

Education Visitors' Report (Approval of a Programme)

Name of Educational Institution	Teesside University
Programme Name	MSci (Hons) Chiropractic
Proposed Start Date of Programme	Autumn 2020
Date of Visit	16 January 2020

Panel Chair	Grahame Pope
Panel Members	Daniel Heritage, Robert Fish, Andrew Williams
Observers	Penny Bance
Panel Secretary	Annemarie McNeely

Introduction

Teesside University made a full programme submission to the General Chiropractic Council (GCC) to be considered by the Education Committee at its July 2019 meeting for their proposed MSci (Hons) Chiropractic, due to commence in autumn 2020.

The programme submission was analysed by one chiropractic and one lay Education Visitor. Both the Visitor analysis team and the Education Committee were aware that a chiropractic member of staff had not yet been appointed to a senior position in the school and the Education Committee had previously agreed a pragmatic approach be taken when this situation occurred, meaning that a condition be imposed by Visitors that the chiropractic staff member must be in place prior to programme start.

The Education Committee decided that the full Approval Panel for this visit was to comprise of two chiropractic and two lay visitors given that this was a new programme at an institution new to the GCC. The visit would require a panel with a wide range and high level of knowledge and expertise.

The Approval Panel met on the 6 and 15 January 2020 to discuss areas which required further exploration as a result of their analysis of the programme submission.

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

*The students who took part in the visit were from other degree programmes from the faculty and not chiropractic students.

** An area for a potential clinic site was shown to the visiting team

How areas of concern were addressed.

During a pre-meeting on 6 January 2020, the Panel highlighted areas of interest or concern identified in the submission analysis which would be explored in further detail at the visit through a series of meetings with senior staff and stakeholders. The areas of interest or concern are included below.

1. Meeting with Senior Management Team

Institution restructure, chiropractic fit into institution strategy: The School of Health and Life Sciences (SH&LS) was established in October 2019 following the merger of the School of Health and Social Care and School of Science and Engineering. The science element of the School brought a very strongly developed biomedical provision and significant research around biomedical science. SH&LS is interested in growth, synergies, development of provision, supporting the University's ambition/broader objectives, and breaking down silos across disciplines. The proposed chiropractic programme is regarded as a real opportunity to utilise existing resources e.g. physiotherapy and sports injury. The University sees chiropractic as a growth area and has the advantage of potential through put from other undergraduate programmes. In preparation for the chiropractic course, the University had built a network of external chiropractic partners who had assisted with course curriculum development and student placement plans.

The University's transformation programme had allowed for the skilling up of staff for the delivery of all new and existing programme, this included the use of a digital technology programme which encouraged staff to use technology in all areas. iPads had been issued to undergraduates and had proved a powerful staff/student collaborating tool.

Students will receive regular support from personal tutors and feedback would be reported to heads of department. An electronic attendance monitoring would be in place as a further student support tool, the purpose of which to identify any potential areas of concern at an early stage. In regards to student support more generally, the University had invested in a Student Life building which brought together the full range of student support

services , which included career support, company set up, counselling services and sleep clinics – academic staff expressed a determination to reach students more proactively.

Finance: The institution confirmed approval for course costings for three years, this included staff requirement, modest capital spend for the first year and capital funding during year two and three to develop the onsite clinic provision. The programme would have the opportunity to take part in an annual bidding process for any additional staff requirements. The Panel was assured that the course was viable over the three year period. If projected numbers were not reached the University would support the programme during its development period.

Chiropractic research: The institution had plans for chiropractic research which may also link in with sports and physiotherapy disciplines. Musculoskeletal, sports rehabilitation and the public health agenda are areas of keen interest to the institution who had the advantage of research active members of the School also involved in learning and teaching. Research provision is strongly built into the programme as the institution wants research active graduates which will in turn help to develop the profession. The initial course costings did not include funding for a research element, however a separate stream of research funding is available for that purpose.

Programme oversight: Operational oversight of the new chiropractic programme will be the responsibility of the Head of Department of the Department for Physiotherapy/Sport Rehabilitation/Dietetics/Leadership, who report to the Dean of School in terms of outcome and delivery. The senior chiropractic lead will sit within this department. Quality assurance will be measured through the institution's continuous monitoring and enhancement system.

Student recruitment: The course is currently advertised through UCAS (subject to GCC approval) and student clearing is also being considered. Traditionally there had been a strong north of England student demographic at Teesside University, however the institution is looking to broaden its reach. More mature students will be one of the target areas for the new chiropractic programme plus potential for international students.

The institution is aiming for a first cohort of up to twenty-five students, there is no current minimum. If target numbers were not realised during the first three years of the programme the institution would bear the financial cost. In the event of a continued shortfall in student numbers the course provision would be reviewed, appropriate student support would be given if the course was deemed no longer viable and a commitment was given that the course would be 'taught out'.

