

**EUROPEAN COUNCIL ON CHIROPRACTIC EDUCATION
COMMISSION ON ACCREDITATION**

**REACCREDITATION EVALUATION VISIT TO THE
WELSH INSTITUTE OF CHIROPRACTIC (WIOC),
(SEFYDLIAD CEIROPRACTEG CYMRU),
UNIVERSITY OF GLAMORGAN (PRIFYSGOL MORGANNWG), WALES, UK**

10-12 March 2010

Evaluation Team Report

TABLE OF CONTENTS

1. Executive Summary	3
2. Introduction	6
3. Division of Chiropractic	8
4. ECCE Standards Compliance	9
4.1 Aims and Objectives	9
4.2 Educational Programme	12
4.3 Assessment of students	19
4.4 Students	20
4.5 Academic and Clinical Staff	22
4.6 Educational Resources	24
4.7 Relationship between Teaching and Research	27
4.8 Programme Evaluation	28
4.9 Governance and Administration	31
4.10 Continuous Renewal and Improvement	34
5. Conclusions	35
5.1 Summary	35
5.2 Strengths, Weaknesses and Concerns	35
5.3 Acknowledgements	36
APPENDIX (On-site Evaluation Visit Timetable)	37

1. EXECUTIVE SUMMARY

- 1.1 The Division of Chiropractic is in the Faculty of Health, Sport and Science at the University of Glamorgan, Wales. It is also referred to as the Welsh Institute of Chiropractic (WIOC), the more commonly accepted name within the profession which is used in this report.
- 1.2 The Division provides a one + four year undergraduate chiropractic education and training programme leading to a Master in Chiropractic (MChiro). This award replaced the BSc (Hons) Chiropractic degree in 2007 which is due to be phased out by 2010. The Division also delivers a PGCert. Clinical Development in Chiropractic, and a PGDip/MSc in Clinical Development. Mature students and others who do not hold the necessary science requirements can enter the programme via the Foundation year (Year 0).
- 1.3 The University commenced its Chiropractic programme in 1997 and was first accredited by the ECCE in 2002. WIOC was reaccredited for five years in 2004-5.
- 1.4 The report of the Evaluation Team in December 2004 identified the following Strengths and Weaknesses which were endorsed by the CoA in 2005:

Strengths:

- **Improved integration of the Field into the work of the University.**
- **The dedication and quality of the WIOC leadership and staff at all levels.**
- **The recruitment of high calibre students while enabling mature students to enter the programme through the Foundation Year.**
- **WIOC's attendance policy which has been highlighted by the University as an example of best practice.**
- **The efforts to make the Basic Sciences modules in the Foundation Year and Years 1 and 2 more relevant to Chiropractic.**
- **The organisation, functioning and ethos of the clinic including the excellent case mix and the use of portfolios for assessment and reflective practice.**
- **The substantial growth of research and consultancy activities under the leadership of the Chiropractic research Unit.**

Weaknesses:

- **The increasing number of students is placing extreme pressures on staffing that needs to be addressed.**
- **Academic staff are insufficiently able to participate in pedagogic and instructional related research.**
- **The semi-structured interviews in the admission process may lead to an outcome that is less accountable to the applicant and less translucent.**

- **The need for greater variety of subject expertise in the clinical sciences.**
- **The growth of research activity is weakened by the lack of a designated research leadership position such as a Reader or Research Professorship with more time allocated to research.**
- **The roles, duties and involvement of external examiners in the assessment system are in need of strengthening so that WIOC conforms to the conventions of assessment and awarding in higher education.**

- 1.5 In November 2009 WIOC submitted its Self Study Report to the Commission on Accreditation (CoA). The CoA found it satisfactory and decided it would send an Evaluation Team to WIOC. The CoA received, reviewed and approved that the Evaluation Visit should take place following an electronic consultation with its members who had all received the complete documentation.
- 1.6 A three day Evaluation Visit took place (10 to 12 March 2010). The site visit provided further documentary and oral evidence to the previously submitted documents. WIOC was given feedback at the end of the visit and informed verbally of any strengths, weaknesses and/or concerns regarding its provision of chiropractic education and training.
- 1.7 This Evaluation Report (henceforth referred to as the Report, or Evaluation Report) was compiled by the Evaluation Team based on the evidence provided beforehand and during the evaluation visit to WIOC. The Report was sent in draft format to WIOC for factual verification, and the final Report was submitted to COA on 26 April 2010.
- 1.8 Members of the Evaluation Team extend their thanks to WIOC for the courtesy shown to them during the Evaluation visit and for conducting the Visit in an open and transparent manner. The Team had full access to members of staff, students and documentation. In particular the Team thanks the Head of the Division, academic, clinic, research and administrative staff and chiropractic students for interacting with us in such a professional and constructive manner. The Evaluation Team Chair on behalf of the COA invited WIOC to send a representative(s) to its meeting in London, UK on Friday 14 May 2010.
- 1.9 This Report addresses the compliance of WIOC with each of the ECCE Standards in the provision of chiropractic education and training through the MChiro award. The outcomes of the Report are as follows (the definitions used are included under 5.1 in this Report):

Recommendation:

Strengths:

- **The full integration of the Division of Chiropractic into the new Faculty structure.**
- **The dedication and quality of all staff including management and support staff.**
- **The recruitment of increasingly high quality, highly motivated students to both the MChiro and the Foundation Programme.**

- **The support system throughout the Division best exemplified by the ‘Buddy’ System.**
- **The organisation, functioning and supervision of the clinic and the substantial clinic portfolio that provides a structure that encourages self-reflection and good practice.**
- **The ongoing efforts made to nurture relationships with a wide range of professional and chiropractic organisations.**

Weaknesses:

- **The lack of a medium to long-term strategy for the Division.**
- **The lack of medical input into the medical science and diagnosis modules as well as the outpatient clinic.**
- **The insufficient consideration given to pedagogic and instructional related research.**
- **The insufficient involvement of the Division in the wider health care system.**
- **The apparent lack of a coherent research strategy for the Division.**

Concerns:

There were none.

2. INTRODUCTION

- 2.1 A reaccreditation evaluation visit to the Division of Chiropractic (Welsh Institute of Chiropractic), Sefydliad Ceiropracteg Cymru, Faculty of Health, Sport and Science at the University of Glamorgan (Prifsgol Morgannwg), Pontypridd, Wales was agreed by the Commission on Accreditation of the ECCE in January 2010 upon receipt of a Self-Study Report and Appendices to the Report prepared by the University. Members of the Evaluation Team were appointed by the Executive and received the Division's Self-Study Report and Addendum prior to the visit.
- 2.2 The members of the Evaluation Team met in Cardiff on the evening of Tuesday 09 March 2010 prior to the start of the visit in order to prepare for the following days. The Evaluation Team was composed as follows:

Dr Philippe Moneger, France, Chair	DC, Private Practitioner in Paris, former Chair CoA 2001-2005.
Dr Renè Fejer, Denmark	Licensed Chiropractor in Denmark, Clinical Supervisor, Back Centre Ringe, Formerly Associate Professor, University of Southern Denmark, Odense, awarded PhD 2006,
Dr Graham Heale, UK	DC Dip Biomech, DChiro, Private practice, Director of Academic Affairs, College of Chiropractors
David Burtenshaw MA, PgCE, FRGS, FEAC, MCIEA, UK	Executive Secretary ECCE, formerly Director Collaborative Programme Development, University of Portsmouth. Chair of Examiners, Welsh Joint Examinations Council, Cardiff.

The members of the ECCE Team represented expertise in the basic sciences, the clinical experience, research and university administration. Mr David Burtenshaw acted as Secretary to the Team and as a member of the Team. The members of the Team were allocated specific sections of the Report as their areas of responsibilities before arriving at WIOC.

- 2.3 WIOC had submitted the following documents to CoA and the Evaluation Team;
- Self-Study Report (SSR) Master of Chiropractic (MChiro) 2009.
 - Appendices to the ECCE Re-accreditation Documents (3 Volumes containing 6 Appendices) 2009.
 - A CD Containing the Division of Chiropractic Student Handbook, Faculty of Health Sport and Science Policies and the University of Glamorgan Academic Handbook.
- 2.4 The Commission on Accreditation had access to the following during its discussions of the Self-Study report:
- Faculty Board Minutes 2006-2010,
 - Faculty Quality Assurance Minutes 2006-2010,
 - External Examiner Reports,
 - Annual Monitoring Reports of the Faculty for 2007-2009,
 - A selection of Student Portfolios,
 - The University Prospectus

