



University of Hertfordshire
Report of the outcomes of the adaptation to the GOC education & training requirements
Master of Optometry (MOptom)
HTF-OP1-ETR
Report confirmed by GOC – 23 May 2024

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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 Hertfordshire’s adapted Master of Optometry (MOptom) qualification against the *Requirements for Approved Qualifications in Optometry and Dispensing Optics* (March 2021).

It includes:

- Feedback against each relevant standard (as listed in Form 2a).
- The status of all the standards reviewed as part of the adaptation process (which includes the formal response process).
- Any action the University of Hertfordshire 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 your qualification(s)</i>	<input type="checkbox"/>

2.2 CENTRE DETAILS	
Centre name(s)	Not applicable

2.3 EXTERNAL PARTNERS DELIVERING AND/OR MANAGING AREAS OF THE QUALIFICATION
As part of the qualification, the College of Optometrists (CoO) will be delivering the Clinical Learning in Practice (CLiP) scheme.

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SECTION THREE – QUALIFICATION DETAILS

3.1 QUALIFICATION DETAILS	
Qualification title	Master of Optometry (MOptom)
Qualification level	Regulated Qualifications Framework (RQF) Level seven
Duration of qualification	Four years (students have a maximum of six years to complete the qualification).
Number of cohorts per academic year	One
Month(s) of student intake	September
Delivery method(s)	Full time – integrated.
Alternative exit award(s)	<p>If candidates are unsuccessful in completing the Master of Optometry qualification, they may receive the following:</p> <ul style="list-style-type: none"> • Upon completion of 120 credits - Certificate of Higher Education in Visual Science. • Upon completion of 240 credits - Diploma of Higher Education in Visual Science. • Upon completion of 300 credits (at least 180 of which must be at levels 5 or 6 and 60 must be at level 6) - BSc Visual Science. • Upon completion of 360 credit (at least 240 of which must be at levels 5, 6, and 7) – BSc (Hons) Vision Science.
Total number of students per cohort	50

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SECTION FOUR – SUMMARY OF THE OUTCOMES OF THE ADAPTATION PROCESS

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

4.2 GOC REVIEW TEAM	
Officer	Ella Pobee – Education Development Officer
Manager	Lisa Venables – Education Development Manager
Decision maker	Sam Morgan – Head of Education & CPD Development
Education Visitor Panel (panel) members	<ul style="list-style-type: none"> Jane Andrews – Lay Chair Professor Brendan Barrett – Optometrist member Rebekah Stevens – Optometrist member Maryna Hura – Dispensing Optician member

4.3 SUMMARY OF CONDITIONS & RECOMMENDATIONS	
The qualification has been set three conditions against the following standards: <ul style="list-style-type: none"> S3.3 S3.4 S3.17 	
The qualification has been set no recommendations.	
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 adaptation process for approved qualifications (as outlined in Form 2a*) are listed below along with the outcomes, statuses, actions, and any relevant deadlines. Actions may include the following: <ul style="list-style-type: none"> A condition is set when the information submitted did not provide the necessary evidence and assurance that a standard is met; further action is required. A recommendation is set when the information submitted currently provides the necessary evidence and assurance that a standard is met. However, the GOC has identified this may be an area that could be enhanced or that will need to be reviewed to ensure the standard continues to be met; further action is required. No further action is required – the information submitted provides the necessary assurance that a standard is met. 	
*The following standards listed below were not reviewed as part of the adaptation process but are monitored as part of the GOC’s QAEM: <ul style="list-style-type: none"> Standard one - public and patient safety S1.1, S1.2, S1.3, S1.4 Standard two - admission of students S2.2, S2.3, S2.4 	

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- 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 university was required to complete or submit as part of the education and training requirements (ETR) adaptation process can be found here <https://optical.org/en/publications/qualifications-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	<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 university has appropriate, clear and comprehensive entry and IELTS requirements.

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.

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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'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The university does not accept recognition of prior learning applications in relation to the qualification.
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Standard no.	S3.1
Standard description	There must be a clear assessment strategy for the award of an approved qualification. The strategy must describe how the outcomes will be assessed, how assessment will measure students' achievement of outcomes at the required level (Miller's Pyramid) and how this leads to an award of an approved qualification.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 2 - criteria narrative'. • A completed 'Template 4 – assessment strategy'. • A completed 'Template 5 – module outcome map'. • A completed 'Template 8 – outcome mapping to indicative guidance' • Definitive module documents. • Example grading criteria. • Clinical Learning in Practice (CLiP) module descriptors. <p>The information reviewed evidenced, amongst other elements:</p> <ul style="list-style-type: none"> • That the university has a comprehensive and clear assessment strategy. • How the assessments lead to the awarding of an approved qualification. • The university's stakeholder and sector engagement.

