

Annex 9

Annual college/faculty Summary Form per specialty or sub-specialty

This form is a **summary of the minor changes** made to the curriculum and/or assessment system for each specialty or sub-specialty during a given period.

The changes must be in accordance with the definition of a minor change and should comply with PMETB's *Standards for Curricula and Assessment Systems*, July 2008.

ALL SECTIONS OF THE FORM MUST BE COMPLETED AND ONE FORM SHOULD BE COMPLETED PER SPECIALTY OR SUB-SPECIALTY

Section 1. Details of the medical Royal College/Faculty/ Specialist Association

Details of the medical Royal College/Faculty/Specialist Association	
Name	THE ROYAL COLLEGE OF OPHTHALMOLOGISTS
Specialty	OPHTHALMOLOGY
Sub-specialty	
Contact details for the person responsible for submitting this form to PMETB	
Name	BETH BARNES
Address	THE ROYAL COLLEGE OF OPHTHALMOLOGISTS 17 CORNWALL TERRACE LONDON NW1 4QW
Job Title/Role	ACTING HEAD OF EDUCATION AND TRAINING
Telephone number	020 79350702
Mobile number	
Email	

Section 2. Details of changes made for the period Section 2(a) Please tick ONE box: 2008/9

2009/10

2010/11

Section 2(b)

Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
1.	Curriculum Added PMETB Approved assessment blueprint	http://curriculum.rcophth.ac.uk/assessments/overview		PMETB requested the Blueprint be published with the curriculum
2.	<p>Curriculum Updates page Curriculum & Website Updates 26 February 2007 Annual Assessment Guidance page has been updated. This gives information on what you need to achieve at each level of OST.</p> <p>26 February 2007 New Learning Outcome added AER 16 Able to manage time effectively and deal with stress</p> <p>5 February 2007 FAQs now on main College website http://www.rcophth.ac.uk/education/ost-curriculum-faqs Programme Delivery section amended</p>	http://curriculum.rcophth.ac.uk/updates/	<p>Curriculum & Website Updates</p> <p>26 February 2007 Annual Assessment Guidance page has been updated. This gives information on what you need to achieve at each level of OST.</p> <p>26 February 2007 New Learning Outcome added AER 16 Able to manage time effectively and deal with stress</p> <p>5 February 2007 FAQs now on main College website http://www.rcophth.ac.uk/education/ost-curriculum-faqs</p> <p>Programme Delivery section amended</p> <p>3 October 2007 added a second version of the assessment blueprint mapping the curriculum outcomes to Good Medical Practice.</p> <p>15 January 2008 FAQs updated http://www.rcophth.ac.uk/education/ost-curriculum-faqs</p> <p>14 May 2008 Communications study guide amended for C1, C2 and C3</p> <p>14 July 2008 Amended several WBA forms; CRS2, CRS3, CRS4, CRS5, CRS6, CRS7, CRS8, CRS9, CRS10, CRSret, OSATS2, and OST3 to</p>	Inform users of changes to curriculum and assessment system

			<p>remove the sentence (Note: "Pass requires an overall assessment grade of "Good" and no individual "Poor" grades).</p> <p>For each of the WBA forms there are two main scoring sections; the first as the descriptors "poor", "fair" etc. This section was never intended for anything other than feedback to trainees and is purely formative. The section contains the summative assessment ("pass", "fail" or "meets expectations/does not meet expectations for the stage of training". It is this section that determines whether a trainee needs to repeat the assessment. There was never an intention that a "poor" or two "fails" automatically leads to overall failure. The person who decides on the overall summative assessment is the assessor. However, the assessor should be prepared to justify a pass if there were lots of "poor" scores on the WBA sheet and vice versa.</p> <p>14 July 2008 List of learning outcomes assessed by MSF amended to include PS1 it had been omitted in the original list of outcomes assessed by MSF but was noted correctly in the learning outcome itself.</p> <p>25 September 2008 Added new resources to Study Guides for: CA8; PM7; PM11; PS21; HPDP10; C5IH2; AER2; AER5; AER8; AER9; AER10; AER13; AER14; HS5; HS10; and all CPD learning outcomes</p> <p>29 September 2008 Added new information on indicative cataract surgical numbers during the early and later stages of training to the Study Guide for SS4.</p> <p>Also changed learning outcome SS11 Biopsy of the temporal artery from a year 3 to a year 7 outcome target.</p>	
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			<p>14 January 2009 Learning outcome SS6 wording amended from: All trainees must be able to perform surgical repair of the cornea, sclera, eyelids, canaliculi and conjunctiva. They must understand the principles of canalicular repair and must recognise when subspecialist referral is required. The technique of repair will be determined by clinical indications and current surgical practice. They must recognise when management requires expert referral. They must be able to adapt their technique according to pre-operative findings. They must be able to manage intra-operative and post-operative complications.</p> <p>Amended study guide for learning outcome SS4 to contain more information on the complex cataract cases trainees are expected to have managed in the later stages of training.</p>	
Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
3.	<p>Curriculum C1 Rapport Think:</p> <ul style="list-style-type: none"> * Achieving a rapport with all patients is essential for good medical management * How should I greet a patient to establish a relationship? (even if it is only briefly in a busy casualty or clinic) * What difficulties may arise to prevent this relationship? - eg. a language barrier <p>Activity:</p> <ul style="list-style-type: none"> * Maintain interest in your patient. * Ask questions to establish a relationship (it may be relevant to know what they do for a living and how that impacts on their illness) 	<p>http://curriculum.rcophth.ac.uk/study-guide/communication</p>	<p>C1 Rapport Think:</p> <ul style="list-style-type: none"> • Achieving a rapport with all patients is essential for good medical management • How should I greet a patient to establish a relationship? (even if it is only briefly in a busy casualty or clinic) • What difficulties may arise to prevent this relationship? - eg. a language barrier • Do my patients understand what I am saying? • Am I using too much jargon <p>Activity:</p> <ul style="list-style-type: none"> • Maintain interest in your patient. • Ask questions to establish a relationship (it may be relevant to know what they do for a living and how that impacts on their illness) • Be aware of communication skills scenarios and attend any courses run by your Trust or elsewhere • Be aware patients may not understand medical 	<p>The Lay Member of our Curriculum Sub-committee requested that we improve the advice given in these Communication sections of the Study Guide. This followed her experience as a Lay Examiner in our professional examinations, when she took part in the Communication Station of our OSCEs and was disappointed by the poor skills of some candidates in this section. The revised wording has been produced in close cooperation with the Lay Member and approved by our Subcommittee.</p>

	<ul style="list-style-type: none"> * Be aware of communication skills scenarios and attend any courses run by your Trust or elsewhere * Ask a colleague to observe you talking to a patient * Ensure that you get some multisource feedback from colleagues <p>Reflect:</p> <ul style="list-style-type: none"> * How could a consultation have gone better 		<p>jargon – avoid using it</p> <ul style="list-style-type: none"> • Ask a colleague to observe you talking to a patient • Do I need to attend ‘conversation classes’ to improve my English? • Ensure that you get some multisource feedback from colleagues <p>Reflect:</p> <ul style="list-style-type: none"> • How could a consultation have gone better 	
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Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
4.	<p>Curriculum Study guide for C2 to be amended - C2 Listen</p> <p>Think:</p> <ul style="list-style-type: none"> * How do you listen to a patient? (it is difficult especially in a busy clinic or casualty) * How do you filter relevant information from irrelevant? * How do you draw the consultation to a close <p>Activity:</p> <ul style="list-style-type: none"> * Remember to listen actively and to try and sort the wood out from the trees. * Do not let your mind wander - you might miss something relevant * Try not to repeat anything, unless you really don't understand - it looks and sounds as though you are not listening * Make sure you especially listen to any questions the patient, relative or care may have and 	<p>http://curriculum.rcophth.ac.uk/study-guide/communication</p>	<p>C2 Listen</p> <p>Think:</p> <ul style="list-style-type: none"> • How do you listen to a patient? (it is difficult especially in a busy clinic or casualty) • How do you filter relevant information from irrelevant? • How do you draw the consultation to a close <p>Activity:</p> <ul style="list-style-type: none"> • Remember to listen actively and to try and sort the wood out from the trees. • Do not let your mind wander - you might miss something relevant • Try not to repeat anything, unless you really don't understand - it looks and sounds as though you are not listening • Make sure you especially listen to any questions the patient, relative or carer may have and specifically answer them • Do not allow the patient to wander, however • Clearly indicate the consultation is coming to an end. Check the patient's understanding and close with a summary to include any further action. • Ensure that you sum up the problem and allow the consultation to come to a satisfactory end 	<p>The Lay Member of our Curriculum Sub-committee requested that we improve the advice given in these Communication sections of the Study Guide. This followed her experience as a Lay Examiner in our professional examinations, when she took part in the Communication Station of our OSCEs and was disappointed by the poor skills of some candidates in this section. The revised wording has been produced in close cooperation with the Lay Member and approved by our Subcommittee.</p>

