

## Postgraduate Medical Training

# GENERIC SKILLS ASSESSMENT TOOL

### Guidance for Assessment Pilot 2022

#### Introduction

- 1. Thank you for agreeing to look at this new tool. This guidance document is aimed to assist trainees and their supervisors to complete the new Generic Skills Assessment Tool (GSAT) as part of the Assessment Pilot from 1 July to 31 October 2022. The outcomes of the Assessment Pilot will be reported to the GMC, and fed into the ongoing development of the new ePortfolio.
- 2. The GSAT is part of the new RCOphth Programme of Assessment, which is defined by the GMC as 'the integrated framework of exams, assessments in the workplace and judgment made about a learner during their approved programme of training'. It will be used by ophthalmologists in training starting on or transitioning to the new OST Curriculum in August 2024.
- 3. The GSAT must be completed by a consultant assessor. A different assessor may be selected for the different curricular domains, although often a single supervisor will be able to complete several. The assessor may be involved with a doctor in training in one of several capacities, for example as ES, CS or academic/research supervisor. The GSAT, both the self-assessment and the assessor judgement, will be used by the ES to make a recommendation at the end of the training year and inform the ARCP process. As with other tools, wide discrepancy between the two assessments will allow identification of over or under confidence and support further trainee reflection for insight.
- 4. This document consists of Guidance and four Appendices, one for each of the four training Levels.

#### Guidance

- 1. The purpose of the GSAT form is to allow assessment of competencies for the 6 non-clinical domains as laid down by the GMC.
- 2. We would like you to use the form to assess a trainee (or trainees) that you are currently working with and feedback to us via the survey. You do not need to focus on the layout of the form, which is a Word document, and which will look different on the ePortfolio.
- 3. It is expected to be trainee led and so we would recommend getting the trainee to pre-populate the form with the relevant supporting information prior to the assessor meeting with the trainee to fill the form in.
- 4. The evidence can come from multiple different sources such as case-based discussions, attending Trust Health and safety training, passing exams, personal audits, departmental audits, attending teaching sessions. We have added appendices to this Guidance which give **examples** of the type of evidence that would be acceptable. Sometimes, it may not be possible to provide evidence for every learning outcome and a subjective judgement may need to be made.
- 5. There is a GSAT for each Level of training. All GSATS cover the same 6 non-clinical domains, but for each Level there are different learning outcomes. These learning outcomes are specified on the GSAT forms. There is a column for the trainee to indicate the evidence they have to demonstrate that they have achieved each specific outcome. There is then a drop- down menu for the assessor to indicate "does not meet/meets/exceeds expectations". At the end of each Domain, the supervisor can comment on the Level achieved overall in the Domain. The trainee can also comment. Both trainee and supervisor should agree whether there are areas that need work before progressing to the next Level.

DOMAIN: HEALTH PROMOTION		
Learning Outcome	Trainee self-assessment – please indicate specific evidence, if any, in the ePortfolio	Supervisor assessment Choose item from dropdown [does not meet/meets/exceeds]
Provide appropriate lifestyle advice.	Type in evidence name	Choose an item.

Comment by Supervisor	Click or tap here to enter text.
Comment by trainee	Click or tap here to enter text.
Areas for development to progress to next Level	Click or tap here to enter text.

- 6. The attached appendices give **examples** of the type of evidence that can be used for each domain. It is important to understand that this is, first and foremost, a self-assessment by the trainee and then a confirmation by the trainer after discussion. The evidence listed is not mandatory and simply helps the assessment. The emphasis is on the quality not the quantity of evidence, and it may be that one piece of evidence can demonstrate achievement against more than one Learning Outcome.
- 7. For advice about the expectations for each Level, there is a link on each domain title in the GSAT to the relevant syllabus on the RCOphth website, which contains a helpful list of descriptors.
- 8. Because this is a pilot, trainees are not able to link directly to evidence in the ePortfolio. Therefore, it is suggested that trainees should instead list the evidence (e.g. CbD 15/7/2021) in the GSAT and download it from the ePortfolio into a folder for the Supervisor to review OR that the trainee and supervisor review the evidence together in the ePortfolio.
- 9. There is also the opportunity for the assessor to make free text comments.

