

## School of Ophthalmology ST4-6 Passport + Checklist

Trainee Name										
Trainee Level										
Trust										
Education	al su	perv	visor							
CCT Date										
Exams				Part 1	Refrac	tion 🗆 Pa	art 2 Writ	ten 🗆 Pa	art2 Clin	ical 🗆
Completion of Form by:		n by:								
Date Com	plete	ed:								
	ST1		ST	ST	ST	ST	ST	ST		
ARCP outcome										
	ı			•						
LOGBOOK	SUN	ИΜΑ	RY							
Cataracts		No		Others		No			No	
Total P/PS (350	0)			Squints (2	20)		Gra	Graft assist (6)		
PC Rupture % ( year)	last			Lids (40)		VR assist (20)				
Manage vit loss		Ptosis (3)			Re	t Laser (?6/40)	)			
Sup Juniors			Glaucoma	a (30)						
Cataract Audit	(1)			Cornea G	lue (2)			auma inc >/=1 neo-scleral (2		
Evisc + Enuc (2)	)			TAB (2)			Ma	anage List (2)		



TRAININGT	IMELINE					
Start date	End date	Period Type	Location/	WTE	Months	Months
Day/mth/yr	Day/mth/yr	Clinical training/Stat	Trust	(%)		Counting
		leave/OOPC/OOPR/OOPE/Additional				to
		training time/ shielding/ redeployed				training
	1	L	1			1

CV Summary Totals are for ALL years of training					
TSC Preference					
OOPR Plans	Yes/No	Details			
Any Training Targets to meet curriculum/ yearly requirements	Yes/No	Details			
Total Prizes		Total Case Reports		Total Papers	
Total Presentations		Teaching/Leadership Qualifications		Other	
Leadership in 8 domains	managing medico-le training [	egal □ confidentiality and data		project managem	

Trainees should complete Sections 1-7 prior to the ES meeting. Your Educational Supervisor will fill in the Yes/No column of sections 1-7, and sections 8-9

Section 1 Surgical Log Book Review		Action to be taken Yes/No
Is log book on eportfolio in the following formats?	☐ ESR logbook format	





No. of categories would would	Comments
No. of cataracts performed	Comments
Derogation-There are no cumulative numbers	
expected this year for outcome 10.1 ie covid	
affected opportunities	
For an outcome 1 the usual expected numbers	
would be required	
i.e. 190 by ST4, 260 by ST5, 330 by ST6.	
<b>OST4:</b> RCOPhth. derogation 50 are required for	
progression to OST4 (e.g. if shielding and no	
opportunity 10.1) would have outcome 3 if not	
covid related low surgical numbers)	
In London for outcome 1 would need more than	
190 cataracts	
OST6: No requirement for OST6 but plans must	
be in place to ensure the trainee will achieve	
targets by the end of OST7. (If less than 280 at	
end of ST6 consider outcome 10.2 or 3)	
Where CCT target cannot be met within the	
existing plans, an outcome 10.2 or 3 may be	
necessary to extend training before the start of	
the TSC	
the 130	
PC rupture rate	Comments (explore if >4%)
·	, , ,
Is there evidence in the logbook that trainee	Comments
	i Comments
I has managed complication of cataract surgery	Comments
has managed complication of cataract surgery	Comments
i.e. PC rupture and anterior vitrectomy?	
i.e. PC rupture and anterior vitrectomy?  EPA x2 Performed and able to complete to	Comments
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(minimum of 6 assist)		
Glaucoma requirements	Comments	
Paeds/strab requirements	Comments	
Neuro requirements	Comments	

