University of Leicester
Application for qualification approval: Stage 3 decision and report
Master of Optometry (MOptom)
LEI-OP1-APP
Report confirmed by GOC 7 September 2026

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SECTION ONE – ABOUT THIS DOCUMENT

1.1 ABOUT THIS DOCUMENT

This report outlines the outcomes of the review of University of Leicester's Master of Optometry (MOptom) (qualification) application against stage 3 of the *Requirements for Approved Qualifications in Optometry and Dispensing Optics* (March 2021)

It includes:

- Feedback against each relevant standard as listed in the Merged Application Form.
- The status of all the standards reviewed as part of the application process for stage 3.
- Any action University of Leicester is required to take.
- Whether the qualification is allowed to pass on to the next stage of the application process or needs to repeat a stage.
- Whether the provider is ready to recruit as an "approved training establishment" to the qualification.

SECTION TWO – PROVIDER DETAILS

2.1 TYPE OF PROVIDER	
Provider *Sole responsibility for the entire route to registration.*	☒
Awarding Organisation (AO) *Sole responsibility for the entire route to registration with centres delivering your qualification(s).*	☐

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 (CoO) will be delivering the Clinical Learning in Practice (CLiP) scheme.

SECTION THREE – QUALIFICATION DETAILS

3.1 QUALIFICATION DETAILS	
Qualification title	Master of Optometry (MOptom)
Qualification level	Level 7 (Framework for Higher Education Qualifications [FHEQ])
Duration of qualification	Four years
Number of cohorts per academic year	One
Month(s) of student intake	September
Delivery method(s)	Full Time
Alternative exit award(s)	• Level 4 – Certificate of Higher Education (Cert HE) in Optical Science • Level 5 – Diploma of Higher Education (Dip HE) in Optical Science • Level 6 – Bachelor of Science (BSc) in Optical Science
Total number of students per cohort	First cohort – 34 Second cohort – 68 Third cohort onwards – 95

SECTION FOUR – SUMMARY OF THE OUTCOMES OF STAGE 3 OF THE APPLICATION PROCESS

4.1 QUALITY ASSURANCE ACTIVITY	
Type of activity	Review of University of Leicester's Master of Optometry (qualification) application against the *Requirements for Approved Qualifications in Optometry and Dispensing Optics* (March 2021).

4.2 GOC REVIEW TEAM	
Education Officer	Tara Obembe – Education Operations Officer
Education Manager	Georgina Carter – Education Operations Manager
Head of Education & CPD	Samara Morgan – Head of Education & CPD
Decision maker	Leonie Milliner – Chief Executive & Registrar (CE&R)
Education Visitor Panel (panel) members	• Jane Andrews – Lay Chair member • John Siderov – Optometrist member • Kiki Soteri – Optometrist and Independent Prescribing Optometrist member • Claire Wier – Dispensing Optician member • Sarah Fishburn – Lay member

4.3 SUMMARY OF OUTCOMES OF REVIEW

Following review of the documentation submitted for stages 1, 2, and 3 of the application, the Chief Executive & Registrar is pleased to grant approval for the following:

- University of Leicester can commence recruiting students to the qualification as an 'approved training establishment'*.

* The approval of a provider as an 'approved training establishment' under section 8A(2) of the Act is for the sole purpose for students **studying** on the qualification **registering with the GOC** as student registrants. It confers no further rights to the provider and must not be portrayed as such.

As a result, University of Leicester:

- Can move to stage 4 of the application process for an approved qualification in accordance with our education and training requirements (requirements) for its Master of Optometry (MOptom) qualification; and
- may begin delivering the MOptom qualification, in line with the *Requirements for Approved Qualifications in Optometry or Dispensing Optics* (March 2021) from September 2026.

Key points to note

- This qualification is not a GOC approved qualification until a decision is made at stage 5 of the application process.

• Students entering the qualification must be made aware that the qualification is not yet a GOC approved qualification until stages 4 and 5 of the GOC's application process are satisfactorily completed.
The qualification has been set conditions against the following standards: • S3.3 • S4.6 • S4.8
The qualification has been set recommendations against the following standards: • S5.2
The qualification has been set one area of good practice in line with the following standards: • S3.19
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 to seek GOC approval for a qualification (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 provider 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 webpage.