- 2.5 The purpose of the Evaluation Visit was to verify the SSR and other evidence presented by WIOC, and to evaluate the institution in terms of its compliance with the ECCE Standards in Chiropractic Education and Training (hereafter referred to as the Standards). Based on the SSR and other evidence submitted beforehand, and on evidence given and observed during the on site visit, an Evaluation Report compiled by the Team was submitted to WIOC for correction of any factual errors, and thereafter to the Commission on Accreditation for a decision on the re-accreditation of WIOC.
- 2.6 All members of the Team were proposed before the visit to WIOC with accompanying CVs and objections were raised concerning the proposed Chair. The Executive nominated a replacement Chair who was acceptable to WIOC. No other member of the Team was the subject of objection. All members of the Team signed confidentiality and conflict of interest statements before the on site visit. No conflicts of interest were declared by any of the other Team members.
- 2.7 A draft timetable for the visit was sent to WIOC in January 2010 and the final schedule agreed with WIOC on 01 February 2010. A copy of the schedule is appended to this Report.
- 2.8 Members of the Team held a preliminary meeting on 09 March 2010 to confirm final arrangements for the visit. The on-site visit was from 10 to 12 March 2010 (inclusive). Meetings were held with members of the University and the Division and time was allocated for members of the Team to hold private meetings as the visit proceeded. This gave the Team time to reflect on the evidence it had been presented with, and enable the Team to request further evidence where clarification was necessary. A room was provided for the Team to hold their private meetings, and where the Team had ready access to all relevant files and documentation. The Report was compiled on an ongoing basis during the visit, and the final day (12 March) was set aside to complete the draft Report and give oral feedback to the University.
- 2.9 The sections of the report follow the headings of the Standards to which the Conclusions, Strengths and Weaknesses have been added at the end.
- 2.10 The draft Report was finalised by the Chair of the Team and the Executive Secretary and sent to Team members for comments. The final draft Report was sent to WIOC for factual verification. The Chair and Executive Secretary finalised the Report and this was submitted to the COA. The Chair of the Evaluation Team presented the Report to COA on 14 May 2010 in London, UK, and Dr Byfield attended to receive the decision of the COA on behalf of WIOC
- 2.11 This Report includes an Executive Summary, a description of WIOC and the findings of the Team regarding continuing compliance of WIOC with the ECCE Standards. The Report ends with the Conclusions of the Team and any Strengths, Weaknesses and/or Concerns the Team wishes to draw to the attention of the COA.

3. DEPARTMENT OF CHIROPRACTIC, WIOC

- 3.1 The Division of Chiropractic is within the Department of Professional Education & Service Delivery department in the Faculty of Health, Sport and Science at the University of Glamorgan. The Division is responsible for the provision of undergraduate chiropractic education and training. The Faculty contains two other departments.
- 3.2 The University has been accredited by the General Chiropractic Council (GCC) as meeting the criteria for chiropractic education in the UK. The latest recognition visit took place in February 2007. The Division has a contract with the GCC to provide the training of examiners and assessment of foreign applicants to the Register required to take a Test of Competence.
- 3.3 Decisions regarding the provision of chiropractic education and training made at division level are ratified by the Department and the Faculty Executive.
- 3.4 The Division used the University's internal quality assurance procedures in the preparation of the Self Study Report as required by the University's procedures.
- 3.5 The 'mission' of the Department of Chiropractic is defined as: "to prepare graduates to the point where they are able to register as a Chiropractor with the General Chiropractic Council (GCC) and meet the ECCE educational standards to give graduates mobility to consider practicing in other jurisdictions around the world. The GCC Code of Practice and Standard of Proficiency drive the educational process and underpins criteria for recognition of a degree programme. The purpose of the educational process is to provide the scientific knowledge and basic clinical methodology as a background for the post-graduate clinical experience..." The mission stresses that the programme is vocational, reflecting the absolute professional requirement for the attainment of safe and competent practice.

4. ECCE STANDARDS COMPLIANCE

4.1 AIMS AND OBJECTIVES

4.1.1 Statement of Aims and Objectives

The chiropractic institution must define the overall aims and objectives of the undergraduate programme and make them known to its stakeholders. The statements must describe the aims and objectives resulting in a chiropractor that is competent and safe to enter practice as a primary contact practitioner in the current healthcare environment, with the appropriate foundation for postgraduate education and training, and a commitment to, and capacity for, life-long learning.

4.1.1a Description

WIOC aims to produce chiropractors who are safe and competent to practice as independent, primary contact health care practitioners within the totality of the health related professions and adhere to the UK Standards of Proficiency.

The educational process provides the scientific and clinical knowledge and methodology to enter post-graduate education and training through a critical, analytical and evaluative approach necessary for life-long learning. It focuses on patient centred evidence based care.

The statements of aims and objectives of the Division are made known via

- The University documentation and website
- The validation and accreditation documentation
- The student/student Clinician/Supervising Clinician handbooks and various other means.

The outcomes of the curriculum are described as follows:

- safe and competent independent primary contact chiropractic clinicians capable of delivering the highest standard of care within the limits of their competencies and with an open-minded-creative attitude necessary for life-long learning and
- effective professionals cognisant of evidence-based practise and patient-centred models.

4.1.1b Analysis

The aims and objectives statements of the MChiro programme encompass the knowledge, skills and attitudes necessary for safe and competent practise as an independent primary contact practitioner, and for life-long learning, in line with the competencies outlined in the ECCE Standards.

4.1.1c Conclusion

WIOC fully complies with Standard 1.1.

4.1.2 Participation in formulation of aims and objectives

The overall aims and objectives of the chiropractic programme must be defined by its principal stakeholders.

4.1.2a Description

The principal stakeholders of the Chiropractic programme include the current and prospective students, University and Faculty staff, the General Chiropractic Council, the external examiners, the ECCE, National and European academic and professional associations, and the clinic patients.

Members of the Chiropractic Division formulate the aims and objectives. Their proposal is then reviewed for validation by other members of the division, external consultants, the student council, in consultation with the GCC and the Education Committee.

Patients can feed information through the Public Patient Involvement group of WIOC's outpatient clinic. The overall aims and objectives statements are refined via the annual monitoring review process with the GCC, ECCE, Faculty and the internal quality mechanism in place at the University.

4.1.2b Analysis

The overall aims and objectives of the course are based upon and written to comply with the UK Standard of Proficiency for competent and safe practice of Chiropractic and with the GCC UK Code of Practice.

Staff and students are well aware of the aims and objectives of the chiropractic programme. Within that frame, both staff and students know they can input via various channels but seemed content with the way these aims and objectives are formulated and make up the foundation of the MChiro programme.

Ongoing refinement of the aims and objectives is achieved through the annual monitoring process with various stakeholders and the internal quality mechanisms within the Division and the University. (Para 5.2.1 refers)

4.1.2c Conclusion

WIOC substantially complies with Standard 1.2.

4.1.3 Academic autonomy

The chiropractic institution must have sufficient autonomy to design and develop the curriculum.

4.1.3a Description

The Division of Chiropractic is entirely responsible for the design and development of the curriculum. However, to insure its funding, the Faculty has to formulate a Resource Development Plan for current and future activities and projects. This RDP is reviewed at University Directorate level and requires Board of Governors' approval.

Also, one module is validated outside the faculty (Quantitative Methods in Clinical Sciences) but the division is able to request the content and delivery of the material covered in the module and participates in the assessment of the learning outcomes. Academic staff from the Mental Health Division and from the Division of Sport Health and Exercise contribute to the delivery of the Functional Management module under the academic control of the Chiropractic Division. The 4th Year module, Contemporary Clinical and Professional Practice is delivered by experts within other Faculty departments.

The curriculum is reviewed annually by the divisional team and the external examiners to ensure that the aims and objective of the curriculum are met. Feedback from the students is ongoing via the student council.

According to the Five year Plan the projected number of students should remain stable in 2010, 2011 and 2012 (at around 300/305).

Mature students who do not have the proper science prerequisites to enter the programme can qualify if they successfully complete the Foundation year curriculum. The University has recently decided to devolve the control of the Foundation Year to the Division of Chiropractic due to the fact

that there was some restructuring of Foundation provision across the University and most of the Foundation year students join the chiropractic MChiro degree programme and eventually graduate. Any changes in the curriculum will most likely involve less Mathematics, more Anatomy and Chemistry and the inclusion of a Massage course. Physics is taught with an emphasis on Biomechanics.

4.1.3b Analysis

The Chiropractic Division has substantial autonomy within the university setting to design and develop the curriculum as the validation of the MChiro can attest. The economic situation and the shortage of University funding would make it more difficult today to implement major changes to the programme. Fortunately, the current design of the MChiro programme meets with the approval of both students and staff and major changes are not on the agenda. However, for minor changes, communication is ongoing between the different stakeholders and can be implemented readily within the Division if they perceive a need. The content of the modules taught outside the Faculty is negotiated by the Chiropractic Division and must be made relevant to chiropractic education in a broad sense. The Academic staff from the Mental Health Division and Quantitative Methods willingly take on board the needs of the chiropractic students and praised the students' commitment, motivation and academic level. (Para 5.3.1 refers)

Since Foundation year students are taught in separate buildings on a separate campus within the University, they can feel somewhat isolated on a day to day basis. The Division has put in place a 'Buddy system' to break that isolation and encourages the Foundation year students to come to the Student Clinic. Foundation year students are invited to all social events. Foundation students participate in the Junior Clinic Module as clinic patients and the chiropractic staff lecture on one of the foundation modules. It is expected that the control that the Division now has over the Foundation year will lead to more integration of the Foundation year curriculum to better prepare students transferring into the MChiro programme. It is pleasing to note that the Division is becoming more autonomous in the formulation of the Foundation programme. (Para 5.2.1 refers)

4.1.3c Conclusion

WIOC fully complies with Standard 1.3.

4.1.4 Educational outcome

The chiropractic institution must define the competencies (exit outcomes) that students must exhibit on graduation in relation to their subsequent training and future roles in the profession and the wider healthcare system.