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Section 2	Action to be
Eportfolio HST Competencies	taken Yes/No
The relevant subspecialty WBAs are completed on e-portfolio and minimum required	
procedures are in logbook	
☐ 2 x CRS1 History (CA1 – Take a focused clinical history) (x2 and those deferred from OST3/4/5 for outcome 1, this included CRSRet)	
□ CbD Case Based Discussion x 8 for outcome 10.1, maintain requirement for full coverage of special interest throughout training. No requirement to 'catch up' for this year. Less than 8 will get outcome 2 if lack of progress with concerns. Assessor should be a consultant and the difficulty of these cases must reflect your seniority	
☐ 2 x OSATS1 Cataract (SS4 – Perform cataract surgery) x2 for outcome 1	
OST4: <b>only</b> if there has been not cataract surgical opportunity (outcome 10.1). However, if SS4 was deferred from ST3 it must now be complete.	
OST5: can be deferred to OST6 <b>only</b> if there has been no cataract surgical opportunity (outcome 10.1). However, if SS4 was deferred from ST4 it <b>must</b> now be complete	
OST6: can be deferred to OST7 <b>only</b> if there has been no cataract surgical opportunity (outcome 10.1). However, if SS4 was deferred from ST5 it <b>must</b> now be complete.	
Outcome 2 if lack of progress and concerns	
☐ 2 x OSATS1 Surgical Skills (SS1 – Demonstrate a wide range of surgical skills) X2 for outcome 1	
OST4: including those deferred from OST3 should be complete OST5: including those deferred from OST4 should be complete OST6: including those deferred from OST5 should be complete	
Outstanding OSATS should be documented in the Action Plan to complete at the subsequent ARCP.	
Less than 2 will get outcome 2	
Work Based Assessments	



These are minimum annual WBAs for each year ST4, ST5 and ST6. In addition, the WBAs below must all be completed by end ST6. It is expected that you will complete a third of these each year between ST4 and ST6. Which WBAs you do, depends on which firms you are attached to. There should be evidence of engagement with the portfolio to sign off other OST4-7 DOPS and OSATS where there has been opportunity **Combined OSATS and DOPS:** For outcome 1 ST4 expect 33%, ST5 expect 66%, ST6 expect 100% Below this number a 10.1 will be awarded unless concerns not related to COVID and an outcome 2 can be awarded. OST6: Where there is significant deficit in OST4-7 DOPS and OSATS due to COVID that an action plan within the TSC cannot achieve, an outcome 10.2 will be required. ☐ DOPs Drugs (PS3 – Administer periocular and intraocular drugs) ☐ DOPs Diathermy (PS6 – Use diathermy appropriately and safely) ☐ DOPs Paracentesis (PS9 – Perform anterior chamber paracentesis) ☐ DOPs Punctal Occlusion (PS12 – Perform punctual occlusion) □ DOPs Suture Removal (PS13 - Remove sutures from the eye and adnexal tissue) ☐ DOPs Botox (PS15 – Administer periocular botulinum toxin injections) ☐ DOPs Corneal Glue (PS16 – Apply corneal glue). ☐ DOPs Ocular Ultrasound (PS17 – Perform ocular ultrasound) ☐ DOPs AC+ Vitreous Sampling (PS19 – Perform anterior chamber and vitreous sampling) ☐ DOPs Biopsy Sampling (PS23 – Prepare a biopsy sample for subsequent histopathological and microbiological assessment) ☐ DOPs Forced Duction (PS24 – Perform forced duction tests) ☐ DOPs Laser IOP (SS15 – Apply appropriate laser for the management of raised intraocular pressure) □ DOPs Laser Retina (SS16 – Apply appropriate laser for the management of retinal problems) ☐ DOPs Biometry Skills (PS25 – Need to complete one if CCT after August 2016, Need to complete 2 if started training in August 2016)) ☐ EPA Cataract surgery (Complete two)



