

Guidance for Trainees and Trainers on Cataract Surgery competences and their assessment



Please note: these are not new curriculum requirements. This guidance is meant to clarify how the existing requirements of Learning Outcome SS4 should be assessed.

All of the parts of the Learning Outcome must be fulfilled for the award of CCT / CESR (CP).

Competencies	Assessment
Undertake increasingly complex cataract cases (spiral learning) – e.g. small pupil requiring pupil expansion ring, patient on alpha blocker, opaque lens with no fundal view, age over 90, post AACC cataract eyes, axial lengths <21.5 or >26, commensurate to the stage of training	It is expected complex cataract case mix commensurate to stage of training will be demonstrated via the following assessments <ul style="list-style-type: none"> • Continuous audit of cataract surgery and complications • Annual CSR and ESR • OSATS and EPA demonstrating increasing complexity of cataract cases • Logged and reflected supervised simulation
Undertake and manage entire cataract lists	<ul style="list-style-type: none"> • Annual CSR and ESR • EPA demonstrating managing cataract list
Ability to undertake personal surgical audit	The primary assessment here is completeness of data reflecting GPC skills and probity <ul style="list-style-type: none"> • 50 case consecutive cataract audit within 3 calendar years of CCT /CESR (CP) • Continuous audit of cataract surgery and complications
Demonstrate currency of cataract surgical skills	<ul style="list-style-type: none"> • Continuous audit of cataract surgery and complications • OSATS showing increasing complexity of cataract case commensurate to stage of training • Demonstrated skills in supervised simulation • Annual CSR and ESR
Demonstrate competency in the management of intraoperative complications	<ul style="list-style-type: none"> • Annual CSR and ESR • Demonstrated skills in supervised simulation • FRCOphth Part 2 examination • PDP evidence of discussion and analysis or reflection where appropriate with education and clinical supervisor
Manage post-operative cataract patients including communication – e.g. duty of candour in sharing complications	<ul style="list-style-type: none"> • Annual CSR and ESR • FRCOphth Part 2 examination • EPA, WpBAs

	<ul style="list-style-type: none"> • PDP evidence of discussion and analysis or reflection where appropriate with educational and clinical supervisors
Acceptable surgical outcomes	<ul style="list-style-type: none"> • 50 case consecutive cataract audit within 3 calendar years of CCT / CESR(CP) • Continuous audit of cataract surgery and complications
Demonstrate ability to supervise juniors	<ul style="list-style-type: none"> • SJ cases in logbook, which may include supervision of simulated surgery. (It is expected that an average doctor in training will need to have supervised around 20 different surgical procedures to achieve competence.)