



*The* ROYAL COLLEGE *of*  
OPHTHALMOLOGISTS

.....

Annual Report 2020

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# From the President

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**Bernard YP Chang**  
President

The year 2020 has certainly been unexpected and very challenging for all us. However, I believe that one positive consequence is that it has brought us together as a profession and enabled the College to build closer links with you. Ophthalmologists especially our trainees have also stood out during the initial stages of the Covid-19 pandemic, continuing to deliver care for eye patients despite the uncertain risks to ourselves and serving the wider needs of patients when redeployed.

We at the College have strived to be supportive by issuing guidance and recommendations on how to deliver safe and efficient care during the first and second wave of infection. We used virtual platforms to run meetings, webinars and seminars to further help members to set up and run their service using available technology and innovative ways of working. We have tried to respond promptly, sensitively and appropriately to concerns raised by our membership. We ran a successful webinar on Racism in the NHS, initiating a timely debate on this vital issue even before the publication of the report by the Commission on Race and Ethnic Disparities and the review on its diversity and inclusion by RCS England. We will continue to monitor our own College's profile and do our utmost to be fair and equal to everyone and to promote diversity.

We at the College recognise the need for improved collaboration, working early on with our specialist societies and the College of Optometrists to find workable solutions across all four nations

to prevent avoidable sight loss. This covered issues ranging from PPE to setting up CUES (Covid urgent eye services) and writing guidance on how to restore and deliver services safely including increased use of virtual consultations.

We have been busy sending regular communications and will continue to do so in order to keep members informed of important matters such as the National Eyecare Restoration and Transformation Programme.

We have been working jointly with HEE, NHSE/I and the independent sector (IS) to get training embedded in the IS. This will take time but early discussions have been positive and we recognise the need to ensure the standards and quality of training are equitable wherever they are being delivered.

As the vaccination programme continues to make it safer for us all, we hope to be able to focus our energies on the huge task to catch up with the backlog in our service which is vital to reduce the rate of avoidable sight loss which has inevitably occurred.

The College chairs, officers, staff and I are working hard to improve what your College can offer. This includes committing College resources to tele-learning, setting up a learning management system to enable us to deliver essential educational packages remotely. We are also exploring new sources of funding and sponsorship to strengthen our financial position but not compromise our independence and integrity. This is particularly important due to our current budget deficit as a consequence of being unable to run Congress and other meetings and courses.



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# From the President

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Another important development is the potential new SAS career grade post. Our College had a significant role in its implementation via our work with the Academy of Royal Colleges.

We have unfortunately lost ophthalmologists this year, notably Nicholas Wilson-Holt, our Honorary Treasurer, David Laws, the Welsh Llywydd and recently, Wallace Foulds, our first President. We also lost Dr Paul Kabasele, a SAS ophthalmologist to Covid. I had the sad task of writing letters of condolence to their families.

I'd like to conclude by giving thanks. I owe so many people who have helped me navigate through this difficult year. Firstly, thank you to Jo Longden, my Executive Assistant, who ensures that I meet my commitments with her clever scheduling and diary management.

My thanks also to my predecessor, Mike Burdon for helping me transition into the role and to my fellow members of the College Covid-19 Action Team, who initially met with me daily – Kathy Evans, CEO, Declan Flanagan, VP and Mel Hingorani, chair of PSC. Alison Davis, London GIRFT ambassador, was an invaluable ally in helping us to formulate our response and my thanks go to her too.

Garry Shuttleworth and the examinations team deserve special thanks for working tirelessly under significant time pressures to design an exam which met GMC requirements without face to face interaction with patients.

Thank you to John Sparrow for making NOD such a success.

There has been great effort to ensure that training and education can continue during the pandemic by Fiona Spencer and Melanie Corbett, their committees and staff.

Mohit Gupta has done a sterling job with the membership and in ensuring College staff are supported. Christopher Liu stepped in early into the role of Honorary Treasurer.

Thank you to all College staff and committee/subcommittee members for your continued hard work and commitment to College work.

To our trainees who were exemplary in the way you contributed during redeployment, again I say, you have made us proud.

Finally, I owe my gratitude to all of you who are battling daily to deliver eyecare despite the restrictions caused by Covid. Thank you also for the support you have shown me and for supporting the College. We hope you will continue to do so and consider taking on the roles which ensure the College's continued viability.

I hope you all stay well and look forward to a better year ahead as we continue to navigate through the challenges.

**Bernard YP Chang**  
President



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# Foreword from the Chief Executive



**Kathy Evans**  
Chief Executive

Anyone interested in the use of English will find much to consider in the analysis produced by Oxford Languages 2020 – *Words of an unprecedented year*.

[www.languages.oup.com/word-of-the-year/2020](http://www.languages.oup.com/word-of-the-year/2020)

It concluded that this year “cannot be neatly accommodated in one single word”.

I disagree and my word of the year is Covid-19, first known to be used in February 2020 by the World Health Organisation. While this report is peppered with words that would have been unfamiliar in 2019, the coronavirus disease has dominated our thinking and our actions since March when we closed the College for an initial 30 days. The transition to working from home went remarkably smoothly and we quickly adapted to Zoom meetings and the need to unmute before speaking.

