

Common Assessment Feasibility Report Orthoptics



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Executive summary

- Practice-based Learning (PBL) is integral to the pre-registration education and training of UK orthoptists. As the majority of placements are used by at least two HEI's and in some cases all four streamlining assessment tools required would be beneficial to clinical tutors.
- At present all HEI's have assessment documentation including summative and formative assessment. The format of these varies significantly in content and format.
- The aim was to see if a Common Assessment Tool (CAT) would be feasible. Given the responses to the survey and exploring commonalities in the present tools a CAT would be feasible in the future.

Introduction

- **Scope:** The review was to map the present PBL documentation to ascertain similarities and differences of approach between HEI's.
- Purpose: The feasibility study will assess the practicality of utilising/adapting a Common Assessment Tool for orthoptics.
- Aims: The aim of this scoping review was to understand the current orthoptics assessment methods in use by HEIs, practice educators and orthoptic learners within the UK, and any need for change.

Objectives

- Engaging with key stakeholders to explain purpose and scope of this project.
- Seeking stakeholder opinion around need for change to a UK-wide common assessment method.
- Mapping the current orthoptic assessment methods shared by HEIs against one another to identify commonalities.
- Surveying practice educators via the BIOS membership and HEIs.
- Identifying and summarising findings to inform the UK orthoptic profession.

Methodology

- HEI/Practice educator working groups: The group consisted of leads from all HEI's (including Scotland), the clinical tutor representative on EPDC and clinical tutor representation from England, Scotland, Wales, N. Ireland and the Republic of Ireland. The terms of reference for the group can be found in Appendix 1.
- Survey: The survey was based on one designed by the British Dietetic Association for a similar purpose. It was sent to all lead and alternate tutors using the National Equitable Allocation mailing list and academic staff at the HEI's. There were 83 responses.
- Common themes were mapped across all documentation, see Appendix 2. The type of documentation used varied but was mainly paper based. The amount of written feedback was also variable across all HEI's. Competency frameworks were used by two HEI's.

Length of study: 6 months

On behalf of the BIOS Workforce Development Programme, this report presents the findings of a scoping review which explored the practicality and feasibility of adopting common assessment methods for the UK orthoptic profession to:

- Ensure that there is consistency in assessment tools
- Encourage increased PBL offerings for providers who may span differing Higher Education Institutions (HEIs) and require ease of completing paperwork
- Equip individuals with the skills required to lead and transform future orthoptic practice across a wealth of diverse and increasingly changing environments.
- With initial agreement for this review, supported by BIOS, the orthoptic CAT steering group was convened. The CAT steering group terms of reference may be found in Appendix 1. Through a series of virtual meetings intelligence was gathered, evaluated and is reported here. This scoping review was completed in 6 months.

Background information

- At present each HEI has designed their own documentation to be completed during Practice Based Learning. Some tutors find this confusing and favour taking certain HEI students due to familiarity with the paperwork. This has been discussed at national clinical tutors' days, but no consensus reached.
- Despite there only being four HEI's providing pre-registration education for Orthoptists there is still a plethora of forms being used.
- There is an HEE drive for a more creative world of PBL for AHP's to embrace technology and expand capacity.
- The main stakeholders HEI's, Clinical Placements, and Students views need to be considered in this review.

Describe the productWhat are Common Assessment Tools?

- A CAT, in the context of pre-registration healthcare professional education and training, may be defined as a standardised method of assessing all UK orthoptic learners undertaking PBL in all practice settings regardless of which UK university they attend.
- The first UK example of this was launched by the CSP (2021) following consultation between the CSP and HEIs, practice educators and physiotherapy learners across the UK. The CSP is the professional, educational and trade union body for the UK's physiotherapists, physiotherapy learners and support workers. https://www.csp.org.uk/professional-clinical/practice-based-learning/cpaf

The CSP CPAF seeks to transform PBL by:

- Being applicable in a wide range of practice settings
- Making it easier to take learners from more than one university
- Standardising PBL assessment for students
- Empowering learners to take ownership of their learning
- Actively promoting equity, diversity and belonging in PBL settings.

Market research

The survey sought the opinion of practice educators and academics within HEI's providing preregistration Orthoptic education.

The main aims were to determine:

- Is there a demand for this?
- Who would use it?
- What is the view of
 - (a) HEIs
 - (b) Practice educators on what a common assessment should do
- Is there a view of adapting the physio CAT for Orthoptic use?