Standard no.	S1.1
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
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. Supporting evidence reviewed included, but was not limited to:

	• Template 2- Criteria Narrative • MOptom Programme Development, Approval and Modification (PDAM) form • Template 4 - Assessment Strategy The information reviewed evidenced, amongst other elements, that: • There are policies and systems in place to ensure that students understand and adhere to the GOC's Standards for Optical Students.

Standard no.	S1.2
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.)
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. Supporting evidence reviewed included but was not limited to: • Template 2- Criteria Narrative • Governing Student conduct and discipline policy • Optometry Students - Standards of Medical Fitness to Train policy • School of Healthcare Investigating Committee (SHIC) documentation • Fitness to Practice (FtP) process flowchart • MOptom Programme Specification • Information provided as part of the in-person visit. The information reviewed evidenced, amongst other elements, that: • Concerns about a student's fitness to train is investigated through robust, fair proportionate processes and necessary, action will be taken and reported to the GOC.

Standard no.	S1.3
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
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. Supporting evidence reviewed included but was not limited to: • Template 2- Criteria Narrative • Early Years Handbook • Safeguarding and Prevent Policy • Information provided as part of the in-person visit. The information reviewed evidenced, amongst other elements, that: • There is clarity on the specific role(s) and responsibilities of placement supervisors during the 'Early Years Placements', particularly for the Year 1 placements. • 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. • There are policies and processes in place to ensure that anyone who teaches, assesses, supervises or employs students ensure students practise safely.

Standard no.	S1.4
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.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Policy on Return of Marked Work The information reviewed evidenced, amongst other elements, that: • Upon admission (and at regular intervals thereafter) students are 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.

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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Course webpages • Code of Practice for Admissions • Access & Participation Plan 2025-26 - 2028-29 • Admission and registration for taught programmes policy • Admissions - Group Task Interview rubric • Admissions - Individual Interview rubric The information reviewed evidenced, amongst other elements, that: • Selection and admission criteria are appropriate for entry to an approved qualification. • 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.

Standard no.	S2.2
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
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative

	• Code of Practice for Admission • Access and Participation Plan • Admission and Registration for Taught Programmes policy The information reviewed evidenced, amongst other elements, that: • Recruitment, selection and admission processes is 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.

Standard no.	S2.3
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.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative The information reviewed evidenced, amongst other elements, that: • Selectors (who may include academic and admissions/administrative staff) are trained to apply selection criteria fairly, including training in equality, diversity and unconscious bias.

Standard no.	S2.4
Standard description	Information provided to applicants must be accurate, comply with relevant legislation and include: • the academic and professional entry requirements required for entry to the approved qualification; • a description of the selection process and any costs associated with making the application; • the 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.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Course webpages The information reviewed evidenced, amongst other elements, that: • 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.

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 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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Course webpages. • Policy and Procedures for the Accreditation of Prior Learning. • Admissions and Registration for Taught Programmes policy. The information reviewed evidenced, amongst other elements, that:

	• Recognition of prior learning is supported by effective and robust policies and systems.

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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • MOptom programme overview explanation document • MOptom programme overview spreadsheet • College of Optometrists pre-CLiP outcomes mapping • University of Leicester Assessment Strategy 2023-28 • Policy on Generative Artificial Intelligence in Learning, Teaching and Assessment • AI in Assessments - Traffic Light Policy • Governing Assessment of Taught Programmes policy • Governing Examinations policy • Governing Academic Appeals Policy • Governing Student Conduct and Discipline Policy • Code of Practice for Annual Programme Review and Periodic Review The information reviewed evidenced, amongst other elements, that: • There is a clear assessment strategy for the award of an approved qualification.

Standard no.	S3.2
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.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • MOptom programme overview spreadsheet • MOptom programme overview - explanatory document • MOptom Programme Specification • MOptom Module Specifications The information reviewed evidenced, amongst other elements, that: • The approved qualification is taught and assessed (diagnostically, formatively and summatively) in a progressive and integrated manner.

Standard no.	S3.3
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 integration10). This experience must increase in volume and complexity as a student progresses through a programme.
Status	**NOT MET – condition.**
Deadline	• Friday 31 July 2026 for Year 1 Placements • Tuesday 1 December 2026 for Year 2 and CLiP Placements
Rationale	The evidence did not provide the necessary assurance and therefore this standard is NOT MET. Supporting evidence reviewed included but was not limited to: • Template 2- Criteria Narrative • Early Years Placement Handbook • Draft Early Years Placement Contracts • University Hospitals of Leicester NHS Trust (UHL) Curriculum Committee meeting minutes • College of Optometrist pre-CLiP Outcome Mapping document • MOptom Module Overview document • MOptom Programme Overview spreadsheet • Module Specifications • Course webpage • Information provided as part of the in-person visit.

