**CURRICULUM TRANSITION CHECKLIST (CTC)**

**LEVEL 1-4**

**ALL GENERIC DOMAINS**

1. Trainees and Educational Supervisors should meet to complete this CTC for all the domains at Level 1 of the New Curriculum. The deadline for completion is **30 June 2022**.
2. The purposes of this exercise are to:
	* Provide a benchmark of achievement in preparation for transfer to the New Curriculum in August 2024
	* Identify any gaps in training
	* Inform the Educational Supervisor Report (ESR) and ARCP
3. The CTC is intended to be a developmental exercise for ST1-3 trainees in 2022 who will be in ST5-7 when the New Curriculum begins in August 2024. It is **not** a formal part of the current assessment process. It is instead an opportunity for trainees to demonstrate their skills and knowledge. The CTCs should be completed as follows:

|  |  |
| --- | --- |
| **Year of training** | **CTC**  |
| ST1,2,3 | Level 1, Level 2 |
| ST2 | Level 3 Cataract Surgery if already performed 100 cases |
| ST3 | Level 3 Generic Domains (and potentially Level 4)Level 3 Cataract Surgery (and potentially Level 4) |

1. Please note the following about the CTCs:
	* **Level 1 CTC** This CTC contains all the Generic and Patient Management Learning Outcomes for Level 1.
	* **Level 2 CTC** This CTC contains all the Generic and Patient Management Learning Outcomes for Level 2.
	* **Generic Domains CTC** This CTC contains all the Generic Learning Outcomes for all Levels. Levels 1 and 2 are already included in the Level 1 and 2 CTCs, therefore trainees should use the Generic Domains CTC to record evidence at Levels 3 and 4.
	* **Cataract Surgery CTC** This CTC contains all the Learning Outcomes for all Levels. Levels 1 and 2 are included in the Level 1 and 2 CTCs. All ST3s should use the Level 3 Learning Outcomes to record evidence as this would be expected by the end of ST3. Any ST2s whose cataract surgery has progressed well and completed 100 cases should use the Level 3 Learning Outcomes to record evidence where possible.
2. If Trainees have not fully met the requirements for the Level as a whole, it is still important to document the evidence they already have. This will allow trainees plenty of time to plan to complete the Level before the transfer to the new Curriculum in August 2024. The advantage of completing these CTCs **now** is to help trainees and Educational Supervisors be in the best possible position to transfer and be familiar with the New Curriculum in good time.
3. The CTC outlines the evidence required by each Learning Outcome at each Level of training. Where there is a direct correlation between the old and New Curriculum, this is indicated under the column ‘Old Curriculum’. Suggestions for appropriate evidence are indicated under the column ‘Other evidence’. Trainees may be able to suggest other suitable forms of evidence to present to the Educational Supervisor, **and** **should not feel limited to the examples given.**
4. Both sections should be completed and the final version agreed by both trainee and Educational Supervisor.

|  |
| --- |
| **Section 1 - General information** |
| Date of review |   |
| Trainee name |   |
| Educational Supervisor name |   |
| Expected CCT date |   |
| How far through this training year? |   |
| WTE months since last ARCP |   |
| Date due to enter next training year |   |
| FRCOphth Part 1 |   |
| FRCOphth Part 2 |   |

