

EUROPEAN COUNCIL ON CHIROPRACTIC EDUCATION COMMISSION ON ACCREDITATION

EVALUATION TEAM REPORT

MChiro

ANGLOEUROPEAN COLLLEGE OF CHIROPRACTIC
UNIVERSITY COLLEGE
(AECC UC)

21-23rd JUNE 2021

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1. EXECUTIVE SUMMARY

- 1.1 In March 2016 the Anglo-European College of Chiropractic was designated a direct HEFCE-funded institution. Subsequently, in May 2016, it was awarded its own Taught Degree Awarding Powers, initially for 5 years but now permanently, and in August 2017 it was granted University College status, with the new name of AECC University College. For the remainder of this report AECC University College will be referred to as the 'University College'. All new entrants in 2017 were admitted to the University College awards. Existing students were given a choice to transfer to our award or remain in a course leading to an award of Bournemouth University (BU).
- 1.2 The University College (http://www.aecc.ac.uk/) is now a Higher Education Institution (HEI) operating in accordance with the framework for Higher Education in England. The University College has been assessed by the Office for Students (OfS) as meeting the initial conditions of Registration, without conditions, and is on the OfS Register https://www.officeforstudents.org.uk/advice-and-guidance/the-register/the-ofs-register/.
- 1.3 The University College now boasts three academic schools; the School of Chiropractic, the School of Radiology and the School of Psychology Sport and Physical Activity. The School of Chiropractic (SoC) is the largest of the three schools with around 700 registered undergraduate students and 50 registered postgraduate students. The SoC is organised into three frameworks for Foundation Studies, Pre-Registration Chiropractic and Postgraduate Studies.
- 1.4 The MChiro is an integrated Masters course, a format common to clinical courses in the UK. The majority of the SoC graduates leave with this qualification. The MChiro (Version 1.0) has 2 entry points within the SoC, the Gateway Entry (previously year 0 of the MChiro), which is a foundation entry point at level 3, and the MChiro level 4 (Year 1) entry point. Course length for students is 4 or 5 years to the MChiro qualification depending on entry point. For the purposes of this accreditation documentation the MChiro qualifications both version 1 and 2 are considered as having a starting point of Level 4. This is due to the Gateway, Level 3 entry point, being a pre-requisite for Level 4 progression only, not part of the course specification or graduate outcomes for qualification in a chiropractic first course.
- 1.5 The MChiro V1.0 was successfully approved by BU for the maximum period of 6 years in February 2015. Subsequent to this the course was approved by the University College in 2017 for new entrants and students wishing to transfer also until 2021. The MSc Chiropractic was approved by the University College in 2018 for a period of 6 years. The MChiro V2.0 was presented and approved by the University College in January 2021, for six years, subject to conditions and recommendations. For the 2020-21 academic year 24 students remain on a BU award for the MChiro, of whom

- 20 will be in their final year of study. The first intake for the MChiro V2.0 is the Year 1 cohort for the academic year 2021/22.
- 1.6 The University College's related Self Study Report (SSR) states, 'For the purpose of this document the MChiro versions 1.0 and 2.0 are considered as one entity for the report, unless specifically detailed to show a significant difference in evidencing a standard'.
- 1.7 The University College submitted its SSR for reaccreditation with ECCE on the 28th of January 2021. The QAAC reviewed the document and decided that an evaluation visit could and should proceed. This decision was made on 05/04/21. Due to the COVID-19 pandemic the initial dates for an on-site evaluation visit had to be postponed, but under the circumstances it was agreed to proceed via online conferencing.
- 1.8 This document is the Evaluation Report (henceforth referred to as the Report) compiled by the Evaluation Team based on the evidence provided beforehand and during the virtual on-site visits between the 21st and 23rd of June 2021. The Report was sent in draft format to University College for factual verification on 19/07/21 and its final version to QAAC on 27/07/21
- 1.9 The Chair invited the University College to send representatives to the QAAC meeting via Zoom on 23/09/21 where the Report will be discussed and a decision made on the reaccreditation of the University College's programme of study.
- 1.10 Members of the Evaluation Team extend their thanks to University College's executive, teaching and professional support staff and students for the courtesy and hospitality extended to them during the Evaluation Visit, and for participating in the Visit in a very open and transparent manner.
- 1.11 This Report addresses the compliance of the University College's chiropractic programme of study with each of the ECCE Standards in the provision of chiropractic education and training. The outcomes of the Report are as follows:

COMMENDATIONS

- The strong commitment to research and the continual investment in research outputs.
- The rapid adaption of the University College to COVID-19 related regulations including, the move to online teaching, the creation of student bubbles and the weekly briefing sheets for students.
- The provision of financial support and the use of the Hardship Fund to allow students to secure access to digital resources.

- The support of international students into the programme confers wide recognition of the University College.
- The support of elected student representatives as full members of boards and committees at all levels of the University College.
- The role of Friends of the Clinic enhances the patient voice, advocates for the profession and improves community connectedness.
- The leadership's proactive commitment to continuous staff development.
- The pioneering work in developing as a University College and pursuing RDAP status.

RECOMMENDATIONS

- An audit of staffing needs should be undertaken in the light of the rapid growth of the University College, and the restrictive regulations relating to the COVID-19 pandemic.
- Provide a comprehensive and timely response to student feedback.
- Improve communication channels between academic staff and the clinic team to ensure clear and timely communication to enable procedures to be conducted efficiently.
- Make careful use of peer-feedback to support the proper alignment between teaching activities, assessment and learning outcomes.
- Review the assessment methods to see if it is possible to reduce the weight of formal written summative assessments and augment continuous assessment approaches.
- Any reduction in clinic requirements due to the COVID-19 pandemic should be restored to normal levels as soon as permissible.
- Explore additional innovative ways for the students to gain collaborative competence through inter-professional learning opportunities.
- Provide an adequate and consistent level of case mix for students to ensure they all have a comparable experience.

AREAS FOR CONCERN

There were no concerns.

2. INTRODUCTION

- 2.1 The University College was initially accredited in 1992 and this is the seventh time they have sought accreditation from the ECCE.
- 2.2 The University College's last reaccreditation evaluation-related visit had been scheduled to take place in 2017. The University College instead made a request to have its reaccreditation moved from the programmed year for accreditation 2017 to 2016. The University College explained that it had replacing it's existing BSc Human Sciences/MSc Chiropractic programme (3+2) with an Integrated Masters programme, MChiro (Hons), together with a Year Zero (1+4). The 1+4 programme was validated by BU in 2014 and commenced in 2015. The University College's request, to have its reaccreditation moved from the programmed year for reaccreditation 2017 to 2016, was accepted by the CoA.
- 2.3 At the last evaluation visit of the University College in April 2016, the ECCE Evaluation Team identified seven **Commendations**, six **Recommendations**, and there were no **Concerns**.

Commendations:

- The ambition to become an independent Higher Education Institution is driving changes towards excellence.
- The new programme has allowed increased financial access for prospective students.
- Clinic research and the MRI facility have increased external exposure of the institution and potential income.
- The senior management group continues to provide excellent leadership during the transition to the new programmes and move towards institutional autonomy.
- The continuing development of the infrastructure and facilities for the benefit of the student population.
- Improvements in the early introduction of self- directed learning in the revised programme have been incorporated to overcome difficulties experienced previously by BSc and MSc students.
- Staff demonstrate a high standard of teaching and professional expertise.

Recommendations:

- Off-site additional training should be reviewed to determine if the actual impact is aligned to the proposed outcomes.
- Linkages to the wider health care system should be developed further.
- Greater attention should be applied to the assessment protocols in terms of consistency, so that the expected outcomes are being achieved.

- The increased use of digital technology would enhance the presentation of the chiropractic programme, and the college should introduce staff training in the pedagogic use of such technology.
- The development of a paperless clinic should be explored.
- Training of project supervisors on supervision and statistics, with specific guidelines for revised project outlines, would enhance the student experience in this component of the programme.

Concerns:

- There were no concerns.
- 2.3 QAAC received the initial request for reaccreditation on 10/11/20, this was followed up with a formal email on 10/11/20. QAAC agreed that an Evaluation Team carry out a virtual site visit of the AECC UC to verify the submitted SSR and report back.
- 2.4 Members of the Evaluation Team were nominated by the ECCE Executive and each member received the SSR and written comments from QAAC related to the document prior to the visit. The members of the Evaluation Team were as follows:

Team Chair – Philip Davies - daviesp@bournemouth.ac.uk (Senior Lecturer Bournemouth University)

Team Evaluation Secretary – Adrian Wenban – adrian.wenban@bcc.edu.eu (Principal of Barcelona College of Chiropractic)

Team Member – Rui Amaral Mendes - rui.amaralmendes@case.edu (An educationalist with a Doctoral Degree (PhD) in Oral and Maxillofacial Surgery and Pathology)

Team Student Member – Adrianne Lees-Smith - Adrianne.leessmith22@gmail.com (A sixth year Chiropractic student at the University of Johannesburg)

- 2.5 All members of the team were disclosed to the University College prior to the visit and no objection to any member was received. All members of the Team signed confidentiality and conflict of interest statements before the on-site visit. No conflicts of interest by any of the members were declared. The members of the team received the SSR three months prior to the virtual site visit and were allocated specific sections of the report as their areas of responsibilities.
- 2.6 The virtual on-site visit was scheduled for between 21st and 23rd of June 2021 (inclusive) and a draft timetable was sent to the University College on 23/05/21, and the final schedule was agreed with the University College on 23/05/21. A copy of the schedule is appended to this Report (Appendix 1).