In the event we kept the College closed completely until September when we returned on specified days for core business purposes, mainly to run courses and for some exam admin. The building had been well maintained by the Facilities Manager and everything worked satisfactorily. The refurbishment of building opposite was largely completed in our absence but the area remained dominated by HS2 preparations and was strangely empty.

Remote working brings challenges; while many enjoy the freedom from commuting and some reported in a staff survey enhanced feelings of wellbeing, there is the danger of social isolation. In response, the College increased its training opportunities and we have had a series of webinars on topics such as managing mental

health, equality and diversity, privilege and unconscious bias, leavened by a smattering of quizzes, social gatherings and, on one of the hottest days of the year, a chocolate making session.

Early on in lockdown we set up the COVID-19 Action Team. It initially met daily to produce guidance and step in to resolve local problems. It now meets on a weekly basis and its focus is on restoring ophthalmology services.

[www.rcophth.ac.uk/about/rcophth-guidance-on-restoring-ophthalmology-services](http://www.rcophth.ac.uk/about/rcophth-guidance-on-restoring-ophthalmology-services)

Of particular note, this year we have:

- Transformed the way written exams have been delivered. In a couple of years we have gone from a format that 19th century surgeons would recognise to computer-based exams taken at a place of the candidates choosing
- Delivered the FRCOphth Part2 Oral using videos of patients rather than actual patients; trainees have appreciated the care this required from the Exams Team
- Continued to run courses in the Skills Centre where we have been able to maintain social distancing (another 2020 word) and the feedback has been very positive
- Learned to run webinars, seminars, the AGM and committee meetings on-line. We had to cancel the Annual Congress planned for May 2020 which was a great shame but we are making plans to come back stronger in 2021



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# Foreword from the Chief Executive

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- Ramped up plans to start an AMD National Audit, whilst maintaining the Cataract National Audit
- Developed the Cataract Workforce Project, soon to be published
- Introduced a new HR system and a new database

And all the while we have continued to:

- Regularly communicate with members via EyeMail, social media channels and College News
- Produce monthly issues of the journal EYE
- Support CESR and Dual Sponsorship Scheme Applicants
- Develop the Ophthalmic Community Clinical Competency Framework (OCCCCF) into the Ophthalmic Practitioners Training (OPT) programme for the allied graduate professionals
- Support Advisory Appointment Committees
- Pay suppliers, collect subscriptions and other fees, process the payroll and attend to all the regulatory commitments of running a Charity

Throughout this unprecedented and extraordinary year, the contribution of the staff team, the clinicians connected with the College, the Lay Advisors, Council and Trustees has been immense.

**Kathy Evans**  
Chief Executive



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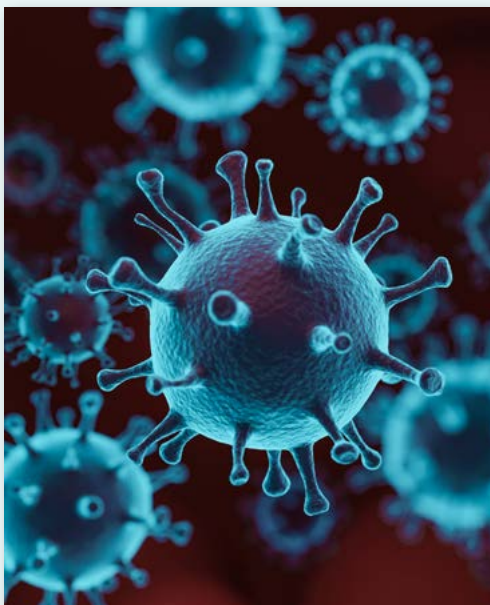


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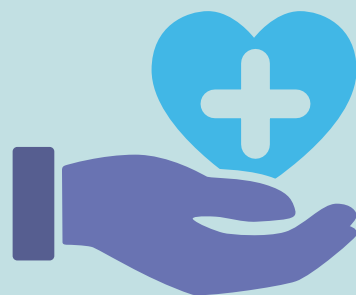
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### RCOphth Response to COVID-19

In late March, the RCOphth convened a special COVID-19 Task Group. We issued our core priorities, '**Protecting Patients, Protecting Staff**'. In early April, the first guidance on PPE was published, working with trusts, members and specialty groups to ensure protection for the workforce. The early response to safeguard patients and the workforce can be viewed below.



### Working across specialist groups

Throughout April and May, the RCOphth continued to work across all organisations working to protect the health service and continue to carry out clinical practice for patients at high risk of vision loss. We published clinical guidance for all the main eye diseases, working with paediatric, medical retina, glaucoma, cataract specialists and groups such as UKISCRS and UKEGS.



### Accelerating use of technology

The response to COVID-19 became a catalyst for accelerating the use of technology to keep services running. We published an 'Overview of digital technology transformation and telemedicine' to support new ways of working. We also found a renewed and vital approach to working with others across the eye sector. Working with NHS England and The College of Optometrists, we published the COVID-19 Urgent Eyecare Service Specification (CUES).



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## Responding to the COVID-19 pandemic

As the UK and the world began the first lockdown due to the pandemic, like many organisations and industry sectors, the RCOphth was put into an unprecedented position of responding to imposed restrictions which meant changes to the way we worked and communicated, both in clinics and in the office.