Which forms to pilot per training year	
Training year	GSAT
ST1	GSAT L1 and try GSAT L2
ST2	GSAT L2 and try GSAT L3
ST3	GSAT L3
ST4	GSAT L3
ST5	GSAT L3 and try GSAT L4
ST6 or ST7	GSAT L4

### Survey

- Once the GSAT is completed, it should be emailed to <u>Curriculum2024@rcophth.ac.uk</u> whereupon you will receive an automated email with a link to a short survey.

  Depending on who submits the survey, please also forward the automated email to the trainee or supervisor with whom you collaborated so that they can do the survey too.
- 2. You may submit more than one pilot form if you wish and should complete the survey each time you get the automated email with the survey link. This is to allow you to test a variety of forms and for the Project Board to get detailed feedback on each type of form. Demographic information will only be requested the first time you do the survey.

3.	You will have the opportunity to request a certificate of participation/CPD points in
	the survey.

- 4. To preserve confidentiality, names and personal details are not required to be entered into any pilot forms. After completed forms have been emailed, they will be saved by the RCOphth and the email deleted.
- 5. Completed forms will **NOT** form part of any formal assessment process.

Learning outcome	Suggested examples of evidence and topics on which related CBDs and reflective pieces can be used
DOMAIN: HEALTH P	ROMOTION
Provide appropriate lifestyle advice.	HPDP09 Promote immunisation HPDP08 Avoidance of allergens PM18 Diet and Nutrition C04 Advice on sources of information Smoking cessation AREDS supplementation in advanced AMD
Adopt local and national guidelines of prevention of infection.	Use/create eye local eye casualty guideline Audits Infection control protocols Endophthalmitis prevention Contact lens guidance Hand hygiene PPE guidance for appropriate respiratory diseases
Advise appropriately about the systemic side- effects of drugs.	Systemic side-effects of antimuscarinics, beta blocker eye drops, doxycycline administration HPDP11 Make recommendations for bone protection
Know the principles of screening.	Principles of screening e-LFH Examples include hydroxychloroquine; diabetic retinopathy; retinopathy of prematurity; fungaemia in immunocompromised patients. HPDP01 Screening Part 1 FRCOphth
Use and promote means of eye injury protection.	Blunt and penetrating eye injury and foreign bodies – reiterate the importance of protective glasses to prevent eye injury working with high velocity machinery or patients with corneal susceptibility (Ehlers Danlos, High myopia) Avoidance of fireworks in blast injury cases High velocity machinery to wear protective goggles DOPS – removal foreign body OSATS – lid repairs Eye protection advice/driving advice for patients on cycloplegia
DOMAIN: LEADERSH	HIP AND TEAMWORKING
Know about leadership competencies in the 9 behavioural dimensions as defined by the NHS Leadership Academy:	Go through the https://www.leadershipacademy.nhs.uk/ resources/healthcare-leadership-model/nine-leadership- dimensions/ Certificate of learning 01_01 Introduction to Leadership and LeAD https://portal.e-lfh.org.uk/Component/Details/510250 Attend leadership courses

Learning outcome	Suggested examples of evidence and topics on which related CBDs and reflective pieces can be used
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.	Rota co-ordinator
Know what leadership means for you & identify areas for own development	Completion of self-learning <a href="https://portal.e-lfh.org.uk/Component/Details/511042">https://portal.e-lfh.org.uk/Component/Details/511042</a>
DOMAIN: PATIENT S	SAFETY AND QUALITY IMPROVEMENT
Know the principles, recognise the contribution to improved practice, and take part in clinical governance, audit and quality improvement activities.	HS2 DMCRJ2 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, 2 C4 BCS13 Portfolio Part 2 FRCOphth MSF Research/publication
	RDING AND HOLISTIC CARE
Understand and promote professional responsibility of safeguarding.	Involvement in safeguarding case (CBD)  NAI – screening  AER15  Portfolio  Part 2 FRCOphth  Adult Safeguarding Level 1 <a href="https://portal.e-lfh.org.uk/Component/Details/510406">https://portal.e-lfh.org.uk/Component/Details/510406</a> Evidence of generic skill courses and essential courses like fire safety, information governance, infection control, etc.