	<p>specifically answer them</p> <ul style="list-style-type: none"> * Do not allow the patient to wander, however * Ensure that you sum up the problem and allow the consultation to come to a satisfactory end * Ask a colleague to sit in with you during a consultation. Ensure that you get some multisource feedback from colleagues <p>Reflect:</p> <ul style="list-style-type: none"> * How could a consultation have gone better? * What questions may have been left unasked/unanswered? <p>Resources:</p> <ul style="list-style-type: none"> * Be aware of communication skills scenarios and attend any courses run by your Trust or elsewhere 		<ul style="list-style-type: none"> • Ask a colleague to sit in with you during a consultation. Ensure that you get some multisource feedback from colleagues <p>Reflect:</p> <ul style="list-style-type: none"> • How could a consultation have gone better? • What questions may have been left unasked/unanswered? <p>Resources:</p> <ul style="list-style-type: none"> • Be aware of communication skills scenarios and attend any courses run by your Trust or elsewhere 	
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Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
5.	<p>Curriculum Study guide for C3 to be amended - C3 Deliver information</p> <p>Think:</p> <ul style="list-style-type: none"> * Information needs to be delivered to the patient, their relatives and carers appropriately and sensitively. How do I do this without confusing the patient or appearing to be insensitive? <p>Activity:</p> <ul style="list-style-type: none"> * Put yourself in the patient's position. If you had the same problem, how would you wish the information to be given? 	<p>http://curriculum.rcophth.ac.uk/study-guide/communication</p>	<p>C3 Deliver information</p> <p>Think:</p> <ul style="list-style-type: none"> • Information needs to be delivered to the patient, their relatives and carers appropriately and sensitively. How do I do this without confusing the patient or appearing to be insensitive? How do I handle challenging questions? <p>Activity:</p> <ul style="list-style-type: none"> • Put yourself in the patient's position. If you had the same problem, how would you wish the information to be given? • Don't talk down to the patient but be aware that you have more knowledge than the patient sometimes needs • Be aware of the impact that this information will 	<p>The Lay Member of our Curriculum Sub-committee requested that we improve the advice given in these Communication sections of the Study Guide. This followed her experience as a Lay Examiner in our professional examinations, when she took part in the Communication Station of our OSCEs and was disappointed by the poor skills of some candidates in this section. The revised wording has been produced in close cooperation with the Lay Member and approved by our Subcommittee.</p>

	<ul style="list-style-type: none"> * Don't talk down to the patient but be aware that you have more knowledge than the patient sometimes needs * Be aware of the impact that this information will have on the patient * Ask a colleague to sit in with you during a consultation * Ensure that you get some multisource feedback from colleagues <p>Reflect:</p> <ul style="list-style-type: none"> * How could a consultation have gone better? * What questions may have been left unasked/unanswered? * Did the patient understand all you told him/her? <p>Resources:</p> <ul style="list-style-type: none"> * Be aware of communication skills scenarios and attend any courses run by your Trust or elsewhere 		<p>have on the patient</p> <ul style="list-style-type: none"> • Be prepared to justify the treatment you recommend. Does the patient fully understand the benefits/risks of your recommendation? • Ask a colleague to sit in with you during a consultation • Ensure that you get some multisource feedback from colleagues <p>Reflect:</p> <ul style="list-style-type: none"> • How could a consultation have gone better? • What questions may have been left unasked/unanswered? • Did the patient understand all you told him/her? <p>Resources:</p> <ul style="list-style-type: none"> • Be aware of communication skills scenarios and attend any courses run by your Trust or elsewhere 	
Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
6.	<p>Curriculum Learning outcome SS6 changed from Description All trainees must be able to perform surgical repair of the cornea, sclera, eyelids, canaliculi and conjunctiva. The technique of repair will be determined by clinical indications and current surgical practice. They must recognise when management requires expert referral. They must be able to adapt their</p>	<p>http://curriculum.rcophth.ac.uk/learning-outcomes/surgical_skills/ss6</p>	<p>SS6 Perform surgical repair of ocular and adnexal tissues after trauma</p> <p>All trainees must be able to perform surgical repair of ocular and adnexal tissues, including the cornea, sclera, eyelids and conjunctiva. They must understand the principles of canalicular repair. The technique of repair will be determined by clinical indications and current surgical practice. They must be able to adapt their technique according to pre-operative findings. They must be able to manage intra-operative and post-operative complications. They must recognise when</p>	<p>Feedback from colleagues revealed that it was impossible to expose all trainees to enough canalicular repairs to allow them to become competent. Our Curriculum Sub-committee discussed the issue and concluded that this was actually unnecessary anyway. However it was felt essential that trainees understand the principles and are able to recognise when onward referral to a subspecialist is required.</p>

	technique according to pre-operative findings. They must be able to manage intra-operative and post-operative complications.		subspecialist assistance is required, ensuring prompt onward referral when necessary.	
7.	Assessment CRS2 WBA Form (see attached document with tracked changes)	http://curriculum.rcophth.ac.uk/assessments/clinical_rating_scale	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	For each of the CRS, OSATS, CBD and DOPS WBA forms there are two main scoring sections; the first has the descriptors "poor", "fair" etc and extends up to but not including the "pass/fail" or "meets expectations/does not meet expectations for the stage of training". This first section was never intended to be for anything other than giving feedback to trainees. In other words, this section is purely formative. The following section contains the summative assessment which is either "pass", "fail" or "meets expectations/does not meet expectations for the stage of training". It is this section that determines whether the trainee needs to repeat this assessment. It is obviously influenced by the formative sections but there was never an intention that a "poor" or two "fails" automatically leads to overall failure. This was an over interpretation of the handbook, which has been revised. The person who decides on the overall passing or failing is the assessor taking everything into account. However, an assessor would need to be prepared to justify a pass if there were lots of "poor" scores on the WBA sheet and vice versa.

Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
8.	Assessment CRS3 WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/clinical_rating_scale	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7
9.	Assessment CRS4 WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/clinical_rating_scale	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7
10.	Assessment CRS5 WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/clinical_rating_scale	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7
Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
11.	Assessment CRS6 WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/clinical_rating_scale	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7
12.	Assessment CRS7 WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/clinical_rating_scale	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7
13.	Assessment CRS8 WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/clinical_rating_scale	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7
14.	Assessment CRS9 WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/clinical_rating_scale	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7
15.	Assessment CRS10 WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/clinical_rating_scale	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7
16.	Assessment CRSret WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/clinical_rating_scale	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7

17.	Assessment OSATS2 WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/osats	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7
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Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
18.	Assessment OSATS3 WBA Form (see attached document with tracked changes)	http://curriculum.rcop.hth.ac.uk/assessments/osats	Delete sentence "(Note: "Pass" requires an overall assessment grade of "Good" and no individual "Poor" grades.)" from the form	See rationale for change 7
19.	Assessment List of Learning Outcomes assessed by MSF : added PS1	http://curriculum.rcop.hth.ac.uk/assessments/multisource_feedback	PS1 and AER3	Original web page was incorrect PS1 has always been assessed by MSF
20.	Assessment OST2 Assessment Checklist	http://curriculum.rcop.hth.ac.uk/assessments/year2-ost#check	Removed requirement for DOPS to assess learning outcome PS1	Original web page was incorrect PS1 is assessed by MSF not DOPS
21.	Curriculum Repaired links to internet resources in Study Guide that did not work	http://curriculum.rcop.hth.ac.uk/study-guide/patient_management		
22.	Curriculum Repaired links to internet resources in Study Guide that did not work	http://curriculum.rcop.hth.ac.uk/study-guide/practical_skills		
23.	Curriculum Repaired links to internet resources in Study Guide that did not work	http://curriculum.rcop.hth.ac.uk/study-guide/health_promotion		
24.	Curriculum Repaired links to internet resources in Study Guide that did not work	http://curriculum.rcop.hth.ac.uk/study-guide/communication		
25.	Curriculum Repaired links to internet resources in Study Guide that did not work	http://curriculum.rcop.hth.ac.uk/study-guide/info_handling		
26.	Curriculum Added new reference to Study Guide for PS1	http://curriculum.rcop.hth.ac.uk/study-guide/practical_skills	New resource added 'Sinclair A, and Ryan B. Low Vision: The Essential Guide for Ophthalmologists. The Guide Dogs for the Blind Association, Reading, (2008) ISBN 978-0-9559268-0-8'	New Booklet published considered an excellent resource

