



THE ROYAL COLLEGE OF
OPHTHALMOLOGISTS

Annual Report
2013



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Harminder Singh Dua

President

When an email requesting an annual report introduction arrives in my in-box, it indicates that another year has gone by. Only this time it also signalled the end of my term in office, almost three years had gone by. When three years go by and you feel that it was only 'yesterday' that you first stepped in your office, it must be a sign of three good years gone by. Working for the profession with some of the very best our profession has to offer is a rare privilege that few are destined for. I am grateful to the members for putting me in office, to scores of colleagues who have worked tirelessly for the College and to College officers and staff who have generously allowed their toil and glory to reflect off me.

The year gone by, like every year before it, has had its share of success and turbulence. The highlight was the 'Silver jubilee' celebrations which created a special buzz at our Annual Congress which saw new ideas and innovative sessions being introduced by the Scientific Department, such as the 'Glaucoma Day' and the 'President's Session'. The uncertainty over the 'Shape of Training Review' and how it would translate in to practice and its implications on education and training engaged our Education and Training Department and continues to do so. Swinging the pendulum away from sub-specialism towards generalism is not a bad thing but the challenge remains to strike the right balance and ensure that the professional value of a consultant is not downgraded. A lot more ground will need to be covered in this area as and when the government publishes its plan for implementation.

The growing popularity of our examinations, a testimony to our high standards of education, training and assessment, is reflected in the increased requests to host our examinations in centres across the globe. While teaching and training our trainee doctors constitutes our core business, maintaining professional standards and striving to improve them by detecting underperformance and providing help and support for improvement and promoting good performance continues to remain a mainstay activity.

The Professional Standards Department has pursued excellence in every facet of its multitude and varied activities. The College together with other stakeholders in eye health has overseen the founding of the Clinical Council for Eye Health commissioning. With the integration of public health, primary and secondary care and social care; a close working relationship amongst all engaged in the provision of eye care is the way forward and we have led on this front.

The Council has overseen all aspects of College work with a close eye to ensure that the Council remains supreme in all matters related to policy and protocol and the Finance Department has ensured as always, that our finances are healthy and the College remains solvent.

One end inevitably marks another beginning. Elections for the New President, with a major shift towards electronic voting, saw a record number of eight candidates putting themselves forward and a record of 52% voter turnout. This is a very healthy sign of democracy working at the grassroots of the College. I thank each candidate for offering their service to the College and to every individual voter who cast their vote. I congratulate Prof Carrie MacEwen on being elected as the 10th President of the College and wish the College great success under her stewardship.

I bid farewell with a few words borrowed from my acceptance speech... "You belong to the College as much as the College belongs to you".

"The College remains standing tall

Reflecting the glory of servants all

Its fate, not in the hands of Time

Nor in edicts divine 'tis for us to steer it a fore

As one by one we step ashore."



Kathy Evans

Chief Executive

2013 has been marked by some memorable highs and one low.

Many of the high-lights were associated with the 25th anniversary of the College and included a well-received symposium at Congress which presented the ophthalmic advances in the last quarter century and the reflective pieces that appeared in *EYE*, the College's scientific journal. Hugh Williams produced a commemorative DVD "*Turning a Blind Eye*" that explored the history of strabismus and the President designed a series of stamps to celebrate the milestone. Partners from across the sector were invited to the Council Dinner held at the House of Lords.

We entered 2013 having acquired a freehold building near Euston Square and disposed of our lease in 17 Cornwall Terrace. We went on to successfully apply to the London Borough of Camden for planning permission to refurbish the new building with Jackson Coles (project managers), Alan Baxter & Associates (structural engineers) and E3 Services (mechanical and electrical engineers) joining the design team headed by architects, Bennetts Associates.

We engaged a fundraising consultant who by the year-end had helped us to raise over £330,000 to develop the Skills Centre and Seminar Room. After an extensive tender process we contracted building firm Cameron Black Ltd which initially made good progress with the work. Unfortunately Cameron Black, despite having a sound order book, has subsequently gone into administration. The College began 2014 formulating plans and have engaged an alternative building contractor, Knight Harwood Limited, to restart the building work. So we still expect to deliver a stylish and efficient home for ophthalmology. This setback is undoubtedly frustrating but it should not over shadow the excellent work that gone into planning a 21st century headquarters.

We spent much of the year considering options for a new Customer Relationship Management (CRM) system to replace the current membership database and we have settled on a Microsoft Dynamics platform that offers flexibility and the means of integrating our sundry databases. In addition, we have decided to use this change as an opportunity to improve the College website and will introduce a new, cohesive system in 2014. This is part of our plan to develop an effective communications strategy which will be led by Liz Price who was appointed as Communications Manager in October, this being a new post.

During the latter part of the year, considerable time was devoted to the Healthcare Quality Improvement Partnership (HQIP) bid for the National Ophthalmology Audit led by John Sparrow. If we are successful, the work would update benchmark standards of care and provide a powerful quality improvement tool in respect of cataracts, glaucoma, retinal detachment and age-related macular degeneration treatment.

This Annual Report features our collaborative work with allied professionals and the third sector. One particular example is our continued sponsorship of the Sight Loss and Vision Priority Setting Partnership, an initiative overseen by the James Lind Alliance, a non-profit making organisation funded by the National Institute for Health Research.

In 2012 patients, carers and eye health professionals were asked to identify unanswered questions about the prevention, diagnosis and treatment of sight loss and eye conditions that they wished to see answered. The 4,461 questions received were checked and both duplicates and those not relating to sight loss and vision were removed. Those remaining were then allocated to 12 different eye disease/condition categories and similar submissions were combined. At workshops held in April and May 2013 the top priorities for each category were agreed and the resulting report was launched in October 2013 www.fightforsight.org.uk/sightlosspsp.

It is very much appreciated that time spent on College activities take our Committee members away from their clinics and theatre sessions at their Trust. We endorse Sir Bruce Keogh's letter to all Trust Chief Executives to remind them that the type of work our Committee members undertake for the College, is for the wider benefit of the NHS and as such should be supported.

Through-out this busy and occasionally turbulent year one constant element has been the support and hard work of the College staff and, for that, I am very grateful.



Bernie Chang
Chair, Professional Standards Committee



Beth Barnes
Head, Professional Standards Department

Professional Standards Committee

Graham Kirby has completed his Chairmanship of the Committee and we thank him for his valued, straightforward and common sense approach to running Professional Standards Committee. Bernie Chang has gratefully accepted the role of Chair.

The Committee has conducted 4 [Invited Service reviews](#) at the request of Trust Medical Directors and Chief Executives. We expect that following the Francis Report, we will get a significant increase in such requests to review eye services across the country. On behalf of the College, we have submitted our response to the Francis Report to the Department of Health, agreeing that patients must always be valued above cost or even the wishes of our own profession. PSC was also approached by Health Improvement Scotland (their closest equivalent to the Care Quality Commission) to advise on the safety of acute eye care provision by optometrists in enhanced roles.

For the first time, a local Clinical Commissioning Group asked for College advice about their commissioning document, to help ensure a fair and safe approach to awarding local contracts. We believe this is a new and useful role which College can provide which will benefit not just commissioners but ophthalmologists in general.

Richard Wormald and Nicholas Wilson-Holt have planned and delivered regional teaching sessions in England relating to the [Certificate of Vision Impairment](#) and the Public Health Indicator for preventable sight loss.

PSC and its various Subcommittees and working groups have published over 50 documents including responses to [national consultations from NICE and other organisations](#), advise on [paediatric ophthalmology conditions for parents](#), [commissioning guidance](#) and updated versions of College [Ophthalmic Services Guidance Documents](#).

As with other committees, PSC has had to respond to a changing environment. The College recently agreed to send an Advisory Appointments Committee (AAC) representative to Trusts that request College input, regardless of whether the job description is College approved. This should help ensure the Trust appoints an appropriately qualified consultant and it is hoped that the candidates can benefit from the presence of the representative. Carol Welch has been instrumental in fielding enquiries and in inviting members to attend AACs. The College was asked to find a College assessor for 92 AACs during 2013.

Continuing Professional Development – Jonathan Chan

The introduction of the revalidation process by the GMC has made it mandatory for doctors to keep good records of their CPD activities for their annual appraisal and revalidation. An updated CPD diary user manual has been produced. The College is considering further improvements including new reporting features for the CPD online diary in 2014. The College will continued to use the services of The American Academy of Ophthalmology – ONE Network for 2014.

The College has continued to strengthen links with the College of Ophthalmology of Eastern, Central and Southern Africa (COECSA). Raghu Ram, CPD Co-ordinator for Wales visited COECSA during its scientific congress, accompanied by Nick Astbury and Beth Barnes, and gave a talk on the delivery of the CPD programme. Further developments on the COECSA e-learning/CPD system will need to take place to ensure that its e-learning is strengthened.

Informatics and Audit Subcommittee – John Sparrow

Bill Aylward concluded his Chairmanship of the Informatics and Audit Subcommittee, in which significant developments have taken place under his highly capable leadership. Bill has agreed to continue as a committee member so his specialist knowledge will not be lost to the Committee. John Sparrow is honoured to have been appointed as the next Chair.

A key development for the Subcommittee in late 2013 was the Health Quality Improvement Partnership (HQIP) of a tender for a National Ophthalmology Audit focussing primarily on cataract surgery and including feasibility electronic audits of AMD, glaucoma and retinal detachment. Council have supported a College full submission to HQIP and await the announcement.

The existing College NOD project has continued with useful work on a very tight budget with recent modest support for projects in VR, Glaucoma and AMD. Analysis and reporting has continued and a joint College-British and Eire Association of Vitreoretinal Surgeons (BEAVRS) advisory group has been formed to guide this area. Several papers have recently either appeared in press or been published on VR surgery as well as hospital based diabetic eye care.

[The Dataset](#) development programme remains active with a range of data sets being maintained or under construction. These include the cataract national data set, glaucoma data set, diabetic eye care (hospital) and diabetic retinopathy screening data sets, retinal detachment data set, corneal data set, strabismus data set, uveitis data set and macular hole data set. The Subcommittee is grateful for the time and effort which College members are giving to this important work which underpins electronic working and interoperability between software systems.