	The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas: • Signed agreements for year 1 placements. • Signed agreements for Year 2 placements. • Signed agreement with the College of Optometrists for CLiP. • Increase in student numbers could be supported by the number of placements available. Possible areas of evidence that can be submitted, are (this list is non-exhaustive): • Signed agreements for year 1 placements. • Signed agreements with College of Optometrist for CLiP • Evidence that placements will support any increase in student numbers Although a condition has been set, the GOC note the progress the University of Leicester has made towards meeting this standard however further assurance is required regarding signed placement agreements.

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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • MOptom Curriculum Committee member list • Policy on Student Module Feedback • Policy on Student Surveys • Template 1 – Introduction • Minutes of Curriculum Committee Meeting • School of Healthcare student EDI characteristics (2024-25) • University of Leicester student EDI characteristics (2024-25) • Access and Participation Plan (2025-2029)

	The information reviewed evidenced, amongst other elements, that: • The curriculum design, delivery and the assessment of outcomes involve and is 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.

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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Governing Undergraduate Programmes of Study policy • Register of Approved Programme Specific Dispensations • Governing Student Conduct and Discipline policy The information reviewed evidenced, amongst other elements, that: • Learning outcomes are assessed using a range of methods and all final, summative assessments must be passed. • The provider's assessment regulations, policies and procedures are appropriate.

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. Supporting evidence reviewed included, but was not limited to:

	• Template 2- Criteria Narrative • MOptom programme overview spreadsheet • MOptom programme overview - explanatory document • Register of Approved Programme Specific Dispensations policy The information reviewed evidenced, amongst other elements, that: • Assessment (including lowest pass) criteria, choice and design of assessment items (diagnostic, formative and summative) leading to the award of an approved qualification seek to ensure safe and effective practice. • GOC learning outcomes must be passed.

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	**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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Assessment strategy presentation • Governing Undergraduate Programme of Study policy • Information provided as part of the in-person visit The information reviewed evidenced, amongst other elements, that: • Assessment (including lowest pass) criteria is explicit and set at the right standard, using an appropriate and tested standard-setting process.

Standard no.	S3.8
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.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Job Summary Form for Clinical Demonstrator post • Regulation 5- Governing Undergraduate programme of study • Information provided as part of the in-person visit The information reviewed evidenced, amongst other elements, that: • Assessments reflect best practice and will be routinely monitored, developed and quality controlled. • Assessments will occur during learning and experience in practice, in the workplace or during inter-professional learning.

Standard no.	S3.9
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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Policy on reasonable adjustments • EDI Policy • Regulation 8 - Governing examinations The information reviewed evidenced, amongst other elements, that: • Appropriate reasonable adjustments are put in place to ensure that students with a disability are not disadvantaged in engaging with the learning and teaching process.

Standard no.	S3.10
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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Governing Undergraduate Programme of Study policy • Governing Examinations policy The information reviewed evidenced, amongst other elements, that • There is clarity on what is considered a 'pass' level; i.e., should students be able to answer all 'must know' (or 'must show' etc) questions to achieve a pass or that a combination of 'must know', 'could know' etc would be sufficient as long as the minimum grade is met. • Summative assessments directly related to the outcomes demonstrating unsafe practice result in failure of the assessment.

Standard no.	S3.11
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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Policy on Return of Marked Work • Governing Assessment of Taught Programmes policy • Information provided as part of the in-person visit. The information reviewed evidenced, amongst other elements, that: • 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.

Standard no.	S3.12
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.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • MOptom PDAM form • QAA - The Frameworks for HE Qualification of UK Degree-Awarding Bodies The information reviewed evidenced, amongst other elements, that: • The approved qualification is listed on one of the National Frameworks for Higher Education Qualifications for UK degree awarding bodies.

Standard no.	S3.13
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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Development of New or Major Modification to an Existing Programme process • MOptom PDAM form • MOptom Business Case • MOptom Business Case - explanatory document The information reviewed evidenced, amongst other elements, that: • The outcomes are 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.

