

University of Bradford
Report of the outcomes of the adaptation to the GOC education & training requirements
MOptom (Hons) Optometry
BRU-OP1-ETR
Report confirmed by GOC 10 April 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 Bradford's adapted MOptom (Hons) Optometry qualification against the *Requirements for Approved Qualifications in Optometry and Dispensing Optics* (March 2021).

It includes:

- Feedback against each relevant standard (as listed in the merged adaptation form).
- The status of all the standards reviewed as part of the adaptation process (which includes the formal response process).
- Any action the University of Bradford is required to take.

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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 the 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
As part of the qualification, the College of Optometrists will be delivering the Clinical Learning in Practice (CLiP) scheme.

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SECTION THREE – QUALIFICATION DETAILS

3.1 QUALIFICATION DETAILS	
Qualification title	MOptom (Hons) Optometry
Qualification level	FHEQ* Level seven *Framework for Higher Education Qualifications of Degree-Awarding Bodies in England, Wales and Northern Ireland.
Duration of qualification	48 months
Number of cohorts per academic year	One
Month(s) of student intake	September
Delivery method(s)	Full time
Alternative exit award(s)	<ul style="list-style-type: none"> • Stage one - Certificate of Higher Education in Clinical Vision Science • Stage two - Diploma of Higher Education in Clinical Vision Science • Stage three - Honours Degree of Bachelor in Clinical Vision Science
Total number of students per cohort	110

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SECTION FOUR – SUMMARY OF THE OUTCOMES OF THE ADAPTATION PROCESS

4.1 QUALITY ASSURANCE ACTIVITY	
Type of activity	Review of the University of Bradford's (university) adapted MOptom (Hons) Optometry qualification (qualification) against the <i>Requirements for Approved Qualifications in Optometry and Dispensing Optics</i> (March 2021).

4.2 GOC REVIEW TEAM	
Officer	<ul style="list-style-type: none"> Ella Pobe – Education Development Officer Georgia Smith – Education Development Officer
Manager	Lisa Venables – Education Development Manager
Decision maker	Samara Morgan – Head of Education & CPD
Education Visitor Panel (panel) members	<ul style="list-style-type: none"> Jane Andrews – Lay chair Pam McClean – Optometrist & Independent Prescribing Optometrist member Mark Chatham – Dispensing Optician & Contact Lens Optician member Rebekah Stevens – Optometrist member

4.3 SUMMARY OF CONDITIONS AND RECOMMENDATIONS	
Conditions	The qualification has been set conditions against the following standard: <ul style="list-style-type: none"> S3.7
Recommendations	The qualification has been set no recommendations.
Commentary against all of the standards reviewed are 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
<p>The standards reviewed as part of the adaptation process for approved qualifications (as listed in the merged adaptation form*) are listed below along with the outcomes, statuses, actions, and any relevant deadlines. Actions may include the following:</p> <ul style="list-style-type: none"> 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. No further action is required – the information submitted provides the necessary assurance that a standard is met. <p>*The following standards listed were not reviewed as part of the adaptation process but are monitored as part of the GOC's Quality Assurance and Enhancement Methods (QAEM):</p>

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- Standard one - public and patient safety: S1.1, S1.2, S1.3, S1.4
- Standard two - admissions of students: S2.2, S2.3, S2.4
- Standard three - assessment of outcomes and curriculum design: S3.2, S3.8, S3.9, S3.10, S3.11, S3.12, S3.13, S3.20, S3.21
- Standard four - management, monitoring and review of approved qualifications: S4.6, S4.7, S4.8, S4.9, S4.10, S4.11, S4.12
- Standard five - leadership, resources and capacity: S5.3, S5.4, S5.5

Further details on the evidence that the provider was required to complete or submit as part of the education and training requirements (ETR) adaptation process can be found on our [qualifications in optometry or dispensing optics](#) webpage.

Standard no.	S2.1
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.
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"> • Optometric specific webpage on university website • Template 2 – criteria narrative • Appendix 3 – <i>Programme Specification</i> • Appendix 6 – <i>Admissions Policy</i> • Evidence submitted in support of a further information request <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The university has appropriate, clear, and comprehensive entry and IELTS requirements. • The university has appropriate, clear, and comprehensive admissions criteria.

