

11 May 2016

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To Heads of School, Training Programme Directors, Regional Advisors, College Tutors, Educational Supervisors and all Ophthalmologists in Training

Re: Important OST Curriculum changes

## **Cataract Audit requirements**

For a number of years the requirement has been that the 50 consecutive case cataract audit may be completed any time from ST4 to ST7.

It has become apparent at CCT assessment that the current stipulation allows for trainees to have performed their last audit a significant time before their CCT application. This can be the case where there has been a considerable period of out of programme activity or career break, particularly where combined with less than full time training.

Audit of cataract surgery outcomes is a key benchmark used in appraisal and revalidation of practicing ophthalmologists and it is in the interest of protecting patient safety that we should assess a recent audit of trainees before recommending the award of CCT.

The GMC has now given its approval to the College's proposal to change the requirement and mandate completion of the audit within three calendar years of CCT.

The College acknowledges that the change to the timing of the audit will affect those undertaking out of programme activity or a career break, who may have previously chosen to undertake this audit before leaving the programme on a break.

It will also affect those working less than full time (e.g. a trainee working 50% will now have to perform the audit in the final three calendar years of training where previously they could have performed it any time in the final six calendar years).

However, the change has the legitimate aim of protecting patient safety and we do not believe there is a reasonable alternative.

We have considered the possibility of a smaller audit. However, as the overall risk of the most common complication (and measured standard) in cataract surgery is of posterior capsular rupture – and this is only 2% – a smaller audit would not be appropriate.

There will be a transitional period for the implementation of this curriculum change. The Training Committee has therefore decided that **all CCT applications received after 30 August 2017** must be supported by an audit of at least 50 consecutive cataract cases where the surgery is performed within three calendar years of the CCT date. This should leave sufficient time as the vast majority of trainees finishing in the year after that date will have more than two years to complete this, as they are likely to finish training in or after July 2018.

We ask trainees and trainers to be pro-active in identifying those who are likely to be affected by this change and make any necessary changes to training. The College will be collecting data over the next three years about how this change may have adversely affected trainees with protected characteristics and asks Head of Schools to report such issues to us.

## Supervision of junior trainees

A survey of newly appointed consultants and senior trainees carried out in 2015 reinforced the need to introduce minimum numbers and increase clarity on supervision during simulation. The training programme must offer the opportunity to gain experience in supervision of juniors, which is an essential requirement for consultants on their very first day in post. The aim is to see clear, sufficient evidence that trainees have been able to supervise a more junior trainee in surgery or laser and that simulation is also acceptable, though it should not be simulation alone.

The GMC has now given its approval to the College's proposal that the competence requirement for supervision of juniors should have minimum indicative numbers.

The curriculum will specify that it is normal or expected that an average doctor in training will need to have supervised around 20 procedures to achieve competence in supervising juniors in surgical procedures, which may include supervision of simulated surgery.

This curriculum change takes place with immediate effect. The current ST7s should be encouraged to include some evidence of supervision in their portfolio before the end of their training; however, the recommended number will not apply until after 30 August 2016.

Yours sincerely

Miss Fiona Spencer FRCS (Glas) FRCOphth

Chair – Training Committee

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