

University of Manchester
Report of the outcomes of the adaptation to the GOC education & training requirements
MSci Optometry
MAN-OP1-ETR
Report confirmed by GOC 19 February 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 Manchester's (provider) adapted MSci Optometry qualification (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 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 Manchester 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
Not applicable.

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SECTION THREE – QUALIFICATION DETAILS

3.1 QUALIFICATION DETAILS	
Qualification title	MSci Optometry
Qualification level	Level seven (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)	<ul style="list-style-type: none"> • Level four – Certificate of Higher Education, Optometry • Level five – Diploma of Higher Education, Optometry • Level six – BSc Optometry
Total number of students per cohort	80

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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 provider's adapted MSci Optometry qualification against the <i>Requirements for Approved Qualifications in Optometry and Dispensing Optics</i> (March 2021).
4.2 GOC REVIEW TEAM	
Officer	Georgia Smith – Education Development Officer
Manager	Lisa Venables – Education Development Manager
Decision maker	Samara Morgan – Head of Education & CPD Development
Education Visitor Panel (panel) members	<ul style="list-style-type: none"> • Professor Carl Stychin – Lay Chair • Professor John Siderov – Optometrist member • Brian McCotter – Optometrist member • Maryna Hura – Dispensing Optician member
4.3 SUMMARY OF CONDITIONS AND RECOMMENDATIONS	
Conditions	<p>The qualification has been set six conditions against the following standards:</p> <ul style="list-style-type: none"> • S3.1 • S3.3 • S3.4 • S3.7 • S4.13 • S5.2 <p>Please note, some of the possible areas of evidence that can be submitted in response to the conditions set may be applicable to more than one standard. It is possible that a piece of evidence may be submitted against more than one standard but the provider should ensure it provides sufficient assurance against all relevant standards.</p>
Recommendations	<p>The qualification has been set two recommendations against the following standards:</p> <ul style="list-style-type: none"> • S3.6 • S3.17
<p>Commentary against all of the standards reviewed are set out in section 4.4.</p> <p>The qualification will remain subject to the GOC's quality assurance and enhancement methods (QAEM) on an ongoing basis.</p>	

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4.4 STANDARDS OVERVIEW

The standards reviewed as part of the adaptation process for approved qualifications (as outlined in the Adaptation 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.
- **No further action** is required – the information submitted provides the necessary assurance that a standard is met.

*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):

- 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"> • A completed 'template 2 - criteria narrative' which included details on the: <ul style="list-style-type: none"> ○ Clear and appropriate entry criteria. ○ Clear and appropriate IELTS criteria. <p>The information reviewed evidenced, amongst other elements, that:</p>

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	<ul style="list-style-type: none"> • The provider has appropriate, clear, and comprehensive entry admissions criteria. • The provider has appropriate, clear, and comprehensive entry and IELTS requirements.
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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	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'template 2 - criteria narrative'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider does not offer recognition of prior learning (RPL) as part of the MSci Optometry qualification.

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	NOT MET – a condition is set
Deadline	Wednesday 30 April 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"> • A completed 'template 2 – criteria narrative'. • A completed 'template 4 – assessment strategy'. • The provider's 'Unit Specifications'. • The provider's 'Entrustable Professional Activities (EPAs)' document. • The provider's 'MSci Optometry Programme Specification'. • Narrative provided in support of the formal response process including:

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	<ul style="list-style-type: none"> o The provider's 'Manchester MSci' PowerPoint presentation. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • The case-based assessments (being undertaken in year four of the qualification). • The guidance and training available to the competence committee members. • The Entrustable Professional Activities (EPAs) specifications, entrustment scores and how they map to the GOC learning outcomes. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • Detailed specifications of the Entrustable Professional Activities (EPAs) and how the trust scores map to the GOC learning outcomes. • The guidance available to the competence committee including details on how progression decisions should be made. • Commentary and/or details around how the annual case-based assessment works, for example the format, marking criteria, example papers etc. <p>Although a condition has been set, the GOC acknowledges that the PowerPoint presentation submitted by the provider gave extensive information about the design and rationale for using the Entrustable Professional Activities (EPAs) including research behind its efficacy. However, it was noted that the provider is still finalising the detailed specifications of the EPAs and how they align with the GOC learning outcomes, assessments are yet to be written and therefore further assurance is required in these areas, as and when they become available.</p>
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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 integration ¹⁰). This experience must increase in volume and complexity as a student progresses through a programme.
Status	NOT MET – a condition is set
Deadline	Wednesday 30 April 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"> • A completed 'template 2 – criteria narrative'. • Narrative provided in support of the formal response process.

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	<p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • The minutiae surrounding clinical placements offered by the provider within the university setting, including the integration of the Entrustable Professional Activities (EPAs). <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • Detailed content on the planned clinical experience, including the alignment of EPAs. • How the provider will ensure there are a variety of patients within the clinical experience. • How the provider will ensure that the clinical experience increases in complexity. <p>Although a condition has been set, the GOC note the progress the provider has made towards meeting this standard through the confirmation that students will spend an appropriate number of hours on placement, however further assurance is required regarding how the university will ensure the clinical experience will increase in volume and complexity, with a sufficient number of varied patients and how this supports the integration of EPAs into the qualification.</p>
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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	NOT MET – a condition is set
Deadline	Wednesday 30 April 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"> • A completed 'template 2 – criteria narrative'. • Narrative provided in support of the formal response process. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • The training in place for supervisors. • The grading or guidance system in place to support supervisors in offering entrustment scores to students.