Standard no.	S2.5
Standard description	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

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	exempt students from summative assessments leading to the award of the approved qualification, unless achievement of prior learning can be evidenced as equivalent.
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"> • Optometric specific webpage on university website • Template 2 – criteria narrative • Appendix 3 – <i>Programme Specification</i> • Appendix 7 – <i>Guide to the Recognition of Prior Learning</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The university's policies and processes covering recognition of prior learning and advanced entry are robust.

Standard no.	S3.1
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.
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"> • Template 2 – criteria narrative • Template 4 – assessment strategy • Template 5 – module outcome map • Template 8 – outcome mapping to indicative guidance • Appendix 4 – <i>Module Descriptors</i> • Appendix 8 – <i>Undergraduate Award Regulations</i> • Appendix 9 – <i>FHEQ Learning Outcomes Map Levels 4-6</i> • Appendix 10 – <i>FHEQ Learning Outcomes Map Level 7</i> • Appendix 11 – <i>Assessment Mapping</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The assessment strategy is clear and includes the mapping and achievement of learning outcomes to appropriate frameworks. • External examiners are appropriately involved in the qualification.

Standard no.	S3.3
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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 – 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"> • Template 2 – criteria narrative • Template 4 – assessment strategy • Template 5 – module outcome map • Appendix 3 – <i>programme specification</i> • Appendix 5 – <i>Case Based Learning Format</i> • Appendix 18 – <i>College CLiP Handbook</i> • Appendix 20 – <i>Stakeholder involvement and externality</i> • Evidence submitted in support of a further information request <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • An appropriate level of IPL is integrated within and across the qualification including within the College of Optometrists' Clinical Learning in Practice scheme.

Standard no.	S3.4
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.
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"> • Template 2 – criteria narrative • Appendix 28 – <i>Developing Your Teaching at Bradford</i> • Appendix 29 – <i>LTQE Workshops</i> • Evidence submitted in support of a further information request

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	<p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> Curriculum design, delivery and the assessment of outcomes have been informed by feedback from a range of stakeholders. Stakeholders involved in the teaching, supervision and/or assessment of students are appropriately trained, including in equality and diversity.
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Standard no.	S3.5
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 this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> Template 2 – criteria narrative Template 4 – assessment strategy Template 5 – module outcome map Template 8 – outcome mapping to indicative guidance Appendix 3 – <i>Programme Specification</i> Appendix 16 – <i>Academic Misconduct Procedure</i> Appendix 17 – <i>Academic Misconduct Regulations</i> Appendix 18 – <i>College Clip Handbook</i> Appendix 19 – <i>Student Complaints Procedure</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> There is clear evidence that compensation and referral, trailing and extended re-sit opportunities are not permitted. There is clear evidence that assessments containing GOC outcomes must be passed. The qualification includes a wide variety of assessments methods.

Standard no.	S3.6
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	The evidence reviewed provided the necessary assurance that this standard is MET.

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	<p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • Template 2 – criteria narrative • Template 4 – assessment strategy • Template 5 – module outcome map • Template 8 – outcome mapping to indicative guidance • Appendix 3 – <i>Programme Specification</i> • Appendix 4 – <i>Module Descriptors</i> • Appendix 8 – <i>Undergraduate Award Regulations</i> • Appendix 18 – <i>College Clip Handbook</i> • Appendix 21 - <i>CLiP Part 1 descriptor - 04-07-2022</i> • Appendix 22 - <i>CLiP Part 2 descriptor - 04-07-2022</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The types and range of assessment methods are appropriate to the qualification. • The qualification is mapped against the SPOKE indicative guidance. • Exit awards are clearly identified and it is made clear to students that they do not allow admittance to the GOC register.
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Standard no.	S3.7
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	NOT MET – condition.
Deadline	1 June 2025
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"> • Template 2 – criteria narrative • Template 4 – assessment strategy • Template 5 – module outcome map • Template 8 – outcome mapping to indicative guidance • Appendix 3 – <i>Programme Specification</i> • Appendix 4 – <i>Module Descriptors</i> • Appendix 8 – <i>Undergraduate Award Regulations</i> • Appendix 12 - <i>External Examiners Guide</i> • Appendix 13 - <i>External Examiners Regulations</i> • Appendix 18 – <i>College Clip Handbook</i> • Appendix 21 - <i>CLiP Part 1 descriptor - 04-07-2022</i> • Appendix 22 - <i>CLiP Part 2 descriptor - 04-07-2022</i>

