

Education and Training Department

Trainee Selected Component (TSC) guidance



Introduction

The GMC-approved Ophthalmic Specialty Training Curriculum includes the provision for trainees to undertake a period of focussed training in one topic, under the title of a "Trainee Selected Component" (TSC). This guideline document describes the nature of TSCs. It offers guidance regarding the aims, content and organisation of such posts. It does not constitute a strict curriculum, but it is expected that there should be good reasons for any post to deviate from it to a significant degree.

Types of TSC

The Curriculum divides TSCs into two groups, A and B.

Group A TSC

Group A TSCs will be suited to those interested in learning about Clinical Governance, Educational Principles and Practice, Epidemiology, Healthcare Management, Primary Care, Public Health, Research and the like. At the discretion of the Deanery and the STC, it may be possible for a Type A TSC to be taken as a "thin strip" part-time throughout training. It will normally be expected that a trainee undertaking a Group A TSC will be working to some higher qualification. College approval is required before a Group A TSC can be undertaken.

Group B TSC

Group B TSCs provide a high standard of training in a relatively specialised area of ophthalmology, typically one of the following areas of the specialty: Cornea/External Eye, Glaucoma, Medical Ophthalmology, Medical Retina, Motility & Strabismus, Neuro-ophthalmology, Ophthalmic Oncology, Oculoplastics, Lacrimal and Orbital Diseases, Paediatric Ophthalmology, Refractive Surgery and Surgical Retina. They should generally be taken en bloc, and when the curriculum has been largely completed and the Part 2 FRCOphth passed. As OST is expected to take most trainees approximately seven years, a Group B TSC would not normally be undertaken until at least year 6. They should build upon the knowledge, understanding, skills and attitudes developed during Ophthalmic Specialist Training (OST), with particular relevance to the chosen subject, so a trainee is only likely to benefit if they already have some basic experience in the specialised area. The function of a TSC is to provide in-depth training and experience, thereby facilitating the development of particular knowledge and expertise in that subject.

Regardless of type, it is expected that by the end of a TSC the trainee will have acquired considerable additional knowledge, skills and competences at a higher level than is provided elsewhere in OST.

Who should provide TSCs?

Any programme can provide TSCs, but a trainee does not have a right to insist on their Deanery providing a TSC in a particular area of practice. TSC placements should be offered first to internal trainees on the local OST programme. If no local trainee is appointed the post could be advertised as available to senior OST trainees from other Deaneries. **The development of TSCs and placements must not detract from the provision of core**

training for the remaining trainees in the rotation. In particular, when assessing a TSC timetable, the College will look carefully at the number of core trainees in any particular Clinical session as well as Fellows that are on a non-College approved programme. A TSC may be undertaken in the UK or abroad. If a trainee wishes to take a TSC out-of-programme (OOPT) either in another unit in the UK or overseas then this needs to be planned prospectively with permission and approval from the Deanery, assessment of the proposals by the Evaluation of Training Sub-committee of the RCOphth, and formal approval by the GMC (see section below on approval). Financial administration of TSCs is a matter for the Deanery to agree with the trainee.

What is the purpose of TSCs?

TSCs should provide detailed in depth training and experience in one area of ophthalmology. They are not designed for credentialing trainees in a sub-specialty, but the enhancement of a trainee's portfolio achieved during a TSC could subsequently be included in evidence towards such a credential. Individual supervisors may want their TSC to be highly focussed and if so, they can produce a highly detailed prospectus for that TSC. It would then attract trainees who prefer that sort of structure. Others will be put off by such regimentation and will look for a more open TSC. Some specialist groups may wish to produce detailed specifications for TSCs in their area of practice, but the College wishes these not to be prescriptive or compulsory as this would narrow a trainee's options for what is a self-selected period of study. It is imperative however that the trainee clearly defines the aims and objectives for undertaking the TSC.

Who is eligible for a TSC?