Staff recruitment: The Panel was aware that an advert for the senior chiropractic appointment had been published, however there was concern that the individual may not have sufficient time to develop chiropractic elements of the course ahead of the proposed September 2020 programme start. The institution advised that there had been some local interest in the post and was confident that sufficient time was available. In terms of wider recruitment, funding was also available to engage contractual tutors to ensure an appropriate staff student/ratio throughout the first year and thereafter. Individuals brought in from practice will undertake a developmental process to ensure the quality of the offer and for it to add value to them as practitioners.

Student entry requirement: Was provided by the institution on the day.

The Panel advised the senior team that it would be in a position to give indicative conclusions in terms of conditions, recommendations and commendations during the final session of the day. These would need to be endorsed by the GCC Education Committee

and could be subject change. Once approval from the Education Committee and Council had been secured the final step in the process would be Privy Council approval – of which the GCC had no jurisdiction in terms of a timeline for a decision. A programme is not approved until Privy Council agreement has been secured.

2. Guided tour of facilities

The Panel and GCC representatives were taken on a tour of the facilities offered to students which included library services, Student Life, simulation theatres and current clinic space. The Panel and GCC representatives were also shown one of the potential spaces where the proposed chiropractic clinic could be sited. The group were impressed with the facilities available, of particular note were the library and Student Life areas.

3. Meeting with course delivery team

Declaration of interest: Gay Swait informed the meeting that she had provided advice and input to Teesside University in respect of the proposed chiropractic programme and was also a member of the GCC Council and Education Committee. For the meeting Gay would be representing Teesside University.

Grahame Pope (Panel lay chair) advised that he knew Paul Chesterton (*Teaching Fellow at Teesside University*) as he is also an External Examiner on a course in his department at the University of Nottingham.

Contact hours: Following the analysis of the programme submission the Panel had expressed concerns on the number of student contact hours. As a consequence, the institution had reviewed the initially proposed hours and provided details of increased hours. Whilst welcomed, the Panel was keen to understand the rationale for the decision. The institution undertook a review of each module and most of the modules had been pushed toward the maximum hours of contact.

Teaching and learning assessment of the programme:

The teaching and learning assessment were reported as primarily practically focussed, with a strategy of providing as much variety as possible to students. The institution reported a desire to do things differently in an effort to not disadvantage students by having one focus of assessment. In terms of the chiropractic course, there would be a balance of assessment across all years, with a substantial practical element throughout. The institution had endeavoured to take an evidence-based approach to assessment. In terms of the weight of student assessment, the institution was committed to relevant and appropriate assessment.

Broader curriculum fit: The institution's Transformation Board had responsibility for a key project looking at alignment of delivery and was also tasked with looking at commonalities across provision. The team reported that there would be many opportunities for interprofessional learning, particularly where course overlap was identified. The institution would develop the process of interdisciplinary contact from course commencement, which would include presentations from other disciplines and encouraging the healthcare group to collaborate closely across disciplines.

Professionalism: The institution promotes interdisciplinary learning and that this approach would be used to look at the fundamental principles of professionalism. However, it was recognised new students would take time to find their professional identity and would therefore encourage students to work in smaller uni-professional groups to help them develop their own professional identity, this would focus on their own specific professional

guidance and standards. The proposed clinical placement model would also assist with promoting professionalism.

Range of expertise of existing team: In terms of other teaching personnel, the institution reported that the amalgamation of the two schools had resulted in an increased skills base, which included physiologists and anatomists. The School recognised that the appointment of the chiropractic senior lecturer was integral and would be willing to develop an individual into the role. If the institution did not appoint, the role would be re-advertised and recognised this would make a September 2020 course commencement difficult. A decision would need to be reached as to whether the course start date be moved.

Professional accountability module: The Panel asked for some clarification on professional accountability appearing in a year 4 module, given that student practice commenced in the previous academic year. The team clarified that professional accountability, fitness to practise, frameworks, guidelines, ethics and patient safety were all delivered in the first module of year 1 and would also include professional regulation. In addition, these areas would be embedded in learning and revisited throughout modules. The professional accountability in year 4 was geared more toward the professional in practice settings e.g. enterprise aspects of being a chiropractor in the community, post qualification.

Patient safety: The Professional and Clinical Practice module (year 1) covered profession specific assessment and patient safety and more general infection control, this would be developed throughout practice-based modules. Practice placement agreements also included a requirement from the placement educator to ensure that students were made aware of policies and procedures when entering into a clinical environment.

Medication: The Panel, having reviewed all of the documentation noted that in terms of medication there appeared to be a focus on pain medication and asked for further information on how students would reach an understanding on the impact of other common medication, both in terms of patient treatment and medication symptoms. The institution reported that this would be covered within the Clinical Pathology and Neurological modules and agreed to make this more explicit.