27.	Curriculum Added new reference to Study Guide for AER3	http://curriculum.rcopth.ac.uk/study-guide/attitudes_ethics	New resource added 'Sinclair A, and Ryan B. Low Vision: The Essential Guide for Ophthalmologists. The Guide Dogs for the Blind Association, Reading, (2008) ISBN 978-0-9559268-0-8'	New Booklet published considered an excellent resource
Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
28.	Curriculum Added new reference to Study Guide for PM11	http://curriculum.rcopth.ac.uk/study-guide/patient_management	New resource added 'Sinclair A, and Ryan B. Low Vision: The Essential Guide for Ophthalmologists. The Guide Dogs for the Blind Association, Reading, (2008) ISBN 978-0-9559268-0-8'	New Booklet published considered an excellent resource
29.	Curriculum Amended Study Guide for CA8 deleted http://www.newsmaker.ch/upload/customers/haagstreit/Tono_d_e_f.pdf and added new link	http://curriculum.rcopth.ac.uk/study-guide/clinical_assessment	New link http://www.opt.indiana.edu/riley/HomePage/new_Goldmann_tonometry/2Goldmann_Tonometry.html	Original link no longer worked
30.	Curriculum Amended Study Guide for PM7 deleted DH.gov.uk/plblucations and statistics and added a new link	http://curriculum.rcopth.ac.uk/study-guide/patient_management	New link http://www.dh.gov.uk/en/Publicationsandstatistics/Statistics/DH_077094	Original link no longer worked
31.	Curriculum Amended Study Guide for PM10 deleted 3 links * www.dvla.gov.uk/at_a_glance/ch6_visual.htm * www.caa.co.uk/docs/49/SRG_med_JAR_C2_INITIAL_VISUAL_S * www.policecouldyou.co.uk/default.asp?action=article&ID=27	http://curriculum.rcopth.ac.uk/study-guide/patient_management	New links http://www.dvla.gov.uk/media/pdf/medical/aagv1.pdf and http://www.caa.co.uk/docs/49/SRG_MED_JAR_Classes2InitialVisStds%5B538%5D.pdf	Original links no longer worked
32.	Curriculum Amended Study Guide for PS21 deleted link www.st-marys.nhs.uk/downloads/home/handhygiene.pdf	http://curriculum.rcopth.ac.uk/study-guide/practical_skills	New links www.dh.gov.uk/en/PublicHealth/Flu/PandemicFlu/DH_078752 www.ich.ucl.ac.uk/clinical_information/clinical_guidelines/cpg_guideline_00030	Original link no longer worked

Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
			www.hpa.org.uk/web/HPAwebFile/HPAweb_C/1194947403810	
33.	Curriculum Amended Study Guide for HPDP10 deleted • www.hpa.org.uk/radiation/publications/misc_publications/advice_during_pregnancy.htm	http://curriculum.rcop.hth.ac.uk/study-guide/health_promotion	Added new link www.hpa.org.uk/webw/HPAweb&HPAwebStandard/HPAweb_C/1195733757920?p=1192454969657	Original link no longer worked
34.	Curriculum Amended Study Guide for C5	http://curriculum.rcop.hth.ac.uk/study-guide/communication	Added new link www.gmc-uk.org/guidance/ethical_guidance/consent_guidance/index.asp	Original link no longer worked
35.	Curriculum Amended Study Guide for IH2	http://curriculum.rcop.hth.ac.uk/study-guide/info_handling	Added new link http://careers.bmj.com/careers/advice/view-article.html?id=1747	Original link no longer worked
36.	Curriculum Amended Study Guide for AER2, AER5 - deleted www.medicalprotection.org/medical/united_kingdom/publications/casebook/2003_4_confidence_boxes.aspx ; AER 8 deleted www.mmc.nhs.uk/pages/assessment/msf ; AER 9 deleted www.bma.org.uk/ap.nsf/Content/Appraisal/\$file/Appraisal.pdf ; AER10 deleted www.dti.gov.uk/er/equality/ and www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_086039 ; AER 13 deleted http://www.gmc-uk.org/guidance/library/confidentiality_faq.asp ; AER 14 deleted http://www.mrc.ac.uk/pdf-	http://curriculum.rcop.hth.ac.uk/study-guide/attitudes_ethics	AER 2 Added new link http://www.ethics-network.org.uk/ethical-issues/confidentiality/confidentiality AERR 5 Added www.gmc-uk.org/guidance/current/library/confidentiality_faq.asp ;AER9 added www.appraisalsupport.nhs.uk/ and www.dh.gov.uk/en/Managingyourorganisation/Humanresourcesandtraining/EducationTrainingandDevelopment/Appraisals/index.htm AER 10 added www.bma.org.uk/ap.nsf/content/hubequalityanddiversity and www.dh.gov.uk/PolicyAndGuidance/HumanResourcesAndTraining/ModelEmployer/EqualityAndDiversity/fs/en ; AER13 added www.opsi.gov.uk/Acts/Acts1998/ukpga_19980029_en_1 and www.ico.gov.uk/ ; AER 14 added www.mrc.ac.uk/PolicyGuidance/EthicsAndGovernance/UseofHumanTissue/index.htm and	Original links no longer worked

	tissue_guide_fin.pdf;		http://www.gmc-uk.org/guidance/library/research.asp and www.hta.gov.uk/ and www.opsi.gov.uk/ACTS/acts2004/ukpga_20040030_en_1	
37.	Curriculum Amended Study Guide for HS5 deleted www.healthcareskills.nhs.uk/team-s-leadership.htm	http://curriculum.rcophth.ac.uk/study-guide/health_serv_role	Added www.bristol-inquiry.org.uk/final_report/report/sec2chap22_10.htm	Original links no longer worked
38.	Curriculum Amended Study Guide for all 'Learning Outcomes in Personal Development' section of Curriculum	http://curriculum.rcophth.ac.uk/study-guide/continuing_prof_development	Added http://www.hpc-uk.org/registrants/cpd/ and http://www.gmc-uk.org/education/continuing_professional_development/cpd_guidance.asp	Original links no longer worked
Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
39.	Curriculum Amended Study Guide for learning outcome SS4 changed the activity section under a) Early in Training added a bullet point at the end and b) Late in training added a bullet point at the end	http://curriculum.rcophth.ac.uk/study-guide/surgical_skills	Early in training - additional bullet point: Note that although no specific number of cataract operations is required of trainees, the College advises an indicative minimum number of 50 complete procedures during the first 2 years of training to help ensure adequate progress. A continuous audit of the outcomes of your cataract surgery should be a key part of your practice. Late in training additional bullet point: Note that although no specific number of cataract operations is required of trainees, the College advises an indicative minimum number of 350 complete procedures during the 7 years of training to help ensure satisfactory progress to fully independent practice. These procedures should include the full variety of complex cases; in this context complex cases must include high myopes, cases with previous anterior or posterior segment surgery, cases with previous iritis, unusually hard or soft cataracts, white cataracts, cases with	Agreement from PMETB in May 2008 to include indicative surgical numbers for cataract procedures.

			pseudoexfoliation syndrome, subluxated lenses and post-trauma cases. A continuous audit of the outcomes of your cataract surgery should be a key part of your practice.	
Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
40.	Curriculum Changed learning outcome SS11 Biopsy the temporal artery from a year 3 to a year 7 outcome target	http://curriculum.rcophth.ac.uk/learning-outcomes/surgical_skills/ss11	Target Year of Achievement year 7	Cases are fairly rare so extending the target year of achievement allows more time for trainees to see such a case and achieve the learning outcome.
41.	Assessment Amended Assessments page, changed Guidance for Annual Assessments (Successors to RITA)	http://curriculum.rcophth.ac.uk/assessments/	Guidance for Annual Reviews of Competence Progression (ARCPs)	Ensure terminology compliance
42.	Assessment OST1 Assessment (successor to RITA) What do I need for my OST1 Assessment? Essential By the end of your first year in OST you will be able to assess a patient by taking a clinical history and examination (CA). You will be able to arrange and interpret basic ophthalmic investigations (PI). You will be able to manage common ophthalmic problems under supervision (PM). You will be able to remove a corneal foreign body and irrigate an eye (PS). You will have started to develop basic microsurgical skills and be able to use the operating microscope (SS). You will understand the importance of preventing cross-infection	http://curriculum.rcophth.ac.uk/assessments/year1-ost	OST1 What do I need to achieve during OST1? Essential By the end of OST 1 you will be able to assess a patient by taking a clinical history and examination (CA). You will be able to arrange and interpret basic ophthalmic investigations (PI). You will be able to manage common ophthalmic problems under supervision (PM). You will be able to remove a corneal foreign body and irrigate an eye (PS). You will have started to develop basic microsurgical skills and be able to use the operating microscope (SS). You will understand the importance of preventing cross-infection (HPDP). You will have good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will have adopted appropriate professional attitudes to patients and colleagues and seek feedback on your performance. You will be practising according to the GMC's Duties of a Doctor (AER) and Good	Ensure terminology compliance (removal of reference to "RITA"). We have amended the title wording from "What do I need for my OSTx Assessment" to "What do I need to achieve during OSTx", and altered the detailed wording in the ensuing paragraph (and related checklists) to be consistent with this. This is to allow Deaneries flexibility to cope with situations where the timing of the ARCP does not exactly coincide with the trainee's completion of a particular stage of training.