- 2.7 The purpose of the virtual evaluation visit was to assess the compliance of the Institution/programme with the ECCE Standards in Chiropractic Education and Training (hereafter referred to as the ECCE Standards, or Standards). An examination was made of the SSR and its supporting documents, interviews, oral evidence and other documentary evidence consulted during the virtual evaluation visit.
- 2.8 Members of the Evaluation Team held a preliminary virtual meeting (20 June) prior to the virtual on-site visits which took place between 21 23 June. Meetings were held via Zoom with the Institution over the three days and time was allocated for the Team to hold private meetings as the virtual visit proceeded. The Report was compiled on an on-going basis during the visit and time was set aside on the final day (23rd June) to complete the draft report and feedback orally to the University College.
- 2.9 The draft Report was finalised by the Chair of the Evaluation Team and sent to Team members for comments. Based on these, the final draft Report was sent to the University College for factual verification on 19/07/21. The response was received from the University College on 26/07/21. The Chair and Secretary finalised the Report and this was submitted to the Chair of QAAC on 27/07/21. The Chair of the Evaluation Team presented the Report to QAAC members on 23/09/21 via Zoom.
- 2.10 The Report includes an Executive Summary, a description of the University College and the findings of the Team regarding compliance of the University College with the ECCE Standards. The Report ends with the Conclusions of the Team and any Commendations, Recommendations and/or Concerns the Team wishes to draw to the attention of the QAAC. The Evaluation Report was based on the ENQA Guidelines for external reviews of quality assurance agencies in the European Higher Education Area (www.enga.eu).
- 2.11 Members of the Team were very well supported, afforded every courtesy and had full access to documentation and to staff and students. Members of the Evaluation Team and the ECCE extend their thanks and appreciation to the University College.

3. MCHIRO VERSIONS 1.0 AND 2.0

- 3.1 The following section details the findings of the Evaluation Team with regard to the compliance of the University College with ECCE Standards in the provision of chiropractic education and training through the award of MChiro.
- 3.2 The colour coded system outlined below was used by the Evaluation Team to indicate the level of compliance with each standard:

The colour coded system outlined below was used by the Evaluation Team to indicate the level of compliance with each standard:

<u>Dark Green</u> = Fully compliant/no risk. (This is on track)
<u>Light Green</u> = Substantially compliant/low risk. (Broadly on track with some areas which could be addressed)
Yellow = Partially compliant/medium risk. (Some significant areas which could be detrimental if not addressed)
Red = does not comply/High risk. (Serious concerns threaten this area; high risk in the organisation's overall performance).

4. ECCE STANDARDS COMPLIANCE

4.1 AIMS AND OBJECTIVES

4.1.1 Statement of Aims and Objectives

The institution/programme must define the overall aims and objectives of the first qualification chiropractic 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

The MChiro courses have been designed to meet the UK General Chiropractic Council (GCC) Education Standards and the ECCE Accreditation Procedures and Standards (the ECCE Standards). In these courses there is a clear emphasis on safe and competent practice as a primary contact practitioner, and on life-long learning/continual professional development. As the University College provides a clear overview of the qualities students require to progress in the profession. Stakeholder input is required and well utilised at curriculum design level. These aims and objectives are developed with participation and feedback from key stakeholders. The aims and objectives of the programme are made known to a wide range of stakeholders through a variety of means.

4.1.1b Analysis

The statements of the aims and objectives provide for an outcome that would result in safe and competent primary contact practitioners, with relevant knowledge, skills, attitudes and a foundation for postgraduate education and lifelong learning.

4.1.1c Conclusion



The University College 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 University College's key stakeholders include, but are not limited to:

- General Chiropractic Council (GCC)
- European Council on Chiropractic Education (ECCE)
- British Chiropractic Association (BCA)

- Royal College of Chiropractors (RCC)
- International Chiropractic Education Collaboration
- Health and Care Professions Council
- Chartered Society of Physiotherapy
- British Psychological Society
- Society and College of Radiographers
- Cambridge Access Validating Agency
- European Chiropractic Professional Organisations
- Bournemouth, Christchurch and Poole Council
- Dorset Local Enterprise Partnership
- Dorset Clinical Commissioning Group
- Local NHS services
- External Examiners
- Patients and the public
- Students
- Staff
- Practicing clinicians in the UK and worldwide

Focus groups with feedback from staff and students help to identify areas of good practice and areas of improvement within existing curricula. These are addressed through annual monitoring and course modifications. There is good evidence that the views of students are regularly and routinely sought and considered.

4.1.2b Analysis

There is good evidence that a broad range of stakeholders are involved in the process of developing the aims and objectives. Their direct and indirect input into the aims and objectives enables the diverse range of stakeholders to make relevant suggestions for changes. Patient and student input into the process is considered by way of focus groups. The University College is encouraged to further explore and expand the diversity of patients participating in focus groups to represent a broad cross section of society. Overall, there is good evidence of strong links with the many stakeholders that have input into the formulation of the University College's aims and objectives.

4.1.2c Conclusion



The University College fully complies with Standard 1.2

4.1.3 Academic Autonomy

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

4.1.3a Description

The University College has in place clearly defined governance, management and administration related committees, with clear terms of reference, membership and lines of management, which together allow for the design, development and management of the curriculum with a high degree of autonomy. Additionally, there is evidence of clearly stated policies and procedures that relate to curricular design and development.

4.1.3b Analysis

The University College shows evidence of a high level of autonomy in developing its own regulatory framework, policies and procedures. This allows it to secure the standards of the awards it delivers, and to handle its own curriculum development and modification processes.

4.1.3c. Conclusion



The University College fully complies with Standard 1.3

4.1.4 Educational Outcome

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

4.1.4a Description

The University College aims to prepare students, upon graduation, to achieve a broad range of outcomes. These outcomes include a number of key competencies such as the development and application of knowledge and skills related to research evaluation, the abilities necessary for assessing the health of patients, effective communication skills and understanding the nature of professional accountability. These are grouped under three main themes which corresponds to the chiropractor as a "scholar and scientist", as a "practitioner" and as a "professional". The key competencies have been mapped against the ECCE's explicitly stated graduate competencies.

4.1.4b Analysis

The University College defines the competencies that students will require upon graduation and which will allow them to practise safely and competently. Furthermore, the team finds evidence of strong links between the aims, objectives, graduate competencies and curriculum content which ensure graduates are able to fulfil their required roles in the profession.

4.1.4c Conclusion



The University College fully complies with Standard 1.4

4.2 EDUCATIONAL PROGRAMME

4.2.1 Curriculum Model and Educational Methods

The institution/programme must define a curriculum model and educational (teaching and learning) methods consistent with the objectives of the curriculum. The curriculum model should be 'student centred' taking into account the health-care needs of their future patients.

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 as well as preparing them for interdisciplinary practice.

4.2.1a Description

The University College's first chiropractic courses have been designed to be student-centred and the curriculum is spiral in nature. A blended learning approach uses lectures, online content and directed learning focussed on evidence-based medicine. Students are encouraged to reflect on their learning, identify gaps and fill these themselves. A range of educational methods includes instructional guidance, portfolio-based learning, clinical placement, peer-assisted learning and the use of communities of practice within student social groups to support learning.

4.2.1b Analysis

There is evidence of the use of an appropriate educational model at the University College. A wide range of teaching and learning methods are deployed which are student-centred and aim to give students the skills of self-reliance and prepare them for lifelong learning.

There has had to be considerable adjustment to the teaching and learning methods due to the COVID-19 pandemic. Operationally the main change has been a shift to remote learning. A range of platforms have been used to facilitate this and a much greater reliance placed on the Moodle VLE and other technologies such as iSpring. Online teaching through Zoom was adopted quickly which meant a steep learning curve for staff and teaching rearranged into blocks. A weekly activity guide was created for students which listed what they needed to learn that week following a step-by-step approach including pre-reading and recordings. Some students felt that the introduction of block teaching made it hard to concentrate on material but they agreed that the University College has done the best it can.

Emergency regulations have been in place since 2020 including a no detriment policy which meant that no student would receive lower than their previous average grade. Teaching and learning protocols were introduced for the protection of students. A bubble system was set up where 20 students were isolated with each other for the whole year. Teaching bubbles of 20 were taught with video links broadcasting to five other bubbles in different rooms at

the same time. Full Personal Protective Equipment (PPE) was provided for all staff and students and a one-way system introduced.

