

Annex A

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	25 October 2019

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

Introduction

In September 2018, the MChiro degree programme at London South Bank University (LSBU) was granted approval with four conditions.

The Education Committee took the decision that given the institution was new to the GCC and new to the delivery of chiropractic, that the institution/programme would be subject to annual monitoring visits to ensure that GCC standards continued to be met. The monitoring visits would continue until the first cohort of students graduated from the chiropractic programme in 2022. In addition, the Education Committee agreed, for consistency the monitoring Panel would comprise of two members from the original approval Panel, one lay and one chiropractic member.

The first the monitoring visit took place on 7 November 2018, where the initial approval conditions were reviewed by the Panel. LSBU advised the GCC that that condition two, relating to recruitment of an appropriately qualified chiropractic member of staff had been met. Ahead of the visit, the institution also provided evidence with regard to condition 3 *appropriateness of assessments for particular units in years 2,3 & 4* and provided evidence. The Panel was satisfied that these conditions had been addressed and met. In terms of the remaining conditions (1&3), the institution reported to the Education Committee in April 2019, that two students had already been on external placements and therefore an element of *student shadowing/observation of chiropractic practice* was already underway (condition 4). This was accepted by the Committee, but given shadowing/observation was at such an early stage, an update would be sought during the October 2019 monitoring visit. Condition 1, from the original approval visit (*annual monitoring visits*) will remain outstanding until the first cohort has graduated.

In terms of the second monitoring visit which took place on 25 October 2019, the institution had previously provided information to the Education Committee on areas identified from the 2018 visit :

- recruitment of teaching staff;
- chiropractic clinic providers offering clinic placements;
- assurances that the correct level of insurance was in place for external student shadowing/placements;
- student access to practice space.

The Panel revisited staff recruitment; chiropractic placements; access to student practice space and also sought an update on plans for the onsite student clinic. In addition, the five substantive changes submitted by the institution were discussed.

FINAL

Staff members, groups, facilities and resources seen			
	Yes	No	N/A
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)			

Conditions imposed on the institution at the time of approval and decision on whether they have been met. (if applicable)

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 <input type="checkbox"/>	N <input checked="" type="checkbox"/>
The institution must recruit appropriately qualified chiropractic staff who must take up post by the end of June 2018.	June 2018	Y <input checked="" type="checkbox"/>	N <input type="checkbox"/>
The institution must review the appropriateness of assessments for particular units in years 2, 3 and 4 and provide evidence	Autumn 2018	Y <input checked="" type="checkbox"/>	N <input type="checkbox"/>
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 <input type="checkbox"/>	N <input type="checkbox"/>

Substantive Changes (if applicable)

Substantive programme forms submitted (e.g.	Date submitted to the GCC	Main change noted
Year 1,(Issue 1)	18 September 2019	MCH_4_001 Clinical Anatomy Revised assessment and weighting Remove Formative online MCQs replace with Formative written MCQ Remove Summative online MCQ of 30 minutes, 20 questions and replace with a 2 hour written final examination with a mix of MCQ, short answer, true false, and essays. Weighting 60%- 40% pass mark 1-40 minute OSCE with weighting of 40%- 40% pass mark Must pass both components with an overall pass mark of 40% Must pass both components to pass module
2019/002	18 September 2019	MCH_5_002 Anatomy of the Head, Neck and Nervous System Revised assessments and weighting Removal of summative online MCQ 20 questions with a weighting of 50% and replace with 2 hour written exam with multiple question types including MCQs, short answer, true/false, essays, weighting of 60%. Alter the weighting of the Extended MCQ online exam to 40% Overall pass mark 40% Must pass all components to pass module

2019/003	18 September 2019	<p>MCH_4_003 Chiropractic 1</p> <p>1. Change learning outcome from "Perform basic manual therapy skills and demonstrate basic soft tissue techniques with reference to surface anatomy where applicable" to "Perform basic manual therapy skills with reference to surface anatomy where applicable"</p> <p>2. Change Summative Assessment from:</p> <p>Part 1: Professional Development portfolio: Completion of appropriate skill sets in Clinical Assessment Skills as part of continuous assessment of clinical skills recorded within the Professional Development Portfolio. 500 word reflective summary from clinic observation Weighting 40% (20% each PDP task)</p> <p>Parts 2: 1 x OSCE (40 mins) assessing clinical skills – Semester 2 Weighting = 60%</p> <p>To</p> <p>Part 1: 1200 word reflective summary from clinic observation Weighting 20%</p> <p>Part 2: 1 x OSCE (20 mins) assessing clinical skills – Semester 1 Weighting = 40%</p> <p>Part 3: 1 x OSCE (20 mins) assessing clinical skills – Semester 2 Weighting = 40%</p> <p>Overall Pass mark = 40% All components must be passed to pass module.</p>
2019/004	18 September 2019	<p>MCH_4_004 Normal Radiographic Anatomy</p> <p>1. Change student study hours from Contact 30 Blended 50 to Contact 40 Blended 40</p> <p>2. Change of length of module from Semester 1 to Semester 1 and 2</p> <p>3. Change Summative Assessment from</p> <p>Part 1 MCQs 10 questions 30 mins (40% weighting) – Semester 1 to Part 1 MCQ 20 questions 60 mins (50% weighting) – Semester 1 and</p> <p>Part 2 Matching and Illustration 60 mins (60% weighting) – Semester 1 to Part 2 Matching and Illustration 60 mins (50% weighting) – Semester 2</p>
2019/005	18 September 2019	<p>MCH_4_005 Psychology and Behavioural Science</p> <p>1. Change of length of module from Semester 2 to Semester 1 and 2</p> <p>2. Change Summative Assessment wording from</p> <p>"3,000 word Written case study (from available electronic resources) with a focus on relevant psychological and/or behavioural models that would support the management of the patient within chosen scenario".</p> <p>To</p> <p>"3,000 word written case study on the management of chiropractic patient (from selected trigger case) with a focus on relevant psychosocial, cultural and ethical considerations".</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 gave an update on the strategic direction of the University; where it sees chiropractic programme in its health portfolio and provided some further information on outstanding conditions agreed at the November 2018 monitoring visit.