|  |  |  |  |
| --- | --- | --- | --- |
| **Section 2 - Generic Domain Review**  |   |   |   |
| *1. The trainee should insert an X into the GREEN box that best describes their current level of attainment (self-assessment) in each Learning Outcome.**2. The trainer should review the trainee's self-assessment and comment in the PINK box on where they agree or disagree with any of the self-assessment.**3. Both trainee and trainer should agree where the gaps are in the PINK box and what will be done about them.**4. If you need more information or guidance, click on the Domain title which will take you to the Curriculum 2024 website.* |
| **DOMAIN:** [**HEALTH PROMOTION**](https://www.rcophth.ac.uk/wp-content/uploads/2021/12/Health-Promotion-syllabus.pdf) |
| **At Level 1, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Provide appropriate lifestyle advice. | *HPDP5,8, PM18*CbD |  |  |  |  |
| Adopt local and national guidelines of prevention of infection. | *HPDP2,7,12*Trust-based accreditation MSF Portfolio Part 2 FRCOphth CbD | Mandatory trainingRecord of discussions with supervisorPart of a CA1 or CBDMSF |   |   |   |
| Advise appropriately about the systemic side-effects of drugs. | *PI16, HPDP5, 10*CbD Part 1 FRCOphth Part 2 FRCOphth  |  |   |   |   |
| Know the principles of screening. | *HPDP1*CbD Portfolio Part 2 FRCOphth |  |   |   |   |
| Use and promote means of eye injury protection. | *HPDP4*CbD Part 2 FRCOphth  |  |   |   |   |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 2, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Be aware and respect the impact of social, economic, cultural and religious factors on health. | None | Part of CA1 so CRS1 can demonstrate Clinical Supervisor Report (CSR)  |   |   |   |
| Have detailed knowledge of National Screening Programmes especially with reference to Ophthalmic diseases. | *HDPD1*CbDPortfolioPart 2 FRCOphth |  |   |   |   |
| Trainee list of evidence |    |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 3, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Demonstrate leadership in the promotion of eye and general health in the wider community. | None | CbD Part 2 FRCOphth |   |   |   |
| Promote immunisation. | *HPDP9*CbD Part 2 FRCOphth  |   |   |   |   |
| Trainee list of evidence |  |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 4, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Develop special interest area (SIA) specific guidance for health promotion. | None | Develop or update patient information leaflet in SIA for health promotion.  |   |   |   |
| Be an effective supervisor and guide in the area of health promotion. | None | Evidence of supervision of more junior trainee in explaining health promotion strategy to patients.Evidence of involvement in patient engagement events.Evidence of supervision or providing training for other members of multidisciplinary team in health promotion in SIA.  |   |   |   |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
|  **DOMAIN:** [**LEADERSHIP AND TEAM WORKING**](https://www.rcophth.ac.uk/wp-content/uploads/2022/05/Annex-3-Leadership-and-Team-Working-syllabus-May-22-revision-1.pdf) |
| **At Level 1, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Know about leadership competencies in the nine behavioural dimensions as defined by the NHS Leadership Academy: inspiring shared purpose; leading with care; evaluating information; connecting our service; sharing the vision; engaging the team; holding to account; developing capability; influencing the results. | *HS5DMCRJ2*Portfolio Part 2 FRCOphth  | Evidence reading about leadership competencies, e.g. from <http://www.leadershipacademy.nhs.uk/wpcontent/uploads/dlm_uploads/2014/10/NHSLeadership-LeadershipModel-colour.pdf>MSFAudit and QI Project Evidence of involvement in research projectCbD |  |  |  |
| Identify areas for own development. | *CPD6*Portfolio Part 2 FRCOphth  | Completion of self- assessment [https://www.leadershipacademy.nhs.uk/resources/ healthcare-leadership-model/supporting-tools-resources/healthcare-leadership-model-self-assessment-tool/](https://www.leadershipacademy.nhs.uk/resources/%20healthcare-leadership-model/supporting-tools-resources/healthcare-leadership-model-self-assessment-tool/)MSFReflective piece Evidence of any compliments or reflection on complaintsCS and ES reportsTrust mandatory training such as Information Governance, Equality and Diversity |   |   |   |
| Trainee list of evidence |  |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 2, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Document evidence of leadership behaviours. | None | Write a reflective piece about own attributes and skills in communication, handling feedback, coping with stress, developing resilience, leadership styles that fit your strengths and stretching oneself to develop furtherAny Audit or QI project/evidence of any research project |  |  |  |