The team commend the rapid adaption of the University College to COVID-19 Pandemic related regulations including the move to online teaching, the creation of student bubble groups and the use of weekly briefing sheets for students.

4.2.1c Conclusion



The University College fully complies with Standard 2.1

4.2.2 The Scientific Method

The institution/programme must teach 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

Students are trained in the scientific method using research enquiry, evidence-based practice together with analytical and critical thinking. They are taught data collection, deductive-inductive theories, interpreting statistics and literature searching. Students are introduced to research designs and methodologies and the ability to interpret and critically appraise published clinical research evidence. The MSc Chiropractic also includes an Advanced Research Methods unit, (unit 405) which covers qualitative and quantitative research methods, collecting, analysing, and interpreting data, developing a protocol and ethics application. In addition, there are lectures in basic sciences and social sciences and in technical science subjects including anatomy, physiology, chemistry, physics, biology and psychology which gives application to the scientific method in various fields.

4.2.2b Analysis

The University College considers the scientific method to be central to everything they do and their mission is to foster 'evidence-based chiropractic'. Unit leaders give time to reviewing the published research and are trained to be evidence based. This is supported by a range of specialist workshops driven by active researchers where research topics are shared with staff. They have included subjects such as 'performing systematic review' and 'being a peer reviewer'. Clinic students are required to defend their clinical approach with evidence. There are also training opportunities on specific chiropractic techniques and early career researchers are encouraged to belong to supporting organizations such as Vitae. All

this leads to high-quality research that informs and directs teaching and this is clearly successful. The team conclude that the focus on science is central to the delivered programmes and all curricula include elements for training students in scientific thinking and research methods.

4.2.2c Conclusion



The University College fully complies with Standard 2.2

4.2.3 Biomedical Sciences

The institution/programme 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

Biomedical sciences within the MChiro course are taught through an integrated approach within the first and second years of the course. This integrated approach is seen in the Human Function and Dysfunction and Human Structure units (MChiro V1.0) as well as the Human Structure and Function and Human Dysfunction units (MChiro V2.0).

To provide a more clinical and case-based understanding of biomedical sciences, units such as Case-Based Learning, and Health Concepts (MChiro V1.0) are delivered. Evidence Based Clinical Reasoning, Public Health and Health Promotion units (MChiro V2.0) assist with the understanding of biomedical sciences within the context of public health. To provide further guidance, relevant concepts are discussed in the Clinical Management and Diagnosis units to provide understanding of pathophysiology of clinical conditions together with the mechanisms through which therapeutic interventions are capable of being successful.

4.2.3b Analysis

Biomedical sciences are taught across the curriculum to bridge the Theory-Practice Gap and to ensure that all course content is clinically applicable. For example, in the Case-Based Learning unit, the lecturer maps information from the basic sciences and put it into a clinical scenario for the students. The curriculum is reviewed every 3-4 years by the Unit Leaders and student focus groups to monitor course content and ensure there is no curricular creep. The team find evidence that the basic medical sciences are addressed and taught in a relevant, integrated, and continuous manner to meet the overall objectives of the curriculum.

4.2.3c Conclusion



4.2.4 Behavioural and Social Sciences, Ethics and Jurisprudence

The institution/programme 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, ethical practice and ethical business standards.

4.2.4a Description

The biopsychosocial and patient-centred approach is used continually throughout the course as the primary approach to training and educating the students. Multiple aspects are conveyed throughout the course to ensure that the students learn how to become reflective practitioners.

Professional practice is addressed throughout the course to ensure that ethical and legal issues are clinically related. By the end of the course, students can synthesise and apply their knowledge as professional practitioners. Marketing, Small Business Management and Professional and Ethical Practice enable students to run a practice in an ethical manner to maintain compliance with the UK equality and ionising radiation legislation.

4.2.4b Analysis

Ethical and legal requirements are focused on UK standards. Though international students make up 40% of the cohort, there is not enough time to teach every nationality's legislation. Unit lecturers direct the international students and support them to find information regarding their local legislation and regulations. The team commend the support of international students into the programme which contributes to wide recognition of the University College. The curriculum is reviewed every 3-4 years by the Unit Leaders and student focus groups to monitor course content and ensure that the student expectations and the curriculum match. The team find there are clear contributions from the behavioural sciences, social sciences, ethics, scope of practice and legal requirements to enable effective communication, clinical decision-making, ethical practice, and business.

4.2.4c Conclusion



The University College fully complies with Standard 2.4

4.2.5 Clinical Sciences and Skills

The institution/programme 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

Although changes have been made to the programmes the core basic sciences delivery remains the same. Course content includes training in clinical knowledge and skills relevant to manual muscle testing, mobilisation, manipulation, massage, peripheral neurology, limited spinal orthopaedic testing, and palpation of the spine and extremities. At higher levels, a wide range of topics are covered including pain, disorders of the cervical and lumbar spine, upper limb and thorax, lower limbs, abdomen, the central and peripheral nervous system etc. Clinical Management puts emphasis on critical evaluation, selection and defence of appropriate management strategies in a variety of clinical situations and Nutrition for Health is delivered through the health concepts units.

4.2.5b Analysis

It is evident that the University College has a comprehensive curriculum which includes a full contribution of the clinical sciences to ensure that students have acquired sufficient clinical knowledge and skills. The team find that the curriculum enables students to gain appropriate skills to apply chiropractic practice in a primary contact setting.

4.2.5c Conclusion



The University College fully complies with Standard 2.5

4.2.6 Chiropractic

The institution/programme must foster the ability to participate in the scientific development of chiropractic.

4.2.6a Description

The University College seeks to foster scientific development of chiropractic by a range of methods. Students are introduced to the philosophical roots of professional practice as well as the duties and responsibilities of chiropractors. In addition, evidence-based practice informs the delivery of all clinical units, including a critical appraisal of research and its application to clinical scenarios. A scientific approach is required within the supervised clinical practice setting which explicitly requires evidence-based case reporting, research informed practice and clinical research methods.

4.2.6b Analysis

Scientific development takes place in the clinical environment. Under the University College's code of practice research pathways are identified on the academic side and provides a time allowance of 0.1FTE or 0.2FTE for research activity. Care Response (CR) is an output of this and was developed by an AECC Research fellow which was used in prior years for Patient Reported Outcome Measures (PROMs) administration and related data collection. CR was stopped prior to COVID, because of issues related to the GDPR, but is to be restarted soon. The team finds there is explicit evidence to support the conclusion that the University College fosters the ability to participate in the scientific development of chiropractic.

4.2.6c Conclusion



The University College fully complies with Standard 2.6

4.2.7 Clinical Training

The institution/programme 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.

4.2.7a Description

From the first semester students are required to attend patient encounters and observe the interactions between student clinicians, patients and tutors. These interactions and subsequent reflections are assessed alongside reflective practice. In years 1 and 2 student placements are linked to the Clinical Chiropractic and Clinical Management units, where students take a progressively more active role in patient/tutor interactions. In year 3 the placements are linked to the Clinical Internship I and Interprofessional and Collaborative

Practice units and students spend increasing amounts of time over the 12 weeks of Semester 2 becoming familiar with clinic processes and integrating subject knowledge, research and professionalism to co-manage patient cases. At the end of Year 3 all students sit the Clinic Entrance Qualifying Examination (CEQE). On successful completion of Year 3 students enter a 2-week handover where they work together with a final year student to facilitate transition to case management. The students then enter a 46-week period of clinical placement.

4.2.7b Analysis

Students observe patient encounters from the first semester of training and experience early patient contact. The course culminates in a substantial period of clinical practice commencing in the second semester of Year 3 of the course. The last year includes a 46-week period of clinical placement. The programme therefore includes a period of supervised clinical training, which allows the student to assume appropriate clinical responsibility upon graduating.

Students relate that clinical and case-mix requirements have been significantly reduced as a result of regulation pertaining to the COVID-19 pandemic. The team realises that competence and safety are not ensured simply by meeting a quantitative requirement in relation to patient encounters. However, the team recommends that any COVID-19 related reductions in clinical and case-mix requirements be restored as soon as is possible.

4.2.7c Conclusion



The University College fully complies with Standard 2.7

4.2.8 Curriculum Structure, Composition and Duration

The institution/programme =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.

4.2.8a Description

The curriculum, the intended learning outcomes, the assessment structure and credit structure for all programmes is set out in The Course and Unit Specifications which are published openly. These provide details of unit names, credit value, level, semester and duration. Credits for each unit adopt the European standard where each 20-credit unit is equivalent to 200 hours of student work. Integration between basic and clinical sciences is indicated in the programme structure. The specifications are available to staff and students

via the Staff Information Portal (SIP) and VLE and are available publicly on the University College's website.

