



University of the Highlands and Islands (UHI)
Report of the outcomes of the application to the GOC education & training requirements – stage three
Master of Optometry with Independent Prescribing (MOptom with IP)
UHI-OP-IP1-APP
Report confirmed by GOC 04 August 2025

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SECTION ONE – ABOUT THIS DOCUMENT

1.1 ABOUT THIS DOCUMENT

This report outlines the outcomes of the review of the University of the Highlands and Islands' Master of Optometry with Independent Prescribing (MOptom with IP) qualification (qualification) stage three of the application process against the *Requirements for Approved Qualifications in Optometry and Dispensing Optics* (March 2021) and the *Requirements for Approved Qualifications in Additional Supply (AS), Supplementary Prescribing (SP) and/or Independent Prescribing (IP)* (January 2022).

It includes:

- Feedback against each relevant standard as listed in the application form.
- The status of all the standards reviewed as part of stage three.
- Any action the University of the Highlands and Islands is required to take.
- Whether the qualification is allowed to pass on to stage four of the application process or needs to repeat this stage.
- Whether the University of the Highlands and Islands is ready to recruit as an “approved training establishment” to the qualification.

SECTION TWO – PROVIDER DETAILS

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

2.2 CENTRE DETAILS	
Centre name(s)	Not applicable.

2.3 EXTERNAL PARTNERS DELIVERING AND/OR MANAGING AREAS OF THE QUALIFICATION
NHS Education for Scotland is involved in the delivery of the clinical and practical experience in year five of the qualification.

SECTION THREE – QUALIFICATION DETAILS

3.1 QUALIFICATION DETAILS	
Qualification title	Master of Optometry with Independent Prescribing (MOptom with IP)
Qualification level	Level 11 (Scottish Credit and Qualifications Framework) [SCQF]
Duration of qualification	<ul style="list-style-type: none">• Years 1-4 – 9 months (per year)• Year 5 – 12 months
Number of cohorts per academic year	One
Month(s) of student intake	End of August – early September
Delivery method(s)	Full time
Alternative exit award(s)	<ul style="list-style-type: none">• Level 7 – Certificate of Higher Education• Level 8 – Diploma of Higher Education• Level 9 – BSc Vision Science• Level 10 – BSc (Hons) Vision Science
Total number of students per cohort	30

SECTION FOUR – SUMMARY OF THE OUTCOMES OF STAGE THREE OF THE APPLICATION PROCESS

4.1 QUALITY ASSURANCE ACTIVITY	
Type of activity	This report outlines the outcomes of the review of the University of the Highlands and Islands' Master of Optometry with Independent Prescribing (MOptom with IP) qualification (qualification) stage three application against the <i>Requirements for Approved Qualifications in Optometry and Dispensing Optics</i> (March 2021) and the <i>Requirements for Approved Qualifications in Additional Supply (AS), Supplementary Prescribing (SP) and/or Independent Prescribing (IP)</i> (January 2022).
4.2 GOC REVIEW TEAM	
Officer	Shaun de Riggs – Education Officer (Operations)
Manager	Georgina Carter – Education Manager (Operations)
Head of Education & CPD	Samara Morgan
Decision maker	Leonie Milliner – Chief Executive & Registrar (CE&R.)*
Education Visitor Panel (panel) members	<ul style="list-style-type: none"> • Gail Fleming – Lay Chair • Doctor Rebekah Stevens – Optometrist member • Doctor David Hill – Optometrist and Independent Prescribing Optometrist member • Janice McCrudden – Optometrist and Independent Prescribing Optometrist member • Doctor Nicola Szostek – Optometrist and Independent Prescribing Optometrist member • Mark Chatham – Dispensing Optician and Contact Lens Optician member
4.3 SUMMARY OF OUTCOMES OF REVIEW	
<p>The review of the supporting information evidenced that the qualification:</p> <ul style="list-style-type: none"> • provides sufficient assurance for the qualification to pass onto stage four • is ready to recruit as an “approved training establishment”. 	
<p>The qualification has been set thirteen conditions against the following standards:</p> <ul style="list-style-type: none"> • S3.4 (OP) and S3.3 (IP) • S3.5 (IP) • S3.6 (IP) • S3.8 (OP) and S3.7 (IP) • S3.13 (IP) • S3.17 (OP) and S3.14 (IP) • S3.18 (OP) • S3.17 (IP) • S4.6 (OP) and S4.4 (IP) • S4.5 (IP) • S4.6 (IP) • S4.7 (OP) and S4.7 (IP) 	

- S5.3 (OP) and S5.3 (IP)

Please note, some of the possible areas of evidence that can be submitted in response to the conditions set may be applicable to more than one standard and/or more than one set of standards. It is possible that a piece of evidence may be submitted against more than one standard, but the provider should ensure it provides sufficient assurance against all relevant standards.

The qualification has been set **six** recommendations against the following standards:

- S2.6 (IP)
- S3.3 (OP)
- S3.8 (IP)
- S3.12 (IP)
- S4.1 (IP)
- S5.2 (IP)

Please note, some of the possible areas of evidence that can be submitted in response to the recommendations set may be applicable to more than one standard and/or more than one set of standards. It is possible that a piece of evidence may be submitted against more than one standard, but the provider should ensure it provides sufficient assurance against all relevant standards.

Commentary against all the standards reviewed is set out in section 4.4.

The qualification will remain subject to the GOC's quality assurance and enhancement methods (QAEM) on an ongoing basis.

4.4 STANDARDS OVERVIEW

The standards reviewed as part of the application process for approved qualifications (as outlined in the application form) are listed below along with the outcomes, statuses, actions, and any relevant deadlines. Actions may include the following:

- A **condition** is set when the information submitted did not provide the necessary evidence and assurance that a standard is met; further action is required.
- A **recommendation** is set when the information submitted currently provides the necessary evidence and assurance that a standard is met. However, the GOC has identified this may be an area that could be enhanced or that will need to be reviewed to ensure the standard continues to be met; further action is required.
- **No further action** is required – the information submitted provides the necessary assurance that a standard is met.

Further details on the evidence that the university was required to complete or submit as part of the education and training requirements (ETR) adaptation process can be found on the [qualifications in optometry or dispensing optics](#) and [qualifications in additional supply \(AS\), supplementary prescribing \(SP\) and/or independent prescribing \(IP\) categories](#) webpages.

Optometry standard no.	S1.1
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Optometry standard description	There must be policies and systems in place to ensure students understand and adhere to the GOC's Standards for Optical Students and understand the GOC's Standards of Practice for Optometrists and Dispensing Opticians.
Independent Prescribing no.	S1.1
Independent Prescribing standard description	There must be policies and systems in place to ensure trainees understand and adhere to the GOC's Standards of Practice for Optometrists and Dispensing Opticians.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Induction Timetable' document. • The provider's 'Student Handbook'. • The provider's 'Fitness to Practise Policy and Procedure'. • The provider's 'Year 1 Foundations of Clinical Practice' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There is assurance that students understand the key principles of the General Optical Council's standards. <p>Please note, although not a formal recommendation, the GOC encourages the provider to consider updating the Fitness to Practice Policy to reflect that the Standards for Optical Students were updated in 2025.</p>

Optometry standard no.	S1.2
Optometry standard description	Concerns about a student's fitness to train must be investigated through robust, fair proportionate processes and where necessary, action taken and reported to the GOC. (The GOC Acceptance Criteria and the related guidance in annex A should be used as a guide as to how a fitness to train matter should be investigated and when it should be reported.)
Independent Prescribing no.	S1.2
Independent Prescribing standard description	Concerns about a trainee's fitness to train or practise must be reported to the GOC. (The GOC acceptance criteria should be used as a guide as to when a fitness to practise/train matter should be reported.)
Status	MET – no further action is required at this stage.
Deadline	Not applicable.

Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Student Handbook'. • The provider's 'Fitness to Practise Policy and Procedure'. • The provider's 'Year 1 Foundations of Clinical Practice' document. • The provider's 'Student Conduct' policy. • The provider's 'Master in Optometry with Independent Prescribing CUR02' programme specification. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There are clear policies in place to investigate concerns about a student's fitness to train or practise. • There are clear policies in place to report concerns about a student's fitness to train or practise to the General Optical Council.
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Optometry standard no.	S1.3
Optometry standard description	Students must not put patients, service-users, the public or colleagues at risk. This means that anyone who teaches, assesses, supervises or employs students must ensure students practise safely and that students only undertake activities within the limits of their competence, and are appropriately supervised when with patients and service-users.
Independent Prescribing no.	S1.3
Independent Prescribing standard description	Trainees must not put patients, service-users, the public or colleagues at risk. This means that anyone who teaches, assesses, supervises or employs trainees must ensure trainees practise safely, only undertake activities within the limits of their competence and are appropriately supervised when with patients and service-users.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'. • The provider's 'Student Handbook'. • The provider's 'UHI Optometry Risk Register 2024-25' document. • The provider's 'Fitness to Practise Policy and Procedure'. • The provider's 'Year 1 Foundations of Clinical Practice' document. • The provider's 'Student Conduct' policy. • The provider's 'Supervisor Guidance Years 1-3 Placements 2023-24' documents. • The provider's 'Assessment Feedback and Feedforward' policy.

	<ul style="list-style-type: none"> • The provider's 'Placement Policy'. • The provider's Guided Study – Patient Safety' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • It is clear that supervisors must ensure that students practise safely and only undertake activities within the limits of their competence. • Students must be appropriately supervised when with patients and/or service-users.
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Optometry standard no.	S1.4
Optometry standard description	Upon admission (and at regular intervals thereafter) students must be informed it is an offence not to be registered as a student with the GOC at all times whilst studying on a programme leading to an approved qualification in optometry or dispensing optics.
Independent Prescribing no.	S1.4
Independent Prescribing standard description	Upon admission (and at regular intervals thereafter) trainees must be informed it is an offence not to be registered with the GOC at all times whilst studying on a programme leading to an approved qualification for specialist entry to the GOC register (AS, SP and/or IP).
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' document (equivalent to Template 2 – Criteria Narrative). • The provider's 'University of the Highlands and Islands GOC Evidence for Independent Prescribing (IP)' document (equivalent to Template 2 – Criteria Narrative). • The provider's 'Student Handbook'. • The provider's 'Induction Timetable' document. • The provider's 'Student Placement Handbook 2023-24'. • The provider's 'BSc (Hons) Optometry qualification' webpage. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • Students are informed that it is an offence not to be registered as a student with the GOC at all times whilst studying on the qualification. • There are policies and systems in place to ensure that students are informed upon admission and at regular intervals thereafter of the aforementioned offence.

Optometry standard no.	S2.1
Optometry standard description	Selection and admission criteria must be appropriate for entry to an approved qualification leading to registration as an optometrist or dispensing optician, including relevant health, character, and fitness to train checks. For overseas students, this should include evidence of proficiency in the English language of at least level 7 overall (with no individual section lower than 6.5) on the International English Language Testing System (IELTS) scale or equivalent.
Independent Prescribing no.	S2.1
Independent Prescribing standard description	Selection and admission criteria must be appropriate for entry to an approved qualification for specialist entry to the GOC register (AS, SP and/or IP categories) including relevant health, character and fitness to practise checks. For overseas trainees, this should include evidence of proficiency in the English language of at least level 7 overall (with no individual section lower than 6.5) on the International English Language Testing System (IELTS) scale or equivalent.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' document (equivalent to Template 2 – Criteria Narrative). • The provider's 'University of the Highlands and Islands GOC Evidence for Independent Prescribing (IP)' document (equivalent to Template 2 – Criteria Narrative). • The provider's 'BSc (Hons) Optometry qualification' webpage. • The provider's 'Admissions Policy (Higher Education)' document. • Documentation evidencing: <ul style="list-style-type: none"> ◦ English language requirements for the qualification. • The provider's 'Admissions Protecting Vulnerable Groups (PVG) and Occupational Health Procedure' documents. • The provider's 'Protect and safeguard patients, colleagues and others from harm – General Optical Council' document. • The provider's 'Guidance for Students with Disabilities and Other Health Conditions' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • Selection and admission criteria are appropriate for entry to an approved qualification.

	<ul style="list-style-type: none"> • There are clearly described, suitable and consistently applied admissions criteria, and recruitment and selection processes in place. • There is a process in place which is consistently applied to check proficiency in English language for overseas students.
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Optometry standard no.	S2.2
Optometry standard description	Recruitment, selection and admission processes must be fair, transparent and comply with relevant regulations and legislation (which may differ between England, Scotland, Northern Ireland, Wales and/or non-UK), including equality and diversity legislation.
Independent Prescribing no.	S2.2
Independent Prescribing standard description	Recruitment, selection and admission processes must be fair, transparent and comply with relevant legislation (which may differ between England, Scotland, Northern Ireland and Wales), including equality and diversity legislation, and evaluate the suitability and relevance of the applicant's prior clinical and therapeutic experience.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Admissions Policy (Higher Education)' document. • The provider's 'Equality, Diversity and Inclusion (EDI)' policy. • Documentation evidencing: <ul style="list-style-type: none"> ○ The EDI training staff are required to complete. ○ The provider's admissions procedures. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The recruitment, selection and admission processes are fair and complies with relevant regulations and legislation (including equality and diversity legislation). <p>Please note, although not a formal recommendation, the GOC notes that the provider should ensure its documentation is reviewed, finalised and updated in a timely manner so that it remains fit for purpose and relevant.</p>

Optometry standard no.	S2.3
Optometry standard description	Selectors (who may include academic and admissions/administrative staff) should be trained to apply selection criteria fairly, including training in equality, diversity and unconscious bias, in line with legislation in place in England, Scotland, Northern Ireland and/or Wales.

Independent Prescribing no.	S2.3
Independent Prescribing standard description	Selectors (who may include a mix of academic and admissions/ administrative staff) should be trained to apply selection criteria fairly, including training in equality, diversity and unconscious bias in line with legislation in place in England, Scotland, Northern Ireland and Wales
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Admissions Policy (Higher Education)' document. • The provider's 'Equality, Diversity and Inclusion (EDI)' policy. • Documentation evidencing: <ul style="list-style-type: none"> ○ The EDI training staff are required to complete. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There is appropriate training for staff to ensure selection criteria is applied fairly. • The provider maintains clear and accurate information about the progress and outcome of individual applications in line with relevant UK legislation.

Optometry standard no.	S2.4
Optometry standard description	<p>Information provided to applicants must be accurate, comply with relevant legislation and include:</p> <ul style="list-style-type: none"> • 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 qualification's approved status; • the total costs/fees that will be incurred; • the curriculum and assessment approach for the qualification; and • the requirement for students to remain registered as a student with the GOC throughout the duration of the programme leading to the award of the approved qualification. If offers are made to applicants below published academic and professional entry requirements, the rationale for making such decisions must be explicit and documented.
Independent Prescribing no.	S2.4
Independent Prescribing standard description	<p>Information provided to applicants must be accurate, comply with relevant legislation and include:</p> <ul style="list-style-type: none"> • the academic, clinical and therapeutic experience required for entry to the approved qualification;

	<ul style="list-style-type: none"> • a description of the selection process and any costs associated with making the application; • the qualification's approved status; • the total costs/fees that will be incurred; • the curriculum and assessment approach for the qualification; and • the requirement for trainees to remain registered with the GOC throughout the duration of the programme leading to the award of the approved qualification. If offers are made to applicants below published academic and professional entry requirements, the rationale for making such decisions must be explicit and recorded.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Admissions Policy (Higher Education)' document. • The provider's 'BSc (Hons) Optometry qualification' webpage. • Documentation evidencing: <ul style="list-style-type: none"> ○ The provider's admissions procedures. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • Information provided to applicants (including entry requirements and associated costs) is accurate and complies with relevant legislation. • The provider maintains clear and accurate information about the progress and outcome of individual applications. <p>Please note, although not a formal recommendation, the GOC notes that the provider should ensure its documentation is reviewed, finalised and updated in a timely manner so that it remains fit for purpose and relevant.</p>

Optometry standard no.	S2.5
Optometry standard description	<p>Recognition of prior learning must be supported by effective and robust policies and systems. These must ensure that students admitted at a point other than the start of a programme have the potential to meet the outcomes for award of the approved qualification. Prior learning must be recognised in accordance with guidance issued by the Quality Assurance Agency (QAA) and/or Office of Qualifications and Examinations Regulation (Ofqual)/Scottish Qualifications Authority (SQA)/Qualifications Wales/Department for the Economy in Northern Ireland and must not exempt students from summative assessments leading to the award of the approved qualification, unless achievement of prior learning can be evidenced as equivalent.</p>
Independent Prescribing no.	S2.5

