



THE COLLEGE OF
OPTOMETRISTS

Supervisor quick-guide for CLiP assessment visits

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Purpose of this guidance

This guidance is written for Practice Education Leads and Task Supervisors for students on the Clinical Learning in Practice programme. It provides some quick reference guides for how you should be working with your students, an overview of each assessment visit and directs you to the more detailed guidance in other documents.

Main guidance documents

We encourage CLiP supervisors to refer to the introductory sections of the CLiP Assessment Handbook and, when preparing for visits, to refer to the marking criteria for each assessment visit there, when you are helping students to prepare.

The Student guidance for each assessment visit, while written for a student audience, is also an essential resource for supervisors and is an easier introduction to each visit than the more detailed Assessment Handbook.

All CLiP resources are updated here: [CLiP resources - College of Optometrists](#)

Supervision checklists

This checklist summarises the activities the supervisory team should undertake with the student on a weekly basis, and where you can find guidance on how to do this:

Check that student is following the right procedure in patient consultations, they are handling patients safely and supervisors are in practice to intervene if necessary	Assessment Handbook section 'Patient consultations'
Observe student in practice and provide guidance on developing clinical skills	Assessment Handbook section 'GOC learning outcomes' – 'Clinical core outcomes' table
Check and verify logbook entries	Assessment Handbook section 'Reviewing logbook entries'
Check Risk dashboard against expectations for the next assessment visit	Assessment Handbook section 'Student risk profile and dashboard'
Support the student to ensure they get the right working hours, consulting time, patient numbers, other duties and learning day arrangements	Employer Handbook section 'Arrangements for the student's employment' and 'Expectations for the CLiP student experience' / Assessment Handbook section 'Patient consultations'
Weekly check-in meeting with student	Workplace supervisor training course

CLiP dates and assessment windows

Standard CLiP dates

Students at Anglia Ruskin University, Aston University, Cardiff University, Teesside University and most students with City St George's and University of Huddersfield will be on standard CLiP dates as follows:

Standard CLiP dates

Early July	CLiP Part 1 start
Late August to mid-September	Window for CLiP 1R assessments
Early to late November	Window for CLiP 1F assessments
Early to mid-January	CLiP Part 2 start
Early to late February	Window for CLiP 2R assessments
Mid-April to early May	Window for CLiP 2F assessments
Mid-late June	Usual CLiP end date

Later start CLiP dates

Students at University of Lancashire, University of Plymouth, Ulster University and students at City St George's and University of Huddersfield with late examination board results will be on the later CLiP dates as follows:

Later start CLiP dates

Last week of July	CLiP Part 1 start
Mid-September to early October	Window for CLiP 1R assessments
Late Nov. to early December	Window for CLiP 1F assessments
End of January	CLiP Part 2 start
Early to late March	Window for CLiP 2R assessments
Early May to early June	Window for CLiP 2F assessments
Early to mid-July	Usual CLiP end date

January start CLiP dates

Students at University of Hertfordshire and some other students whose progress has been delayed will be on January start dates:

Usually, the second full week of January	CLiP Part 1 start
Early to late March	Window for CLiP 1R assessments
Early to late May	Window for CLiP 1F assessments
Early July	CLiP Part 2 start
Mid to late August	Window for CLiP 2R assessments
Mid-October to early Nov.	Window for CLiP 2F assessments
Week commencing 13 Dec.	Usual CLiP end date

Note: *Bradford and UWE details to be confirmed and updated here*

Expectations for testing time

Students in a CLiP role will work 28 – 31 hours per week, of which around 20 hours should be spent in the consulting room with patients. To be clear, students should not be working on patient consultations for significantly more or less than 20 hours per week. If they worked less, they would not accrue enough logged experience to pass CLiP assessments. If they worked more, the burden of logging entries could become too onerous. Also, students would miss out on important professional experience of other areas of the business.

