Assessment Blueprint

Learning outcomes and assessment methods

Domain	Level 1	Level 2	Level 3	Level 4
	An ophthalmologist achieving this level will:	An ophthalmologist achieving this level will, in addition:	An ophthalmologist achieving this level will, in addition:	An ophthalmologist achieving this level will, in addition:
Patient Management				
Oculoplastics and Orbit (i)	 Independently perform a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^a Independently formulate and initiate a management plan for low complexity cases. ^a Justify the diagnoses and plan with reference to basic and clinical science. ^{a, b} Work effectively with patients and the multi-professional team. ^{a, c, d} 	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a, ,b, c,} Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	Independently assess and manage moderate complexity patients, demonstrating an understanding of oculoplastics procedures and selecting the most appropriate treatment according to current accepted practice. ^{a, b, c, d} Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c} Independently perform low complexity oculoplastic procedures. ^{a, e}	Demonstrate advanced clinical management and surgical skills. ^{a, b,} c, d Manage the complexity and uncertainty of oculoplastic cases. ^{a,} b, c, d Apply management and team working skills appropriately, including in complex, dynamic situations. ^{a, b, e} Be an effective supervisor, teacher and trainer of oculoplastic cases. ^{a,} b, c, e
Assessment	a. EPA L1b. Part 1 FRCOphthc. Multi-source Feedbackd. Multi Assessor Report	a. EPA L2b. Multi-source Feedbackc. Multi Assessor Reportd. Refraction Certificate	 a. EPA L3 Oculoplastics & Orbit b. Multi-source Feedback c. Multi Assessor Report d. Part 2 FRCOphth e. Surgical logbook 	 a. EPA L4 Oculoplastics & Orbit b. Multi Assessor Report c. Surgical logbook d. Surgical outcomes audit e. Multi-source Feedback
Cornea and Ocular Surface Disease (ii)	Independently perform a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^{a.}	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a.b.c.}	Independently assess and manage moderate complexity patients, demonstrating an understanding of cornea procedures and selecting the most appropriate treatment according to current accepted practice. ^{a, b, c, d}	Demonstrate advanced clinical management and surgical skills. ^{a, b,} c, d, Manage the complexity and uncertainty of cornea and ocular surface disease cases. ^{a, b, c, d}

	Independently formulate and initiate a management plan for low complexity cases. ^a Justify the diagnoses and plan with reference to basic and clinical science. ^{a, b} Work effectively with patients and the multi-professional team. ^{a, c, d}	Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c} Independently perform low complexity corneal and ocular surface procedures. ^{a, e}	Apply management and team working skills appropriately, including in complex, dynamic situations. ^{a, b, e} Be an effective supervisor, teacher and trainer of cornea and ocular surface disease. ^{a, b, c, e}
Assessment	a. EPA L1b. Part 1 FRCOphthc. Multi-source feedbackd. Multi Assessor Report	a. EPA L2b. Multi-source Feedbackc. Multi Assessor Reportd. Refraction Certificate	 a. EPA L3 Cornea & Ocular surface Disease b. Multi-source Feedback c. Multi Assessor Report d. Part 2 FRCOphth e. Surgical logbook 	 a. EPA L4 Cornea & Ocular surface Disease b. Multi Assessor Report c. Surgical logbook d. Surgical outcomes audit e. Multi-source Feedback
Cataract Surgery (iii)	Independently perform a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^a Independently formulate and initiate a management plan for low complexity cases. ^{a, b, c} Justify the diagnoses and plan with reference to basic and clinical science. ^{a, c} Work effectively with patients and the multi-professional team. ^{a, d, e}	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a, b, c} Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	Independently assess and manage moderate complexity patients, demonstrating an understanding of cataract procedures and selecting the most appropriate treatment according to current accepted practice. ^{a, b, c, d} Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c} Independently perform low risk phacoemulsification cataract procedures. ^{a, e, f}	Demonstrate advanced clinical management and surgical skills. ^{a, b,} c, d, e Manage the complexity and uncertainty of cataract surgery cases. ^{a, b, c, d, e,} Apply management and team working skills appropriately, including in complex dynamic situations. ^{a, b, e, f} Be an effective supervisor, teacher and trainer of cataract surgery. ^{a, b,} c, f
Assessment	 a. EPA L1 b. Cataract complication audit c. Surgical logbook 	a. EPA L2b. Cataract complication auditc. Surgical logbookd. Refraction Certificate	 a. EPA L3 Cataract surgery b. Multi-source Feedback c. Multi Assessor Report d. Surgical logbook 	a. EPA L4 Cataract surgeryb. Multi Assessor Reportc. Surgical logbook