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). This experience must increase in volume and complexity as a student progresses through a programme.
Status	NOT MET – condition.

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Deadline	31 August 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 'Template 2 - criteria narrative'. • A completed 'Template 4 – assessment strategy'. • A completed 'Template 5 – module outcome map'. • A completed 'Template 8 – outcome mapping to indicative guidance' • Definitive module documents. • Example grading criteria. • CLiP module descriptors. • Narrative provided in support of a further information request. <p>The GOC acknowledges that the university has stated that definitive module documents will be amended to reflect an increased focus on IPL in the future however, 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"> • Insufficient details on IPL within the qualification. • Lack of a systemic approach to student engagement/learning with disabled patients. <p>Possible areas of evidence that can be submitted (but not limited to) are:</p> <ul style="list-style-type: none"> • How IPL is integrated within and across the qualification. • A systemic approach to student engagement/learning with patients who are children or who have disabilities and how this experience is increased in volume and complexity as a student progresses.

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 – condition.
Deadline	31 August 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 'Template 2 - criteria narrative'. • Narrative provided in support of a further information request that detailed stakeholder engagement and feedback.

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	<p>The GOC acknowledges that the university has feedback mechanisms in place which can be utilised for the qualification however, the evidence did not demonstrate these mechanisms being applied to the new qualification. Therefore, 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"> • Evidence that indicated stakeholder engagement in relation to the adapted qualification (rather than the current handbook programme). • Evidence that focused on qualification development rather than delivery. <p>Possible areas of evidence that can be submitted (but not limited to) are:</p> <ul style="list-style-type: none"> • How the outcomes of stakeholder engagement, particularly from employers, placement providers, and patients, has influenced the development of the qualification. • The outcomes of the review of the definitive module documents – the changes made and the rationale behind these. • How the current feedback mechanisms, and any newly introduced mechanisms have been used/will be used to inform the development of the qualification. <p>See also S3.17.</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’. • A completed ‘Template 8 – outcome mapping to indicative guidance’ • Definitive module documents. • Example grading criteria. • CLiP module descriptors. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification includes a range of assessment methods. • Summative assessments must be passed. • Compensation is not allowed within the restrictions of this standard.

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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	<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 – outcome mapping to indicative guidance' • Definitive module documents. • Example grading criteria. • CLiP module descriptors. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The types and range of assessment methods are appropriate to the approved qualification. • 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	<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 – outcome mapping to indicative guidance' • Definitive module documents. • Example grading criteria. • CLiP module descriptors.

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	<p>The information reviewed evidenced, amongst other elements:</p> <ul style="list-style-type: none"> • That qualification assessment criteria for all learning settings are set at the appropriate level. • The university's assessment setting, moderation, marking and verification processes.
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Standard no.	S3.14
Standard description	There must be a range of teaching and learning methods to deliver the outcomes that integrates scientific, professional, and clinical theories and practices in a variety of settings and uses a range of procedures, drawing upon the strengths and opportunities of context in which the qualification is offered.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 2 - criteria narrative'. • A completed 'Template 4 – assessment strategy'. • A completed 'Template 5 – module outcome map'. • A completed 'Template 8 – outcome mapping to indicative guidance' • Definitive module documents. • Example grading criteria. • CLiP module descriptors. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • A range of teaching and learning methods have been incorporated into the qualification to deliver the 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'. • A completed 'Template 8 – outcome mapping to indicative guidance' • CLiP module descriptors.

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	<p>The information reviewed evidenced, amongst other elements, that the qualification incorporates:</p> <ul style="list-style-type: none"> • The required minimum 1600 hours/48 weeks of patient-facing learning and experience in practice.
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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 – outcome mapping to indicative guidance' • CLiP module descriptors. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The principles of Miller's pyramid have been incorporated within the qualification. • The types and range of assessment methods are appropriate to the approved qualification. • The outcomes delivered and assessed during the learning and experience in practice are clearly outlined.

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	NOT MET – condition.
Deadline	31 August 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 'Template 2 - criteria narrative'. • Narrative provided in support of a further information request that detailed stakeholder engagement and feedback.