The senior team reported their continued determination to maintain the chiropractic entry standard although this has been reduced since the last visit and reported that the chiropractic programme fitted well within the Allied Health Science group. Although chiropractic was not currently part of the Allied Health Professions, it was very much seen as part of this group within the institution and the interdisciplinary elements of the programme supported this. The team advised that 22 new students had enrolled on the 2019 year 1 course, minus 4 students who have deferred. The institution thought that 30/40 students going forward was a manageable level and would maintain the entry requirement and student experience.

The institution advised that a senior chiropractic lecturer had been appointed on a full time basis and this was sufficient for current needs. Student projections for future years were between 30/40 and on this basis a business case would be submitted in February 2020 for additional staff. Given the developmental nature of the programme, the team felt that this added extra weight to the business case. It was expected that the same model would be repeated on an annual basis until the programme reached the appropriate number of staff members. The Panel was satisfied that there was a programme of planned recruitment, which recognised the ongoing need and development of the programme and would revisit this with the institution at the Autumn 2020 monitoring visit.

The senior team advised in strictest confidence, that the institution were currently in discussion with a London Borough Council with regard to the opening of an additional LSBU campus, which would include the provision of an onsite clinic. The institution was in the process of designing the onsite clinic space with the intention of this being fully functional by September 2021. The clinic would be centred around chiropractic. The institution advised that they were in discussion with the Council to develop a shopfront in September 2020, to encourage footfall and client base in time for the September 2021 opening. Recognising the ongoing nature of discussions, the Panel asked that a detailed formal plan be made available by July 2020 which outlined the onsite student clinic provision and a timeline for full operation.

With regard to the remaining condition falling under the senior team jurisdiction concerning student placement insurance, the institution has previously provided assurances that the correct level of insurance cover is in place for student observational placements.

Panel meeting with course delivery team

The Panel met with staff responsible for the course delivery who provided an update on conditions from the November 2018 visit which was included in the overall summary of the first year of the programme; the student recruitment process; new year one cohort observations; delivery of new units; student access to facilities and placements provider activity.

The course team reported a very positive first year for the chiropractic programme and its strong cohort of students, who have demonstrated high levels of motivation and engagement. In terms of attrition, one student has left the programme due to factors unrelated to the course, one of whom hopes to return in 2020. All year one students have undertaken 15 hour observational placements, hours will increase to 20 hours in year two. On return from

placements students produced a reflective academic essay and the feedback provided to the course team is discussed with students, however the actual provider feedback form is not directly shared. While the inter-professional element of the course has been invaluable in terms of assisting with building professional identity, the team agreed that observational placements had been key to the continuation of this. The Panel was satisfied that the observation of practice condition had been met but asked that the actual feedback be provided to students

The team further reported that some students have attended World Congress of Chiropractic Student Conference in Australia and had begun early engagement with the GCC. A total of 14 students had progressed to year two of the programme.

The team advised that the protocol for student access to practice facilities remained as previously reported i.e. a chiropractic or sports rehabilitation course team member was required for student access. The room is used for two days for chiropractic technique specific content teaching and is available outside of this for practise until early evening, but not at weekends. Currently the room is suitable for 20 students.

The team reported that the institution had lowered the UCAS entry requirement to the programme to match some of the other chiropractic programmes (140 to 112 points) which allowed the potential to attract more students. All potential students undertake a values based, multiple mini interview process. The course team are joined by representatives from the sports rehabilitation team and a patient representative from the LSBU People's Academy who provided value input to the process. From an academic standpoint the new cohort were progressing well.

The course team reported that the delivery of new units for year 2 was progressing well. The newly appointed senior lecturer was leading on the imaging, general diagnosis and chiropractic technique modules. Students were seeing the benefit of previous class room learning and putting this into context. It was clear that observational placements have been of enormous benefit to students in terms of increased understanding and confidence. In addition, it was reported that the group's psychomotor skills were far advanced for the stage of studies. This was also the case for imaging diagnostics. Students had adapted well to new technologies and different ways of learning – this had included the introduction of webcasting and 'Go-pro'.