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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • MOptom Programme Specification • MOptom Module Specification The information reviewed evidenced, amongst other elements, that: • There is 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.

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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • College of Optometrist draft agreement • Early Years Placements provider Memorandum of Understanding template • Early Years Placements provider MoU Schedule 1 - Data Protection • Specsavers - University of Leicester Early Years Placements draft contract The information reviewed evidenced, amongst other elements, that:

	• In meeting the outcomes, the approved qualification integrates at least 1600 hours / 48 weeks of patient-facing learning and experience in practice.

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.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Template 4 – Assessment Strategy • College of Optometrist pre-CLiP Outcome Mapping document • MOptom programme overview spreadsheet • MOptom programme overview document The information reviewed evidenced, amongst other elements, that: • Outcomes delivered and assessed during learning and experience in practice are clearly identified within the assessment strategy.

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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • UHL Curriculum Committee meeting minutes • Minutes of Service User Focus group The information reviewed evidenced, amongst other elements, that:

	• The selection of outcomes to be taught and assessed during learning and experience in practice and the choice and design of assessment items are informed by feedback from stakeholders.

Standard no.	S3.18
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	**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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Governing assessment of programmes taught policy • Policy on remote examinations • Policy on return of marked policy • Welcome presentation • Information provided as part of the in-person visit. The information reviewed evidenced, amongst other elements, that: • Assessments during learning and experience in practice will be undertaken by appropriately trained and qualified GOC registrants or other statutorily registered healthcare professionals who are competent to measure students' achievement of outcomes at the required level (Miller's Pyramid).

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 – area of good practice identified and no further action is required at this stage.**
Deadline	Not applicable

Rationale	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • EDI Policy • Dignity and Respect at Leicester Definitions document • Personal Relationships policy • Dignity and Respect Staff Procedure • Student Sex Work Policy • Dignity and Respect Third party procedure • Assistance Animals on Campus policy • Supporting trans, gender-fluid and non-binary staff and students guide • Guide to Race Related Terminology document • Staff Toolkit Student Sex Workers in Higher Education document • Reasonable Adjustment guide • Sexual Misconduct and Harassment policy • Freedom of Speech Code of Practice • Implementation of EDI data into MOptom programme development - revisions flowchart • School of Healthcare EDI Action Log 2026 • School of Healthcare Racial Inclusion Action Plan (RIAP) • Programme Accessibility Reports 2024-25 (School of Healthcare) • Use of EDI data to inform MOptom programme design document • Racial Inclusion in the Curriculum Toolkit • Curriculum Consultants - Final Report (Evaluate inclusivity changes to delivery and assessment) • Information provided as part of the in-person visit The information reviewed evidenced, amongst other elements, that: • The provider clearly demonstrates how it collects, analyses and utilises EDI data. • The provider demonstrates that equality and diversity data collected informs policy and procedures, improves the qualification design and delivery and is used to understand the needs of the student population, support student development, and to inform the qualification teaching, learning and assessment strategies. This has been highlighted as an area of good practice. This was particularly around the plans for the level of review around differential attainment at qualification level and each qualification having its own dedicated EDI lead.

Standard no.	S3.20
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.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Governing Assessment of Taught Programmes • Policy on Return of Marked Work • Policy on Student Module Feedback • University of Leicester Assessment Strategy 2023-28 The information reviewed evidenced, amongst other elements, that: • Students will have regular and timely feedback to improve their performance.

Standard no.	S3.21
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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Policy and Procedures for the accreditation of prior learning • Regulations governing admission and registration for taught programmes The information reviewed evidenced, amongst other elements, that: • The provider does not offer the opportunity for its students to study abroad on this qualification.

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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative The information reviewed evidenced, amongst other elements, that: • The provider of the approved qualification is legally incorporated.

Standard no.	S4.2
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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Provider website The information reviewed evidenced, amongst other elements, that: • There is a clear management plan in place for the award of the approved qualification and its development, delivery, management, quality control and evaluation.

