**Assessment Plan: Visit three**

Trainee name: Assessor name:

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| Date, time and location for assessment: Please note cancellation policy for stage one visits <https://www.college-optometrists.org/qualifying/scheme-for-registration/stage-one/preparing-for-stage-one-visits> |
| **Proposed activity** – competencies to be covered, methods of assessment:We will be covering all of the visit three competencies listed in the visit three Assessment Framework plus any outstanding elements from previous visits. The actual competencies assessed will be largely dependent on the patient episodes and experience you have gained to date. Total time for visit: **4 hours**Please sign and return a copy of this plan to me to indicate your agreement.  |
| **Evidence to be sent via email in advance**:I must receive by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at the **latest** please:* Completed visit three assessment framework document
* Reflective account for 2.1.3 and 2.2.6
* This document signed to agree the assessment plan
* Your log book

On the day, I will need to see your up to date logbook, your signed hospital logbook or HES certificates and I will need access to your patient records. Please ensure that the relevant records are easily available to view on the day.  |
| **Agenda for assessment day**10.00 Arrival 10.05 Review of logbook, authenticity check of APR, RA and TCD presented at earlier visits10.15 Assessment of elements using evidence provided by trainee and supplementary evidence led by assessor* 1. Direct observation of the following patients whom you will need to organise:
		+ eye examination on a presbyopic **REAL** patient (guide: 50 mins to complete) including indirect ophthalmoscopy and **using trial frame and lenses**
		+ using a simulated patient/s to demonstrate:
		+ direct ophthalmoscopy
		+ soft lens fit (one eye)
		+ tear film assessment
		+ contact tonometry using Goldmann or Perkins (one eye only).

12.15 Continue with assessment of elements using evidence provided by trainee and supplementary evidence led by assessor1.30 Break for assessor to consider assessment outcome and feedback content1.40 Feedback of the assessment outcome with supervisor and trainee and agreement of remedial action plans2.00 Assessment ends |
| **Visit four date:**  |
| **Target date for sign off in Stage One\_\_\_\_\_\_\_\_\_\_\_\_****Trainee is currently aiming for \_\_\_\_\_\_\_\_\_\_\_\_\_OSCE** Trainee………………………..………… Supervisor………………………..……Assessor ………………………..………… Date………………………..………………. |