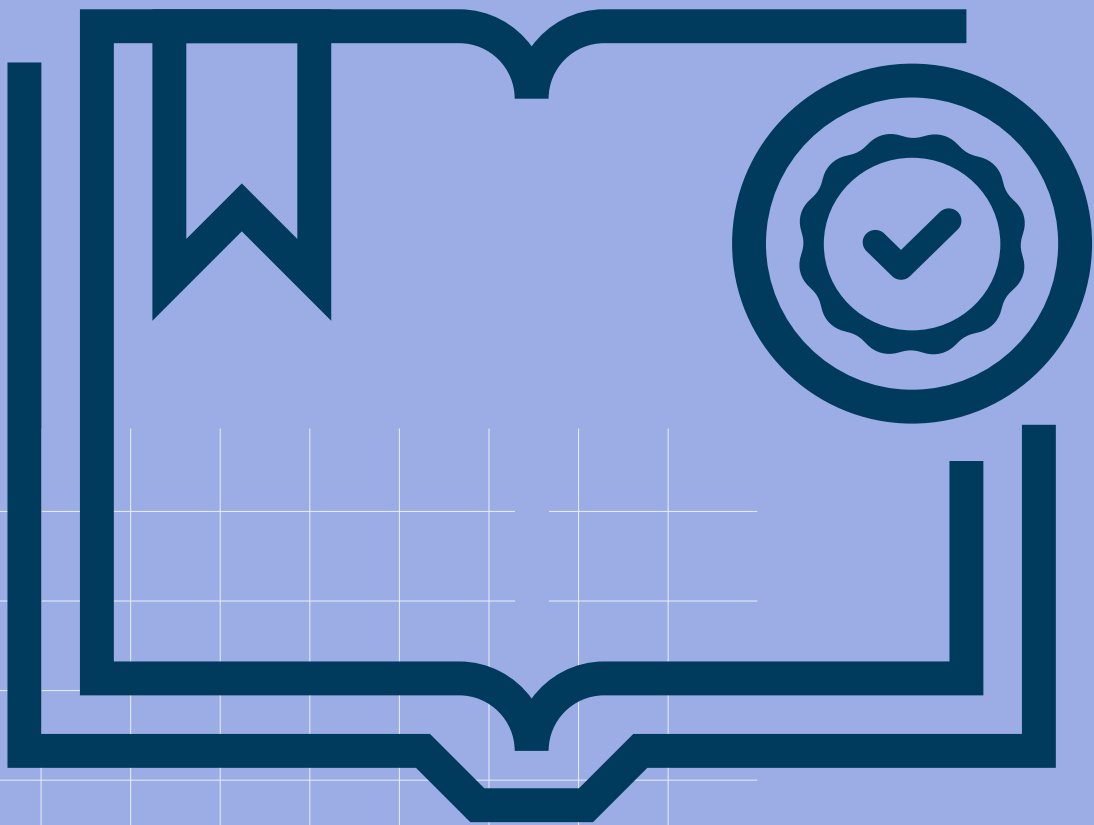


General Chiropractic Council

Quality Assurance Handbook



Contents

1. Introduction	4
1.1 Purpose	4
1.2 Recognition, regulatory objective, and quality assurance	4
1.3 Principles of the QA framework and procedures	4
1.4 Risk-based design	5
1.5 Additional educational regulation, Quality Assurance and academic validation	5
2. The QA Framework	6
2.1 Initial recognition, followed by ongoing monitoring and recognition	6
2.2 Eligibility criteria for UK awards	6
2.3 Risk Assessments	6
2.3.1 General approach to the assessment of risk	6
2.3.2 Assessment of risk in relation to new programmes	7
2.3.3 Assessment of risk in relation to recognised programmes	7
2.3.4 Identifying risks in relation to recognised programmes	7
2.3.5 Conditions of recognition mitigate risk	7
2.4 Outcomes of recognition procedures for new programmes	7
2.5 The Education Committee, Approval Panels and decision-making	8
2.5.1 The role of the Education Committee	8
2.5.2 Approval Panels	8
2.5.3 Constitution of an Approval Panel	8
2.5.4 Decision-making	9
2.5.5 Time frame for the recognition process	10
2.5.6 Conflicts of interest	10
2.6 Equality, Diversity and Inclusion	10
3. Quality Assurance Procedures	11
3.1 Templates and checklists for Quality Assurance procedures	11
3.2 Recognition procedures for new programmes	11
3.3 The Five Stages of the recognition pathway	11

3.3.1	Stage 1: Notification of intent to introduce a new chiropractic programme	13
3.3.2	Stage 2: Preparing an outline business case for the new programme	13
3.3.3	Stage 3: Programme submission	15
3.3.4	Stage 4: Approval Panel visit for a new programme	16
3.3.5	Stage 5: Recognition outcome for a new programme	18
3.3.6	Period of recognition	19
3.4	Recognition of satellite programmes	19
3.5	Ongoing programme recognition	19
3.5.1	Continuous monitoring of risk	19
3.5.2	Requirements and procedure for self-assessment and annual monitoring	20
3.5.3	Requirements and procedure for substantive change notification	21
3.5.4	Requirements and procedure following the receipt of unsolicited intelligence	23
3.5.5	Quality Assurance interventions	23
3.5.6	Conditions of recognition	23
3.5.7	Enhanced monitoring	24
3.5.8	Monitoring visits	24
3.5.9	Programme revalidation and reviews of academic standards and quality	25
3.6	Withdrawal of recognition	25
3.7	Support for providers through the QA procedures	25



1. Introduction

1.1 Purpose

The purpose of this handbook is to communicate the quality assurance framework and procedures for the recognition of chiropractic degree programmes by the General Chiropractic Council (GCC). Providers of chiropractic education programmes must read, understand and commit to the shared values in this document.

1.2 Recognition, regulatory objective, and Quality Assurance

The GCC has a statutory duty to set the standards of chiropractic education, conduct and practice. The GCC therefore has powers to recognise chiropractic degree programmes, whether they are delivered in the UK or elsewhere. These powers are documented in the Chiropractors Act of 1994¹ which sets out the duties for the GCC including the provision to recognise qualifications with the approval of Privy Council.

The GCC must ensure that graduates of chiropractic degree programmes have reached the required standard of proficiency and are thereby able to meet all the requirements set out in The Code² for the competent and safe practice of chiropractic. Graduation from a recognised programme demonstrates that the new graduate meets the required standard of proficiency and is eligible to apply to join the professional register. The programme's ability to meet this requirement is evaluated against the Education Standards of the GCC.

With respect to professional education, the primary regulatory objective of the GCC is to ensure that it *only* recognises chiropractic degree programmes that equip their graduates to meet the requirements of the Code. The QA framework sets out how the Education Standards are secured and is designed to mitigate the risk that the primary regulatory objective is not met. The QA procedures refer to how the GCC considers and evaluates

programmes, with respect to the QA framework, to ensure that decisions are made with an appropriate understanding of evidence and risks, therefore helping to ensure the integrity of the outcomes of its recognition activities. Together, the QA framework and procedures set out the GCC's responsibilities for the quality assurance of recognition and define how providers show they meet the Education Standards.