	d. Part 1 FRCOphthe. Multi-source Feedbackf. Multi Assessor Report	e. Multi-source Feedback f. Multi Assessor Report	e. Part 2 FRCOphthf. Cataract complication audit	 d. Cataract complications audit e. Surgical outcomes audit f. Multi-source Feedback
Glaucoma (iv)	Independently perform a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^a Independently formulate and initiate a management plan for low complexity cases. ^a Justify the diagnoses and plan with reference to basic and clinical science. ^{a, b} Work effectively with patients and the multi-professional team. ^{a, c, d}	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a, b, c} Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	Independently assess and manage moderate complexity patients, demonstrating an understanding of glaucoma procedures and selecting the most appropriate treatment according to current accepted practice. ^{a, b, c, d} Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c} Independently perform low complexity glaucoma procedures. ^{a,} e	Demonstrate advanced clinical management and surgical skills. ^{a, b,} c, d Manage the complexity and uncertainty of glaucoma cases. ^{a, b,} c, d Apply management and team working skills appropriately, including in complex, dynamic situations. ^{a, b, e} Be an effective supervisor, teacher and trainer of glaucoma conditions. ^{a, b, c, e}
Assessment	a. EPA L1b. Part 1 FRCOphthc. Multi-source Feedbackd. Multi Assessor Report	a. EPA L2b. Multi-source Feedbackc. Multi Assessor Reportd. Refraction Certificate	 a. EPA L3 Glaucoma b. Multi-source Feedback c. Multi Assessor Report d. Part 2 FRCOphth e. Surgical logbook 	 a. EPA L4 Glaucoma b. Multi Assessor Report c. Surgical logbook d. Surgical outcomes audit e. Multi-source Feedback
Uveitis (v)	Independently perform a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^a Independently formulate and initiate a management plan for low complexity cases. ^a Justify the diagnoses and plan with reference to basic and clinical science. ^{a, b}	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a, b, c} Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	Independently assess and manage moderate complexity patients, demonstrating an understanding of practical and surgical procedures used in the setting of uveitis and selecting the most appropriate treatment according to current accepted practice. ^{a, b, c, d} Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c}	Demonstrate advanced clinical management and surgical skills. ^{a, b,} c Manage the complexity and uncertainty of uveitis disease cases. ^{a, b, c} Apply management and team working skills appropriately, including in complex, dynamic situations. ^{a, b, d,}

	Work effectively with patients and the multi-professional team. a, c, d		Independently perform low complexity procedures for the uveitic patient. ^{a, e}	Be an effective supervisor, teacher and trainer of uveitis disease. ^{a, b, c,} d
Assessment	a. EPA L1b. Part 1 FRCOphthc. Multi-source Feedbackd. Multi Assessor Report	a. EPA L2b. Multi-source Feedbackc. Multi Assessor Reportd. Refraction Certificate	 a. EPA L3 Uveitis b. Multi-source Feedback c. Multi Assessor Report d. Part 2 FRCOphth e. Surgical logbook 	a. EPA L4 Uveitisb. Multi Assessor Reportc. Surgical logbookd. Multi-source Feedback
Medical Retina (vi)	Independently perform a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^a Independently formulate and initiate a management plan for low complexity cases. ^a Justify the diagnoses and plan with reference to basic and clinical science. ^{a, b} Work effectively with patients and the multi-professional team. ^{a, c, d}	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a, b, c} Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	Independently assess and manage moderate complexity patients, demonstrating an understanding of medical retina procedures and selecting the most appropriate treatment according to current accepted practice. ^{a, b, c, d} Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c} Independently perform low complexity medical retina procedures. ^{a, e}	Demonstrate advanced clinical management and practical skills. ^{a,} b, c Manage the complexity and uncertainty of medical retina disease cases. ^{a, b, c} Apply management and team working skills appropriately, including in complex, dynamic situations. ^{a, b, d} Be an effective supervisor, teacher and trainer of medical retina disease. ^{a, b, c, d}
Assessment	a. EPA L1b. Part 1 FRCOphthc. Multi-source Feedbackd. Multi Assessor Report	a. EPA L2b. Multi-source Feedbackc. Multi Assessor Reportd. Refraction Certificate	 a. EPA L3 Medical Retina b. Multi-source Feedback c. Multi Assessor Report d. Part 2 FRCOphth e. Surgical logbook 	 a. EPA L4 Medical Retina b. Multi Assessor Report c. Surgical logbook d. Multi-source Feedback
Vitreoretinal Surgery (vii)	Independently perform a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^a	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a, b, c}	Independently assess and manage moderate complexity patients, demonstrating an understanding of vitreoretinal procedures and selecting the most appropriate	Demonstrate advanced clinical management and surgical skills. ^{a, b, c, d}

