

Education Visitors' Report (Monitoring of a Programme)

Name of Educational Institution	London South Bank University
Programme Name	Masters in Chiropractic (MChiro)
Date GCC Approval was Granted	September 2018
Date of Monitoring Visit	7 October 2020

Panel Chair	Grahame Pope
Panel Members	Daniel Heritage
Observers (if applicable)	Penny Bance (GCC)
Panel Secretary	Annemarie McNeely(GCC)

Introduction

In September 2018, the MChiro degree programme at London South Bank University (LSBU) was granted recognition subject to four approval conditions, which included that the institution/programme would be subject to annual monitoring visits to ensure that GCC standards continued to be met and would continue until the first cohort of students had graduated.

Physical education visits to LSBU took place in 2018 and 2019 where approval report conditions and recommendations were reviewed. As a result of the Covid19 pandemic the 2020 annual monitoring took place remotely. As was agreed previously by the Education Committee, for consistency the monitoring Panel comprised of two members from the original approval Panel, one lay and one chiropractic member.

Details of the conditions and recommendations from the 2017; 2018 and 2019 visits are detailed in a later section of this report:

- The first monitoring visit took place on 7 November 2018 and all conditions relating to this visit have been met by the institution;
- The second monitoring visit took place on 25 October 2019, where three conditions were imposed and four recommendations. Two conditions have been met with one partially met, this has been picked up in the 2020 conditions.

In terms of recommendations while not mandatory, there is an expectation that institutions also report progress back on these areas. Four recommendations were made at 2019 monitoring visit, one has been met, two partially met and the remainder was reported as on hold as a result of the Covid19 pandemic restrictions.

At the 2020 meeting the Panel revisited areas including quality assurance with regard to clinic placements; plans for the onsite student clinic/s and staff recruitment. The substantive change form submitted to the GCC in July 2020 was also discussed

The Panel were provided with information with regard to the operation of student studies given the challenges of the Covid19.

Staff members, groups, facilities and resources seen			
	Yes	No	N/A
Dean/ Deputy Dean /pro-vice-chancellor/deputy vice chancellor	x <input type="checkbox"/>		<input type="checkbox"/>
Representative(s) from validating institution	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Senior management responsible for programme resources.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programme Leader	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faculty staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patients	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Clinic facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Learning Resources (e.g. IT, library facilities)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other (Please specify) Chiropractic Placement Providers			

Conditions imposed on the institution at the time of approval and decision on whether they have been met. (if applicable) 2017		
Condition	Deadline	Condition met?
The GCC will conduct annual monitoring visits until the first graduating cohort has been achieved to ensure it is satisfied that the programme is meeting all of the requirements set out in the GCC's Education Standards.	Autumn 2022	Y Nx
The institution must recruit appropriately qualified chiropractic staff who must take up post by the end of June 2018.	June 2018	Y x N
The institution must review the appropriateness of assessments for particular units in years 2, 3 and 4 and provide evidence	Autumn 2018	Y x N
Introduce an element of shadowing or observation of chiropractic practice within the first two years of the programme to promote professional identity.	Autumn 2019	Y x N

Conditions imposed on the institution at the time of approval and decision on whether they have been met. (if applicable) 2018		
Condition	Deadline	Condition met?
The institution must supply the GCC with a detailed timeline for the recruitment of staff up until the graduation of the first cohort, along with a map of the governance structure	April 2019.	Y x N
The institution must provide detailed information on resources available in regards to onsite clinic space as well as a timeline for when the clinic will become fully functional	October 2019.	Y x N
The institution must provide the GCC with a list of providers offering student clinic placements	April 2019	Y x N
The institution must provide assurance to the GCC that the institution or clinic holds correct level of insurance that will cover students treating patients while on their clinical placements. In addition the institution must provide copies of the clinic placement contracts by April 2019	April 2019	Y x N

The institution must review how much access students have to space for practising manual techniques and consider increasing the accessibility to this space by October 2019.	October 2019	Y x	N
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Conditions imposed on the institution at the time of approval and decision on whether they have been met. (if applicable) 2019