4.1.4a Description

At the time of graduation graduates must be able to:

- develop and apply knowledge and skills that form the basis of chiropractic
- assess the health and health needs of patients
- provide appropriate care
- communicate effectively with patients and other health care practitioners
- act as autonomous primary care practitioner and be professionally accountable.

4.1.4b Analysis

Approval of the MChiro programme by the UK statutory regulator (GCC) and the overall assessment procedures of the Division during and at the completion of the programme ensure that aims and objectives of the chiropractic programme are met.

4.1.4c Conclusion

WIOC fully complies with Standard 1.4.

4.2 EDUCATIONAL PROGRAMME

4.2.1 Curriculum model and educational methods

The chiropractic institution must define a curriculum model and educational (teaching and learning) methods consistent with the objectives of the curriculum.

The curriculum and educational methods must ensure the students have responsibility for their learning, and prepare them for lifelong, self-directed learning throughout professional life.

4.2.1a Description

In 2007 WIOC changed its chiropractic programme from a 4 year HE Level 6 BSc (Hons) programme to a 4 year integrated HE Level 7 Master of Chiropractic (MChiro) programme. The rationale for starting the MChiro was that, in WIOC's opinion, the BSc (Hons) was already delivered at Masters level and thus, it would be more appropriate to change it into an integrated Master's programme.

The MChiro consists of 25 modules. The modules range between 10 and 60 credits, giving a total of 480 credits. The modular system is based upon a staged learning model ensuring both a vertical and horizontal integration. Each module runs through the entire academic year and students have 20-24 contact hours per week leaving an equal amount of time for student directed and independent study to complete the module workload.

The curriculum incorporates a variety of teaching methods best suitable for each of the learning objectives. The teaching methods are predominantly lectures, seminars, exercises, practical classes, tutorials, and group presentations. In Years 3 and 4 clinical teaching methods such as role-plays (interviews), supervised simulated clinical consultations, clinical rounds, case presentation, and reflective portfolios are also included. Self-directed study is supported by several systems, such as the personal tutor system, library support assistants, as well as daily support by the team leader during the clinical training year (Year 4).

In addition to the 4 year curriculum, a Foundation Year (Year 0) is offered to applicants who do not fulfil the minimum science requirements to enrol in the MChiro programme. The foundation year is a 120 credit curriculum and currently consists of 9 modules such as Mathematics, Computer literacy, Statistics, Human Biology, and Chemistry. These modules, except for some contact hours in the Communication Skills and Contemporary Clinical Topics module, are taught geographically separate from the MChiro programme.

Finally, non-crediting, non-fee paying, mitigating modules are offered to those students who have to repeat a whole year. The mitigating modules are developed to ensure that the students will retain the clinical skills already gained. The student must first pass these mitigating modules in order to continue with the MChiro programme.

4.2.1b Analysis

According to WIOC the BSc (Hons) was already taught at HE Level 7. In the new MChiro programme changes (i.e. below 10% changes within each module) were made to Year 3 and Year 4 modules to bring them up to HE levels 6 and 7 respectively.

The modules are taught in a logical order with basic sciences taught first followed by more clinically relevant modules. Throughout the years, module leaders present clinically relevant examples and refer back to basic biomedical science modules in order to enhance the relevance of the curriculum in each of the modules. The integration between modules from Year 1 to Year 4 is basically a natural progression from basic science modules to more clinically relevant modules (Appendices 1 and 3 of the SSR). In each year, clinically relevant modules are most often integrated in an attempt to teach the same overall theme at roughly the same time.

The content of the curriculum is consistent with enabling students to acquire the knowledge, skills and attitudes to meet the required competencies and aims and objectives of the programme. There is a satisfactory range of teaching and learning methods, including the latest educational software for anatomy and digital imaging. Students are encouraged to think critically through coursework and their dissertation. The curriculum ensures self-directed learning skills.

Despite attempts at adapting new learning tools/methods, the staff in general is not engaged in enough pedagogic courses or research. This should be strongly considered in the near future. (Para 5.3.3 refers)

The Foundation year modules prepare students to embark on the MChiro programme. The Foundation year modules are designed to ensure that students reach the science entrance standards for the MChiro degree. However, the students are physically isolated from the other chiropractic students and most often find the modules unrelated to the MChiro programme. WIOC has already set in place changes to exclude some of the less relevant modules and instead increase the hours/credits for the clinical science module. In the near future, other more clinically relevant modules may replace the current modules, but this has not been finalized yet.

4.2.1c Conclusion

WIOC substantially complies with Standard 2.1.

4.2.2 Theory of chiropractic and the scientific method

The chiropractic institution must teach the theory and principles of chiropractic practice, the scientific method, other forms of research inquiry and evidence-based practice, including analytical and critical thinking.

The curriculum must include elements for training students in scientific thinking and research methods.

4.2.2a Description

Chiropractic theory and principles start in Year 1 and continue through into Year 3. The scientific method particularly as it relates to research enquiry is introduced in Year 1 and developed in the research modules in Years 3 and 4. Both quantitative and qualitative research paradigms are covered, although there is a clear emphasis on the former. Evidence based principles underpin the teaching throughout the programme particularly in the teaching of technique. Analysis and critical thinking is evidenced in the substantial student portfolio that forms part of the independent learning strategy implemented during the 4th Year. Research topics are proposed in consultation with staff, and a proposal completed in Year 3. This is then submitted for ethical approval at Faculty and institution levels, and if required at an external review as appropriate, depending on the nature of the proposed research study. Each student is supervised by a member of staff and the dissertation completed and assessed prior to graduation from the programme.

4.2.2b Analysis

The portfolios use writing as an aid to reflective practice and demonstrate the students' ability to direct their own learning. The research project preparation has been carried out in a way that allows the topic, ethical approval and literature review to be carried out in plenty of time allowing ample time for completion of the project.

4.2.2c Conclusion

WIOC fully complies with Standard 2.2.

4.2.3 Basic Biomedical Sciences

The chiropractic institution must identify and include in the curriculum those contributions of the basic biomedical sciences that enable a knowledge and understanding of the basic sciences applicable to the practice of chiropractic.

4.2.3a Description

Basic Biomedical Sciences providing core knowledge of the structure and function of the healthy human body are taught in the first part of the programme and underpin the understanding of pathological conditions seen later in chiropractic and clinical sciences.

The module teachers and the clinicians often liaise so that the students can appreciate the clinical relevance of the information provided. The Basic Science topics parallel the medical curriculum but significant changes in the curriculum may be brought in as needed to keep abreast of medical science. The process of vertical and horizontal coherence and integration of modules is an ongoing process carried out via divisional meetings, Quality Assurance meetings, pan-university events, etc. where all parties involved can provide an input.

4.2.3b Analysis

There was evidence that the basic biomedical sciences in the curriculum are taught in a way to make them relevant to the chiropractic students; the information presented is updated and/ or upgraded as needed to parallel the development of medical science. Vertical and horizontal coherence and integration is facilitated by the cohesion of the teaching staff and its dedication to the aims and objectives of the programme although it is difficult to assess the changes that have taken place in the last few years. Evidence of a coherent approach to the changes was lacking.

First and second year students spend one full day at Bristol Medical School in the prosecution laboratory. Attendance is mandatory. This is one of the few areas where all students have contact with a medical input to their studies. (Para 5.3.2 refers)

The relevance of core basic biomedical sciences to chiropractic and the coherence and integration of the programme are not fully understood by many first and second year students in spite of all the efforts made by the faculty but become more and more apparent and beneficial to third and fourth year students as they start studying the clinical sciences and enter the clinic. (Para 5.2.2 and 5.3.1 refer)

4.2.3c Conclusion

WIOC substantially complies with Standard 2.3.

4.2.4 Behavioural and Social Sciences, Ethics and Jurisprudence

The chiropractic institution must identify and include in the curriculum those contributions of the behavioural sciences, social sciences, ethics, scope of practice and legal requirements that enable effective communication, clinical decision-making and ethical practice.

4.2.4a Description

The programme is based upon the biopsychosocial model of human behaviour. The component modules are delivered by staff from the University and the University of Cardiff who are experts in the fields of Social Behaviour and Mental Health. The Division is also cognisant of the GCC Code of Practice and Standards of Proficiency which provide standards of ethical behaviour to patients. The programme also stresses ethical behaviour towards colleagues. Ethics is a component of the modules on Chiropractic techniques, General Diagnosis and throughout the Junior Clinic and Chiropractic Clinic. Ethics approval for research studies are clearly documented and published.

4.2.4b Analysis

All aspects of behavioural and social sciences required by the standards are delivered by the Division. The Division pays careful attention to ethics and jurisprudence.

4.2.4c Conclusion

WIOC fully complies with Standard 2.4.

4.2.5 Clinical Sciences and skills

The chiropractic institution must identify and include in the curriculum those contributions of the clinical sciences that ensure students have acquired sufficient clinical knowledge and skills to apply to chiropractic practice in a primary contact setting.

4.2.5a Description

Chiropractic education is underpinned by statutory regulation which requires the student to gain specific competencies (knowledge, skills and attitudes). The curriculum in the clinical sciences emphasises neuro-musculoskeletal conditions, behavioural sciences, mental health, functional management, chiropractic technique, radiography, radiology, general diagnosis and clinical neuro-orthopaedics. The clinical year exposes the student to a diversity of cases, discussions clinical rounds and input from external lecturers. These are underpinned by problem based learning, clinical case discussions and practical classes.