Learning outcome	Suggested examples of evidence and topics on which related CBDs and reflective pieces can be used	
	https://www.e-lfh.org.uk/ - contains several links that could be used to support this learning, there are too many to list so the trainee can look and see if any are appropriate to undertake if they have seen a case they may relate to recently.  e.g. safeguarding adults, supporting children and young persons	
	with learning difficulties, dementia etc	
Demonstrate familiarity with local safeguarding	Use RCOphth NAI proforma Laser safety course Adult Safeguarding Level 1	
procedures and	https://portal.e-lfh.org.uk/Component/Details/510406	
contacts.	Evidence of generic skill courses and essential courses like fire safety, information governance, infection control, etc.  HS6	
	Portfolio	
	Part 2 FRCOphth	
Demonstrate awareness of possibility of non-	Adult Safeguarding Level 1 <a href="https://portal.e-lfh.org.uk/Component/Details/510406">https://portal.e-lfh.org.uk/Component/Details/510406</a> Child Safeguarding Level 1	
accidental injury in	https://portal.e-lfh.org.uk/Component/Details/510412	
vulnerable patients.	CPD from teaching/meetings	
Document safeguarding concerns accurately and refers to senior staff.	HS06 Safeguarding M+M meeting CBD's - Refer to appropriate safeguarding personel, ECLO, seniors Adult Safeguarding Level 1 <a href="https://portal.e-lfh.org.uk/Component/Details/510406">https://portal.e-lfh.org.uk/Component/Details/510406</a> Child Safeguarding Level 1 <a href="https://portal.e-lfh.org.uk/Component/Details/510412">https://portal.e-lfh.org.uk/Component/Details/510412</a>	
	MSF CBD re: Case relating to vision/visual field and driving Case relating to Amaurosis/TIA/Stroke and advice regarding driving Case relating to CVI registration and ECLO/low visual aid referral Reflective piece on breaking bad news on condition and effect on driving	
DOMAIN: EDUCATION AND TRAINING		
Ensure patient safety is paramount in all training and learning events.	Use EyeSi simulation and wetlab Courses – simulation training Record of discussion with supervisor of an adverse outcome reflective piece on how patient safety was included in a training or learning event and why important M&M meeting,	
	Reflective entry from complications log where supervisor was sought to help fix a complication	

Learning outcome	Suggested examples of evidence and topics on which related CBDs and reflective pieces can be used
Actively participate in own induction and training.	Use EyeSi simulation and wetlab Evidence of participation in local departmental induction and training evidence of attendance in hospital and departmental post-graduate teaching MSF
Deliver teaching activities under guidance	MDT teaching/medical student training Contribution to local teaching session that is supervised Medical Student teaching; evidence of oral/poster presentation in regional teaching, national, international meeting Present at regional trainees research symposium
Deliver patient education.	CA01 – conduct consultation Evidence of participation in patient education event, support groups meeting, developing patient information leaflets, videos MSF
DOMAIN: RESEARCI	H AND SCHOLARSHIP
Adopt an evidence- based approach to clinical practice.	Personal/departmental audits Evidence of involvement in journal club, local teaching, presentation/research publications
Critically appraise existing published research.	Evidence of involvement in journal club, local teaching, presentation/research publications
Distil research and deliver oral presentations.	Local PG teaching/journal club Regional teaching Research publication/oral or poster presentation in local, regional, national and international meetings

Learning outcome	Suggested examples of evidence and topics on which related CBDs and reflective pieces can be used	
DOMAIN: HEALTH PROMOTION		
Be aware and respect the impact of social, economic, cultural and religious factors on health.	Evidence of community ophthalmology attachment Cultural: corneal donations/retrievals and its implications. Social and economic: Deprivation and transport. Evidence of detailing examples of people with limited means of transport and being remote. Booking Taxis. Late presentation of cataract and advanced disease secondary to socioeconomic deprivation.  Religion: drops in Ramadan – educational element. Fasting	
Have detailed knowledge of National Screening Programmes especially with reference to Ophthalmic diseases.	Placements in paeds (ROP), Med ret (diabetic screening), or glaucoma Demonstrate understanding of UK visual screening for children. An example could be including familial retinoblastoma cases, or cases who have been referred as a part of Hydroxychloroquine screening or Diabetic retinopathy screening	
DOMAIN: LEADERSHIP ANI	D TEAMWORKING	
Document and evidence leadership behaviours.	Reflective practice Courses – e.g. TTT Certificate of learning 01_01 Introduction to Leadership and LeAD https://portal.e-lfh.org.uk/Component/Details/510250 completion for level 1 also counts towards level 2 evidence https://www.leadershipacademy.nhs.uk/resources/healthca re-leadership-model/ completion for level 1 also counts towards level 2 evidence Audit / QIP project/or evidence of research project 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 further	
Practice within a multidisciplinary team to develop leadership projects.	Manage rota Human factors training Certificate of course Evidence of practice within a multidisciplinary team Chairing a meeting Learning appraisal skills Training on team building Undertaking patient improvement activity	