<p>(HPDP). You will have good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will have adopted appropriate professional attitudes to patients and colleagues and seek feedback on your performance. You will be practising according to the GMC's Duties of a Doctor (AER) and Good Medical Practice guidance (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will be reflecting on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD). Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form A (personal details, training number) * Up to date CV <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Signed copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, Cbd) * Copies of any complaints/letters of thanks * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical</p>		<p>Medical Practice guidance (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will be reflecting on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD). Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form R (personal details, training number) * Up to date CV <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Verified copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, Cbd) - signed forms or e-verification via e-portfolio. * Copies of any complaints/letters of thanks * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Certificate of attendance at College Basic Microsurgical Skills course * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * details of audit projects * details of research <p>In addition</p>	
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	<p>Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Certificate of attendance at College Basic Microsurgical Skills course * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * details of audit projects * details of research <p>In addition</p> <p>You may have achieved some of the curriculum learning outcomes that have a target year of achievement later than year 1 (e.g. you may have passed part 1 FRCOphth). Include evidence of achievement of these learning outcomes in a separate section in your portfolio and ensure that you retain them for your Y2 Annual Assessment.</p> <p>OST1 Assessment checklist: (Click here for printable version)</p> <p>OST1 Assessment checklist:</p>		<p>You may have achieved some of the curriculum learning outcomes that have a target year of achievement later than stage 1 (e.g. you may have passed part 1 FRCOphth). Include evidence of achievement of these learning outcomes in a separate section in your portfolio relating to the appropriate stage of training.</p> <p>OST1 checklist: (Click here for printable version) see attached document with tracked changes</p>	
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Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
43.	<p>Assessment OST2 Assessment (successor to RITA) What do I need for my OST2 Assessment? Essential During the second year of OST you will consolidate all that you learned in Year 1 and acquire more skills and knowledge. By the end of your second year in OST you will be able to assess patients with more complex problems by taking a clinical history and examination. You will be able to examine the ocular fundus using a variety of techniques and perform a cover test and ocular motility examination (CA). You will be able to arrange and interpret most ophthalmic investigations (PI). You will be able to manage basic problems on your own and some more complex ophthalmic problems under supervision (PM). You will be able to perform a number of practical procedures and be able to assess a patient for spectacles (PS). You will have acquired basic microsurgical skills and be able to perform a number of eyelid procedures. You will have completed around 50 cataract operations (SS). You will be able to engage in some health promotion and disease prevention strategies (HPDP). You will have good communication skills with patients, their carers and</p>	<p>http://curriculum.rcophth.ac.uk/assessments/year2-ost</p>	<p>OST2 What do I need to achieve during OST2? Essential During the second stage of OST you will consolidate all that you learned in stage 1 and acquire more skills and knowledge. By the end of OST2 you will be able to assess patients with more complex problems by taking a clinical history and examination. You will be able to examine the ocular fundus using a variety of techniques and perform a cover test and ocular motility examination (CA). You will be able to arrange and interpret most ophthalmic investigations (PI). You will be able to manage basic problems on your own and some more complex ophthalmic problems under supervision (PM). You will be able to perform a number of practical procedures and be able to assess a patient for spectacles (PS). You will have acquired basic microsurgical skills and be able to perform a number of eyelid procedures. You will have completed around 50 cataract operations (SS). You will be able to engage in some health promotion and disease prevention strategies (HPDP). You will have good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will have passed the part 1 FRCOphth examination (PI & BCS). You will have adopted appropriate professional attitudes to patients and colleagues and will have sought feedback on your performance. You will be practising according to the GMC's Duties of a Doctor (AER) and Good Medical Practice guidance (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will reflect on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary</p>	<p>Ensure terminology compliance (removal of reference to "RITA").</p> <p>We have amended the title wording from "What do I need for my OSTx Assessment" to "What do I need to achieve during OSTx", and altered the detailed wording in the ensuing paragraph (and related checklists) to be consistent with this. This is to allow Deaneries flexibility to cope with situations where the timing of the ARCP does not exactly coincide with the trainee's completion of a particular stage of training.</p>

<p>colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will have passed the part 1 FRCOphth examination (PI & BCS). You will have adopted appropriate professional attitudes to patients and colleagues and will have sought feedback on your performance. You will be practising according to the GMC's Duties of a Doctor (AER) and Good Medical Practice guidance (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will reflect on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD).</p> <p>Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form A (personal details, training number) * Up to date CV * Part 1 FRCOphth confirmation <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Signed copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) * Copies of any complaints/letters of thanks * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical</p>		<p>(CPD).</p> <p>Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form R (personal details, training number) * Up to date CV * Part 1 FRCOphth confirmation <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Verified copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) - signed forms or e-verification via e-portfolio. * Copies of any complaints/letters of thanks * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit projects * Details of research <p>In addition</p> <p>You may have achieved some of the curriculum learning outcomes that have a target year of achievement later than stage 2. Include evidence of achievement in these learning outcomes in a separate section in your portfolio relating to the appropriate stage of training.</p>	
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	<p>Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit projects * Details of research <p>In addition</p> <p>You may have achieved some of the curriculum learning outcomes that have a target year of achievement later than year 2. Include evidence of achievement in these learning outcomes in a separate section in your portfolio and ensure that you retain them for your Y2 Annual Assessment.</p> <p>OST2 Assessment checklist:</p>		<p>OST2 checklist: (Click here for printable version) see attached document with tracked changes</p>	
Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
44.	<p>Assessment OST3 Assessment (successor to RITA) What do I need for my OST3 Assessment? Essential During the third year of OST you will consolidate all that you learned in previous years and</p>	<p>http://curriculum.rcophth.ac.uk/assessments/year3-ost</p>	<p>OST3 What do I need to achieve during OST3? Essential During the third stage of OST you will consolidate all that you learned in previous stages and acquire more skills and knowledge. By the end of OST3 you will be able to assess patients with more complex problems by taking a clinical history and</p>	<p>Ensure terminology compliance (removal of reference to "RITA") and reflect change to learning outcome SS11 (moved to a year 7 learning outcome).</p> <p>We have amended the title wording from "What do I need for my OSTx</p>

	<p>acquire more skills and knowledge. By the end of your third year in OST you will be able to assess patients with more complex problems by taking a clinical history and examination (CA). You will be able to arrange and interpret ophthalmic investigations (PI). You will be able to manage all basic and some more complex ophthalmic problems without supervision (PM). You will be able to perform a large number of practical procedures and be able to refract and assess a patient for spectacles. You will have obtained the RCOphth Refraction Certificate (PS). You will have acquired microsurgical skills and have performed around 100 cataract operations in total, in addition to a variety of eyelid procedures. You will be able to perform a temporal artery biopsy. You will be able to perform YAG and argon laser procedures (SS). You will be able to engage in most health promotion and disease prevention strategies (HPDP). You will have good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will have adopted appropriate professional attitudes to patients and colleagues and sought feedback on your performance. You will be</p>		<p>examination (CA). You will be able to arrange and interpret ophthalmic investigations (PI). You will be able to manage all basic and some more complex ophthalmic problems without supervision (PM). You will be able to perform a large number of practical procedures and be able to refract and assess a patient for spectacles. You will have obtained the RCOphth Refraction Certificate (PS). You will have acquired microsurgical skills and have performed around 100 cataract operations in total, in addition to a variety of eyelid procedures. You will be able to perform a temporal artery biopsy. You will be able to perform YAG and argon laser procedures (SS). You will be able to engage in most health promotion and disease prevention strategies (HPDP). You will have good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will have adopted appropriate professional attitudes to patients and colleagues and sought feedback on your performance. You will be practising according to the GMC's Duties of a Doctor (AER) and Good Medical Practice guidance (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will reflect on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD). Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form R (personal details, training number) * Up to date CV * RCOphth refraction certificate <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Verified copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) - signed forms or e-verification via e-portfolio * Copies of any complaints/letters of thanks 	<p>Assessment" to "What do I need to achieve during OSTx", and altered the detailed wording in the ensuing paragraph (and related checklists) to be consistent with this. This is to allow Deaneries flexibility to cope with situations where the timing of the ARCP does not exactly coincide with the trainee's completion of a particular stage of training.</p>
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	<p>practising according to the GMC's Duties of a Doctor (AER) and Good Medical Practice guidance (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will reflect on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD).</p> <p>Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form A (personal details, training number) * Up to date CV * RCOphth refraction certificate <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Signed copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) * Copies of any complaints/letters of thanks * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and</p>		<ul style="list-style-type: none"> * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit projects * Details of research <p>In addition</p> <p>You may have achieved some of the curriculum learning outcomes that have a target year of achievement later than stage 3. Include evidence of achievement of these learning outcomes in a separate section in your portfolio relating to the appropriate stage of training.</p> <p>OST3 Checklist: (Click here for printable version) see attached document with tracked changes</p> <p>Document (Learning Outcome)</p> <p>Number of copies*</p> <p>Date obtained</p> <p>Included in portfolio? Y/N</p> <p>Comment</p> <p>CRS1 (CA1) 2</p> <p>CRSret (PS2) 2</p> <p>CbD (Multiple learning outcomes) 12</p> <p>DOPS (PS5) 2</p> <p>DOPS (PS6) 2</p> <p>DOPS (PS14) 2</p>	
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<p>assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit projects * Details of research <p>In addition</p> <p>You may have achieved some of the curriculum learning outcomes that have a target year of achievement later than year 3. Include evidence of achievement of these learning outcomes in a separate section in your portfolio and ensure that you retain them for your Y4 Annual Assessment.</p> <p>OST3 Assessment Checklist: (Click here for printable version) Document (Learning Outcome) Number of copies* Date obtained Included in portfolio? Y/N Comment</p> <p>CRS1 (CA1) 2 CRSret (PS2) 2 CbD (Multiple learning outcomes) 12 DOPS (PS5) 2 DOPS (PS6) 2 DOPS (PS14) 2 OSATS1 (SS1) 2 OSATS1 (SS4) 2 OSATS1 (SS7) 2 OSATS1 (SS11) 2 DOPS (SS14) 2 DOPS (SS15) 2 DOPS (SS16) 2 MSF report (Multiple learning</p>		<p>OSATS1 (SS1) 2 OSATS1 (SS4) 2 OSATS1 (SS7) 2 DOPS (SS14) 2 DOPS (SS15) 2 DOPS (SS16) 2 MSF report (Multiple learning outcomes) 1 Appraisal record PDPs Logbook Details of leave taken RCOphth refraction certificate CPD diary Any other evidence of performance</p> <p>* You are expected to have more than one assessment for each of these work based assessments. If you have been unable to obtain 2 assessments you must explain the reason for this to your educational supervisor.</p>	
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	<p>outcomes) 1 Appraisal record PDPs Logbook Details of leave taken RCOphth refraction certificate CPD diary Any other evidence of performance * You are expected to have more than one assessment for each of these work based assessments. If you have been unable to obtain 2 assessments you must explain the reason for this to your educational supervisor.</p>			
Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
45.	<p>Assessment OST4 Assessment (successor to RITA) What do I need for my OST4 Assessment? Essential During the fourth year of OST you will consolidate all that you learned in previous years and acquire more skills and knowledge. By the end of your fourth year in OST you will be able to assess patients with more complex problems by taking a clinical history and examination (CA). You will be able to arrange and interpret ophthalmic investigations (PI). You will have experience of working in sub-specialty clinics and have identified a possible area of sub-specialisation for yourself (PM).</p>	<p>http://curriculum.rcophth.ac.uk/assessments/year4-ost</p>	<p>OST4 What do I need to achieve during OST4? Essential During stage 4 of OST you will consolidate all that you learned in previous stages and acquire more skills and knowledge. By the end of OST4 you will be able to assess patients with more complex problems by taking a clinical history and examination (CA). You will be able to arrange and interpret ophthalmic investigations (PI). You will have experience of working in sub-specialty clinics and have identified a possible area of sub-specialisation for yourself (PM). You will be able to perform a large number of practical procedures (PS). You will have acquired a high level of microsurgical skill and be able to perform more complex cataract surgery. You will have performed around 150 cataract operations in total. You will have broadened your surgical and laser skills in at least one sub-specialty area (SS). You will be able to engage in most health promotion and disease</p>	<p>Ensure terminology compliance (removal of reference to "RITA") and reflect change to learning outcome SS11 (moved to a year 7 learning outcome).</p> <p>We have amended the title wording from "What do I need for my OSTx Assessment" to "What do I need to achieve during OSTx", and altered the detailed wording in the ensuing paragraph (and related checklists) to be consistent with this. This is to allow Deaneries flexibility to cope with situations where the timing of the ARCP does not exactly coincide with the trainee's completion of a particular stage of training.</p>