4.2.5b Analysis

All areas with regard to the teaching of the clinical sciences are properly covered. The clinical skills, competencies and attitudes to which the students are exposed at the different levels of the programme are well constructed, horizontally and vertically integrated.

4.2.5c Conclusion

WIOC fully complies with Standard 2.5.

4.2.6 Clinical training

The chiropractic institution must identify and include a period of supervised clinical training to ensure the clinical knowledge and skills, communication skills and ethical appreciation accrued by the student can be applied in practice, and so enable the student to assume appropriate clinical responsibility upon graduation.

Every student must have early patient contact leading to participation in patient care.

4.2.6a Description

The goal is to produce graduates capable of managing patients autonomously with sound clinical judgement, of developing coping strategies if needed (critical thinking especially), of handling complex and unpredictable situations that could arise. As a start Year 3 students have a Junior Clinic module consisting of two five-hour observation shifts with final students.

During the clinical year (Year 4) the student can integrate the various aspects of clinical practice and patient care, from evaluation to rehabilitation and follow-up care-with special emphasis on radiographic skills and can develop professional behaviour and accountability. They are also encouraged to take advantage of clinical experience opportunities and to participate in hospital based rotations.

Prior to entering the clinic training aspect of the programme, the entire year 3 cohort (sub-divided into 5 teams of up to 15 students), undergo a one month induction period with supervised limited activities in the company of outgoing student clinicians (3 weeks out of 4 at the end of Year 3). The induction also prepares students for clinic life and its operational infrastructure. The new cohort of students start managing patients under the complete supervision of qualified and trained chiropractic tutors (registered chiropractors) for three months, once they have successfully completed all Year 3 academic modules. After this initial period chiropractic tutors attend the new patient appointment, the report of findings, the first three visits, and every third visit.

Each team has a team leader and a team coordinator who report to the Head of the Clinic Assessment of Year 4 includes a regular assessment of the student's Personal Portfolio (assessed formatively), and a Clinical Proficiency exit examination (OSCE).

During the clinic year the students see around 40/42 new patients and an average of 418 to 461 patient's visits.

4.2.6b Analysis

The clinical training of the students is of an excellent standard and the professional supervision of the final year students' activity by registered chiropractors gives the students the necessary clinical competencies for safe, ethical and competent practise. There was evidence that the clinic rules and procedures are enforced. Considerable emphasis is put on safety and competence.

The rehabilitation suite is run and managed by the students and offers state of the art spinal rehabilitation equipment. The presence of a mobile MRI scanning unit on the grounds offers students a unique opportunity to make use of such a facility.

All the students manage to achieve the new patient and patient visits requirements in spite of the economic climate and this is due to innovative and varied patient recruitment strategies.

The case-mix is adequate and due to some of the population they serve it encompasses a broad range of spinal and extremity conditions often with co-morbidity. The students are encouraged to share their experience with their team on more challenging and interesting cases.

A new facility is in place with a two-way mirror to promote exemplary care models. The patients have an opportunity for input into the clinic processes through the Patient's Public Involvement Programme. Patients are clearly informed at the outset that the facility is used for teaching and training purposes.

Further involvement in the clinic for Year 2 students is made available but the opportunity is often not taken up because of other learning commitments.

Currently, the clinic is unable to treat patients under the age of three owing to a lack of a suitably trained paediatric chiropractor on site. It would be of benefit to the student clinicians if the clinic could employ a trained paediatric chiropractor in a part-time position.

The enthusiastic involvement of the students in all aspects of clinical life engenders ownership and professionalism which is evident in their behaviour. The intercommunication between clinic tutors and permanent staff is facilitated by bi-annual formal meetings as well as informal interaction both directly and electronically.

The patients' records are kept in a separate room and provide evidence of ongoing supervision. (Para 5.2.5 refers)

4.2.6c Conclusion

WIOC fully complies with Standard 2.6.

4.2.7 Curriculum structure, composition and duration

The chiropractic institution must describe the content, duration and sequencing of courses that guide both staff and students on the learning outcomes expected at each stage of the programme, and the level of integration between the basic sciences and clinical sciences.

4.2.7a Description

The programme is a 1 year Foundation programme (9 modules) plus a 4 year integrated MChiro consisting of 25 modules with a total of 480 credits with 120 at M level (Level 7).

The Programme specification including programme structure was submitted in Appendix 1. A module descriptor for each of the 25 modules for all 4 years, foundation year and mitigating modules including learning outcomes, credit structure and workload type is included in Appendix 3 and Table 8. The complete Student Handbook 2009/10 was available to the Team.

4.2.7b Analysis

The presented material demonstrates a clear documentation of the content, duration, and sequencing of the modules. The student handbook together with access Blackboard shows that staff and students are presented with what is expected of them in each module and in the programme as a whole. The sequence of the modules shows a traditional, logic didactic approach to the learning outcomes. The Basic Science modules include clinical aspects where appropriate and clinical modules in later years have a degree of referral back to biomedical sciences when relevant.

4.2.7c Conclusion

WIOC fully complies with Standard 2.7.

4.2.8 Programme management

A curriculum committee (or equivalent (s)) must be given the resources, responsibility, authority and capacity to plan, implement and review the curriculum to achieve the aims and objectives of the chiropractic programme.

The curriculum committee must include representation from basic science and chiropractic teaching staff, students and other stakeholders.

4.2.8a Description

WIOC does not have a curriculum committee because this is the role of the Division within the Faculty of Health, Sport and Science. The Division is located within the Department of Professional Education and Service Delivery and is one of three Divisions within the Department. The Division of Chiropractic is led by the Head of Division responsible for the administration and management of the educational programme. The Head of Division is also Head of Clinic and Chairs the Clinic Team Leaders Committee. The day to day operation of the programme is led by the Award Leader who is line managed by the Head of Division. A similar arrangement is in place for the research Unit.

In preparing its programme and particularly the change to MChiro, the Division consulted with the profession, the GCC in 2007 and the ECCE. Mechanisms exist for major and minor changes to the curriculum and the Division has availed itself of the opportunity to make gradual changes.

4.2.8b Analysis

The programme is managed by the Faculty and the Department to which the Head of Division reports. The management of the Division's programme is the responsibility of Head of Division in a relatively flat management structure with specific duties and responsibilities delegated to divisional academic and administration staff. This arrangement depends on the enthusiasm and interpersonal skills of the Head of Division for its success. However, should there be staff turnover in the second tier of management or should individuals leave, great reliance is placed on the Head of Division. The Division should consider a medium term plan to skill up others to be able to take over management roles. A rotating headship that would expose others to management roles as a part of staff development was suggested during the meetings.

The Division points to the change to the MChiro as a major restructuring. In effect it was a redesignation of the award accompanied by a number of changes to the levels of delivery, credit points and assessment. It did not appear to have been the product of a major restructuring as Years 1 and 2 remained the same and Years 3 and 4 were modified to comply with QAA integrated masters requirements. The Division may have benefitted from a review that began by standing back and reassessing the whole curriculum and its delivery.

WIOC should consider medium to long-term strategies for the future of the programme. (Para 5.3.1 refers)

4.2.8c Conclusion

WIOC substantially complies with Standard 2.8.

4.2.9 Linkage with subsequent stages of education and training, chiropractic practice and the health care system

Operational linkage must be assured between the undergraduate programme and the subsequent stage of training or practice that the student will enter after graduation.

The curriculum must reflect the environment in which graduates will be expected to work and be responsive to feedback from graduates, the profession and the community.

4.2.9a Description

The programme fully recognises the need for full compliance with the Code of Practice (COP) and the Standard of Proficiency (SOP) put in place by the regulator. The need for patient safety is emphasised throughout the course and underpins all aspects of the clinical training. The curriculum covers all the required areas of the work environment and prepares the student well for professional life, although there appears to be little formal communication with the student after graduation. There are many opportunities for students to input into the programme including an active student Council. A new initiative to involve patients more in the outpatient clinic has recently been undertaken. In the clinic year students are responsible for and participate in all aspects of clinic working preparing them well for clinical practice.

4.2.9b Analysis

Whilst emphasis on the COP and SOP is essential, the programme tends to encourage a patient-focused yet cautious approach to practice within a clinical training facility. The clinic operates a practitioner to student clinician delegation model which requires close management of activity and patient care. The intention to form an Alumni association now that the graduate numbers have reached a critical mass will enhance feedback from past students. (Para 5.2.6 refers)

4.2.9c Conclusion

WIOC substantially complies with Standard 2.9.

4.3 ASSESSMENT OF STUDENTS

4.3.1 Assessment methods

The chiropractic institution must define and document the methods used for assessment, including the criteria for progression and appeals procedures. Assessment methods must be regularly evaluated, and new assessment methods developed as appropriate.

4.3.1a Description

WIOC provides students with a comprehensive summary of the assessments, their credit rating, weighting together with a summary of the number of assessments involved for each module. University regulations govern all assessment procedures and these are contained in the University Handbook. Assessment methods are evaluated by the divisional team and the module leaders and any alterations to the methodology and format are taken to the Faculty Quality Assurance Committee for approval.