1.3 Principles of the QA framework and procedures

The principles that underpin the quality assurance arrangements are that these must:

- Be robust
- Protect the public
- Be proportionate and minimise the burden on the providers
- Be risk-based

The quality assurance framework and procedures also aim to demonstrate fairness, consistency and transparency surrounding the recognition of chiropractic degree programmes by ensuring that:

- The recognition process is understandable to stakeholders, effectively administered, accountable and cost effective to operate
- Recognised chiropractic qualifications are accessible to all students who have the potential to achieve them
- Quality assurance arrangements are equitable, evidence-based and subject to review for improvement purposes
- There is transparency regarding decision making during the recognition process
- Supporting and facilitating processes are available for providers

1. HM Government. Chiropractors Act. Chiropractors Act 1994 (legislation.gov.uk)

2. General Chiropractic Council. The Code. Standards of performance, conduct and ethics. 2016, or subsequent versions



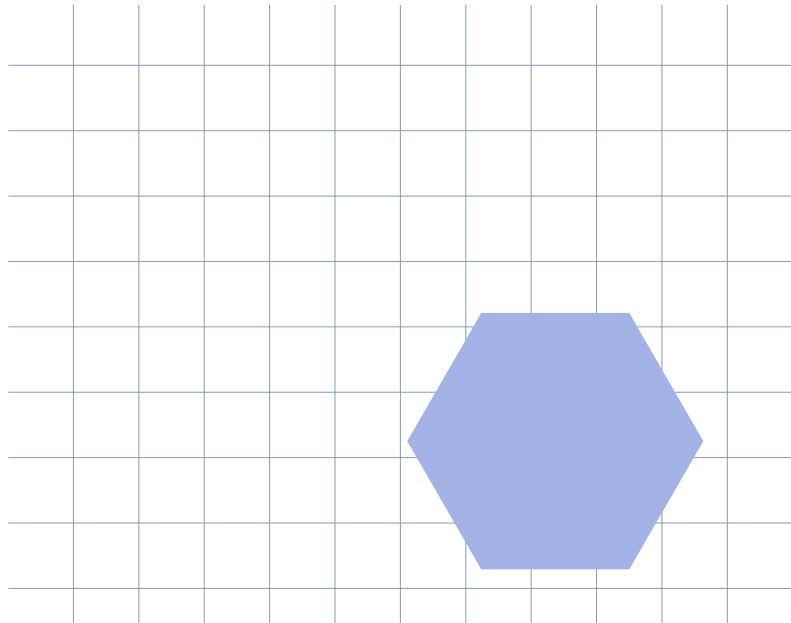
1.4 Risk-based design

When evaluating programmes, all stages of the QA framework and procedures are designed to evaluate and mitigate the risk that one or more of the Education Standards, and thus the primary regulatory objective, will not be met. A range of factors may contribute to determining the level of risk, including whether the provider of the programme has previous experience of delivering chiropractic, or other healthcare programmes, or is part of a larger educational institution, financial circumstances of the provider and its ability to appropriately resource the design and delivery of the programme. The QA framework and procedures are designed to provide flexibility in approach and to enable bespoke processes to be followed, determined by the risk profile of individual programmes and providers.

1.5 Additional educational regulation, Quality Assurance and academic validation

In the UK, higher education institutions are subject to additional educational regulation and/or quality assurance. The Office for Students is the independent regulator for higher education in England, with alternative provision made by relevant government bodies of the devolved nations of Scotland, Wales and Northern Ireland. Further educational quality assurance activities are carried out by the Quality Assurance Agency, an independent quality body for higher education across the United Kingdom. The assurance of academic quality of new programmes is subject to university approval, or, where the provider is not itself a degree-awarding body, to validation procedures by a partner degree-awarding body.

The GCC acknowledges but is not bound by the educational regulatory powers and quality assurance roles of the relevant national bodies and universities. Its focus is on addressing aspects that are specific to providers of chiropractic education and training, and their chiropractic programmes, to achieve its primary regulatory objective. Its QA Framework is designed upon the principles of avoiding duplication of regulatory requirements where possible, reducing unnecessary burdens on providers and minimising the amount of regulation needed to deliver the required outcome.





2. The QA Framework

2.1 Initial recognition, followed by ongoing monitoring and recognition

The GCC's framework for the assurance of the quality of its recognition of programmes secures the initial recognition of a new programme, against its Education Standards, followed by ongoing monitoring of the programme.

The requirements for initial recognition are that the provider meets specified eligibility criteria, that the programme meets all the Education Standards of the GCC and that the provider demonstrates its ability to fully deliver the proposed programme.

The requirements for ongoing recognition of a programme are that the eligibility and ability of the provider to deliver the programme are maintained, and that the Education Standards continue to be met.

2.2 Eligibility criteria for UK awards

Providers in the UK applying for recognition of a new programme from the GCC must meet the following criteria to be eligible:

- Have objectives that meet GCC standards of conduct, performance and ethics as detailed in The Code
- Have a robust business case that supports the development and the implementation of a new chiropractic degree programme over the first five years of its delivery
- Hold sufficient financial resources to fully support the programme in its development and delivery for at least one cohort of students
- Have the necessary facilities, equipment, staff and resources to support the use of research and evidence and to underpin teaching and learning in accordance with the requirements of the GCC's Education Standards
- Have the necessary facilities, equipment, staff and resources to provide and support clinical experiential learning settings, in accordance with the requirements of the GCC's Education Standards
- Be quality assured by the Office for Students, or equivalent if based outside of England

- Propose a programme for which validation has been granted or is being sought in conjunction with GCC recognition. (This is important as validation is a requirement for GCC recognition.)

Each provider requiring its degree programme to be validated by a Higher Education Institution must also:

- Be a corporate body and lawfully operating within its jurisdiction
- Have a governing body that lawfully governs the organisation
- Have a full-time Chief Executive or equivalent
- Have published financial accounts that demonstrate adequate resources to fulfil its commitment to the business plan and to future chiropractic students

Eligibility of new Providers is assessed in Stage 2 of the quality assurance process (see section 3.3.2).

Providers that do not meet these eligibility criteria will be unable to proceed further with an application for recognition (new programme) or will have recognition withdrawn (existing programme).

2.3 Risk Assessments

2.3.1 General approach to the assessment of risk

Risk assessments take place at every stage of the process for assuring the quality of recognition. This includes the recognition of new programmes and the ongoing recognition of programmes already recognised.

Risk assessments will consider whether i) the provider and ii) the programme can achieve particular outcomes (meeting and continuing to meet all the Education Standards), rather than whether their processes meet a pre-determined specification. Risks are identified and assessed based upon both data and intelligence. In assessing identified areas of risk, the GCC will consider both the probability of the risk occurring and its likely impact upon whether one or more Education Standards will thereafter be met. The GCC will also seek to understand the underlying causes of any increase in risk, paying close attention to circumstances where an increased risk in one specific area, or a weak response to that risk, may indicate wider concerns about the provider or the programme.



2.3.2 Assessment of risk in relation to new programmes

For new programmes, the risk of concern is that the provider and/or the programme will be unable to meet the Education Standards and to fully deliver the programme in accordance with these. The risk assessment of a provider and a new programme will inform decisions about:

1. Whether the programme can be recognised
2. Whether specific conditions of recognition should be applied to the provider to mitigate areas of additional or increased risk
3. How the GCC intends to approach the ongoing monitoring of that provider

The quality assurance framework takes into account variation in the risk that is inherent in the level of experience that the provider has in the delivery of recognised chiropractic programmes and in meeting its regulatory requirements. A new programme developed by an existing provider of a recognised programme is likely to be considered relatively low risk, whereas a new programme developed by a provider with limited, or no experience of delivering a programme recognised by the GCC is considered to be of higher risk. The level of scrutiny through quality assurance activities is applied proportionately in relation to the identified inherent risk profile of the provider, based upon their experience level and prior performance in meeting the GCCs regulatory requirements.

2.3.3 Assessment of risk in relation to recognised programmes

For programmes that have been recognised, the risk of concern is that they will fail to continue to meet one or more of the Education Standards and to fully deliver the programme in accordance with these.

2.3.4 Identifying risks in relation to recognised programmes

Through its quality assurance process, the GCC monitors recognised programmes for indicators of increased risk that one or more of the Education Standards will not be met. It does this in three ways: Firstly, routine annual monitoring of providers enables performance data and

reports to be considered (see section 3.5.2). Secondly, the provider is required to notify the GCC of any changes that arise that raise the risk of failing to meet regulatory outcomes (i.e. not meeting one or more of the standards). These are termed 'substantive changes' and provide a mechanism for alerting a risk change where the risk cannot be easily mitigated by the provider (see section 3.5.3). Thirdly, potential risks may be identified through intelligence received, which may include complaints and whistleblowing (see section 3.5.4). Substantive change notification and consideration of intelligence received enable the earlier identification of emerging risks.