<p>You will be able to perform a large number of practical procedures (PS). You will have acquired a high level of microsurgical skill and be able to perform more complex cataract surgery. You will have performed around 150 cataract operations in total. You will have broadened your surgical and laser skills in at least one sub-specialty area (SS). You will be able to engage in most health promotion and disease prevention strategies (HPDP). You will have good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will be preparing for the part 2 FRCOphth examination (PI & BCS). You will have adopted appropriate professional attitudes to patients and colleagues and sought feedback on your performance. You will be practising according to the GMC's Duties of a Doctor (AER) and Good Medical Practice guidance. You will have begun to develop your role as a doctor in the NHS through involvement in clinical research, audit, teaching and management (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will reflect on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD).</p>		<p>prevention strategies (HPDP). You will have good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will be preparing for the part 2 FRCOphth examination (PI & BCS). You will have adopted appropriate professional attitudes to patients and colleagues and sought feedback on your performance. You will be practising according to the GMC's Duties of a Doctor (AER) and Good Medical Practice guidance. You will have begun to develop your role as a doctor in the NHS through involvement in clinical research, audit, teaching and management (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will reflect on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD). Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form R (personal details, training number) * Up to date CV <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Verified copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) - signed forms or e-verification via e-portfolio. * Copies of any complaints/letters of thanks * Any other written feedback on your performance, personal audit data * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave <ul style="list-style-type: none"> * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates 	
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<p>Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form A (personal details, training number) * Up to date CV <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Signed copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) * Copies of any complaints/letters of thanks * Any other written feedback on your performance, personal audit data * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit project * Details of research <p>In addition</p> <p>You may have achieved some of</p>		<p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit project * Details of research <p>In addition</p> <p>You may have achieved some of the curriculum learning outcomes that have a target year of achievement later than stage 4. Include evidence of achievement of these learning outcomes in a separate section in your portfolio relating to the appropriate stage of training.</p> <p>OST4 checklist: (Click here for printable version) see attached document with tracked changes</p> <p>Document (Learning Outcome)</p> <p>Number of copies*</p> <p>Date obtained</p> <p>Included in portfolio? Y/N</p> <p>Comment</p> <p>CRS1 (CA1) 2</p> <p>CbD (Multiple learning outcomes) 12</p> <p>DOPS PS3# 2</p> <p>DOPS PS7# 2</p> <p>DOPS PS9# 2</p> <p>DOPS PS12# 2</p> <p>DOPS PS15# 2</p> <p>DOPS PS16# 2</p> <p>DOPS PS17# 2</p> <p>DOPS PS19# 2</p> <p>DOPS PS23# 2</p> <p>DOPS PS24# 2</p> <p>OSATS1 SS1 2</p> <p>OSATS1 SS7 2</p> <p>OSATS1 SS4 2</p> <p>OSATS1 SS11# 2</p> <p>DOPS SS15 2</p>	
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	<p>the curriculum learning outcomes that have a target year of achievement later than year 4. Include evidence of achievement of these learning outcomes in a separate section in your portfolio and ensure that you retain them for your Y5 Annual Assessment.</p> <p>OST4 Assessment checklist: (Click here for printable version) Document (Learning Outcome) Number of copies* Date obtained Included in portfolio? Y/N Comment</p> <p>CRS1 (CA1) 2 CbD (Multiple learning outcomes) 12</p> <p>DOPS PS3# 2 DOPS PS7# 2 DOPS PS9# 2 DOPS PS12# 2 DOPS PS15# 2 DOPS PS16# 2 DOPS PS17# 2 DOPS PS19# 2 DOPS PS23# 2 DOPS PS24# 2 OSATS1 SS12 OSATS1 SS7 2 OSATS1 SS4 2 DOPS SS15 2 DOPS SS16 2 OSATS1 SS5# 2 OSATS1 SS6# 2 OSATS1 SS8# 2 OSATS1 SS9# 2 OSATS1 SS10# 2 OSATS1 SS12# 2 OSATS1 SS13# 2 MSF report (Multiple learning</p>		<p>DOPS SS16 2 OSATS1 SS5# 2 OSATS1 SS6# 2 OSATS1 SS8# 2 OSATS1 SS9# 2 OSATS1 SS10# 2 OSATS1 SS12# 2 OSATS1 SS13# 2 MSF report (Multiple learning outcomes) 1 Appraisal record PDPs Logbook Details of leave taken CPD diary Any other evidence of performance</p> <p>* You are expected to have more than one assessment for each of these work based assessments. If you have been unable to obtain 2 assessments you must explain the reason for this to your educational supervisor</p> <p># a proportion number of these LO should be achieved by end of stage 4 if possible. They all must be achieved before the end of stage 7</p>	
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	<p>outcomes) 1 Appraisal record PDPs Logbook Details of leave taken CPD diary Any other evidence of performance</p> <p>* You are expected to have more than one assessment for each of these work based assessments. If you have been unable to obtain 2 assessments you must explain the reason for this to your educational supervisor # a proportion number of these LO should be achieved by end of year 4 if possible. They all must be achieved before the end of year 7</p>			
Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
46.	<p>Assessment OST5 Assessment (successor to RITA) What do I need for my OST5 Assessment? Essential During the fifth year of OST you will consolidate all that you learned in previous years and acquire more skills and knowledge. By the end of your fifth year in OST you will be able to assess patients with complex problems by taking a clinical history and examination (CA). You will be able to arrange and interpret ophthalmic investigations</p>	<p>http://curriculum.rcophth.ac.uk/assessments/year5-ost</p>	<p>OST5 What do I need to achieve during OST5? Essential During stage five of OST you will consolidate all that you learned in previous stages and acquire more skills and knowledge. By the end of OST5 you will be able to assess patients with complex problems by taking a clinical history and examination (CA). You will be able to arrange and interpret ophthalmic investigations (PI). You will be able to manage complex ophthalmic problems with limited supervision. You will have experience of working in sub-specialty clinics and have identified a possible area of sub-specialisation for yourself (PM). You will be able to perform most practical procedures and be able to refract and assess a</p>	<p>Ensure terminology compliance (removal of reference to "RITA") and reflect change to learning outcome SS11 (moved to a year 7 learning outcome).</p> <p>We have amended the title wording from "What do I need for my OSTx Assessment" to "What do I need to achieve during OSTx", and altered the detailed wording in the ensuing paragraph (and related checklists) to be consistent with this. This is to allow Deaneries flexibility to cope with situations where the timing of the ARCP does not exactly coincide with</p>