Ophthalmology, ever-responsive, was quick to put in place clinical guidance for our members, led by the RCOphth, working with specialty groups, public health, the NHS in all four nations and charities to meet the needs of patients and the workforce.

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### Restarting and Redesigning services

As with the response to the initial lockdowns and waves of infections, the RCOphth continued to work with members, partner organisations and regulatory bodies to keep services running despite the conflicting demands of waiting lists and risks, whilst maintaining safe environments for the workforce and patients. We continued to publish recommendations and guidance such as the RCOphth/GIRFT guidance 'Restarting and Redesigning of Cataract Pathways in response to the COVID 19 pandemic'.

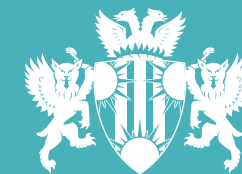


### Delivering patient eye services

Covid-19 precipitated much closer working with partner organisations like The College of Optometrists and NHSE/NHSI.

**RCOphth and The College of Optometrists launch joint vision for delivering patient eye care services during and beyond Covid-19.**

Working with NHS England and The College of Optometrists, RCOphth supported the development of the Commissioning of Urgent Eyecare Service (CUES) which can be viewed below.



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## Restoration of Services

As the UK prepared for coming out of lockdown from the second wave, the RCOphth prepared and supported members with further guidance on recommendations for the restoration of ophthalmology services. We continued to monitor how continued restrictions like physical distancing and infection control procedures would limit available capacity.

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### Webinars helped to connect the ophthalmology community

With pandemic restrictions in place, the RCOphth used webinars to keep members informed – these often reached numbers of over 1,000 attendees.

An example of these webinars was the open discussion forum on 'The role of Immediate sequential bilateral cataract surgery (ISBCS) during the pandemic to optimise and streamline services' in June with speakers from UKISCRS, ESCRS and Outpatient Transformation London. The RCOphth developed interim rapid advice guidance jointly with UKISCRS following feedback.

Whilst surgical skills courses were postponed, training moved online in the form of webinars. Over the summer, the Surgical Skills Faculty hosted a series of monthly webinars focusing on how to use a variety of simulation techniques to acquire and maintain surgical skills during the Covid-19 pandemic.

The RCOphth worked with partners like The College of Optometrists on joint webinars, hosting members from across both organisations and in association with NHSE/I to ensure wide awareness of the rapid introduction of the Covid Urgent Eye case Service (CUES) in England to improve collaborative working of optometrists and ophthalmologists to manage more patients safely in the community.



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## The OTG responds to the impact of Covid-19 on training

The new guidance document **'Mitigating the effects of COVID-19 on Ophthalmologists in Training'** provides recommendations for both trainers and ophthalmologists in training to lessen the impact of the COVID-19 pandemic on the training programme.

The insights of the first 'Effects of COVID-19 on training' trainee survey in late August 2020, helped to shape recommendations in the new report and evidence was collated from the survey to build upon and update the excellent recommendations developed by the Ophthalmologists in Training Group in June 2020 (view below).



## Independent sector providing training opportunities

The Covid-19 pandemic increased the pressure for additional capacity and the outsourcing to the independent sector meant that there were, in some instances reduced training opportunities traditionally provided by the secondary care hospitals. The Training Committee recommended that in order to restore opportunities for training and to build on the work by NHSEI and HEE, surgical training could be routinely delivered by independent providers as well as within NHS units.

NHS England and NHS Improvement



## Supporting training to be maintained

The training committee worked with the Ophthalmologists in Training Group and Council to identify ways to improve access to training, including the use of the independent sector to provide alternative training places.

We welcomed the framework from NHS England & Improvement (NHSEI), Health Education England (HEE), the Independent Healthcare Providers Network (IHPN) and the Confederation of Postgraduate Schools of Surgery (CoPSS) to support training in elective surgery and diagnostic activities in the independent sector.



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## Supporting Ophthalmologists in Training

RCOphth recognised the impact on trainees' surgical experience from reduced access to cataract surgical training opportunities, exacerbated by the Covid-19 pandemic – many ophthalmology trainees were redeployed, throughout the early recovery period, which also significantly reduced training opportunities including the management of patients with cataracts.