More broadly the Subcommittee has greater or lesser involvement in a range of IT issues of relevance to College members. Choose & Book has never been well suited to the needs of eye health services and a new eReferral system is being developed to cater for 'any to any' referrals. In addition to standard GP to secondary care referrals this is intended to cater for within specialty referral (ophthalmologist to ophthalmologist), 'two-way' optometric referral (relevant to shared care schemes for example), and 'two-way' ophthalmologist to other hospital specialist referrals.

Inclusion of CVI registration as a public health indicator has stimulated fresh interest in eCVI development and a multi-professional group led by the RNIB is taking this forward, building on earlier feasibility work based at Moorfields Eye Hospital. The Subcommittee has also been in contact with the case-mix team to try to iron out some of the potentially costly (for trusts) quirks related to Healthcare Resource Group output and we continue to 'sense check' Payments by Results amendments. We have responded to a range of consultations and have offered guidance to the Department of Health on amendments to the General Ophthalmic Services 18 Form, Ophthalmic Referral/Notification.

Ophthalmology Clinical Leads Forum – Richard Harrad

This is a time of uncertainty with Clinical Commissioning Groups still finding their feet and the start of Specialist Commissioning under the aegis of NHS England. The Francis Report documents startling examples of poor clinical practice and encourages us all to defend the rights and dignity of our patients. These topics were among the subjects addressed at the 2013 Forum.

The Forum was over-subscribed and delegates highly rated the content of the presentations. Jeremy Diamond spoke about the challenges presented by the opening up of NHS Eye Care services to the Independent Sector and outlined action that clinical leads could take. The Invited Service Reviews offered by the College and their potential benefit to a department were described by Richard Smith. John Sparrow spoke on National Ophthalmic Datasets and Harminder Dua discussed clinical commissioning and the shape of training. Helen Dixon from the Dept. of Health spoke on Francis Public Enquiry and Julie Butler from Doncaster CCG spoke on commissioning from the CCG perspective.

Ocular Tissue Transplant Standards Group (OTTSG) – Damien Lake

The OTTSG continues to work in close partnership with the Corneal Transplant Service (CTS) Eye Banks in Bristol and Manchester, and the Eye Banks at East Grinstead and Moorfields to improve and promote standards in transplantation of Ocular tissue. The OTTSG has been represented at the Ocular Tissue Advisory Group (OTAG) to NHSBT by Francisco Figueiredo in 2013, and at the end of a successful three year term is now replaced by Damian Lake.

OTTSG has been a virtual Subcommittee for 2 years and the structure of OTAG has changed from a single committee, to many Subcommittees reporting to an executive committee. This created much debate and continues to do so, concerning representation of the Eye Banks with their practical expertise and the role of the College and OTAG in delivering their statutory responsibilities. Derek Tole has recently been elected as Chair of OTAG, and early discussions have been arranged to clarify and improve this arrangement ongoing.

The completion of the transplant record form is a statutory obligation, the completion of the follow up form is a professional obligation, but in some units this may be less than 20%. The work of OTTSG should concentrate on facilitating this process to enable our members to fulfil their obligations.

Paediatric Subcommittee – Christopher Lloyd

The Subcommittee continued to provide representation throughout the year to the VISION 2020 UK Children's and Young People's Forum, the VISION 2020 UK Learning Difficulties Group, the VISION 2020 UK Low Vision Committee and the Children's Surgical Forum.

There were a number of major issues addressed by the Subcommittee during 2013.

[Specialised Commissioning](#) of Paediatric Ophthalmology – NHS England is asking for evidence of the provision of specialised services and ophthalmologists should check if their Trusts are completing the necessary submissions. The Clinical Reference Group for Ophthalmology has good representation from paediatric ophthalmologists and links with the paediatric surgery CRG. Policies for the treatment of paediatric uveitis and the provision of paediatric vitreoretinal surgery for infants are being considered.

Children's Vision Screening – Update from the National Screening Committee (NSC) – Following a comprehensive literature review, the NSC accepted the recommendation that the current policy of orthoptic led vision screening for four to five year olds should continue. There remains some concern that screening of babies at six to eight weeks is not always adequate. The Subcommittee is looking at ways of improving this through liaison with the College of GPs and the RCPCH.

Child Maltreatment Working Party '[Abusive Head Trauma and the Eye in Infancy](#)' was published. The document will be invaluable to ophthalmologists involved in child abuse cases. The Subcommittee expressed particular thanks to Patrick Watts, the lead author.

[Information was produced for parents](#) and carers on several topics covering Juvenile Arthritis, Congenital Glaucoma, Uveitis and Aniridia. The Paediatric Subcommittee also provided advice to the Professional Standards Committee on two "Map of Medicine" pathways – Squint and Visual Loss in Children.

We welcomed three new members to the Subcommittee in 2013; Hugh Huddy representing VISION 2020, Lisa Kelly representing the College's Staff and Associate Specialist Group and Rowena McNamara, the Chair Elect of the British and Irish Orthoptic Society.

Primary and Community Eye Care – Stella Hornby

This group provides a multidisciplinary forum for advocacy and guidance for the provision of primary eye care. A new ophthalmic services guidance chapter on [Primary Care Ophthalmology](#) was published on the College website in June 2013 to inform commissioning of eye care. The College of Optometrists and RCOphth published [joint commissioning guidance](#) for AMD, low vision and urgent care on both organisations websites. Five years after the launch of the UK VISION Strategy, it has been refreshed following sector wide consultation. The [Map of Medicine](#) has developed maps on diabetic retinopathy, glaucoma, cataract, red eye and visual rehabilitation.

Quality and Safety Group – Timothy Rimmer

During 2013 the Subcommittee reviewed the Theatre Guidelines. Lucy Titcomb (UK Ophthalmic Pharmacists Group) has led on the development of guidelines for the use of ophthalmic specials in the community. The Group advised the Medicines and Healthcare Products Regulatory Agency (MHRA) about international concern regarding a Hoya lens implant model. The concern in this country was minimal.

Tim Rimmer has led on trying to solve some of the difficulties in developing Patient Group Directions (PDGs) for nurses to prescribe phenylephrine 2.5% in routine situations. The stumbling block is the long list of precautions in the summary of product characteristics (SPC), which relate to cardiovascular disease and reads like a typical ophthalmic outpatient. This is frustrating as doctors will prescribe it when extra pupil dilatation is needed. Initially the license holder of the SPC (Bausch & Lomb) sounded very positive about making changes to it, but since they were taken over by Valliant there has been no further communication.

Tom Eke, through a link with the Association of Surgeons of Great Britain and Ireland, has enable the College to join CORESS, a system for confidential reporting of and learning from adverse events or near misses. The reports will be scrutinised by members of the Subcommittee and valuable lessons shared with College members.

Finally, the Group has been trying to question why Bausch & Lomb has decided to discontinue the combined Minum of fluorescein and proxymetacaine. This is made worse by the same company's earlier decision to stop producing Fluorets. That decision was very likely made because the MHRA is changing the status of fluorescein strips to a medicine, rather than a device, presumably creating greater costs. Fluorescein strips are available from other manufacturers.

Revalidation Subcommittee – Richard Smith

Revalidation has now been "live" for more than a year, with about 25,000 doctors revalidating successfully during the first 12 months. There had been a danger that Ophthalmic Medical Practitioners would be left without any consistent arrangements for appraisal and revalidation. However, in response to the College's representations, a connection for revalidation for OMPs to NHS England was included in the April 2013 amendment to the Medical Profession (Responsible Officers) Regulations 2010.

The College has continued to provide a confidential revalidation enquiry service during the year. This has been relatively quiet, but has provided advice on a variety of topics related to appraisal and the Licence to Practise. In February 2013, a new section of the College's website dedicated to appraisal and revalidation went live (www.rcophth.ac.uk/revalidation). This section aims to provide information not just for ophthalmologists who are preparing for appraisal, but also to appraisers of ophthalmologists and Responsible Officers who will not necessarily have detailed knowledge of ophthalmological practice.

In September 2013, the intercollegiate revalidation portfolio went live. This provides a means of recording and storing supporting information for appraisal and revalidation and is particularly aimed at ophthalmologists who do not have access to a structured portfolio via their workplace. By December 2013, 200 ophthalmologists had registered to use the revalidation portfolio, which can be accessed from the home page of the College website.

This will be my final report as Chairman of the Subcommittee. We would like to thank Beth Barnes, Carol Welch and the Subcommittee members for their support and hard work.

Vision Standards for Driving – Scott Fraser

The [Vision Standards for Driving](#) College document has been updated by Andrew Elliott and Bill Newman. The College has input to the Department of Transport's Vision Panel (there is a College representative who sits as an invited observer). Although not part of the privately funded Road Safety and Eye Health Working Group we do receive the minutes of their meetings. A Focus supplement in College News written by Andrew Elliott regarding [Driving and Vision](#) was published in Summer 2013. This is a very useful and accessible summary of the current visual standards in the UK.

The President of the College received a letter from a Coroner in February 2013 and from the GMC in July 2013; both letters stressed the duties of medical practitioners when they consider that a patient may not be fit to drive. The College replied to confirm that we take this matter very seriously and would continue to remind our members of their responsibilities.

Workforce Subcommittee – George Turner

The current year has witnessed a balance between the number of trainees achieving Certificates of Completion of Training (CCT) and NHS Consultant vacancies across the four countries of the United Kingdom, as has been the case over the last decade. The equilibrium is dependent on the creation of new consultant posts at a rate of 1:1 to retirement vacancies, and to date the anticipated downturn in the number of newly created posts has not materialised.

The Subcommittee continues to work closely with the Centre for Workforce Intelligence on a broad spectrum of workforce related issues in ophthalmology, including the maintenance of ophthalmic training numbers, support for the development of Medical Ophthalmology within the Royal College of Physicians and close links with the Association of Health Professionals in Ophthalmology (AHPO).

On the horizon are potential changes to training to produce a broader general ophthalmic workforce as many specialist posts remain unfilled. The Workforce Survey of Clinical Leads 2013 confirmed a continuing shortfall in capacity, and continuing to expand the ophthalmic workforce forms part of the strategy to address this.