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	<p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • The training that has been developed and implemented to support both internal and external supervisors in undertaking their role. This may also include areas of focus such as: <ul style="list-style-type: none"> ○ Equality, Diversity and Inclusion (EDI) ○ Reasonable adjustments ○ Identifying unsafe practice ○ Guidance available to internal and external supervisors to ensure confidence in offering entrustment scores to students. <p>Although a condition has been set, the GOC note the progress the provider has made towards meeting this standard through its extensive stakeholder engagement, ensuring curriculum design and delivery has been informed by the feedback collected, however further assurance is required regarding how the university will ensure appropriate training has been developed and implemented for the competence committee members in ensuring they are sufficiently capable of undertaking the central role in delivering the qualification.</p>
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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"> • A completed 'template 2 - criteria narrative'. • A completed 'template 4 – assessment strategy'. • A completed 'template 5 – module outcome map'. • The provider's 'Unit Specifications'. • The provider's 'Entrustable Professional Activities'. • The provider's 'MSci Optometry Programme Specification'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification includes a range of assessment methods. • The provider has an appropriate and consistent assessment strategy mapped against the GOC learning outcomes. • The qualification does not permit trailing and extended resit opportunities.

Standard no.	S3.6
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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 – a recommendation is set
Deadline	Response to the recommendation set to be submitted in the 2024/25 annual monitoring submission.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'template 2 - criteria narrative'. • A completed 'template 4 – assessment strategy'. • A completed 'template 5 – module outcome map'. • A completed 'template 8 – mapping to indicative guidance'. • The provider's 'Entrustable Professional Activities (EPA)' document. • The provider's 'MSci Optometry Programme Specification'. • Narrative provided in support of the formal response including: <ul style="list-style-type: none"> ○ The provider's 'Manchester MSci' PowerPoint presentation. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • Whilst teaching, learning and assessment methods for students with specific needs may be modified, the outcomes cannot be modified and must be met in full. <p>Although the information reviewed provided sufficient assurance that this standard is met, a recommendation has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • The decision-making process used by Entrustable Professional Activities assessors to determine how they arrive at their trust scores.

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 – a condition is set
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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>

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	<ul style="list-style-type: none"> • A completed 'template 2 – criteria narrative'. • A completed 'template 4 – assessment strategy'. • A completed 'template 5 – module outcome map'. • The provider's 'Competence Committee Terms of Reference'. • Narrative provided in support of the formal response process that outlined: <ul style="list-style-type: none"> ○ How the competence committee assess a student's entrustment score. ○ The provider's 'Manchester MSci' PowerPoint presentation. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • The training in place for competence committee members. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • The induction and onboarding training for competence committee members. • The ongoing training to support the competence committee members in adequately undertaking their role. This may also include areas of focus such as: <ul style="list-style-type: none"> ○ Equality, Diversity and Inclusion (EDI) ○ Reasonable adjustments ○ Identifying unsafe practice ○ The guidance available to the competence committee including details on how progression decisions should be made (this feedback is also applicable to S3.1). ○ Commentary and/or details around how the annual case-based assessment works, for example the format, marking criteria, example papers etc (this feedback is also applicable to S3.1). <p>Although a condition has been set, the GOC note the progress the provider has made towards meeting this standard through its submission of the 'Manchester MSci' PowerPoint file which covered the research and understanding of EPAs within optometry along with the entrustment scores, definitions and monitoring and recording processes. Further assurance is required regarding how the provider will ensure appropriate training has been developed and implemented for the competence committee members in ensuring they are sufficiently capable of undertaking the central role in delivering the qualification.</p>
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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.

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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"> • A completed 'template 1 – introduction' • A completed 'template 2 - criteria narrative'. • The provider's 'Unit Specifications'. • The provider's 'Entrustable Professional Activities'. • The provider's 'MSci Optometry Programme Specification'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has a range of teaching and learning methods deployed throughout the qualification. • The provider ensures students are exposed to a variety of practice settings. • The provider has an appropriate and consistent assessment strategy mapped against learning outcomes.

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"> • A completed 'template 2 - criteria narrative'. • A completed 'template 5 – module outcome map'. • The provider's 'External Placements' document that outlined: <ul style="list-style-type: none"> ○ The background and development of the placements available to students as part of the qualification. • Narrative provided in support of the formal response process that outlined: <ul style="list-style-type: none"> ○ How students will meet the requirement of 1600 hours of patient facing learning and experience in practice. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has sufficient resourcing in place for the fourth year of the qualification. • The provider has sufficient and appropriate staff in place to deliver the qualification.