4.2.8b Analysis

The curriculum is fully articulated and available publicly. Unit leaders ensure their teaching is evidence-based and they map their curriculum frameworks to ensure that they are comparable with other institutions.

The programme structure is published for all students on the VLE and public facing website. The University College publishes all its policy documents and makes them available to the public, which demonstrates high levels of openness and transparency. The team find that students are fully aware of the structure of their programme and their learning outcomes. Additionally, course details and learning outcomes are fully described and are well integrated.

4.2.8c Conclusion



The University College fully complies with Standard 2.8

4.2.9 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.

4.2.9a Description

Ultimate academic responsibility lies with Vice-Chancellor who works closely with the Senior Management Group including Heads of Schools. The Framework Leaders are responsible for the day-to-day management of the programmes. The Academic Board has oversight of all academic matters including quality and standards. Other committees include, the Academic Standards Quality Committee (ASQC), which monitors and reviews academic standards, the Education Committee, which monitors and reviews teaching methods and the taught student experience, The Student Experience Committee which feeds back on the whole student experience and the Course Steering Group (Chiropractic), which is responsible for the chiropractic courses.

4.2.9b Analysis

There is a strong interlinking structure of course committees with clear lines of responsibility and authority for planning and implementing the curriculum and monitoring and reviewing its aims and objectives. These were found to work effectively. However, some students felt that the management of the programme could be improved with better communication to students and better spacing of examinations. However, students say that despite problems resulting from the COVID-19 pandemic, such as the difficulty in practicing manipulation techniques, the quality has not been compromised. Students report that the consistency and the quality of the course is quite high so they feel safe and competent when they graduate. Some students report having enjoyed learning online this year.

The team find that there is clear evidence of effective programme management.

4.2.9c Conclusion



The University College fully complies with Standard 2.9

4.2.10 Linkage with Subsequent Stages of Education and Training, Chiropractic Practice and the Health Care System

Operational linkage must be assured between the first qualification 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.

4.2.10a Description

Final year students take part in outreach events including an annual employment event, which allows practice owners and employers to meet with placement students. Students are also introduced to representatives from the Registering Body (General Chiropractic Council), providers of post-graduate education such as the Royal College of Chiropractors and the professional associations such as the British Chiropractic Association (BCA). Students have professional feedback from patients by way of a volunteer group called 'Friends of the Clinic'.

The University College organises and hosts a variety of continuing professional development (CPD) courses and, through its post-graduate frameworks, the institution provides opportunities for graduates to enrol in a course leading to a postgraduate qualification in a variety of healthcare areas.

4.2.10b Analysis

Clear and complementary links between the undergraduate education of final year students and early postgraduate training were evident to the team who recognise that the final year supports a smooth transition into clinical practice and postgraduate training.

Student placement/observation opportunities with other health professions and involvement of 'The Friends of the Clinic', though presently complicated by the COVID-19 pandemic, should be further developed. The team recommend that additional innovative ways for the students to gain collaborative competence through inter-professional learning opportunities should be explored.

The curriculum reflects many aspects of the environment in which graduates are expected to work. Furthermore, the curriculum developers and presenters appear responsive to feedback from patients, the profession and the regulators. The team find that the curriculum reflects the environment in which graduates will work and is responsive to feedback from graduates, the profession and the community.

4.2.10c Conclusion



The University College fully complies with Standard 2.10

4.3 ASSESSMENT OF STUDENTS

4.3.1 Assessment Methods

The chiropractic institution/programme 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

Assessment methods, progression arrangements, and criteria for awards are set out in the Course and Unit Specifications and the Assessment Regulations. These are available for staff and students via the Staff Information Portal (SIP) and VLE respectively and are publicly available on the website. The Academic Appeals policy is also publicly available on the University College website. External Examiners are appointed for all programmes and they undergo an induction process coordinated by the Deputy Registrar.

Assessment methods are regularly reviewed as part of the course monitoring process, which takes place annually. New assessment methods are initiated by the Course Leader using a

standardised course modification process. Practical assessment is reviewed to update it in line with contemporary research. Recently assessment methods have been reviewed in the light of the COVID-19 pandemic and examinations have been modified to turn them into take-home assignments.

4.3.1b Analysis

The assessment checking process is thorough and robust. The unit lead writes the assessment which goes to a second member of staff for quality assurance. This is then sent to the External Examiner for checking after which is it logged with the Registry Office, which ratifies its distribution. The assessment is marked according to a rubric by the unit team, a sample is checked and if there is a problem then all scripts are second marked. Third markers are used if necessary or if the gap between markers is too wide. A preparatory board is held to check the marks and an assessment board, chaired by the Head of School, is held for all programmes. All markers are present with the External Examiners and go through each student's marks separately. All of this was transparent and clear. Some students feel there is too much stress on formal written assessments and it is recommended that the University College review its assessment methods to see if it is possible to reduce the weight of formal written summative assessments and augment continuous assessment approaches.

The team concluded that that assessment methods are defined, documented and reviewed appropriately and have been carefully modified to take account of regulations related to the COVID-19 pandemic. Students report finding the assessment methods open, transparent and well documented.

4.3.1c Conclusion



The University College fully complies with Standard 3.1

4.3.2 Relation Between Assessment and Learning

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

4.3.2a Description

Assessment methods are chosen to reflect the type of learning. Theoretical knowledge is assessed through coursework and written exams while clinical skills are assessed through direct observation and the Objective Structured Clinical Examinations (OSCE). Both formative and summative assessment is used at all levels to provide feedback for learning.

Assessment practices are governed by a range of policy documents including the Setting and Scrutiny of Examinations Policy, Setting and Scrutiny of Clinical Assessments Policy, Word Limits Policy, Marking and Moderating Policy and the Assessment Feedback policy.

4.3.2b Analysis

The University College understands that good feedback is essential to the student learning process. Policy requires feedback to be provided to students 4 weeks after submission, though this is varied for exceptional circumstances. A feedback date for all assessments is provided to students, though not all students claimed to be aware of this. The moderator checks the quality and quantity of feedback. Students generally perceive that feedback is received in a timely manner, though not all thought so. In addition, peer-feedback is used to provide additional guidance to students. The team recommend that careful use is made of peer-feedback to ensure it properly aligns with teaching activities and learning outcomes.

Students may appeal their results both formally and informally. In the first instance students are encouraged to informally raise concerns at unit level with the unit leader and course leader. Formal appeals are available to students who contest their marks and this can be done based on errors of procedure or bias.

To mitigate the effects of the COVID-19 pandemic, exams were changed to take-home assignments. All assignments were rewritten to make them 'ungoogleable' so that the assessment was concerned not with knowledge but the ability of students to reason for themselves. Rote learning was minimised as much as possible. Timed exams were retained and managed by releasing the task at a given time and the student was required to upload the answer within three hours. A 'no detriment' policy was introduced for the 2020/21 academic year to off-set the effects of lockdown with no student awarded a mark lower than their average and scaling was applied based on the historical average and standard deviation of the unit results. The scaling process will continue through 2021.

The team found that there is a clear link between assessment and learning and that assessment methods were appropriate relative to the learning outcomes.

4.3.2c Conclusion



The University College fully complies with Standard 3.2

4.4 STUDENTS

4.4.1 Admission Policies and Selection

The institution/programme 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

Admission to all courses is governed by the Recruitment, Selection and Admission Regulations and Policy. Application requirements are rigidly enforced. All first-year chiropractic courses receive applications via the UK University and Colleges Admission System (UCAS). A new approach has been implemented where students are invited to a recruitment day, which is also implemented online. Separate entry requirements apply to overseas students using the accepted UK criteria to ensure equivalence. The University College is proactively working to widen access to all courses to ensure equal opportunities to those who are from under-represented schools and a range of demographic backgrounds.

During 2020-21, applications increased by 58%. Entry in MChiro, allows the college to recruit well-qualified students to year 1 and those who have underperformed to the Gateway to Chiropractic year.

4.4.1b Analysis

The University College has comprehensive admission policy documentation which has its own Recognition of Prior Learning (RPL) and credit transfer policies. Transfers from other programmes are guided by the University College's regulations. Admissions go through a two-step process initially which involves an interview with the admission manager and final acceptance is based on final results and feedback. The team finds there is a well-defined admission policy that is consistently applied which includes a clear rationale and process of selection of students.

4.4.1c Conclusion



The University College fully complies with Standard 4.1

4.4.2 Student Intake

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

4.4.2a Description

There are just over 700 Chiropractic students in the course, with 180 of those being new enrolments. Applications have increased by 58%, with 180 new enrolments to the course during 2020-21. Entry standards are maintained at a high level for applicants though the University College takes the view that a blended approach to education, theoretically means there is no limit to the number of students that the course can enrol. Students were offered the opportunity to transfer to the University College's own award from a BU award after gaining Teaching Degree Awarding Powers (TDAP).

