

ADVANCEMENT BETWEEN LEVEL 3 AND 4 – IMPLEMENTATION NOTE NO. 15

Introduction

- This document provides guidance for educational teams and resident doctors on the principles of advancement between Level 3 and 4, following consultation with the Lead Dean, the Statutory Education Bodies and the GMC.
- Advancement between curriculum Levels is considered independently of ST stage progression. Advancement between lower levels will continue to be ratified by ARCP panels during the annual review process.

Advancement to Level 4

- For most, the transition from Level 3 to Level 4 will be considered at the mid-way point in ST6, although it could take place at the end of the ST5 year – or earlier in a few cases – if residents have met their Level 3 requirements by the time of that ARCP. For all other residents, the ARCP at the end of the ST5 year should be used to confirm that the resident doctor is on track to meet the criteria for Level 4 advancement (completion of all Level 3 SIAs and the Part 2 FRCOphth Oral examination) by the time of an **educational evaluation** six months later.
- This educational evaluation is entirely separate from the ARCP process. There is no right of appeal from the decision of the evaluation team.
- Heads of School, Training Programme Directors (TPDs) and supervisors with continuous access to ePortfolio evidence (such as Regional Educational Advisors and College Tutors) are expected to review the Educational Supervisor recommendations, as included in the most recent Educational Supervisor Report, before conducting their evaluation.
- If it is evident that the resident doctor will be unable to meet the required conditions for Level 4 advancement at the midpoint of ST6, they should be included in the standard winter ARCP round and awarded an Outcome 3.

Less-than-full-time (LTFT) in Level 4

Managing expectations for LTFT resident doctors and their choice of Level 4 Special Interest Areas (SIAs) may present some challenges for Deanery managers. The RCOphth is unable to mandate how Level 4 programmes should be administered. However, the following principles have been derived from current practice, endorsed by the Lead Dean, and should be applied consistently:

- There must be no discrimination against LTFT resident doctors in the Level 4 selection process. The same transparent selection method – including an application form and scoring system – must be used for all applicants. Forward planning is strongly

recommended (for example, September applications, February confirmations and August start dates).

- LTFT resident doctors must be given the same opportunities to achieve the competencies required for their chosen Level 4, with pro-rata training time.
- Where an LTFT resident doctor is selected for a Level 4 SIA, their timetable or hospital placements may differ from full-time equivalents. This is a matter for the Head of School, TPD and Deanery to decide.
- Ad hoc timetable arrangements should be discussed with the Postgraduate Dean. TPDs are advised to ask resident doctors to declare their preferred working percentage as early as possible. It should be recognised that the number of available Level 4 posts may be limited in certain SIAs.
- OOPT is not an appropriate mechanism for expanding Level 4 opportunities for LTFT resident doctors.

Documenting advancement in the ePortfolio

Educational evaluations determining progression from Level 3 to Level 4, which are separate from the winter ARCP process, will not require administrative support from the Deanery or the creation of formal review meetings in FishBase, the platform used to manage annual reviews. Decisions must be ratified using an ad hoc template form (**Annex A – Educational Evaluation Form**), which the TPD is responsible for uploading to the Educator Notes section of the ePortfolio.

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Curriculum 2024 Team