Major Research Project: The Panel was keen to understand the rationale for the inclusion of a major research project. They noted that many programmes no longer included this as part of their provision. The School had reached the decision to include as this was a distinctive feature of the School practice and linked well with research active colleagues working in the School. The rationale for inclusion was as a result of a move in healthcare to more clinical academic posts, the inclusion of the research element would open up these opportunities to students and contribute to higher quality research. Evidence also suggested that students exposed to research processes and skills were more likely to interpret and analyse evidence well. Students had reported anecdotally that they enjoyed the process and the way in which the module had been formulated was to make it less onerous than perhaps a traditional primary research project. The School was clear that there was supervisory capacity to manage the projects.

4. Meeting with course team including those responsible for self-directed/virtual learning

Virtual learning/self directed study: The Panel asked how the use of VLE would link with face to face chiropractic teaching and was advised that each course had a generic course site managed by the course leader. All involved in the programme had access and provided students with generic information and reference points, linking to resources within the university – which included library and student support services. A practice education

site purely for chiropractic would be developed and would have its own Blackboard. The system would be monitored in terms of student engagement and would link this information back to the personal tutor. The site had proved to be a good communication tool in terms of providing feedback to staff and students. A suite of services including learning hubs and workshops (including Microsoft workshops) could be embedded at the point of need. Blackboard was also used for written assessments and the monitoring of written work. The Panel was advised that the content and resources would be actively developed for a September 2020 start and a robust action plan would put in place to deliver.

Wellbeing and student engagement : The School reported that electronic attendance monitoring would be implemented from September 2020 onwards. Student attendance would be tracked at a School and strategic level, with weekly reports provided to the Pro-Vice Chancellor. Additional monitoring tools were available through learning analytics including information on VLE engagement and library activity i.e. monitoring of login and duration. In addition, the smaller nature of health student groups allowed tutors to see students on a more regular basis, so aiding early intervention in terms of wellbeing support.

List of resources: The institution reported the course reading list had not been signed off yet, although programme approval had been agreed. The course validation had agreed that the lists would require the input of the senior chiropractic member and therefore had granted an exception. The institution's library services assured the team that resources could be accessed quite quickly.

5. Meeting with those responsible for clinical aspects of the course (including placement providers).

The Panel was joined by individuals from the institution, representatives responsible for the clinical aspects of the team and a number of potential external placement providers, who had also sat on course steering groups. Gay Swait was also in attendance for this session.

Planning, philosophy for clinical component/ placements: the institution reported that the course fitted with the philosophy and ethos of the school and other provision. The institution had decided that practice placements would be introduced from the start, which was currently the case across other health disciplines. The institution team was keen that students were on the right course from the start and had experience of chiropractic from the beginning.

In terms of placements, students needed to be in an environment where they could build professional knowledge/accountability, have an understanding of professional practice and be provided with the opportunity to communicate effectively, by developing therapeutic relationships with patients, chiropractors and wider multi-professional teams.

It was therefore agreed that in:

- Year 1 – there will be two student placement of five days (10 days in total) at a range of placement facilities e.g. nursing home, onsite sports injury clinic, NHS. In each five-day placement, two of the days would be a mandatory placement with a chiropractic educator to assist the development of basic care skills and understanding of chiropractic
- Year 2 – student chiropractic observations with a chiropractic educator e.g. reviewing assessments, history taking, involvement in the verbal interaction to help build on subjective and objective skills

- Year 3 – (semester 1) students in practice and working in a more hands on capacity working one to one with chiropractic educators. In semester 2 of year 3 students would enter the on-site clinic setting.

The institution had recognised the risk in terms of capacity if the year 3 & 4 clinic elements of the course all took place externally and the number of student hours required would be more easily managed and met with an onsite student clinic space. In terms of the physical onsite clinic, the proposal was that a purpose built clinic would operate six rooms simultaneously with a supervisor overseeing two or more rooms, giving students the opportunity to develop their autonomy progressively. The level of autonomy would progress as students went through their onsite internship.

The programme had wide support from a network of chiropractors who had been involved in many areas of the course development and looked forward to welcoming students to their clinics. In regard to patient support, a survey of 300 patients had been undertaken which asked patients how they felt about student involvement in their care and treatment, positive responses had been received– most patients were happy with only a few reticent about having students present at the final consultation.

Clinic placement scoping: It was reported that the University had undertaken a scoping of exercise of 140 clinics, narrowed to 74 clinics within a 50 mile radius which had looked at :

- reputational soundness in terms university and GCC
- indicators of practice quality standard
- professional qualification of chiropractors
- clean record of practice background checked
- good reputation through patient reviews
- indicators of good evidence-based practice

This resulted in 35 clinics being given a green rating as a possible placement educator. Currently there were no placement agreements in place and before any were agreed a quality assurance audit would be undertaken, which would include appropriate insurance cover.