Condition	Deadline	Condition met?	
The institution must formalise its quality assurance processes with regard to selection of clinics and make better use of in-house University resources which can assist and support with this process to look to other parts of the university for their resources which can feed into this process	January 2020	Y	N
		Partially met	
		Y x	N
The institution must provide a formal plan for the provision of an onsite student clinic and a timeline for operation	Summer 2020	Y x	N
		Partially met	
		Y	N
The institution must provide assurance around student access to practical skills rooms outside normal teaching hours, reported as an ongoing issue	January 2020	Y x	N
		Partially met	
		Y	N
Recommendations			
The institution to improve and formalise feedback to students following clinic observations/placements.		Y	N
		Partially met	
		Y x	N
The course team to review how observational placements are organised and to consider a mixed model of formal management from the university which also allows students to still select and proactively manage placements.		Y	Nx
		Partially met	
		Y	N
The institution to review current documentation e.g. feedback templates, Clinic placement guidance		Y	N
		Partially met	
		Y x	N
The institution to improve general student communications around key developments relating to the chiropractic programme.		Y x	N
		Partially met	
		Y	N

Substantive Changes (if applicable)			
Nature of Change	Substantive programme forms submitted (e.g. 2020/001, 2020/002)	Date submitted to the GCC	Main change noted
Major changes to programme characteristics: Title Structure Number of credit points Length of programme Assessment Student contact hours Mode of delivery	2020/001	23 July 2020	<ol style="list-style-type: none"> Integration of Year 2 MCH_5_002 Anatomy of the Head, Neck and Nervous System and MCH_5_004 Clinical Physiology (Pathophysiology) into a single new module MCH_5_006 Anatomy and Physiology of the Head, Neck and Nervous System. Addition of new module MCH_5_007 Orthopaedics/Neurology <p>Structure- Lecture/Tutorial/Practical- The modules will be presented as blended learning with a combination of lectures, seminars and student presentations.</p> <p>MCH_5_006 20 credits MCH_5_007 20 credits Each module will run for the entire academic year, September to June. Assessments: MCH_5_006: Formative assessment: 1 mock OSCE (40 mins) Weekly quizzes to assess on-going knowledge base Summative assessment: 1x MCQ in-class based on clinical cases (20%) 1x OSCE (40 mins) assessing anatomical and clinical knowledge (30%) 2 hour written examination (50%) MCH_5_007: Formative assessment: Mock MCQs to assess theoretical knowledge Mock practical sessions 1 group presentation reviewing specific disorder commonly seen in chiropractic practice. Summative assessment: 1x OSCE (40 minutes) assess basic orthopaedic and neurological assessment skills weighting (40% weighting) 1x 2hour final written examination, mixed assessments including MCQs, short answers, essays. (60% weighting) Overall. Pass mark= 40% Must pass all components to pass module Student Contact Hours MCH_5_006 Total Learning hours: 200 hours Contact hours: 40 Hours Blended Hours: 40 Hours Student managed learning hours: 120 hours MCH_5_007 Total Learning hours: 200 hours Contact hours: 40 Hours Blended Hours: 40 Hours Student managed learning hours: 120 hours Mode of Delivery- The Modules will be delivered face to face and online using both synchronous and asynchronous methods.</p>

How conditions, recommendations and areas of concern were addressed

Panel meeting with senior management team

The Panel met with senior members of the staff team who advised that a large scale reorganisation to the school divisions had been undertaken and provided an update with regard to the chiropractic programme staffing levels/ changes/recruitment cycle, financial resources, interim/permanent student clinic plans, student recruitment and communications, particularly given the challenges presented by the Covid19 pandemic.