Students who fail an examination for various reasons outside of their control may claim Mitigating Circumstances. Once documented their case is then reviewed by a University Committee independent from the Division of Chiropractic. If their case is accepted they have to complete a Mitigating Circumstances Module to make up for the exam they have failed or missed. Mitigating Circumstances Modules are not credited because they are not part of the curriculum.

4.3.1b Analysis

The processes and procedures for the assessment of students are embedded into the University system. The diet of assessments is demanding but it reflects the aims and objectives of the programme. Developments have not been coordinated as much as they might have been so that a coherent approach to the alteration of assessment is achieved.

The number of Mitigating Circumstances claims may increase at times but the confidentiality of the process prevents any explanation. The system gives the students the assurance that in case of unforeseen circumstances the University is committed to help them continue their studies, which has always been the case in the Chiropractic Division.

4.3.1c Conclusion

WIOC substantially complies with Standard 3.1. (Para 5.3.1 refers)

4.3.2 Relation between assessment and learning

The assessment principles, methods and practices must be appropriate to the educational aims and objectives, and promote appropriate learning practices.

4.3.2a Description

Students are made aware of all assessment methods which reflect the aims and objectives of each module. The assessment methods utilised are designed to reflect the level and nature of the learning outcomes. Students are made aware of the progression requirements in the Student Handbook for each year. Module assessment information is also placed on 'Blackboard' so that the students are in no doubt about the requirements.

4.3.2b Analysis

The assessments have been designed to encourage an integrated approach to learning. However, the changes that have been made over the years to module assessments appear to have been implemented in a slightly piecemeal fashion with the exception of the changes to Years 3 and 4 introduced when the programme changed from BSc to MChiro. There is a need to take an occasional overview of the complete assessment package in the light of pedagogic developments.

4.3.2c Conclusion

WIOC substantially complies with Standard 3.2.

4.4 STUDENTS

4.4.1 Admission policies and selection

The chiropractic institution must have a clearly defined admission policy that is consistently applied, and that includes a clear statement on the rationale and process of selection of students.

4.4.1a Description

Students are selected on the basis of their A Levels (or equivalent) for entry either directly to Year 1 or the Foundation Programme. Ten per cent of applicants are from Access to HE programmes. Some students enter having studied the first year of other degree programmes such as Human Biology. A significant proportion of students have come from other careers and have made significant decisions to alter their life path. Applicants from Non-EU countries are encouraged by the University because these students generate full-fee income.

Applicants are called for interview; the interview process is highly structured and staff complete a pro forma for each applicant. The staff who are involved in one to one interviews have been trained to recognise the criteria on which an offer of a place is made. The criteria stipulate that applicants must fulfil entry requirements and the level of effective communication and interpersonal skills.

Criminal Reference Bureau and health checks (or similar for overseas students) are subsequent to provisional acceptance onto the course.

4.4.1b Analysis

The policy is clear and consistently applied for both the Foundation and Masters programmes. The high standards required generate a flow of highly motivated students. (Para 5.2.3 refers)

4.4.1c Conclusion

WIOC fully complies with Standard 4.2.

4.4.2 Student intake

The size of student intake must be defined and related to the capacity of the chiropractic institution to provide adequate resources at all stages of the programme.

4.4.2a Description

The student intake direct into Year 1 is approximately 60 new students although entry from the Foundation and other programmes raises entry numbers to over 80.

4.4.2b Analysis

The Division has the physical and financial resources to provide the optimum educational experience for each cohort. Expansion is constrained by the capacity of the teaching facilities and the clinic. Anticipated expenditure constraints may challenge the ability of the Division to cater for the current cohort size. However, the Team was made aware that constraints may impact differentially on other Divisions within the Faculty.

4.4.2c Conclusion

WIOC fully complies with the standard 4.2.

4.4.3 Student support and counselling

The chiropractic institution must offer appropriate student support, including induction of new students, counselling in terms of student progress and other academic matters, and personal and social needs of students.
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4.4.3a Description

Student support is provided at both the Division and University level. Students were very complimentary about the degree of personal support provided by the WIOC staff. Students on the Foundation Programme did describe their position as “detached” when it came to direct support as chiropractic students. The Division was aware of the issue which was receiving attention. Support is also provided through the ‘Buddy system’. The Division also lectures to the Foundation Year once per week after Christmas and Foundation students participate in the Junior Clinic module as patients for Year 3 students.

4.4.3b Analysis

Student support is excellent once students are the direct responsibility of WIOC. However, Foundation students need more carefully targeted support and guidance particularly as they are physically separated on a nearby campus (Glyn Taff) and often alongside non-chiropractic students. Counselling is provided at all levels from the individual tutor to the University level. Student Services identifies students with disabilities and dyslexia and provide confidential information on mitigating circumstances at appropriate times. The Buddy System is an excellent measure designed to integrate new students into the Division. (Para 5.2.3 refers)

The standard is met for students in Years 1-4 but only partially met for students on the Foundation programme who are supported by the University wide support system available to all students.

4.4.3c Conclusion

WIOC substantially complies with the Standard 4.3.

4.4.4 Student representation

The chiropractic institution must support student representation and appropriate participation in the design, management and evaluation of the curriculum, and in other matters relevant to students.

4.4.4a Description

WIOC emphasised that the 'open door' policy in the Division enabled students to make representation to tutors whenever the need arose. Students are represented on the Faculty Board as stipulated in the Student Charter. Student representation on other University Committees is built into the University regulations. At the Faculty level students sit on the Faculty Board (Student Voice Representatives), The Learning and Teaching and Student Experience Committee and the Research Programmes Committee.

The Division decided to initiate a Student Council in 2006-2007. At present it operates in isolation within the Division although there are plans to link the Councils within the Department.

4.4.4b Analysis

Students have every opportunity to be involved in University, Faculty and Division decision making bodies.

4.4.4c Conclusion

WIOC fully complies with the Standard 4.4.

4.5 ACADEMIC and CLINICAL STAFF

4.5.1 Staff recruitment

The chiropractic institution must have a staff recruitment policy which outlines the type, responsibilities and balance of academic staff required to deliver the curriculum adequately, including the balance between chiropractic and non-chiropractic academic staff, and between full-time and part-time academic staff.

4.5.1a Description

Head of Division in consultation with the Head of Department and the Head of Administration in the Faculty identify a new post, replacement, or fractional conversion. An RD1 staff application form is completed which includes job description and essential/desirable characteristics. The process is managed by the Human Resources Department and any eligible applications are reviewed by the Head of Division. The interview process is chaired independently.

Currently there are ten full-time, four fractional contract members of teaching staff and 28 hourly paid lectures (clinical supervisors) and 10 other lecturers who service specific aspects of various modules. There is a trend to recruit more fractional contract members as it gives a better balance between academic and clinical skills/ knowledge. All staff members seem appropriately qualified.

4.5.1b Analysis

Given the fact that large parts of the module teaching is delivered by the chiropractic academic staff and given the increased work load with the new PG programme, the number of full-time staff is still relatively small for the workload. In addition, a plan to replace one of the experienced members of staff should be considered as and when the need arises.

Recently, the Head of Division had an RD1 application for a new fractional contract staff member rejected by the university.

It is acknowledged by the Team that the current economic situation allows very little opportunity to think strategically ahead. Nevertheless, a strategic plan which considers a range of alternative scenarios might be appropriate in order to compensate for the need for staff and other resources in the future. This has not been initiated by the Head of Division.

4.5.1c Conclusion

WIOC substantially complies with Standard 5.1.

4.5.2 Staff Promotion and Development

The chiropractic institution must have a staff policy that addresses processes for development and appraisal of academic staff, and ensures recognition of meritorious academic activities with appropriate emphasis on teaching and research.

4.5.2a Description

The University is committed to continued staff development and has developed a personnel strategy plan. The personnel strategy indicates that academic staff will be expected to engage in teaching and research and/or professional practice development. In addition, all academic staff are expected to take a share of the academic management responsibilities.

The GA appraisal process seeks to identify academic staff as having responsibility for setting and maintaining high standards in respect of:

- Knowledge of their academic subject area
- Contribution to teaching and learning
- Contribution to research and scholarship
- Contribution, as appropriate, to consultancy and professional practice
- Maintaining a high standard of professional conduct, (this includes taking an appropriate share of academic management and leadership responsibilities).

As a part of the personnel strategy, the University has commenced a research and scholarly programme, called the Glamorgan Academics (GA), which will include 20% of the working time.

In addition to the GA, a workload model is currently on its way to be fully implemented in September 2010. This work load model will ensure that a full academic staff will have 1576 hours of work based upon a 43 week year, which includes the 20% GA time and a teaching load of no more than 550 hours per year together with 550 hours for preparation, marking and administration.

As a consequence of this, all university staff members undertake mandatory appraisal on a bi-annual basis using the Staff Appraisal Form. This allows the Division and the staff member to recognise any potential areas of development. It also assists the Division to plan and demonstrate true commitment to the Appraisee's needs especially in terms of allowing the necessary time and resources.