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	<ul style="list-style-type: none"> Evidence submitted in support of a further information request <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> The 40% pass mark is in line with university undergraduate award regulations. There is a <i>must pass</i> system for ringfenced components of assessments. Assessments are subject to quality assurance including the use of marking rubrics and the training of assessors and examiners. There is qualification and university-wide early identification of low performing students and the provision of support. <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"> That the 40% pass mark has been set using an appropriate and tested standard-setting process. <p>The GOC acknowledges that the pass mark of 40% for the qualification is in line with the university's academic regulations. However, it considers, that further assurance is needed. Possible types of evidence that can be submitted (but not limited to) are:</p> <ul style="list-style-type: none"> How the university-wide pass mark of 40% has been tested to ensure it meets the requirements of the qualification (reflecting that optometry is a regulated, healthcare profession). Any safety measures and mitigations that have been put into place in relation to the pass mark. How the university assures itself that students passing at 40% are safe practitioners. Whether the pass mark been benchmarked against other health care qualifications within the university and across the academic optometry sector.
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Standard no.	S3.14
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.
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"> Template 2 – criteria narrative Template 4 – assessment strategy Template 5 – module outcome map

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	<ul style="list-style-type: none"> • Appendix 4 – <i>Module descriptors</i> • Appendix 9 – <i>FHEQ Learning Outcomes Map Levels 4-6</i> • Appendix 10 – <i>FHEQ Learning Outcomes Map Levels 7</i> • Appendix 18 – <i>College CLiP Handbook</i> • Appendix 20 – <i>Stakeholder involvement and externality</i> • Appendix 21 – <i>CLiP Part 1 descriptor - 04-07-2022</i> • Appendix 22 – <i>CLiP Part 2 descriptor - 04-07-2022</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification has an appropriate and consistent assessment strategy mapped against the learning outcomes. • The qualification includes a variety of assessment methods. • There is an appropriate range of learning and teaching methods within the qualification.
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Standard no.	S3.15
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 this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • Template 2 – criteria narrative • Template 5 – module outcome map • Appendix 3 – <i>Programme Specification</i> • Appendix 4 – <i>Module descriptors</i> • Appendix 18 – <i>College CLiP Handbook</i> • Appendix 21 – <i>CLiP Part 1 descriptor - 04-07-2022</i> • Appendix 22 – <i>CLiP Part 2 descriptor - 04-07-2022</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification includes the required minimum 1600 hours/48 weeks of patient-facing learning and experience in practice. • Students must log their patient facing experience in practice in a pass/fail logbook.

Standard no.	S3.16
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.

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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"> • Template 2 – criteria narrative • Template 4 – assessment strategy • Template 5 – module outcome map • Template 8 – outcome mapping to indicative guidance • Appendix 3 – <i>Programme Specification</i> • Appendix 4 – <i>Module descriptors</i> • Appendix 18 – <i>College CLiP Handbook</i> • Appendix 21 – <i>CLiP Part 1 descriptor - 04-07-2022</i> • Appendix 22 – <i>CLiP Part 2 descriptor - 04-07-2022</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification has a comprehensive assessment strategy. • Mapping of learning outcomes within the qualification has occurred. • The types and range of assessment methods are appropriate to the qualification.

Standard no.	S3.17
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.
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 education & training requirements webpages of the College of Optometrists website. • Template 2 – criteria narrative • Appendix 18 – <i>College CLiP Handbook</i> • Appendix 20 – <i>Stakeholder involvement and externality</i> • Appendix 21 – <i>CLiP Part 1 descriptor - 04-07-2022</i> • Appendix 22 – <i>CLiP Part 2 descriptor - 04-07-2022</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The university has engaged with various stakeholders using a wide range of methods.