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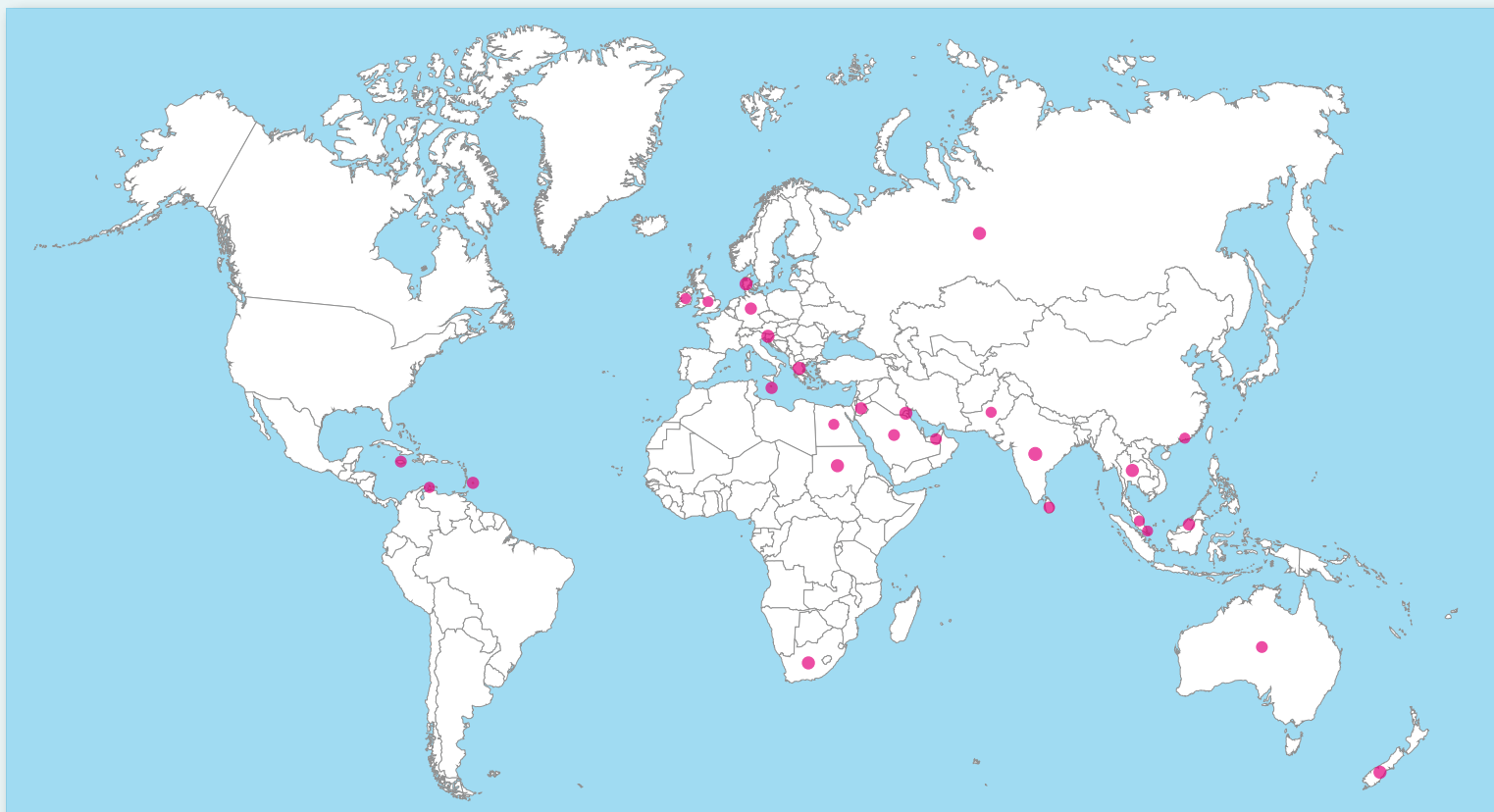


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## Examinations

The pandemic had a profound effect on examinations in 2020 – all examinations were temporarily cancelled for a six month period between March and September. During that time, the exams team redesigned all exams to be able to quickly resume service in the COVID-19 environment.

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Written exams were switched to an online proctored delivery – candidates could sit the exam at home anywhere in the world. For the practical Refraction Certificate exam, real patients were replaced with model eyes. For the Part 2 Oral exam, patients were replaced with specially created videos and some exam components switched to the workplace.

As a result of all these GMC approved changes, exams fully resumed in October

2020 without interruption. The Part 2 Oral and Refraction exams have taken place smoothly with the new formats, soaking up the backlog of candidates so no trainee was delayed further in their progression. For the written exams, the new online method has seen a vast increase in the number of international candidates taking them. For the October 2020 Part 1 exam, there were 369 candidates with 152 from overseas and the Part 2 Written in December 2020 had 185 candidates

with 44 from overseas. All international candidates came from a wide range of countries, from New Zealand in the east to Trinidad and Tobago in the west and many countries in-between.

### KEY

● = candidates taking RCOphth examinations in 2020



## The impact of COVID-19 on Academic Ophthalmology and Research

The consequences of the pandemic was far-reaching in all areas of the health care system, including research. The Academic sub-committee advocated for commitments to safeguard key resources and funding to mitigate the impact of COVID-19. Read the nine key principles in the report '**Mitigating the impact of COVID-19 on Academic Ophthalmology and Ophthalmic Research**'. The RCOphth also endorsed and contributed to the **Academic Leads Group statement on behalf of the Academy of Medical Royal Colleges**.



## Eye Journal

Eye, the scientific journal of The Royal College of Ophthalmologists, continues to go from strength to strength in 2020. Eye achieved a record number of submissions 2226 and increased numbers of users to the online journal of over 548,000 from across the world.

The editorial team, working with authors, produced a special Covid-19 pandemic edition in July 2020: **Keeping our eyecare providers and patients safe during the COVID-19 pandemic**.

A further special **online Eye collection** focused on the latest evidence and impact of COVID-19 on Ophthalmology practice with articles discussing the latest understanding of ocular involvement by coronavirus and the risk of transmission through ocular tissue and tears. Ophthalmologists from different parts of the world including the UK, France, Italy and Asia shared their experiences regarding how their practices had to reorganise to the evolving situation.