next training year an arra	No requirement this year but where a trainee will be embarking on a TSC in the next training year an arrangement must be secured to ensure the trainee can complete these assessments prior to the end of OST7							
☐ OSATS1 Lid Surgery (SS7 – Undertake the surgical management of lid problems)								
□ OSATS1 Temporal Art	ery Biopsy	(SS11 – Bi	opsy the temporal artery)					
☐ OSATS1 Surgery raised IOP (SS5 – Undertake surgical measures to lower IOP – this cannot be outpatient laser procedure, but one can be diode laser)								
☐ OSATS1 Repair Traun adnexal tissues after trau								
☐ OSATS1 Surgery for s for the protection of the o			3 – Undertake surgical me	asures				
☐ OSATS1 Lateral Canth and cantholysis)	notomy/Car	ntholysis (S	S9 – Perform lateral canth	notomy				
□ OSATS1 Biopsy (SS10	) – Perform	n a biopsy o	f eyelids and the ocular su	urface)				
muscles). One surgery = muscles operated on in the reattachment of muscles	□ OSATS1 Muscle Surgery (SS12 – Perform surgery on the extraocular muscles). One surgery = one patient on one-day independent of the number of muscles operated on in that case. Muscle surgery can include removal and reattachment of muscles for radioactive plaque or trauma. Botulinum toxin is not a valid procedure for squint numbers.							
	enucleation	) One of th	he eye when indicated one e two OSATS required in t ng but not both.					
	□ OSATS1 Laser to lens capsule (SS14) Can be deferred until OST4 <b>only</b> if there has been no opportunity.							
☐ CA10 Fundus examina	ation (CRS1	10a direct o	phthalmoscopy)					
	☐ CRSRet Retinoscopy and subjective refraction (PA2) Can be deferred to OST4 if there has been no opportunity							
Subspecialty (ST3+)	Done	Need		Done	Need			
Cataract			Oculoplastics					
Cornea/AntSeg			Neuro-ophth					
Glaucoma			Paediatrics					
Medical Retina			VR					
Sub-Specialty Areas where more experience needed								



Section 3 Audit and Research Act	Action to be taken Yes/No	
Audit (minimum of one in year 2021 is mandatory: London specific)	Comments	
Research (is there evidence of research activity on the eportfolio) Not mandatory this year	Comments	

Section 4 Involvement in teaching	ng (including any feedback)	Action to be taken Yes/No
Evidence of teaching and any feedback received	Comments	

Section 5 Courses attended and other extra-departmental CPD		
CPD Diary and evidence of courses attended during this	Comments	
training year Mandatory for outcome	☐ Certificate of completion of GCP	
1	☐ Certificate of completion of Trust Mandatory training in protection of children and vulnerable adults	

Section 6					
Leadership and reflective practice					
		Yes/No			
Two pieces of evidence	Comments				
relating to projects	Comments				
from Leadership	1 of 8 domains				
curriculum for each year of training (derogation: one piece	managing self □ team management □ financial □ project management □				
of evidence required for 2022)	medico-legal □ confidentiality and data protection □ risk management □ management training □				



Section 7		
Personal Development Plan/Educational objectives		Action to be taken Yes/No
Has the last ARCP outcome form been signed off by trainee?	<b>Comments</b> (please note if password protection is on document)	resyno
Is the PDP on the eportfolio?  Mandatory for outcome 1	Comments	
Does the PDP include any objectives set at ARCP last year?	Comments	

Section 8 Overview of 12 month (or equivalent) requirements		Action to be taken Yes/No
(8 expected per ARCP period for 2021 for outcome 10.1, 10 for outcome 1)	Comments /8 /10	
Cumulative WBAs: what percentage is completed	Comments %	
EPA – two needed to be completed by ST6 or arrangement in place to complete this by end ST7	Comments	
MSF completed Mandatory for ARCP outcome 1 in 2021	Comments (Please specify if concerns expressed)	
DOPS/ OSATS progress	Comments	
Are ES and CS reports for August to February of this training year assigned on eportfolio? Need 1 ES report for	Yes/No Comments	
each 6-month period		