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	<ul style="list-style-type: none"> Curriculum design, delivery and the assessment of outcomes have been informed by feedback from a range of stakeholders.
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Standard no.	S3.19
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.
Status	MET – no further action 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"> University-wide EDI webpage Template 2 – criteria narrative Appendix 30 – <i>Equality impact assessment</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> The collection and analysis of equality and diversity data has informed the qualification's design, delivery, and assessment.

Standard no.	S4.1
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.
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"> Template 2 – narrative criteria Appendix 23 – <i>Charter-15-July-2015</i> Appendix 24 – <i>OfS Registration</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> The university has the appropriate legal status and degree awarding powers.

Standard no.	S4.2
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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"> • Template 2 – narrative criteria • Appendix 14 – <i>Assessment Regulations</i> • Appendix 25 – <i>University Committee Structure</i> • Appendix 26 – <i>Terms of Reference – Faculty Portfolio Monitoring Group</i> • Appendix 27 – <i>Academic Portfolio Lifecycle</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification's governance structures, committees, and lines of accountability are clear and appropriate.

Standard no.	S4.4
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 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"> • Template 2 – criteria narrative • Appendix 18 – <i>College CLiP Handbook</i> • Appendix 23 – <i>Charter-15-July-2015</i> • Appendix 24 – <i>OfS Registration</i> • Evidence submitted in support of a further information request <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There are well-defined roles and responsibilities for both the university and the College of Optometrists and these are clearly outlined. • The university understands its role as the sole provider for the qualification.

Standard no.	S4.5
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Standard description	The provider of the approved qualification must have a named person who will be the primary point of contact for the GOC.
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"> • Template 2 – narrative criteria <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification has an appropriate named person.

Standard no.	S4.13
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.
Status	MET – no further action 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"> • Template 2 – criteria narrative • Appendix 1 – <i>Risk register Jan 2024 BSc</i> • Appendix 2 – <i>Risk register Jan 2024 MOptom</i> • Appendix 26 – <i>Terms of Reference - Faculty Portfolio Monitoring Group</i> • Appendix 27 – <i>Academic Portfolio Lifecycle</i> <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There are appropriate mechanisms and quality assurance processes in place for identifying and mitigating risks to the qualification. • The university has considered and implemented appropriate mechanisms for the management of commercial conflicts of interest within the qualification.

Standard no.	S5.1
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.

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Status	MET – no further action 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"> • Template 2 – criteria narrative • Appendix 1 – <i>Risk register Jan 2024 BSc</i> • Appendix 2 – <i>Risk register Jan 2024 MOptom</i> • Evidence submitted in support of a further information request. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There are appropriate mechanisms for resourcing. • The university has explained how relevant stakeholders are involved in resourcing. • The university utilised the resource approvals process to resolve a recent qualification specific resource issue. • Within its risk register, the university has identified risks that are related to resourcing and discussed how these are monitored and mitigated.

Standard no.	S5.2
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 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"> • Template 2 – criteria narrative • Appendix 1 – <i>Risk register Jan 2024 BSc</i> • Appendix 2 – <i>Risk register Jan 2024 MOptom</i> • Evidence submitted in support of a further information request • The signed and finalised 'Partnership agreement' between the university and the College of Optometrists.

ADP-RPT Report of the outcomes of the adaptation to the education & training requirements			
Version	v1.0	Date version approved	29 January 2024
Version effective from	January 2024	Next review date	January 2025

	<p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There are well-defined roles and responsibilities for both the university and the College of Optometrists and these are clearly outlined. • The university understands its role as the sole provider for the qualification. • The university has clear processes in place for managing the resourcing of the qualification.
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ADP-RPT Report of the outcomes of the adaptation to the education & training requirements			
Version	v1.0	Date version approved	29 January 2024
Version effective from	January 2024	Next review date	January 2025