A summary analysis of the initial steering group meetings is illustrated into Strengths, Weaknesses, Opportunities and Challenges (SWOC) (i) for continued use of the current orthoptic PBL assessment methods (Figure 1), and (ii) for development and adoption of a new orthoptic CAT (Figure 2).

SWOC Analysis - Current documentation Strengths:

- Established orthoptic assessment tools
- Produced jointly with local partners
- Some newly created
- A few tools already common to more than one region.

Opportunities:

- To challenge HEIs to review consistency of approach and type of future registrants
- For BIOS to offer guidance on good practice.

Weaknesses:

- Tools are difficult to apply in certain settings e.g. tertiary
- Potential differences in marking criteria across sites.

Challenges:

- Difficult to expand capacity
- Practice educators may have to use more than 1 tool.

Fig 1 No change

SWOC Analysis: CAT

Strengths:

- Easy to increase capacity
- Practice educators only have one tool to use
- Tools align with all settings benefits for HEI, students and educators
- Standardised competencies
- Equitable approach for learners.

Opportunities:

- To produce national training on tools and mentorship
- To standardise competencies, amount of evidence, systems
- To make paperwork more consistent and user friendly
- · To create national online e-portfolio
- To ensure tools align with future workforce vision.

Weaknesses:

- Lack of flexibility
- · Less tailored to individual HEI outcomes.

Practice educators only have one tool to use across UK

Tools align with all settings so benefits for everyone

Learning across all settings valued and normalised

Standardised competencies across regions and countries

Consistency in training and type of future practitioner

UK wide peer learning

Better reflects learners who have additional support needs

The main disadvantage perceived was lack of flexibility (53%). It would be important to take this into account when designing a CAT to ensure it is suitable not only for all HEI's but also across all types of PBL environments and all levels of student experience. See Appendix 4 for complete survey.

Challenges:

- Ensuring it is suitable for all students
- Ensuring it serves the needs of all HEI's.

Fig 2 Adoption of CAT

Outcome

- Outline the potential outcome from the study
- Determine the factors that would make the product a success/feasible

Whilst 82% of respondents liked having established assessment tools 86% responded to say having a common assessment tool would be an advantage. The main factors identified are:

- Similar experiences for students, consistency in training
- Common marking criteria
- Similar evidence required for all institutions
- Facilitating ease of taking students from any HEI increasing capacity

The graph below represents the perceived advantages of having an orthoptic CAT

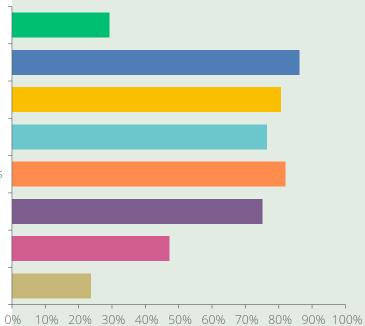


Fig 3 Responses to advantages of CAT

What would make it feasible?

This scoping review concludes that adoption of a common assessment methods for the UK orthoptic profession is practical and feasible. The stakeholders (HEIs, practice educators and orthoptic learners) within the UK recognise the need for change. Key considerations for BIOS going forward included:

- Agreement of inclusion of specific clinical skills or whether these should be a separate document
- Consistency in volume and format of CAT
- Assessment methods which work for all supervision and delivery models
- Alignment of competencies and tools with regulatory body standards and future workforce vision.

The key measure of success will be adoption of the CAT by the UK-wide stakeholders (HEIs, practice educators and orthoptic learners). Other outcome measures will include:

- Ease of adoption
- Access to training and support
- Acceptability and suitability of CAT.

Analysis / Evaluation

- The Physiotherapy CAT is longer and requires more documentation than any of the tools used by HEI's providing Orthoptic pre-registration education. Those that commented were not in favour of adopting the Physiotherapy CAT.
- There would need to be a major revamp of documentation for all HEI's. It may be that a common tool could be adopted but that it could be supplemented with specific clinical skills learning outcomes for each PBL.
- It would require substantial time to scope out what is possible and produce an acceptable assessment tool which satisfied all HEI's requirements. There would need to be agreed a common language which is acceptable to all HEI's it is imperative that the tool identifies struggling students and enables their support. The main resource required would be a person with the appropriate skills and time.