Independent Prescribing standard description	Recognition of prior learning must be supported by effective and robust policies and systems. These must ensure that trainees admitted at a point other than the start of a programme have the potential to meet the outcomes for the award of the approved qualification. Prior learning must be recognised in accordance with guidance issued by The Quality Assurance Agency for Higher Education (QAA) and/or The Office of Qualifications and Examinations Regulation (Ofqual) / Scottish Qualifications Authority (SQA) / Qualifications Wales / Department for the Economy in Northern Ireland and must not exempt trainees from summative assessments leading to the award of the approved qualification. (If necessary, separate arrangements will be made for the safe transition of trainees who have not yet completed GOC-approved therapeutic prescribing qualifications programmes prior to the introduction of the new outcomes and standards.)
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Admissions Policy (Higher Education)' document. • The provider's 'BSc (Hons) Optometry qualification' webpage. • The provider's 'Recognition of Prior Learning (RPL) Resources' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • No Recognition of Prior Learning (RPL) is allowed as all students enter in year one of the qualification. • Prior Learning (PL) may allow students with non-conventional subjects/grades such as those who have completed a Scottish Wider Access Programme (SWAP) access course, to be considered for entry and interviewed.

Independent Prescribing no.	S2.6
Independent Prescribing standard description	Upon or shortly after admission, trainees and the organisation responsible for the award of the approved qualification (the provider) must have identified a suitably experienced and qualified designated prescribing practitioner (DPP) who has agreed to supervise the trainee's learning in practice. The trainee's DPP must be a registered healthcare professional in Great Britain or Northern Ireland with independent prescribing rights. (See also Standard 4.)
Status	MET – recommendation.
Deadline	Response to recommendation should be submitted alongside stage four(a).
Rationale	The evidence reviewed provided the necessary assurance that this standard is MET.

	<p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's signed 'Memorandum of Understanding - Optometry Undergraduate Degree Reform'. • The provider's 'Collaborative Partnership - Initial Proposal and risk scoring Optometry MOptom' document. • The provider's 'GOC-UHI Additional Information April 2025' document which evidences that: <ul style="list-style-type: none"> ○ The provider will have NHS Education for Scotland (NES) funded prescribing, ensuring students will have a Designated Prescribing Practitioner (DPP) in place before entering year five of the qualification. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There is a suitable documented process that clearly identifies the named DPP, including their qualifications, experience and clinical area, UK registration status, and appropriate fitness to practise check. <p>Although the information reviewed provided sufficient assurance that this standard is met, a recommendation has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • Confirmation of agreement of delegation of roles and responsibilities between the University of the Highlands and Islands and NHS Education for Scotland through the finalised and signed partnership agreement. <p>This recommendation has also been set against S3.8 (IP), S3.12 (IP), S4.1 (IP) and S5.2 (IP).</p>
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Optometry standard no.	S3.1
Optometry standard description	There must be a clear assessment strategy for the award of an approved qualification. The strategy must describe how the outcomes will be assessed, how assessment will measure students' achievement of outcomes at the required level (Miller's Pyramid) and how this leads to an award of an approved qualification.
Independent Prescribing no.	S3.1
Independent Prescribing standard description	There must be a clear assessment strategy for the award of an approved qualification. The strategy must describe how the outcomes will be assessed, how assessment will measure trainees' achievement of outcomes at the required level (Miller's Pyramid) and how this leads to an award of an approved qualification.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.

Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'. • A completed 'Template 8 – Mapping to Indicative Guidance'. • The provider's 'Student Handbook'. • The provider's 'Assessment Feedback and Feedforward' policy. • The provider's 'Masters in Optometry with IP CUR02' programme specification. • The provider's 'GOC Learning Outcome and curriculum map' documentation which outlines: <ul style="list-style-type: none"> ◦ Assessment mapping ◦ Spiral curriculum maps • The provider's module descriptors. • The provider's 'Assessment and Progression Regulations (degree programmes)' document. • The provider's 'Supervisor End of Placement Feedback 2023' document. • The provider's draft 'Memorandum of Agreement between NHS Education for Scotland (NES) and the University of the Highlands and Islands (UHI) 2024'. • The provider's 'Year 5 Assessments' document evidencing: <ul style="list-style-type: none"> ◦ A breakdown of the year five assessments ◦ Assessment methods <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There is a clear assessment strategy for the award of an approved qualification. • Feedback or issues in relation to assessment are reviewed, and appropriate action taken.
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Optometry standard no.	S3.2
Optometry standard description	The approved qualification must be taught and assessed (diagnostically, formatively and summatively) in a progressive and integrated manner. The component parts should be linked into a cohesive programme of academic study, clinical experience and professional practice (for example, Harden's spiral curriculum), introducing, progressing and assessing knowledge, skills and behaviour until the outcomes are achieved.
Independent Prescribing standard no.	S3.2

Independent Prescribing description	The approved qualification must be taught and assessed (diagnostically, formatively and summatively) in a progressive and integrated manner. The component parts should be linked into a cohesive programme (for example, Harden's spiral curriculum), introducing, progressing and assessing knowledge, skills and behaviour until the outcomes are achieved.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'. • A completed 'Template 5 – Module Outcome Map'. • The provider's 'Masters in Optometry with IP CUR02' programme specification. • The provider's 'Assessment and Progression Regulations (degree programmes)' document. • The provider's 'Academic Standards and Quality Regulations 2021-22 • Quality assurance' document. • Documentation that evidences the provider's internal quality assurance processes. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The approved qualification will be taught and assessed (diagnostically, formatively and summatively) in a progressive and integrated manner. • There is an assessment plan which sets out how each outcome will be taught and assessed in a progressive and integrated manner, mapped to the outcomes, and other appropriate other syllabus/ benchmarks. • The assessment methods selected, and design of assessment items are appropriate to the qualification type and level.

Optometry standard no.	S3.3
Optometry standard description	The approved qualification must provide experience of working with: patients (such as patients with disabilities, children, their carers, etc); inter-professional learning (IPL); and team work and preparation for entry into the workplace in a variety of settings (real and simulated) such as clinical practice, community, manufacturing, research, domiciliary and hospital settings (for example, Harden's ladder of integration ¹⁰). This experience must increase in volume and complexity as a student progresses through a programme.
Status	MET – recommendation.
Deadline	Supporting evidence to be submitted as part of the AMR process for academic year 2025/26.

Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'. • A completed 'Template 8 – Mapping to Indicative Guidance'. • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The clinical placements increase in both length and complexity as students progress through the qualification. • It is clear where the clinical learning in practice elements of the qualification take place. <p>Although the information reviewed provided sufficient assurance that this standard is met, a recommendation has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • Documentation demonstrating that inter-professional learning (IPL) is integrated into the qualification. • Documentation demonstrating that students gain sufficient and appropriate experience of patient conditions within a variety of service delivery settings. • Documentation and/or narrative demonstrating that UHI ensure breadth of patient/clinical experience is clearly mapped, monitored, and shows how they will be linked to placements.
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Optometry standard no.	S3.4
Optometry standard description	Curriculum design, delivery and the assessment of outcomes must involve and be informed by feedback from a range of stakeholders such as patients, employers, students, placement providers, commissioners, members of the eye-care team and other healthcare professionals. Stakeholders involved in the teaching, supervision and/or assessment of students must be appropriately trained and supported, including in equality and diversity.
Independent Prescribing no.	S3.3
Independent Prescribing standard description	Curriculum design and the assessment of outcomes must involve and be informed by feedback from a range of stakeholders such as patients, employers, trainees, commissioners, placement providers, members of the eye-care team and other healthcare professionals.
Status	NOT MET – condition.
Deadline	Response to condition should be submitted alongside stage four(a).