2.3.5 Conditions of recognition mitigate risk

Conditions of recognition are a quality assurance tool for ensuring that the regulatory objective of the GCC is met. These are applied where a provider/programme meets the Education Standards (either at initial recognition, or during ongoing recognition), but has a medium or high risk of not continuing to do so. Conditions are designed to mitigate the risk that one or more of the Education Standards will not be met. For further information about conditions of recognition, see section 3.5.6

2.4 Outcomes of Recognition Procedures for New Programmes

There are two possible scenarios in which a programme (delivered in the UK or elsewhere) will be considered for recognition:

1. Recognition of a new programme on offer from a lower risk provider. Usually, existing providers of recognised chiropractic degrees will fall within this category
2. Recognition of a new programme on offer from a higher risk provider. Providers that are new to the GCC and not currently offering recognised chiropractic degree programmes will always fall within this category. There may, exceptionally, be occasions where an existing provider is considered to be higher risk



For lower risk providers of chiropractic programme(s) there are three possible outcomes:

1. Recognition of the new programme
2. Recognition of the new programme, with conditions
3. The programme is not recognised

For higher risk providers (e.g. a new provider), there are two possible outcomes:

1. Recognition of the new programme, with conditions
2. The programme is not recognised

A provider new to the GCC is more likely to be at risk of falling short of requirements than an established provider of chiropractic programmes, given that it will be in the process of recruiting staff, developing facilities and recruiting initial cohorts of students.

Conditions must be met within an agreed, specified timeframe. If a provider fails to meet conditions in the specified timeframe, discussions will take place at the Education Committee and the provider will be advised accordingly. For further information on conditions, see section 3.5.6.

2.5 The Education Committee, Approval Panels and Decision-Making

2.5.1 The role of the Education Committee

The Education Committee's general duty is to promote high standards of education and training in chiropractic and to keep the provision made for that education and training under review. The Committee recognises (i.e. approves) UK based chiropractic courses, and advises the Council on matters relating to education, training, examinations, or tests of competence.

The Education Committee will review programme recognition applications and submit its findings and recommendations to the Council of the GCC. Final approval is subject to consideration by the Privy Council. As such, the Education Committee is tasked with the review, recognition and monitoring of chiropractic degree programmes. The Education Committee is also responsible for the appointment of Education Visitors,

independent educationalists who form Approval Panels to evaluate applications for recognition and report back to the Education Committee, as required.

2.5.2 Approval Panels

Tasks delegated to Approval Panels include the evaluation of documentary evidence submitted in relation to how a programme meets the Education Standards, conducting interactions with providers (including meetings and site visits) and evaluating evidence relating to meeting conditions of recognition, as required.

Visits made by the Approval Panel will normally be undertaken for one of the following reasons:

1. To discuss a new programme proposal with a provider (see section 3.3.4)
2. To monitor progress of a newly recognised programme (see sections 3.5.7 and 3.5.8)
3. To review an existing programme when there are indicators of elevated risk that one or more of the Education Standards may fail to be met (see sections 3.5.7 and 3.5.8)

2.5.3 Constitution of an Approval Panel

The GCC recruits and trains a pool of Education Visitors for the purpose of populating Approval Panels.

The size and composition of any Approval Panel may vary depending on the focus of the evaluation to be made. The constitution will normally be at least one chiropractor and at least two lay members, one of whom will act as Chair.

All members of the Approval Panel must abide by a code of conduct and declare any potential conflicts of interest. In these instances, the Chair of the panel will decide whether the individual with a conflict of interest should form part of that particular Approval Panel.

2.5.4 Decision-making

Decisions regarding whether a programme may be recognised are made by the Education Committee (taking into consideration information provided by the provider themselves, evaluations carried out by the Approval Panel, or specialist external advice). The Education Committee makes recommendations, based upon the

outcomes of its decisions, to the Council of the GCC. If it is agreed to recognise the programme, the Council submits its recommendation to the Privy Council, seeking its agreement for the recognition decision. An overview of recognition decision-making responsibilities is presented in Figure 1.

Figure 1: illustration of roles in the recognition decision-making process





2.5.5 Time frame for the recognition process

The recognition process has been designed to be as straightforward as possible.

Careful consideration needs to be given to both the timing of the provider's application, and the provisional start date of the proposed programme. The provider will need to make timescales clear in its business planning, but providers are advised to discuss their intentions with the GCC as soon as possible, and well before the process explained in section 3.2. Consideration by the Education Committee of the recognition process stages outlined in section 3.2 will take place at its pre-scheduled meetings. All required information must be submitted in advance, not less than 2 months prior to the meeting at which it will be considered. Failure to meet this requirement may result in the Education Committee being unable to consider the recognition application at its meeting, resulting in delays in the process. It is typical for recognition of a new programme from an existing provider to take 8-12 months. For a new provider, the process may take up to two years to complete. There is a maximum permitted timeframe to achieve recognition of a new programme of three years from the receipt by the GCC of the provider's Stage 1 submission, to the completion of Stage 5. Early and ongoing dialogue with the GCC Education Team is likely to minimise delays and avoid having to re-start the application process.

2.5.6 Conflicts of interest

The GCC is committed to identifying and appropriately managing conflicts of interest that may arise in relation to its process for approval of chiropractic degree programmes. Its objective is to ensure that its process is carried out impartially, fairly, objectively and with integrity, and that a reasonable observer could not consider that there has been any possibility of bias or undue influence affecting decisions made.

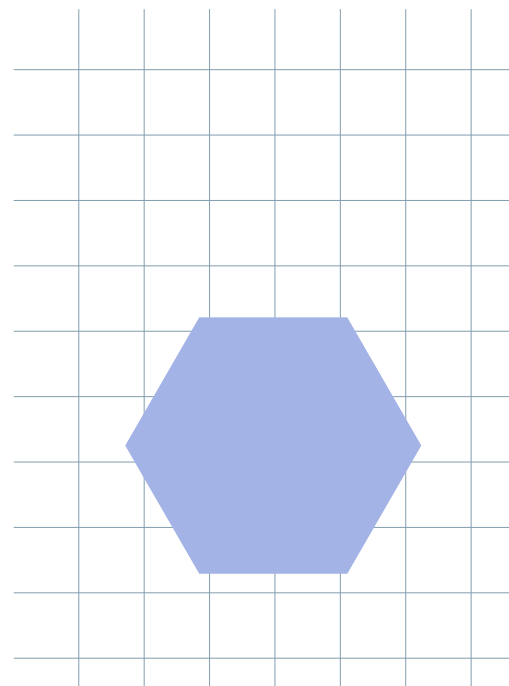
2.6

Equality, Diversity and Inclusion

Equality, Diversity and Inclusion (EDI) is integral to the work of the GCC³. The principles of respect, dignity, fairness and the need to recognise patient diversity and individual choice are emphasised within The Code².

2. General Chiropractic Council. The Code. Standards of performance, conduct and ethics. 2016, or subsequent versions

3. General Chiropractic Council Policy Statement. Equality, Diversity and Inclusion. General Chiropractic Council, London; 2022, or subsequent versions





3. Quality Assurance Procedures

This section details, for providers, the GCC's procedures for assuring the quality of its regulatory function in recognising programmes. It addresses the pathway and procedures to be followed by a new or an existing provider seeking recognition of a new programme, and the procedures for subsequent ongoing recognition of a programme.

3.1 Templates and checklists for Quality Assurance procedures

The GCC provides templates, checklists and additional information that providers will need when engaging with its quality assurance procedures. Providers should refer to the GCC's website for the most recent versions of these.

3.2 Recognition procedures for new programmes

There are several stages along the pathway towards gaining recognition. Recognition does not occur until the successful completion of Stage 5, at which point a review will also confirm that the previous stages remain met. The stages to be followed are determined by the risk level of the provider:

- Providers **new** to the GCC are considered to be of higher risk and will need to follow all five stages
- Providers who deliver existing recognised chiropractic degree programmes will normally be considered low risk. Low risk providers will not usually be required to complete stage two