- The format of the CAT is to be decided but results of the survey suggest it should not be lengthy or cumbersome. An online tool may be preferable provided the technology is accessible to clinicians.
- This could be resourced by BIOS or HEE.
- The initiative is likely to take four years for completion and roll out
 - Phase 1: The scoping exercise and agreement of common language.
 - Phase 2: To compile the possible tool and gain input from HEI's. tutors and students.
 - Phase 3: Pilot the tool across a selection of PBL sites. Testing the tool on students from all HEI's at all stages.
 - Phase 4: Adapting the tool following feedback from the pilot stage and rolling the CAT out to all PBL sites.

There is a risk that during the scoping exercise that either:

- 1) the HEI's are not satisfied that it fulfils their requirements or
- 2) practice educators find the proposal unworkable

Mapping the tools used by HEI's at present demonstrated there are some common themes across all HEI's. See Appendix 2. The order of specific learning outcomes differs depending on the individual HEI curricula. It may be that a CAT would need to be supplemented by specific learning outcomes for core Orthoptic skills for each HEI.

Summary findings and recommendations

The findings suggest a CAT is feasible. However, this would require funding for scoping out the possibilities. It would require engagement and active support from HEI's and clinical tutors.

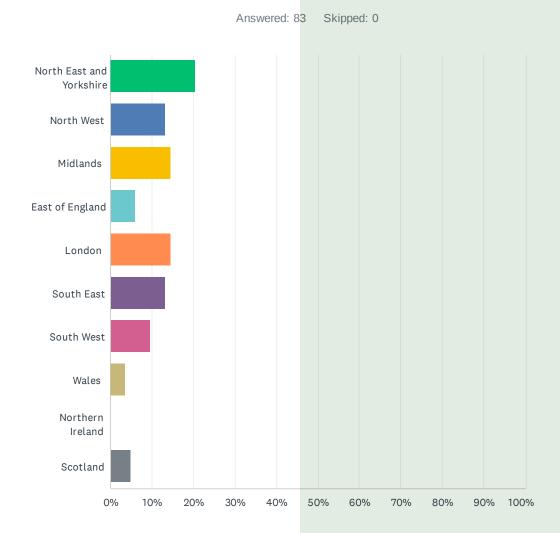
Next steps:

BIOS to consider either funding or applying for funding to support a person or persons to take this process forward. BIOS to ensure that HEI's and clinical tutors are willing to engage in this process.

Appendices (Survey data)

The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

Q1 Please indicate which region you are from:

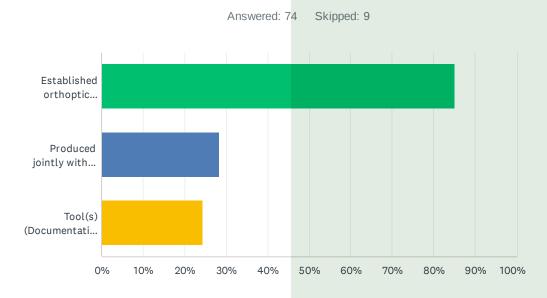


The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

ANSWER CHOICES	RESPONSES	
North East and Yorkshire	20.48%	17
North West	13.25%	11
Midlands	14.46%	12
East of England	6.02%	5
London	14.46%	12
South East	13.25%	11
South West	9.64%	8
Wales	3.61%	3
Northern Ireland	0.00%	0
Scotland	4.82%	4
TOTAL		83

The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

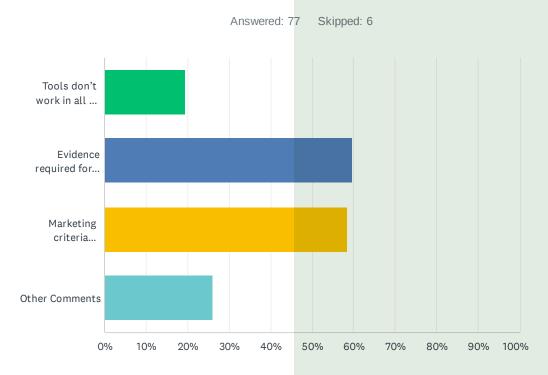
Q2 Which aspects of current orthoptic assessment documentation or process do you feel work well?