Standard no.	S4.3
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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative

	• Code of Practice for the Development, Approval and Modification of Taught Provision • Code of Practice on Programme development and approval • Code of Practice for Annual Programme Review and Periodic Review • Code of Practice on the university's Procedures for Managing Higher Education Provision with others • Code of Practice on Personal Tutoring • Revisiting the research- teaching nexus framework: Two case studies • Development of New or Major Modification to an Existing Programme • MOptom Business Case • MOptom PDAM form • MOptom Programme development Gantt chart • MOptom programme overview The information reviewed evidenced, amongst other elements, that: • There is a clear management plan in place for the award of the approved qualification and its development, delivery, management, quality control and evaluation.

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 is required at this stage.**
Deadline	Not applicable
Rationale	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative The information reviewed evidenced, amongst other elements, that: • The provider of the approved qualification is a single organisation and has ownership of the award of the approved organisation. • The provider has clear corporate form and governance arrangements.

Standard no.	S4.5

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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative The information reviewed evidenced, amongst other elements, that: • The provider of the approved qualification has a named person who is the primary point of contact for the GOC.

Standard no.	S4.6
Standard description	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.
Status	**.NOT MET – condition.**
Deadline	Friday 31 July 2026 for Year 1 Placements and Tuesday 1 December 2026 for CLiP Placements
Rationale	The evidence did not provide the necessary assurance and therefore this standard is NOT MET. Supporting evidence reviewed included but was not limited to: • Early Years Placements Provider Memorandum of Understanding template • Early years placement provider MoU schedule 1- Data protection • Specsavers University of Leicester Early Years Placement contract • Boots - University of Leicester Early Years Placement draft contract • Template 2 – Criteria Narrative • College of Optometrist draft agreement • Information provided as part of the in-person visit The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas: • Evidence of signed agreements in place between the different organisations that contribute to the delivery and assessment of the outcomes, including during periods of learning in practice.

	Possible areas of evidence that can be submitted, are (this list is non-exhaustive): • Signed agreements for year 1 placements. • Signed agreements with the College of Optometrists for CLiP Although a condition has been set, the GOC note the progress the University of Leicester has made towards meeting this standard however further assurance is required regarding signed placement agreements.

Standard no.	S4.7
Standard description	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: • feedback systems for students and placement providers; • structured systems for quality review and evaluation; • 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. To ensure that: • provision is relevant and current, and changes are made promptly to teaching materials and assessment items to reflect significant changes in practice and/or research; • the quality of teaching, learning support and assessment is appropriate; and the quality of placements, learning in practice, inter-professional and work-based learning, including supervision, is appropriate.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Code of Practice on the Work of Student/Staff Committees • Policy on student module feedback • Governing Student Conduct and Discipline policy • Code of Practice for Annual Programme Review and Periodic Review • Information provided as part of the in-person visit The information reviewed evidenced, amongst other elements, that:

	• the approved qualification will be systematically reviewed, monitored and evaluated using the best available evidence, including feedback from stakeholders, and action taken to address any concerns identified.

Standard no.	S4.8
Standard description	There must be policies and systems in place for: • 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	**NOT MET- Condition.**
Deadline	Friday 31 July 2026
Rationale	The evidence did not provide the necessary assurance and therefore this standard is NOT MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Governing the Assessment of Taught Programmes policy The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas: • The selection, appointment, support and training of external examiner(s) and external moderator(s). Possible areas of evidence that can be submitted, are (this list is non-exhaustive): • Confirmation that at least one external examiner is in post. Although a condition has been set, the GOC note the progress the University of Leicester has made towards meeting this standard however further assurance is required regarding confirmation of at least one external examiner in post.

Standard no.	S4.9
Standard description	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.
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.

	Supporting evidence reviewed included, but was not limited to: • Template 2- Narrative Criteria • College of Optometrists- University of Leicester- Draft CLiP contract • Early Years Placements provider Memorandum of Understanding template • Early Years Placements provider MoU Schedule 1 - Data Protection • Early Years Placements draft contract • Code of Practice on the Work of Student Staff Committees • Policy on Student Module Feedback • Governing Assessment of Taught Programmes policy • MOptom Programme Specification The information reviewed evidenced, amongst other elements, that: • There are 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.

Standard no.	S4.10
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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Narrative Criteria • Fellowship of Higher Education Academy (FHEA) Professional Standards Framework The information reviewed evidenced, amongst other elements, that: • There are policies and systems in place for the identification, support and training for all who carry responsibility for supervising students.

Standard no.	S4.11
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	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Whistleblowing Policy • Draft placement contracts The information reviewed evidenced, amongst other elements, that: • Students, and anyone who teaches, assesses, supervises, employs or works with students, are able to provide feedback and raise concerns.