and CS report from all CSs		
Are the above ES and CS reports all satisfactory? Satisfactory for outcome 1 or 10.1	Yes/No Comments (Please specify if concerns expressed)	
E Portfolio	Is the ARCP open for the correct period with cut-off 3 <sup>rd</sup> June?	
	Are the work history details entered correctly?	
	CCT Date: does it need recalculation? Upload calculator if LTFT, OOP, statutory leave etc.?	
	Have you uploaded enhanced form R and self-declaration and are they completed correctly? Mandatory	
	SUI Reports/Complaints (anonymised) with reflection on each incident and complaint concentrating on lessons learnt? Omitting a complaint/SI can indicate a lack of probity and not providing a reflection with lessons learnt can indicate a lack of insight. This is very serious and an outcome 3 should be considered with escalation to the appropriate Dean, whom is the trainee's responsible officer.	
	Any other evidence of performance (thank you letters, reflective pieces, prizes, awards etc.	
Refraction Certificate (must be passed to progress to ST5)	Comments (Please state if trainee has passed exam and uploaded evidence OR will be sitting the exam NB it may not show on eportfolio due to delay in uploading by RCO if not uploaded your exam feedback or pass letter to additional evidence and labelled we will assume you have not tried or not passed as applicable)	
	OST4: Refraction certificate – where not achieved, Outcome 10.1 can be awarded and exam can be added to action plan for OST4. Must be awarded for progression to OST5 otherwise outcome 10.2 or 3 Comments:	
Part 2 Exam progress (evidence of pass in Part 2 FRCOphth written and practical?	Outcome 10.1/2 will be awarded if no clinical Part 2 exam at end of ST6, but otherwise appropriate progression.  Usually both parts of the exam are required by the end of core training to move on to a TSC in the ST7 year.  Comments:	



Are exam passes uploaded to eportfolio or feedback from exams failed?	Comments:	

Section 9 Action Plan	Action completed Yes/No
Action Point 1	
Upload this completed report	
Action Point 2	
Action Point 3	
Action Point 4	
Action Point 5	
Action Point 6	

## REFERENCES FOR TRAINEES/TRAINERS

Dates 2022:

Friday 3<sup>rd</sup> June portfolio lockdown

**Friday 17<sup>th</sup> June** ARCP in absentia (ensure your ARCP period does not run beyond this date, as otherwise the panel will not be able to complete the form electronically, so you will not know your result on the day)

**Monday 4<sup>th</sup> July** remote ARCP one to one discussion for all trainees not receiving outcome 1 or 10.1

## **Outcomes**

Outcome 1

Progress to next stage training if full time (n.b. if derogation applies for 2021 can still be awarded outcome 1 without certain competencies).

If less than full time may not be able to progress to next stage despite satisfactory if not completed time for training. In these cases, CCT calculator important



e.g. can get outcome 1 when completed 36 months as 0.6 LTFT i.e. 21.6 month full time equivalent but near end of ST2 and only progresses to ST3 when completed 24 months full

time equivalent

Outcome 2 Development specific competencies NO additional training time

(includes lack of engagement e.g. those on OOP not entering

paperwork, incomplete CS forms, WBAs)

Outcome 3 Inadequate training progress— ADDitional training time

Outcome 4 Released from training

Outcome 5 For 2 weeks – only for form R/exam results

Outcome 6 Awarded CCT

Outcome N Not assessed e.g. statutory leave

Outcome 8 On OOP

Covid outcomes These will only be awarded if evidence shows the trainee was

progressing appropriately and there was a lack of opportunity to complete the competencies due to Covid e.g. redeployment affecting ability to complete exam, unable to complete

procedures due to surgery being suspended.

Outcome 10.1 Was progressing appropriately, opportunities to complete

competencies was affected due to COVID

NO additional training time

PDP to included competencies deferred until next ARCP

Outcome 10.2 Was progressing appropriately, critical progression not achieved.

ADDitional training time

FAQs on curriculum requirements can be found on RCOphth website: https://www.rcophth.ac.uk/wp-content/uploads/2019/05/RCOphth-Curriculum-FAQs.pdf

<u>Link to college Covid-19 guidance for 2022 https://www.rcophth.ac.uk/standards-and-guidance/covid-19-resources/covid-19-and-training/</u>

<u>Link to College decision aid for 2022: https://www.rcophth.ac.uk/wp-content/uploads/2022/04/RCOphth-ARCP-Guide-2022-decision-aid-GMC-approved.pdf</u>

## Link to videos on ARCP:

https://us02web.zoom.us/rec/play/D7IGIA3gqXQ3ofgLuEFXy9LWrYfVvpsUZL85CeDZHxg0x4lfL9VODYz-Rc5UBHg0exJtdtlDpoS0B8gN.pACRtqn9MUHLna-b?continueMode=true&xzmrtaid=tQybqSR3Ti6XY98RuoyURQ.1620718279198.995

0a4bddf927813027e0fdd3a195480& x zm rhtaid=279