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Research

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### The Ophthalmology Local Training Programme

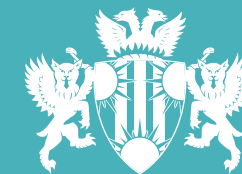
In recognition of the ongoing challenges facing the ophthalmology workforce, The Royal College of Ophthalmologists developed the Ophthalmology Local Training Programme. This is to encourage trusts and hospital eye units to develop non-numbered training posts for trust-appointed specialty ophthalmologist doctors, (staff grade, associate specialist and specialty doctors (SAS) to work and train in a structured and formally supported way to achieve CESR.



### Continuing development of training for MDT professions

The Ophthalmic Common Clinical Competency Framework (OCCCF) has been developed into an **Ophthalmic Practitioner Training (OPT)** to be implemented in all units. The OPT, based on the OCCCF, trains postgraduate orthoptists, optometrists and ophthalmic nurses in secondary care to develop their skills in cataract, glaucoma, medical retina or emergency eye care. This is an opportunity for departments to transform their workforce and improve capacity within their service.

A series of Ophthalmic Practitioner Training webinars were produced to inform and support training needs, these can be viewed below.



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Workforce Innovation

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The NOD for Cataract Surgery continues to improve the care patients receive and the skills and learning of consultant surgeons. The **fourth prospective national annual report** continues to indicate clearly that high quality surgery is being delivered to NHS patients and key findings include:

- A 40% overall reduction in PCR complications since 2010
- In the 2018-19 reporting period 1.14% of operations were affected by PCR, compared to 1.91% in 2010-11
- A 44% overall reduction in VA Loss since 2010
- In the 2018-19 reporting period 0.51% of operations were affected by VA loss, compared to 0.91% in 2010-11
- Reduction in PCR complications and VA loss since 2010 equates to ~3,500 fewer complications annually across the NHS

[VIEW >](#)

- Cost saving from avoided PCR complications ~£2 million per annum
- 100% data completeness for PCR outcomes, currently a compulsory field in Electronic Patient Records

The team, led by John Sparrow, have received significant funding from **Bausch + Lomb for 2020** and from **Alcon over three years**. The funding will help to ensure the continued aims of the audit to facilitate the highest standards of quality assurance and improvement in patient care and support research.



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The National  
Ophthalmology  
Database (NOD) –  
Cataract Audit

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HEALTHCARE SAFETY  
INVESTIGATION BRANCH

### Responding to HSIB report

The Royal College of Ophthalmologists responded to the Healthcare Safety Investigation Branch (HSIB) report on the 'Lack of Timely Monitoring of Patients with Glaucoma'.

The investigation has correctly identified a fundamental lack of capacity within hospital eye services to deliver glaucoma monitoring and treatment, exacerbated by inappropriate referrals, risk adverse behaviour, lack of glaucoma specialists and lack of continuity of care caused by locums. RCOphth had already identified the need to undertake a review of the whole glaucoma pathway to ensure the efficient delivery of optimal care, and is working with all relevant stakeholders to ensure that this work is completed.



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**OPTICIAN**  
CAREER-LONG SUPPORT FOR OPTICAL PROFESSIONALS

### Collaborative working with our partners

President Bernie Chang was interviewed for the Optician on the collaborative vision with The College of Optometrists to support the safe commissioning of eye care services during the pandemic.



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In the News

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## Raising awareness of avoidable sight loss

Mel Hingorani, Chair Professional Standards, spoke to the BBC about delays in treatment. The report, Coronavirus: 'Eyesight of thousands at risk due to missed care' made headlines on BBC digital channel.

At least 10,000 people are at risk of suffering irreversible damage to their sight because of missed care during lockdown, experts say.

"The UK Ophthalmology Alliance and The Royal College of Ophthalmologists have calculated that at least 10,000 people have missed out on care essential to maintaining their sight in England, Wales and Scotland."



## Setting the strategic direction of the RCOphth

The Royal College of Ophthalmologists launched its Strategic Plan for 2020-2022. We asked members what their top challenges were at Congress 2019 to inform our key priorities.

The Strategic Plan highlighted core priority areas:

- Our Purpose
- Workforce
- Leading
- Evolving



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## Eye to Eye

A podcast from  
The Royal College  
of Ophthalmologists



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### Eye to Eye podcasts – sharing experiences from the ophthalmology community

The RCOphth relaunched the Eye to Eye podcasts in January 2020 with one in-depth interview per episode and shorter complementary content to offer our members an opportunity to learn from peers across the globe. Additionally, Eye to Eye Podcast has been listed as one of Eye News' top five podcasts for trainees to listen to and in December reached its 10,000th listen.



### Wales receives two new simulators

Access to simulators has been difficult for trainees in Wales as only one was available in north Wales. As simulation training was becoming compulsory, it was not appropriate to expect trainees to travel to north Wales to complete their mandated simulation training.

Patrick Watts, Training Programme Director Wales Deanery and Regional Educational Advisor Gwyn Williams brought this to the attention of the Welsh Government, who recognised the immediacy of the problem and stepped in directly to fund the purchase of two VRMagic cataract and vitrectomy training simulators, now located at the University Hospital of Wales, Cardiff and Singleton Hospital, Swansea.