The senior team reported that as a result of the divisional restructure the chiropractic programme now formed part of the division for Physiotherapy, Sport Rehabilitation and Chiropractic. In terms of staff levels and recruitment to the programme, it was reported that a member of the chiropractic team was currently in transition to lead and support on the technological journey of the chiropractic/wider division programmes and that chiropractic lecturers remaining in the team would be supported by Hourly Paid Lecturers (HPLs). As a consequence of the Covid19 pandemic/lockdown the usual cycle for staff recruitment had been disrupted, hence the decision to use the expertise of HPLs for the present. It was the institutions intention to recruit a full time equivalent chiropractic member to the team by May 2021. The senior team were also mindful that as part of staff recruitment a chiropractic lead would be required for the planned clinic at the Southwark Campus (opening in 2021) and they wanted to ensure that the post was filled as soon as was possible to accommodate the commencement of development of a patient body.

In terms of financial support in respect of the programme and interim/permanent clinics, the senior team confirmed that finances were available to meet the cost of HPLs required to support the programme, with a move to a permanent appointment in the near future. With regard to finance in respect of the interim and permanent clinics, it was reported that budgets had been released.

In advance of the annual monitoring meeting the Panel reviewed the plans provided for the newly proposed interim clinic at Southwark and the main clinic planned for the Croydon Campus. The Panel were very impressed with the direction of travel and agreed investment.

The senior team reported that project plans in respect of the Croydon Campus (to include site for permanent clinic) had been delayed and had been further impacted as a result of the pandemic. The team advised that the lease for the Croydon Campus had been signed and that project was now at the marketing and design phase. The main construction of the Croydon Campus is due to commence in December 2020 and to be fully functional to receive its first intake in September 2021. The decision to house an interim clinic at Southwark Campus was taken as a result of the project delays at Croydon and the risk of the unknown in terms of the pandemic. The interim clinic would be available for third year students moving to their final year in September 2021. The team confirmed that the equipment available will be the same as would have been the case if the practice had been undertaken at Croydon. This has been communicated to students, who will also be invited to provide input on the space. The plan is for the interim clinic to be completed by April 2021. The Panel advised that they would wish to visit the clinic spaces in 2021. The Panel agreed that the 2019 condition imposed with regard to the institution providing a formal plan for the provision of an onsite student clinic and a timeline for operation had been met, however also agreed that a further condition would be imposed with regard to its actual operation.

With regard to student recruitment to the new cohort for September 2020, the senior team reported that the target had been 26 students but had actually recruited in the region of 39 students. While the increase in student number was welcome, the team recognised that this would impact the programme team and for the present would seek to mitigate this through

HPL's until a permanent member of staff was recruited. The Panel was interested in how the personal tutoring/pastoral care system would be managed during this time and was advised that the HPL's would be taking on some of the responsibility. The Panel was satisfied that there was a programme of planned recruitment, which recognised the ongoing need and development of the programme.

The Panel was interested to hear about communications particularly with students as a result of the lockdown restrictions. The team reported that at a University level weekly staff Covid Recovery Group meetings had taken place which looked at the issues affecting students. Students had been communicated with on a weekly basis and student guidelines had been developed. In addition, the Academic Development Group also met weekly to discuss course modifications e.g. online learning. The chiropractic programme will still retain some face to face teaching for practical areas of teaching of the programme.

University support in terms of supporting the health and well-being of students has included contact with the programme team and more practical assistance via access to funding for laptops purchases and more general hardship funds. The team advised that there had also been significant investment in software products to support student study. This support has been well received by students. Going forward the senior team would like to increase student communications with a view to making them more personalised and further reported university plans to launch a mid-term survey of all students to understand more fully health and wellbeing challenges and also to drill down into each module and request feedback on accessibility and other areas.

Panel meeting with course delivery team module leaders/managers/ clinical aspects of the programme for each year

Update on year groups: The Panel met with the course delivery team/managers, including those responsible for the clinical aspects of the programme, who provided a brief update across year groups and reported that for the most part that all year groups were progressing well. The course team representatives were particularly conscious of the unusual start to university life of all students but in particular the newest cohort of approximately 39 students given the little (in person) face to face contact at the present time. As a result, the team recognised that keeping students engaged may prove more challenging and were working on that.

In terms of the year two group there are currently 18 students in the cohort ranging from 18-21 years. Year two studies are currently front loaded with theory and students will be brought back to campus as soon as was possible for the more practical areas of the course. It was reported that some year two students had managed a full programme of observational placements, however lockdown had prevented some other students in the group completing.