We are grateful and very appreciative of all the support given by Chairs of the Subcommittees, Chair of the Clinical Leads Forum, all Committee and Subcommittee members.



Anthony Moore

Chair, Scientific Committee



Olivia Sibly

Acting Head, Scientific Department

Scientific Department

Alongside the organisation of the Annual Congress, the Scientific Department has been busy with other activities including involvement with appraisals of new treatments by the National Institute of Health and Clinical Excellence (NICE), the work of the British Ophthalmic Surveillance Unit (BOSU) and the development of new guidelines and the revision of current clinical guidelines.

Annual Congress 2013

The Annual Congress, held in Liverpool, was a great success and celebrated the 25th anniversary of the College. 1,300 delegates attended and the meeting opened with the President's symposium in which the speakers, all international leaders in their sub-specialty, were asked to highlight advances in ophthalmology over the last 25 years.

There were three excellent Eponymous Lectures. The Duke Elder Lecture was given by Professor Phillip Murray from the University of Birmingham on the subject of inflammatory eye disease. The Edridge Green Lecture, on the subject of high resolution imaging of the retina, was given by Professor David Williams from the University of Rochester, USA. Dr Gerrit Melles from the Netherlands Institute for Innovative Ocular Surgery gave the Optic UK Lecture on the subject of novel approaches to corneal surgery.

Other highlights at the meeting were the Retina Day and Glaucoma Day held on the day before the official opening of the Congress. These were very well attended and many participants stayed on for the main Congress. On the Tuesday evening there was a reception at the Museum of Liverpool to celebrate the 25th anniversary of the College. The Mayor of Liverpool attended and in a short speech welcomed us to Liverpool and congratulated the College on 25 years of success.

Parwez Hossain has been Honorary Programme Secretary for the College Congress for the last six years and finished his term of office. Manoj Parulekar has been appointed the new Honorary Programme Secretary. Manoj will work alongside Parwez until after the 2014 Congress. Parwez Hossain has been an outstanding Honorary Programme Secretary and we are very grateful to him for his hard work during his time in post.

The Foulds Trophy for the best Rapid Fire presentation at Congress was awarded to Anthony Khawaja for his work on optic nerve fibre layer analysis in a large epidemiological study (EPIC-Norfolk Eye Study). The John Lee Poster Prize, awarded for the best poster presentation at Congress, was awarded to Cehajic Kapetanovic for her poster describing her work on gene delivery to the outer retina. The Treacher Collins Prize, awarded for the best DVD at the Congress, was awarded to Matthew Burton and Saul Rajak for their DVD on the subject of trichiasis surgery in trachoma.

The AMO poster prize was awarded to Munazzah Chou for her paper describing her research on trends over time in the rates of childhood strabismus surgery. The Ivor Levy prize, awarded for the best neuro-ophthalmology poster at the Congress, was awarded to Naz Raouf a poster describing optic nerve sheath fenestration surgery. The SOE poster prize was awarded to Lola Solebo for her work on a national study of surgical outcomes for children with congenital cataract.

College Guidelines

In 2013, two guidelines were produced. The first on the management of abusive head trauma was developed jointly with the Royal College of Paediatrics and Child Health and the second was a revision of the guidelines on the management of age-related macular degeneration. A guideline on the management of thyroid eye disease developed jointly with the Royal College of Physicians should be completed in the near future.

The College is extremely grateful to the members of the guideline groups who give very generously of their time to develop this important resource for College members.

National Institute for Health and Clinical Excellence (NICE) Appraisals

NICE technology appraisals have formed an increasing amount of the work of the Scientific Department. The College is very fortunate to have had a great deal of help from consultant members who have volunteered to represent the College on NICE technology appraisals, scoping exercise and workshops. Much of the recent activity has been in the area of medical retinal and our medical retina colleagues have devoted an enormous amount of time to this activity.

This year, NICE has produced final guidance on: aflibercept (Eylea®) for the treatment of age-related macular degeneration; the use of ocriplasmin for symptomatic vitreomacular adhesion; and the use of ranibizumab (Lucentis®) for the treatment of diabetic macular oedema. A number of other NICE appraisals are on-going.

Seminar Programme

The College has had another successful seminar programme in 2013 with ten seminars covering most subspecialty areas of ophthalmology. There was particularly strong attendance for the Skills in Retinal Imaging seminar, the Emergency Ophthalmology seminar and the Elizabeth Thomas seminar on macular disease. Each of these seminars will be repeated in 2014 alongside a number of new subject areas.

Eye – The Scientific Journal of the College

Eye continues to be very successful. During 2013, the submission of articles to Eye remained steady with an increased number of clinical trials, eponymous lectures and reviews published.

Eye helped celebrate the College's 25th anniversary in 2013 with a special "How to get published" seminar at Congress and a video recording of the President's session. These recordings are now available online at the Eye website. The first international editorial board meeting occurred at the American Academy of Ophthalmology meeting in New Orleans and was very productive. For example several innovative solutions were suggested to streamline the review process and encourage more review submissions.

Andrew Lotery, the Editor in Chief, would like to thank the Editorial Board, the reviewers; Steve Beet, the Editorial Assistant and the team at Nature Publishing Group for all their support of the journal.

Focus

Faruque Ghanchi took over from Victor Chong as editor of Focus in 2013 and has maintained the high standards of Focus publications. Focus published invited papers in quarterly issue of College News. A rapid peer review has been introduced to enhance publication standards and articles provide ready reference for busy clinicians on important clinical subjects by articles prepared by subject experts.

British Ophthalmological Surveillance Unit

The British Ophthalmological Surveillance Unit (BOSU) provides a unique opportunity for the continuous epidemiological investigation of the incidence and clinical features of rare eye conditions of public health or scientific importance that leads to improvement in prevention or treatment of these diseases and service planning. During 2013 a total of 12 different conditions appeared on the monthly report card and we received 229 positive reports of cases of interest.

The BOSU currently has a reporting base of 1230 ophthalmologists. The mean monthly card return rate during 2013 has been 76%, 1% higher than the previous year.

This year we have further developed our involvement in rare disease surveillance through operating the Scottish Ophthalmological Surveillance Unit and international collaboration with the Australia and New Zealand Surveillance Unit.

We have been able to continue our work with the kind support of funding from Fight for Sight.

With the support of the RED Trust and the WF Ross Foundation, we were able to offer two research bursaries of £6,000 to help ophthalmologists in training to conduct a BOSU project. Dependent upon the submission of satisfactory phase 2 applications, the RED Trust Bursary has been awarded to Yun Wong from Sunderland to look at Incidence of Graves Orbitopathy and the Ross Foundation Bursary has been awarded to Henry Smith from Glasgow looking at carotid-cavernous fistula.

The Ross Foundation has continued support for the Scottish Ophthalmological Surveillance Unit to ascertain cases of less rare diseases. The Project running from November 2013 will be 'Incidence of submacular haemorrhage' undertaken by Gerry McGowan in Glasgow. The applicant selected to receive the 2014 bursary is Megan Johnson from Dundee to study Paediatric Uveitis.

BOSU activity continues to be strongly supported by ophthalmologists and thanks go to Barny Foot for excellent work in administering this scheme.

Publications

Bibliography – Publications arising from studies run through the BOSU during 2013 were:

1. Lyall DA, Tey A, Foot B, Roxburgh ST, Virdi M, Robertson C, Macewen CJ Post-intravitreal anti-VEGF endophthalmitis in the United Kingdom: incidence, features, risk factors, and outcomes. *Eye (Lond)*. 2012 Dec;26(12):1517-26
2. Bradbury JA, Taylor RH. Severe Complications of Strabismus Surgery. *J AAPOS* 2013;17(1): 59-63
3. Best J, Silvestri G, Burton B, Foot B, Acheson J. The Incidence of Blindness Due to Idiopathic Intracranial Hypertension in the UK. *Open Ophthalmol J*. 2013 Jun 28;7:26-9
4. Morris DS, Willis S, Minassian D, Foot B, Desai P, MacEwen CJ. The incidence of serious eye injury in Scotland: a prospective study. *Eye (Lond)*. 2013 Oct 4. doi: 10.1038/eye.2013.213. [Epub ahead of print]



Mark Watts
Chair, Education Committee



Alex Tytko
Head, Education and Training Department

Education Committee

A major focus of interest in 2013 has been the College input into and response to the Shape of Training Review, which has now been published. Throughout this time we have worked closely with the Training Committee to present a cohesive and proactive approach to the challenges that face us. We continue to engage with the many bodies involved to ensure we maintain and enhance our trainees' learning experience.

Fiona Spencer was welcomed as the new Chair for the Curriculum Subcommittee and we say farewell to others,

as this will be the last annual report with contributions from Jim Innes as Chair of the E-learning Subcommittee, Stephen Vernon as Chair of the International Medical Graduates (IMG) Subcommittee and Phil Murray as the representative for Undergraduate Ophthalmology and Foundation Programme Training.

We would like to acknowledge the support and hard work of all the College members involved as well as that of the College staff.