Recognition of Prior Learning (RPL) is not readily granted to units studied before entering the University College due to difficulties with units being integrated among multiple modules. Exemption is only given for complete modules.

4.4.2b Analysis

With the increase in student numbers, appropriate steps have been implemented to maximise staff efficiency using a workload model and systems for supervision for student clinical placement. Currently the University College is seeking to recruit new staff, both academic and clinical, to meet the needs of students. The students feel the course is significantly under-staffed at present. The team recommend an audit of staffing needs should be undertaken in the light of the rapid growth of the student numbers, and the restrictive regulations relating to the COVID-19 pandemic. The team find that the size of the student intake and present restrictions are putting pressure on the University College to provide adequate resources at some stages of the training.

4.4.2c Conclusion

The University College partially complies with Standard 4.2

4.4.3 Student Support and Counselling

The institution/programme 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.

4.4.3a Description

All new students are provided with an induction programme. A student handbook is provided via the VLE (Moodle). The Students' Union arranges activities during the first week to allow the new students to interact. However, induction is not confined to one week. Events are organised throughout the year to allow the student to transition into higher

education. During induction students can familiarise themselves with the different learning services to prepare them for their first formal teaching week. Students are allocated a personal tutor who is their person of first contact, and students are encouraged to meet regularly with them throughout the year.

The Student Monitoring and Wellness Group discusses students on an individual basis at least twice a semester where the staff identify any students struggling academically or have issues with their wellbeing. The School of Chiropractic's Student Academic Support Framework assists any student where concerns have been raised about their engagement . Academic progress is facilitated through ongoing formative feedback, where any students failing or struggling are encouraged to meet with their personal tutors to identify areas requiring further work. There are multiple Student Services which are offered to support the student in various ways including study skills or through a language tutor. The University College has been voted 6th in the country for student support.

4.4.3b Analysis

Students stated that they rated student support highly however, some noted that their personal tutors have busy schedules which makes it difficult to provide the attention they require. Students value having personal tutors and meeting with them regularly, however, the students acknowledge it is their responsibility to identify if they are struggling.

Due to the COVID-19 pandemic, counselling has been provided. The Wellbeing Group introduced 2 new advisors and an extra day of wellbeing for the students which resulted in appointments doubling. Counselling has been provided via social media, where students can be helped immediately without waiting for an appointment. The team finds student support is well provided and includes an induction and counselling for student progress, academic matters, and the personal and social needs of the students.

4.4.3c Conclusion



The University College fully complies with Standard 4.3

4.4.4 Student Representation

The institution/programme 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

Student representation allows participation at all levels of the University College and students are full members involved in academic decision making. There are elected student members on all major decision-making bodies which allows them the right to vote. Student representatives provide feedback to the Student Union to bring issues to their attention. Student representative's meetings are held each semester and provide a formal means by which to discuss matters related to enhance the quality of the course experience and feedback on relating matters allowing students to receive responses to their concerns.

4.4.4b Analysis

Students feel their voices are being brought forward with the new Partnership and Planning meetings which are held every month with the Vice-Chancellor. This has improved staff-student communication at all levels of study. Elections for positions on committees are held every year in March and winners hold the post for 12-months. Student representatives demonstrate enthusiasm for their particular role and do a good job in representing the student body as whole. The team commend the support given to elected student representatives as full members of boards and committees at all levels of the University College and find student representation is clearly evident at the University College and have appropriate participation in the design, management, and evaluation of the curriculum.

4.4.4c Conclusion



The University College fully complies with Standard 4.4

4.5 ACADEMIC AND CLINICAL FACULTY (STAFF)

4.5.1 Faculty (Staff) Recruitment

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

4.5.1a Description

Staff are recruited in accordance with the University College's Recruitment Policy, Dignity, Diversity and Equality (DDE) policies and procedures and Disability Policy. All applicants are formally interviewed and graded against a published job description and person specification. Working practices are supported by HR policies and procedures, available electronically on the Staff Information Portal (SIP).

The University College uses the roles and responsibilities of lecturers, senior lecturers and principal lecturers across the School of Chiropractic (SoC). All staff are inducted into their role in line with the Induction Policy. There is a timetable of induction activity which takes place over a period of six months. Permanent employees to the SoC total 27.10 Full Time Equivalent (FTE) staff. In addition to this, the SoC holds Associate Lecturer contracts with casual staff. The SoC currently engages these staff for the delivery of academic skills, public health, health psychology, clinical skills and clinical supervision.

4.5.1b Analysis

There are clear staff recruitment related policies in place and new staff undergo a well-managed induction process. The number of staff with training and expertise in higher education and research is sufficient. New and existing staff are encouraged to attend further training in teaching and learning in higher education and attain recognised postgraduate qualifications in this area.

Currently there are pressures on all staff as the programme's management, coordination and delivery has had to adapt to rapid growth of the University College in other areas (School of Radiology and the School of Rehabilitation, Sport and Psychology) and to the shifting regulatory goal posts related to the COVID-19 pandemic. It is hoped that there will be fewer cyclical changes to the programme format going forward than there has been in the recent past.

Students expressed concern that the University College had grown, with the addition of two new schools, but that there had not been a commensurate increase in staff to support existing students and the increased student population. The overall student population has increased from 628 in 2019 to 686 in 2020 – an increase of 8.5% whereas the overall staffing has decreased by 16.8% to 191 from 230 in 2019 primarily in non-academic and clinical areas. The University College has conceded that staffing was currently a challenge given the development of new chiropractic programmes in the UK and the COVID-19 pandemic. The Risk Registry recognises that one of its main area that could adversely affect the University College is 'Failure to recruit and maintain well qualified staff and plan for succession'.

The team judge that while not currently presenting serious risk, staffing levels present moderate risks which could lead to serious problems over time if not addressed as a priority.

4.5.1c Conclusion

The University College partially complies with Standard 5.1

4.5.2 Faculty Promotion and Development

The institution must have a faculty 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

All staff are appraised at least once a year. In preparation for appraisal, academic staff are asked to complete a self-evaluation that sets the stage for appraisal being a forum in which to reflect on past performance, review and set targets for the coming year, and identify training needs. The University College encourages all academic staff to undertake further education, training and engagement in external activities to maintain and enhance their academic and professional practice.

There is a budget to support staff development activities, divided into support for activities not involving an award-bearing course, and for award-bearing activities. The School of Chiropractic (SoC) holds a dedicated budget for staff development (both award and non-award bearing) and considerations are made as to personal and departmental requirements.

4.5.2b Analysis

Staff are expected to work towards, or hold, the award of Fellowship of the HEA or a relevant teaching qualification (e.g. PgCert HE). Staff are supported in their development in line with identified needs. Clinical staff must have full registration with the GCC and are therefore required to complete CPD in accordance with GCC requirements, for continued professional registration.

The University College has a Peer Observation of Teaching scheme, the primary purpose of which is to facilitate sharing of good practice between colleagues. Additionally, staff are encouraged to engage with professional bodies through membership of professional advisory panels and committees and to act as External Examiners or participate in course validations at other HEIs.

The University College has policies that clearly guides the process for development and appraisal of academic staff and the team commend the leadership's proactive commitment to continuous staff development. There is also good evidence that teaching and research related academic activities are well recognised.

4.5.2c Conclusion



The University College fully complies with Standard 5.2

4.6 EDUCATIONAL RESOURCES

4.6.1 Physical Facilities

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

4.6.1a Description

The University College has excellent physical facilities which includes a 1.75-hectare site with five buildings located in pleasant grounds. The main building houses lecture theatres, library, practical and clinical skills laboratories, tutorial and seminar rooms, research and teaching laboratories, staff and students' union offices, a human prosection facility, canteen and bar. In addition, Cavendish House houses the Centre for Ultrasound Studies, as well as further teaching accommodation, a student IT suite, Student Services and the School of Radiography practical rooms. The teaching clinic occupies its own site with vehicular access for patients. There is also space for further expansion of facilities.

The library is open 87 hours per week during term time and provides access to over 10,000 titles and over 7,000 online journals. Learning and library services are extensive and have been comprehensively refurbished with old stock replaced by digitized journals allowing increased numbers of study spaces and additional bookable group study rooms. Online resources include journal databases, e-books, anatomical software platforms, online study skills modules and training guides all available remotely 24/7. The Moodle Virtual Learning Environment (VLE) hosts electronic learning materials for all courses and offers a wide range of e-learning based functionalities including ePortfolio development. Wi-Fi is available throughout the library and some laptops are available for loan.

4.6.1b Analysis

The team find that the resources at the University College are comprehensive and extensive. In addition, the library has laptops available for student loan which have been subject to greater demand during the COVID-19 pandemic. There is also a hardship fund for students to apply for hardware support and this year 48 applications (last year 55 applications) have been made by students who needed access to learning technology.

The team commend the provision of financial support and the use of the Hardship Fund to allow students to secure access to digital resources. The team conclude that the curriculum is delivered adequately and that extensive library facilities are available to faculty, staff and students suitable to teaching and research needs.