Standard no.	S4.12
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).
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Governing Student Conduct and Discipline policy • Governing Academic Appeals policy • Governing Student Complaints policy The information reviewed evidenced, amongst other elements, that: • The provider has clear and consistently applied policies and systems for considering complaints.

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 is required at this stage.**
Deadline	Not applicable
Rationale	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • MOptom PDAM form • MOptom Programme Development Gantt Chart • Code of Practice on Programme Development and Approval • Code of Practice for Annual Programme Review and Periodic Review • Registration and Declaration of Interests Policy • MOptom Risk Register • MOptom Business Case • MOptom Business Case – explanatory document • MOptom Workload Model document • Code of Practice on Programme Development and Approval The information reviewed evidenced, amongst other elements, that: • There is an effective mechanism to identify risks to the quality of the delivery and assessment of the approved qualification.

Standard no.	S4.14
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.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Implementation of Programme Revision with GOC approval flowchart The information reviewed evidenced, amongst other elements, that: • There are 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.

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.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Narrative Criteria • MOptom Business Case • MOptom Business Case - explanatory document • Stage 2 response regarding Staffing and Estates (Head of College) • MOptom Risk Register • Photographs of estates building work • Information provided as part of the in-person visit. The information reviewed evidenced, amongst other elements, that: • The physical resources that are fit for purpose and clearly integrated into strategic and business plans.

Standard no.	S5.2
Standard description	There must be sufficient and appropriately qualified and experienced staff to teach and assess the outcomes. These must include: • 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 – recommendation.**
Deadline	Monday 5 October 2026
Rationale	The evidence reviewed provided the necessary assurance that this standard is MET. Supporting evidence reviewed included, but was not limited to:

	• Job Summary Form - Clinical Demonstrator in Optometry • MOptom Business Case • MOptom Business Case - explanatory document • MOptom Workload Model • MOptom Workload Model narrative document • Honorary Descriptions • Stage 2 response regarding Staffing and Estates (Head of College) • Information provided as part of the in-person visit • Template 2- Criteria Narrative The information reviewed evidenced, amongst other elements, that: • There is an appropriate student:staff ratio (SSR), which is benchmarked to comparable provision. 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. Possible areas of evidence that can be submitted, are (this list is non-exhaustive): • A documented rationale of benchmarking to comparable provision is recommended as student and staff numbers increase. This is not considered to present a risk at present but will be monitored as part of ongoing quality assurance activity. The GOC recognise the provider's continued commitment to meeting this standard through the submission of their SSR but do require a rationale of benchmarking to comparable provision to supplement discussions during the visit.

Standard no.	S5.3
Standard description	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: • opportunities for continuing professional development (CPD), including personal, academic and profession-specific development; • 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.

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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • MOptom Workload Model • MOptom Business Case • MOptom Business Case Narrative document • MOptom Workload Model Narrative document • Honorary Description document The information reviewed evidenced, amongst other elements, that: • Staff who teach and/or assess the outcomes are appropriately qualified and supported to develop in their professional, clinical, supervisory, academic/teaching and/or research roles.

Standard no.	S5.4
Standard description	There must be sufficient and appropriate learning facilities to deliver and assess the outcomes. These must include: • sufficient and appropriate library and other information and IT resources; • access to specialist resources, including textbooks, journals, internet and web-based materials; • specialist teaching, learning and clinical facilities to enable the delivery and assessment of the outcomes; and enrichment activities, which may include non-compulsory, non-assessed elements.
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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • MOptom Business Case The information reviewed evidenced, amongst other elements, that: • There are sufficient and appropriate facilities to deliver and assess the outcomes.

Standard no.	S5.5
Standard description	Students must have effective support for health, wellbeing, conduct, academic, professional and clinical issues.

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. Supporting evidence reviewed included, but was not limited to: • Template 2- Criteria Narrative • Code of Practice on Personal Tutoring • Student Wellbeing Therapies • Financial Wellbeing Toolkit • Accessibility document • Standing Together document • Suicide Safer document • Student Emergency Contact Protocol • Student Wellbeing Hub document • Step Care document The information reviewed evidenced, amongst other elements, that: • Students have effective support for health, wellbeing, conduct, academic, professional and clinical issues