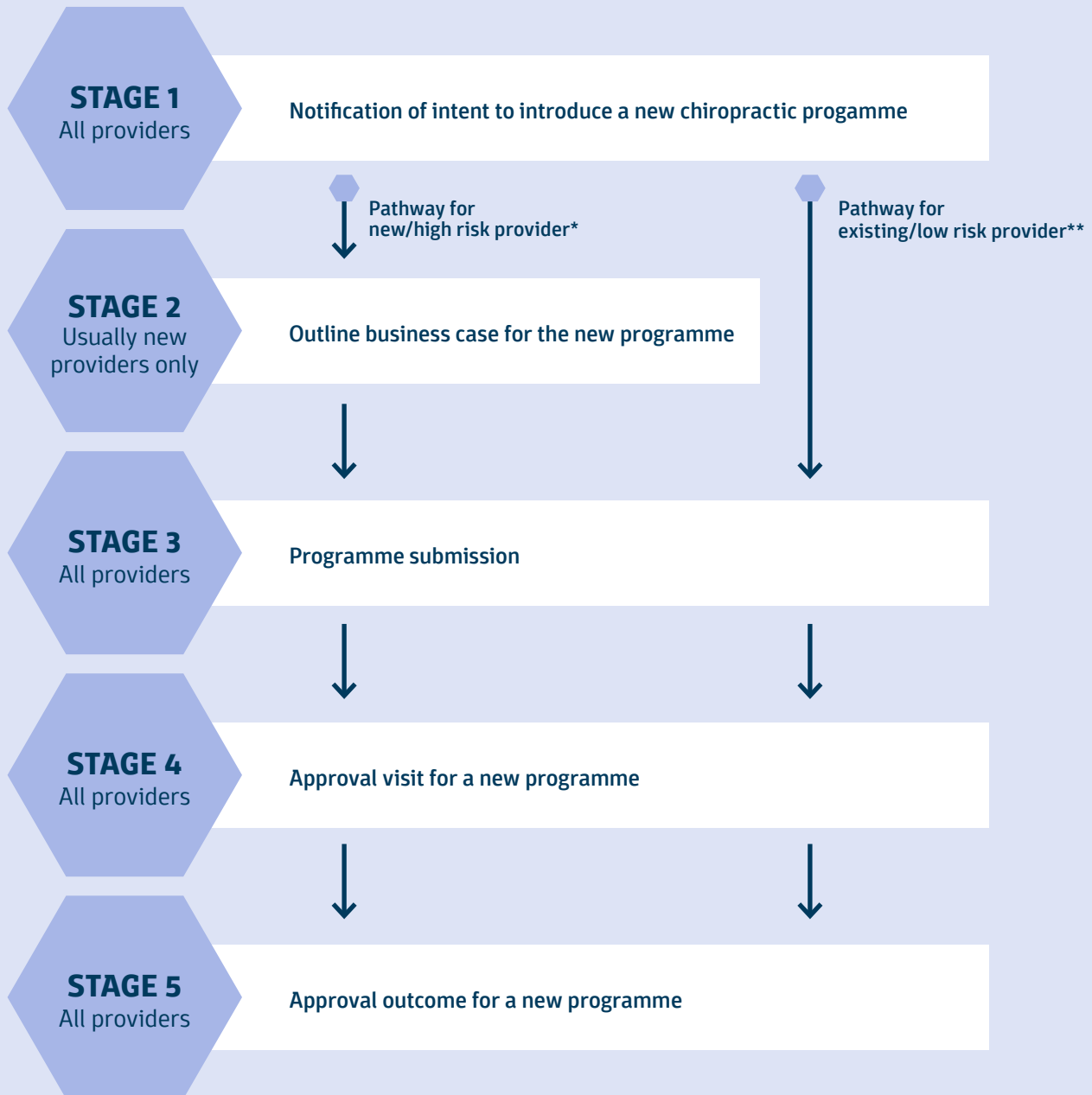
3.3 The Five Stages of the recognition pathway

Figure 2 (on the following page) illustrates the recognition pathway and indicates the stages to be completed by new providers and also by existing providers who are seeking recognition for a new programme.

The stages of the recognition pathway are explained below. The title of each stage indicates whether the stage is relevant to all providers or just those that are higher risk (e.g. new to the GCC).

It should be noted that completion of a Stage does not mean that it will not be re-visited at later points in the process. For example, updated Stage 2 information will normally be required upon completion of Stage 4. This is to provide assurance that the provider's finances and business plan remain viable and in accordance with requirements prior to the recognition decision being made at Stage 5.

Figure 2. The Five Stages of the recognition pathway†



† It is normal for earlier stages of the process to be revisited at later stages, particularly for higher risk providers, to ensure that requirements remain met.

* You are a 'new' provider if you do not currently deliver a chiropractic programme recognised by the GCC. New providers are always considered high risk.

** You are an 'existing' provider if you are currently delivering a chiropractic programme recognised by the GCC. Existing providers are usually considered low risk.



3.3.1 Stage 1: Notification of intent to introduce a new chiropractic programme (all providers)

Purpose: This Stage lets the GCC know that a provider is planning to submit a new programme for consideration through the recognition process and supplies information to enable initial evaluation that the provider meets the eligibility criteria.

Procedure: All providers are required to contact the GCC to declare their intent to make a submission for a new chiropractic programme (see the GCC's website for further information about submission documentation).

A provider who is of higher risk (for example, is new to the GCC and therefore has not run a chiropractic programme in recent years) must move to Stage 2. All other providers will normally move directly to Stage 3.

Summary of Stage 1 actions

- The provider submits a notification of its intent to submit a new programme for consideration for recognition
- The Education Team liaise with the provider regarding progression to the next stage of the process

3.3.2 Stage 2: Preparing an outline business case for the new programme (usually only providers new to the GCC)

This stage is an additional requirement of the process for recognition that must usually only be completed by higher risk providers (providers that are new to the GCC will always need to complete Stage 2).

Purpose of Stage 2: During this stage the Education Committee will consider the provider's likely ability to gain recognition upon completion of the recognition process and to deliver the proposed chiropractic degree programme. It will evaluate the risk that the provider will be unable to do so. This includes the requirement for there to be robust evidence of the availability of the necessary funds to develop and deliver the programme for the initial five years.

The reason that new providers are required to meet the requirements of this additional stage is to enable a full

assessment to be made of an institution with no track record of chiropractic programme delivery. This will take account of the full range of governance, finance and operational mechanisms that will need to be in place before the programme can be recognised.

Procedure for Stage 2: The provider will submit an outline business case and a governance document demonstrating that key governance policies and procedures are in place (see the GCCs website for further information about submission documentation). The Education Team will evaluate the completeness and quality of the submission documentation and liaise with the provider, if necessary, to secure this. The submission will only then be progressed to the Education Committee for its consideration and decision-making.

A business case would normally include the following:

- A description of the provider's structure, including wider governance and decision-making roles, along with a statement confirming that it is a corporate body with a governing body, has a full time Chief Executive or equivalent and is lawfully operating within its jurisdiction
- A rationale for how the new programme fits in with the provider's strategy
- Indicative degree programme costs and planned timescales for development
- A detailed financial plan that demonstrates the financial viability and sustainability of the planned programme. This will include the costs of its development and of running the programme for 5 years from its first intake of students. It must also outline sources of income and demonstrate a plan for how these will be secured and released as needed over the same period
- Evidence confirming that the provider has the necessary funds and wider resources to develop and deliver the new degree programme
- Confirmation that the provider will have the necessary human resources in place to develop, deliver and sustain the degree programme, including brief details of the staff structure, the likely number of students and teaching methods



The governance document will require:

- Evidence of appropriate policies to effectively govern the provider including
 - Policies related to admission to the programme
 - Management and governance of the provider
 - Quality assurance and monitoring of programmes
 - Student learning and experience
 - Assessment

Further detail of all items outlined at this stage will be required in full at Stage 3.

A timetable for this stage will be agreed with the provider.

The GCC may seek and consider analysis and opinion from external experts during Stage 2, if necessary (for example finance or business specialists).

The provider may be invited to make a presentation to the Education Committee, which is responsible for reviewing the business case and for following up with further questions.

The Education Committee will consider whether the provider has presented sufficient evidence, at this early stage, that the proposed programme has the potential to meet the Education Standards, should it progress through the subsequent stages that lead towards recognition.

Stage 2 will not be completed until there is confidence the Education Standards are on course to be met and the provider is ready to move on to Stage 3. However, should there be indicators of serious deficiencies in the proposed programme, that cannot be sufficiently remediated to provide confidence that the Education Standards can be met, the Education Committee may decide that the programme will not be considered further for recognition.

The provider will be notified, in writing, of the outcome of Stage 2. Where remediation, or further evidence is needed, feedback will include indication of the additional requirements that must be met. It is the provider's responsibility to meet the requirements for submission.

When the provider has had the opportunity to consider the decision and any feedback from the Education Committee, it should confirm to the GCC, in writing whether it is in a position to move to Stage 3 (if it has been determined that it may do so) or to remediate issues identified, provide further evidence, or resubmit its Stage 2 application, as required.