	<p>(PI). You will be able to manage complex ophthalmic problems with limited supervision. You will have experience of working in sub-specialty clinics and have identified a possible area of sub-specialisation for yourself (PM). You will be able to perform most practical procedures and be able to refract and assess a patient for spectacles (PS). You will have acquired a high level of microsurgical skill and be able to perform complex cataract surgery. You will have performed around 200 cataract operations in total and be able to complete a list of cases unsupervised. You will be able to manage surgical complications. You will have broadened your surgical and laser skills in more than one sub-specialty area (SS). You will be able to engage in most health promotion and disease prevention strategies (HPDP). You will have very good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will be preparing for or have passed the Part 2 FRCOphth examination (PI & BCS). You will have adopted appropriate professional attitudes to patients and colleagues and sought feedback on your performance. You will be practising according to the GMC's Duties of a Doctor (AER) and</p>		<p>patient for spectacles (PS). You will have acquired a high level of microsurgical skill and be able to perform complex cataract surgery. You will have performed around 200 cataract operations in total and be able to complete a list of cases unsupervised. You will be able to manage surgical complications. You will have broadened your surgical and laser skills in more than one sub-specialty area (SS). You will be able to engage in most health promotion and disease prevention strategies (HPDP). You will have very good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will be preparing for or have passed the Part 2 FRCOphth examination (PI & BCS). You will have adopted appropriate professional attitudes to patients and colleagues and sought feedback on your performance. You will be practising according to the GMC's Duties of a Doctor (AER) and Good Medical Practice guidance. You will have begun to develop your role as a doctor in the NHS through involvement in clinical research, audit, teaching and management (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will reflect on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD). Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form R (personal details, training number) * Up to date CV <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Verified copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) - signed forms or e-verification via e-portfolio * Copies of any complaints/letters of thanks * Any other written feedback on your 	<p>the trainee's completion of a particular stage of training.</p>
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<p>Good Medical Practice guidance. You will have begun to develop your role as a doctor in the NHS through involvement in clinical research, audit, teaching and management (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will reflect on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD). Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form A (personal details, training number) * Up to date CV <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Signed copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) * Copies of any complaints/letters of thanks * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates 		<p>performance</p> <ul style="list-style-type: none"> * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit projects * Details of research <p>In addition</p> <p>You may have achieved some of the curriculum learning outcomes that have a target year of achievement later than stage 5. Include evidence of achievement of these learning outcomes in a separate section in your portfolio relating to the appropriate stage of training.</p> <p>OST5 checklist (Click here for printable version) see attached document with tracked changes</p> <p>Document (Learning Outcome)</p> <p>Number of copies*</p> <p>Date obtained</p> <p>Included in portfolio? Y/N</p> <p>Comment</p> <p>CRS1 (CA1) 2</p> <p>CbD (Multiple learning outcomes) 12</p> <p>DOPS PS3# 2</p> <p>DOPS PS7# 2</p> <p>DOPS PS9# 2</p> <p>DOPS PS12# 2</p> <p>DOPS PS15# 2</p>	
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<p>Teaching, training, appraising and assessing * Details of involvement in teaching with feedback Health and Probity * A statement regarding personal health and probity Research and audit * Details of audit projects * Details of research In addition You may have achieved some of the curriculum learning outcomes that have a target year of achievement later than year 5. Include evidence of achievement of these learning outcomes in a separate section in your portfolio and ensure that you retain them for your Y6 Annual Assessment. OST5 Assessment checklist (Click here for printable version) Document (Learning Outcome) Number of copies* Date obtained Included in portfolio? Y/N Comment CRS1 (CA1) 2 CbD (Multiple learning outcomes) 12 DOPS PS3# 2 DOPS PS7# 2 DOPS PS9# 2 DOPS PS12# 2 DOPS PS15# 2 DOPS PS16# 2 DOPS PS17# 2 DOPS PS19# 2 DOPS PS23# 2 DOPS PS24# 2 OSATS1 SS1 2</p>		<p>DOPS PS16# 2 DOPS PS17# 2 DOPS PS19# 2 DOPS PS23# 2 DOPS PS24# 2 OSATS1 SS1 2 OSATS1 SS7 2 OSATS1 SS4 2 DOPS SS15 2 DOPS SS16 2 OSATS1 SS5# 2 OSATS1 SS6# 2 OSATS1 SS8# 2 OSATS1 SS9# 2 OSATS1 SS10# 2 OSATS1 SS11# 2 OSATS1 SS12# 2 OSATS1 SS13# 2 MSF report (Multiple learning outcomes) 1 Appraisal record PSPs Logbook Details of leave taken CPD diary Any other evidence of performance * You are expected to have more than one assessment for each of these work based assessments. If you have been unable to obtain 2 assessments you must explain the reason for this to your educational supervisor # a proportion number of these LO should be achieved by end of stage 5 if possible. They all must be achieved before the end of stage 7</p>	
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	<p>OSATS1 SS7 2 OSATS1 SS4 2 DOPS SS15 2 DOPS SS16 2 OSATS1 SS5# 2 OSATS1 SS6# 2 OSATS1 SS8# 2 OSATS1 SS9# 2 OSATS1 SS10# 2 OSATS1 SS12# 2 OSATS1 SS13# 2 MSF report (Multiple learning outcomes) 1 Appraisal record PSPs Logbook Details of leave taken CPD diary Any other evidence of performance * You are expected to have more than one assessment for each of these work based assessments. If you have been unable to obtain 2 assessments you must explain the reason for this to your educational supervisor # a proportion number of these LO should be achieved by end of year 5 if possible. They all must be achieved before the end of year 7</p>			
Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
47.	<p>Assessment OST6 Assessment (successor to RITA) What do I need for my OST6 Assessment? Essential During the sixth year of OST you</p>	<p>http://curriculum.rcop.hth.ac.uk/assessments/year6-ost</p>	<p>OST6 What do I need to achieve during OST6? Essential Duringstage six of OST you will have consolidated all that you have learned in previous stages and acquired more skills and knowledge. By the end of</p>	<p>Ensure terminology compliance (removal of reference to "RITA") and reflect change to learning outcome SS11 (moved to a year 7 learning outcome).</p>