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	<p>The GOC acknowledges the university has various stakeholder feedback and engagement mechanisms. However, 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"> • Lack of evidence of external input into the curriculum and assessment design for the adapted qualification. • Lack of evidence that stakeholder feedback has informed curriculum and assessment design for the qualification. <p>Possible areas of evidence that can be submitted (but not limited to) are:</p> <ul style="list-style-type: none"> • How stakeholder engagement and feedback is included within the qualification's 'Continuous Enhancement Plan'. • How the outcomes of stakeholder engagement, particularly from employers, placement providers, and patients, has influenced the development of the qualification. • How the current feedback mechanisms, and any newly introduced mechanisms have been used/will be used to inform the development of the qualification. <p>Also see S3.4.</p>
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Standard no.	S3.19
Standard description	The collection and analysis of equality and diversity data must inform curriculum design, delivery, and assessment of the approved qualification. This analysis must include students' progression by protected characteristic. In addition, the principles of equality, diversity and inclusion must be embedded in curriculum design and assessment and used to enhance students' experience of studying on a programme leading to an approved qualification.
Status	MET – no further action 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 university-wide 'Access & participation plan' • Narrative provided in support of a further information request that detailed a qualification level 'Continuous Enhancement Plan'. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The university has processes that will enable the collection and analysis of EDI data. • EDI data informs curriculum design, delivery, and assessment.

Standard no.	S4.1
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Standard description	The provider of the approved qualification must be legally incorporated (i.e., not be an unincorporated association) and provide assurance it has the authority and capability to award the approved qualification.
Status	MET – no further action is required at this stage.
Deadline	Not applicable.
Rationale	<p>The evidence reviewed provided the necessary assurance that this standard is MET.</p> <p>Supporting evidence reviewed included, but was not limited to:</p> <ul style="list-style-type: none"> • A completed 'Template 2 - criteria narrative'. • The university's 'Articles of Government'. • The university's 'Instrument of Government'. • Narrative detailing the university's corporate structure. <p>The information reviewed evidenced, amongst other elements, that the university is:</p> <ul style="list-style-type: none"> • An approved provider of higher education. • A legally incorporated higher education institution.

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 Life & Medical School structure chart. • Narrative detailing the university's corporate structure. • The university's 'Statement of Primary Responsibilities' <p>The information reviewed evidenced, amongst other elements, the university's:</p> <ul style="list-style-type: none"> • Corporate form, governance, and 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 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 signed and dated Academic Partnership Agreement between the university and the College of Optometrists (CoO). • Narrative detailing the university's corporate structure. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • There is a robust framework supporting the relationship between the university and the CoO.
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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 'Form 2a - notification of proposed adaptation of programmes'. • A submission in line with the GOC's notification of events and changes process. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The university 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	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 risk register. • Documents outlining the university-wide conflicts of interest process.

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	<ul style="list-style-type: none"> Documents outlining the university-wide disclosure process. <p>The information reviewed evidenced, amongst other elements, that the university has:</p> <ul style="list-style-type: none"> Various robust mechanisms and processes for identifying and managing risks.
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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’. Narrative provided in support of a further information request that detailed a qualification level ‘Continuous Enhancement Plan’. A qualification level resource statement. <p>The information reviewed evidenced, amongst other elements, that the university has:</p> <ul style="list-style-type: none"> Robust mechanisms for identifying appropriate resources from the initial stages of qualification development and on an ongoing basis. Stakeholder groups with responsibility for the allocation, governance, monitoring, and evaluation of resources.

Standard no.	S5.2
Standard description	<p>There must be sufficient and appropriately qualified and experienced staff to teach and assess the outcomes. These must include:</p> <ul style="list-style-type: none"> an appropriately qualified and experienced programme leader, supported to succeed in their role; sufficient staff responsible for the delivery and assessment of the outcomes, including GOC registrants and other suitably qualified healthcare professionals; sufficient supervision of students’ learning in practice by GOC registrants who are appropriately trained and supported in their role; and an appropriate student:staff ratio (SSR), which must be benchmarked to comparable provision.
Status	MET – no further action 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'. • Narrative provided in support of a further information request that detailed a qualification level 'Continuous Enhancement Plan'. • A qualification level resource statement. <p>The information reviewed evidenced, amongst other elements, that:</p> <ul style="list-style-type: none"> • The qualification has leadership. • There is an appropriate range and number of staff to deliver the qualification.
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