

University of Bradford
GOC FULL APPROVAL QUALITY ASSURANCE VISIT
BSc (Hons) Optometry (including Accelerated Route for Dispensing Opticians)
22 & 23 June 2023

Report confirmed by GOC	11 October 2023
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PART 1 – VISIT DETAILS

1.2 Programme details	
Programme title	BSc (Hons) Optometry (including accelerated route)
Programme description	• The BSc (Hons) Optometry programme is a three-year, full-time programme that adheres to the standard academic year. • The Optometry Career Progression BSc (Hons) Accelerated route is an 18-month programme (16 weeks part-time and 45 weeks full-time) for fully qualified Dispensing Opticians, which commences in January of each academic year. • The University of Bradford (the University) delivers the theory element of the route to registration, including all stage one competencies. • Upon successful completion of either programme, students are able to progress onto the Scheme for Registration delivered by the College of Optometrists (CoO). The CoO is responsible for the clinical placement, all stage two competencies and the qualifying examinations.
Current approval status	Fully approved (FA)
Approved student numbers	110 – Ordinary BSc (Hons) route 24 – Accelerated route

1.3 GOC Education Visitor Panel (EVP)	
Chair	Vincent McKay – Lay Chair member
Visitors	Andy Husband – Lay member David Hill – Independent Prescribing/Optometrist member Maryna Hura – Dispensing Optician member
GOC representative	Lamine Kherroubi – Approval & Quality Assurance Officer
Observers	N/A

1.4 Purpose of the visit	
Visit type	FULL APPROVAL QUALITY ASSURANCE VISIT
The purpose of this full approval quality assurance visit was to: 1. review the University of Bradford's BSc (Hons) Optometry (including accelerated route) programme to ensure it continues to meet the requirements as listed in the GOC's Accreditation and Quality Assurance temporary handbook for optometry (2020) (handbook) and the GOC Education A&QA-Supplementary Document-List of Requirements (list of requirements). 2. consider whether the programme sufficiently meets the GOC's requirements for it to be granted continued full approval. This visit took place in person.	

1.5 Programme history		
Date	Event type	Overview
19/03/2019	Visit	A full approval quality assurance visit was carried out. • The programme was granted continued full approval. • 6 new conditions were set. • 4 new recommendations were offered.
03/03/2020	Event	University of Bradford reported that they will be using the Accreditation and Quality Assurance temporary handbook for optometry (2020) for the 2020/21 academic year.
28/08/2021	Change	University of Bradford requested to allow Stage 2 students to trail 20 credits to stage 3 for 2021/22 academic year only. This was approved by the GOC on 8 September 2021.
23/09/2022	Change	University of Bradford requested to allow 5 students from Stage 1 to trail 20 credits into Stage 2. This was approved by the GOC on 28 September 2023.
29/03/2023	Event	Following the programme having exceeded their cohort cap by +10%, the March 2024 full approval quality assurance visit was brought forward.
04/04/2023	Administration	Full approval quality assurance visit was confirmed for 22 & 23 June 2023.

PART 2 – VISIT SUMMARY

2.1 Visit outcomes	
The panel was pleased to note the programme team's strong work ethic and dedication to students on the course. The panel recognises that the team are in the process of developing the qualification in line with the GOC's new Education and Training Requirements (ETRs). The panel set one new condition and made five recommendations to further develop the current programme. The panel is satisfied that the programme should continue to be fully approved.	
Summary of recommendations to the GOC	
Previous conditions – met/unmet	All previous conditions are MET
New conditions	One requirement is deemed UNMET and one condition is set. Details regarding the condition is set out in Part 3.
New recommendations	Five recommendations are offered. Details regarding the recommendations are set out in Part 3.
Commendations	Three commendations are offered. Details regarding the commendations are set out in Part 3.
Actual student numbers	2022/23 Academic Year: BSc (Hons) Optometry: • Year 1: 148 • Year 2: 140 • Year 3: 99 BSc (Hons) Optometry (Accelerated route for Dispensing Opticians): • Stage A: 14 • Stage B: 17
Approval/next visit	By 2028
Factors to consider when scheduling next visit e.g. when students are in, hospital, audit etc.	The visit should be scheduled to factor in: • time to speak to students from all cohorts. • time to speak to external examiners. • the implementation of the GOC's new Education and Training Requirement's (ETRs).