Learning outcome	Suggested examples of evidence and topics on which related CBDs and reflective pieces can be used
DOMAIN: PATIENT SAFETY	AND QUALITY IMPROVEMENT
Apply clear and appropriate clinical reasoning to make safe decisions.	HS3 Portfolio Part 2 FRCOphth MSF
Practice in line with latest evidence.	HS3 Portfolio Part 2 FRCOphth MSF
Maintain appropriate audits of practice.	DMCRJ3 Portfolio Part 2 FRCOphth Surgical logbook; details of complications; Cataract Complications Audit MSF
Apply quality improvement methods.	DMCRJ3 Portfolio Part 2 FRCOphth QI project, Audit MSF
DOMAIN: SAFEGUARDING	AND HOLISTIC CARE
Recognise where specialised management techniques may be necessary for those with special needs.  DOMAIN: EDUCATION AND	Refer to ECLO Consent and capacity training Adult Safeguarding Level 2 https://portal.e-Ifh.org.uk/Component/Details/510406 CbD re: patient with special needs attending clinic or theatre Evidence of knowledge in sight impaired registration, DLVA requirements CBD or reflection on support needed/referral to ECLO DVLA:https://portal.e- Ifh.org.uk/Component/Details/506969 ECLO and wider visual support: https://portal.e-Ifh.org.uk/Component/Details/506975 Case relating to vision/visual field and driving Case relating to Amaurosis/TIA/Stroke and advice regarding driving Case relating to CVI registration and ECLO/low visual aid referral CBD/reflection relating patient with dementia/learning difficulties needing consent

Learning outcome	Suggested examples of evidence and topics on which related CBDs and reflective pieces can be used
Plan and provide education and training activities for medical trainees and other professionals.	Evidence of medical student teaching, nurses, optometrist or junior trainee; Evidence of developing a teaching session contribution to regional teaching session or to medical students or other professionals Reflect on teaching Feedback
Give constructive feedback on learning activities.  DOMAIN: RESEARCH AND	Feedback form completed at end of teaching session with own constructive feedback  MAR from a non-clinical supervisor  Feedback on regional teaching
Implement an evidence-based approach to shared decision making and enhancing patient outcomes	Involvement in MDT CbD undertake a literature review to answer a clinical question
Demonstrate competencies for commencing clinical research.	GCP course – online/in person Research ethics course Collect evidence of research skills; evidence of a publication is strong evidence or research project undertake Good Clinical Practice training Carry out lit search on topic Evidence of discussions with supervisor on research projects e.g a project proposal Write ethics application eLearning/courses on research skills e.g GCP training, research skills modules from MSc course, Trust R+D training courses
Distil research, deliver poster presentations and improve oral presenting.	Journal club Regional teaching Research publication/oral or poster presentation in local, regional, national and international meetings critical appraisal clinical trial presented at regional meeting/journal club