Awards and Scholarships

Pfizer Ophthalmic Fellowship

10 applications were received

Aman Chandra was awarded £15,000

12 month vitreoretinal fellowship at the Royal Victoria Eye and Ear Hospital, Melbourne, Australia

Harry Petrushkin was awarded £30,000

3 year research project at the Istanbul University Hospital, Turkey and King's College Hospital, London on 'The genetic basis of HLA-B*51 – KIR3DL1 interactions in Behcet's Disease'

Geraint Williams was awarded £5,000

12 month project in Singapore on 'the application and use of the femtosecond laser in enhancing corneal transplantation and cataract surgery'

IGA Research Awards

10 applications were received

Chris Hammond was awarded £49,582

'Investigation of the utility of cascade screening in high-risk family members of African-Caribbean glaucoma cases'

Ian Murdoch was awarded £30,000

'Primary glaucoma treatment trial in Kenya and South Africa – SLT vs. medication'

KS Lim was awarded £14,253

'The contribution of altered aqueous dynamics in the development of raised intraocular pressure in patients with uveitis'

Fight for Sight

13 applications were received

Geraint Williams was awarded £5,000

Published research entitled 'Epithelial CD45INTCD11b+CD16+CD14- neutrophils are present in sub-clinically inflamed conjunctiva in Ocular Mucous Membrane Pemphigoid and are associated with progression of disease'

**Patrick Trevor-Roper
Undergraduate Travel
Award**

23 applications were received

Abigail Letchford was awarded £550

Intercalated International Health BSc (2012-2013) in which she has done a research project in Guinea Bissau aiming to establish the prevalence of avoidable eye conditions in the older adult population as well as assessing cataract and trichiasis surgery in terms of access, barriers and outcome

Colin McAlinden was awarded £550

Elective in Marsielle, France in which he will do qualitative research to compare ophthalmology training in France and the UK; observe clinical practice and foster potential research links

**Dorey Bequest and Sir
William Lister Travel
Awards**

5 applications were received

Matthew Edmunds was awarded £600

Thyroid Eye Disease: Increasing knowledge and initiating collaborative research at Bristol and Moorfields Eye Hospitals

Ahsen Hussain was awarded £600

Observership Paediatric Oculoplastic and Orbital Surgery at the Children's Hospital of Philadelphia

Sameer Trikha was awarded £600

Glaucoma research/clinical fellowship on developing sustainable glaucoma service delivery in Singapore

Ethicon Travel Award

10 applications were received

V Swetha Jeganathan was awarded £800

Two weeks for clinical and surgical exposure to advanced cataract surgery at the Tilganga Institute of Ophthalmology, Katmandu, Nepal

Gurjeet Jutley was awarded £900

One year as a trainee in Ispahani Islamia Eye Institute and Hospital in Dhaka, Bangladesh

Karinya Lewis was awarded £800

Two weeks establishing a VISION2020 link between Juba Teaching Hospital Eye Department, South Sudan and Wessex Deanery and Norwich Hospital

Mario Saldanha was awarded £1000

Two year fellowship in Cornea, External Ocular Diseases and Refractive Surgery at the University of Toronto in Canada

Imran Yusuf was awarded £800

One week visit in February 2014 which would involve evaluating the impact and training on the management of diabetic eye disease at the Kwale District Eye Centre in Mombasa, Kenya

College Tutors

The College Tutor of every Unit has a pivotal role in the local delivery of training and liaison with the Trust, Deanery and Royal College. The knowledge and skills required are covered by the one day course run three times a year, which has been renamed "College Tutor Training Day". This change reflected that tutors were not only finding it useful for induction, but also as an update repeated after a couple of years in post.

The role of Regional Advisors has been enhanced to give further support to College Tutors, and help them to keep pace with the rapid developments in education. By leading local College Tutor meetings a couple of times a year, there is the opportunity to cascade new initiatives, give support in the handling of more difficult issues and help with the development of their training role.

Training the Trainers

The well-established format of the Training the Trainers course of four individual days has been audio recorded and the talks spliced with the slides to make self-directed learning sessions. Now the face-to-face time can be used more effectively for the ever-valuable practical sessions, and the number of days on which delegates need to attend the College can be reduced.

In September a version of the successful block course was taken overseas for the first time, to Kenya. This was part of an International Health Links Grant with the College of Ophthalmology of Eastern, Central and Southern Africa (COECSA). The course was hugely valuable in introducing new approaches, skills and resources to training leaders from eight countries. Delegates' action plans included ideas to develop training and trainers nationally, in their units, and for themselves.

Curriculum Subcommittee

The Curriculum Subcommittee continues to both undertake a rolling review of the curriculum and to respond to requests and comments from trainers and trainees and the General Medical Council.

Following feedback from the Workplace-based Assessments questionnaire, there have been improvements made to individual assessments and review of the required numbers. A patient feedback form on the consultation will become available in due course.

We are consulting with some sub-specialty groups in order to review the requirements for sub-specialty surgery in the curriculum.

The e-portfolio continues to be updated to help facilitate recording of the trainees' achievements. We are currently debating how to demonstrate the breadth of the learning outcomes by a trainee each year. The e-logbook has also been further updated.

The newly revised Medical Ophthalmology Curriculum has been submitted to the GMC for ratification, prior to recruitment for planned expansion in this specialty. The Higher Specialist Scientific Training curriculum development is progressing.

Further work with colleagues from COECSA to develop their curriculum has been undertaken and further workshops are planned.

e-Learning Subcommittee

This has been a year of steady though not rapid progress with development of two more online courses to compliment practical courses at the College. Phil Bloom and colleagues have produced a course on Glaucoma Surgery and Harminder Dua and colleagues have produced a course on Cornea/Ocular Surface very ably supported by Jen Van Iwaarden "our" e-Learning for Healthcare (e-LfH) Instructional Designer and Alex Tytko as Project Manager. These courses are available for use in local blended learning.

Additional funding has enabled more content to be available for courses on Descemet's Stripping Endothelial Keratoplasty (DSEK), whilst others are in development.

IT development continues to include a "single sign on" for College Members to access e-LfH content directly from the members area of the College website and an agreed format for the Image Library, both available in 2014.

In Ophthalmopaedia, authors and editors can now cite their work in the knowledge that index pages are findable on internet searches. Bertil Damato and Christopher Liu have stepped down from the editorial group due to other commitments. We are very grateful for their work in trying to progress this project. Kasra Taherian continues in his Editor role.

More Eponymous Lectures have been added to the website in 2013.

International Medical Graduates (IMG) Subcommittee

2013 has been another busy year for the IMG Subcommittee with a total of 18 individual applications processed through the Dual Sponsorship Scheme (DSS). This is a similar number to last year and consolidates the 250% increase in numbers compared with five years ago. A new pilot scheme was initiated where Trusts were asked to create new Trust International Medical Graduate (IMG) training posts where “vacant” training exposure exists. We had a small but enthusiastic initial response from Clinical Directors and hope to fill a number of posts next year from a new “bank” of IMGs currently being developed.

This system will run in parallel with the longstanding Dual Sponsorship Scheme with the logistics of application common to both. DSS scheme details can be found on the website, The secretariat and the IMG Subcommittee members have achieved short turn round times again this year when processing applications and thanks are again appropriately directed towards the deliverers of this somewhat hidden activity (all Subcommittee work is done by e-mail).

We have now operated the new application and review documentation system for the DSS for over a year and this year’s applications have been more straightforward as a result of the fine-tuning that we put in place in 2012. Governance and review data is now collected and I am pleased to relate that all IMG reports have been satisfactory within the last year.

This is the seventh and final annual report from Stephen Vernon as Chair of the IMG Subcommittee. A new Chairperson will be taking over next year. Stephen would like to take this opportunity of thanking all the College staff and Committee members with whom he has worked with over the years for their dedication to the cause and efficient and helpful support they have provided.

Surgical Skills Subcommittee

This has been a good year for the microsurgical skills courses with excellent feedback from the candidates and addition of new faculty members. A second course on lamellar corneal surgery was run and was again scored highly by all the participants.

New courses are being developed for Ocular Ultra-sound and complex Lens implantation techniques.

100% of candidates would recommend our courses

The design and layout of the new skills centre at Stephenson’s Way is complete and the College has had much support from the Ophthalmic industry to help equip the new centre. It promises a larger space and greater capacity with facilities on one floor which should make running courses more flexible.

It is hoped to add a second simulator to the skills centre in 2014 and uptake around the UK has increased with approximately 20 centres now owning one.

Undergraduate Ophthalmology

The College provides advice and support to the British Undergraduate Ophthalmology Society (BUOS). The remit has been to identify key undergraduate learning outcomes that would realistically reflect the future needs of the trainee doctor and be acceptable to the GMC and deliverable across all medical schools. This would be coupled with the provision/repository of appropriate teaching resources to support this.

Foundation Programme Training

The Ophthalmology Foundation Curriculum planned rewrite are on temporary hold until decisions have been made regarding the ‘Shape of Training’ review, in particular implications of the Foundation Programme on postgraduate training. The College still continues to have a role in the generic Foundation Curriculum as part of the Academy of Medical Royal Colleges Foundation Committee.



Mike Hayward
Chair, Training Committee



Alex Tytko
Head, Education and Training Department

Training Committee

This year has seen changes to the functioning of the Training Committee. Small Subcommittees (see below) that can undertake detailed work meet in the morning followed by the main Committee in the afternoon where this can be reviewed and policy decisions made. This has proved to be productive and efficient to the extent that the number of meetings next year has been reduced to three.

We are reviewing processes to ensure that they are robust, transparent and timely beginning with changing the process for recommending trainees for CCT. This has aligned us with other Colleges in that trainees applying for CCT can have their applications assessed on arrival at the College rather than waiting for the next Training Committee meeting, and secondly in removing the right of Council to veto a CCT recommendation.

The 'Shape of Training' review, if approved by the four UK Secretaries of State, will significantly and imminently change the Postgraduate Medical Education landscape. We submitted evidence to the review and also, through the AoMRC, a response to the draft report and were pleased to see some important changes and clarifications as a result. A workshop in the autumn with Lay, Trainee and Committee members started our thoughts on how the curriculum could be aligned with the objectives of the 'Shape' review. As with any change members have voiced some considerable disquiet, in this case around about how the proposals could lower the quality of training and lower the quality of service provided to patients.

In December the following principles were agreed by both the Training Committee and Council:

1. In order to maintain patient safety the overall standard at which we set the new CST must be the same as the current whilst accepting that the content of the CCT curriculum may differ. (Paragraph 90 of the Shape report)
2. The College will take a robust position if we have concerns that trainees will not be able to meet that standard at the end of training as a result of the changes.

3. We will not accept an unsatisfactory curriculum 'umbrella' arrangement which would impact negatively on our own curriculum.
4. There needs to be a College wide debate about what is going to be asked of consultant's in the future with reference to specialism v generalism. We need to find an appropriate balance between the two and know what the service requires before we start to configure for it.