2.2 Previous conditions		
The conditions listed below are extracted from the report of 19 March 2019.		
Requirement number	Condition number and description	Status
OP2.1	The University must: • Submit to the GOC, by 26 July 2019, a list of new, appropriate, fit-for-purpose equipment to be purchased, with a plan for procuring it, clearly identifying the items deemed by the programme team to be most urgently needed; and • Ensure that the installation of the equipment deemed most urgent is completed by the start of the 2019/20 academic year, with the remainder being installed by 20 December 2019	This condition was deemed MET prior to this visit taking place.
OP2.2	To maintain the current number of 110 students, the university must replace the two full-time members of academic staff who have recently left the department, and the Clinic Manager who is shortly to retire. They must be in post by the start of the 2019/20 academic year.	This condition was deemed MET prior to this visit taking place.
OP2.14	To make the appointments required by Requirement OP2.2. The GOC must be kept informed of their progress in this matter.	This condition was deemed MET prior to this visit taking place.
OP3.6	An action plan for the induction and ongoing training for clinical supervisors must be provided. This plan to be drawn up in time for the start of the 2019/20 academic year and submitted to the GOC by 26 July 2019.	This condition was deemed MET prior to this visit taking place.
OP4.5	The Programme team must ensure that students are provided with feedback within a reasonable timeframe, as stated in the University guidelines. An action plan which addresses this issue must be provided to the GOC by 26 July 2019.	This condition was deemed MET prior to this visit taking place.
OP5.5	The University's response to the External Examiners' report for the 2017/18 academic year must be sent to the External Examiners and the GOC by 30 June 2019. The GOC must also be provided with the External Examiners' reports for the 2018/19 academic year, with the university's response, by 31 January 2020.	This condition was deemed MET prior to this visit taking place.

2.3 Previous recommendations	
The recommendations listed below are extracted from the report of 19 March 2019.	
Description	Comments
Students appreciated the new optometry building but some of them noted the long walk to other university buildings where lectures may be held. This makes it difficult for students to attend lectures punctually, and poses a particular problem to those with	The panel was assured by the discussions held and evidence presented during the visit that this recommendation has been addressed.

mobility difficulties. More efficient timetabling may alleviate this problem. Therefore, the Panel recommends reasonable adjustments to timetabling to ensure adequate learning and teaching opportunities for all students, including those with mobility issues.	During the Programme Design and Construction session, staff mentioned that reasonable adjustments are made priority when the need arises. The Panel saw those issues, such as difficulty with timetabling due to the distance between buildings, were mitigated through providing extra time, resources, and teaching to students where necessary.
Students see a range of patients, but recent Staff-Student Liaison committee minutes show that students would like access to a more diverse range. In addition, staff reported that clinic signage and marketing were poor, making it difficult to recruit new patients. Therefore, the Panel recommends that the University should seek to broaden the database of real patients for the benefit of students, and this should include improving the marketing of the clinic.	The panel was assured by the discussions held and evidence presented during the visit that this recommendation is being addressed. Specifically, the programme team provided the panel with their plans to broaden the patient database so that students may have opportunities to work with a wider range of patients while being able to gain enough experience for their route to registration. These plans included talks of a Frailty clinic for the treatment of elderly patients, along with increased recruitment of university staff and students through improvements in marketing over the coming years.
Student experience is enhanced by attendance at the Bradford Royal Infirmary (BRI), but students would still gain more experience if they could access more of the BRI's resources. Therefore, the Panel recommends that students gain experience in the Macula Unit at the BRI.	During the visit, the panel heard of no particular plans to provide experience in the Macula unit at the Bradford Royal Infirmary (BRI). However, students mentioned that the provider plans to implement multidisciplinary learning, along with a wider range of patients for students to gain experience with. Furthermore, the student experience has been greatly enhanced by the new range of equipment available to all students for extensive practice. Therefore, the panel encourages the provider to continue to engage with the BRI for further opportunities to enhance student experience.
The Panel acknowledges the staff's efforts in implementing the Canvas and PebblePad learning technology systems, but notes that assessments using Canvas have not yet been trialled. Therefore, the Panel recommends that the University provides, and the School should take advantage of more dedicated support for learning technology.	The panel was assured by the discussions held and evidence presented during the visit that this recommendation has been addressed. During the visit, the panel saw that the provider had developed solutions to overcome issues with Canvas over the past few years. For example, assessments and their feedback are now viewable by staff and External Examiners, and the provider is planning to improve their IT support for future years.

2.4 Non-applicable requirements

The panel recommends that some requirements be deemed fully or partially non-applicable to the programme at this stage due to its structure and level and the differing, but overlapping, roles and responsibilities of University of Bradford and College of Optometrists (CoO) for example:

- the CoO is responsible for the clinical placement and ensuring all the elements of portfolio are completed under supervision.

OP6.14	Upon completion of the pre-registration placement, the provider must inform the GOC that the student has achieved professional competence at Stage 2 so as to allow them to apply for entry to the GOC Register of Optometrists.
OP6.15	Students must be assessed as competent against each of the Stage 2 GOC Core Competencies.

PART 3 – CONDITIONS, RECOMMENDATIONS & COMMENDATIONS

Conditions are applied to training and assessment providers if there is evidence that the GOC requirements are not met.
Recommendations indicate enhancements that can be made to a programme, these may not be directly linked to compliance with GOC requirements.

