

Ulster University
Quality Assurance Visit
BSc (Hons) Optometry and MOptometry (Hons)
16 and 17 October 2019

Date report completed	18 December 2019
Report confirmed by GOC	16 December 2020

TABLE OF CONTENTS

PART 1 – VISIT DETAILS	3
PART 2 – VISIT SUMMARY	4
2.1 Visit outcomes & Summary of Panel recommendations to the GOC.....	Error! Bookmark not defined.
PART 3 – CONDITIONS & RECOMMENDATIONS	6
Actions set at this visit	6

PART 1 – VISIT DETAILS

1.2 Programme Details	
Programme title	Optometry
Programme type	BSc (Hons) and MOptom (Hons)
Current approval status	<p>The BSc (Hons.) Optometry programme was accredited for five years following the last visit on the 9th and 10th of April 2014.</p> <p>The MOptom (Hons.) programme was recommended for 'approval' to commence in September 2018. At this meeting on 9th August, 2017, the Panel also recommended that the MOptom programme should be reviewed alongside the BSc programme during the full quality assurance visit due to take place in 2019.</p>
Approved/current annual student numbers	36

1.3 GOC Education Visitor Panel	
Chair	Jane Andrews, Lay Chair
Visitors	Christine Harm, Dispensing Optician/Contact Lens Optician Brendan Barrett, Optometrist. Navneet Gupta - IP/Optometrist Markham May- Lay Member
GOC representative	Shaun de Riggs - Approval and Quality Assurance Officer
Observers	Mark Bissell, Lay Chair

1.4. Purpose of the visit	
Visit type	Quality Assurance Visit
<p>A quality assurance visit took place on Wednesday 16 and 17 October 2019 by the GOC's Education Visitor Panel (the Panel) to Ulster University's BSc (Hons) and MOptom (Hons) optometry programmes in order to assess them against the programme requirements prescribed in the GOC's <i>Education A & QA-Supplementary Documents-List of Requirements (Optometry specific and generic)</i>.</p> <p>All Optometry students begin via the BSc pathway, with those demonstrating a strong academic performance (an average of 60% or above) in Year 2 being eligible to apply for</p>	

the MOptom - all Optometry students continue into Year 3 of the BSc however students following the BSc route will graduate at the end of Year 3 and continue onto the College of Optometrists (CoO) Scheme for Registration (SfR), also referred to as a pre-registration year. Those accepted onto the MOptom pathway will not graduate at the end of Year 3 and will instead continue to Year 4 studying the MOptom alongside their pre-registration year, and graduate at the end of Year 4.

1.5 PROGRAMME VISIT HISTORY

Set out a chronology of the key events affecting the programme in the last FIVE years, including any visits and key events.

Date	Event type	Overview
09/04/2014	Visit	GOC visit to Ulster University's <u>BSc Optometry</u> programme (the programme was granted full approval by Council in 2009). On 3 July 2014, the Education Committee supported the two conditions and four recommendations & agreed that the programme would be kept under review via the GOC's annual monitoring activity with the next quality assurance visit taking place in 2019.
08/08/2017	Visit	GOC provisional approval visit to Ulster University's <u>MOptom</u> programme – provisional approval was granted by Council at its meeting on 28 February 2018 for the programme to commence in September 2018, with the MOptom programme being reviewed alongside the BSc programme's next full quality assurance visit in 2019 (this visit).

PART 2 – VISIT SUMMARY

2.1 Visit outcomes

The Panel recommended that approval for the BSc Optometry (Hons) and MOptom (Hons) programme should continue, with the next quality assurance visit taking place within a maximum of five years' time.

Summary of recommendations to the GOC

Previous condition/s – met	See 2.2
New conditions	1
New recommendations	2
Commendations	0
Student numbers	36
Approval/next visit	Recommended for approval for five years.