ANSWER CHOICES	RESPO	NSES
Established orthoptic specific assessment tools (orthoptic assessment doc	uments from each HEI) 85.14%	63
Produced jointly with clinical partners	28.38%	21
Tool(s) (Documentation) to evidence progression towards competenciesPlea	se describe below (in other comments box) 24.32%	18
Total Respondents: 74		

The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

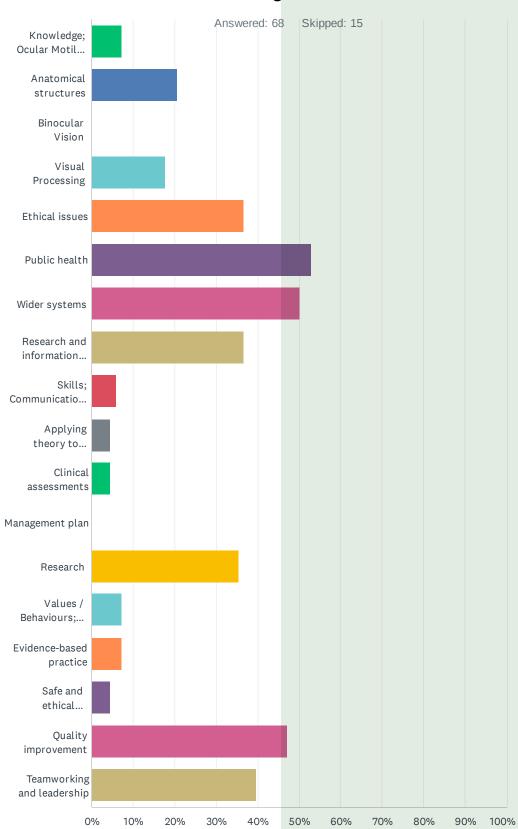
Q3 Are there aspects of the current orthoptic assessment documentation or process you would like to change?



ANSWER CHOICES		RESPONSE	S
Tools don't work in all PBL settings		19.48%	15
Evidence required for competency varies across universities		59.74%	46
Marketing criteria differs across PBL sites and universities Volume o	f common assessment documentation	58.44%	45
Other Comments		25.97%	20
Total Respondents: 77			

The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

Q4 Are there any aspects of orthoptic knowledge, skills, values and behaviours within the orthoptic curriculum, (view here) difficult to evidence during PBL?



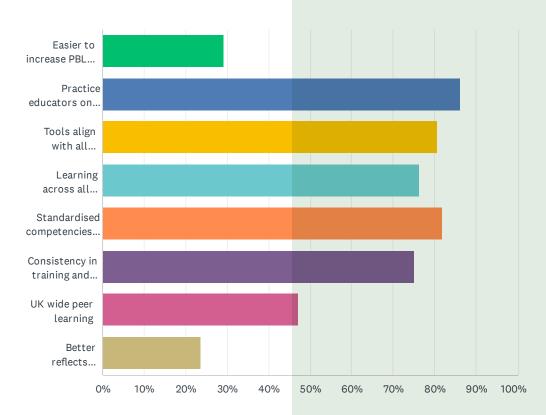
The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

ANSWER CHOICES	RESPONSES	
Knowledge; Ocular Motility defects	7.35%	5
Anatomical structures	20.59%	14
Binocular Vision	0.00%	0
Visual Processing	17.65%	12
Ethical issues	36.76%	25
Public health	52.94%	36
Wider systems	50.00%	34
Research and information management	36.76%	25
Skills; Communication and education	5.88%	4
Applying theory to practice	4.41%	3
Clinical assessments	4.41%	3
Management plan	0.00%	0
Research	35.29%	24
Values / Behaviours; Professionalism	7.35%	5
Evidence-based practice	7.35%	5
Safe and ethical practice	4.41%	3
Quality improvement	47.06%	32
Teamworking and leadership	39.71%	27
Total Respondents: 68		

The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

Q5 In your opinion, are there any advantages of developing and adopting a CAT for orthoptic pre-registration training?

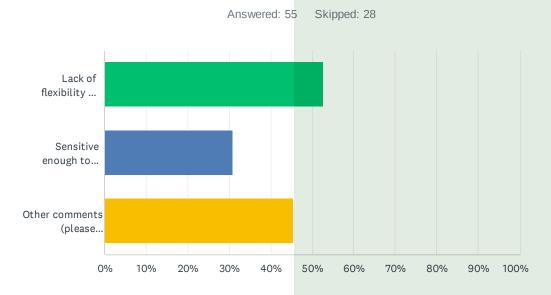




ANSWER CHOICES	RESPONSES	
Easier to increase PBL capacity	29.17%	21
Practice educators only have one tool to use across UK	86.11%	62
Tools align with all settings so benefits for everyone	80.56%	58
Learning across all settings valued and normalised	76.39%	55
Standardised competencies across regions and countries	81.94%	59
Consistency in training and type of future practitioner	75.00%	54
UK wide peer learning	47.22%	34
Better reflects learners who have additional support needs	23.61%	17
Total Respondents: 72		