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We would like to thank all our College Officers, Regional Representatives,  
Regional and Educational Leads, Trainers, Examiners and all members  
on committees, groups and project teams and staff that have continued  
to work throughout 2020 in difficult circumstances.

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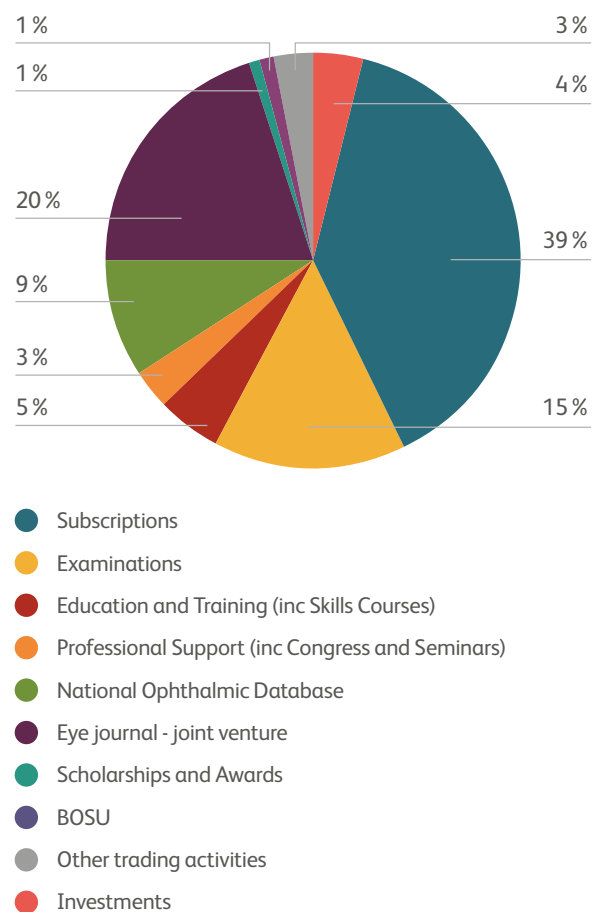
Thank You

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## Income 2020

	2020 £'000s	2019 £'000s
Subscriptions	1,466	1,442
Examinations	553	764
Educations and Training (inc Skills Courses)	199	340
Professional Support (inc Congress and Seminars)	111	830
National Ophthalmic Database	339	300
Eye journal - joint venture	748	710
Scholarships and Awards	28	29
BOSU	29	28
Other trading activities	108	132
Investments	131	136
<b>Total income</b>	<b>3,712</b>	<b>4,711</b>



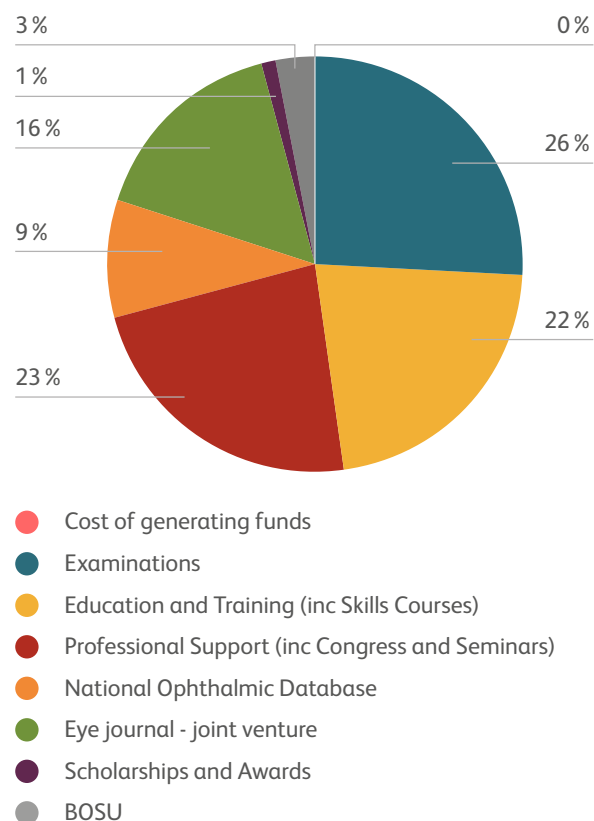
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Statement of financial  
activities for the year ended  
31 December 2020.

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## Expenditure 2020

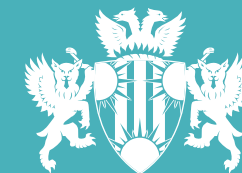
	2020 £'000s	2019 £'000s
Cost of generating funds	–	26
Examinations	1,110	1,368
Education and Training (inc Skills Courses)	948	1,411
Professional Support (inc Congress and Seminars)	1,001	1,065
National Ophthalmic Database	377	356
Eye journal - joint venture	668	634
Scholarships and Awards	40	46
BOSU	114	141
<b>Total expenditure</b>	<b>4,258</b>	<b>5,047</b>
<b>Gains on investment</b>	<b>191</b>	<b>378</b>
<b>Net movement in funds</b>	<b>(355)</b>	<b>43</b>
<b>Funds brought forward 1 January 2020</b>	<b>12,917</b>	<b>12,874</b>
<b>Funds carried forward 31 December 2020</b>	<b>12,562</b>	<b>12,917</b>