Rationale	<p>The evidence did not provide the necessary assurance and therefore these standards are NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Supervisor End of Placement Feedback 2023' document. • The provider's 'Supervisor Guidance Placement 2023-24 (Years 1-3)' document. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • How stakeholder feedback is collected and utilised. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • Examples of how (collated) feedback from a breadth of stakeholders is actioned e.g., through meeting minutes and actions. <p>This condition has also been set against S3.17 (OP) and S3.14 (IP)</p>
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Optometry standard no.	S3.5
Optometry standard description	The outcomes must be assessed using a range of methods and all final, summative assessments must be passed. This means that compensation, trailing and extended re-sit opportunities within and between modules where outcomes are assessed is not permitted.
Independent Prescribing no.	S3.4
Independent Prescribing standard description	The outcomes must be assessed using a range of methods and all final, summative assessments must be passed. This means that compensation, trailing and extended re-sit opportunities within and between modules where outcomes are assessed is not permitted.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'. • The provider's module descriptors. • The provider's 'Academic Standards and Quality Regulations (ASQR)' document. • The provider's 'Student Handbook'. • The provider's 'Assessment and Progression Regulations (degree programmes)' document. • The provider's 'External Examining at UHI' document.

	<ul style="list-style-type: none"> • The provider's 'Assessment Guidance Notes' document. • The provider's 'Higher Education (HE) in Scotland' document. • The provider's 'Memorandum of Understanding (MOU) - Optometry Undergraduate Degree Reform' document. • The provider's 'Optometry First Training Year (FTY) Supervisor Guide'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • Learning outcomes are assessed using a range of methods and all final, summative assessments must be passed. • The provider's assessment regulations, policies, procedures and rules are appropriate. • It is clear how final summative assessments measure students' achievement of the outcomes leading to the award of the qualification. <p>Please note, although not a formal recommendation, the GOC notes that the provider should ensure its documentation is reviewed, finalised and updated in a timely manner so that it remains fit for purpose and relevant.</p>
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Optometry standard no.	S3.6
Optometry standard description	Assessment (including lowest pass) criteria, choice, and design of assessment items (diagnostic, formative and summative) leading to the award of an approved qualification must seek to ensure safe and effective practice and be appropriate for a qualification leading to registration as an optometrist or dispensing optician.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Student Handbook'. • The provider's 'Assessment and Progression Regulations (degree programmes)' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • Assessment (including lowest pass) criteria, choice and design of assessment items (diagnostic, formative and summative) leading to the award of an approved qualification ensures safe and effective practise.

Independent Prescribing no.	S3.5
Independent Prescribing	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

standard description	and be appropriate for a qualification for specialist entry to the GOC register (AS, SP and/or IP).
Status	NOT MET – condition.
Deadline	Response to condition should be submitted alongside stage four(a).
Rationale	<p>The evidence did not provide the necessary assurance and therefore this standard is NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'. • A completed 'Template 5 – Module Outcome Map'. • A completed 'Template 8 – Mapping to Indicative Guidance'. • The provider's 'Memorandum of Understanding - Optometry Undergraduate Degree Reform' • The provider's 'Collaborative Partnership - Initial Proposal and risk scoring Optometry MOptom' document. • The provider's 'Student Handbook' document. • The provider's module descriptors. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • Confirmation of the roles and responsibilities shared between UHI and NHS Education for Scotland. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • A copy of the signed and finalised partnership between UHI and NHS Education for Scotland. • Assessment strategy for year five of the qualification. <p>This condition also applies to S3.6 (IP) and 3.13 (IP).</p>

Optometry standard no.	S3.7
Optometry standard description	Assessment (including lowest pass) criteria must be explicit and set at the right standard, using an appropriate and tested standard-setting process. This includes assessments which might occur during learning and experience in practice, in the workplace or during inter-professional learning.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'. • The provider's 'Assessment and Progression Regulations (degree programmes)' document.

	<ul style="list-style-type: none"> • The provider's 'Masters in Optometry with IP CUR02' programme specification. • The provider's 'Memorandum of Understanding - Optometry UG Degree Reform' document. • The provider's 'Academic Standards and Quality Regulations (ASQR)' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • Assessment (including lowest pass) criteria is explicit and set at the right standard, using an appropriate and tested standard-setting process. • An appropriate standard-setting process has been used to establish assessment criteria and appropriate 'cut score' for each summative assessment type. • Assessments undertaken during learning and experience in practice, in the workplace or during inter-professional learning are suitably quality controlled to ensure fairness and consistency in assessment decisions.
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Independent Prescribing no.	S3.6
Independent Prescribing standard description	Assessment (including lowest pass) criteria must be explicit and set using an appropriate and tested standard-setting process. This includes assessments which occur during learning and experience in practice.
Status	NOT MET – condition.
Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence did not provide the necessary assurance and therefore this standard is NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'. • A completed 'Template 5 – Module Outcome Map'. • A completed 'Template 8 – Mapping to Indicative Guidance'. • The provider's 'Memorandum of Understanding - Optometry Undergraduate Degree Reform' • The provider's 'Collaborative Partnership - Initial Proposal and risk scoring Optometry MOptom' document. • The provider's 'Student Handbook' document. • The provider's module descriptors. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • Confirmation of the roles and responsibilities shared between UHI and NHS Education for Scotland.

	<p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • A copy of the signed and finalised partnership agreement between the University and NHS Education for Scotland. • Assessment strategy for year five of the qualification. <p>This condition also applies to S3.5 (IP) and 3.13 (IP).</p>
Optometry standard no.	S3.8
Optometry standard description	Assessments must appropriately balance validity, reliability, robustness, fairness and transparency, ensure equity of treatment for students, reflect best practice and be routinely monitored, developed and quality controlled. This includes assessments which might occur during learning and experience in practice, in the workplace or during inter-professional learning.
Independent Prescribing no.	S3.7
Independent Prescribing standard description	Assessments must appropriately balance validity, reliability, robustness, fairness and transparency, ensure equity of treatment for trainees, reflect best practice and be routinely monitored, developed and quality-controlled. This includes assessments which might occur during learning and experience in practice.
Status	NOT MET – condition.
Deadline	Response to condition to be submitted alongside four(a).
Rationale	<p>The evidence did not provide the necessary assurance and therefore these standards are NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'. • The provider's 'Memorandum of Understanding (MOU) - Optometry UG Degree Reform' document. • The provider's 'Equality, Diversity and Inclusion (EDI)' policy. • The provider's 'External Examining in UHI' document. • The provider's 'Assessment Guidance Notes' document. • The provider's 'Curricula Vitae'. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • The provider's assessment strategy for year five of the qualification. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • Confirmation of agreement of delegation of roles and responsibilities between the University of the Highlands and Islands and NHS

	<p>Education for Scotland through the finalised and signed partnership agreement.</p> <ul style="list-style-type: none"> Documentation demonstrating how the assessment strategy sets out how assessments: <ul style="list-style-type: none"> Balance validity, reliability, robustness, fairness, and transparency. Are appropriate for local, regional and national context.
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Optometry standard no.	S3.9
Optometry standard description	Appropriate reasonable adjustments must be put in place to ensure that students with a disability are not disadvantaged in engaging with the learning and teaching process and in demonstrating their achievement of the outcomes
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> The provider's 'Memorandum of Understanding (MOU) - Optometry Undergraduate Degree Reform' document. The provider's 'Equality, Diversity and Inclusion (EDI)' policy. The provider's 'Assessment and Progression Regulations (degree programmes)' document. Documentation evidencing: <ul style="list-style-type: none"> The EDI training staff are required to complete. The provider's 'Additional Support for Learning' policy. The provider's 'NHS Scotland Complaints Handling' procedure. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> Reasonable adjustments are in place to ensure that students with a disability are not disadvantaged in engaging with the learning and teaching process and in demonstrating their achievement of the outcomes. Those who teach, supervise, provide placements for, or work with students, can appropriately support the student in respect of any reasonable adjustments.

Independent Prescribing no.	S3.8
Independent Prescribing standard description	Appropriate reasonable adjustments must be put in place to ensure that trainees with a disability are not disadvantaged in engaging with the learning and teaching process and in demonstrating their achievement of the outcomes.
Status	MET – recommendation.
Deadline	Response to condition to be submitted alongside stage four(a).

Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Memorandum of Understanding (MOU) - Optometry Undergraduate Degree Reform' document. • The provider's 'Equality, Diversity and Inclusion (EDI)' policy. • The provider's 'Assessment and Progression Regulations (degree programmes)' document. • Documentation evidencing: <ul style="list-style-type: none"> ◦ The EDI training staff are required to complete. • The provider's 'Additional Support for Learning' policy. • The provider's 'NHS Scotland Complaints Handling' procedure. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • Reasonable adjustments are in place to ensure that students with a disability are not disadvantaged in engaging with the learning and teaching process and in demonstrating their achievement of the outcomes. • Those who teach, supervise, provide placements for, or work with students, can appropriately support the student in respect of any reasonable adjustments. <p>Although the information reviewed provided sufficient assurance that this standard is met, a recommendation has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • Confirmation of agreement of delegation of roles and responsibilities between the University of the Highlands and Islands and NHS Education for Scotland through the finalised and signed partnership agreement. <p>This recommendation has also been set against S2.6 (IP), S3.12 (IP), and S5.2 (IP).</p>
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Optometry standard no.	S3.10
Optometry standard description	Summative assessments directly related to the outcomes demonstrating unsafe practice must result in failure of the assessment.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'.

	<ul style="list-style-type: none"> • A completed 'Template 5 – Module Outcome Map'. • The provider's marking rubrics. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • Summative assessments are directly related to the outcomes demonstrating unsafe practise must result in failure of the assessment. • Assessment regulations appropriately prioritise patient safety, which means unsafe practise in summative assessment results in failure of the assessment.
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Optometry standard no.	S3.11
Optometry standard description	There must be policies and systems in place to plan, monitor and record each student's achievement of outcomes leading to awards of the approved qualification.
Independent Prescribing no.	S3.9
Independent Prescribing standard description	There must be policies and systems in place to plan, monitor and record each student's achievement of outcomes leading to awards of the approved qualification.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Student Handbook'. • The provider's 'Assessment and Progression Regulations (degree programmes)' document. • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). • Documentation evidencing: <ul style="list-style-type: none"> ○ How module marks are entered into the provider's records, including re-sit marks. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There are policies and systems in place to plan, monitor and record each student's achievement of outcomes leading to awards of the approved qualification.

Optometry standard no.	S3.12
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Optometry standard description	The approved qualification must be listed on one of the national frameworks for higher education qualifications for UK degree-awarding bodies (The Framework for Higher Education Qualifications of Degree-Awarding Bodies in England, Wales and Northern Ireland (FHEQ) and the Framework for Qualifications of Higher Education Institutions in Scotland (FQHEIS)), or be a qualification regulated by Ofqual, SQA or Qualifications Wales. Approved qualifications in optometry must be at a minimum RQF, FHEQ or Credit and Qualifications Framework Wales (CQFW) level 7 or Scottish Credit and Qualifications Framework (SCQF) / FQHEIS level 11. Approved qualifications in dispensing optics must be at a minimum RQF, FHEQ or CQFW level 6 or SCQF/FQHEIS level 9 or 10.
Independent Prescribing no.	S3.10
Independent Prescribing standard description	The approved qualification must be listed on one of the national frameworks for higher education qualifications for UK degree-awarding bodies (The Framework for Higher Education Qualifications of Degree-Awarding Bodies in England, Wales and Northern Ireland (FHEQ) and the Framework for Qualifications of Higher Education Institutions in Scotland (FQHEIS)), or be a qualification regulated by The Office of Qualifications and Examinations Regulation (Ofqual), SQA or Qualifications Wales. Approved qualifications for specialist entry to the GOC register (AS, SP and/ or IP) must be at a minimum Regulated Qualification Framework (RQF), FHEQ or Credit and Qualifications Framework Wales (CQFW) level 7 or Scottish Credit and Qualifications Framework (SCQF) / FQHEIS 11.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative) detailing that: <ul style="list-style-type: none"> ○ The qualification is listed on the Scottish Credit and Qualifications Framework. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification will be appropriately listed on the Scottish Credit and Qualifications Framework. <p>Please note, although at present, the evidence submitted provides sufficient assurance, the Education Team does request confirmation that MOptom with Independent Prescribing qualification has been (or will be) added to the Scottish Credit and Qualifications framework.</p> <p>You may wish to take this into consideration when preparing documentation for your response to conditions, recommendations, and stage four of the application process.</p>

Optometry standard no.	S3.13
Optometry standard description	The outcomes must be delivered and assessed in an environment that places study in an academic, clinical and professional context which is informed by research and provides opportunities for students to develop as learners and future professionals.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). • The provider's module descriptors. • The provider's 'Overview of Literature Review' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • Research and academia are at the heart of the teaching and learning.

Optometry standard no.	S3.14
Optometry standard description	There must be a range of teaching and learning methods to deliver the outcomes that integrates scientific, professional, and clinical theories and practices in a variety of settings and uses a range of procedures, drawing upon the strengths and opportunities of context in which the qualification is offered.
Independent Prescribing no.	S3.11
Independent Prescribing standard description	A range of teaching and learning methods must be used to deliver the outcomes.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). • The provider's 'Masters in Optometry with IP CUR02' programme specification. • The provider's module descriptors.

	<ul style="list-style-type: none"> The provider's 'Assessment Guidance Notes' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> There is a good range of teaching and learning methods utilised to deliver the qualification.
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Optometry standard no.	S3.15
Optometry standard description	In meeting the outcomes, the approved qualification must integrate at least 1600 hours/48 weeks of patient-facing learning and experience in practice. Learning and experience in practice must take place in one or more periods of time and one or more settings of practice.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> A completed 'Template 4 – Assessment Strategy'. A completed 'Template 5 – Module Outcome Map'. The provider's 'Memorandum of Understanding (MOU) - Optometry Undergraduate Degree Reform' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> The required 1600hrs and 48 weeks of clinical/practical experience are incorporated into the qualification.

Independent Prescribing no.	S3.12
Independent Prescribing standard description	To enable the development of trainees' clinical, diagnostic and prescribing skills to meet the outcomes, the approved qualification must integrate learning and experience in practice (as a guide, approximately 90 hours). The supervision of a trainee's learning and experience in practice must be co-ordinated by an appropriately trained and qualified registered healthcare professional (DPP) with independent prescribing rights. (See also S4.4-S4.6.)
Status	MET – recommendation.
Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> A completed 'Template 4 – Assessment Strategy'. A completed 'Template 5 – Module Outcome Map'. The provider's 'Memorandum of Understanding (MOU) - Optometry Undergraduate Degree Reform' document. <p>The information reviewed evidenced, amongst other elements, that:</p>

	<ul style="list-style-type: none"> The required 1600hrs and 48 weeks of clinical/practical experience are incorporated into the qualification. <p>Although the information reviewed provided sufficient assurance that this standard is met, a recommendation has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> Confirmation of agreement of delegation of roles and responsibilities between the University of the Highlands and Islands and NHS Education for Scotland through the signed and finalised partnership agreement. <p>This recommendation has also been set against S2.6 (IP), S3.8 (IP) and S4.1 (IP).</p>
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Optometry standard no.	S3.16
Optometry standard description	Outcomes delivered and assessed during learning and experience in practice must be clearly identified within the assessment strategy and fully integrated within the programme leading to the award of an approved qualification.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> A completed 'Template 4 – Assessment Strategy'. The provider's 'Masters in Optometry with IP CUR02' programme specification. The provider's 'Placement and Externally Supported Learning' policy. The provider's 'Student Handbook'. The provider's module descriptors. The provider's 'Learning Outcomes and Curriculum Maps'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> It is clear how learning outcomes are assessed.

Independent Prescribing no.	S3.13
Independent Prescribing standard description	Outcomes delivered and assessed during learning and experience in practice must be clearly identified, included within the assessment strategy and fully integrated within the programme leading to the award of an approved qualification.
Status	NOT MET – condition.

Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence did not provide the necessary assurance and therefore these standards are NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 4 – Assessment Strategy'. • The provider's 'Masters in Optometry with IP CUR02' programme specification. • The provider's 'Placement and Externally Supported Learning' policy. • The provider's 'Student Handbook'. • The provider's module descriptors. • The provider's 'Learning Outcomes and Curriculum Maps'. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • Confirmation of the roles and responsibilities shared between UHI and NHS Education for Scotland. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • A copy of the signed and finalised partnership agreement between the University and NHS Education for Scotland. • Assessment strategy for year five of the qualification. <p>This condition has also been set against S3.5 (IP) and S3.6 (IP).</p>

Optometry standard no.	S3.17
Optometry standard description	The selection of outcomes to be taught and assessed during learning and experience in practice and the choice and design of assessment items must be informed by feedback from stakeholders, such as patients, students, employers, placement providers, members of the eye-care team and other healthcare professionals.
Independent Prescribing no.	S3.14
Independent Prescribing standard description	The selection of outcomes to be taught and assessed during periods of learning and experience in practice and the choice and design of assessment items must be informed by feedback from a variety of sources, such as patients, employers, trainees, DPPs, members of the eye-care team and other healthcare professionals.
Status	NOT MET – condition.
Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence did not provide the necessary assurance and therefore these standards are NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p>

	<ul style="list-style-type: none"> The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). The provider's '2025 NHS Education for Scotland (NES) First Training Year (FTY) Stakeholder group' document. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> How stakeholder feedback was collated and utilised. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> Evidence of how feedback (collated) from a breadth of stakeholders (including but not limited to patients and students) is actioned and informs teaching and assessment. <p>This condition has also been set against S3.4 (OP) and S3.3 (IP)</p>
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Optometry standard no.	S3.18
Optometry standard description	Assessment (if undertaken) of outcomes during learning and experience in practice must be carried out by an appropriately trained and qualified GOC registrant or other statutorily registered healthcare professional who is competent to measure students' achievement of outcomes at the required level (Miller's Pyramid).
Status	NOT MET – condition.
Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence did not provide the necessary assurance and therefore this standard is NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> The provider's assessment strategy. The provider's Module Outcome Map The provider's 'Collaborative Partnership - Initial Proposal and risk scoring Optometry MOptom' document. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> Confirmation of assessment of learning outcomes being undertaken during optometry placements within years 1-4 of the qualification. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> Demonstration of where learning outcomes are being assessed during years 1-4 of the qualification during the optometry placements e.g., a mapping document. A copy of the signed and finalised partnership agreement between the University and NHS Education for Scotland.

	<ul style="list-style-type: none"> Evidence demonstrating the roles and responsibilities of placement supervisors particularly in relationship to assessment of learning outcomes.
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Optometry standard no.	S3.19
Optometry standard description	The collection and analysis of equality and diversity data must inform curriculum design, delivery, and assessment of the approved qualification. This analysis must include students' progression by protected characteristic. In addition, the principles of equality, diversity and inclusion must be embedded in curriculum design and assessment and used to enhance students' experience of studying on a programme leading to an approved qualification.
Independent Prescribing no.	S3.15
Independent Prescribing standard description	Equality and diversity data and its analysis must inform curriculum design, delivery and assessment of the approved qualification. This analysis must include trainees' progression by protected characteristic. In addition, the principles of equality, diversity and inclusion must be embedded in curriculum design and assessment and used to enhance trainees' experience of studying on a programme leading to an approved qualification.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> The provider's 'Equality, Diversity and Inclusivity (EDI)' policy. The provider's 'NHS Education for Scotland (NES) Inclusive Education Learning May 2023' policy. The provider's 'NHS Education for Scotland (NES) Equality Outcomes and Mainstreaming 2021-25' report. The provider's 'Equality Monitoring' documents'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> The provider clearly demonstrates how it collects, analyses and utilises EDI data.

Optometry standard no.	S3.20
Optometry standard description	Students must have regular and timely feedback to improve their performance, including feedback on their performance in assessments and in periods of learning in practice.

Independent Prescribing no.	S3.16
Independent Prescribing standard description	Trainees must receive regular and timely feedback to improve their performance, including on their performance in assessments and in periods of learning and experience in practice.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Student Handbook'. • The provider's 'Academic Misconduct Policy and Procedure' document. • The provider's 'Student Placement Handbook 2023-24'. • The provider's 'Protecting Vulnerable Groups (PVG) and Occupational Health Procedure' documents. • Documentation evidencing: <ul style="list-style-type: none"> ○ How module marks are entered into the provider's records, including re-sit marks. • The provider's 'Assessment, Feedback and Feedforward Policy'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • It is clear how UHI provides feedback to its students.

Optometry standard no.	S3.21
Optometry standard description	If a student studies abroad for parts of the approved qualification, any outcomes studied and/or assessed abroad must be met in accordance with these standards.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider does not offer the opportunity for its students to study abroad.

Independent Prescribing no.	S3.17
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Independent Prescribing standard description	As part of the approved qualification, trainees must meet regularly with their DPP to discuss and document their progress as learners.
Status	NOT MET – condition.
Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence did not provide the necessary assurance and therefore this standard is NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Collaborative Partnership - Initial Proposal and risk scoring Optometry MOptom' document. • The provider's 'GOC Evidence for Optometry and Independent Prescribing' documents. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • Confirmation that DPPs and trainees meet to discuss their progress as learners. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • How DPPs and trainees meet to discuss and document their progress as learners e.g., through a timetable or process.

Independent Prescribing no.	S4.1
Independent Prescribing standard description	There must be a clear management plan in place for the award of the approved qualification and its development, delivery, management, quality control and evaluation.
Status	MET – recommendation.
Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's signed 'Memorandum of Understanding - Optometry Undergraduate Degree Reform'. • The provider's 'UHI Optometry Risk Register 2024-25' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • It is clear what elements of the qualification will be delivered by the provider and by NHS Education for Scotland. <p>Although the information reviewed provided sufficient assurance that this standard is met, a recommendation has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p>

	<ul style="list-style-type: none"> A copy of the signed and finalised partnership agreement between the University and NHS Education for Scotland. <p>This recommendation has also been set against S2.6 (IP), S3.8 (IP), S3.12 (IP), and S5.2 (IP).</p>
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Optometry standard no.	S4.1
Optometry standard description	The provider of the approved qualification must be legally incorporated (i.e., not be an unincorporated association) and provide assurance it has the authority and capability to award the approved qualification.
Independent Prescribing no.	S4.2
Independent Prescribing standard description	The organisation responsible for the award of the approved qualification must be legally incorporated (i.e. not be an unincorporated association) and have the authority and capability to award the approved qualification.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> The provider's 'Articles of Association'. <p>The information reviewed evidenced, amongst other elements, that:</p> <p>The provider has clear awarding powers and is a legally incorporated higher education institution.</p>

Optometry standard no.	S4.2
Optometry standard description	The provider of the approved qualification must be able to accurately describe its corporate form, its governance, and lines of accountability in relation to its award of the approved qualification.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> The provider's 'Articles of Association'. The provider's 'Academic Standards and Quality Regulations 2022-23 Academic committees' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> The provider has clearly defined committees and roles, including governance expectations. The provider has clear lines of accountability.

Optometry standard no.	S4.3
Optometry standard description	There must be a clear management plan in place for the award of the approved qualification and its development, delivery, management, quality control and evaluation.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's signed 'Memorandum of Understanding - Optometry Undergraduate Degree Reform'. • The provider's '2023/24 Induction Timetable Year 1' document. • The provider's 'UHI Optometry Risk Register 2024-25' document. • The provider's 'Memorandum of Agreement between NHS Education for Scotland (NES) and University of the Highlands and Islands (UHI)'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • It is clear what elements of the qualification will be delivered by the provider and by NHS Education for Scotland.

Optometry standard no.	S4.4
Optometry standard description	The provider of the approved qualification may be owned by a consortium of organisations or some other combination of separately constituted bodies. Howsoever constituted, the relationship between the constituent organisations and the ownership of the provider responsible for the award of the approved qualification must be clear.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). • The provider's 'Supervisor End of Placement Feedback 2023' document. • The provider's 'Developing and Delivering Quality Work Placements - Best Practice Guide'. • The provider's 'Academic Standards and Quality Regulations 2022-23 Programme approval' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider is a single organisation and has ownership of the award of the approved qualification.

	<ul style="list-style-type: none"> The provider has clear corporate form and governance.
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Optometry standard no.	S4.5
Optometry standard description	The provider of the approved qualification must have a named person who will be the primary point of contact for the GOC.
Independent Prescribing no.	S4.3
Independent Prescribing standard description	The provider must have a named point of contact for the approved qualification.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). The provider's 'application form'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> The provider has an appropriate named person for the qualification.