Learning outcome	Suggested examples of evidence and topics on which related CBDs and reflective pieces can be used
DOMAIN: HEALTH F	PROMOTION
Demonstrate leadership in the promotion of eye and general health in the wider community.	M+M meetings – present any cases of endophthalmitis Reflective piece following involvement with Integrated care system pathways (regional) for eye disease e.g. dry eye disease Patient information leaflets for general eye health (e.g. contact lens wear guidance) QIP in a community ophthalmology clinic e.g in virtual access clinics.
Promote immunisation.	Recommend tetanus in trauma cases Recommend flu vaccine and covid vaccine to elderly and
DONAMINI, LEADERS	immunosuppressed.
DOMAIN: LEADERS	HIP AND TEAMWORKING
Demonstrate the authority, capacity & motivation to implement change.  Design own projects related to leadership	Undertake management course Certificate of learning CLE 04 - Managing Services https://portal.e-lfh.org.uk/Component/Details/393939 https://www.leadershipacademy.nhs.uk/resources/healthcare-leadership-model/ Examples of training undertaken covering 9 leadership behaviours:  • Undertake management training course with reflective notes or  • shadow senior manager or  • visit hospital or community service scheme and write reflective notes. Ability to manage and lead teams when on call: MSF/CS/ ESR Participation in committees e.g., RCOphth role/ trust working parties/ HEENE roles such a Doctors in Training representative  QIPs Examples include:
and management.	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 guideline or piece of equipment
	SAFETY AND QUALITY IMPROVEMENT
Design and implement quality improvement programmes to improve clinical effectiveness, patient	DMCJR2 Portfolio Part 2 FRCOphth QI project Audit

Learning outcome	Suggested examples of evidence and topics on which related CBDs and reflective pieces can be used
safety and patient experience.	
Analyse and critique published research.	HS8 Portfolio Part 2 FRCOphth Journal club attendance PG teaching
DOMAIN: SAFEGUA	ARDING AND HOLISTIC CARE
Take responsibility for safeguarding of children and vulnerable adults, referring and taking appropriate action.	Adult Safeguarding Level 2 - https://portal.e- Ifh.org.uk/Component/Details/511209 Child Safeguarding Level 2 - https://portal.e-Ifh.org.uk/Component/Details/510418 CBD re: Performing an NAI screening in a child Involving/initiating a safeguarding incident
	HS6 Portfolio Part 2 FRCOphth
Apply mental capacity legislation in clinical practice.	Undertake Mental Capacity Act (MCA) training and demonstrate booking best interests meeting Hold best interests meeting with supervision Trust Deprivation of Liberty training MCA: <a href="https://portal.e-lfh.org.uk/Component/Details/598749">https://portal.e-lfh.org.uk/Component/Details/597891</a> Best interest: <a href="https://portal.e-lfh.org.uk/Component/Details/597891">https://portal.e-lfh.org.uk/Component/Details/597891</a>
Apply appropriate equality and diversity legislation in clinical practice.	Trust equality and diversity training Reflective piece/CBD of case involving issues of equality and diversity.
DOMAIN: EDUCATION	ON AND TRAINING
Create learning opportunities for others.	Supervise juniors – logbook CSR Thank you note for teaching or learning support from junior trainee or other professional Feedback from medical students
Provide objective assessment.	Objective feedback on teaching or training received reflective piece OSCE examiner for medical school
Design and contribute to patient education.	Evidence of participation in patient education events, patient support group meetings etc  Design or revise patient information leaflets or videos  Involvement in other forms of patient education
DOMAIN: RESEARC	H AND SCHOLARSHIP

Learning outcome	Suggested examples of evidence and topics on which related CBDs and reflective pieces can be used
Implement service improvement by revision and development of guidelines, treatments and practical procedures using current clinical research and contemporary evidence.	Involvement in QI project, audit, evaluation, writing business case Developing departmental guidelines, Developing teaching handbook
Lead research / teaching sessions and critically appraise oral presentations.	Chair local postgrad teaching Chair simulation course Evidence of presentation in local and regional teaching Evidence of feedback given Evidence of organising teaching session Publications

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Learning outcome	Suggested examples of evidence and topics on which related CBDs can be used	
DOMAIN: HEALTH PROMOTION		
Develop special interest area specific guidance for health promotion.	New local guidelines Develop or update patient information leaflet in SIA for health promotion	
Be an effective supervisor and guide in the area of health promotion.	Logbook, Audit, reflective practice 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	
DOMAIN: LEADERSHIP AND TEAMWORKING		
Critically evaluate own skills and the quality of patient care.	Audit, reflective practice Examples include: Audit of own or departmental outcomes with reflection SIA audit Audit of own surgical outcomes; cataract for example or ptosis if doing oculoplastics Supervising, challenging, influencing and appraising colleagues and peers to enhance performance and to support development Critically appraise performance of colleagues, peers and systems and escalate concerns Attend and contribute to clinical governance meetings E.g. confirmed log of meetings attended/evidence of participation in governance	
Promote service improvement through: quality, innovation, productivity and prevention (QIPP); supervision of the multidisciplinary team; effective management of incidents and complaints.	QIPP, M+M, SAI's involved in/RCA meetings Undertake a quality, innovation, productivity and prevention (QIPP) project Supervision of the multidisciplinary team e.g., run a theatre list/ outpatient clinic Effective management of incidents and complaints Demonstrate management of a complaint with report and be involved in the investigation Demonstrate training in root cause analysis Demonstrate understanding of risk register and risk assessment Provide proof of supervision ability Simulation/clinical setting/theatre	