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	<ul style="list-style-type: none"> The provider's teaching and learning environments are suitable and have sufficient capacity to support the planned numbers of students.
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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	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> A completed 'template 2 - criteria narrative'. A completed 'template 4 – assessment strategy'. A completed 'template 5 – module outcome map'. A completed 'template 8 – mapping to indicative guidance'. The provider's 'Entrustable Professional Activities'. The provider's 'MSci Optometry Programme Specification'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> The provider has a comprehensive and clear assessment strategy. The provider has clear assessment methods and mapping of outcomes against the qualification. The provider incorporates learning and experience in practice in an integrated and progressive way.

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 – a recommendation is set
Deadline	Response to the recommendation set to be submitted in the 2024/25 annual monitoring submission.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> A completed 'template 2 - criteria narrative'. Narrative provided in support of the formal response process. <p>The information reviewed evidenced, amongst other elements, that:</p>

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	<ul style="list-style-type: none"> The provider has engaged in a variety of stakeholder consultations which has informed the outcomes taught and assessed during learning and experience in practice and the assessment items. <p>Although the information reviewed provided sufficient assurance that this standard is met, a recommendation has been set in relation to this standard as the GOC considers that it can be enhanced.</p> <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> The signed and finalised memorandum of understanding between the provider and the placement providers, including details of the quality assurance arrangements.
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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	NOT – 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"> A completed 'template 2 - criteria narrative'. The provider's 'Manchester Access Programme (MAP)' webpage <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> The provider has systems to record, analyse, report and act upon students' progression and attainment (measured against protected characteristic). The provider's approach to 'Entrustable Professional Activities (EPAs)' encompass a diverse learning approach. The provider sufficiently reviews its teaching materials in line with the student body.

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.

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Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'template 2 - criteria narrative'. • The provider's 'Instrument and Articles of Government' webpage. • The provider's 'Our Foundations' webpage. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has clear awarding powers and is a legally incorporated higher education institution.
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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	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'template 2 - criteria narrative'. • The provider's 'Our Governance Structure' webpage. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has clearly defined committees and roles, including governance expectations. • The provider has clear lines of accountability.

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"> • A completed 'template 2 - criteria narrative'. <p>The information reviewed evidenced, amongst other elements, that:</p>

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	<ul style="list-style-type: none"> • The provider is a single organisation and has ownership of the award of the approved qualification. • The provider has clear corporate form and governance.
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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	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'template 2 - criteria narrative'. • A completed 'Adaptation Form - notification of proposed adaptation of programmes'. • The provider's 'Staff Curriculum Vitae (CVs)'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider has an appropriate named person for the qualification.

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	NOT MET – a condition is set
Deadline	Wednesday 30 April 2024
Rationale	<p>The evidence did not provide the necessary assurance and therefore this standard is NOT MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Adaptation Form'. • A completed 'template 2 – criteria narrative'. • Narrative provided in support of the formal response process that outlined: <ul style="list-style-type: none"> ○ That the provider is in the process of establishing a localised risk register. <p>The evidence did not provide the necessary assurance that this standard is met. There was insufficient evidence in the following areas:</p> <ul style="list-style-type: none"> • How risks are appropriately managed at qualification level. • How commercial conflicts of interest are appropriately managed at qualification level. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p>

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	<ul style="list-style-type: none"> • The effective mechanisms in place to identify and manage qualification risk. • The policy and procedure in place which demonstrates how commercial conflicts of interest are managed. <p>Although a condition has been set, the GOC notes the progress made by the provider towards meeting this standard through adequately identifying risks and mitigations to the qualification. Further assurance is required to demonstrate an effective mechanism to capture and monitor risks in the longer term.</p>
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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	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'template 2 - criteria narrative'. • A completed 'Adaptation Form'. • The provider's 'Staff CVs'. • Narrative provided in support of the formal response process that outlined: <ul style="list-style-type: none"> ◦ The Provider's management and resourcing of the fourth-year placements. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The provider currently has sufficient resourcing in place for the fourth year of the qualification. • The provider has sufficient and appropriate staff in place to deliver the qualification. • The provider's teaching and learning environments are suitable and have sufficient capacity to support the planned numbers of students.

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;

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	<ul style="list-style-type: none"> • 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	NOT MET – a condition is set
Deadline	Friday 27 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"> • A completed 'Template 2 - criteria narrative' that outlined: <ul style="list-style-type: none"> ○ The qualification is led by a suitably qualified, experienced, and named individual. • A completed 'Adaptation Form'. • The provider's 'Staff CVs'. • Narrative provided in support of the formal response process that outlined: <ul style="list-style-type: none"> ○ The provider's human and physical resourcing in place to deliver the qualification. ○ The provider has plans to increase the clinical provisions currently offered to students. <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 sufficient external placements are available for all students on the qualification. <p>Possible areas of evidence that can be submitted, are (this list is non-exhaustive):</p> <ul style="list-style-type: none"> • How the provider is ensuring sufficient external placements for students are available and how this has been achieved. <p>Although a condition has been set, the GOC note the progress the provider has made towards meeting this standard by implementing sufficient human and physical resourcing, however further assurance is required regarding how the university will ensure sufficient supervision of students' learning in practice throughout the delivery of the qualification.</p>

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