Student feedback and geography of placements: Each student would provide an evaluation of the placement to both the University and placement educator. Any issues would be taken forward by the placement coordinator. The institution envisaged that this would equate to no more than one hour travel time, the cost of travel to the placement would need to be met by the student.

6. Meeting with students

Students from dental, physiotherapy, sports injury, rehabilitation and paramedic courses met with the Panel. They reported a high level of satisfaction with regard to the support received from personal tutors, academic leads, student bodies and their own peer groups across the healthcare disciplines. Students met with named personal tutors at least three times in the academic year, they also had easy access to academic tutors. There was a variety of formal and informal access and students reported receiving regular feedback from tutors. Students were encouraged to upload feedback received from tutors on their e-portfolio.

In terms of institution resources particular satisfaction was reported with regard to sessions organised by library services on academic thinking and writing, which were also made available electronically. In addition, there was good support from student bodies.

Students could use the placement service offered by the University or source independently. Students felt well prepared for placements, some were required to sit an exam in order to prove that they had reached the required level beforehand. Preparation for the placement began four weeks in advance and students were marked satisfactory, pass or fail. Any placements issues could be raised through the institution and generally attended to swiftly.

Interdisciplinary learning and developing professional identity was encouraged and fully supported as part of formal study, shared events, collaboration across societies and library activities. Students felt that the chiropractic student experience would benefit in terms of developing professional identity if a Chiropractic Society was formed.

Account of verbal summary given to the institution

The GCC Education Visitor Approval Panel provided a verbal summary to the School of Health and Life Sciences (SH&LS) senior team.

The GCC Panel informed the senior team that it would recommend approval with a number of conditions, some recommendations and commendations. The SH&LS team was thanked for all of the time and effort put in to the process both prior to the approval visit and on the day.

A total of three conditions were imposed, along with three recommendations and two commendations. Details of this are listed below.

Recommendation to Education Committee

1. Approve <u>without</u> conditions	<input type="checkbox"/>
2. Approve <u>with</u> conditions	<input checked="" type="checkbox"/>
3. No approval (insufficient evidence due to serious deficiencies)	<input type="checkbox"/>

Conditions for the institution with reasons and timeframe in which they must be met. (Recommendation 2)

* Conditions are requirements that the education provider must meet before the programme can be recommended for ongoing approval. If conditions are placed upon the programme by the GCC, the institution must disclose this decision to prospective and current students.

- 1. The institution must recruit an appropriately qualified senior chiropractic member of staff who must take up post by the end of June 2020 or before.**
 - The institution must send copies of the individual's CV to the GCC when the appointment of this staff member has been confirmed.
- 2. 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.**
 - The first of these visits will take place during the first semester in February 2021 and after the programme has commenced.
- 3. The institution must formalise the agreements with placement providers, confirming there is sufficient capacity for students by September 2020.**

- The institution to provide written confirmation to the GCC confirming the number of placement providers who have signed placement agreements, and confirmation that there is sufficient capacity for the first cohort of students to receive their two year one placements. On each of the five day placements, this would include three days with a variety of health care providers and a mandatory two day observational placement with a chiropractor.

Recommendations for the institution and reasons

* Recommendations do not need to be met before the programme is granted ongoing approval. Recommendations are normally set to encourage further enhancements to the programme.

The Approval Panel has recommended the following:

1. The University to consider the minimum number of students for which they would be prepared to run the course: this is linked to Panel concerns about student experience/developing professional identity in the event of a significantly small cohort.
2. The institution to provide appropriate support to chiropractic educators to deliver the practice based learning element to ensure that they are properly prepared to participate in hosting students, prior to the start of the first placement.
3. The University/School to support chiropractic students recruited to the first cohort to develop a chiropractic society to assist with the development of professional identity.

Commendations to the institution

The Approval Panel commended Teesside University on the following:

1. The approach taken by the University in working with the local chiropractic community in developing the practice based element of the course, which has resulted in the development of a community where academics and chiropractors can support each other's development.
2. The development and investment the University has made into the very impressive Student Life facility, which will be of great benefit to students.

Further Evidence Required

N/A

Conclusion

The Approval Panel concluded that the programme's content adequately met the GCC's Education Standards. The Panel was impressed by the inclusion of interdisciplinary learning throughout the course along with the large amount of stakeholder involvement and support and the focus on public health.

The Panel recognised that this being a new programme, delivered by an institution new to the GCC, meant that it would need more rigorous monitoring than an experienced provider of chiropractic degrees. To ensure that the GCC Education Standards continued to be met, the Panel was satisfied that this would be achieved through annual monitoring visits.

Signed: 

Panel Chair: Grahame Pope

Date: 1 April 2020