| Practice within a multidisciplinary team to develop leadership projects. | *HS5*Portfolio Part 2 FRCOphth | Chairing a meeting; learning appraisal skills; designing or managing a rota; human factors training; training on team buildingUndertaking patient improvement activityMSFMDT meeting |   |   |   |
| Trainee list of evidence |  |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 3, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Design own projects related to leadership and management with outcomes predetermined to reflect on success. | *HS10*Portfolio Part 2 FRCOphth | Examples include: writing a business case e.g. for a piece of equipment; learning about finance or commissioning within the NHS to share the knowledge with others; introducing a new piece of equipment  |  |  |  |
| Have evidence of leadership competencies in all 9 behavioural dimensions as defined by the NHS Leadership Academy.  | None | Ensure examples of projects or training undertaken covering leadership behaviours: inspiring shared purpose; leading with care; evaluating information; connecting our service; sharing the vision; engaging the team; holding to account; developing capability; influencing the results.Undertake management training course with reflective notes or shadow senior manager or visit hospital or community service scheme and write reflective notes. |   |   |   |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 4, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Critically evaluate own skills and the quality of patient care. | *CPD1*CbD Portfolio Part 2 FRCOphth  | Attend and contribute to clinical governance meetings; undertake audit of own and departmental outcomes; reflect on how to develop further as a systems leader |  |  |  |
| Promote service improvement through: quality, innovation, productivity and prevention (QIPP); supervision of the multidisciplinary team; effective management of incidents and complaints. | None | Undertake a QIPP project; supervise another team member in a project; demonstrate management of a complaint with report and be involved in the investigation; investigate an incident; be trained in root cause analysis |   |   |   |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **DOMAIN:** [**PATIENT SAFETY AND QUALITY IMPROVEMENT**](https://www.rcophth.ac.uk/wp-content/uploads/2021/12/Patient-Safety-and-Quality-Improvement-syllabus.pdf) |
| **At Level 1, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Know the principles, recognise the contribution to improved practice, and take part in clinical governance, audit and quality improvement activities. | *HS2DMCRJ2*Portfolio Part 2 FRCOphth  | Undertake a QIP project; supervise another team member in a project; demonstrate management of a complaint with report and be involved in the investigation; investigate an incident.  |  |  |  |
| Identify appropriate information from a variety of data sources. | *DMCRJ1, 2C4BCS13*Portfolio Part 2 FRCOphth MSF | Research/publication |   |   |   |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 2, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Apply clear and appropriate clinical reasoning to make safe decisions. | *HS3*Portfolio Part 2 FRCOphth  | CbDMSF |  |  |  |
| Practice in line with latest evidence. | *HS3*Portfolio Part 2 FRCOphth  | CbDMSF |  |  |  |
| Maintain appropriate audits of practice. | *DMCRJ3*Portfolio Part 2 FRCOphth  | Surgical logbook; details of complications; Cataract Complications AuditMSF |  |  |  |
| Apply quality improvement methods. | *DMCRJ3*Portfolio Part 2 FRCOphth  | QI project, AuditMSF |   |   |   |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where you agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 3, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Design and implement quality improvement programmes to improve clinical effectiveness, patient safety and patient experience. | *DMCJR2*Portfolio Part 2 FRCOphth  | QI project, Audit |  |  |  |
| Analyse and critique published research. | *HS8*Portfolio Part 2 FRCOphth | Journal club attendance, PG teaching |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 4, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Share improved practice with others and be able to defend changes made. | *DMCRJ2*Portfolio Part 2 FRCOphth | Research/publication |  |  |  |
| Critically evaluate own skills in quality improvement. | *HS3*Portfolio Part 2 FRCOphth  | QI Project/Audit; reflection piece on own work |  |  |  |
| Promote clinical governance and quality improvement in the wider organisation. | *AER9HS5*Portfolio Part 2 FRCOphth  | QI project, Audit |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **DOMAIN:** [**SAFEGUARDING AND HOLISTIC PATIENT CARE**](https://www.rcophth.ac.uk/wp-content/uploads/2021/12/Safeguarding-and-Holistic-Patient-Care-syllabus.pdf) |