4.5.2b Analysis

The GA and the new workload model both address the needs for staff promotion and staff development. However, although currently in place, the GA is a fairly new programme and the workload model is a very new concept that has only been piloted to date with full implementation set for September 2010. While the administrative and partially organisational aspects of the staff appraisal system seems to be in place, it is not clear to the Team exactly how the Head of Division intends to utilise the GA and what mid or long term plan is in place for the chiropractic staff. The Division, i.e. the whole chiropractic staff, needs to reflect on what GA entails and how it should be utilised for the benefit of teaching and research.

Furthermore, there does not seem to be much focus on pedagogic research or development within the Division, which is one of the key focus areas of GA. In addition, it is important that sufficient time is allowed to each member of staff to be able to satisfactorily fulfil their working duties and preferably to further develop themselves in areas of interest and potential areas of improvement.

The "open door" policy of the chiropractic staff is appreciated by both staff and especially students, and so it needs to be officially recognised and incorporated in the workload model.

4.5.2c Conclusion

WIOC partially complies with Standard 5.2. (Para 5.3.3 refers)

4.6 EDUCATIONAL RESOURCES

4.6.1 Physical facilities

<p>The chiropractic institution must have sufficient physical facilities for the staff and the student population to ensure that the curriculum can be delivered adequately, and library facilities available to staff and students that include access to computer-based reference systems, support staff and a reference collection adequate to meet teaching and research needs.</p>
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4.6.1a Description

The physical facilities include: the WIOC building including the Outpatient Clinic and a lecture theatre, Prospect House with its laboratories and clinical skills rooms, and Innovation House with its Research, Radiology rooms and staff offices. Some lectures are given at the nearby Treforest campus. The Learning Resource Centre includes the Library and Media Services at Treforest (main

campus) and there are also duplicate facilities at the Glyntaff and Atrium campuses. Staff and Students can access information via:

- FINDit, the University of Glamorgan Information Gateway,
- OPAC, the Library Catalogue,
- Media Services,
- the Disability and Dyslexia services,
- the Education Drop-in centre.

The adequacy of educational resources is reviewed continually with staff and students. Staff and students provide feedback on the facilities and resources via: the annual module evaluation exercise and the Student Council meetings with the Head of Division. The Division has total autonomy to respond to deficiencies identified.

In its plan to improve the curriculum the Division has purchased METI simulation software to enhance case based learning and is developing a student placement programme with local hospitals. The Division is setting up an exemplary care model using the observation of a registered chiropractor through a one-way mirror to a consulting room. It is also developing objective assessment tools to enhance the assessment and feedback objectivity in skills acquisition.

4.6.1b Analysis

The current facilities are adequate to care for the needs of the student population. No extension is foreseen as the University has no plan to increase chiropractic student recruitment in the coming years. The Division of Chiropractic is physically isolated on campus and the Foundation year students are also somewhat isolated from the rest of the chiropractic students since they are taught in separate buildings on another campus. The Division of Chiropractic has no control over that situation; however, students, with the exception of Foundation Year students, do not see it as an issue and the Faculty has various opportunities to meet with Faculty Members of the other Divisions. The educational resources of the University enable students and staff to have full access to the University Gateway system and Media services.

4.6.1c Conclusion

WIOC fully complies with the Standard 6.1.

4.6.2 Clinical training resources

<p>The chiropractic institution must ensure adequate clinical experience and the necessary resources, including sufficient patients with an appropriate case-mix, and sufficient clinical training facilities including sufficient equipment and treatment rooms.</p>
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4.6.2a Description

Clinical training is provided at the WIOC outpatient clinic. In addition, students in year 4 will all have the opportunity to enter an observation programme at two local hospitals in a near future. Students are encouraged to attend sporting events and other community service initiatives where they could be of help.

The WIOC clinic is a purpose built structure completed in 2000. It contains 23 treatment rooms with hylo tables, x-ray view boxes and a computer, a rehabilitation suite, an x-ray suite, a 90 seat lecture theatre and all the equipment and facilities expected in a chiropractic clinic including some electrical modalities. The front desk is equipped with a computerised appointment book system. The clinical skills technique rooms contains enough stationary tables to accommodate groups of 20/25 students

during technique classes and the rooms are made available for students to practise their skills when not utilised. The tables are in good condition and the proper sanitary measures are rigorously enforced. A mobile, privately owned, MRI scanner parks outside the clinic several days a week and is available for patient referrals in need of such exams.

The number of patient examinations, consultations and the case-mix, as mentioned previously, are all adequate. The Head of Clinic meets with the Year 4 to discuss clinic issues and solve operational problems as and when they arise.

4.6.2b Analysis

The standard of equipment in the teaching clinic is adequate for teaching purposes and there was evidence that the equipment is maintained properly. The size of the rooms is adequate and the equipment is in excellent condition. The rehabilitation suite has neck and lumbar strengthening machines. The clinic looks very professional in all aspects and offers the students a beautiful, safe, practical and motivating environment to do their clinical training.

The clinic procedures are reviewed annually and Year 4 students have to conduct an audit on care delivery as an assessed item in the Contemporary Clinical and Professional Practice module. (Para 5.2.5 refers)

4.6.2c Conclusion

WIOC fully complies with Standard 6.2.

4.6.3 Information Technology

The chiropractic institution must have sufficient IT facilities for staff and students to ensure the curriculum can be delivered adequately, and that IT is effectively used in the curriculum.

Students must be able to use IT for self-learning, accessing information and managing patients.

4.6.3a Description

The Learning and Corporate Support Services Department (LCSS) is responsible for the governance and formulation of all policies in relation to IT including all networks.

The chiropractic students have access to network computers within the chiropractic facilities where they can do their self-directed learning. Most of the chiropractic facilities also have wireless network, so that students can bring their own laptops and log on via the university access codes. In the student clinic area there are 18 computers in addition to the computers in each treatment room all with internet access and with all relevant software.

On the University Campus there are additional computer laboratories with network and students can also loan laptops for 24 hours. Also, there is an increasing coverage of wireless network on Campus.

The Division of Chiropractic is equipped with the same IT facilities as the rest of the Faculty, such as networks and software products such as Microsoft, statistical software and Blackboard system. In addition, special chiropractic software for use in anatomy, radiology and radiography are either used or will be incorporated in the near future. In the clinic, special software is used for managing the patients' records. The Radiology laboratory includes 6 computers specifically used for teaching the subject.

The curriculum ensures that IT is satisfactorily both to aid teaching and also support the student's self-directed learning.

4.6.3b Analysis

WIOC is adequately covered by IT including software and technical support. Almost all buildings have wireless network, except for the staff building, where it was deemed unnecessary as all members of staff use cable for security reasons. The cost for running IT is predominantly covered by the University as part of the faculty overhead from the Division. Special chiropractic software is purchased by the Division.

4.6.3c Conclusion

WIOC fully complies with Standard 6.3.

4.6.4 Educational expertise

The chiropractic institution must ensure the appropriate use of educational expertise in the design and development of the chiropractic curriculum and instructional (teaching and learning) and assessment methods.

4.6.4a Description

The Evaluation Team members were made aware of a range of developments that had been designed to enhance teaching and learning in a variety of modules. Some of these have been made in association with CELT (Centre for Excellence in Learning and Teaching) as a result of their ongoing 'working relationship'. Staff are expected to take part in the RAP (Reflection on Teaching Practice) scheme and to engage in the Glamorgan Academic (GA) programme.

4.6.4b Analysis

The Head of Division had embraced the GA programme and is currently piloting the workload model's implementation. At present pedagogic developments depend on individuals and are in need of coordination. The Division would benefit from a person being given medium term responsibility for the development of educational expertise across the Division to engage in both Faculty and University based pedagogic activities. The Division might consider as one way forward the value of programmes that develop medical education expertise when carrying out appraisals.

4.6.4c Conclusion

WIOC partially complies with Standard 6.4. (Para 5.3.3 refers)

4.7 RELATIONSHIP BETWEEN TEACHING AND RESEARCH.

The chiropractic institution must facilitate the relationship between teaching and research, and must describe the research facilities and areas of research priorities at the institution.

4.7.1a Description

The Chiropractic Research Unit (CRU) has its own dedicated research facilities consisting of two rooms. One room is a multi-user space and contains electronic equipment for undergraduate and postgraduate research studies. The other room is especially designed for temperature related

studies. In addition, it is possible to include other rooms for research purposes within the WIOC facility. Also WIOC's students can access expertise and facilities in the Faculty of Advanced Technology, Humanities and Social Sciences if they so wish.

The CRU has interactions with researchers within their own Faculty and with other Faculties on Campus. The CRU also has national and international collaboration, including privately supported research. The current research is financed through both external and internal funding. The annual report from CRU 2008-09 was available to the Team. Their current activities include biomechanical, thermal, clinical and educational research projects, but it was not entirely clear what specific research priorities CRU has.

Students are engaged in research both as part of their dissertation (Research Projects I and II) and indirectly through the class teaching.

Initiatives, such as the Glamorgan Academic (GA), have been put in place to promote research activity within the University. Eight full-time chiropractic divisional staff are research active and three part-time staff have started research at an introductory level. WIOC intends to use the staff appraisal procedures and the GA to have the staff become more involved in research. However, it was not clear how the wider staff were currently involved in research, except for those who were already research active.

4.7.1b Analysis

CRU has managed to engage in relevant research despite a general difficulty in obtaining funding for research. Some staff members were directly involved in research. Whereas some full-time members of staff were interacting with research through their function as research supervisors for the final year dissertation theses.