The year three cohort consists of 14 students, who were described in many ways as the trailblazers given the newness of the course. There had been ongoing and considerable communication with this cohort throughout the programme regarding the course direction e.g. what is working well and not so well etc. Given the current restrictions with regard to Covid19 the decision as with the year two group, had been taken to front load the theory aspects of the year three programme and in particular the chiropractic skills modules. The Panel were advised that some students had been on campus for timetabled teaching practice and there are plans for student bubbles to be established for more face to face sessions. A limited amount of PPE would be provided to each student.

Broader curriculum fit: the course team reported that course continued to allow students to experience a variety of experiences within the chiropractic and wider health care field. Year

one and two students linked up with other healthcare students in professional collaborations as part of their interdisciplinary studies.

Changes to programme modules: The Panel discussed with the course team the substantive changes reported to the GCC and noted that the reported changes had resulted in some changes to other modules. The course team explained the rationale behind changes to the Integration of Year 2 MCH_5_002 Anatomy of the Head, Neck and Nervous System and MCH_5_004 Clinical Physiology (Pathophysiology) into a single new module MCH_5_006 Anatomy and Physiology of the Head, Neck and Nervous System was made as it was identified that bringing the two areas together would improve the coherency of the material and allow students to have a better feel of what was going on across the two areas, as it is now taught in more depth in the integrated module i.e. understanding the anatomy would help to understand physiology aspects. It was identified that much of the content of the module had been taught to students in the Anatomy and Physiology module during the first year of study and overlapped with the year two Clinical Physiology module, one of the main reasons for the change, was to reduce this repeating of content. The team reported that there would be an extensive assessment structure for the units which would include OSCE examinations.

With regard to the addition of new module MCH_5_007 Orthopaedics/Neurology, the decision to incorporate the two areas was to allow for more coherence of teaching/more practical base for information by taking knowledge of head, neck and nervous system and give a more clinical basis. The two areas were already being delivered in other modules across the programme e.g. anatomy muscle testing, general diagnosis. The course team reported that the substantive changes reported had led to minor changes to other modules and was essentially a bringing together of material already being taught.

The substantive changes to module descriptors in terms of Clinical Physiology 1 had been agreed by the university's Academic Standards Committee (ASC) and there had also been discussions with External Examiners across chiropractic, physiotherapy and sports rehabilitation before it went to the ASC as these areas are taught across all three courses it was essential that the changes were appropriate.

The course team advised that there were no other proposed changes but were monitoring the new year 3 modules, as they have done since the start of the course and will continue to do in order to identify weaknesses and strengths. Necessary changes will be made as the course progresses.

Access to practice space: issues with regard to the student practice room had been resolved prior to the Covid19 lockdown; however the course team reported that currently only year 3 students are on campus for timetabled sessions and that access logistics were now difficult so students did not currently have the access. This is being kept under review in relation to the ongoing Covid19 challenges.

Quality assurance of clinics/documents/placements: the course team reported that they had been in discussion with wider university allied health professional colleagues whose programmes included a placement element. The intention of which was to pull together the best of current placement provider policies. In addition, the School of Health and Social Care had developed a new generic placement provider handbook which the chiropractic programme had adapted to include information on chiropractic specific placements. On reviewing the revised document, the Panel was of the view that it required some additional refinement to allow for the chiropractic elements to be more visible.

In terms of the practice placement audit template the Panel agreed that this document was evolutionary in nature in that chiropractic placements were a very different venture than for other programmes. In the light of this the Panel felt that the document required some further refinement in terms of what was to be audited during the selection of placement providers, to

include information on student support while on the placement. The Panel were encouraged to hear that the LSBU team had also been in discussion with other institutions with regard to the tools they were using. The Panel asked to see the revised placement provider guidance and placement provider audit documents.

LSBU also reported that an audit of clinics would take place either annually or bi-annually so that providers continue to understand the expectations with regard to placements. This was in addition to the contract and the proposed 'Educating the Educator' sessions which would become mandatory.