| **At Level 1, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Understand and promote professional responsibility of safeguarding. | *AER15*CbD Portfolio Part 2 FRCOphth  | CbD Adult Safeguarding Level 1Evidence of generic skill courses and essential courses like fire safety, information governance, infection control, etc. |  |  |  |
| Demonstrate familiarity with local safeguarding procedures and contacts. | *HS6*Portfolio Part 2 FRCOphth  | CbD Adult Safeguarding Level 1Evidence of generic skill courses and essential courses like fire safety, information governance, infection control, etc. |  |  |  |
| Demonstrate awareness of possibility of non-accidental injury in vulnerable patients. | None | CbDAdult Safeguarding Level 1 Child Safeguarding Level 1 |  |  |  |
| Document safeguarding concerns accurately and refers to senior staff. | None | CBDAdult Safeguarding Level 1 Child Safeguarding Level 1MSF |   |   |   |
| List of trainee evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 2, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Recognise where specialised management techniques may be necessary for those with special needs. | None | Adult Safeguarding Level 2CbD re: patient with special needs attending clinic or theatreEvidence of knowledge in sight impaired registration, DLVA requirementsCBD or reflection on support needed/referral to ECLO |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 3, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Take responsibility for safeguarding of children and vulnerable adults, referring and taking appropriate action. | *HS6*Portfolio Part 2 FRCOphth  | Adult Safeguarding Level 2Child Safeguarding Level 2 |  |  |  |
| Apply mental capacity legislation in clinical practice.  | None | Undertake Mental Capacity Act (MCA) training and demonstrate booking best interests meetingHold best interests meeting with supervision |  |  |  |
| Apply appropriate equality and diversity legislation in clinical practice.  | None | Trust equality and diversity training  |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 4, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Critically evaluate personal and wider organisational responses to safeguarding issues. | None | Adult and Child Safeguarding Level 3Deprivation of Liberty Safeguards (DoLS) training |  |  |  |
| Supervise and support other professionals with regard to safeguarding. | None | Supervising more junior trainee or members of multidisciplinary team; arranging best interests meeting or undertaking MCA training or arranging for patient with special needs to attend clinic/procedure/theatre |  |  |  |
| Demonstrate effective specialised management techniques for those with special needs. | None | Undertaking best interests meeting; make specific enhancements to support patient in theatre, clinic, procedure undertaken  |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where you agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **DOMAIN:** [**EDUCATION AND TRAINING**](https://www.rcophth.ac.uk/wp-content/uploads/2022/04/Education-and-Training-syllabus-1.docx) |
| **At Level 1, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Ensure patient safety is paramount in all training and learning events. | None | Record of discussion with supervisor; reflective piece on how patient safety was included in a training or learning event and why important; M&M meeting; PG teaching; study leave |  |  |  |
| Actively participate in own induction and training. | *CPD3,5*Portfolio Part 2 FRCOphth  | Evidence of participation in local departmental induction and training to juniors depending upon Level;evidence of attendance in hospital and departmental induction; MSF |  |  |  |
| Deliver teaching activities under guidance. | None | Contribution to local teaching session that is supervised; medical student teaching; evidence of oral/poster presentation in regional teaching, national, international meeting |  |  |  |
| Deliver patient education. | C2,3CRS1 MSF Part 2 FRCOphth Portfolio | Evidence of participation in patient education event, support groups meeting, developing patient information leaflets, videos; evidence of involvement in patient education activities, including patient information leaflet; MSF |   |   |   |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 2, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Plan and provide education and training activities for medical trainees and other professionals. | *IH1*PortfolioFRCOphth Part 2 | Evidence of medical student teaching, nurses, optometrist or junior trainee; contribution to regional teaching session or to medical students or other professionals |  |  |  |
| Give constructive feedback on learning activities.   | None | Feedback form completed at end of teaching session with own constructive feedback; feedback on regional teaching |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 3, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Create learning opportunities for others. | *HS9*PortfolioFRCOphth Part 2 | CSR Thank you note for teaching or learning support from junior trainee or other professional |  |  |  |