4.6.1c Conclusion



4.6.2 Clinical Training Resources

The institution/programme 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.

4.6.2a Description

The University College Clinic (on campus) offers modern and up-to date facilities for the diagnosis, assessment, treatment and rehabilitation of musculoskeletal conditions. It occupies its own site with vehicular access for patients. There is also space for further expansion of facilities. The Clinic consists of 32 Multi use treatment rooms, an exercise centre, a radiography suit, the Bournemouth Open Upright MRI, a student study area and staff offices.

On site clinics that students can be involved with, some by way of in-house referral, include the inter-professional Breastfeeding clinic, which is a neonatal feeding clinic, an exercise centre, human performance laboratory, MRI, X-Ray and Ultrasound clinics. The University College also has a satellite clinic on Bournemouth University's Talbot campus, with 3 treatment rooms and reception area, where final year students can provide care under the supervision of a clinical educator. The University College has also developed a number of off-campus placement options that are normally made available to students.

4.6.2b Analysis

Students are made aware of their clinical requirements although delays in notification regarding clinical requirements for final year students were noted by students. Additionally, students report that the clinic and case-mix requirements were significantly reduced due to complications arising from the COVID-19 pandemic this year. Initially they were to have 40 new patients and 300 treatments but, for the current year, this was reduced to 20 new patients and 150 treatments. Portfolio requirements have been modified for next year. The clinic schedule is based on bubbles allowed into the clinic for 10 hours spread across 3 days. The team recommend that any reduction in clinic requirements due to the COVID-19 pandemic should be restored to normal levels as soon as permissible.

Due to local and national restrictions related to the Covid-19 pandemic the University College has been unable to utilise all the off-campus placements that would normally be available to students. Students have instead been able to engage in telehealth consultations of patients as part of their clinical duties in response to reducing patient time in clinical

settings and have also observed chiropractors in First Contact Practitioner roles undertaking telehealth with NHS patients.

The team acknowledges the important role of telehealth, especially in the context of the COVID-19 pandemic, however, the usefulness of telehealth consultations in place of the usual off-campus placements as a means by which to ensure students meet the related learning outcomes should be evaluated.

4.6.2c Conclusion



The University College substantially complies with Standard 6.2

4.6.3 Information Technology

The institution/programme must have sufficient IT facilities for faculty, 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

All chiropractic students must use IT for learning and accessing information. The students have access to different learning materials via a Virtual Learning Environment (VLE), which is the Moodle platform. For students to access taught content or self-directed learning, tutors provide content via recorded lectures, PowerPoint, online quizzes, online diagnostic video's, worksheets for live tutorials and interactive simulated patients. During clinical years, formative and summative practical assessments are organised to assess student performance, which is done via tablets and feedback is given in a pdf format SSR 232, 233].

An evidence-based approach to patient management is embedded via IT using journals and electronic databases from the Library and Learning Services. This helps students to become effective IT users and access information. Case-based discussions are presented throughout all years.

4.6.3b Analysis

Staff had to adapt quickly to teaching online due to the COVID-19 pandemic and were provided with an intensive induction to gain the necessary skills to utilise the new online teaching format. Students have enjoyed the online nature of lecturing and feel that it is better as lectures are pre-recorded and extra videos and learning materials are provided.

The VLE platform, Moodle, is according to students, user friendly. Students feel new technologies have been embraced and utilised to enhance their learning experience. The team find that the University College has the necessary IT resources to ensure that the curriculum can be well delivered.

4.6.3c Conclusion



The University College fully complies with Standard 6.3

4.6.4 Educational Expertise

The 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

Curriculum design occurs under the responsibility of the Head of School who supervises qualified and experienced staff to work as part of the course development team. The course teaching team, work under the supervision of the Course Lead who is in regular contact with the Head of School and Framework Lead. If any academic issues arise, these issues can be discussed with the Head of School or Framework Lead. External experts are involved in all course consideration panels for new courses and periodic reviews.

All staff are encouraged to pursue recognised educational qualifications. Initially staff are encouraged to pursue fellowship with the Higher Education Academy (FHEA) and then at a later stage to pursue a postgraduate course. Staff development meetings and training are held throughout the year and are well attended.

4.6.4b Analysis

Members of the faculty are capable educationalists who strive to enhance student learning through different teaching and assessment methods. The University College encourages attainment of fellowships with the HEA and working towards an ESME, masters or doctorate qualification which shows evidence of a continuing support for educational expertise to develop student learning. The University College makes clear use of educational expertise in the design and development of the curriculum and instructional (teaching and learning) and assessment methods.

4.6.4c Conclusion



The University College fully complies with Standard 6.4

4.6.5 Administrative and Technical Staff

The administrative and technical staff of the institution/programme 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 to ensure best employment of its resources.

4.6.5a Description

The University College's professional services support the School of Chiropractic (SoC) and its courses in a range of ways. The Registry Team, one member of which is the Course Administrator of the chiropractic courses, is responsible for supporting the student journey from admissions, registration and enrolment, assessment administration, course and student administration and graduation. The Library and Learning Services Team support students by providing resources to enhance their learning and research experience. The IT Team is responsible for maintaining all computers, the internet and intranet connections and the email and wifi connections at the University College. Clinical management/clinic reception teams ensure the daily operational management and effective running of the University College's clinical services for patients, staff and students.

4.6.5b Analysis

Professional Services staff are appraised by their Line Manager using the University College's appraisal policy/procedures. Professional Services Departments have operational plans that are reviewed annually. Heads of Service keep performance and staffing under review and make proposals to the Senior Management Group for consideration, as required. The institution employs an external company to undertake audits of internal processes. Through this, senior and executive management, their processes and decisions are checked against policy and generally recognised good practice with recommendations for improvement if necessary.

The Professional Services staff of the University College is appropriate to support the implementation of the institution's MChiro V1 and V2 courses and related activities, and to ensure good management and deployment of its resources. The management includes a programme of quality assurance, and the management itself submits itself to regular review to ensure best employment of its resources.

4.6.5c Conclusion



The University College fully complies with Standard 6.5

4.7 RELATIONSHIP BETWEEN TEACHING AND RESEARCH.

The chiropractic institution/programme must facilitate the relationship between teaching and research, and must describe the research facilities to support this relationship as well as the research priorities at the institution/programme.

4.7a Description

Since becoming a University College, AECC UC has established its commitment to research with the creation of four research centres and the appointment of a Director of Research. They made their first submission to the Research Excellence Framework (REF) in 2021. New researcher pathways have been established which recognize research active staff and allocates time within the workload model.

Students are taught and supervised by staff recognized within their research field and research outputs from staff are used in teaching to support the curriculum. The University College has now set up its own Research Repository which stores staff research publications. There has been heavy investment in research facilities including the Open Upright MRI which has been used in collaborative projects with King's College London and the European Space Agency. They are now starting the long process towards seeking Research Degree Awarding Powers (RDAP) which will enable the awarding of a doctoral level qualification. Plans include the eventual development of a graduate school and the offer of PhD places to students.

4.7b Analysis

The University College takes research seriously and has establish itself as a primary research centre. Staff are encouraged to gain higher education qualifications in the form of PhDs or D.Eds. and support is provided both in terms of time allocation and financial support on a case-by-case basis. Around 35% of those teaching have significant research responsibilities with corresponding time allocation and around 50% have PhDs or equivalent. There are training opportunities and workshops driven by active researchers, which have included topics such as 'performing systematic reviews' and 'being a peer reviewer', and 'input to the REF'. There are also training opportunities for specific chiropractic techniques. Staff are encouraged to belong to organisations such as Vitae, which support early career researchers.

Students are encouraged to engage in research throughout the programme. Research methods in year 1 cover reading papers, while in year 3 students create their own literature review. A proportion of the budget can be used to attend conferences and some students are funded for this from external funding. Ethical approval for all research is monitored via a

comprehensive and robust ethical application system. Research governance processes are fully documented and available online.

The team commend the pioneering work in developing AECC as a University College and pursuing RDAP status and they find there is solid evidence to support the linkage between research and teaching and commend the strong commitment to research and the continual investment in research outputs.

4.7c Conclusion



The University College fully complies with Standard 7

4.8 PROGRAMME EVALUATION

4.8.1 Mechanisms for Programme Evaluation

The institution/programme 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

Every programme undergoes an annual monitoring process which draws on data from a range of sources including Unit Monitoring Reports, student feedback, pass rates/continuation rates, external examiner reports, PSRBs etc. The annual monitoring report generates an action plan for the coming year which is monitored by the teaching team and supervised by the course steering group. All annual reports are reviewed at institution level and feed into an overall action plan presented to the Academic Standards Quality Committee and the Academic Board. In addition, each programme is subject to periodic reviews conducted every six years.