	<p>will have consolidated all that you have learned in year 5 and acquired more skills and knowledge. By the end of your sixth year in OST you will be able to assess patients with complex problems by taking a clinical history and examination (CA). You will be able to arrange and interpret ophthalmic investigations (PI). You will be able to manage complex ophthalmic problems with limited supervision. You will have experience of working in sub-specialty clinics and have identified one or more Trainee Selected Components (TSC) to pursue (PM). You will be able to perform most practical procedures and be able to refract and assess a patient for spectacles (PS). You will have acquired a high level of microsurgical skill and be able to perform complex cataract surgery. You will have performed around 200 cataract operations and be able to complete a list of cases unsupervised. You will be able to manage surgical complications. You will have broadened your surgical and laser skills in more than one sub-specialty area. (SS) You will be able to engage in most health promotion and disease prevention strategies. (HPDP) You will have very good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively</p>		<p>OST6 you will be able to assess patients with complex problems by taking a clinical history and examination (CA). You will be able to arrange and interpret ophthalmic investigations (PI). You will be able to manage complex ophthalmic problems with limited supervision. You will have experience of working in sub-specialty clinics and have identified one or more Trainee Selected Components (TSC) to pursue (PM). You will be able to perform most practical procedures and be able to refract and assess a patient for spectacles (PS). You will have acquired a high level of microsurgical skill and be able to perform complex cataract surgery. You will have performed around 200 cataract operations and be able to complete a list of cases unsupervised. You will be able to manage surgical complications. You will have broadened your surgical and laser skills in more than one sub-specialty area. (SS) You will be able to engage in most health promotion and disease prevention strategies. (HPDP) You will have very good communication skills with patients, their carers and colleagues (C). You will be maintaining a training portfolio and be able to use IT effectively (IH). You will be preparing for or have passed the part 2 FRCOphth examination (PI & BCS). You will have adopted appropriate professional attitudes to patients and colleagues and seek feedback on your performance. You will be practicing according to the GMC's Duties of a Doctor (AER) and Good Medical Practice guidance. You will have begun to develop your role as a doctor in the NHS through involvement in clinical research, audit, teaching and management (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will reflect on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD). Your portfolio must contain the following documents (see checklist for full details): General information</p>	<p>We have amended the title wording from "What do I need for my OSTx Assessment" to "What do I need to achieve during OSTx", and altered the detailed wording in the ensuing paragraph (and related checklists) to be consistent with this. This is to allow Deaneries flexibility to cope with situations where the timing of the ARCP does not exactly coincide with the trainee's completion of a particular stage of training.</p>
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<p>(IH). You will be preparing for or have passed the part 2 FRCOphth examination (PI & BCS). You will have adopted appropriate professional attitudes to patients and colleagues and seek feedback on your performance. You will be practicing according to the GMC's Duties of a Doctor (AER) and Good Medical Practice guidance. You will have begun to develop your role as a doctor in the NHS through involvement in clinical research, audit, teaching and management (HS). You will be aware of your limits as an ophthalmologist and always seek help where necessary. You will reflect on your clinical work and be actively involved in your own learning by keeping a reflective CPD diary (CPD). Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form A (personal details, training number) * Up to date CV <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Signed copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) * Copies of any complaints/letters of thanks * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical</p>		<ul style="list-style-type: none"> * Form R (personal details, training number) * Up to date CV <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Verified copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) - signed forms or e-verification via e-portfolio * Copies of any complaints/letters of thanks * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit projects * Details of research <p>In addition</p> <p>You will have achieved most of the curriculum learning outcomes that have a target year of achievement of year 7. Include evidence of achievement of these learning outcomes in a separate section in your portfolio relating to the appropriate stage of training.</p> <p>OST6 checklist: (Click here for printable version) see attached document with tracked changes</p> <p>Document (Learning Outcome) Number of copies* Date obtained</p>	
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<p>Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit projects * Details of research <p>In addition</p> <p>You will have achieved most of the curriculum learning outcomes that have a target year of achievement of Year 7. Include evidence of achievement of these learning outcomes in a separate section in your portfolio and ensure that you retain them for your Y7 Annual Assessment.</p> <p>OST6 Assessment checklist: (Click here for printable version) Document (Learning Outcome) Number of copies* Date obtained Included in portfolio? Y/N Comment</p> <p>CRS1 (CA1) 2 CdD (Multiple learning outcomes) 12 DOPS PS3# 2 DOPS PS7# 2</p>		<p>Included in portfolio? Y/N</p> <p>Comment</p> <p>CRS1 (CA1) 2 CdD (Multiple learning outcomes) 12 DOPS PS3# 2 DOPS PS7# 2 DOPS PS9# 2 DOPS PS12# 2 DOPS PS15# 2 DOPS PS16# 2 DOPS PS17# 2 DOPS PS19# 2 DOPS PS23# 2 DOPS PS24# 2 OSATS1 SS1 2 OSATS1 SS7 2 OSATS1 SS4 2 DOPS SS15 2 DOPS SS16 2 OSATS1 SS5# 2 OSATS1 SS6# 2 OSATS1 SS8# 2 OSATS1 SS9# 2 OSATS1 SS10# 2 OSATS1 SS11# 2 OSATS1 SS12# 2 OSATS1 SS13# 2 MSF report (Multiple learning outcomes) 1 Appraisal record PDPs Logbook Details of leave taken CPD diary Any other evidence of performance</p> <p>* You are expected to have more than one assessment for each of these work based assessments. If you have been unable to obtain 2 assessments you must explain the reason for this to your educational supervisor</p> <p># a proportion number of these LO should be achieved by end of stage 6 if possible. They all</p>	
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<p>DOPS PS9# 2 DOPS PS12# 2 DOPS PS15# 2 DOPS PS16# 2 DOPS PS17# 2 DOPS PS19# 2 DOPS PS23# 2 DOPS PS24# 2 OSATS1 SS1 2 OSATS1 SS7 2 OSATS1 SS4 2 DOPS SS15 2 DOPS SS16 2 OSATS1 SS5# 2 OSATS1 SS6# 2 OSATS1 SS8# 2 OSATS1 SS9# 2 OSATS1 SS10# 2 OSATS1 SS12# 2 OSATS1 SS13# 2 MSF report (Multiple learning outcomes) 1 Appraisal record PDPs Logbook Details of leave taken CPD diary Any other evidence of performance * You are expected to have more than one assessment for each of these work based assessments. If you have been unable to obtain 2 assessments you must explain the reason for this to your educational supervisor # a proportion number of these LO should be achieved by end of year 6 if possible. They all must be achieved before the end of year 7</p>		<p>must be achieved before the end of stage 7</p>	
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Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
48.	<p>Assessment OST7 Assessment (successor to RITA) What do I need for my OST7 Assessment? Essential By the end of year 7 in OST you will have completed all the curriculum learning outcomes. You will be able to practice as a general ophthalmologist as part of a multidisciplinary team. You will have passed the part 2 FRCOphth examination. You will have identified a sub-specialty within ophthalmic practice and have agreed how your training will enable you to practice independently as a sub-specialist. You will have completed one or more Trainee Selected Components (TSC). You will be able to assess a patient clinically (CA), order and interpret appropriate investigations (PI) and then manage the patient's clinical care (PM) based upon an understanding of basic and clinical sciences (BCS). You will be competent in a range of practical (PS) and surgical skills (SS). You are able to communicate effectively with a patient and other individuals important in that patient's care (C)</p>	<p>http://curriculum.rcophth.ac.uk/assessments/year7-ost</p>	<p>OST7 What do I need for my OST7 ARCP? Essential By the end of stage 7 in OST you will have completed all the curriculum learning outcomes. You will be able to practice as a general ophthalmologist as part of a multidisciplinary team. You will have passed the part 2 FRCOphth examination. You will have identified a sub-specialty within ophthalmic practice and have agreed how your training will enable you to practice independently as a sub-specialist. You will have completed one or more Trainee Selected Components (TSC). You will be able to assess a patient clinically (CA), order and interpret appropriate investigations (PI) and then manage the patient's clinical care (PM) based upon an understanding of basic and clinical sciences (BCS). You will be competent in a range of practical (PS) and surgical skills (SS). You are able to communicate effectively with a patient and other individuals important in that patient's care (C) and practice with appropriate attitudes and ethics (AER). As a healthcare professional working in a multidisciplinary team, you will be aware of the doctor's role within the health and social services (HS) and are able to manage information effectively, efficiently and confidentially (IH). You can exercise appropriate decision making skills, clinical reasoning and judgment (DMCRJ) and are able to engage in health promotion and disease prevention (HPDP) and clinical teaching. You are aware of your limitations in terms of knowledge, experience and skills and</p>	<p>Ensure terminology compliance (removal of reference to "RITA") and reflect change to learning outcome SS11 (moved to a year 7 learning outcome).</p> <p>We have amended the title wording from "What do I need for my OSTx Assessment" to "What do I need to achieve during OSTx", and altered the detailed wording in the ensuing paragraph (and related checklists) to be consistent with this. This is to allow Deaneries flexibility to cope with situations where the timing of the ARCP does not exactly coincide with the trainee's completion of a particular stage of training.</p>

<p>and practice with appropriate attitudes and ethics (AER) .As a healthcare professional working in a multidisciplinary team, you will be aware of the doctor's role within the health and social services (HS) and are able to manage information effectively, efficiently and confidentially (IH). You can exercise appropriate decision making skills, clinical reasoning and judgment (DMCRJ) and are able to engage in health promotion and disease prevention (HPDP) and clinical teaching. You are aware of your limitations in terms of knowledge, experience and skills and you always practice within these limits. You are prepared to refer patients to other practitioners where appropriate, whether for diagnosis, treatment or support. You have an aptitude for and commitment to continuing personal development (CPD). Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form A (personal details, training number) * Up to date CV * Part 2 FRCOphth certificate <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Signed copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) * Copies of any complaints/letters of thanks 		<p>you always practice within these limits. You are prepared to refer patients to other practitioners where appropriate, whether for diagnosis, treatment or support. You have an aptitude for and commitment to continuing personal development (CPD).</p> <p>Your portfolio must contain the following documents (see checklist for full details):</p> <p>General information</p> <ul style="list-style-type: none"> * Form R (personal details, training number) * Up to date CV * Part 2 FRCOphth certificate <p>Good Clinical Care/Relationships with patients/Working with colleagues</p> <ul style="list-style-type: none"> * Verified copies of your work based assessment forms (CRS, DOPS, OSATS, MSF, CbD) - signed forms or e-verification via e-portfolio * Copies of any complaints/letters of thanks * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit projects * Details of research <p>OST7 checklist: (Click here for printable version) see attached document with tracked changes</p>	
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<ul style="list-style-type: none"> * Any other written feedback on your performance * Logbook of experience <p>Maintaining Good Medical Practice</p> <ul style="list-style-type: none"> * Appraisal documents and personal development plans * CPD/reflective learning diary/details of study leave * Any Trust certificates (e.g. CPR, BLS etc) * Signed copies of foundation training certificates <p>Teaching, training, appraising and assessing</p> <ul style="list-style-type: none"> * Details of involvement in teaching with feedback <p>Health and Probity</p> <ul style="list-style-type: none"> * A statement regarding personal health and probity <p>Research and audit</p> <ul style="list-style-type: none"> * Details of audit projects * Details of research <p>OST7 Assessment checklist: (Click here for printable version)</p> <p>Document (Learning Outcomes) Number of copies*</p> <p>Date obtained</p> <p>Included in portfolio? Y/N</p> <p>Comment</p> <p>CRS1 (CA1) 2</p> <p>CbD (Multiple learning outcomes) 12</p> <p>DOPS PS7# 2</p> <p>DOPS PS9# 2</p> <p>DOPS PS12# 2</p> <p>DOPS PS15# 2</p> <p>DOPS PS16# 2</p> <p>DOPS PS17# 2</p> <p>DOPS PS19# 2</p> <p>DOPS PS23# 2</p>		<p>Document (Learning Outcomes) Number of copies*</p> <p>Date obtained</p> <p>Included in portfolio? Y/N</p> <p>Comment</p> <p>CRS1 (CA1) 2</p> <p>CbD (Multiple learning outcomes) 12</p> <p>DOPS PS3# 2</p> <p>DOPS PS7# 2</p> <p>DOPS PS9# 2</p> <p>DOPS PS12# 2</p> <p>DOPS PS15# 2</p> <p>DOPS PS16# 2</p> <p>DOPS PS17# 2</p> <p>DOPS PS19# 2</p> <p>DOPS PS23# 2</p> <p>DOPS PS24# 2</p> <p>OSATS1 SS1 2</p> <p>OSATS1 SS7 2</p> <p>OSATS1 SS4 2</p> <p>DOPS SS15 2</p> <p>DOPS SS16 2</p> <p>OSATS1 SS5# 2</p> <p>OSATS1 SS6# 2</p> <p>OSATS1 SS8# 2</p> <p>OSATS1 SS9# 2</p> <p>OSATS1 SS10# 2</p> <p>OSATS1 SS11# 2</p> <p>OSATS1 SS12# 2</p> <p>OSATS1 SS13# 2</p> <p>MSF report (Multiple learning outcomes) 1</p> <p>Appraisal record</p> <p>PDPs</p> <p>Logbook</p> <p>FRCOphth certificate</p> <p>Details of leave taken</p> <p>CPD diary</p> <p>Any other evidence of performance</p> <p>* You are expected to have more than one assessment for each of these work based assessments. If you have been unable to obtain 2</p>	
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<p>DOPS PS24# 2 OSATS1 SS1 2 OSATS1 SS7 2 OSATS1 SS4 2 DOPS SS15 2 DOPS SS16 2 OSATS1 SS5# 2 OSATS1 SS6# 2 OSATS1 SS8# 2 OSATS1 SS9# 2 OSATS1 SS10# 2 OSATS1 SS12# 2 OSATS1 SS13# 2 MSF report (Multiple learning outcomes) 1 Appraisal record PDPs Logbook FRCOphth certificate Details of leave taken CPD diary Any other evidence of performance</p> <p>* You are expected to have more than one assessment for each of these work based assessments. If you have been unable to obtain 2 assessments you must explain the reason for this to your educational supervisor # a proportion number of these LO will have been achieved before Y7. They all must be achieved by the end of year</p>		<p>assessments you must explain the reason for this to your educational supervisor # a proportion number of these LO will have been achieved before OST7. They all must be achieved by the end of OST7.</p>	
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Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
49.	Assessment Amended section on DOPS assessments changed sentence '....The ultimate decision as to how many are appropriate will be the responsibility of the RITA panel.'	http://curriculum.rcop.hth.ac.uk/assessments/dops	The ultimate decision as to how many are appropriate will be the responsibility of the ARCP panel.	Terminology Compliance
50.	Assessment Amended section on OSATS assessments changed sentence '.....The ultimate decision as to how many are appropriate will be the responsibility of the RITA panel.' and changed target year if achievement for learning outcome SS11 from year 3 to year 7	http://curriculum.rcop.hth.ac.uk/assessments/osats	The ultimate decision as to how many are appropriate will be the responsibility of the ARCP panel. In the table of learning outcomes SS11 is now noted as TYA 7.	Terminology Compliance and reflect change of TYA for SS11.
51.	Annual Assessment Guidance (successor to RITA) It is important that trainers and trainees both understand what is required at the time of each Annual Assessment (successor to RITA). Details are provided in the following links: What do I need for my OST1 Assessment? What do I need for my OST2 Assessment? What do I need for my OST3 Assessment? What do I need for my OST4 Assessment? What do I need for my OST5 Assessment? What do I need for my OST6 Assessment?	http://curriculum.rcop.hth.ac.uk/assessments/rita_guide	Annual Review of Competence Progression (ARCP) Guidance It is important that trainers and trainees both understand what is required at the time of each Annual Review of Competence Progression (ARCP). Details are provided in the following links: What do I need to achieve during OST1? What do I need to achieve during OST2? What do I need to achieve during OST3? What do I need to achieve during OST4? What do I need to achieve during OST5? What do I need to achieve during OST6? What do I need to achieve during OST7?	Terminology compliance We have amended the title wording from "What do I need for my OSTx Assessment" to "What do I need to achieve during OSTx", and altered the detailed wording in the ensuing paragraph (and related checklists) to be consistent with this. This is to allow Deaneries flexibility to cope with situations where the timing of the ARCP does not exactly coincide with the trainee's completion of a particular stage of training.

	What do I need for my OST7 Assessment?			
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Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
52.	Assessment Section 2 c (i) Part 1 Fellowship of the Royal College of Ophthalmologistsit consists of two single best answer (of four) multiple choice question papers and a constructed response paper (CRQ).	PMETB Assessment system approval application form submitted 26 February 2007 page 4 section 2 c (i)it consists of one single best answer (of four) multiple choice question paper and a constructed response paper.	This is a correction there was never a second MCQ paper.
53.	Assessment 2 c (ii) Refraction Certificate The Refraction Certificate is a single 30 minute OSCE in which the candidate assesses a patient for spectacles.	PMETB Assessment system approval application form submitted 26 February 2007 page 4 section 2 c (ii)	The examination will consist of the following assessments: <ul style="list-style-type: none"> • Practical examination in Refraction Candidates will spend 30 minutes with one patient in the company of the examiners, 2 clinical ophthalmologists. They will be expected to assess the patient's requirements for glasses by objective and subjective means and write an appropriate prescription. • Assessment in Focimetry Candidates will be expected to perform an accurate focimetry of a pair of glasses. • Assessment in Retinoscopy Candidates will be expected to perform an accurate retinoscopy on the model eye 	To ensure high level of competence the College added focimetry assessment to the Refraction Certificate as it is not assessed elsewhere in the assessment system for the Curriculum. The retinoscopy of the Model eye was introduced as there were concerns that only having one refraction assessment during training did not allow sufficient validation of competence and the additional model eye assessment allows for the varied difficulty range in cases that could be seen under examination conditions to reflect expected practice. The model eye can also be validated and acceptable levels of error agreed in advance.

Box reference	Minor changes made	Page reference in original document*	Proposed new wording	Rationale for changes made
54.	<p>Assessment section 2 c (iii) Part 2 Fellowship of the Royal College of Ophthalmologiststhe entry requirement for this examination is a pass in the part 1 FRCOphth and the Refraction Certificate. During transition trainees with the part 2 or part 3 MRCOphth examinations can elect to sit this examination to achieve Fellowship of the Royal College of Ophthalmologists.</p>	<p>PMETB Assessment system approval application form submitted 26 February 2007 page 4 section 2 c (iii) and section in section 3F page 11.</p>	<ul style="list-style-type: none"> Those trainees who possess the full MRCSEd (Ophthalmology) be treated in the same way as those trainees who have the full MRCOphth and are therefore allowed to sit the new Part 2 FRCOphth or to take the old Fellowship Assessment which will continue for as long as trainees wish to sit it. Success in either of these examinations will allow them to use the post-nominals FRCOphth. Those trainees who possess the Part 2 MRCSEd be treated in the same way as those trainees who have the Part 2 MRCOphth and be allowed to sit the new Part 2 FRCOphth. Those trainees who possess the Part 1 MRCSEd be treated in the same way as those trainees who have the Part 1 MRCOphth. Trainees who have not passed the Part 2 MRCOphth or Part 2 MRCSEd by Autumn 2008 are required to pass the Part 1 FRCOphth examination in order to progress in the new examination structure. 	<p>Initially, both the RCOphth and the Royal College of Surgeons of Edinburgh (RCSEd) were planning to offer examinations to their respective trainees both using the RCOphth curriculum. The applications for this process were both submitted to PMETB for approval. After some negotiation it was felt by both the RCOphth and the RCSEd that the only examinations to be used by UK trainees should be those offered by the RCOphth. The RCSEd subsequently withdrew its application to PMETB.</p> <p>As a consequence of this there are some trainees who have already acquired some qualifications and passed examinations from the RCSEd who may be compromised as regards gaining further qualifications. This is because there is currently no reciprocity offered to trainees from the RCOphth who have passed RCSEd examinations.</p> <p>In order not to jeopardise those trainees who already possess examinations and qualifications from the RCSEd it has been agreed that the RCOphth offer temporary reciprocity</p>

[* please stipulate whether this refers to the curriculum or the assessment system]

Section 3. Details of proposed changes for the forthcoming period

Please use this section to inform PMETB of any changes proposed for the forthcoming reporting period as far as the college/faculty is aware.

Box reference	Proposed changes	Page reference in original document*	Proposed new wording	Rationale for changes proposed
1.				
2.				
3.				
4.				

[* please stipulate whether this refers to the curriculum or the assessment system]

Section 4. Declaration

I confirm that the information given on this annual college summary form is correct and I understand that failure to disclose relevant information may result in the curriculum and/or assessment system no longer being approved.

Signature: Kathy Evans

Date: 16 January 2009

Position held: Chief Executive

This form must be submitted electronically to: curriculum.eval@pmetb.org.uk

And in hard copy (1 copy) to: Curriculum & Evaluation, Postgraduate Medical Education & Training Board Hercules House, Hercules Road, London, SE1 7DU