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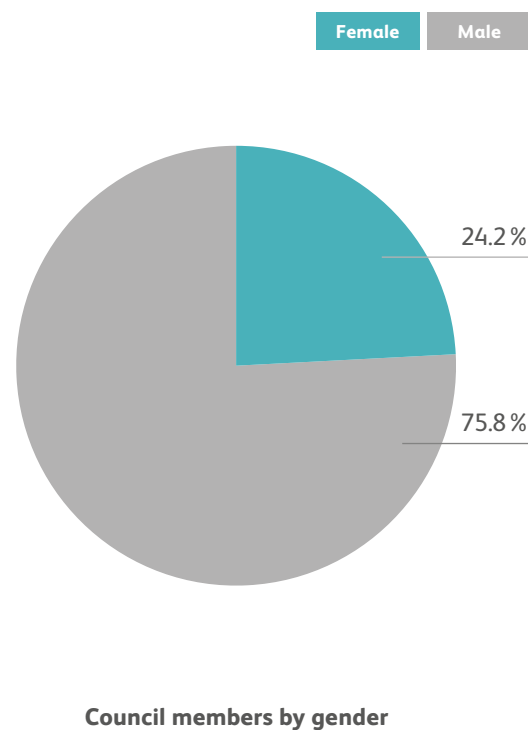
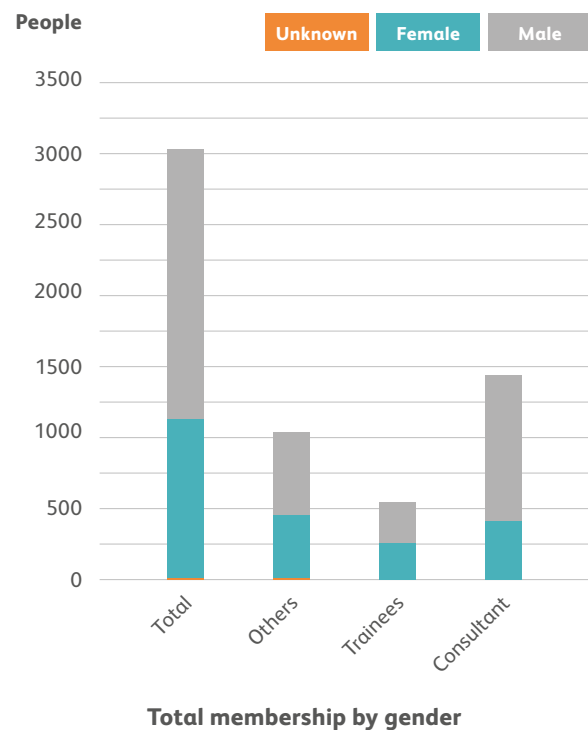


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Equality, Diversity &  
Inclusion Report

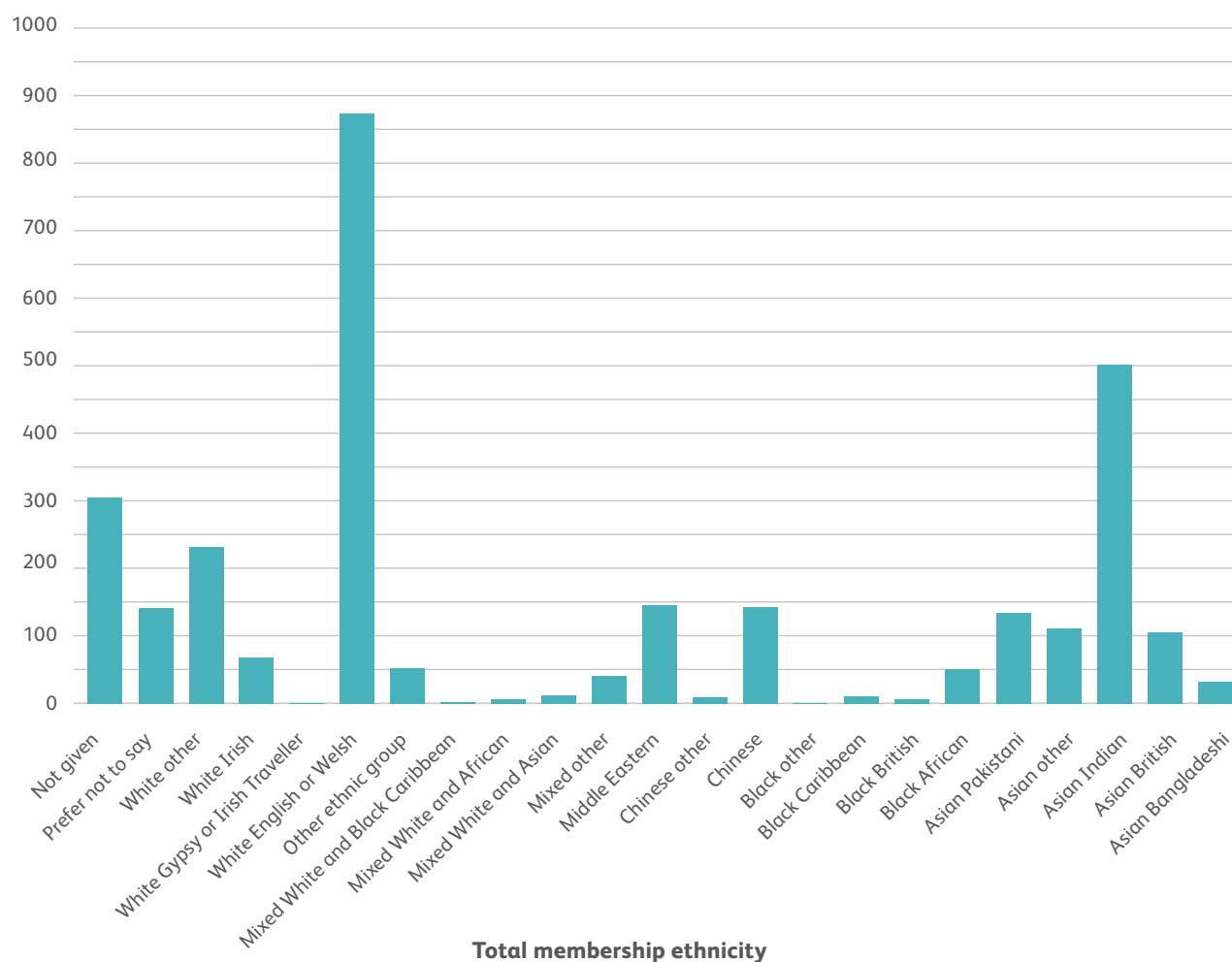
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# Equality, Diversity and Inclusion Report 2020