The Centre for Workforce Intelligence (CfWI) gathered information from both this College and the Royal College of Physicians prior to publishing its report on Medical Ophthalmology training numbers. New medical ophthalmology training posts will be created from the present pool of 'surgical ophthalmology' posts with the aim of eventually creating a cadre of around 100 medical ophthalmologists. The MO curriculum has been rewritten and extended from four to five years with some modular training to achieve flexibility. This has been approved by the Physicians Training Board and approval from HEE and GMC are awaited.

The e-logbook use continues to grow with 1000 users by July. It is a fully encrypted stable website, in which it is easy to enter data and conduct basic cataract audit analysis. Work is taking place towards making the website more flexible with increased audit tools and automatic links to the Educational Supervisor's report. Mobile apps are being updated and released in early 2014.

The College continues to monitor cataract surgical training; it is disappointing to see how few senior trainees reaching their CCT have supervised more junior trainees undertaking cataract surgery. Difficulty in performing cataract surgery remains one of the commonest causes of adverse ARCP outcomes and questions as to suitability of a trainee for CCT. One of the questions posed at the 'Shape' workshop was 'Do all trainees need to be trained in cataract surgery?'

Equivalence of Training Subcommittee

This year has been the busiest year to date with 36 Certificate of Eligibility for Specialist Registration (CESR) applications, greatly increasing the workload for assessors. The College has further expanded the Equivalence Faculty and a training day was held at the College run jointly with the GMC.

The first ophthalmology 'Academic' CESR was granted this year. New guidance and Specialty Specific Guidance is now available for CESR applications based on Academic/Research experience.

The GMC recognise that the College Equivalence Faculty plays a crucial role in this process. College Assessors have contributed to a GMC survey to obtain evaluators' views on the service they receive. The GMC will produce an annual CESR report to which the College has contributed.

Evaluation of Training Subcommittee

This has been the group's first year and its role is to scrutinise timetables and objectives of Trainee Selected Components (TSCs) and Out of Programme Research (OOPR) that trainees are planning to undertake to ensure that they are consistent with the aim of the TSC/OOPR and are of a high standard. Reports on completion of TSCs will aid evaluation with a register of approved TSCs being maintained and published on the College website.

The group has analysed the ophthalmology results in the GMC's national Trainee Survey. Where issues have been highlighted, the College enters into discussions with the relevant Local Education and Training Board (LETB) Dean.

The College (and the educational community at large) is aware that post CCT Fellowships work to the 'caveat emptor' principle. The Subcommittee is looking at how these too could be approved as indicated in the 'Shape' proposals.

Quality of Assessment (QOA) Subcommittee

In its first year the Subcommittee has concentrated on the new processes required for CCT recommendations and in 2014 will scrutinise the new national Educational and Clinical Supervisors' reports to meet a high standard. At present, we do not have the capability to centrally assess a set percentage of these but our external advisors (to ARCP panels) will be asked to review the Education Supervisor and Clinical Supervisor reports for the trainees that they see at ARCPs. Heads of School and Training Programme Directors (TPDs) are to ensure that feedback to Educational Supervisors and Clinical Supervisors is given priority for 2014 and not to accept reports which fail to meet an acceptable standard.

Recruitment Subcommittee

Interviews took place in Bristol over 3 days.

323 ST1 applications were received and 242 trainees invited to interview.

134 were deemed suitable for appointment for 93 posts.

40 ST3 applications were received of which 24 were short-listed and 11 deemed suitable for appointment.

Despite the unanimous support of the College Training and Academic Committees we have been unable to persuade the National Institute for Health Research that Ophthalmology Academic Clinical Fellow (ACF) recruitment should take place alongside National ST1 recruitment. We will continue to argue this case so that the robustness of academic selection can be improved.

We congratulate our Lead Dean, Bill Reid, on being elected to the Chair of The Conference of Postgraduate Medical Deans (COPMeD) but it is with sadness at his departure from our meetings. He has given freely to our Committees the benefit of his knowledge and experience and his sound advice has always come from a 'feet on the ground' perspective. We wish him well in his new post.

We continue to improve our processes, such as the review of applications electronically, to make the best use of our members' time and would like to thank the Training Committee, its Subcommittees and the support staff at the College for their outstanding contributions and diligence over the past year.



Peter Tiffin

Chair, Examinations Committee



Emily Beet

Head, Examinations Department

Examinations

2013 has been an active year with candidate numbers continuing to increase. We have delivered a busy schedule of examinations whilst continuing to evolve both our examination structures and departmental procedures.

The year started with the introduction of a new centre for the Part 1 FRCOphth Examination in Kuala Lumpur, taking the number of centres for this examination to three in the UK and four overseas. In February the Part 2 FRCOphth Written Component changed to a single multiple-choice question paper. This change in format has been well received by candidates and has been accompanied by a welcome increase in the pass rate – a result of candidates preparing well for the examination. In September the Part 2 FRCOphth Written Component was also held in centres outside of London for the first time.

2013 has also seen arrangements finalised for the first sitting of the Refraction Certificate to take place in Kuching, Malaysia, in June 2014. Discussions are also ongoing regarding the possibility of holding the Part 2 FRCOphth Oral Examination in the region.

All College examinations are regulated by the General Medical Council (GMC) and any changes to the examination structure need to be approved prior to implementation. Following candidate and examiner feedback, and in consultation with the Ophthalmic Trainees Group (OTG), an application was made to the GMC in the autumn to further amend the structure of the Part 2 FRCOphth examination. The proposed changes to uncouple the written and oral components of the examination and to alter the structure of the OSCE have received provisional GMC approval so we hope to introduce these changes from August 2014.

As regulator of postgraduate examinations, the GMC have also introduced a number of changes applicable to all Colleges. From August 2013 candidates are permitted a maximum number of six attempts per examination. From mid-2014 Colleges will also be required to provide examination data to the GMC by individual GMC number. The GMC have provided a number of assurances on the use of this data and also met with the OTG earlier in the year to discuss concerns raised by them. The College is currently finalising a Confidentiality Agreement with the GMC. Further details of this initiative are available on the GMC website www.gmc-uk.org/education/postgraduate/14171.asp.

The Examinations Committee has reviewed the Appeals Procedure, in line with good practice recommendations from the Academy of Medical Royal Colleges' Assessment committee (AAC). This provides candidates with additional appeal outcomes, including the discounting of an attempt and the full or partial refund of an examination fee. The Committee has also reviewed our internal quality assurance processes, to ensure best practice recommendations are followed, and introduced a bespoke risk register for the department to identify and mitigate risks relating to examinations.

The review into processes for the appointment, training and monitoring of examiners is on hold until such time as recommendations to generic standards for examiners by the AAC, at the request of the GMC, has been completed.

In conjunction with the Education and Training Department, and in close liaison with the OTG, the e-portfolio has now been developed to facilitate the inclusion of a candidate's examinations history. Examination results and feedback will, in future, be provided to candidates via the e-portfolio with abridged examinations records available to ARCP panels.

The Examinations Department continues to actively support the College's link with the College of Ophthalmology of Eastern, Central and Southern Africa (COECSA) with mentoring, support and training delivered in September for the fourth Fellowship examination, held in Mbarara, Uganda.

The Department and Committee would not be able to deliver examinations without the support and hard work of many people. We are, as always, indebted to our panel of examiners and the units that have hosted clinical examinations this year – the Sussex Eye Hospital, Brighton; The Royal Victoria Infirmary, Newcastle-upon-Tyne and the Hull and East Yorkshire Eye Hospital. The Senior Examiners and their Subcommittees are responsible for a large amount of work, and their support and dedication is much appreciated. In particular, special thanks go to Sara Livesey, Senior Examiner for the Part 1 FRCOphth; Nicholas Hawksworth, Senior Examiner for the Refraction Certificate; Robert Taylor, Senior Examiner for the Part 2 FRCOphth; Bridget Hemmant, Senior Examiner for the Diploma; Caroline MacEwen, Senior Examiner for the Fellowship Assessment; Jeremy Prydal, Senior Examiner for the Certificate in Laser Refractive Surgery; Winfried Amoaku, Senior Examiner for the Duke Elder Undergraduate Prize Examination; and Michael Nelson, Educational Advisor. We are also extremely grateful to the excellent team in the Examinations Department for the advice and support they provide throughout the year.

Andrew Lotery
and Andrew Dick
Shared Chairmanship

Parul Desai
Chair, VISION 2020 UK Ophthalmic Public
Health Committee

The Academic Group

The Academic Group continues to progress with galvanising the academic community and future academic leads through facilitating training requirements and developing mentoring for trainees.

We continue to engage with a number of significant groups such as academic trainees within the College Congress highlighting their work within symposia and the Academy of Medical Sciences to widen our scope and provide reach for the scientific excellence within our specialty.

The group, with support of the College and its representation on the Training Committee, also promotes academic careers via several paths. Work continues on developing the core curriculum for academic trainees within the College curriculum. This currently includes active movements to support best pathways to recruitment and retention of academic trainees and in particular on-going dialogue with the National Institution Health Research.

Our prestigious joint fellowships have also delivered success and continue to allow trainee ophthalmologists the opportunity to undertake a fully funded PhD which is the perfect launch pad to an academic career. These fellowships include; the Royal College of Ophthalmologists and the Medical Research Council John Lee Fellowship, the Medical Research Council, RCOphth and Novartis Fellowships and the fellowship that has been developed between Fight for Sight and the Medical Research Council.

In 2013, we worked on improving our presence as an academic community through marketing the impact of research we do. This is a developing venture to bring in public engagement as well as our peers and use the reach of the College world-wide to emphasise our excellence.

VISION 2020 UK Ophthalmic Public Health Committee

During the past year the College managed the transition of the Ophthalmic Public Health Group to establish the VISION 2020 UK Ophthalmic Public Health Committee in November 2013. The College holds the Chair of the Committee which has broad representation and support from all sectors. It focuses on collaborative working at a strategic public health leadership role in the core areas of:

***prevention of poor eye health and sight loss,
promotion of good eye health and sight,
improving eye health and health services
equitable access to effective timely services and
support for independent living***

The Committee will work at both a strategic and advisory level to identify public health issues specific to eye health and their relative priorities, to inform and align subsequent actions on taking these forwards by UK VISION 2020 and the Committee's member organisations.