Optometry standard no.	S4.6
Optometry standard description	<p>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 learning in practice. 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.</p>
Independent Prescribing no.	S4.4
Independent Prescribing standard description	<p>There must be agreements in place between the trainee, their DPP and the provider that describe their respective roles and responsibilities during periods of learning and experience in practice. These must be regularly reviewed and supported by management plans, systems and policies which prioritise patient safety.</p>
Status	NOT MET – condition.
Deadline	Response to condition to be submitted alongside stage four(a).

Rationale	<p>The evidence did not provide the necessary assurance and therefore these standards are NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's draft 'Optometry FTY Supervisor Guide' document. • The provider's 'DPP Competency Framework' document. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • Documentation demonstrating that DPPs take primary responsibility for trainee supervision. • The roles and responsibilities of DPPs. • Confirmation that DPPs take primary responsibility for trainee supervision. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • Documentation demonstrating that DPPs take primary responsibility for trainee supervision. • A finalised copy of the DPP handbook. • Finalised memorandum of understanding between UHI and DPPs. <p>This condition has also been set against S4.5 (IP) and S4.6 (IP).</p>
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Independent Prescribing no.	S4.5
Independent Prescribing standard description	A trainee's DPP must be a registered healthcare professional with independent prescribing rights and be an active prescriber competent in the clinical area(s) they will be supervising the trainee in, have the relevant core competencies ⁷ and be trained and supported to carry out their role effectively.
Status	NOT MET – condition.
Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence did not provide the necessary assurance and therefore this standard is NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's draft 'Optometry FTY Supervisor Guide' document. • The provider's 'DPP Competency Framework' document. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • Confirmation of the roles and responsibilities of DPPs. • The roles and responsibilities of DPPs. • Confirmation that DPPs take primary responsibility for trainee supervision. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p>

	<ul style="list-style-type: none"> • Documentation demonstrating that DPPs take primary responsibility for trainee supervision. • A finalised copy of the DPP handbook. • Finalised memorandum of understanding between UHI and DPPs. <p>This condition has also been set against S4.4 (IP) & S4.6 (IP).</p>
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Independent Prescribing no.	S4.6
Independent Prescribing standard description	If more than one registered healthcare professional with independent prescribing rights is involved in supervising a trainee, one independent prescriber must assume primary responsibility for coordinating their supervision. That person will be the trainee's DPP.
Status	NOT MET – condition.
Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence did not provide the necessary assurance and therefore this standard is NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's draft 'Optometry FTY Supervisor Guide' document. • The provider's 'DPP Competency Framework' document. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • Documentation demonstrating that DPPs take primary responsibility for trainee supervision. • The roles and responsibilities of DPPs. • Confirmation that DPPs take primary responsibility for trainee supervision. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • Documentation demonstrating that DPPs take primary responsibility for trainee supervision. • A finalised copy of the DPP handbook. • Finalised memorandum of understanding between UHI and DPPs. <p>This condition has also been set against S4.4 (IP) & S4.5 (IP).</p>

Optometry standard no.	S4.7
Optometry standard description	<p>The approved qualification must be systematically reviewed, monitored and evaluated using the best available evidence, including feedback from stakeholders, and action taken to address any concerns identified. Evidence should demonstrate that as a minimum there are:</p> <ul style="list-style-type: none"> • feedback systems for students and placement providers; • structured systems for quality review and evaluation;

	<ul style="list-style-type: none"> • student consultative mechanisms; • input and feedback from external stakeholders (public, patients, employers, commissioners, students and former students, third sector bodies, etc.); and • evaluation of business intelligence including the National Student Survey (NSS), progression and attainment data. <p>To ensure that:</p> <ul style="list-style-type: none"> • 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; and • the quality of placements, learning in practice, inter-professional and work-based learning, including supervision, is appropriate.
Independent Prescribing no.	S4.7
Independent Prescribing standard description	<p>The approved qualification must be systematically monitored and evaluated across learning environments using the best available evidence, including feedback from stakeholders, and action taken to address any concerns identified. Evidence should demonstrate as a minimum:</p> <ul style="list-style-type: none"> • feedback systems for trainees and DPPs; • structured systems for quality review and evaluation; • trainee consultative mechanisms; • input and feedback from external stakeholders (patients, employers, DPPs, commissioners, trainees, former trainees, third sector bodies, etc); and • evaluation of business intelligence including progression and attainment data. <p>This will ensure that:</p> <ul style="list-style-type: none"> • provision is relevant, current and informed by evidence, and changes are made promptly to teaching materials and assessment items to reflect significant changes in practice and/or the results of research; • the quality of teaching, learning support and assessment is appropriate; and • the quality of learning and experience in practice, including supervision, is appropriate.
Status	NOT MET – condition.
Deadline	Monday 22 June 2026
Rationale	<p>The evidence did not provide the necessary assurance and therefore these standards are NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Supervisor End of Placement Feedback 2023' document. • The provider's 'Quality Assurance 2021-22' document. • The provider's 'NES Inclusive Education Learning Policy May 2023'. • The provider's 'Process for raising and resolving problems' document. • The provider's 'Annual quality monitoring 2022-23' document.

	<ul style="list-style-type: none"> The provider's 'Student Feedback Surveys – Home' document. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> Clarity on where and how patient feedback is reviewed, monitored, and evaluated. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> How patient feedback is reviewed, monitored and evaluated e.g., through a formal feedback process.
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Optometry standard no.	S4.8
Optometry standard description	<p>There must be policies and systems in place for:</p> <ul style="list-style-type: none"> the selection, appointment, support and training of external examiner(s) and/or internal and external moderator(s)/verifiers; and reporting back on actions taken to external examiners and/or internal and external moderators/verifiers.
Independent Prescribing no.	S4.8
Independent Prescribing standard description	<p>There must be policies and systems in place for:</p> <ul style="list-style-type: none"> the selection, appointment, support and training of external examiner(s) and/or internal and external moderator(s)/verifiers; and reporting back on actions taken to external examiners and/or internal and external moderators/verifiers.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> The provider's 'Curricula Vitae'. The provider's 'Guidance on External Examining' document. <p>The information reviewed evidenced, amongst other elements, that: There are clearly defined roles and responsibilities of external examiner(s).</p>

Optometry standard no.	S4.9
Optometry standard description	<p>There must be policies and systems in place to ensure the supervision of students during periods of learning and experience in practice safeguards patients and service-users and is not adversely affected by commercial pressures.</p>
Status	MET – no further action is required at this stage.
Deadline	Not applicable.

Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Placement Supervisor Handbook 2023-24'. • The provider's NHS Education for Scotland (NES) Supervisor Support Guide'. • The provider's 'Supervisor End of Placement Feedback 2023' document. • The provider's 'Placement Policy'. • The provider's 'Placement and Externally Supported Learning Policy'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There are clear policies on place to ensure the safeguarding of patients and service-users during periods of learning and experience in practice.
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Independent Prescribing no.	S4.9
Independent Prescribing standard description	Trainees, and anyone who supervises trainees, must be able to provide feedback on progress and raise concerns. Responses to feedback and concerns raised must be recorded and evidenced.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Placement Supervisor Handbook 2023-24'. • The provider's NHS Education for Scotland (NES) Supervisor Support Guide'. • The provider's 'Supervisor End of Placement Feedback 2023' document. • The provider's 'Academic Misconduct Policy and Procedure'. • The provider's draft 'Quality Management Strategy' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There are sufficient mechanisms in place for trainees and supervisors to provide feedback and raise concerns.

Optometry standard no.	S4.10
Optometry standard description	There must be policies and systems in place for the identification, support and training for all who carry responsibility for supervising students. The provider responsible for the award of the approved qualification must know how and by whom a student is being supervised during periods of learning in practice.
Status	MET – no further action is required at this stage.

Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). • The provider's 'Academic Misconduct' policy and procedure. • Documentation that outlined: <ul style="list-style-type: none"> ○ Resources available to supervisors, including training and health and wellbeing. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There is sufficient support and training in place for those responsible for the supervision of students.

Optometry standard no.	S4.11
Optometry standard description	Students, and anyone who teaches, assesses, supervises, employs or works with students, must be able to provide feedback and raise concerns. Responses and action taken to feedback and concerns raised must be evidenced.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Assessment Feedback and Feedforward' policy. • The provider's 'Undergraduate Reform Risk Register'. • The provider's processes for raising and resolving problems. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has clear mechanisms in place for providing feedback and raising concerns.