Upon agreement that the provider has met the requirements to progress to Stage 3 and upon confirmation that the provider is in a position to progress, both parties will agree a timetable for programme submission (Stage 3).

Summary of Stage 2 actions

- An outline business case is prepared by the new provider and sent to the GCC. Further information or clarification may be requested before this is passed to the Education Committee
- The GCC Education Committee will consider the business case and may follow up with further questions or by requesting additional evidence
- The GCC will provide its decision and feedback to the new provider
- Where agreed that the submission may progress to Stage 3, the GCC will liaise with the provider regarding the next stage of the recognition process

Outcomes of Stage 2: There are three possible outcomes of Stage 2:

1. Agreement that the submission may proceed to Stage 3 of the programme recognition pathway
2. It is not agreed that the submission for programme recognition may progress to Stage 3, however further remediation may enable the requirements of Stage 2 to be met
3. Notification to the provider that it may not proceed further with the current submission for programme recognition – i.e. there are serious deficiencies in the proposed programme, or the programme no longer meets eligibility criteria

NB Stage 2 will normally be re-visited at later stage(s), to provide continued assurance that the programme's finances and business plan remain viable and that requirements are still met.



3.3.3 Stage 3: Programme submission (all providers)

Purpose of Stage 3: During this stage, the Education Committee will consider whether the provider's detailed programme documentation indicates that the programme (both in its content and delivery) has the potential to meet the requirements of all the GCC's Education Standards, as is necessary to achieve recognition upon completion of the recognition process. The level of risk that one or more standards will not be met is evaluated, and a risk profile across all aspects of the programme is developed to inform the decision of whether the submission may be progressed to the next stage of the recognition pathway.

Procedure for Stage 3: At Stage 3 a full documentary submission is required from all providers, which must include detailed information on how the new programme will meet all aspects of the GCC's Education Standards (see the GCC's website for further information about submission documentation). The Education Team will evaluate the completeness and quality of the submission documentation and liaise with the provider, if necessary, to secure this. The Approval Panel will then assess the submission with respect to whether the Education Standards are likely to be met, and the risk profile of the programme. The findings of the Approval Panel will be progressed to the Education Committee for its consideration and decision-making.

The programme submission will include:

- Evidence of how the learning outcomes specified in Section 1 of the GCC's Education Standards are met by programme content, structure, its learning outcomes and their assessment
- Evidence of how the programme meets the requirements of Section 2 of the GCCs Education Standards. This will include information on:
 - Validation (notification of status and the final report)
 - Programme structure
 - Teaching, learning and assessment methodologies
 - Plans for the clinical experiential learning
 - Resources available for the programme
 - Staff structure, roles and responsibilities
 - Learners
 - Continuous improvement and quality assurance

The submission must also include:

- An introduction containing information about the provider's structure and governance
- Details of the provider, including the named responsible person for the programme and all necessary contacts
- A detailed cross-referenced mapping document demonstrating how each of the GCCs Education Standards will be covered

The cross-referenced mapping document must explain how the provider assures that learners will be able to demonstrate the learning outcomes of the Education Standards by the end of the programme through appropriate assessment.

The named person must sign the submission for the provider. This must be the Chief Executive or an individual with appropriate delegated authority.

Some evidence may not be available until the programme begins, in which case, the provider should state what evidence will be available at a later date and when they anticipate that the evidence will be available.

The Education Committee may seek and consider analysis and opinion from external experts during Stage 3, if necessary.

The Education Committee may follow up with further questions or request additional evidence from the provider, if necessary.

The Education Committee will consider whether the provider has presented sufficient evidence, at this stage, that the proposed programme has the potential to meet the Education Standards, should it progress through the subsequent stages that lead towards recognition, with a sufficiently low level of risk that it will not do so.

Stage 3 will not be completed until there is confidence the Education Standards are on course to be met and the provider is ready to move on to Stage 4. However, should there be indicators of serious deficiencies in the proposed programme, that cannot be sufficiently remediated to provide confidence that the Education Standards can be met, the Education Committee may decide that the programme will not be considered further for recognition.



The provider will be notified, in writing, of the outcome of Stage 3. Where remediation, or further evidence is needed, feedback will include indication of the additional requirements that must be met. It is the provider's responsibility to meet the requirements for submission.

When the provider has had the opportunity to consider the decision and any feedback from the Education Committee, it should confirm to the GCC, in writing whether it is in a position to move to Stage 4 (if it has been determined that it may do so) or to remediate issues identified, provide further evidence, or resubmit its Stage 3 application, as required.

Upon agreement that the provider has met the requirements to progress to Stage 4 and upon confirmation that the provider is in a position to progress, both parties will agree a timetable for a visit by the Approval Panel (Stage 4).

Summary of Stage 3 actions

- A full documentary programme submission is made by the provider
- The programme documentation submitted is reviewed by the Approval Panel, who may request further information or clarification before reporting their findings to the Education Committee
- The Education Committee considers the programme submission and may follow up with further questions or by requesting additional evidence
- The GCC will provide its decision and feedback to the new provider
- Where agreed that the submission may progress to Stage 4, the GCC will liaise with the provider regarding the next stage of the recognition pathway

Outcomes of Stage 3: There are three possible outcomes of Stage 3:

1. Agreement that the submission may proceed to Stage 4 of the programme recognition pathway
2. It is not agreed that the submission for programme recognition may progress to Stage 4, however further remediation may enable the requirements of Stage 3 to be met.
3. Notification to the provider that it may not proceed further with the current submission for programme recognition – i.e. there are serious deficiencies in the proposed programme, or the programme no longer meets eligibility criteria

3.3.4 Stage 4: Approval Panel visit for a new programme (all providers)

Purpose of Stage 4: An approval visit is a mechanism that enables the GCC to gain further assurance as to whether its Education Standards are met and to further evaluate whether there are areas of risk that the provider may be unable to deliver the programme fully with respect to these. This stage also enables the determination of any conditions to be applied if the programme is subsequently recognised. These are an important quality assurance tool that serve the purpose of mitigating against areas of identified risk that the regulatory objective may not be realised (for further information about conditions, see section 3.5.6).

Procedure for Stage 4: If, following Stage 3, it has been agreed that the provider has met the requirements and it is in a position to progress to the next stage, a visit by the Approval Panel will be scheduled. The Education Committee will decide upon the focus of the visit based on the content of the programme submission and its risk profile, established in Stage 3. While evidence relating to any aspect of the Education Standards may be scrutinised, those that have been evaluated as being at higher risk of not being met will normally be prioritised. During the visit the Approval Panel will further review the details of the submission, hear from senior personnel and to meet with appointed staff.

The Approval Panel will examine any further evidence provided to establish whether the programme meets the GCC Education Standards, as well as ascertaining whether any specific issues raised at the earlier stages have been adequately addressed.

The visit details sent to the provider prior to the visit will include:

- The identities of the Education Visitors forming the members of the Approval Panel conducting the visit
- Indicative areas that will be covered during the visit

A timetable for the visit (which will take account of the schedule of Education Committee meetings) will be communicated to and agreed with the provider. The GCC Education Team will liaise with the provider and with the Chair of the Approval Panel to agree a suitable schedule for the visit, aimed at maximising the contributions from all concerned.



The length and coverage of the visit will be determined based on the evaluated risk-profile of both the provider and of the programme, with respect to meeting the Education Standards.

During the visit, the Approval Panel will discuss with key staff the evidence in support of the programme and the intentions of the provider with respect to meeting the Education Standards. The key staff from the provider that attend the visit should include:

- An authoritative voice who can discuss the programme in terms of the provider's strategy - such as a Dean, or a Pro-Vice-Chancellor/Deputy Vice-Chancellor
- The senior management team, including the Head of the Chiropractic department
- Other members of staff and of the faculty/department; the module/year manager responsible for each year; others such as the Head of Quality Assurance

The Approval Panel will also expect to meet with relevant stakeholder groups at the visit, which may include employers, students and patients.

During the visit, the Approval Panel will gather information for its report to the Education Committee (this will be completed after the visit), that will indicate whether the provider met, partly met, or did not meet the requirements of the Education Standards. Where Standards are evaluated as having been met, there will also be an evaluation of the level of risk that they will subsequently fail to be met.