The recommended number of patients a student should see each day is:

Timeframe	Number
Up to CLiP Part 1 Remote visit (around 9 weeks in)	No more than 4-5 patients per day
Up to CLiP Part 1 Face-to-face visit (around 18 weeks in)	No more than 6-8 patients per day
Up to CLiP Part 2 Remote visit (around 5 weeks into Part 2)	No more than 8-10 patients per day
Up to CLiP Part 2 Face-to-face visit and beyond (around 13 weeks into Part 2)	No more than 12 patients per day

General requirements for Assessment visits

- The College will give the student a date for assessment visits within the general window, which cannot be changed. However, if possible, Supervisors should make the visit day a working day, rather than the student's learning day or day off.
- If the student does the visit in the practice, make sure they are in a room with a good WiFi connection.
- If it is a patient observation, make sure they are in a testing room they routinely use and that the equipment is all available and in good order.
- If a patient is arriving, ensure the staff at front of house are aware this is not a regular patient with a booking.

Note: The above information is taken from the CLiP Assessment Handbook. We recommend that all CLiP Supervisors see the full Assessment Handbook for more detailed information.

All updated CLiP guidance is published here: [CLiP resources - College of Optometrists](#)

CLiP 1R

When: Approximately 9 -12 weeks from starting the CLiP placement

Where: Online: in practice or at another location

Duration: 2 hours

The visit will consist of five overarching tasks, which mainly involve a professional discussion with the Assessor based on logbook entries and other evidence the student provides:

1. Legal and ethical use and supply of ophthalmic drugs
2. Health and safety legislation
3. Patient relationships
 - a. Consent
 - b. Patient care (privacy, dignity, equality, inclusivity)
 - c. Communication skills
 - d. Information management
4. Service Evaluation Project (project orientation)
5. Quality assurance of setting and supervision (for support purposes)

Preparing for CLiP 1R

(a)

The student can sit the remote visits at home or in the workplace. If they intend to do the visit in the workplace, help them to find a place where they have a good WiFi connection and will not be disturbed.

(b)

When Assessors choose an entry from the logbook to investigate with the student, they will always ask to see the patient record for the full detail. For both remote visits, the student will need to have **anonymised copies of patient records** on their device to show the Assessor (not in the Portal logbook). This means they need to anonymise the records on your practice system before transferring those anonymised records to their own device. Supervisors need to oversee this process and check that records have been anonymised correctly, taking appropriate steps if a data breach is discovered.

(c)

The student needs to include some **specific patient types and tasks** in their logbook records for the 1R visit. These include but are not limited to:

- Drug instillations with patients the student has seen, and where they have instilled drugs which are not NaFI.
- Patients who have been referred, with referral letter sent and signed by the student (anonymised)
- Patients up to and including 11 years old
- Vulnerable patients
- Patients accompanied by carer

You will need to check, at the point around 4-5 weeks before the visit, if the student still needs to gain any required interactions.

(d)

Your student needs to create logbook entries in which they tag certain **Clinical core learning outcomes**. You will need to refer to the Student guidance for CLiP 1R to check that they meet these requirements. From the outset, though, it would be useful for you to check student logbook entries and ensure:

- They are assigning Clinical core learning outcomes in that logbook field
- But no more than two outcomes per entry
- They are writing notes in the 'Consultation notes' field to explain how they met the outcomes

(e)

The student needs to discuss their plan for the **Service Evaluation Project** with the Assessor at the 1R visit. You should discuss this with the student from the 4-5 week point.

(f)

For Task 1, the student needs to complete a drug management template. You should check the student's logged examples of drug instillations and their template well in advance of the visit and advise them, if needed.

(g)

For Task 2, the student creates a Health and Safety presentation, using photos to provide examples from their practice. You should check their presentation – the Assessor needs to see the **student's ID in the photographs** as verification that they were taken in your practice. Please check that the student has done this, or it could delay the student's result for the visit.

More guidance

See **Student guidance for CLiP 1R** for full break-down of logbook requirements and tasks.

See the **Assessment Handbook** for full information about preparing for Assessment visits and full marking criteria for the 1R visit.

Both available here: [CLiP resources - College of Optometrists](#)

CLiP 1F

When: Approximately 18-20 weeks from starting the CLiP placement

Where: In the student's practice

Duration: 3 and a half hours (with an additional 15 minutes for Assessor to carry out patient consultation)

The visit will consist of nine overarching tasks:

1. Clinical examination fundamentals
 - a. History and symptoms
 - b. Clinical examination
 - c. Management plan
 - d. Record keeping
 - e. Health and safety including infection control
 - f. Clinical decision-making
2. Dispense and verification
 - a. Dispensing
 - b. Verification
3. Communication and consent
4. Patient care
5. Safety and risk
6. Diagnosis and decision-making
 - a. Refractive correction, investigation and decision-making
 - b. Contact lens decision-making
7. Record-keeping
8. Service Evaluation Project (submission and verification)
9. Quality assurance of setting and supervision (for support purposes)

Preparing for CLiP 1F

Important:

For CLiP 1F, the Assessor will come to your practice, and when they ask to see patient records, they will be viewing these on the computer in the testing room. As such, records do not need to be anonymised for CLiP 1F, but you do need to make sure that the student is in a practice where the Assessor can access all their records. The student needs to be in a testing room they normally use, with functioning equipment.