The Committee's leadership role is widely supported and this was demonstrated by the response to the NICE Consultation for Public Health Quality Standards for inclusion of the topic "Preventing Sight Loss". The Committee developed and submitted a collective response and supporting evidence on behalf of 15 key organisations and stakeholders in the UK eye health and care sector. In addition to its member organisations, this response also included the Clinical Council for Commissioning Eye Care and Moorfields Eye Hospital NHS Foundation Trust.



Caroline MacEwen
Chair, International Subcommittee

The International Subcommittee

This year the international activities of the College have been reviewed by the International Committee and developed into a strategy for the next 2 years. The main objectives are to improve education and training in ophthalmology worldwide by sharing knowledge and expertise, to provide support for our international members and those who volunteer and work overseas and to ensure adequate College governance and coordination around international work undertaken. This has helped to focus the role of the College in international ophthalmology.

As part of this strategy, the College promotes an active dual sponsorship scheme which allows overseas medical trainees to come to the UK for a period of up to two years. This scheme permits overseas ophthalmologists to undergo specialist training in this country for a limited period. They then return to their own country with improved clinical and surgical skills.

The College's VISION 2020 UK link with the College of Ophthalmology of Eastern, Central and Southern Africa (COESCA) [previously the smaller Eastern African College of Ophthalmologists (EACO)] has been strengthened by the successful bid for a grant of £416,000 from the Department for International Development (DfID). This means that training visits have taken place to Africa in order to build a curriculum and to enhance the examination and assessment processes. These help to improve the quality and quantity of ophthalmic training in the African countries covered by the link.

The College has introduced a Congress sponsorship scheme whereby UK consultants can introduce and accompany overseas ophthalmologists to Congress; the Congress fee being complimentary to the visitors.

It is becoming increasingly difficult return to the UK after a period of working or volunteering abroad because of issues around revalidation, CPD and return to work policies. Support and advice for these circumstances are being developed by the College in liaison with the Academy of Medical Royal Colleges International Forum (AoMRC IF) which provides shared knowledge and experience of other UK medical colleges' international activities.

We are developing a database of the International activities of our members and of those who would like to undertake work overseas. This aims to provide information and networking opportunities both for those involved and for those who have the desire and skills to contribute.

The experiences and contribution of each member of this Committee are individual and invaluable to the success of international working at the College and we are most grateful to each for their role.



Wagih Adlimandos
Chair, European Subcommittee



David Kinshuck
Chair, The Staff and Associate Specialist
Ophthalmologists' Group

The European Subcommittee

The European Subcommittee acts as a conduit between the College and European organization.

The UEMS (Union Européenne des Medecins Specialistes) is the main adviser to the EU on medical matters and the College representatives of the Ophthalmic Section of UEMS work towards protecting and maintaining standards.

Such work includes the progress on the Recognition of Professional Qualifications as this has direct relevance to cross border mobility of doctors.

The UEMS is setting up European Reference Networks (ERNs) which are specialty groups formed in partnership with European Scientific Societies. The aim is to improve service delivery, working systems, patient pathways, clinical tools and earlier adoption of scientific evidence.

The European Board of Ophthalmology (EBO) is the section arm for training and education in Ophthalmology with the number of candidates sitting the EBOD exam continuing to rise, we have also seen an increase in the number of examiners from the UK.

There has been a considerable increase in the number of requests for European Association of Centres of Medical Ethics (EACME) to approve Continued Medical Education credit for meetings and courses. This is an important income generator but is a significant workload on the EBO which assesses applications in the light of strict European guidelines.

I wish to thank all the Committee members for their time and support in the College continuing to influence professional standards outside of the UK.

The Staff and Associate Specialist Ophthalmologists' Group (SAS)

The SAS Committee continues to play an important educational and advisory role, contributing to the work of all College Committees.

In October 2013, with support from the College, we ran a really interesting and well-attended SAS day in Birmingham in October 2013, with wonderful speakers, addressing neuro-ophthlamology, medical retinal, diabetes empowerment, and corneal disease.

The group continues to work on behalf of SAS doctors who are under increasing pressure to treat more patients, whilst enduring decreasing educational budgets. We are grateful to the College for supporting SAS doctors to influence their managers and continue to provide a high quality service.



Will Dean

Chair, Ophthalmic Trainees' Group



Susannah Grant

Deputy Head, Education and Training Department

The Ophthalmic Trainees' Group

The Ophthalmic Trainees' Group (OTG) aims to represent the view and interests of trainee ophthalmologists at the College, and to make sure that the voices of trainees are heard at all levels of College decision making.

One representative from the OTG will sit on each of the College standing Committees keeping training and education high on the College agenda. An OTG member also sits on the Academy Trainee's Group of the Academy of Medical Royal Colleges, to help influence future policy on training.

With the publication of the Shape of Training Review, OTG Representatives and trainees continue to be involved in the ongoing and evolving implications of the main themes; to help shape the best outcome for the trainees and trainers of the future.

This year marks the first cohort of Specialist Trainee (ST) run-through ophthalmologists being awarded Certificate of Completion of Training, and the OTG will help gather evidence and draw on experiences of those completing training.

In 2013 the OTG organised its 4th successful symposium in Manchester with sessions on navigating training, choosing a subspecialty and careers beyond training. 2014 will see the symposium return to London where we hope to deliver an even better programme for ophthalmic trainees.



Tom Bremridge
Chair, Lay Advisory Group



Richard Keeler
Honorary Curator

Lay Advisory Group

The Lay Advisory Group plays an important role in the College and provides a wide breadth of non-medical experience and skills, from law and university professors to representatives from the Health and Visual Impairment sectors. We provide advice to help inform patient focused work within the College and represent the College at the Patient Lay Group of the Academy of Medical Royal Colleges.

In 2013, members of the group supported the work of the College in a number of key areas including lobby of the Department of Work and Pensions to change the criteria used by assessors for establishing entitlement to Employment and Support Allowance for people with sight loss.

The group also continued to review clinical guidance notes to ensure that the patient care and communication aspects have been suitably covered as well as debating the implications of moving many eyecare services into the community and provision of these services by multidisciplinary teams including optometrists.

We also supported the Education and Training Department, by taking part in the College workshop discussing the Shape of Training Review.

We are grateful for the hard work of our volunteer members and their support during 2013.

Museum and Library report

Occasionally a collection of old ophthalmic instruments, books and catalogues comes on the market. Such an event occurred in the last year.

An ophthalmologist in Amsterdam decided to sell the collection that he had accumulated over his lifetime. We were fortunate to be given the first chance to see what was on offer. The result was the acquisition of two rare and important instruments in the history of ophthalmology.

Richard Liebreich's demonstration ophthalmoscope (1855) was one of those instruments, probably the most important development after the invention of Hermann von Helmholtz's ophthalmoscope in 1851. The other instrument was a rare double wheel, double optometer made in Switzerland in the 1880s.

A number of gifts of instruments have been gratefully received, one included a rare ophthalmoscope of 1853 by Coccius.

There were no additions to the Antiquarian Library during the year. Planning is well under way for the installation of the museum and the antiquarian library in new cabinets in Stephenson Way.



William Newman

Honorary Secretary



Aziz Rajab-Ali

Head, Operational Support Department

Operational Support Department

2013 was a busy year for the Operational Support Department which began with my predecessor, Bernie Chang, being elected as Vice President and Chair of Professional Standards. We wish him every success in his new College role and thank him for his valuable contributions to the Department's work.

The Operational Support department plays a critical role in ensuring that the College can perform effectively and carry out its day to day business activities. Amongst its most important contributions in 2013 was the substantial 6% increase in subscription income due to a more rigorous collection procedure matched by a significant reduction in bad debt.

The 2013 College election was the first President's election to be predominantly run online, reducing the risk of lost ballot papers and making significant cost savings. It was also contested by a record eight candidates and achieved a turnout of 52%, up by 5% on 2011.

As part of an overall review of our systems and personnel, the Operational Support department implemented a number of high level initiatives; a HR audit, increased training for staff and the tendering process for a new Customer Relationship Management (CRM) system. The new system will allow the College to work in a more streamlined and efficient way. We have also contributed significantly to the new building project and management of the relocation plans from Cornwall Terrace.

2013 has been a significantly challenging year but the above initiatives have put in place a solid foundation for the coming year and beyond.



Peter McDonnell

Honorary Treasurer

The financial results of the College to 31 December 2013 are summarised in the Statement of Financial Activities and Balance Sheet on page 31 of this Annual Report.

The financial aspects of College activities continue to be scrutinised by the Finance Committee.

The overall net income amounts to £524,000. Of this £410,000 was on the unrestricted funds of the College. The income on other restricted funds of £269,000 includes donations of £147,000 for the refurbishment of the College's new premises and these contribute to the excess of income over expenditure of £114,000 on the restricted funds.

It is important that we continue to plan a balanced budget for the forthcoming year to enable the College to continue to invest in services and support for members at all levels.

Despite the setback with our initial contractor the refurbishment of the new College premises at 18 Stephenson Way is again proceeding. There has been successful fundraising which continues and which is significantly helping our aim for the new building to be refurbished to the highest standards.

Associated with the move the College is in the process of replacing its current membership data base and will be updating the College website; together these will both require significant financial investment.

Membership levels have remained at a stable figure. A modest increase in subscriptions rates has been agreed for 2015 at slightly less than the current rate of inflation.

The College Congress in Liverpool in 2013 was a scientific success; developments continue in order to assure its longer term financial stability.

The Examinations run by the College are moving towards becoming self-supporting from the financial point of view as the previous diet of exams is gradually wound down. The College is cautiously increasing the sitting of some of its examinations overseas; this is being done on a cost neutral basis.

College work on the development of revalidation continues to be mainly funded with grants from other bodies, but it is likely that the College will incur increasing costs in the future in relation to revalidation and the committee is monitoring the situation.

This year the financial markets have been more buoyant and this has resulted in a modest increase in the value of the College's invested funds. The committee continues to monitor closely these funds which are managed by Sarasin and Partners. Interest rates for our cash deposits remain low.

Thank you to the members of the Finance Committee for their help and support over the year, and a special thank you to Mark Merrill, the Finance Director and to Aziz Rajab-Ali, the Head of the Operational Support and the staff of the department.