	Independently formulate and initiate a management plan for low complexity cases. ^a Justify the diagnoses and plan with reference to basic and clinical science. ^{a, b} Work effectively with patients and the multi-professional team. ^{a, c, d}	Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	treatment according to current accepted practice. ^{a, b, c, d} Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c} Independently perform low complexity vitreoretinal procedures. ^{a, e}	Manage the complexity and uncertainty of vitreoretinal disease cases. ^{a, b, c, d} Apply management and team working skills appropriately, including in complex, dynamic situations. ^{a, b, e,} Be an effective supervisor, teacher and trainer of vitreoretinal disease. ^{a, b, c, e}
Assessment	a. EPA L1b. Part 1 FRCOphthc. Multi-source Feedbackd. Multi Assessor Report	a. EPA L2b. Multi-source Feedbackc. Multi Assessor Reportd. Refraction Certificate	 a. EPA L3 Vitreoretinal surgery b. Multi-source Feedback c. Multi Assessor Report d. Part 2 FRCOphth e. Surgical logbook 	 a. EPA L4 Vitreoretinal surgery b. Multi Assessor Report c. Surgical logbook d. Surgical outcomes audit e. Multi-source Feedback
Ocular Motility (viii)	Independently perform a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^a Independently formulate and initiate a management plan for low complexity cases. ^a Justify the diagnoses and plan with reference to basic and clinical science. ^{a, b} Work effectively with patients and the multi-professional team. ^{a, c, d}	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a, b, c} Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	Independently assess and manage moderate complexity patients, demonstrating an understanding of ocular motility procedures and selecting the most appropriate treatment according to current accepted practice. ^{a, b, c, d} Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c} Independently perform low complexity muscle surgery. ^{a, e}	Demonstrate advanced clinical management and surgical skills. ^{a, b,} c, d Manage the complexity and uncertainty of ocular motility cases. ^{a, b, c, d,} Apply management and team working skills appropriately, including in complex, dynamic situations. ^{a, b, e} Be an effective supervisor, teacher and trainer of ocular motility cases. ^{a, b, c, e}
Assessment	a. EPA L1 b. Part 1 FRCOphth c. Multi-source Feedback	a. EPA L2b. Multi-source Feedbackc. Multi Assessor Report	a. EPA L3 Ocular Motilityb. Multi-source Feedbackc. Multi Assessor Report	a. EPA L4 Ocular Motilityb. Multi Assessor Reportc. Surgical logbook