(a)

The student needs to include some specific patient types and tasks in their logbook records for the 1F visit. These include but are not limited to:

- Obtaining consent from a patient:
 - Up to and including 7 years of age
 - Through the patient's carer
 - With communication or comprehension challenges
 - While managing their family history, social or cultural factors or beliefs
 - While managing cultural barriers
- Contact lens application and removal with patients
- CL teach
- CL aftercare
- Multifocal lens
- Toric lens

(b)

When the student creates logbook entries they should still select one or two **Clinical core learning outcomes** and explain, in the Consultation notes field, how they met those outcomes with the patient.

(c)

The **observation** element of this visit is not a full eye examination, but a demonstration of certain clinical skills. You should see the full break-down of the observation Tasks 1 and 2 in the Assessment Handbook / Student guidance for CLiP 1F and make sure your **student is regularly observed** by you or other team members from around 4-5 weeks before the visit, practising these skills.

(d)

In Task 6 of CLiP 1F, the student needs to select logbook entries in the areas of modifying refraction to patient needs and circumstances, undertaking investigative techniques and contact lens decision-making. Discussion with the Assessor will be focussed on their diagnosis and decision-making. It will be worth practising this type of discussion with your student, asking to see the related patient record and getting the student to talk through what happened and why they made the choices and

management decisions recorded there. Ensure that their examples of contact lens fit are proper fits with reference to the definition included under the Risk framework in the Assessment Handbook.

(e)

The student will need to have their **Service Evaluation Project** completed and submitted on a logbook entry for this visit. You should check, a few weeks prior to this visit, that your student is making progress and understands this needs to be completed by this point.

(f)

A mystery patient and an Assessor will be coming to your practice for the CLiP 1F visit, so from around 2 weeks in advance of the visit, ensure that the staff are aware that there will be a **patient** arriving who is not in the booking system. The Assessor, rather than the Supervisor, will have clinical responsibility for this patient.

(g)

The Practice Lead Supervisor needs to (i) complete a **Supervisor survey** in advance of the visit and ask the student to upload it to a logbook entry and (ii) be present on the day of the visit and available to have a **discussion with the Assessor** at the end of the visit (Task 9). The discussion is about the survey and the student's progress on CLiP. Assessors do not share whether the result is a Pass or Fail at the visit.

More guidance

See **Student guidance for CLiP 1F** for full break-down of logbook requirements and tasks.

The **Record card** the student will need to use to during the observation is also available.

See the **Assessment Handbook** for full information about preparing for Assessment visits and full marking criteria for the 1F visit.

Both available here: [CLiP resources - College of Optometrists](#)

CLiP 2R

When: Approximately 5 weeks from starting CLiP 2

Where: Online, in practice or at another location

Duration: 2 hours and 30 minutes

The visit will consist of seven overarching tasks:

1. Low vision
2. Paediatrics and vulnerable patients
3. Non-tolerance and contact lens complications
4. Use of ophthalmic drugs
5. Multidisciplinary collaboration, communication and leadership
 - a. 360° review
 - b. Coaching exercise
6. Personal Development Plan discussion (for support purposes)
7. Quality assurance of setting and supervision (for support purposes)

Preparing for CLiP 2R

(a)

The student can sit the remote visits at home or in the workplace. If they intend to do the visit in the workplace, help them to find a place where they have a good WiFi connection and will not be disturbed.

(b)

When Assessors choose an entry from the logbook to investigate with the student, they will always ask to see the patient record for the full detail. For both remote visits, the student will need to have **anonymised copies of patient records** on their device to show the Assessor. This means they need to anonymise the records on your practice system before transferring those anonymised records to their own device. Supervisors need to oversee this process and check that records have been anonymised correctly, taking appropriate steps if a data breach is discovered.