4.8.1b Analysis

The University College operates a continuous monitoring system with annual reporting. The monitoring process starts at the end of May with unit evaluation conducted by unit leaders. Key data sets are including in the monitoring including academic results. Unit evaluations feed into the annual programme reports written by programme leaders which includes data on quality of teaching, student progress and student outcomes. Programme reports go to an internal paired scrutiny process and are then checked by the Assistant Registrar and Vice Chancellor. Programme action plans are monitored at the school management meetings and feed up to the institutional action plan.

Teaching quality is monitored through a mandatory peer observation programme and reports are scrutinised by the Education Committee. Any serious concerns about teaching quality can also be raised by students and would ultimately be passed to human resources in exceptional cases. Failing students are picked up by The Student Monitoring and Wellbeing Group which sits at school level and meets twice per semester. The group monitors attendance together with other success markers. A personal tutor meets with struggling students and sets up an action plan. The team find that the University College operates robust annual and periodic monitoring processes and these are comprehensively documented and followed through.

4.8.1c Conclusion



The University College fully complies with Standard 8.1

4.8.2 Staff and Student Feedback

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

4.8.2a Description

Staff feedback is gathered from unit monitoring reports, Course Steering Groups, School Briefings and the Academic Board. Student feedback is widely sought both formally and informally. Formal feedback is obtained through Mid Unit Student Evaluations (MUSE), end of unit evaluations, the annual Course Experience Survey and the National Student Survey. Feedback is captured in the annual monitoring reports and converted into action plans for the following year. This can lead to unit improvement following the Course Modification Policy for implementation in the following academic year.

4.8.2b Analysis

The team found that multiple formal and informal mechanisms are in place to obtain both staff and student feedback. Students have an individual academic tutor with whom they can raise personal issues and collectively they elect student representative who sit as full members on committees at all levels including two students on the governing board. The University College has worked hard at maintaining the student voice through the COVID-19 Pandemic and were commended by the Quality Assurance Agency.

However, some students feel there is not sufficient response to the MUSE and other surveys they complete. While student representatives may receive responses, this does not always trickle down effectively. Though MUSE surveys are answered and placed on the VLE, some

students felt that was not adequate and that there is inconsistent practice with some lecturers going through MUSE feedback in lectures while others do not. The team finds that while faculty and student feedback is systematically sought and analysed, response is not always timely nor complete. It is therefore recommended that the University College provide a comprehensive and timely response to student feedback.

4.8.2c Conclusion



The University College substantially 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 programme.

4.8.3a Description

Student progression and performance is considered by the Assessment Board. Unit leaders are required to complete a Unit Monitoring Report (UMR) and identify failure rates at first attempt greater than 10%, and unit leaders must agree on actions to resolve the failure.

New regulations were introduced due to the COVID-19 pandemic. All written exams taken during lockdown, which contributed to the final award, were subject to grade scaling to avoid student detriment. This meant that mean grades and standard deviation were calculated for each examination based on the previous 4 year's results. This was compared to the current grades and if the mean mark was more than one standard deviation higher or lower than the average, then all student marks were adjusted by increasing or decreasing to align the means. Final adjusted marks were ratified at the Assessment Board meeting.

4.8.3b Analysis

The University College analyses units at the middle of the academic year and at end of each year. Adjustments have been applied during the COVID-19 pandemic under the institutions Emergency Regulations to monitor results and take appropriate steps to prevent grade inflation. The team found evidence of how undue failure rates were addressed to rectify the problem. Concerns arising from annual monitoring reports were addressed at school management meetings and action plans formulated. The team are confident that Student Cohort Performance is clearly analysed in relation to the curriculum and the aims and objectives of the course.

4.8.3c Conclusion



4.8.4 Involvement of Stakeholders

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

4.8.4a Description

The outcomes of the annual evaluation are communicated to stakeholders through annual monitoring reports determined by the stakeholder. Stakeholders include ECCE, GCC, Professional Bodies, The governors, staff, students and patients amongst others. There is also opportunity to seek input from the chiropractic profession through the annual Chiropractic Stakeholders Event. The volunteer group, the 'Friends of the Clinic,' is represented on the Clinic Advisory Group which provides a patient's view of how the clinic performs. The members of this group are available to speak to patients about their treatment. The outcomes from the annual monitoring process are reported to the Academic Board and thereafter are presented to the Board of Governors through the institutional quality assurance report.

4.8.4b Analysis

The team is confident that there are a full range of reporting mechanisms which keeps all stakeholders informed. The team commends the role of The Friends of the Clinic which enhances the patient voice, advocates for the profession and improves community connectedness. The team finds that programme evaluation involves the governance and administration of the University College, the faculty, staff and the students, and the outcomes are appropriately communicated to the stakeholders.

4.8.4c Conclusion



The University College 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/programme must be defined, including their relationships within the university (as appropriate).

4.9.1a Description

The University College is an independent, self-governing entity, governed within the terms of its Articles of Association. The University College is overseen by a Board of Governors with an appointed chair. It is governed by its Articles of Association and is directed by its Board of Governors acting under these Articles of Association. The Board has ultimate responsibility for the strategy performance and sustainability of the institution. It approves the University College's mission and strategy, monitors institutional performance and ensures its effective management.

The University College has a strategic plan (2016-21), which aims to articulate the University College's vision, mission and aims, and which, furthermore, aims to drive the achievement of explicitly stated strategic aims and objectives at the institutional and departmental levels. The strategic plan does this through:

- The development of a financial strategy reflecting the overall strategic plan, setting out performance indicators and showing how resources will be used and how activities and infrastructure will be financed,
- The development of departmental annual operational plans, setting out performance indicators by which the achievement of strategic objectives can be assessed,
- The development and support of our staff to work together to achieve the aims and objectives of this strategic plan.

The University College has a strategic risk management process, which includes the maintenance and monitoring of a register of risks, and which aims to identify strategic and financial risks within the framework of governance, a defined risk management policy and an underlying control environment.

4.9.1b Analysis

A significant recent strategic development has been the purchase in June 2020 of a new 1.1-acre site opposite the entrance of the University College's main building in Parkwood Road. The site, previously an independent primary school, provides an additional 1,300m² of teaching space for development and expansion. This has already proven particularly useful in that it has been used for physically distanced teaching onsite since September 2020.

Furthermore, the University College, now with permanent TDAP status, has continued to expand and diversify with new courses developed in diagnostic and therapeutic radiography, sport therapy and rehabilitation, physiotherapy, and sport and exercise

psychology. These academic course developments have been supported by significant University College capital investment into state-of-the-art teaching related equipment.

Regarding risks, some uncertainty exists in relation to staff and student recruitment and retention because of the UK's decision to leave the European Union and as a result of possible complications arising from the COVID-19 pandemic.

The governance and committee structures and functions of the University College are well defined and provide for the evaluation of risk and for the management of the financial and operational demands of independence. There is good student inclusion across the committee structure including representation on the Board of Governors.

4.9.1c Conclusion



The University College fully complies with Standard 9.1

4.9.2 Academic Leadership

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

4.9.2a Description

The current academic committee structure, membership and terms of reference was implemented in 2019-2020, to incorporate recommendations made following a review by the University College's internal auditors. The Vice-Chancellor is Chief Executive of the University College with powers delegated by the Board to lead and manage the institution aligned to our strategic plan. In this, the Vice-Chancellor is supported by the Executive and the Senior Management Group (SMG). The Deputy Vice-Chancellor oversees the University College's academic leadership and management with support from the Chief Operating Officer, who oversees all support services, and the Head of Finance and Procurement, who is responsible for all financial systems.

The Head of the School of Chiropractic, a chiropractor who is also a member of the SMG, is the person responsible for all decisions taken within the School of Chiropractic. The School of Chiropractic leadership structure and role descriptors for key posts are clearly defined.

4.9.2b Analysis

The team find that the responsibilities of the academic head of the chiropractic programme, and of the related academic management structures, are clearly stated.

4.9.2c Conclusion



The University College fully complies with Standard 9.2

4.9.3 Educational Budget and Resource Allocation

The institution/programme 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 programme.

4.9.3a Description

The University College has a strategic risk management strategy and process, which aims to identify strategic and financial risks within the framework of governance, a defined risk management policy and an underlying control environment. As part of its five-year forecast, the University College has evaluated the minimum liquidity levels needed to ensure that financial and operational control is maintained, included the identification of any future borrowing requirement.

A refreshed and update corporate strategy will be delivered from the start of the 2021-22 academic year. The University College plans to continue to expand and develop its educational portfolio at undergraduate and postgraduate level, focussing on highly relevant and demand-led courses.

4.9.3b Analysis

The global COVID-19 pandemic impacted the University College's financial performance. External income was reduced as a result of clinical services having to close (March to July 2020) and some staff were placed on furloughed leave and capital investments were delayed. Despite these challenges the University College continues to maintain a strong position with a key strength being that the University College has the financial liquidity to respond to challenges and opportunities.