Currently the institution had contracts with six clinics for observational placements and was in discussion with a further four. It was hoped that a total of fifteen placement providers would be on board by the end of this year. There had been very positive support from the profession.

The Panel discussed the five *substantive changes* submitted by the institution and the rationale for the changes. The course team advised that changes related to assessments and had been broadened out to give students a better chance of success. The changes were discussed among the course team and External Examiner and students had been consulted before changes were made. The changes were made fundamentally on the feedback received from students, recognising that this was a new course that was continuing to evolve. The changes were also subject to the institutions quality assurance board approval.

The Panel were satisfied that changes were appropriate and sensible. The team felt that it was likely that there would be further changes as the programme progressed.

Panel meeting with team responsible for clinical aspects of the course and external placement providers

The Panel met with those responsible for the clinical aspects of the course including some of those hosting external placements. Placement providers reported high levels of engagement from students attending their clinics and were impressed with the students' knowledge. Interaction with patients varied in terms of levels of confidence. Students had represented

themselves and the institution well. Patient feedback had been positive and supportive. Placement providers had received good support from the University course team and had a good awareness of what to expect through discussion with the team, the contract and placement guidance. No issues of concern had been reported – more support will be provided by the institution nearer to full clinical placement activity, presently it was purely observational. Geographically clinics were mostly in London with one in Kent – all within an hours travel. Placement providers also reported that students had asked to come back even though they had completed their required fifteen hours.

The initial clinic placement checking process included a physical visit; that chiropractors were GCC registered; discussion and observation of treatment regimes; a full view of the working clinic which included patient safety. The course team mentioned the Health Education England quality assurance framework and were looking to use this as an audit process, it was agreed that the Allied Health Sciences team could also assist with this process. With regard to the templates and placement guidance/clinical practice handbook, the Panel noted that the 'education audit' template needed to be retitled and that the handbook needed to be reviewed, as it was currently indicating that students would be marked in terms of placements – which was not the case for the observational placements.

Meeting with student groups

The Panel met with student representatives from the first and second year of the programme. First year students reported a good experience and felt much supported by their lecturers. Inter-professional learning sets were seen as positive and provided a good opportunity to challenge beliefs about chiropractic among the group. Students reported a smooth recruitment process from application through to final selection. There was good communication from the institution throughout. The interview process was noted as a positive.

Second year students gave very positive feedback with regard to observation placements. The clinic placement chiropractors were described as incredibly supportive and had also run some sessions at the institution. Students were for the most part responsible for arranging placements directly with clinics, which had helped to build confidence. Clinics also allowed students to shadow in their own time if they wished.

In terms of some issues encountered as a group, second year students reported there were difficulties in accessing practice rooms, particularly the chiropractic room and reported further concerns with regard to plans for proposed onsite clinic provision. Students felt there was support from the course team with regard to the chiropractic room access, but wondered if it was perhaps more of a wider university issue. Students were concerned that the lack of access to chiropractic benches could prove detrimental, especially when approaching exams.

In terms of assessments, year one (now year two) reported that anatomy/physiology assessments did not currently give students the opportunity to express their knowledge. It was not clear to students whether the three anatomy exams all counted towards the grade. Students agreed that course tutors had been very open to feedback on these areas.

In terms of the proposed onsite clinic provision, students reported that there was major concern among the student group as there had been no communication from the institution about this. Students were extremely concerned that the provision would not be in place in time, with some students already considering transferring to an alternative institution for their final year.

Overall, students gave very positive feedback about the institution and their experiences of the programme so far.

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.

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

The Panel was satisfied that three of the four conditions imposed at the **2017** approval visit have been met. The remaining condition cannot be met until the first cohort of students has graduated.

In terms of information requested at the **2018** monitoring visit (listed below) the Panel was satisfied that items 3 & 4 had been met and agree that that items 1, 2 & 5 had been considered, but would require some additional attention following further conditions and recommendations agreed at the 2019 monitoring visit.

1. 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 by April 2019.

2. 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 by October 2019.

3. The institution must provide the GCC with a list of providers offering student clinic placements by April 2019.

4. 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

5. 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.

The following conditions and recommendations were agreed at the **2019** monitoring visit:

Conditions

1. 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)

2. The institution must provide a formal plan for the provision of an onsite student clinic and a timeline for operation (Summer 2020)

3. The institution must provide assurance around student access to practical skills rooms outside normal teaching hours, reported as an ongoing issue (January 2020)

Recommendations

1. The institution to improve and formalise feedback to students following clinic observations/placements .

2. 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.

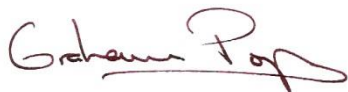
3. The institution to review current documentation e.g. feedback templates, Clinic placement guidance.

4. The institution to improve general student communications around key developments relating to the chiropractic programme.

The Panel also highlighted two areas for particular **Commendation**:

- The Institution was commended by the Panel with regard to innovative teaching techniques eg. Go-Pro
- The Institution was further commended on patient involvement, particularly in relation to the student recruitment process.

Signed:



Panel Chair: Grahame Pope

Date: 7th November 2019