The CRU Activity Annual Report 2008-09 reported on the current status. At the time of the visit the team was not aware of a clear medium or long-term research strategy plan. It is therefore not clear what research priorities CRU has at the moment or in the future.

4.7.1c Conclusion

WIOC partially complies with Standard 7. (Para 5.3.5 refers)

4.8 PROGRAMME EVALUATION

4.8.1 Mechanisms for programme evaluation

The chiropractic institution must establish a mechanism for programme evaluation that monitors the curriculum, quality of teaching, student progress and student outcomes, and ensures that concerns are identified and addressed.

4.8.1a Description

The University Quality Assurance Committee (QAC) is overall responsible for the monitoring and evaluation of programmes at Glamorgan University and has a structured process at which this occurs. The Annual Monitoring Exercise is the "primary vehicle" and utilises student performance data, student module evaluation forms and the external examiner report. The Faculty of Quality Assurance Committee (FQAC) evaluates the reports and the minutes of FQAC are forwarded to the QAC. Recommendations (action plans) arising from FQAC and QAC must be reported in the following Annual Monitoring Report.

A periodic Internal Subject Review (ISR) is undertaken every 6 years and provides an opportunity to examine and enhance subject provision within a wider institutional and national context. A review is due shortly after the Evaluation Visit. The ISR evaluation is presented via a Self Evaluation Document and serves as the primary reference point for a review panel chaired externally to the Faculty.

4.8.1b Analysis

The University has a systematic approach to quality assurance within the institution.

The Annual Monitoring report 2008/9 indicates that it is a discipline that is demanding on staff, but also an area that is keen to develop its academic activities. A number of human resource issues will be kept under review. The Division will be under Internal Subject Review this year.

4.8.1c Conclusion

WIOC fully complies with Standard 8.1.

4.8.2 Staff and student feedback

Both academic staff and student feedback must be systematically sought, analysed and responded to so as to develop and improve the curriculum.

4.8.2a Description

WIOC receives direct academic feedback from staff and students via the Divisional meetings and Head of Clinic meetings. Indirect feedback occurs through daily staff interactions. There is a systematic method for staff to feedback but this is not anonymous.

The Division receives direct student feedback primarily through the Annual Module Feedback Questionnaires, the Student Council meetings and the Head of Clinic meetings. Indirect student feedback comes mainly from "open door" policy, personal tutor system, and Clinic Team Leader system.

External feedback from the Award External Examiner and the Subject External Examiner are obtained from annual reports along with the Award and Subject Examination Board meetings. Feedback is also obtained from the external examiners during the academic year on an ongoing basis regarding academic delivery, for example reviewing main and resit examination papers.

4.8.2b Analysis

The student feedback is systematically and anonymously collected and reviewed. The information is used within the Division as well as the Faculty and University. Staff feedback is obtained via the annual appraisal system and monitoring forms completed by module managers. Feedback was not responded to and reported back as rigorously as it was collected.

There is a need for more systematic feedback from graduate students, which should be considered a valuable source of information in order to continuously improve on the clinical skills and competencies within the MChiro programme.

4.8.2c Conclusion

WIOC partially complies with Standard 8.2.

4.8.3 Student cohort performance

Student cohort performance must be analysed in relation to the curriculum and the aims and objectives of the chiropractic programme.

4.8.3a Description

Grades for all assessments are uploaded by the faculty administrative team and checked by the Module Leader. Data on student performance is managed by the University student management system (Quercus) and provides statistical information to generate a report. Each Module Leader then reviews the results in relation to the learning outcomes and identifies areas of development.

Results are verified and discussed at the Subject Board meeting together with the Subject External Examiner. The Division then meets to discuss and subsequently decide the future delivery of the assessment strategy.

The results from these procedures are therefore used to identify areas of development within each module.

4.8.3b Analysis

The Division has a systematic approach in monitoring the student performances.

The Award/Subject External Examiner only comes once a year for one meeting and it may be relevant to include Award/Subject External Examiner more often. The university requires that the external examiner attend an annual training event and attend one subject/award board meeting. In addition to this there is ongoing dialogue and interaction with the external examiners as issues arise including externality and comment on examination papers, proposed changes via FQAC and other quality events such as Internal Subject Review, Quinquennial Review and re-validations. Student work is also sent to the external examiner for comment and third marking if required. The areas identified for development are piecemeal and not related to a medium term strategy for assessment.

4.8.3c Conclusion

WIOC substantially complies with Standard 8.3.

4.8.4 Involvement of stakeholders

Programme evaluation must involve the governance and administration of the chiropractic institution, the academic staff and the students, and the outcomes communicated to a range of stakeholders.

4.8.4a Description

Input into programme evaluation is mandatory and comes from the national regulating body the General Chiropractic Council (GCC) as well as the Faculty of Health Sport and Science of the University of Glamorgan. The Welsh Institute of Chiropractic (WIOC) is designated the 'Division of Chiropractic' within the University and conforms to the institutions governance policies. Both the academic staff and students have formal input into the programme at biannual meetings and the student Council respectively. Outcomes are communicated to the GCC annually and regularly to the British Chiropractic Association (BCA) as well as through the association's newsletter to chiropractors

in the field. A new appraisal system entitled 'Glamorgan Academic' has been instituted to assess and monitor teaching, research and professional practice in order to ensure the maintenance of high standards of scholastic activity.

4.8.4b Analysis

There is sufficient and relevant involvement of, and reporting to stakeholders by the Chiropractic Division. The implementation of the new initiative should allow the contribution of academics to be better assessed and rewarded in future.

4.8.4c Conclusion

WIOC fully complies with Standard 8.4.

4.9 GOVERNANCE AND ADMINISTRATION

4.9.1 Governance

Governance and committee structures and functions of the chiropractic institution must be defined, including their relationships within the university (as appropriate).

4.9.1a Description

The chiropractic division is placed within the Department of 'Professional Education and Service Delivery'. It is one of three departments in the 'Faculty of Health, Sport and Science' which is one of five academic faculties at the University of Glamorgan. The Division has autonomy over the curriculum in terms of the content and sequencing of the courses contained within it. The Department is represented up to Faculty level for most of its processes and procedures. The committee structure of the Division has the authority to design and manage the curriculum. A range of sub-committees report to the Academic Board which oversees and manages the academic activities of the University. Quality provision is maintained and enhanced by the Faculty Quality Audit Committee which is a sub committee of the Quality Audit Committee which reports directly to the Academic Board. The responsibility to manage the Division rests with the Head of Department, assisted by a departmental committee.

4.9.1b Analysis

The Division and its relevant committee(s) have the autonomy and authority to design and manage the chiropractic curriculum. The Department operates within the policies and procedures of the university structure with direct representation at Faculty level.

4.9.1c Conclusion

WIOC fully complies with Standard 9.1. (Para 5.2.1 refers)

4.9.2 Academic leadership

The responsibilities of the academic head of the undergraduate programme, and of the academic management structures, must be clearly stated.

4.9.2a Description

The academic leadership is provided at Faculty level by the Dean of Faculty and at Departmental level by the Head of Professional Education and Service Delivery and at Divisional level by the Head

of Division. Beyond this there is an upward extension of the chain of academic leadership to the Vice Chancellor and then to the Chancellor. The Head of the Chiropractic Division has leadership responsibility for the Head of Post Graduate Studies, Chiropractic Research Unit, Academic Team, Part Time Clinical Team, Hourly Paid Lecturing Staff, and Administration Team. The roles and responsibilities of all parties in the chain of academic leadership are clearly defined in the university system. The Divisional Head is appraised annually by the Head of Department of Professional Education and Service Delivery. The Head of Division and the Award Leader deal with the annual monitoring, validation and accreditation requirements and answer directly to the head of Quality in the Faculty.

4.9.2b Analysis

The responsibilities of the Head of Division and the academic management structures are clearly defined and articulated within the university. The chiropractic teaching and administrative staff functions as an enthusiastic, cohesive and committed team under the leadership of the Head of Department who is well respected at both Faculty and institutional levels.

4.9.2c Conclusion

WIOC fully complies with Standard 9.2. (Para 5.2.2 refers)

4.9.3 Educational budget and resource allocation

The chiropractic institution must have a clear line of responsibility and authority for the curriculum and its resourcing, including remuneration of teaching staff, in order to achieve the overall aims and objectives of the chiropractic programme.

4.9.3a Description

The Faculty operates a devolved budget on behalf of the University. The Division has completed its Business Plan for the next five years although such a plan might be subject to major changes in the coming years due to financial constraints placed on universities. Nevertheless, the faculty were confident that the current budgetary provision for the Division would continue. Forty-five per cent of the fee income is top sliced for the central services of the University as is 10% of the clinic income. Capital is bid for and the Division anticipates a small annual capital budget. Recent requests for extra funding for staffing have been approved at Division and faculty level but rejected at the University level. There was no evidence of a capital replacement programme for the medium term.

4.9.3b Analysis

The Division has no control over much of its income. However, the Budget Plan did not appear to relate to a considered medium term vision for the Division. Given the importance of Chiropractic to the University the Team encourages the Head of Division to actively propose developments in budget provision that would enable the educational programme to be enhanced rather than maintained.