At the end of the visit, the Approval Panel will give the provider's key staff a brief verbal summary of its main findings, including its draft indicative recommendations to the Education Committee. The Approval Panel may also identify areas for commendation or make recommendations to the provider. Recommendations are normally set to encourage further enhancements to the programme and do not need to be met before the programme is granted ongoing recognition. Providers should note that information provided at this stage is not final and may be subject to change. Final recommendations of the Approval Panel will be confirmed in the visit report.

Visit report: The Approval Panel will submit a draft report of its findings to the responsible GCC Education Team staff member within three weeks of the visit. The report

will include the Approval Panel's analysis of the extent to which the provider has demonstrated that it meets the requirements of the GCCs Education Standards and any areas of particular risk identified. Conditions may be recommended that aim to mitigate such risk. It may also include areas where commendations or recommendations are made to the provider.

There are two possible recommendations that the Approval Panel can make to the Education Committee in the draft report:

1. The provider has demonstrated sufficient evidence that all the Education Standards are met, therefore the Approval Panel recommends recognition, either with or without conditions
2. The provider has provided insufficient evidence that all the Education Standards are met, or there are serious deficiencies identified, therefore the Approval Panel does not recommend recognition of the programme

Where recognition with conditions is recommended, it is subject to those conditions being met within a specified time period, and the receipt of satisfactory reports that they are on course to be met. Conditions will address the specific Education Standards that are identified as being at higher risk of not being met. For more information about conditions of recognition, see section 3.5.6.

If the draft report does not recommend recognition of the programme, it will also provide guidance on what further evidence would be required from the provider to demonstrate that the programme meets the GCC's Education Standards, or it will outline the nature of serious deficiencies, where these have been identified.

A copy of the draft report will be sent to the provider. At this point the draft report and its recommendations is confidential and cannot be shared. The provider will have one month from the date that the draft report was sent in which to respond with any factual corrections, observations, or objections to the content.

The recommendations of the Approval Panel, and any responses from the provider, will be progressed for consideration and decision-making by the Education committee during Stage 5.



Summary of Stage 4 actions

- The Education Committee will decide upon the focus for the Approval Panel visit based on the evaluation of the programme submission at Stage 3
- The date, schedule and content of an Approval Panel visit will be agreed with the provider
- The Approval Panel visit will be conducted. Indicative findings and outcomes of the visit will be given verbally at the visit
- After the visit, the Approval Panel prepares its draft report. This states its recommendations to the Education Committee as to whether the programme meets the Education Standards and should be recognised, or not
- The Education Team send the draft report to the provider for comment
- The provider returns the draft report, commenting on any factual corrections, and providing any observations or objections to the GCC, within one month

Outcomes of Stage 4: There are two possible outcomes of Stage 4. The programme is either:

1. Recommended by the Approval Panel for recognition. This may be
 - i. With specific conditions
 - ii. Without specific conditions
2. Not recommended by the Approval Panel for recognition

3.3.5 Stage 5: Recognition outcome for a new programme (all providers)

Purpose of Stage 5: At this stage the recommendation of the Approval Panel as to whether the new programme should be recognised, is considered by the Education Committee of the GCC. If the Education Committee is satisfied that a new programme should be recognised, it recommends this to the Council of the GCC, that subsequently makes its recommendation to the Privy Council. It is the Privy Council who makes the ultimate decision.

Procedure for Stage 5: The report and the recommendation of the Approval Panel, and any response to this received from the provider, are considered by the Education Committee. The report will set out the extent to which Stages previously considered by the Approval

Panel remain met. The Education Committee will also consider additional relevant information (for example, updated Stage 2 documentation) and may seek and consider analysis and opinion from external experts, if necessary, in determining that the requirements for all earlier Stages remain met (see sections 3.3.1-3.3.4). It will also decide whether any specific conditions of recognition will be applied and will determine these (see section 3.5.6). The decision of the Education Committee will be communicated to the provider in writing. If it is agreed that the programme meets all the Education Standards, the Education Committee will recommend to the Council of the GCC that the new programme should be recognised.

The Council of the GCC considers and decides whether to accept the recommendation of the Education Committee. The decision of the Council to recognise a new programme is then progressed to the Privy Council, for its approval. Typically, it can take some months for the Privy Council to confirm recognition.

Once a programme has been recognised by the Privy Council, the provider will receive a copy of the formal document (the Order in Council) as written confirmation that the programme is recognised. The new programme is not recognised until the Order in Council is issued by the Privy Council.

At this point, the Approval Panel's report will be published on the GCC's website.

Where the Education Committee decides that it is not satisfied that all the Education Standards are met, it may determine that further evidence, or remedial action, may enable the provider to demonstrate that the programme meets the Education Standards. In these circumstances Stages 4 and/or 5 may normally be repeated until there is confidence the Education Standards are all met. However, should there be indicators of serious deficiencies in the proposed programme, that cannot be sufficiently remediated to provide confidence that the Education Standards can be met, the Education Committee may decide that the programme will not be considered further for recognition. Where remediation, or further evidence is needed, feedback to the provider will include indication of the additional requirements that must be met. It is the provider's responsibility to meet these requirements.



Summary of Stage 5 actions

- The Education Committee will consider the recommendations contained in the Approval Panel's report from Stage 4, along with the provider's response and additional information as to whether all earlier Stages remain met. It will decide whether to recommend to the GCC's Council that the programme should be approved, with or without conditions.
- If the Council accepts a recommendation for approval from the Education Committee, it will make a recommendation to the Privy Council.
- The Privy Council will confirm recognition of the programme by the issue of the Order of Council

Outcomes of Stage 5: There are 3 possible outcomes:

1. The new programme is recognised, either with or without conditions
2. The new programme is not recognised, however further evidence or remediation may enable the requirements of Stage 5 to be met.
3. The new programme is not recognised and the provider may not proceed further with the current submission for programme recognition. i.e. there are serious deficiencies in the proposed programme, or the programme no longer meets eligibility criteria.

3.3.6 Period of recognition

All programmes recognised from 2018 onwards will be recognised for an indeterminate period (i.e. there will not be an automatic expiry date for that recognition) and will be subject to the GCC's quality assurance procedures of ongoing programme recognition (see section 3.5).

3.4

Recognition of satellite programmes

The GCC will review applications to run an existing recognised programme at a satellite campus on an individual basis. The provider is required to contact the Education Team at the GCC to discuss a proposal. The focus of the application will be on programme delivery and associated risk. The Education Team will advise providers on the paperwork and process to follow.

3.5

Ongoing programme recognition

Once a programme is recognised, it will thereafter be subject to the procedures for ongoing recognition. The programme has been assessed as satisfying all the GCC's Education Standards and recognition will be retained unless circumstances arise where one or more of these fails to be met.

Newly recognised programmes will normally be subject to enhanced monitoring in the early stages of their delivery, as a supportive measure (see section 3.5.7). Any conditions of recognition that are in place will also have to be met (see section 3.5.6).

3.5.1 Continuous monitoring of risk

The regulatory quality assurance framework and procedures for ongoing recognition are based upon continuous monitoring for indicators of elevated risk that one or more of the Education Standards, and therefore the regulatory outcome, may fail to be met. The key indicators by which risk level for an individual programme is monitored and assessed are:

1. **Self-assessment and annual monitoring of the programme** – data relating to the programme is supplied to the GCC annually by the provider, including a self-assessment of performance with respect to the Education Standards. The purpose of this reporting is to provide assurance that the GCC Education Standards are maintained and/or to identify issues for action. Providers of GCC recognised chiropractic programmes are asked to take a self-evaluative approach to reporting to demonstrate their management of risk and enhancement of practice. As annual monitoring data



is collated and presented for the preceding academic year, there is an inherent lag in the time within which a concern may come to light through annual monitoring. See section 3.5.2 for further information about self-assessment and annual monitoring.

2. **Substantive change notification** – In order to provide an indicator of problems arising that is closer to real time, the provider is required to report to the GCC any changes that occur that have the potential to impact upon the programme's ability to meet one or more Education Standards (although may not actually do so) and thus raise the risk level associated with that Standard. See section 3.5.3 for further information about substantive change notification, including examples of these.
3. **Other intelligence received** – unsolicited information may also be received that indicates potential issues with a programme, with respect to meeting the Education Standards. This includes complaints and whistleblowing. The GCC will investigate and assess any such information received to determine whether the risk of failing to meet one or more of the Education Standards is elevated.

