|  |  |
| --- | --- |
| Trainee name: | LEAVE BLANK |
| Trainee GMC number: | LEAVE BLANK |
| Training year: | Choose an item. |
| Assessor name: | LEAVE BLANK |
| Assessor status: | Choose an item. |
| Assessor status – if Other, please specify: | Click or tap here to enter text. |
| Date: | Click or tap to enter a date. |

**Specification and limitations** (for further details please refer to the [Patient Management Level 1 syllabi](https://www.rcophth.ac.uk/wp-content/uploads/2022/05/Level-1-LOs-and-descriptors-all-domains.pdf))

* Performs a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at a differential diagnosis.
* Formulates and initiates a management plan for low complexity cases.
* Justifies the diagnosis and plans with reference to basic and clinical science.
* Works effectively with patients and the multi-professional team.
* Understands the role of a Community Ophthalmology Service.
* Communicates and delivers feedback to referrers and patients to support integrated care.

**Trainee self-assessment**

Please record the level at which you consider you are currently working.

|  |  |
| --- | --- |
| **Overall level of entrustment for this activity**  | Observing [ ] Direct supervision [ ] Indirect supervision [ ] Competent [ ]  |
| **Free text comments** | Click or tap here to enter text. |

**Trainer assessment**

Please consider each piece of evidence and, based on this evidence, suggest whether you consider this doctor in training can be entrusted to practice **independently** in this area. Please include a narrative to support your decision and suggest areas for further development.

| **Mandatory evidence** | **Please choose Yes, No, Reservation or No Evidence from the drop-down list** | **Comments** |
| --- | --- | --- |
| Longitudinal, periodic observation by consultant assessor in the outpatient and/or on call setting where possible | Choose an item. | Click or tap here to enter text. |
| Review of record keeping and letters | Choose an item. | Click or tap here to enter text. |
| Assessments in outpatients (where these have been performed by other assessors, please review) | Choose an item. | Click or tap here to enter text. |
| CRS1 Consultation skills | Choose an item. |
| CRS2 Assess vision | Choose an item. |
| CRS3 Assess visual fields | Choose an item. |
| CRS5 External eye examination | Choose an item. |
| CRS6 Assess pupils | Choose an item. |
| CRS7 Assess ocular motility | Choose an item. |
| CRS8 Assess intra-ocular pressure | Choose an item. |
| CRS9 Slit lamp | Choose an item. |
| CRS10a Fundus assessment – direct ophthalmoscope | Choose an item. |
| CRS10b Fundus examination using slit lamp condensing lenses e.g. 90D/78D or equivalent | Choose an item. |
| CRS10c Fundus assessment – diagnostic contact lens | Choose an item. |
| CRS11 Gonioscopy | Choose an item. |
| Formative feedback from the team with whom the trainee is working  | Choose an item. | Click or tap here to enter text. |
| Multi-assessor report | Choose an item. |
| Case-based Discussions (CbDs) – *please specify number in Comments* | Choose an item. | Click or tap here to enter text. |
| Longitudinal observation by consultant assessor in the theatre and simulation setting  | Choose an item. | Click or tap here to enter text. |
| Assessments in theatre *- where these have been performed by other assessors, please review* | Choose an item. | Click or tap here to enter text. |
| OSATS1 Microsurgical skills | Choose an item. |
| OSATS1 Cataract Surgery | Choose an item. |
| OSATS1 Lid surgery | Choose an item. |
| Logbook (minimum indicative number of 50 cataract cases) | Choose an item. |
| **Comments** | Click or tap here to enter text. |

|  |  |  |
| --- | --- | --- |
| **Other competencies that must be evidenced**  | **Please choose Yes, No, Reservation or No Evidence from the drop-down list** | **Evidence in the form of a DOPS or OSATs may be used for these areas. Alternatively, direct observation or observation by another team member can be used. Please record below the evidence used to support your decision.** **Where a doctor in training is not achieving the expected level a formative tool should be employed.** |
| Aseptic technique | Choose an item. | Click or tap here to enter text. |
| Operating microscope | Choose an item. | Click or tap here to enter text. |
| Use an exophthalmometer | Choose an item. | Click or tap here to enter text. |
| Assess lacrimal function | Choose an item. | Click or tap here to enter text. |
| Corneal scrape | Choose an item. | Click or tap here to enter text. |
| Removal of sutures | Choose an item. | Click or tap here to enter text. |
| Punctal plug insertion  | Choose an item. | Click or tap here to enter text. |
| Interpretation of automated visual fields | Choose an item. | Click or tap here to enter text. |
| **Comments** | Click or tap here to enter text. |

**Based on my observations and the evidence indicated I consider that this doctor in training is ready for**

|  |  |
| --- | --- |
| **Overall level of entrustment for this activity**  | Observing [ ] Direct supervision [ ] Indirect supervision [ ] Competent [ ]  |

**Where the level to which you are able to recommend entrustment is limited by the evidence available to you, please indicate below the additional evidence required to increase your entrustment recommendation.**

|  |
| --- |
| Click or tap here to enter text. |

**Please use the boxes below for any further comments and recommendations for further training at this level (where Entrustment is below ’competent’) or the next level (where Entrustment is ‘competent’).**

|  |  |
| --- | --- |
| Anything especially good? Click or tap here to enter text. | Agreed action for further development:Click or tap here to enter text. |

|  |
| --- |
| **PLEASE EMAIL COMPLETED FORM TO** **CURRICULUM2024@RCOPHTH.AC.UK** |