The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

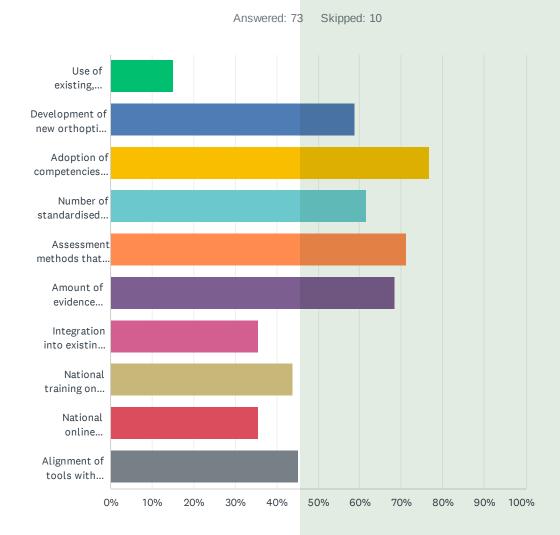
Q6 Do you believe there are any disadvantages of developing and adopting a CAT for orthoptic pre-registration training?



ANSWER CHOICES		RESPONS	SES
Lack of flexibility or variability in assessment processes across all s	ettings and PBL types e.g. length, stage of training	52.73%	29
Sensitive enough to identify learners who are struggling		30.91%	17
Other comments (please specify)		45.45%	25
Total Respondents: 55			

The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

Q7 What are the key factors that need to be considered if a CAT is produced by BIOS for the orthoptic profession?



The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

ANSWER CHOICES		RESPONSES	
Use of existing, adapted physiotherapy CAT		15.07%	11
Development of new orthoptic CAT		58.90%	43
Adoption of competencies / learning outcomes which work for all lear	ners and settings	76.71%	56
Number of standardised competencies / learning outcomes		61.64%	45
Assessment methods that work for all supervision models		71.23%	52
Amount of evidence required and in what format		68.49%	50
Integration into existing systems or purchase of new technology		35.62%	26
National training on tools and mentorship		43.84%	32
National online e-Portfolio		35.62%	26
Alignment of tools with curriculum and future workforce vision		45.21%	33
Total Respondents: 73			

The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

Q8 Any other comments?

Answered: 11 Skipped: 72

The feasibility of a Common Assessment Tool (CAT) for Orthoptic Practice Based Learning [Placements].

Q9 Please provide your name and email address below to be entered into the prize draw

Answered: 46 Skipped: 37

ANSWER CHOICES	RESPONSES	
Name	100.00%	46
Company	0.00%	0
Address	0.00%	0
Address 2	0.00%	0
City/Town	0.00%	0
State/Province	0.00%	0
ZIP/Postal Code	0.00%	0
Country	0.00%	0
Email Address	100.00%	46
Phone Number	0.00%	0



BIOS Common Assessment Tool [CAT] Steering Group

Terms of Reference

Purpose

To explore the feasibility of adopting a common assessment tool for orthoptic practice-based learning [PBL] to:

- o ensure that there is consistency in assessment tools
- encourage increased PBL offerings for providers who may span differing Higher Education Institutes [HEIs] and require ease of completing paperwork
- equips individuals with the skills required to lead and transform future orthoptic practice across a wealth of diverse and increasingly changing environments

Relationship

The CAT Steering Group will:

- o be accountable to the BIOS Education and Professional Development Committee (EPDC)
- o liaise with a number of stakeholders including the Higher Education Institutions and regional clinical educators to inform the content of the feasibility report and any relevant assessment tools
- o facilitate clear communication routes to and from the Education and Professional Development Committee EPDC and with other key stakeholders.

Functions

- 1. To produce a report on the feasibility of adopting a common assessment tool for orthoptic practice-based learning suitable for use in all dietetic settings.
- 2. To gain an understanding of the expectations of HEIs and practice educators on the requirements of a CAT.
- 3. To identify and alert EPDC to any emerging issues, trends and strategies that impact on dietetic assessment.
- 4. To identify what evaluation process would need to be implemented to understand the effectiveness of the approach.