The Royal College of Ophthalmologists

The Auditor's Report

We have examined the summary financial statement for the year ended 31 December 2013, which comprises the Statement of Financial Activities and the Balance Sheet.

Respective responsibilities of trustees and the auditor

The trustees are responsible for preparing the summary financial statement in accordance with applicable United Kingdom law and the recommendations of the charities SORP.

Our responsibility is to report to you our opinion on the consistency of the summary financial statement within the annual report and with the full annual financial statements and the Trustees' Annual Report. We also read the other information contained in the annual report and consider the implications for our report if we become aware of any apparent misstatements or material inconsistencies with the summary financial statement.

Basis of opinion

We conducted our work in accordance with Bulletin 2008/3 issued by the Auditing Practices Board.

Our report on the charity's full annual financial statements describes the basis of our opinion on those financial statements and on the Trustees' Annual Report.

Opinion

In our opinion the summary financial statement is consistent with the full annual financial statements and the Trustees' Annual Report of Royal College of Ophthalmologists for the year ended 31 December 2013.

We have not considered the effects of any events between the date on which we signed our report on the full annual financial statements on 10 March 2014 and the date of this statement.

Judith Miller
Sayer Vincent
Statutory Auditor
8 Angel Gate
City Road
LONDON
EC1V 2SJ

The Royal College of Ophthalmologists

Statement of financial activities

For the year ended 31 December 2013

	Unrestricted funds £'000s	Endowment funds £'000s	Other restricted funds £'000s	2013 Total £'000s	2012 Total £'000s
Incoming resources					
Incoming resources from generated funds					
Voluntary income	3	3	269	275	123
Activities for generating funds					
Investment income	99	28	22	149	161
Incoming resources from charitable activities					
Subscriptions Receivable	1,184	-	-	1,184	1,116
Examinations Department	546	-	-	546	557
Education and Training Department	201	-	8	209	145
Professional Standards Department	12	-	-	12	19
Scientific Department	891	-	30	921	750
Journal "Eye" – joint venture	753	-	-	753	717
Scholarships and Awards	-	-	15	15	15
The British Ophthalmological Surveillance Unit (BOSU)			32	32	56
Other incoming resources	59	-	-	59	46
Surplus on disposal of functional property	-	-	-	-	4,810
Total incoming resources	3,748	31	376	4,155	8,515
Resources expended					
Cost of generating funds					
Investment Manager's Fees	17	-	-	17	16
Charitable Activities					
Examinations	767	-	-	767	642
Education and Training	585	-	70	655	655
Professional Standards	236	-	23	259	237
Scientific Activities	900	-	12	912	883
Journal – "Eye"	725	-	-	725	678
Scholarships and Awards	8	10	114	132	130
BOSU	38	-	59	97	101
Governance costs	67	-	-	67	74
Total resources expended	3,343	10	278	3,631	3,416
Net incoming resources before transfers	405	21	98	524	5,099
Transfers between funds	5	(20)	15	-	-
Net incoming/(outgoing) resources after transfers	410	1	113	524	5,099
Other recognised gains					
Gain/(loss) on investments	140	74	2	216	141
Net movements in funds	550	75	115	740	5,240
Funds at 1 January	9,445	749	915	11,109	5,869
Funds at 31 December	9,995	824	1,030	11,849	11,109

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

The Royal College of Ophthalmologists

Balance sheet

As at 31 December 2013

	£000's	2013 £000's	2012 £000's
Fixed assets			
Tangible assets		3,693	2,974
Investments		<u>2,360</u>	<u>2,100</u>
		6,053	5,074
Current assets			
Debtors	520		5,545
Short Term Deposits	5,376		711
Cash at Bank and in Hand	<u>320</u>		<u>146</u>
	6,216		6,402
Creditors:			
Amounts falling due within one year	<u>420</u>		<u>367</u>
Net current assets		5,796	6,035
Net assets		<u>11,849</u>	<u>11,109</u>
Funds			
Restricted funds			
Permanent endowment fund		564	499
Expendable endowment fund		259	250
Other		1,031	915
Unrestricted funds			
Designated funds		5,929	5,991
General funds		<u>4,066</u>	<u>3,454</u>
Total funds		<u>11,849</u>	<u>11,109</u>

Approved by the Council on 7 March 2014 and signed on its behalf by

Professor H Dua, President

Mr P McDonnell, Honorary Treasurer

Committee Members as of 31 December 2013

The Executive Committee

Professor Harminder Dua	<i>President</i>	Mr Mark Watts	<i>Vice President</i>
Professor Anthony Moore	<i>Senior Vice President</i>	Mr William Newman	<i>Honorary Secretary</i>
Mr Bernard Chang	<i>Vice President</i>	Mr Peter McDonnell	<i>Honorary Treasurer</i>
Mr Michael Hayward	<i>Vice President</i>	Miss Melanie Corbett	<i>Council member</i>
Mr Peter Tiffin	<i>Vice President</i>	Mr Saurabh Jain	<i>Council member</i>

Professional Standards Committees

Mr Bernard Chang *Chairman and Vice President*

Subcommittee Chairmen

Mr Jonathan Chan	<i>Continuing Professional Development</i>
Professor John Sparrow	<i>Informatics and Audit</i>
Mr Richard Harrad	<i>Ophthalmology Lead Clinicians Forum</i>
Mr Damien Lake	<i>Ocular Tissue Transplantation Standards Group (OTTSG)</i>
Professor Christopher Lloyd	<i>Paediatric</i>
Mr Timothy Rimmer	<i>Quality and Safety</i>
Mr Richard Smith	<i>Revalidation</i>
Mr George Turner	<i>Workforce</i>
Ms Stella Hornby	<i>Primary and Community Eye Care Group</i>
Mr Scott Fraser	<i>Vision Standards for Driving</i>

Supporting Committee Members

Mr Christopher Blyth	
Mr Timothy Dabbs	
Mr Jonathan Eason	
Mr Mohit Gupta	
Miss Rosalind Harrison	<i>AHPO* Representative</i>
Miss Rea Mattocks	<i>Lay Representative</i>
Dr Mario Saldanha	<i>OTG Representative</i>
Dr Gillian Watts	<i>SAS Group Representative</i>
Mr Nicholas Wilson-Holt	

*Association of Health Professions in Ophthalmology www.ahpo.org

Scientific Department

Professor Anthony Moore *Chairman*

Subcommittee Chairmen

Professor Miles Stanford	<i>The British Ophthalmological Surveillance Unit Executive Committee (BOSU)</i>
Professor Andrew Lotery	<i>Editor of Eye</i>
Ms Parul Desai	<i>VISION 2020 UK Ophthalmic Public Health Committee</i>

Committee Members

Professor Augusto Azuara-Blanco	
Mr Sus Biswas	
Mr Mike Burdon	
Mr Anand Chawla	<i>OTG Rep</i>
Professor Victor Chong	
Ms Parul Desai	
Mr Faruque Ghanchi	<i>Editor of Focus</i>

Mr Mohit Gupta	
Mr Richard Harrad	
Mrs Melanie Hingorani	
Mr Parwez Hossain	<i>Honorary Programme Secretary</i>
Professor Andrew Lotery	
Mr Hunter MacLean	
Miss Susan Mollan	
Mr Manoj Parulekar	
Mr Ian Pearce	
Mr Jeremy Prydal	
Professor Jugnoo Rahi	
Professor John Sparrow	
Professor Paulo Stanga	
Mr James Talks	
Mr Sambath Tiroumal	<i>SAS Representative</i>
Mr Anthony Vivian	
Mr Richard Wormald	

Education

Mr Mark Watts *Chairman*

Subcommittee Chairmen

Mr Martin Leyland	<i>Awards and Scholarships</i>
Miss Melanie Corbett	<i>College Tutor / Training the Trainers</i>
Miss Fiona Spencer	<i>Curriculum</i>
Mr James Innes	<i>e-learning</i>
Professor Stephen Vernon	<i>International Medical Graduates (IMG) Training</i>
Mr Larry Benjamin	<i>Surgical Skills</i>
Professor Philip Murray	<i>Undergraduate/Foundation Education</i>

Committee Members

Mr Charles Diaper	
Dr Richard Gale	<i>Medical Ophthalmology</i>
Mr Naresh Joshi	
Miss Sharon Kerr	<i>SAS Group Representative</i>
Dr Murtuza Mookhtiar	<i>OTG Representative</i>
Mr Michael Nelson	
Dr Andy Simpson	
Miss Christine Wall	<i>Lay Representative</i>
Professor William Reid	<i>Lead Dean for Ophthalmology</i>
Dr Iain Whyte	

Training

Mr Michael Hayward *Chairman and Vice President*

Subcommittee Chairmen

Mr Andrew Castillo *Evaluation of Training*
Mr John Ferris *National Recruitment*
Miss Clare Inkster *Quality of Assessment*
Mr Peter Simcock *Equivalence of Training*

Committee Members

Miss Gill Adams
Mr Dugald Bell
Mr Harry Bennett
Mr John Bradbury
Dr Alan Connor *OTG Representative*
Mr Gordon Cropper *Lay Representative*
Mr Sundheer Dhanireddy *SAS Group Representative*
Professor Andrew Dick *Academic Group Representative*
Dr Nicholas George
Mr Nabil Habib

Mr Nigel Hall
Mr Bruce James
Dr Ewan Kemp
Professor Chris Liu
Mr Stuart McGimpsey
Mrs Geeta Menon
Mr Jay Menon
Miss Carmel Noonan
Miss Fiona O'Sullivan
Dr Aravind Reddy
Professor W Reid *Lead Dean for Ophthalmology*
Mrs Rosemary Robinson
Mr Nicholas Sarkies
Miss Fiona Spencer
Mr Michael Stewart *College Solicitor*
Professor Stephen Vernon

Dr Geoffrey Wright *Host Deanery for Recruitment*
Miss Leann King *Host Deanery for Recruitment*

Examinations

Mr Peter Tiffin *Chairman and Vice President*

Subcommittee Chairmen

Miss Sara Livesey *Part 1 FRCOphth*
Mr Nicholas Hawksworth *Refraction Certificate*
Mr Robert Taylor *Part 2 FRCOphth*
Mrs Bridget Hemmant *Diploma*
Professor Caroline MacEwen *Fellowship Assessment*
Mr Jeremy Prydal *Certificate in Laser Refractive Surgery*
Mr Winfried Amoaku *Duke Elder Undergraduate Prize Examination*

Committee Members

Dr Jayasis Bandyopadhyay *SAS Group Representative*
Mr Saurabh Jain
Mr Michael Nelson
Dr Louise O'Toole
Mr Stephen Kill *Lay Representative*
Mrs Karinya Lewis *OTG Representative*
Professor Stephen Vernon

The International Subcommittee

Professor Caroline MacEwen *Chairman*
Mr Wagih Aclimandos
Mr David Allen
Mr Nicholas Astbury
Miss Michèle Beaconsfield

Mr Michael Burdon
Ms Claire Davey
Miss Denise Mabey
Mr Peter Tiffin
Professor Stephen Vernon

The European Subcommittee

Mr Wagih Aclimandos *Chairman*
Mr Nicholas Astbury
Mr Timothy fytche

Mr Roger Humphry
Professor Caroline MacEwen
Mr George Turner

The Academic Group

Professor Andrew Lotery
Professor Andrew Dick

The Academic Group is an active group open to all members with an academic post.