Undertaking a TSC should be the norm for trainees, but if a trainee has had an unfavourable ARCP outcome (outcome 2, 3 or 5) at any stage in their training to date and especially one that has required an additional period of training (outcome 3), the Programme Director has the right to refuse a TSC. A TSC forms part of OST and as such is limited to 6-12 months. This Guideline document should therefore be read in conjunction with the RCOphth Curriculum for Ophthalmic Specialist Training and the RCOphth Guide for the Delivery of OST.

The Programme Director should always be satisfied that the trainee is well through the OST curriculum before giving approval for the undertaking of a Group B TSC, and if the duration is to be more than 6 months the OST curriculum must be nearly complete and the FRCOphth Part 2 examination passed.

Multiple TSCs

Normally a trainee will undertake only one TSC - either a Type A or a Type B TSC but not both. Any proposal for an exception to this guidance would have to have the full support of the Deanery and would need to be considered by the Evaluation of Training Sub-committee of the College who would make the final recommendation.

The TSC Prospectus

The supervisor should provide a TSC prospectus. This should include the aims and objectives of the TSC. The aim is a one-statement general overview of what the TSC is hoping to achieve. The objectives are the learning outcomes. These are a series of specific statements which detail what **additional knowledge, skills and experience** the trainee will be expected to acquire. These objectives will provide a way of assessing the trainee's

performance during the TSC. The prospectus should state what prior competencies are expected of the applicant. The usual duration of a Group B TSC is 6-12 months (12 months maximum).

The prospectus should include a proposed timetable. As the TSC is intended to give an immersion in a subject, the usual restrictions on timetabled sessions do not apply. The components of a TSC timetable can be varied to provide the best possible learning environment. They can include theatre sessions, specialist clinics, research clinics and research sessions. The timetable may include up to 8 clinical sessions. A TSC may include at least one general operating session and one general clinic per week to allow the trainee to maintain their general skills as long as this does not detract from the educational outcomes of the post. Should a TSC be completely non-surgical, the programme director should ensure that after the TSC there is adequate time for the trainee to refresh their clinical and surgical skills to an appropriate level before attempting independent practice. This is of particular relevance when the TSC is undertaken very close to the CCT date or runs beyond it. However the emphasis in a TSC is upon selected experience and not service.

Ideally, assessment should be in the workplace and should test the objectives listed in the prospectus. If not specified in a prospectus, learning outcomes for a TSC should be agreed between the educational supervisor and the trainee before the TSC commences, appraised regularly during the training and reviewed at each ARCP.

A TSC incorporates the advantages of structured training and apprenticeship, aimed at achieving extra learning outcomes. The following should therefore be provided for the trainee:

- a) Concentrated exposure to the diagnosis and management of a wide variety of appropriate cases. This will require regular, frequent attendance at special clinics and operating/treatment sessions.
- b) The opportunity to discuss at length the principles and details of the management of these cases.
- c) The opportunity, by discussion and by example, to refine his/her skills in explaining and discussing the nature of the relevant disease processes and the possible treatments to patients in a clear, comprehensible manner.
- d) The opportunity to liaise with members of appropriate allied specialties both within and without ophthalmology.
- e) The opportunity to play an evolving role in the active care of these patients, so that by the end of the TSC many of cases in that area of practice can be handled independently.
- f) The opportunity to engage in audit and/or research projects during the TSC.
- g) The opportunity to attend and take part in specialist meetings at a local, regional, national and (ideally) an international level.
- h) The opportunity to take an active part in the teaching of the subject to other trainees, and members of allied professions.

Approval of TSCs for individual trainees

Any proposed TSC must have the complete prospective agreement of the Deanery and the Deanery's Specialist Training Committee for Ophthalmology / School of Ophthalmology. In order for the TSC to count towards CCT prospective approval from the GMC and prospective agreement from the College is needed as indicated in the following paragraphs. Up to a maximum of 12 months' time arising from a TSC may be counted towards the CCT. If some research time has also been counted towards the CCT, the combined period for any time counting towards CCT arising from research and from a TSC must not exceed 12 months.