	d. Multi Assessor Report	d. Refraction Certificate	d. Part 2 FRCOphth e. Surgical logbook	d. Surgical outcomes audite. Multi-source Feedback
Neuro-ophthalmology (ix)	Independently perform a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^a Independently formulate and initiate a management plan for low complexity cases. ^a Justify the diagnoses and plan with reference to basic and clinical science. ^{a, b} Work effectively with patients and the multi-professional team. ^{a, c, d}	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a, b, c} Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	Independently assess and manage moderate complexity patients, demonstrating an understanding of neuro-ophthalmology procedures and selecting the most appropriate treatment according to current accepted practice. ^{a, b, c, d} Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c} Independently perform low complexity neuro-ophthalmology procedures. ^{a, e}	Demonstrate advanced clinical management and surgical skills. ^{a, b,} c Manage the complexity and uncertainty of neuro- ophthalmology cases. ^{a, b, c} Apply management and team working skills appropriately, including in complex, dynamic situations. ^{a, b, d} Be an effective supervisor, teacher and trainer of neuro- ophthalmology cases. ^{a, b, c, d}
Assessment	a. EPA L1b. Part 1 FRCOphthc. Multi-source Feedbackd. Multi Assessor Report	a. EPA L2b. Multi-source Feedbacka. Multi Assessor Reportc. Refraction Certificate	 a. EPA L3 Neuro- ophthalmology b. Multi-source Feedback c. Multi Assessor Report d. Part 2 FRCOphth e. Surgical logbook 	 a. EPA L4 Neuro- ophthalmology b. Multi Assessor Report c. Surgical logbook d. Multi-source Feedback
Paediatric Ophthalmology (x)	Independently perform an age- appropriate patient assessment and investigation sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^a Independently formulate and initiate a management plan for low complexity cases. ^a Justify the diagnoses and plan with reference to basic and clinical science. ^{a, b}	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a, b, c} Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	Independently assess and manage moderate complexity patients, demonstrating an understanding of procedures for paediatric conditions and selecting the most appropriate treatment according to current accepted practice. ^{a, b, c, d} Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c}	Demonstrate advanced clinical management and surgical skills. ^{a, b,} ^{c, d} Manage the complexity and uncertainty of paediatric ophthalmology cases. ^{a, b, c, d,} Apply management and team working skills appropriately, including in complex dynamic situations. ^{a, b, e}

	Work effectively with patients and the multi-professional team. a, c, d		Independently perform low complexity extraocular paediatric procedures. ^{a, e}	Be an effective supervisor, teacher and trainer of paediatric ophthalmology. ^{a, b, c, e}
Assessment	 b. EPA L1 c. Part 1 FRCOphth d. Multi-source Feedback e. Multi Assessor Report 	f. EPA L2g. Multi-source Feedbackh. Multi Assessor Reporti. Refraction Certificate	 a. EPA L3 Paediatrics b. Multi-source Feedback c. Multi Assessor Report d. Part 2 FRCOphth e. Surgical logbook 	 a. EPA L4 Paediatrics b. Multi Assessor Report c. Surgical logbook d. Surgical outcomes audit e. Multi-source Feedback
Urgent Eye Care (xi)	Independently perform a patient assessment and investigations sufficient to identify, describe and interpret clinical findings to arrive at differential diagnoses. ^a Independently formulate and initiate a management plan for low complexity cases. ^a Justify the diagnoses and plan with reference to basic and clinical science. ^{a, b} Work effectively with patients and the multi-professional team. ^{a, c, d}	Independently manage patients at an appropriate work-rate, employing the most appropriate clinical examination equipment and investigation modalities. ^{a, b, c} Refine the differential diagnoses and management plan by application of clinical knowledge. ^{a, d}	Independently assess and manage moderate complexity patients, demonstrating an understanding of urgent eye care procedures and selecting the most appropriate treatment according to current accepted practice. ^{a, b, c, d} Risk assess and prioritise patients appropriately, recognising the need for special interest input. ^{a, c} Independently perform surgery requiring immediate intervention. ^{a, e}	Demonstrate advanced clinical management and surgical skills. ^{a, b,} ^c Manage the complexity and uncertainty of urgent eye care. ^{a, b,} ^c Apply management and team working skills appropriately, including in complex, dynamic situations. ^{a, b, d} Be an effective supervisor, teacher and trainer of urgent eye care. ^{a, b,} ^{c, d}
Assessment	a. EPA L1b. Part 1 FRCOphthc. Multi-source Feedbackd. Multi Assessor Report	a. EPA L2b. Multi-source Feedbackc. Multi Assessor Reportd. Refraction Certificate	 a. EPA L3 Urgent Eye Care b. Multi-source Feedback c. Multi Assessor Report d. Part 2 FRCOphth e. Surgical logbook 	a. EPA L4 Urgent Eye Careb. Multi Assessor Reportc. Surgical logbookd. Multi-source Feedback
Community Ophthalmology (xii)	Understand the role of a Community Ophthalmology Service. Communicate and deliver feedback to referrers and	Be aware of common public health issues and requirements specific to ophthalmology. ^{a,} Understand the environmental impact of eye health care. ^a	Understand the provision of community ophthalmology and screening programmes. Understand the epidemiology of eye disease and visual impairment	Demonstrate advanced skills necessary to assess the eye health needs of a population and analyse local priorities. ^{a, b,}