Learning outcome	Suggested examples of evidence and topics on which related CBDs can be used	
DOMAIN: PATIENT	SAFETY AND QUALITY IMPROVEMENT	
Share improved	DMCRJ2	
practice with others	Portfolio	
and be able to defend	Part 2 FRCOphth	
changes made.	Research/publication	
Critically evaluate	HS3	
own skills in quality	Portfolio	
improvement.	Part 2 FRCOphth	
	QI Project/Audit; reflection piece on own work	
Promote clinical	AER9	
governance and	HS5	
quality improvement	Portfolio	
in the wider	Part 2 FRCOphth	
organisation.	QI project, Audit	
DOMAIN: SAFEGUARDING AND HOLISTIC CARE		
Critically evaluate	Adult and Child Safeguarding Level 3	
personal and wider	https://portal.e-lfh.org.uk/Component/Details/510424	
organisational	Safeguarding Children: Level 3 – Parental Risk Factors	
responses to	https://portal.e-lfh.org.uk/Component/Details/510430	
safeguarding issues	Safeguarding Children: Level 3 – Unexplained Injuries	
	https://portal.e-lfh.org.uk/Component/Details/510436	
	Safeguarding Children: Level 3 – Disability and Neglect	
	https://portal.e-lfh.org.uk/Component/Details/510442	
	Safeguarding Children: Level 3 – Fabricated and Induced Illness	
	https://portal.e-lfh.org.uk/Component/Details/510448	
	Deprivation of Liberty Safeguards (DoLS) training	
	Audit/QIP in Safeguarding standards	
	Reflective piece/CBD in a more complex case involving support	
	for visual impairment/additional needs	
Supervise and	Teaching for colleagues	
support other	Supervising more junior trainee or members of multidisciplinary	
professionals with	team; arranging best interests meeting or undertaking MCA	
regard to	training or arranging for patient with special needs to attend	
safeguarding.	clinic/procedure/theatre.	
	Arranging teaching session on MCA/DOLS training etc	
Demonstrate	Undertaking best interests meeting; make specific	
effective specialised	enhancements to support patient in theatre, clinic, procedure	
management	undertaken	
techniques for those	Audit/QIP in Safeguarding standards	
with special needs.	Reflective piece/CBD in a more complex case involving support	
	for visual impairment/additional needs	
	Creating or updating patient information leaflets	
DOMAIN: EDUCATION	ON AND TRAINING	

Learning outcome	Suggested examples of evidence and topics on which related CBDs can be used	
Demonstrate readiness to act as a clinical and educational trainer.	Take on supervision roles, training skills, mentoring, supervising in theatre, logbook Appropriate Training the Trainers course(s) to be a registered Clinical Supervisor PG Cert or MSc in medical education TTT course College faculty for surgical courses/examiner	
Balance service and training needs.	Demonstrate ability to supervise or assist more junior trainees or other professionals in clinic but manage clinic in timely manner CSR Supervising juniors on theatre	
Be able to identify and support a trainee experiencing difficulty.	Supervise, support and encourage other trainees  Module on trainee in difficulty in Training the Trainers courses	
DOMAIN: RESEARCH AND SCHOLARSHIP		
Understand the principles of research methods, research governance, application of ethics to research and the translation of research into practice.	Research/publication, evidence of submission of application for funding for research project Evidence of involvement in ethics submission for research project; use own or contemporary research to revise/develop local guidelines GCP course	
Promote innovation in ophthalmology.	Publication – 1 <sup>st</sup> author Evidence review for own research project/publication; evidence of submission for funding for research project; complete and publish peer-reviewed paper	