3.1 Conditions set at this visit	
The unmet requirements for this visit are set out below along with the conditions that are required to meet the requirements.	
OP5.1	The provider must have a clear framework for obtaining feedback on programme quality from a variety of sources including patients, students, staff, supervisors and employers.
Condition 1	The provider must implement a more formal, comprehensive, and systematic framework for obtaining student module feedback, which is consistently applied.
Date due	Deadline: 1 April 2024
Rationale	The panel heard that feedback is currently obtained from staff and students, through both formal and informal methods. Current formal feedback arrangements include end-of-module feedback surveys, along with a student assembly where students can raise concerns and receive direct feedback from staff members. Please see Recommendation 4 for more information about how this forum could be developed. However, in noting that feedback methods and arrangements were being inconsistently applied, the panel was of the view that the programme would benefit from a more formal, comprehensive, and systematic framework for obtaining feedback from staff, students, and stakeholders. Also, the demonstrable routine use of feedback from stakeholders would enable the provider to continuously improve the programme.

3.2 Recommendations offered at this visit	
The EVP offers the following recommendations to the provider.	
A2.2	Providers delivering part of the route to registration must ensure that they take all necessary steps to assess whether a student would be able to complete the full scheme to registration.
Recommendation 1	It is recommended that the provider continues to monitor performance within the student sub-cohorts, including students that are recruited through widening participation routes, and develop additional support systems as appropriate.
Rationale	The panel considered the reasons behind the provider's cohort numbers which exceed the GOC cap, particularly in year one. The panel heard that the provider's widening participation policy pleasingly attracts a large amount of access students to the course. However, it seems that some of these students have low pass rates and are required to repeat the first year. While these students' performance is monitored via staff awareness and the

	Conscientiousness Index (CI) system implemented by the provider, it would be beneficial for the provider to consider the effectiveness of the support currently in place for these students and the additional support that could be put in place in order to improve pass rates for these students.
A5.1	Student optometrists or dispensing opticians must always make sure a patient knows their student status.
Recommendation 2	It is recommended that a consistent approach across both programmes is adopted to ensure that students' status can be clearly identified within the eye clinic.
Rationale	Throughout the visit, panel members heard contradicting statements regarding the need to show their student status within the eye clinic. Staff on the programme team explained that all students, including those on the accelerated course route, must wear a badge to identify themselves as a student in the eye clinic. However, students on the accelerated course mentioned that they are not required to wear name badges in the clinic. Therefore, the panel recommends that the provider takes steps to ensure that this requirement is understood and consistently applied for both the regular and accelerated route so that all students are identifiable within the eye clinic.
OP1.6	Students must have access to opportunities for multi-disciplinary learning and to understand their role within the wider healthcare team.
Recommendation 3	It is recommended that the provider continues to develop the planned Frailty Clinic and continues to explore further opportunities for implementing MDT within both programs.
Rationale	Whilst the panel welcomed hearing examples of other disciplines such as Occupational Therapy having placement opportunities within the eye clinic, the panel heard from the provider that there is currently no Multidisciplinary Teaching (MDT) embedded into the course. However, the panel welcomed that a Frailty clinic is being developed along with plans to implement MDT with students of Pharmacology, Occupational Therapy and Physiotherapy. The panel agreed that the implementation of these plans would give students the opportunity to understand their role within the wider healthcare team.
OP1.10	Students must have access to mechanisms to provide feedback and raise concerns.
Recommendation 4	It is recommended that the provider further develops the implementation of the student assembly.
Rationale	While the panel noted that the provider offers several opportunities for students to feedback about the programme through end of module surveys and a student feedback assembly, these methods do not appear to be consistent or formalised.

	The panel therefore advised the provider to formalise the structure of the student assembly with improvements such as meeting minutes and a feedback report to summarise the changes made based on student feedback. This would make the feedback process more robust for both students and staff to track programme changes.
OP2.12 & OP6.1	The provider must ensure that the patient base is relative to the student cohort size and is of a sufficient volume and range to deliver the required level of experience as specified in the GOC Core Competencies and patient experience requirements. The provider must have an effective system in place to ensure each student has access to a sufficient range and number of patients under each category of experience.
Recommendation 5	It is recommended that the provider develops a recruitment strategy to enhance the patient database.
Rationale	The panel heard that due to the high cohort numbers, there are plans to enhance the patient database so that students continue to have sufficient experience in practice. It was anticipated that student numbers will be high in the next academic year (2023/2024) and there are plans to use students as patients, if necessary. There are also plans to recruit staff as patients and take on volunteers in the surrounding area with the incentive of free eye tests. The panel noted that the provider intends to recruit a larger patient database and recommends that this recruitment strategy be clearly developed and implemented so that students have access to a wide variety of patients and can gain the necessary experience in practice.

3.3 Commendations made at this visit

The panel wishes to commend the following areas:

- The strong collegiate nature evidenced by the programme team.
- The provision of the self-directed practice area.
- The quality of the equipment recently provided as a result of the success of the Office for Students award.