(c)

The student needs to include some **specific patient types and tasks** in their logbook records for the 2R visit. These include but are not limited to:

- Patients with low vision
- Dispense of a low vision optical appliance
- Patient up to and including 4 years old with a dispense
- Patient up to and including 7 years old with binocular vision anomaly managed by the student
- Vulnerable patients with disabilities impacting communication and mobility, including a dispense
- Patients with range of non-tolerance
- Mydriatic, cycloplegic and anaesthetic drug instillations

(d)

From around 4-5 weeks prior to the assessment visit, you should discuss the **360° review** and **Personal Development Plan** tasks. These include parts you will need to complete and submit in advance of the visit.

(e)

For CLiP Part Two, there is no need for the student to select **Clinical core learning outcomes** when they create logbook entries. It is worth checking whether they are aware of this, from the point they start CLiP Part Two.

More guidance

See **Student guidance for CLiP 2R** for full break-down of logbook requirements and tasks. See the **Assessment Handbook** for full information about preparing for Assessment visits and full marking criteria for the 2R visit.

Both available here: [CLiP resources - College of Optometrists](#)

CLiP 2F

When: Approximately 13 weeks from start of CLiP Part 2

Where: In the student's practice

Duration: 2 hours and 55 minutes (with an additional 15 minutes for Assessor to carry out patient consultation)

The visit will consist of five overarching tasks:

1. Complete eye examination
 - a. History and symptoms
 - b. Refraction
 - c. Eye health assessment
 - d. Binocular vision assessment
 - e. Management plan (incl. supplementary tests)
 - f. Record-keeping
2. Specialist dispense
3. Diagnosis: management and referral
4. Learning and development
5. Quality assurance of setting and supervision (for support purposes)

Preparing for CLiP 2F

Important:

For CLiP 2F, the Assessor will come to your practice, and when they ask to see patient records, they will be viewing these on the computer in the testing room. As such, records do not need to be anonymised for CLiP 2F, but you do need to make sure that the student is in a practice where the Assessor can view their records.

(a)

The student does not need to select any logbook entries (patient types and tasks) for the 2F visit.

(b)

The **observation** element of this visit is a full eye examination with a presbyope patient followed by a specialist dispense exercise. You should check the full breakdown of the observation Tasks 1 and 2 in the Assessment Handbook / Student guidance for CLiP 1F and make sure your **student is regularly observed** by you or other team members from around 4-5 weeks before the visit.

(c)

This visit includes task in which the Assessor selects entries from the whole logbook, using certain search terms, and asks to discuss the patient records with the students. This is Task 6, **Diagnosis: management and referral**.

The Assessor will search using terms from this list of three areas:

Anterior eye

- a. Cataract
- b. Red eye
- c. Dry eye
- d. Blepharitis

Posterior eye

- a. Glaucoma
- b. Diabetic or hypertensive retinopathy
- c. Suspect retinal detachment
- d. Maculopathy

Neurology and fields

We recommend that Supervisors do the same searches with the student as part of preparation for the visit. Identify relevant entries, ask the student to find the related patient record and talk through what happened and why they made the choices and management decisions recorded there.

(d)

A patient and an Assessor will be coming to your practice for the CLiP 2F visit, so from around 2 weeks in advance of the visit, ensure that the staff are aware that there will be a **patient** arriving who is not in the booking system. The Assessor, rather than the Supervisor, will have clinical responsibility for this patient.

(e)

The Practice Lead Supervisor needs to (i) complete a **Supervisor survey** in advance of the visit and ask the student to upload it to a logbook entry and (ii) be present on the day of the visit and available to have a **discussion with the Assessor** at the end of the visit (Task 5). The discussion is about the survey and the student's progress on CLiP. Assessors do not share whether the result is a Pass or Fail at the visit.

More guidance

See **Student guidance for CLiP 2F** for full break-down of logbook requirements and tasks.

The **Record card** the student will need to use to during the observation is also available.

See the **Assessment Handbook** for full information about preparing for Assessment visits and full marking criteria for the 2F visit.

Both available here: [CLiP resources - College of Optometrists](#)

Document version	Date	Update
1.1	27/05/2026	First version
1.2	26/06/2026	Introductory page transferred from previous CLiP Portal guidance Updates in line with final changes to Assessment Handbook: 1F task 6 updated and child patient age ranges revised throughout