Membership

Chair: The work will be led by the Chair of the EPDC

Group members: The working group will consist of:

- One representative from each of the HEIs delivering orthoptic education
- One practice educator representative from each region of the UK
- In attendance: BDA Education Manager

BIOS COMMON ASSESSMENT TOOL

The membership will include orthoptists who are able to provide expertise in education, and orthoptic practice-based learning and will ensure the interests of the four countries of the UK are represented. If there are vacancies or gaps, the chair can seek additional members to ensure appropriate and necessary representation and expertise.

Functioning

Members are appointed for their expertise and ability to contribute to the scoping review and any subsequent tool development and undertake to prioritise the work, where possible.

Meetings will take place virtually and will be kept to the minimum required to ensure a successful project. It is anticipated that this will involve three meetings over a six-month period.

Quorum for decision making is 50%. Meetings can proceed with fewer, if necessary, to maintain the delivery of the project.

Project management and administrative support is provided by the BDA.

Common Assessment Tool - Terms of Reference October 2022

Term	Definition
British & Irish Orthoptic Society (BIOS)	The professional body for Orthoptists.
Common Assessment Tool (CAT)	A standardised method of assessing all UK orthoptic learners undertaking practice-based learning (PBL) in all practice settings regardless of which UK university they attend.
Competency	An integration of knowledge, understanding, and subject-specific skills and abilities used by an individual to function according to the demands that are put upon them in the specific orthoptic context.
Competency framework	Competency frameworks often include themes, learning domains and learning outcomes.
Curriculum	A structured document which describes the learning outcomes, educational methods and assessments for each component of the pre-registration programme. It provides specific learning to support learners' knowledge, skills, values and behaviour and associated learning experiences.
Domain	An area of knowledge or activity.
Education provider	The awarding body that delivers or oversees an orthoptic pre-registration programme. Education providers may also be known as 'Higher Education Institutions' (HEIs) or 'universities'.
Educator	An individual with the relevant specialist knowledge and expertise, employed or engaged by an education provider to teach the orthoptic pre-registration programme.
Health and Care Professions Council (HCPC)	The regulating body in the United Kingdom established to protect the public by regulating a range of health and care professions, including orthoptics.
HCPC Standards of Education and Training (SET)	HCPC Standards of Education and Training
HCPC Standards of Proficiency (SOP)	HCPC Standards of Proficiency
Non-clinical setting for Practice-based Learning (PBL)	Typically, this includes settings in industry, research, public health, care homes, charities, leadership, education or private sector.
NHS	National Health Service
Orthoptist	An allied health professional who are experts in diagnosing and treating defects in eye movement and problems with how the eyes work together, called binocular vision.
Outcome	An outcome within a practice-based learning (PBL) competency framework is defined as one requiring comment and sign off at half-way or end of PBL review.
Performance indicator	Performance indicators (examples of knowledge, skills, values and behaviours) are offered for information with Practice-based Learning (PBL) competency frameworks but do not require individual sign off so are not deemed a learning outcome.
Practice Educator	A registered orthoptist with overall responsibility for facilitating the education of the learner dietitian whilst they are on practice-based learning. This individual is likely to hold responsibility for signing off competency and assessment criteria, based upon the standards produced by the education provider and relevant professional body, although it is recognised that local models of delivery and assessment will apply.
Practice-based learning (PBL)	The period(s) of study and activities undertaken by learners as a formal element of their orthoptic pre-registration training whilst in the practice-based learning environment. This allows learners to apply and practise their newly acquired knowledge and skills in a safe environment.

Term	Definition
Practice-based Learning provider	The service, organisation or business hosting learners during their Practice-based Learning.
Preceptorship	Preceptorship should enable the orthoptist to confidently apply the knowledge and skills acquired as a learner, to their practice, and will also provide the basis for life-long learning. Preceptorship should be built upon the premise that newly qualified orthoptists are autonomous practitioners and should not undermine this.
Public Health	Organisations which exist to protect and improve the nation's health and wellbeing, and reduce health inequalities.
Rubric	A rubric, in this context, is a pre-defined set of descriptors which promote consistent application of PBL expectations and provide a measure of attainment for each competency or learning outcome.
Service user	A broad term to refer to anyone who uses, or is affected by the services of orthoptists or learners (directly or indirectly).
Wider systems	Any organisation that supports, resources or governs the health and social care workforce, e.g. UK administrations, professional bodies and associations, trade unions, other service providers and regulators.



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