# Annual Review Competency Progression (ARCP) Ophthalmology

## Trainee Checklist ST7 2020

As well as completing your enhanced Form R (access via synapse), you must ensure that you provide the following evidence on Eportfolio at your ARCP. Please note that the panel will be unable to review your progress if you fail to update Eportfolio appropriately, which will result in you receiving an unsatisfactory outcome. Please ensure that any document you wish to submit as evidence is assigned to an appropriate ARCP period.

Expected learning outcomes are listed below in parentheses.

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

☐ 2 x CRS1 History (CA1 – Take a focused clinical history)

☐ CbD Case Based Discussion (10 expected per ARCP period, not bunched but performed and dated at rate of one per month. Assessor should be a consultant and the difficulty of these cases must reflect your seniority)

☐ 2 x OSATS1 Cataract (SS4 – Perform cataract surgery)

☐ 2 x OSATS1 Surgical Skills (SS1 – Demonstrate a wide range of surgical skills)

☐ MSF – 15 assessors must be approved by your Educational Supervisor, 11 respondents are needed for the assessment to be released. Results of MSF must be discussed with ES and reflective piece on any adverse comments

**These are minimum annual WBAs for ST7. In addition, the WBAs below should have been completed by the end ST6. Please check that you have completed all of the cumulative WBAs below.**

**Please read the recent communication from the RCOphth which clarifies what is required for some of the WBAs below**

https://www.rcophth.ac.uk/wp-content/uploads/2016/06/RCOphth-Curriculum-FAQs.pdf

☐ 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 Botox (PS15 – Administer periocular botulinum toxin injections)

☐ DOPs Corneal Glue (PS16 – Apply corneal glue). One of the two DOPS required can be performed in a simulation setting

☐ 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)

☐ OSATS1 Lid Surgery (SS7 – Undertake the surgical management of lid problems)

☐ OSATS1 Temporal Artery Biopsy (SS11 – Biopsy 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 Trauma (SS6 – Perform surgical repair of ocular and adnexal tissues after trauma, one of which must be a globe repair)

☐ OSATS1 Surgery for surface protection (SS8 – Undertake surgical measures for the protection of the ocular surface)

☐ OSATS1 Lateral Canthotomy/Cantholysis (SS9 – Perform lateral canthotomy and cantholysis)

☐ OSATS1 Biopsy (SS10 – Perform a biopsy of eyelids and the ocular surface)

☐ 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. Up to 5 cases of the indicative 20 can be undertaken in supervised simulation. Botulinum toxin is not a valid procedure for squint numbers.

☐ OSATS1 Removal of eye (SS13 – Remove the eye when indicated one must be evisceration and one enucleation). One of the two OSATS required in this category can be performed in a simulation setting but not both.

☐ Educational Supervisors Report (a report to cover 6 months Aug 2017- Feb 2018 of this training year and a second report which covers Feb 2018– June 2018 of this year).

*The ES report should ensure the log of surgical procedures is completed for each six months of training and include the posterior capsule rupture rate for each six months. Percentage takeover is the number of PC ruptures which were taken over by your supervisor. At ST1-2 level it is expected that takeover would be 100% but that by ST7 trainees will manage their own PC ruptures and so the percentage takeover will be close to 0%. The ESR logbook Summary Grid must be uploaded.*

☐ A cataract complication log should be kept for cases from 2014 onwards. Where retrospective collection of outcomes is not possible there must be a reasonable explanation endorsed by your ES in their report. Template: https://www.rcophth.ac.uk/wp-content/uploads/2018/04/Continuous-cataract-complications-audit-synopsis-template.pdf

☐ CCT Calculator If you have needed to amended the date of CCT to allow for any OOP, sick leave, maternity leave or periods of LTFT training or additional time on outcome 3, please complete and upload in additional evidence (the form is available on the portal).

☐ Clinical Supervisors Report (for each six months, one report from each CS you have worked with i.e. each consultant or senior supervisor who supervises you in clinic, theatre or casualty on a regular basis). The first two sets of reports to be assigned to eportfolio before March 1 and the third set by June 1.

☐ Logbook (on Eportfolio organised as required by RCOphth see further instructions below)

☐ Upload Outcome form(s) from last ARCP (remove any password), and PDP for this year which should incorporate any advice given by the ARCP panel.  If you received more than one outcome form e.g. outcome 5 then upgraded to outcome 1 or outcome 2 later upgraded to outcome 1 you must upload all outcome forms and any interim review forms you have received.