The team went on to report that chiropractic observational placements had been suspended, again as a result of the Covid19 restrictions and reported that pre-lockdown they had signed contracts with sixteen placement providers. Given the challenges of the pandemic the team would need to open up conversations with providers in the next six weeks to ascertain how comfortable placement providers are now with regard to student placements going forward. The programme team will also need to be reassured as far as was possible that in the event of placements recommencing that students will be entering into a Covid secure environment. In an effort to mitigate some of the challenges around bringing up practical skills, the chiropractic, sports therapy and physiotherapy programmes have been given dispensation to allow for limited, timetabled student face to face clinical skills sessions. While a way off, the course team reported that the interim student clinic plans would also help to bridge that gap. The Panel noted that the plan had been for year three students to be involved in taking patients histories whilst on placement. LSBU confirmed that conversations with placement providers had begun pre-lockdown and an overview document was being developed which the team would provide to the Panel when available.

The team reported that there was an intention for placement providers to be given some additional support from the university in the form of an 'Educating the Educators' sessions. This would offer additional information with regard to placement expectations, which was particularly important with regard to preparing and supervising students in the clinical skill elements of study. In addition, the team reported very early discussions with an NHS provider with a view to providing potential MSK placements, which if agreed would provide student exposure to other healthcare disciplines.

The Panel also returned to the area of actual placement provider feedback to students which had been discussed at the 2019 visit and the outcome of considerations for students to be provided with this at an earlier stage to support the reflective pieces the students have been asked to complete. The Panel were aware that placement providers had provided verbal feedback to students.

Panel meeting with external placement providers

The Panel met with two of the chiropractic placement providers who reported good communications with the university course team prior to students arriving on placements. This included a visit, discussion on minimum/maximum number of students at any one-time, legal requirements, expectations and purpose of the placement. Placement providers completed a feedback form for each student and were encouraged to schedule some time between patients to discuss feedback with students during the placement.

The two providers had received six students in total from year's one and two on observational placements. Placement providers had scheduled in additional students however these were cancelled as a direct result of the pandemic restrictions. Some early discussion has been given to the possibility of virtual clinic placements; however, the view was that these would not be as effective as in person.

It was reported that some students shadowed for full shifts which allowed them to experience the full flow of practice. Placement providers had been very impressed with the depth of knowledge of students which was exhibited in discussions about patient care. Constructive feedback was provided to each student.

In terms of PPE providers felt that it would not be unreasonable for students to make their own provision.

Providers agreed that observational placements were a positive move in terms of allowing students at an early stage in their studies to have a more holistic understanding of chiropractic. It was also an opportunity to bring together the theory and practice and in turn was providing early foundations in terms of preparing students for later practice. Providers reported that students had been a good addition to the clinics.

Meeting with student groups

The Panel met with a total of six students from all three chiropractic year groups. Students on the whole reported good levels of support and communication from the programme team and recognised that the move to mostly online had its challenges. Year one students were given the option to attend the induction day in person or online. Some year one students opted to attend in person where they met with the chiropractic programme team. There had been some glitches with regard to enrolment, but these had been rectified or were in the process of being rectified. This has not had any negative impact.

Year two and three students reported that they had attend some observational placements. Some had made arrangements for 2020 but these were subsequently cancelled as a result of the Covid19 lockdown restrictions. Students who had experienced placements agreed that they were positive and were helped to prepare for the experience/s by the course team. Students felt that to further enhance preparation arrangements that it would be helpful if a synopsis of the all clinics was provided which also included some information on more practical elements e.g. dress code.

Year three students reported that they had been on campus for their first practice session and agreed that the new set up was managed well and was a safe environment to practice. PPE was provided by the university; students provided their own masks.

It was clear from the discussions across the year groups that students were both frustrated and anxious to commence/recommence study and practice back on campus. Online study was proving challenging for some students. Year two and three students expressed concerns about lack of access to practice time and building up technique confidence, but also understood that the programme team were doing the best that they could under very difficult circumstances.

Students had received some communication with regard to the student clinic and were aware that an interim clinic was also planned, a follow up meeting is to be scheduled.