The RCOphth must always be informed of TSCs undertaken by a trainee.

TSCs within trainee's Deanery Training Programme

If a TSC is already part of the GMC approved Deanery training programme, the TSC is already recognised by the College's Evaluation of Training Sub-committee (on the approved list of the College), and the trainee doing the TSC is already on that particular Deanery training programme, GMC approval and Evaluation of Training Sub-committee approval have already been granted. The trainee just needs to inform the Education and Training Department of the College so that the trainee's file can be updated with the information about the TSC.

TSC in a different Deanery's Training Programme (in the UK)

If a TSC is already part of the GMC approved Deanery training programme, the TSC is already recognised by the Evaluation of Training Sub-committee of the College (on the approved list of the College), but the trainee is from a different Deanery in the UK, the trainee's Deanery must obtain prospective agreement from the Evaluation of Training Sub-committee of the College for the proposed Out of Programme Training TSC to count towards CCT. Prospective GMC approval is already in place as the post is part of an approved programme.

TSCs not part of an approved Deanery Training Programme (UK or overseas)

If a TSC is not already part of the GMC approved training programme and is not already recognised by the Evaluation of Training Sub-committee of the College, the trainee's Deanery must obtain prospective approval from the GMC and prospective agreement from the Evaluation of Training Sub-committee of the College for the Out of Programme Training TSC to count towards CCT (see paragraph 6.95 Gold Guide 2010). This applies equally to proposed TSCs in the UK or overseas.

If the proposed TSC is Out of Programme Experience, which will not count towards the CCT, approval is not needed from the GMC and agreement is not needed from the College (see para. 6.75 and 6.77 Gold Guide 2010). The trainee just needs to inform the Education and Training Department of the College so the trainee's file can be updated with the information about change in CCT date because of the Out of Programme Experience.

Composition of TSCs

Each training unit offering a TSC should develop its own programme for that TSC, working out how best to deliver the learning outcomes listed above in the particular circumstances of that unit without compromising the training opportunities for the other trainees in the unit. It is anticipated that most TSCs will aim to provide comprehensive training and experience within a particular area of practice. It is understood however that some TSCs may be designed to cover a rather specialised area of practice in increased detail (e.g. corneal grafting, rather than the whole of cornea and external diseases). It is essential that the TSC prospectus makes the aims and objectives of that post clear to all concerned. The Deanery website would be an ideal place for the details of TSCs to be published.

It is expected that recognition of approved TSCs will lapse after a period of 5 years and the unit will need to submit a fresh application. The unit is expected to inform the Evaluation of Training Sub-committee of any major changes in the unit that might lead to the aims of the TSC no longer being deliverable.

Appraisal and Assessment

It is anticipated that the objectives of the TSC will already have been established. These provide the basis for assessment throughout the TSC. Should the TSC be a variation, or indeed a brand new TSC, then the trainer(s) and trainee should meet well in advance of the commencement of the TSC to agree the aims and objectives of the post in some detail. These should be based on the present document. Meetings should continue periodically throughout the duration of the TSC to allow the review of progress against these aims.

Where appropriate, generic forms from the OST Curriculum (e.g. DOPS, OSATS, Cbd) can be used to facilitate and to help to document the assessment of the trainee.

A report from the trainer(s) and trainee will be considered by the Regional Specialty Training Committee at the next ARCP.

The trainee will be expected to provide the Evaluation of Training Sub-committee of the College with a comprehensive report at the end of the TSC. This report will include the aims and objectives of the TSC **as documented in the initial application** and evidence to support the achievement or otherwise of those objectives. The trainee will be expected to provide this within six weeks of completion of their TSC.

There is no current intention to impose further formal examinations, nor is there any current mechanism to award a formal diploma or credential.

Evaluation of Training Sub-committee (part of the Training Committee)
October 2013