The University College has a clear line of responsibility and authority for the curriculum and its resourcing, including remuneration of teaching staff, to achieve the overall aims and objectives of the chiropractic programme of study. The University College has adequate resources to continue in operational existence for the foreseeable future.

4.9.3c Conclusion



The University College fully complies with Standard 9.3

4.9.4 Interaction with Professional Sector

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

4.9.4a Description

The University College has deep and extensive relationships with professional healthcare organisations. They are a member of the Council of Deans of Health (2020) and provide a First Contact Practitioner service to four local GP surgeries as well as being a member of the Council of Validating Universities, GuildHE and the Dorset Chamber of Commerce. Members of staff hold positions on the Dorset Clinical Commissioning Group and are on committees of the General Chiropractic Council and the European Council on Chiropractic Education. They have contributed to the National Institute for Clinical Excellence, the Research Council for Complementary Medicine and the Royal College of Chiropractors. They also have wide links with Higher Education Institutions, academic organisations and professional networks across Europe.

4.9.4b Analysis

The team find that the University College has very strong institutional and staff relationships with chiropractic professional bodies in the UK and Europe. There is strong evidence of constructive interaction with the chiropractic profession and chiropractic-related and health-related sectors of society and government.

4.9.4c Conclusion



The University College fully complies with Standard 9.4

4.10 CONTINUOUS RENEWAL AND IMPROVEMENT

The chiropractic institution/programme must have procedures for regular reviewing and updating of its structure and functions to rectify deficiencies and meet changing needs. (See 8.1 of standards) The outcomes of these procedures should be made public (i.e. institutional websites) and should lead to continuous improvement of the programme.

Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to-date and readily accessible.

4.10a Description

The programmes shows clear signs of continuous improvement with the following area of distinction.

- The continuing growth and development of the research areas of the University College with a constant investment in research outputs both in terms of staff and resources. The pioneering work in developing as a University College and setting itself to pursue RDAP status.
- The rapid and flexible way in which the University College has responded to the COVID-19 pandemic with the introduction of emergency regulations and the way in which staff and students have adapted to new ways of teaching and learning.
- The way in which students have been supported financially to allow students to secure access to digital resources when this has become more central to the deployment of teaching and learning resources.
- The way in which international students are welcomed and supported into the programme to ensure that they are fully at home with the programme and the University College procedures.
- The continual recognition of the vital role played by elected student representatives as full members of boards and committees at all levels of the University College and the way their contribution is valued.
- The use of the 'Friends of the Clinic' to enhance the patient voice, advocate for the profession and improve community connectedness.
- The leadership's proactive commitment to continuous staff development.

4.10b Analysis

The team were impressed with the University College's commitment to continuous improvement and their desire to keep their institution following the highest standards of teaching, learning, practice and research and the openness and transparency of its policies, which are publicly available on its website.

4.10c Conclusion



The University College fully complies with Standard 10

5. **CONCLUSIONS**

5.1 **SUMMARY**

The University College's programme is well established in the UK and across much of Europe. The course is soundly delivered, robustly assessed and serves the needs of its key stakeholders. Staff show a strong commitment to teaching and have created quality teaching and clinical environments with a strong focus on the therapeutic evidence-based treatment of musculoskeletal conditions. They have also risen to the challenges of the COVID-19 pandemic in a timely, flexible and dedicated way.

The outcome is well qualified graduates, who are able to enter into professional practice with the needs of patients central to the treatment being offered.

The University College has added new schools (School of Radiology and School of psychology, Sport and Physical Activity) and has exciting plans to expand into additional health-related areas. These developmental plans will need to be carefully balanced against the resourcing of student's learning and support needs within the existing programmes.

5.2 COMMENDATIONS, RECOMMENDATIONS AND CONCERNS

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

- **Commendations** Areas that meet or exceed the Standards and are worthy of specific recognition.
- **Recommendations** 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.

COMMENDATIONS

- The strong commitment to research and the continual investment in research outputs.
- The rapid adaption of the University College to COVID-19 pandemic related regulations including, the move to online teaching, the creation of student bubbles and the weekly briefing sheets for students.
- The provision of financial support and the use of the Hardship Fund to allow students to secure access to digital resources.
- The support of international students into the programme confers wide recognition of the University College.
- The support of elected student representatives as full members of boards and committees at all levels of the University College.
- The role of Friends of the Clinic enhances the patient voice, advocates for the profession and improves community connectedness

- The leadership's proactive commitment to continuous staff development.
- The pioneering work in developing as a University College and pursuing RDAP status.

RECOMMENDATIONS

- An audit of staffing needs should be undertaken in the light of the rapid growth of the University College, and the restrictive regulations relating to the COVID-19 pandemic.
- Provide a comprehensive and timely response to student feedback.
- Improve communication channels between academic staff and the clinic team to ensure clear and timely communication to enable procedures to be conducted efficiently.
- Make careful use of peer-feedback to support the proper alignment between teaching activities, assessment and learning outcomes.
- Review the assessment methods to see if it is possible to reduce the weight of formal written summative assessments and augment continuous assessment approaches.
- Any reduction in clinic requirements due to the COVID-19 pandemic should be restored to normal levels as soon as permissible.
- Explore additional innovative ways for the students to gain collaborative competence through inter-professional learning opportunities.
- Provide an adequate and consistent level of case-mix for students to ensure they all have a comparable experience.

CONCERNS

None

5.3 ACKNOWLEDGEMENTS

The members of the Evaluation Team wish to extend our thanks to the University College for the timeliness, attention to detail and courtesy afforded to us during the virtual site visit.

APPENDIX – VIRTUAL SITE VISIT AGENDA

Timetable AECC UC June 2021

Monday 21	Main Focus	Personnel Required	Lead Team	Standards
June			member(s)	
8:30-9:00	Prep meeting	N/A	All	
9:00-10:10	Programme Management	Senior managers	AW, RAM	1. Aims and Objectives 1.1, 1.2, 1.3, 1.4 9. Governance and Administration 9.1, 9.2, 9.3
10:15-	Programme	Unit leaders	PD	2 Educational Programme
11:15	Delivery	All chiropractic module leaders		2.1,2.8,2.9,2.10 10
11:15-	Break			
11:45				
11:45- 12:15	Basic sciences and social sciences	Lecturers from anatomy, physiology, chemistry, physics, biology, psychology	PD	2 Educational Programme (sciences) 2.2,2.3,2.4
12:20- 13:00	Clinic Faculty (chiropractic)	6 – 8 Clinic Supervisors FT & PT Teaching faculty to cover all areas of clinical science teaching.	RAM	2 Education Programme (clinic) 2.5, 2.6, 2.7, 2.10 6 Educational Resources (clinic) 6.2, 6.5
13:00- 13:45	Lunch			
13:45- 14:25	Assessment and Learning	Assessment officer and staff responsible for collating assessments	PD	3. Assessment of Students 3.1, 3.2, 8.3
14:30- 15:30	Student support and representation	Admissions officer Student Support Services, student representation	ALS	4 Students 4.1, 4.2, 4.3, 4.4
15:30- 16:00	Break			
16:00- 17.00	Staff Recruitment and Development	HR representatives HR manager, relevant personal	AW, RAM	5 Academic and Clinical Faculty 6.5 Administrative and technical staff
17:00- 17:30	Closing Meeting	N/A	ALL	
Tuesday 22 June	Main focus	Personnel	Team members	Standards
8:45-9:00	Prep Meeting	N/A	ALL	

9:00-9:55	Marketing/ Learning Resources / Library/IT	Head of Learning Services, IT manager, marketing	RAM, ALS	6 Educational Resources 6.1, 6.2, 6.3, 6.4
10:00- 10:55	Links to profession and patient involvement	Staff linked to profession stakeholders Patient Stakeholders	RAM	2.10 Linkage with profession, Chiropractic Practice and the Health Care System 2.10, 1.2, 8.4, 9.4
11:00- 11:30	Break			
11:30- 12:25	Meetings with students	Up to 6 students from years 1-3	ALS	2 Educational Programme 3 Assessment of Students 4 Students 6 Educational Resources
12:30- 13.30	Lunch			
13:30- 14.25	Meeting with Students in Clinic	Up to 6 student clinicians	ALS	2 Educational Programme 3 Assessment of Students 4 Students 6 Educational Resources
14:30- 15:15	Research and teaching	Staff responsible for managing undergraduate research.	PD	7 Relationship between teaching and research 2.2,2.6, 7
15.15- 15:55	Break			
16:00- 17:00	Quality Assurance Monitoring and Evaluation	Quality Assurance Programme Leaders	PD, ALS, ST	8 Programme Evaluation 8.1, 8.2, 8.3, 8.4
17:00- 17:30	Close meeting	N/A	All	
Wed 23 June	Main focus	Personnel	Team members	Standards
9:30-12:00	Team Meets to finalize Report	N/A	All	
12:00- 12:15	Team Reports back to AECC	Senior Managers	ALL	