Factors to consider when scheduling next visit e.g. when students are in, hospital, audit etc.	Year 4 students are unlikely to be in attendance at Ulster University during the next visit, therefore MOptom students will need to be contacted via teleconference.
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Ref No.	Condition	Requirement number	Met?
1	BSc Optometry (Hons) Existing resourcing levels are to be maintained explicitly including part-time hours budget, permanent posts and administrative/technical support. All staffing updates or vacancies that arise are to be reported to the GOC via the annual monitoring process.	N/A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Given concern has been raised by both external examiners and students regarding the amendment of regulations to award degrees on the final year marks only and the risk of the adverse impact of student engagement in earlier parts of the programme. The department is asked to keep the impact of this change under review and report on stakeholder feedback regarding this via future annual monitoring submissions.	N/A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

2.3 Previous recommendations	
The recommendations listed below are extracted from the report of the visit conducted on 9 and 10 April 2014:	
Description	Comments
BSc Optometry (Hons) <ul style="list-style-type: none"> i. To include an attendance record for hospital visits to be signed by supervising ophthalmologists. The hospital visit should also include the opportunity to observe cataract surgery. ii. The department should provide students with a template for their patient experience logbooks to ensure consistency of records. iii. Continue to develop and implement an electronic system 	

<p>for recording and tracking clinical experiences.</p> <p>iv. To review the format of the BV and LV clinics with the intention of increasing the opportunities for students to gain more hands-on experience rather than just observing.</p>	
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PART 3 – CONDITIONS

Actions set at this visit	
Conditions are applied to training and assessment providers if there is evidence that the GOC requirements are not met. The conditions (unmet requirements) for this visit are set out below:	
OP6.12	The portfolio must contain a case record for each individual patient episode contributing to the minimum requirements.
Action 1	The University devises a means of evidencing, in the portfolio, the full case record of a patient episode for initial dispensing advice and the identification of safe & unsafe episodes.
Date Due	1 June 2021*
Rationale	<p>The Panel were informed that the Optometry programme operates an electronic patient management software programme called XEyeX, whereby all clinical records are saved after each patient encounter. Student logbooks (portfolios) contain a printout of each clinical record as evidence of completion. However, for dispensing patient episodes, the electronic system is used primarily for initial selection and ordering of spectacles only. On many occasions, patients will go through the experience of initial selection but then not follow-through with an order. Accordingly, a paper-based logbook is used to capture these episodes. The Panel noted that many of these episodes contained very little detail, providing insufficient evidence of the episode, to the extent required of a clinical record.</p> <p>The Panel also noted that for all clinical episodes, there is no recording or “safe” and “unsafe” episodes, instead the university uses an approach whereby “safe” episodes are implicit by their presence in the portfolio.</p> <p>The Panel were concerned about the completeness of the case records in meeting the GOC’s requirements and considered that going forward it was essential that the University find a means of evidencing all episodes, including “unsafe” ones, as well as the completeness of each clinical record for all types of patient experience (including dispensing) in the portfolio.</p> <p>The Panel reviewed all the information provided by the University. Due to the print-outs of clinical records provided in the portfolios being incomplete, and the on-line system not being accessible by the Panel, it was not possible to check case records for patient episodes to ensure that the GOC’s minimum requirements were met. However, when a series of examples of incomplete records were put to the University team, they were able to access the systems and demonstrate that the records, together, were sufficient to meet the GOC requirements. These mechanisms could be enhanced by consolidating the audit trail.</p>

Recommendations made at this visit

The Panel offers the following recommendation(s) to the provider. Recommendations indicate enhancements that can be made to a programme but are not directly linked to compliance with GOC requirements.

Ref.	Description
1.	<p>The University put in place a formal procedure for the effective capturing of feedback and reflection.</p> <p>Rationale: The Panel were concerned that although they heard that feedback was given and received, there had been no formal process in place for capturing ongoing feedback and reflection, thus ensuring that all the feedback given was reflected on by the student who then focused on opportunities for improvement. There was evidence of written reflection taking place, but this was in the portfolio submitted and was a general statement rather than on a case by case basis followed by the students themselves and the feedback given by Supervisors.</p> <p>The Panel noted positively the very recent introduction of a student notebook system to capture learning from patient episodes. If the notebook becomes the formal process of providing feedback and encouraging reflection, its effectiveness in practice should be reviewed over time.</p>

*new date agreed in conjunction with the provider in January following an outstanding enquiry.