In addition to these key indicators, the GCC may, periodically, carry out additional reviews across providers, including thematic reviews, if necessary.

It is a requirement of providers of recognised programmes that they engage fully with the GCC's procedures for quality assurance. If a provider fails to comply or behave transparently the GCC will take this into account in the context of whether its management and governance satisfy the requirements of Education Standard 31.

3.5.2 Requirements and procedure for self-assessment and annual monitoring

For the purposes of monitoring and quality assuring programmes, each year every provider running a recognised programme (with or without conditions) must supply the GCC with a completed annual monitoring and self-assessment form.

Each year, there may be a particular subject on which the GCC will seek information that will be additional to the standard reporting requirements. This will be sought in the context of learning from the experiences of others

and sharing good practice. Examples include Equality, Diversity and Inclusion, patient involvement, or multi-disciplinary learning. Providers will be given notice of the requirement.

There may be additional questions on the forms that seek specific information about a particular programme, including questions that seek information about actions requested from visit reports. The GCC will also be looking for evidence of how the provider has progressed its programme, through continuous improvement measures and examples of good practice (e.g. patient involvement.)

To ensure that providers continue to deliver chiropractic degree programmes in accordance with recognition requirements, all providers must comply with these arrangements.

The annual monitoring and self-assessment form must be completed and submitted by a date agreed by the Education Committee. The form must be dated and signed by the Chief Executive or an officer of the provider who has appropriate delegated authority.

Following the submission of the form, the information is reviewed by the Executive and a panel of Education Committee members. Following this review, a face to face or virtual meeting will be arranged with the provider, a group of their students and the panel members. The purpose of this meeting is to discuss any concerns or information within the forms that may need further clarification, as well as providing an opportunity for the provider to share good practice and future strategies and plans for the programme within the organisational context. The programme leader or equivalent will normally attend the panel meeting, although other senior staff involved in the delivery of the programme may also attend.

Information from the meeting is then reviewed at the next full Education Committee meeting. The Education Committee will determine whether there are any indicators of elevated risk that one or more Education Standards may not be met. Each provider will receive a written report following the meeting, summarising the discussion, and its outcomes, including recommendations and commendations where applicable.



Summary

- The provider will be asked to submit an annual monitoring and self-assessment form by a specific date
- A panel of Education Committee members and the Executive review the submission
- The provider and their students attend a meeting with the panel members to discuss the information within the forms
- Information from the submission and the meeting is considered by the Education Committee
- Findings are reported back to the provider

Outcomes of self-assessment and annual monitoring: Following the annual monitoring and self-assessment process the Education Committee will confirm that either:

1. It is satisfied that the programme continues to meet the Education Standards, with no identified areas of elevated risk identified
2. Areas of elevated risk with respect to one or more Education Standards are identified. These will be considered further and may result in the application of a regulatory intervention

3.5.3 Requirements and procedure for substantive change notification

Substantive changes are changes that raise the risk of failing to meet regulatory outcomes (i.e. not meeting one or more of the Education Standards). Notification of these provides a mechanism for alerting a risk change to the GCC where the risk cannot be easily mitigated by the provider but will not necessarily mean that the Education Standard(s) is not/will not be met. Providers, who become aware of areas of increased risk will be expected to bring these to the attention of the GCC as soon as possible, before the GCC becomes aware of these through its own monitoring processes. This also includes the requirement to notify the GCC should the risk of a breach of any condition of recognition become increased. The provider is not expected to highlight all risks but to demonstrate sound judgement about when it considers that its own mitigation may not be sufficient to adequately manage the risk and/or enable it to continue to meet the relevant Education Standard(s). Providers must behave transparently. If there is doubt as to whether changes that have occurred should be notified to the GCC or not,

providers should err on the side of a low threshold for reporting the change but may also communicate with, and seek guidance from, the Education Team.

All providers delivering a recognised chiropractic degree programme are required to notify the GCC of substantive programme changes as and when they occur. On every occasion of a substantive programme change, a notification must be submitted as soon as is reasonably possible.

Substantive programme changes may include, but are not limited to, changes in relation to the following:

- Changes that could potentially put the provider's continued validation at risk. For further information about programme revalidation, see section 3.5.9.
- Financial factors that put the continued viability and sustainability of the programme at risk
- Governance arrangements of the provider or programme
- The established mission, goals, values or strategy of the provider or programme
- Non-financial resources, including significant changes to (and replacements in) staffing, buildings and facilities which may impact on capacity to deliver the programme in accordance with the requirements of the Education Standards and/or any conditions of recognition that are in place
- Programme content, structure, teaching, learning and assessment
- Student selection, admission and support
- Student enrolment numbers and conditions for entry
- Programme characteristics for example title, structure, length, or credits
- Arrangements for clinical experiential learning
- Delivery location
- Clinical practice and patient care provision arrangements
- Planned withdrawal of the programme or closure of the provider



Some examples of changes that would or would not be notifiable are provided in Table 1 (below).

On receipt of the notification of a substantive programme change, the Education Committee will consider the programme change and assess its potential impact on the risk that one or more Education Standards will no longer be met. Further details may be requested before a decision is made by the Education Committee regarding ongoing recognition and/or the use of a regulatory quality assurance intervention (see section 3.5.5). The provider will be notified in writing of the decision.

Summary

- Substantive change notifications rapidly alert the GCC to changes that raise the risk that i) the programme may fail to be delivered in accordance with one or more of the Education Standards, and/or ii) one or more conditions of recognition that are in place for the programme may be breached

- Providers must notify the GCC of a substantive change by submitting the required proforma
- The Education Committee considers the nature and level of risk reported and makes the decision as to whether further quality assurance action is needed

Outcomes of substantive change notifications: there are two possible outcomes of substantive change notification. The Education Committee decides that the substantive change notified either:

- Does not threaten the delivery of the recognised programme in accordance with the Education Standards and no further action is needed
- May impact upon delivery of the recognised programme in accordance with the Education Standards and a quality assurance intervention is determined and instigated

Table 1. Examples that do and do not constitute substantive changes

SUBSTANTIVE CHANGE	NOT A SUBSTANTIVE CHANGE
Any change that raises the risk of the programme potentially failing to meet one or more of the GCCs Education Standards (but will not necessarily do so)	Changes that do not raise the risk of the programme failing to meet one or more of the GCCs Education Standards
Amendments to programme modules that alter learning outcomes, or to methods of assessment of these	Minor amendments to programme modules that do not alter learning outcomes, or their assessment
Loss of senior staff with responsibility for overall management of the programme, or its quality assurance	Loss of staff members/educators whose roles can be effectively filled by existing staff, with no risk to delivery of the programme in accordance with the Education Standards
Simultaneous loss of multiple educators/staff members such that delivery of the programme in accordance with one or more Education Standards is potentially threatened (but may not necessarily fail to be met)	Normal, expected turnover of non-senior staff members, with normal replacement recruitment anticipated
Revalidations, quinquennial reviews, or other substantive internal quality reviews	Routine evaluations and reviews of the programme
Substantive negative changes in the financial status of the programme	Readily manageable variations in financial status of the programme
Changes in validating institution, or significant re-structuring within the institution, that has the potential to impact upon delivery of the programme in accordance with the Standards	Minor institutional re-structuring that is not expected to have any impact on delivery of the programme in accordance with the Standards
Any significant risk that the institution considers both likely and material to the programme's sustainability	



3.5.4 Requirements and procedure following the receipt of unsolicited intelligence

Should the GCC receive unsolicited intelligence, including complaints or whistleblowing in relation to a programme that it recognises, that may indicate an elevated risk that one or more Education Standards may not be met, this will be investigated in accordance with the GCC's policy and procedure for handling complaints about recognised chiropractic programmes (see the GCC's website). Where this results in the complaint or concern being brought to the Education Committee, it will consider whether there is indication of failure to meet the Education Standards by the programme or of elevated risk that this may occur. The Education Committee will determine whether or not a regulatory quality assurance intervention is required (see section 3.5.5). The provider will be notified in writing of the decision.

Summary

- Any unsolicited intelligence received that may indicate an elevated risk that the Education Standards may not be met will be investigated
- Where complaints or concerns are brought to the Education Committee, it will decide whether further quality assurance action is needed.