☐ SUI Reports/Complaints (anonymised) and a reflective piece for each.  Please use the Gibbs Cycle of reflection as a model for your reflective writing and concentrate on lessons learnt.

☐ Evidence of exam sittings and results.  You must pass FRCOphth part 2 in order to be eligible for CCT.  Upload evidence of exam pass or if exam failed upload exam scores and feedback received from RCOphth.

**Also upload the following evidence:**

☐ Upload an up to date PDP and complete PDP on eportfolio

☐ Recent interim review

☐ Audit completed in current year (minimum of one per year is mandatory).

☐ Any publication(s) or presentations in this training year

☐ Certificate of completion of GCP

☐ Certificate of completion of Trust mandatory training in protection of children and vulnerable adults

☐ Two pieces of evidence relating to projects from Leadership curriculum for London trainees in each year of training, with reflection on learning

☐ CPD Diary and evidence of courses attended during this training year

☐ Any other evidence of performance (Thank you letters, reflections, awards, prizes etc)

**In addition to achieve outcome 6 and apply for CCT you must provide the following evidence on your e-portfolio at ARCP**

☐ Appropriate ARCP outcome for every year of training uploaded and visible on eportfolio

☐ Correct Exam pass uploaded onto eportfolio – only acceptable exam is Part 2 FRCOphth.  Upload exam failure and feedback if exam has not been passed.

☐ Personal Cataract audit 50 consecutive cases uploaded to eportfolio. Please check that your cataract audit is laid out exactly as required by FRCOphth, that the raw data of 50 **consecutive** cases is included in the report and that the raw data corresponds exactly to the entries for those dates in your main logbook.

Please write your audit as per this example provided by the RCOphth:

https://www.rcophth.ac.uk/wp-content/uploads/2014/07/Example-model-50-case-cataract-audit-1.pdf

*Please read this comm from RCOphth clarifying arrangements for the timing of personal cataract audit within 3 years of CCT date:*

https://www.rcophth.ac.uk/wp-content/uploads/2019/03/6.-Cataract-Audit-Guidance-May-2016.pdf

https://www.rcophth.ac.uk/wp-content/uploads/2019/03/Important-curriculum-changes-May-2016-1.pdf


☐ Log book uploaded and organised as per instructions of RCOphth i.e. all cases performed in ST training organised by subspecialty and by date order.

Eye logbook FAQs: https://www.rcophth.ac.uk/wp-content/uploads/2016/06/EyeLogBook-FAQs.pdf


From 2016 all trainees at ST7 level must have 20 cases of SJ (supervising more junior trianees) in their logbook. These cases can be from a wide range of procedures e.g. cataract surgery, lid procedures, lasers etc.

*Please read carefully the recent communication from the RCOphth which gives clarification of what can and cannot be counted for Specific OSATS and what can be counted in the your logbook for minimum required number of procedures:*

https://www.rcophth.ac.uk/wp-content/uploads/2018/01/RCOphth-e-Portfolio-FAQs-for-Trainees.pdf

*and please ensure cases in your logbook are correctly classified as per the letter from RCOphth*:

https://www.rcophth.ac.uk/wp-content/uploads/2014/07/160706-Terminology-when-recording-surgery-Letter.pdf

☐ TSC report (if TSC has been undertaken) completed as per RCOphth instructions and uploaded

☐ Cumulative datasheet completed and signed by TPD and uploaded

☐ CCT application form completed. This form needs to be accurate. Any posts at SHO level completed before you joined the training programme must be entered under BST training. Enter each post you have completed with accurate start and finish dates and whether the posts were full time or insert % of LTFT you worked.  Use a separate line to enter any OOP time you have had and whether that OOP had College approval for some of the time to count towards CCT.

You must have completed 7 whole time years or equivalent from entry at ST1 into the Training Programme in order to be eligible for CCT.  Any time on outcome 3 will be additional to this time. *If* you have applied and been granted approval by the RCOphth

for acceleration of training you must upload that document to your eportfolio and insert in the CCT application form the amended CCT date and state that you have been granted Acceleration. (Bring a paper copy of this form to your ARCP for signature by Head of School)

Link below provides all details which trainees must follow exactly
https://www.rcophth.ac.uk/training/certification-of-training-and-specialist-training/award-of-the-cct/

If you have a successful outcome at ARCP you will receive afterwards
- Outcome 6 form signed by the Head of School,
- CCT application signed by Head of School and
- Form R signed by Head of School.
- All these documents should be signed by you also. Only then should you upload the versions with correct signatures- this must be done before you contact the RCOphth to be assessed for CCT.

**Failure to provide any of the above will result in you delaying your CCT application**