4.9.3c Conclusion

WIOC substantially complies with Standard 9.3. (Para 5.3.1 refers)

4.9.4 Administrative and technical staff and management

The administrative and technical staff of the chiropractic institution must be appropriate to support the implementation of the institution's undergraduate programme and other activities, and to ensure good management and deployment of its resources.

The management must include a programme of quality assurance, and the management itself should submit itself to regular review.

4.9.4a Description

The University provides central technical support in IT. The Division of Chiropractic employs its own Technical Officer to provide support regarding laboratory work and practical classes. The clinic has a dedicated administrative team comprising of a Clinic Administrator, Clinic Administrative Assistant, Clinic Secretary, two full-time and one part-time receptionist. There is an induction programme on appointment, a new staff mentoring programme and regular appraisals. Administrative and technical support was effectively managed and highly praised by the students.

4.9.4b Analysis

The University provides an appropriate level of administrative, management and technical staff for the chiropractic programme to be delivered effectively. The clinic staff demonstrated an innovative and varied approach to patient recruitment that enabled patient numbers to be maintained even during the economic downturn.

4.9.4c Conclusion

WIOC substantially complies with Standard 9.4. (Para 5.2.2 refers)

4.9.5 Interaction with professional sector

The chiropractic institution must have a constructive interaction with the chiropractic and chiropractic-related (health-related) sectors of society and government.

4.9.5a Description

The WIOC has regular interaction with the national association (BCA) and the regulator (GCC). It has secured the contract to run the Test of Competence (ToC) on behalf of the GCC for a further three years. They continue to maintain formal and informal links with the other Chiropractic institutions within the UK and the College of Chiropractors (CC) which runs the period of provisional training for new graduates. WIOC also has close links with the ECU.

Their interaction with health related sectors of society has been limited to their involvement with other healthcare professions within the University, notably nursing, and the development of a working relationship with local consultant radiologists. However, the new initiative where students have the opportunity to shadow professionals at a local hospital is applauded but demonstrates only minimal involvement in the wider healthcare system.

4.9.5b Analysis

There remains a considerable lack of involvement in the wider healthcare system even given the new initiative to include students in the wider healthcare environment.

4.9.5c Conclusion

WIOC partially complies with Standard 9.5. (Para 5.3.3 refers)

4.10 CONTINUOUS RENEWAL AND IMPROVEMENT

The chiropractic institution must, as a dynamic institution, have procedures for regular reviewing and updating of its structure and functions to rectify deficiencies and meet changing needs.

4.10a Description

Copies of the Annual Monitoring Reports for 2006-7 to 2008-2009 were made available to the Team. These reports tabulate in great detail the major Quality Assurance issues and how each Division is planning to address some of the issues that emerge from the exercise.

The Division provided evidence that renewal and improvement had taken place citing the switch from the BSc to MChiro. In this case, the changes were driven by the changes in level to comply with the new award rather than a 'blue sky' rethink of the whole programme. Years 1 and 2 were subject to minor alterations.

4.10b Analysis

There was evidence that the Division was addressing issues raised in the annual monitoring exercises such as assessment strategies and staff timetables. Progress was inevitably slow because the issues had been raised over two years.

Despite the changes to the degree award, the overall impression was that changes have been cumulative rather than the result of an in-depth rethink of every component of the programme. Consequently, the Division needs to consider its medium to long-term vision and strategy for the whole programme rather than an 'as needs require' approach to renewal.

4.10c Conclusion

WIOC substantially complies with Standard 10 (Para 5.3.1 refers)

5. CONCLUSIONS

5.1 Summary

In conclusion, the Evaluation Team was impressed by the breadth and depth of the curriculum and clinical training provided by WIOC.

5.2 Strengths, weaknesses and concerns

For the purposes of this Report the Evaluation Team adopted the following definitions from the Standards:

- **Strengths** – Areas that meet or exceed the *Standards* and are worthy of specific recognition.
- **Weaknesses** – Areas requiring specific attention and action by an institution.
- **Concerns** – Areas of substantial weakness/concern as to jeopardise the accreditation of an institution that require specific attention and action by the institution *as a matter of urgency*.

5.2.1 Strengths

- 5.2.1.1 The full integration of the Division of Chiropractic into the new Faculty structure. (Para 4.1.2, 4.1.3 and 4.9.1 refer)
- 5.2.1.2 The dedication and quality of all staff including management and support staff. (Para 4.2.3, 4.9.2 and 4.9.4 refer)
- 5.2.1.3 The recruitment of increasingly high quality, highly motivated students to both the MChiro and the Foundation Programme. (Para 4.4.1 and 4.4.3 refer)
- 5.2.1.4 The support system throughout the Division best exemplified by the 'Buddy' System. (Para 4.4.3 refers)
- 5.2.1.5 The organisation, functioning and supervision of the clinic and the substantial clinic portfolio that provides a structure and encourages self-reflection and good practice. (Para 4.2.6 and 4.6.2 refer)
- 5.2.1.6 The ongoing efforts made to nurture relationships with a wide range of professional and chiropractic organisations. (Para 4.2.9 refers)

5.2.2 Weaknesses

- 5.2.2.1 The lack of a medium to long-term strategy for the Division. (Para 4.1.3, 4.2.3, 4.2.8, 4.3.1, 4.9.3, and 10 refer)

- 5.2.2.2 The lack of medical input into the medical science and diagnosis modules as well as the outpatient clinic. (Para 4.2.3 refers)
- 5.2.2.3 The insufficient consideration given to pedagogic and instructional related research. (Para 4.2.1, 4.5.2 and 4.6.4 refer)
- 5.2.2.4 The insufficient involvement of the Division in the wider health care system. (Para 4.9.5 refers).
- 5.2.2.5 The apparent lack of a coherent research strategy for the Division. (Para 4.7.1 refers)

5.2.3 Concerns

There were none.

5.3 Acknowledgements

The Team wishes to thank the staff and students of the Welsh Institute of Chiropractic for the hospitality, courtesy and time afforded to it during the on-site visit.

APPENDIX

Time	Meeting with	Personnel WIOC	Team members	Standards
Wed 10th				
08.45-09.15	Arrival & private meeting of the Team	Head of WIOC	All	
09.15-09.45	Preliminary meeting	Member of Directorate (if available), Associate Dean of Faculty, Head of Dept and Head of WIOC	All	
9.45-10.45	Tour of facilities to include teaching facilities, clinic and library	Key staff to accompany Team	All	6.1
10.45-11.00	BREAK			
11.00-11.45	Meeting with students (apart from clinic year students)	4 students from years 1-3 plus Foundation	Team will split 2 years per pair	4.2, 4.3, 4.4, 8.2, 6.1, 6.3
11.45-12.30	Meeting with clinic year students	6-8 students	RF, GH	4.2, 4.3, 4.4, 8.2, 6.1, 6.3, 2.6 and 6.2
12.30	Lunch with Students	As appropriate – some who have not attended meetings above	All	
13.30-15.00	Programme Management	Head of Division, Award Leader,	All	1-3, 4.3, 4.4, 5.1, 5.2, 6.4, 9.2, 9.4
15.00-15.15	BREAK			

15.15 -16.15	Meeting with WIOC Academic Team excluding Award Leader	4/5 Academic staff to cover areas of teaching (content, delivery and assessment) (<u>excluding clinic teaching</u>)	All	1, 2, 3 (with exception of 2.6), 5.2, 6.1, 6.3
16.15-17.15	Hourly paid staff and service teaching staff	2/3 hourly members and Non WIOC staff from Mental Health, Mathematics, Clinic Nutrition, Pharmacology & Physiology as available.	DB/GH PM/DB	2.3, 2.4, 2.7
17.15-17.30	Private meeting		All	
Thursday 11th				
09.00-11.00	Formal meeting with Clinic teaching faculty including PT Clinic staff. Patient files available for random selection.	Clinic Administrator + clinicians	PM and GH	2.6, 6.2
9.00-09.30	Admissions	Admission Tutor + Assistant, person responsible for interviewer training & an interviewer.	DB and RF	4.1, 4.2
09.30-10.00	Governance and Finance	Faculty Finance Officer & WIOC staff who liaise with finance. New Business Plan	DB and RF	9.1, 9.3, 9.5
10.00-10.45	Learning Resources including IT support	Head of Learning Resources, Information librarian and other key personnel	DB and RF	6.1 and 6.3

10.45-11.15	BREAK			
11.15-12.00	Research	Research Unit Leader & 2 other members	RF and DB	7
12.30-13.30	Lunch with staff to include some from administration	As appropriate	All	
13.30-14.15	Quality Assurance	Key personnel	RF/DB	8.1,8.2, 8.3, 8.4, 10
13.30-14.00	Foundation Year	Staff responsible for the updating of the programme.	PM/GH	1.2,2.1,2.8
14.15-16.15	Meet WIOC Senior Management Team	Head of Division, PG Studies, Research, Clinic	All	All aspects
16.15-17.30	Private meeting of Team	None	All	
Friday 12th				
09.00-16.30	Private meeting of Team –writing draft report	None	All	
10.30-11.00	Break			
12.30-13.30	Lunch with WIOC senior management		All	
17.00-17.30	17.00 (or before by arrangement)	Feedback to institution	Key personnel as appropriate	All
17.30	DEPART			