Outcomes of consideration of unsolicited intelligence received:

There are two possible outcomes:

1. The intelligence received does not indicate a threat to the delivery of the recognised programme in accordance with the Education Standards and no further action is needed
2. The intelligence received does indicate an elevated risk that may impact upon delivery of the recognised programme in accordance with the Education Standards and a quality assurance intervention is determined and instigated.

3.5.5 Quality Assurance interventions

Where there are indicators of elevated risk that one or more of the Education Standards may fail to be met by a programme, the Education Committee will evaluate the level of risk. If necessary, it may undertake a quality assurance intervention to determine whether the Education Standard(s) of concern are being met and/or to

mitigate the risk that they may not be met. Interventions will be bespoke, determined by the nature of the risk with respect to the Education Standards and include:

1. Applying a **condition of recognition** (see section 3.5.6)
2. Applying **enhanced monitoring** (see section 3.5.7)
3. Conducting a **monitoring visit** (see section 3.5.8) This may be narrowly targeted or broad, determined by the risk level and number of Education Standards that are areas of concern. Elevated risk with respect to a number of Education Standards may indicate a wider concern about the programme as a whole
4. **Withdrawal of recognition** (see section 3.6)

3.5.6 Conditions of recognition

Where a programme has been assessed as having medium or high risk of not achieving one or more Education Standards, a condition of recognition is used to manage the risk and will be put in place for each relevant Education Standard. Conditions are designed to mitigate the risk that the Education Standard will fail to be met. They are determined and applied based upon both the initial risk assessment of a newly recognised programme and the continuous risk assessment that forms the basis of ongoing recognition.

The GCC will notify the provider, in writing, of the nature and details of any conditions of recognition that will be imposed.

The GCC publishes details of conditions of recognition that are in place for a programme on its website.

Conditions will be bespoke to the provider and the programme, and may be broad or narrowly focussed, based upon the specific areas of risk in relation to the Education Standards. For a new programme delivered by a new provider, these may, for example, relate to the progressive implementation of the new programme and the provision of adequate staffing and facilities to support the developing programme.

All conditions will be individually subject to a specified time frame, within which the provider must demonstrate that they have met the condition. Providers will be given a fair and reasonable period of time in which to comply with any condition imposed.



Any condition imposed will be monitored. The GCC will specify the nature of its interaction with the provider to monitor progress towards meeting the condition and to verify that each condition is met. Evidence of meeting a condition may be obtained by the GCC in a variety of ways that may include documentary evidence, meetings, or site visits, and will be determined dependent upon the nature of the condition and the level of risk. The provider will be asked to produce a report at regular intervals (as decided by the Education Committee) on its progression towards meeting the condition.

All conditions must be satisfactorily achieved within their specified time frame. If the provider believes that an increase has occurred in the risk that they will be unable to meet a condition of recognition (but does not necessarily mean that they will fail to comply), this will be considered a substantive change. They must notify the GCC of this as soon as possible (see section 3.5.3). If a provider believes that there are extenuating circumstances that should be taken into consideration in relation to its compliance with conditions, it will be given a reasonable opportunity to set those out.

The decision about whether conditions are met is made by the Education Committee, informed by the Approval Panel, as necessary.

Failure to meet one or more conditions of recognition, within the specified time period, may result in the withdrawal of recognition.

3.5.7 Enhanced monitoring

The GCC uses enhanced monitoring as a regulatory intervention to promote and support local management of risks, by the provider themselves, while enabling greater scrutiny and assurance that the regulatory objective continues to be met. This might include a requirement of reporting by the provider that is more frequent, of greater depth or specificity. It might also include the requirement to supply documentary evidence or to interact with the GCC through meetings or site visits.

The GCC will notify the provider, in writing, of the nature and details of any enhanced monitoring that will be imposed.

The nature of the enhanced monitoring will be bespoke, dependent upon the areas of concern and the level of risk that one or more of the Education Standards may not be met.

Newly recognised programmes will normally be subject to enhanced monitoring in the early stages of their delivery, as a supportive measure. It is standard practice that the programme will be subject to annual monitoring visits until the first cohort of students has graduated.

3.5.8 Monitoring visits

The Education Committee may send one or more Education Visitors to carry out a site visit, as laid out in the 'Enhanced Monitoring' paragraph above, or may arrange a meeting that takes place off-site. The provider will be notified in writing of any planned monitoring visit or meeting and the reason(s) for it.

As part of the monitoring visit, the Education Visitor(s) may seek opportunities to discuss the programme with patients, students and their representatives.

The outcome of the visit or meeting will be documented in a report prepared by the Approval Panel/Education Visitor(s)

The monitoring visit report will document:

- The areas of risk, with respect to the Education Standards, that were scrutinised
- The Approval Panel's evaluation of the nature and level of each area of risk
- How the provider plans to reduce the level of each area of risk
- How any existing conditions are being met and recommendations as to whether additional conditions are required
- Identification of any areas of best practice and plans for the future
- The outcome recommendations of the monitoring visit and action required of the provider

The Approval Panel will submit a draft report of its findings to the responsible GCC staff member within three weeks of the visit. There are two possible outcome recommendations that can be made in the draft report:

1. The provider has provided insufficient evidence to demonstrate that it continues to meet the requirements of the GCCs Education Standards and ongoing recognition is not recommended



2. The provider has demonstrated sufficient evidence that it continues to meet the Education Standards therefore the Approval Panel recommends that ongoing recognition continues, either with or without conditions (see section 3.5.6 for further information about conditions)

If the draft report does not recommend ongoing recognition of the programme, it will also provide indication of what further evidence would be required from the provider to demonstrate that it meets the GCC's Education Standards.

A copy of the draft report will be sent to the provider. The provider will have one month from the date that the draft report was sent in which to respond with any factual corrections, observations, or objections to the content.

The recommendations of the Approval Panel, and any responses from the provider, will be progressed for consideration and decision-making by the Education Committee. The Education Committee decides whether the programme meets all the Education Standards, with a sufficiently low level of risk. It will also decide whether any specific conditions of recognition will be applied. Where the Approval Panel does not recommend that the requirements for ongoing recognition have been demonstrably met, the Education Committee will decide whether a further intervention is required, this may include determining and instigating conditions of recognition, requiring enhanced monitoring, escalation to a serious concerns review, or withdrawal of programme recognition. The decision of the Education Committee will be communicated to the provider in writing.

3.5.9 Programme revalidation and reviews of academic standards and quality

Validation by the governing university is an eligibility criterion for programme recognition (see section 2.2). Furthermore, revalidation and other periodic internal quality reviews provide evidence against a range of quality indicators. Revalidation will normally be considered a substantive change and should therefore be notified to the GCC (see section 3.5.3). The GCC expects to receive the report and outcomes from the revalidation event and will decide whether a regulatory intervention is needed.

3.6 Withdrawal of recognition

Withdrawal of recognition of a programme would only take place in circumstances where there is evidence of serious deficiencies, or of non-compliance with a condition of recognition, which means that the Education Committee is not satisfied

that the programme meets (or will in future meet) the Education Standards. This, in turn, means that the qualification gained upon successful completion of the programme will no longer be evidence of a graduate having reached the required standard of proficiency (i.e. meeting the requirements of The Code)².

Where the Education Committee determines this, it will refer the matter to the Council of the GCC. If the Council is satisfied with the determination, it will seek the approval of the Privy Council to direct that the qualification is no longer to be recognised and the programme recognition will be withdrawn.

3.7 Support for providers through the QA procedures

The GCCs QA procedures are designed to be flexible and bespoke, so that an individualised approach is taken with a provider, within the QA framework. By working closely with each provider, their specific requirements will be more readily and efficiently achieved. The Education Team welcomes a close relationship with providers and expects to interact regularly with them, as required, for example to clarify recognition activities, liaise about timeframes for these, promote best educational practice and to keep providers updated of relevant developments. Providers are encouraged to get in touch should they need clarification about any aspect of their Educational QA requirement, and for support through the processes of initial or ongoing recognition. In turn, the GCC expects providers to be accessible and responsive to requests for contact or for information to be supplied.

General Chiropractic Council
Park House
186 Kennington Park Road
London
SE11 4BT

Telephone: +44 020 7713 5155
Website: www.gcc-uk.org
Twitter: @GenChiroCouncil
W3W: gains.fairly.rang