Trustees

Professor Harminder Dua *President*
Professor Anthony Moore *Senior Vice President*
Mr Bernard Chang *Vice President*
Mr Michael Hayward *Vice President*
Mr Peter Tiffin *Vice President*

Mr Mark Watts *Vice President*
Mr William Newman *Honorary Secretary*
Mr Peter McDonnell *Honorary Treasurer*
Miss Melanie Corbett *Council member*
Mr Saurabh Jain *Council member*

The Honorary Secretary

Mr William Newman

The Staff and Associate Specialists Group

		Region		Region
Mr David Kinshuck	<i>Chairman</i>	<i>West Midlands</i>	Mrs Nivedita Sangani	<i>Mersey</i>
Vacancy		<i>South West Thames</i>	Mr Andreas Ruigrok	<i>Yorkshire</i>
Dr Stephen McAtamney		<i>Scotland West</i>	Dr Gihan Ibrahim	<i>North West Thames</i>
Dr Juan Salinas		<i>Wales</i>	Mrs Bronwen Attrup	<i>Trent</i>
Mr Allaa-Eldin Abumattar		<i>Oxford</i>	Dr Jayasis Bandyopadhyay	<i>Northern</i>
Vacancy		<i>Wessex</i>	Vacancy	<i>East Anglia</i>
Dr Lisa Kelly		<i>Northern Ireland</i>	Dr Mahendran Balapaskaran	<i>North East Thames</i>
Dr Anne Sinclair		<i>Scotland East</i>	Vacancy	<i>Moorfields</i>
Mr Subheer Dhanireddy		<i>South Western</i>	Dr Gillian Watts	<i>North West</i>
Miss Sharon Kerr		<i>South East Thames</i>		

The Ophthalmic Trainees' Group

		Region		Region
Mr Will Dean	<i>Chairman</i>	<i>South West</i>	Dr Oliver Bowes	<i>East Anglia</i>
Mr Alan Connor	<i>Deputy Chairman</i>	<i>Northern</i>	Mr Mario Saldanha	<i>Wales</i>
Dr Mohammad Samir Dowlut		<i>Northern Ireland</i>	Mrs Karinya Lewis	<i>Oxford & Wessex</i>
Dr Archana Pradeep		<i>East Midlands</i>	Dr Lik Thai Lim	<i>Scotland (West)</i>
Dr Abdul-Jabbar Ghauri		<i>West Midlands</i>	Dr Murtuza Mookhtiar	<i>Yorkshire</i>
Mr Anand Chawla		<i>North West & Mersey</i>	Mr Richard Symes	<i>South Thames</i>
Dr John Bladen		<i>North Thames</i>	Dr Megan Johnson	<i>Scotland (East)</i>

The Lay Advisory Group

Mr Tom Bremridge	<i>Chairman and lay member of Council</i>	Dr Anne Sinclair	<i>SAS Group Representative</i>
Mr Hassan Chaudhury	<i>Lay member of the Finance Committee</i>	Miss Fiona Spencer	<i>Council Member</i>
Mr Gordon Cropper	<i>Lay member of the Training Committee</i>	Mrs Christine Wall	<i>Lay member of the Education Committee</i>
Professor Harminder Dua	<i>President</i>		
Mrs Kathy Evans	<i>Chief Executive</i>	Co-opted members	
Mr Stephen Kills	<i>Lay member of the Examinations Committee</i>	Professor Helen Petrie	<i>Lay member of the Information and Audit Subcommittee</i>
Ms Rea Mattocks	<i>Lay member of the Professional Standards</i>		

The Equality and Diversity Committee

Mr Bernard Chang	<i>Chairman and Chair of the Professional Standards Committee</i>	Mr David Kinshuck	<i>SAS Group Representative</i>
Mr Will Dean	<i>OTG Representative</i>	Mr Peter Tiffin	<i>Chair of Examinations Committee</i>
		Mrs Christine Wall	<i>Lay Representative</i>

Regional Representatives

	Region		Region
Miss Gill Adams	<i>Moorfields</i>	Mr Michael Murphy	<i>Northern Ireland</i>
Mr Christopher Blyth	<i>Wales</i>	Miss Fiona Spencer	<i>North West</i>
Mr Michael Burdon	<i>West Midlands</i>	Mr James Talks	<i>Northern</i>
Miss Melanie Corbett	<i>North West Thames</i>	Mr Anthony Vivian	<i>East Anglia</i>
Mr Timothy Dabbs	<i>Yorkshire</i>	Dr Iain Whyte	<i>Scotland East</i>
Mr Charles Diaper	<i>Scotland West</i>	Mr Nicholas Wilson-Holt	<i>South Western</i>
Mr Jonathan Eason	<i>South West Thames</i>		
Mr Mohit Gupta	<i>Trent</i>	Co-opted Members	
Mr Saurabh Jain	<i>North East Thames</i>	Mr Tom Brembridge	<i>Lay Advisory Group</i>
Professor Stephen Kaye	<i>Mersey</i>	Mr David Kinshuck	<i>Staff and Associate Specialists</i>
Mr Martin Leyland	<i>Oxford</i>		
Dr Louise O'Toole	<i>Eire</i>	Professor Caroline MacEwen	<i>International</i>
Professor Christopher Liu	<i>South East Thames</i>	Mr Will Dean	<i>Ophthalmic Trainees</i>
Mr Hunter McLean	<i>Wessex</i>	Professor Andrew Lotery	<i>Editor of Eye</i>

Finance Committee

Mr Peter McDonnell	<i>Chairman and Honorary Treasurer</i>	Mr Bernard Chang	<i>Honorary Secretary</i>
Professor Harminder Dua	<i>President</i>	Mr John Cannon	<i>Lay Representative</i>
Mr Larry Benjamin	<i>Senior Vice President</i>	Mr Andrew Castillo	<i>Council member</i>
Mr Graham Kirkby	<i>Vice President</i>	Mr Jonathan Eason	<i>SAS Group Representative</i>
Mr Michael Hayward	<i>Vice President</i>	Mr Inderraj Hanspal	<i>OTG Representative</i>
Professor Anthony Moore	<i>Vice President</i>	Mr Martin Murphy	<i>Council member</i>
Mr Peter Tiffin	<i>Vice President</i>		



Staff

Kathleen Evans	<i>Chief Executive</i>	Heidi Booth-Adams	<i>Head of Scientific Department</i>
Penelope Jagger	<i>Executive Assistant to the President and Chief Executive</i>	Olivia Sibly	<i>Acting Head Events and Scientific Department</i>
Alexandra Tytko	<i>Head of Education and Training Department</i>	Alice Lancaster	<i>Scientific and Events Assistant</i>
Susannah Grant	<i>Deputy Head of Education and Training Department</i>	Barnaby Foot	<i>BOSU Scientific Coordinator</i>
Karen Neilson	<i>Education and Training Administrator</i>	Stephen Beet	<i>Eye Editorial Assistant</i>
Vadda Fadda	<i>Education and Training Coordinator</i>	Abdul Aziz Rajab-Ali	<i>Head of Operational Support</i>
Carol Welch	<i>Education and Training/Professional Standards Coordinator</i>	Sara Davey	<i>Deputy Head of Operational Support and IT Director</i>
Elizabeth Barnes	<i>Head of Professional Standards Department</i>	Liz Price	<i>Communications Manager</i>
Emily Beet	<i>Head of Examinations Department</i>	Olu Dare	<i>Project Manager</i>
George Hibdige	<i>Deputy Head of Examinations Department</i>	Karen Taylor	<i>Reception</i>
Sophie Donovan	<i>Examinations Administrator</i>	William Carson	<i>Reception</i>
Sheila Patel	<i>Examinations Coordinator</i>	Mark Merrill	<i>Finance Director</i>
Krupa Shukla	<i>Examinations Assistant</i>	Jenny Henry	<i>Finance Assistant</i>
		Martin Reeves	<i>Membership Coordinator</i>

Sponsorship

Alcon Laboratories (U.K.) Ltd	Black Pear	Optos
Alimera Sciences Ltd	Dutch Ophthalmic Research Centre	Oraya Therapeutics
Allergan Ltd	Macular Disease Society	Spectrum Thea Ltd
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Altomed Ltd	Merck, Sharp & Dohme Ltd	Topcom GB Ltd
Bausch & Lomb Ltd	Moorfield Pharmaceuticals	Visioncare Ophthalmic Technologies Inc
Bayer PLC	Novartis Pharmaceuticals Ltd	Carl Zeiss Ltd

Other givers (£2,000 or over)

Garfield Weston Foundation	The Steele Charitable Trust	Mr M Gupta
Mr M Roper-Hall	Mrs MJR Bastable	Mr M Hayward
The Oxford Ophthalmological Congress	Mrs C Watkins	Professor D Muthusamy



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