Students reported that communication with the programme team was good and appreciated that as a result of pandemic challenges they did not always have the answers. Overall, students gave very positive feedback about the institution and their experiences of the programme.

Final meeting with senior management team

During the final meeting with the senior management team, the Chair of the Panel gave a summary of the Panel's conclusions which are outlined below. In addition, the Panel Chair advised the institution that the conditions and recommendations would need to be agreed by the Education Committee.

Recommendation to Education Committee	
1. Conditions met fully (recommend approval without conditions)	<input type="checkbox"/>
2. Conditions not yet met fully	<input checked="" type="checkbox"/>
3. New conditions imposed	<input checked="" type="checkbox"/>
4. No action to be taken (continue to monitor)	<input type="checkbox"/>
5. Withdraw approval (serious deficiencies that are a major cause for concern)	<input type="checkbox"/>

Conclusion

In terms of conditions and recommendations the Panel noted and agreed:

- that one condition remained outstanding from the **2017** approval visit, which cannot be met until the first cohort of students have graduated;
- all conditions imposed at the **2018** monitoring visit had been met;
- two of the three conditions imposed at the **2019** monitoring visit had been met. The remaining condition *'The institution must formalise its quality assurance processes with regard to selection of clinics and make better use of in-house University resources which can assist and support with this process to look to other parts of the university for their resources which can feed into this process'* was partially met. The Panel reported that this condition required some additional attention and would be now be included in 2020 conditions;

While recommendations are just that, there is an expectation that these be considered, actioned and feedback provided to the Education Committee. Four recommendations were made by the visiting Panel at the **2019** visit of which one has been actioned, the three remaining (see below) have been partially met or are on hold (as a result of the pandemic):

- The institution to improve and formalise feedback to students following clinic observations/placements.
- The course team to review how observational placements are organised and to consider a mixed model of formal management from the university which also allows students to still select and proactively manage placements.
- The institution to review current documentation e.g. feedback templates, Clinic placement guidance

The Panel recommended the continued approval of the programme, with four conditions imposed at the **2020** monitoring visit and three recommendations:

Conditions

1. The institution must provide:
 - a written plan for the operational aspect of students passing into the fourth year and being placed in student clinic/s to enable completion of the fourth year;
 - a full staffing plan for (i) the student clinic and (ii) to support students in placements outside of the university (**Easter 2021**)
2. The course team must provide a comprehensive and detailed plan which allow students to catch up on missed observational placements and practice skills teaching – across all year groups (**interim update December 2020, full update January 2021 if any further changes**)
3. The course team must provide a complete programme specification year one and two of the programme which maps all changes whether substantial or minor and highlights

where areas have been moved to and from **(December 2020)**

4. The institution must revisit the quality assurance documents in relation to placements:

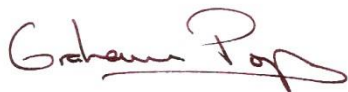
- the audit tool requires further development to include clinical guidelines and markers;
- the revised placement guidance appears to be directed at providers and students and straddles generic healthcare/chiropractic. A decision needs to be made as to whether to keep the document as generic but also include chiropractic – in which case the areas pertaining to chiropractic placements need to be clearly separated or a separate document needs to be produced for chiropractic specific. The team also need to be clear about which areas relate to the placement provider and which to the student. **(March 2021)** *(Follow up on partially met condition outstanding from 2019 visit)*

Recommendations

1. The institution to continue to ensure that appropriate PPE is provided to students for all in house practical and observational practice skills sessions in line with Public Health England guidance and to provide guidance to students and placement providers on who is responsible for providing PPE in other settings e.g. placements.
2. Develop a synopsis/inventory of placement clinics information to allow students the opportunity to know in advance what to expect in terms of particular specialities, normal hours of attendance, dress code etc
3. Given that students are being taught and supported at a distance as a result of the pandemic it is recommended that the programme/school give some thought to developing non-academic/pastoral/social interactions/activities to improve social bonding at a difficult time.

No areas for Commendation were highlighted at this visit.

Signed:



Panel Chair: Grahame Pope

Date: 18 November 2020