# Equality, Diversity and Inclusion Report 2020

Members



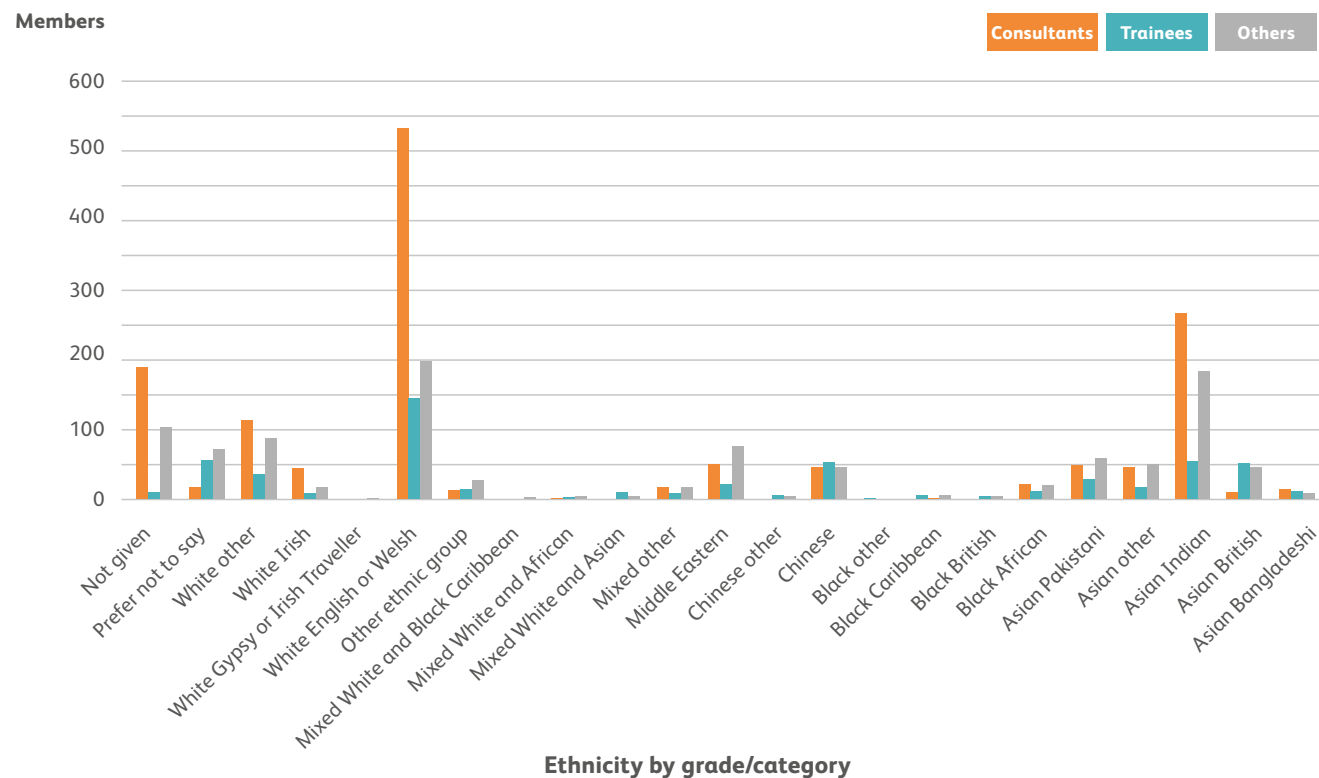
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# Equality, Diversity and Inclusion Report 2020



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## Equality, Diversity and Inclusion Report 2020