| Provide objective assessment. | None | Objective feedback on teaching or training received or reflective piece |  |  |  |
| Solicit and respond to feedback on teaching, supervision and assessment activities. | None | Formal feedback received from a teaching or training session with reflection on ways to improve |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 4, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Demonstrate readiness to act as a clinical and educational trainer. | None | Appropriate Training the Trainers course(s) to be a registered Clinical Supervisor |  |  |  |
| Balance service and training needs. | None | Demonstrate ability to supervise or assist more junior trainees or other professionals in clinic but manage clinic in timely manner – may be covered in CSR |  |  |  |
| Be able to identify and support a trainee experiencing difficulty. | None | Module on trainee in difficulty in Training the Trainers courses |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **Domain:** [**RESEARCH AND SCHOLARSHIP**](https://www.rcophth.ac.uk/wp-content/uploads/2022/04/Research-and-Scholarship-syllabus.docx) |
| **At Level 1, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Adopt an evidence-based approach to clinical practice.  | BCS13, 15CbD Part 1 FRCOphth Part 2 FRCOphth  | Evidence of involvement in journal club, local teaching, presentation/research publications |  |  |  |
| Critically appraise existing published research. | DMCRJ2, 3, 4CbD Portfolio Part 2 FRCOphth  | Evidence of involvement in journal club, local teaching, presentation/research publications |  |  |  |
| Distil research and deliver oral presentations.  | HS8Portfolio Part 2 FRCOphth  | Research publication/oral or poster presentation in local, regional, national and international meetings |  |  |  |
| Trainee list of evidence |  |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 2, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Implement an evidence-based approach to shared decision making and enhancing patient outcomes. | *DMCRJ1, 2, 4*CbD MSF Part 2 FRCOphth  | MDT, Research, undertake a literature review to answer a clinical question |  |  |  |
| Demonstrate competencies for commencing clinical research. | *BCS13, 15*CbD Part 1 FRCOphth Part 2 FRCOphth  | Collect evidence of research skills; evidence of a publication is strong evidence or research project undertaken/publication contribution/presentationGood Clinical Practice training |  |  |  |
| Distil research, deliver poster presentations and improve oral presenting. | *HS8*Portfolio Part 2 FRCOphth  | Research publication/oral or poster presentation in local, regional, national and international meetingscritical appraisal clinical trial presented at regional meeting/journal club |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where they agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 3, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **New Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Evidence additional research skills by developing a research study/ developing a guideline | *BCS13, 15CbD* Part 1 FRCOphth Part 2 FRCOphth  | Involvement in QI project, departmental guideline, handbook |  |  |  |
| Chair and lead local postgraduate teaching and provide formative feedback to presenters at local postgrad teaching sessions  | *DMCRJ4HS8*CbD Portfolio Part 2 FRCOphth  | Evidence of presentation in local and regional teaching  |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where you agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
| **At Level 4, the doctor is able to:** | **Evidence** | **Current trainee self-assessment of level of attainment (please mark in relevant box)** |
| **Old Curriculum** | **Other evidence** | **No experience** | **Partly met** | **Fully met** |
| Understand the principles of research methods, research governance, application of ethics to research and the translation of research into practice.  | *IH8*DMCRJ2, 3, 5Portfolio Part 2 FRCOphth   | Research/publication, evidence of submission of application for funding for research projectEvidence of involvement in ethics submission for research project; use own or contemporary research to revise/develop local guidelines |  |  |  |
| Promote innovation in ophthalmology. | *BCS13, 17*CbD Part 1 FRCOphth Part 2 FRCOphth  | Evidence review for own research project/publication; evidence of submission for funding for research project; complete and publish peer-reviewed paper |  |  |  |
| Trainee list of evidence |   |
| Trainer comment on trainee self-assessment | *[Trainer should indicate in this box where you agree or disagree with the self-assessment]*  |
| Agreed training gaps identified | *[Trainer and trainee to agree where there are gaps and what will be done about them]* |
|  |  |  |  |  |  |  |

Trainee signature:

Trainer signature:

Date: