new qualification as an *'approved training establishment'* under Section 8A(2) of the Opticians Act 1989 (amended 2005) as well as a published report. (SPAs are reminded that the qualification is not approved until a decision of Council is made post stage 5, and to ensure recruitment & advertising material conforms to our standard conditions.)

Stage Four (a,b,c, etc.). Stage four is repeated each year until the first cohort of students, or students migrated across into the programme, reach the final year's study. The focus of stage four is on the delivery and assessment of the integrated qualification, including its staffing, resourcing and infrastructure, risk mitigation and progress in implementing plans approved at stage two, alongside preparedness for the delivery for the next, and most importantly, final, academic year. At stage four patient, servicer-user, employer, commissioner and public engagement in qualification delivery, assessment and review is expected, along with evidence of an increasing volume of inter-professional and work-based learning as students progress through the qualification. At each stage four (a, b, c, etc.) the SPA's preparedness for, and implementation of, its plan for the integration of professional and clinical placements will be examined, as well as its reflections on implementing plans approved at stage two, and any changes it proposes as a result of student and stakeholder feedback. As stage four represents a higher risk to GOC in terms of its decision-making, the evidence to support stage four will normally be written submission from the SPA, based on the evidence framework and, for applications stratified as lower risk, a meeting with us either on site or at the GOC's offices (or virtually if necessary). For applications stratified as medium or higher risk, the on-site (or virtual) visit may be based on the format of a periodic review. Stage four may result in conditions being imposed, which can include halting recruitment for one or more cohorts, until there is confidence the outcomes and standards are likely to be met and the SPA is ready to move to stage five (which is a decision of the Registrar, informed by advice from EVPs). If a SPA is asked to halt recruitment and/or if the decision of the Registrar is that there is no confidence the SPA is ready to move to stage five, the qualification will cease to be considered for GOC approval and students will not be eligible to register as either an Optometrist or a Dispensing Optician.

In these circumstances, the SPA must inform the GOC how the interests of students currently studying on the qualification will be best served, either by transferring to an alternative provider or by being offered an alternative academic award; any costs incurred will be the responsibility of the SPA.

The output of stage four will be a published report. (SPAs are reminded that the qualification is not approved until a decision of Council is made post stage 5, and to ensure recruitment & advertising material confirms to our standard conditions.)

Stage Five. Stage five is a 'deep dive' into an approved qualification's ability to meet the outcomes and standards. It is the final stage of the process and takes place in the academic

year in which the first cohort of students, or students migrated across into the programme, reach their final year of study. The evidence to support stage five will normally be a written submission from the SPA, based on the evidence framework, alongside a periodic review and our attendance at the SPAs final examination board (or equivalent). The specification for the periodic review will be based on the evidence framework and the risk stratification of the qualification, which includes factors such as, but not limited to; the results of stages one to four, discharge of previously applied conditions and/or any serious concerns reviews and will include a sample-based review of the outcomes. The prime purpose of a stage five periodic review is assurance, i.e., whether our outcomes and standards are met. Depending on whether the application is stratified as lower, medium or higher risk, the periodic review may be desk-based, involve an on-site visit or visits, and/or physical or virtual meetings.

A decision by Council as to whether to approve the qualification will rely upon its consideration of the evidence gathered during stages one to five and will be informed by our advice and the advice of the Education Visitors. The output of stage five will be a published report. If the decision of Council is to *approve* the qualification (with or without conditions), the decision will specify the date from which the qualification is approved from (normally the date of the final examination Board for the first graduating cohort of students). The duration of qualification's approval may be limited if necessary, according to its risk profile.

The staged process for approving a new qualification is advisory until Council decides whether to approve the new qualification. This must be made clear to all students and applicants until the first cohort of students has graduated successfully and the qualification is approved by GOC Council.

Conditions, recommendations and requests for information

As part of the assurance and enhancement process, conditions may be imposed, recommendations may be made and/or further information may be requested.

Conditions specified must be fulfilled within the stated timeframe to ensure the outcomes and standards continue to be met by the approved qualification.

Recommendations must be considered by the SPA and action reported at the next annual review.

Information requested must be supplied within the stated timeframe. Failure to meet a condition or supply information within the specified timescale is a serious matter and may lead to the GOC conducting a 'serious concerns review' and/or withdrawing approval of the qualification.

Notifications of changes and events

An important standing condition of approval is the expectation that SPAs notify us of any significant changes to approved qualifications, its title or other events that may impact upon a SPA to meet our outcomes and standards. Failure to notify us of any significant changes or events may lead to the GOC conducting a 'serious concerns review' and/or withdrawing approval of the qualification.

If we receive complaints, concerns and/or other unsolicited information about an approved qualification, or qualifications applying for approval, we will consider this information as part of our risk stratification of qualifications and in the timing and focus of our future assurance and enhancement activity.

Serous Concerns Review

We reserve the right to investigate any matter brought to our attention which may have a bearing on the approval of a qualification. When making the decision to progress to a serious concerns review, we consider factors such as, but not limited to:

- results of any assurance and enhancement activity;
- concerns regarding patient safety;
- failure to meet one or more of the outcomes or standards;
- evidence of significant shortfalls in staffing and/or resources;
- failure to meet a condition or provide information within the specified timescale.

A serious concerns review is a detailed investigation into the concerns raised about an approved qualification. Failure to co-operate with a serious concerns review or take action required as a result of a serious concerns review may mean that Council decides to withdraw its approval of the qualification.

This Document

This document, 'Assurance and Enhancement Method for Approved Qualifications' was approved by GOC Registrar on XX date.

ENDS

DRAFT