Optometry standard no.	S4.12
Optometry standard description	Complaints must be considered in accordance with good practice advice on handling complaints issued by the Office for the Independent Adjudicator for Higher Education in England and Wales (or equivalent).
Independent Prescribing no.	S4.10
Independent Prescribing	Complaints must be considered in accordance with good practice advice on handling complaints issued by the Office for the Independent Adjudicator for Higher Education in England and Wales (or equivalent).

standard description	
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Assessment Feedback and Feedforward' policy. • The provider's 'NHS Education for Scotland (NES) Complaints Handling' procedure. • The provider's processes for raising and resolving problems. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has clear and consistently applied policies and systems for considering complaints.

Optometry standard no.	S4.13
Optometry standard description	There must be an effective mechanism to identify risks to the quality of the delivery and assessment of the approved qualification, ensure appropriate management of commercial conflicts of interest and to identify areas requiring development.
Independent Prescribing no.	S4.11
Independent Prescribing standard description	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 attention or development.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). • The provider's 'Assessment Feedback and Feedforward' policy. • The provider's 'Undergraduate Reform Risk Register'. • The provider's 'Conflict of Interest' Policy. • The provider's 'GOC-UHI Additional Information April 2025' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has appropriately considered mechanisms for identifying risks to the qualification.

Optometry standard no.	S4.14
Optometry standard description	There must be systems and policies in place to ensure that the GOC is notified of any major events and/or changes to the delivery of the approved qualification, assessment and quality control, its organisation, resourcing and constitution, including responses to relevant regulatory body reviews.
Independent Prescribing no.	S4.12
Independent Prescribing standard description	There must be systems and policies in place to ensure that the GOC is notified of any major events and/or changes to the approved qualification, assessment and quality control, its organisation, resourcing and constitution, including responses to relevant regulatory body reviews.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative) that outlined: <ul style="list-style-type: none"> ◦ The provider's acknowledgement that it will report changes and/or events to the General Optical Council. • The provider's 'Academic Standards and Quality Regulations 2022-23 Programme approval' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider understands it must report changes and or/events to relating to the qualification to the General Optical Council.

Optometry standard no.	S5.1
Optometry standard description	There must be robust and transparent mechanisms for identifying, securing, and maintaining a sufficient and appropriate level of ongoing resource to deliver the outcomes to meet these standards, including human and physical resources that are fit for purpose and clearly integrated into strategic and business plans. Evaluations of resources and capacity must be evidenced, together with evidence of recommendations considered and implemented.
Independent Prescribing no.	S5.1
Independent Prescribing standard description	There must be robust and transparent mechanisms for identifying, securing and maintaining a sufficient and appropriate level of ongoing resources to deliver the outcomes to meet these standards, including human and physical resources that are fit for purpose and clearly integrated into strategic and business plans. Evaluations of resources and capacity must

	be evidenced together with evidence of recommendations considered and implemented.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Assessment Feedback and Feedforward' policy. • The provider's 'Undergraduate Reform Risk Register'. • Documentation that outlined: <ul style="list-style-type: none"> ○ How students receive feedback during their studies. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has sufficiently demonstrated appropriate resourcing.

Optometry standard no.	S5.2
Optometry standard description	<p>There must be sufficient and appropriately qualified and experienced staff to teach and assess the outcomes. These must include:</p> <ul style="list-style-type: none"> • an appropriately qualified and experienced programme leader, supported to succeed in their role; • sufficient staff responsible for the delivery and assessment of the outcomes, including GOC registrants and other suitably qualified healthcare professionals; • sufficient supervision of students' learning in practice by GOC registrants who are appropriately trained and supported in their role; • and an appropriate student:staff ratio (SSR), which must be benchmarked to comparable provision.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). • The provider's 'Programme(s) Leader Role for Degree and HN Programmes' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There is an appropriately qualified and experienced programme leader. • NHS Education for Scotland (NES) will be responsible for the recruitment and training of individuals for the Clinical and Educational Supervisors.

Independent Prescribing no.	S5.2
Independent Prescribing standard description	<p>There must be a sufficient and appropriately qualified and experienced staff team. This must include:</p> <ul style="list-style-type: none"> • an appropriately qualified and experienced programme leader, supported to succeed in their role; and • sufficient staff responsible for the teaching and assessment of the outcomes, including GOC registrants and other suitably qualified healthcare professionals.
Status	MET – recommendation.
Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). • The provider's 'Programme(s) Leader Role for Degree and HN Programmes' document. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There is an appropriately qualified and experienced programme leader. • NHS Education for Scotland (NES) will be responsible for the recruitment and training of individuals for the Clinical and Educational Supervisors. <p>Although the information reviewed provided sufficient assurance that this standard is met, a recommendation has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • A copy of the signed and finalised partnership agreement between the University and NHS Education for Scotland. <p>This recommendation has also been set against S2.6 (IP), S3.8 (IP), S3.12 (IP) and S4.1 (IP).</p>

Optometry standard no.	S5.3
Optometry standard description	<p>Staff who teach and/or assess the outcomes must be appropriately qualified and supported to develop in their professional, clinical, supervisory, academic/teaching and/or research roles. These must include:</p> <ul style="list-style-type: none"> • opportunities for continuing professional development (CPD), including personal, academic and profession-specific development;

	<ul style="list-style-type: none"> • effective induction, supervision, peer support, and mentoring; • realistic workloads for anyone who teaches, assesses or supervises students; • for teaching staff, the opportunity to gain teaching qualifications; and • effective appraisal, performance review and career development support
Independent Prescribing no.	S5.3
Independent Prescribing standard description	<p>There must be policies and systems in place to ensure anyone involved in the approved qualification is appropriately qualified and supported to develop in their role. These must include:</p> <ul style="list-style-type: none"> • opportunities for CPD, including personal, academic and profession-specific development; • for registered healthcare professionals and DPPs supervising trainees, opportunity for training and support; • effective induction, supervision, peer support and mentoring; • realistic workloads for anyone who teaches, assesses or supervises trainees; • for teaching staff, the opportunity to gain teaching qualifications; and • effective appraisal, performance review and career development support.
Status	NOT MET – condition.
Deadline	Response to condition to be submitted alongside stage four(a).
Rationale	<p>The evidence did not provide the necessary assurance and therefore these standards are NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'Training and Development' policy. • The provider's 'Optometry Supervisor Guide'. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • Details of the training given to DPPs. • Details of staff/whole time equivalent (WTE)/roles etc and the elements of the qualification they support with and/or deliver e.g., through a staffing list. • Staff teaching commitments. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • Further information on the training provided to DPPs e.g., training schedule and materials. • Information on staff teaching commitments.
Optometry standard no.	S5.4

Optometry standard description	<p>There must be sufficient and appropriate learning facilities to deliver and assess the outcomes. These must include:</p> <ul style="list-style-type: none"> • 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; and • enrichment activities, which may include non-compulsory, non-assessed elements.
Independent Prescribing no.	S5.4
Independent Prescribing standard description	<p>There must be sufficient and appropriate learning facilities to deliver and assess the outcomes. These must include:</p> <ul style="list-style-type: none"> • sufficient and appropriate library and other information and IT resources; • access to specialist resources, including textbooks, journals, internet and web-based materials; and • specialist teaching, learning and clinical facilities to enable the delivery and assessment of the outcomes.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative) that outlined: <ul style="list-style-type: none"> ○ General facilities available to student, including details of the teaching spaces. ○ Learning resources including library, video conferencing and IT access for students. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has sufficient and appropriate learning facilities to deliver and assess the outcomes for the qualification.

Optometry standard no.	S5.5
Optometry standard description	Students must have effective support for health, wellbeing, conduct, academic, professional and clinical issues
Independent Prescribing no.	S5.5
Independent Prescribing	Trainees must have effective support for health, wellbeing, conduct, academic, professional and clinical issues.

standard description	
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that these standards are MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • The provider's 'University of the Highlands and Islands Application for MOptom with IP' documents (equivalent to Template 2 – Criteria Narrative). • The provider's 'NHS Education for Scotland (NES) Inclusive Education Learning Policy'. • The provider's process for raising and resolving problems. • Documentation evidencing: <ul style="list-style-type: none"> ○ The support and support resources available to students. ○ How students receive feedback during their studies. ○ How students can raise complaints. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has effective support mechanisms in place for its students that cover health, wellbeing, conduct, academic, professional and clinical issues.