	patients to support integrated care.		and public health approaches to blindness prevention. Understand the role of commissioning in eye health care.	Evaluate design and delivery of care pathways. ^{a, b,} Demonstrate skills to assess and assure high quality outcomes in Community Ophthalmology Services. ^{a, b} Be an effective clinical leader, supervisor and trainer of the multi-disciplinary team. ^{a, b, c}
Assessment	a. EPA L1b. Part 1 FRCOphthc. Multi-source Feedbackd. Multi Assessor Report	e. EPA L2	EPA L3 Community Ophthalmology Part 2 FRCOphth	 a. EPA L4 Community Ophthalmology b. Multi Assessor Report c. Multi-source Feedback
Health Promotion				
	 Provide appropriate lifestyle advice. Adopt local and national guidelines of prevention of infection. Advise appropriately about the systemic side-effects of drugs. Know the principles of screening. Use and promote means of eye injury protection. 	Be aware and respect the impact of social, economic, cultural and religious factors on health. Have detailed knowledge of National Screening Programmes especially with reference to Ophthalmic diseases.	Demonstrate leadership in the promotion of eye and general health in the wider community. Promote immunisation.	Develop special interest area specific guidance for health promotion. Be an effective supervisor and leader in the area of health promotion.
Assessment	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool
Leadership and Team Working				

	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. Know the principles of leadership and identify areas for own development.	Document and evidence leadership behaviours. Practice within a multidisciplinary team to develop leadership projects.	Demonstrate the authority, capacity and motivation to implement change. Design own projects related to leadership and management and management with outcomes predetermined to reflect on success.	Critically evaluate own skills in leadership, with particular reference to the quality of patient care. Promote service improvement through: quality, innovation, productivity and prevention (QIPP); supervision of the multidisciplinary team; effective management of incidents and complaints.
Assessment	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool
Patient Safety and Quality Improvement				
	Know the principles, recognise the contribution to improved practice, and take part in clinical governance, audit and quality improvement activities. Identify appropriate information from a variety of data sources.	Apply clear and appropriate clinical reasoning to make safe decisions.Practice in line with latest evidence.Maintain appropriate audits of practice.Apply quality improvement methods.	Design and implement quality improvement programmes to improve clinical effectiveness, patient safety and patient experience. Analyse and critique published research.	Share improved practice with others and be able to justify changes made. Critically evaluate own skills in quality improvement. Promote clinical governance and quality improvement in the wider organisation / NHS.
Assessment	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool
Safeguarding and Holistic Patient Care				
	Understand and promote professional responsibility of safeguarding.	Recognise where specialised management techniques may be	Take responsibility for safeguarding of children and vulnerable adults,	Critically evaluate personal and wider organisational responses to safeguarding issues.

	Demonstrate familiarity with local safeguarding procedures and contacts. Demonstrate awareness of possibility of non-accidental injury in vulnerable patients. Document safeguarding concerns accurately and refers to senior staff.	necessary for those with special needs.	referring and taking appropriate action. Apply mental capacity legislation in clinical practice. Apply appropriate equality and diversity legislation in clinical practice.	Supervise and support other professionals with regard to safeguarding. Demonstrate effective specialised management techniques for those with special needs.
Assessment	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool
Education and Training				
	Ensure patient safety is paramount in all training and learning events. Actively participate in own induction and training. Deliver teaching activities under guidance. Deliver patient education.	Plan and provide education and training activities for medical trainees and other professionals. Give constructive feedback on learning activities.	Create learning opportunities for others. Provide objective assessment. Design and contribute to patient education.	Demonstrate readiness to act as a clinical and educational trainer. Balance service and training needs. Be able to identify and support a trainee experiencing difficulty.
Assessment	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool
Research and Scholarship				
	Adopt an evidence-based approach to clinical practice.	Implement an evidence-based approach to shared decision making and enhancing patient outcomes.	Implement service improvement by revision and development of guidelines, treatments and	Understand the principles of research methods, research governance, application of ethics

	Critically appraise existing published research. Understand research and deliver oral presentations.	Demonstrate competencies for commencing clinical research. Understand research, deliver poster presentations and improve oral presenting.	practical procedures using current clinical research and contemporary evidence. Lead research / teaching sessions and critically appraise oral presentations.	to research and the translation of research into practice. Promote innovation in ophthalmology.
Assessment	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool	Generic Skills Assessment Tool