

**Multiple Consultant Report (MCR) Form**

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| **Doctor in Training Name:** | ES/StR to complete prior to sending to assessors for feedback |
| **Educational Supervisor (ES):** | ES/StR to complete prior to sending to assessors for feedback |
| **ES Email Address:** | ES/StR to complete prior to sending to assessors for feedback |
| **Name of consultant completing MCR:** |  |
| **Time supervising trainee:** *(choose one and delete as appropriate)* | Single or few sessions/3-5 sessions/6-10 sessions/>10 sessions |
|  |
| **Date (DD/MM/YYYY)** |  |
| **Training unit Speciality** *(choose one and delete as appropriate)***Stage of Training** | ***E.g.*** *ICU/Cardiac ICU/Neuro ICU/Paeds ICU Anaesthesia/Medicine**Special Skills Year*Stage 1 Stage 2 Stage 3 |

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| **Professionalism and Leadership** | *E.g. Communication and documentation skills, professional behaviours and attitudes, Timekeeping, reliability and trustworthiness. Understanding of ethical and legal practices* |
| **Rating** *(choose one & delete as appropriate)* | Exceeds expectations / No Concerns /Concerns |
| **Comments to justify grade Identify areas** **for improvement****and/or excellence** |  |
| **Patient Safety & Quality Improvement** | *E.g. Understands patient safety/ safeguarding, quality improvement, sharing good practice and learning from incidents, reflective, evidence based practice.*  |
| **Rating** *(choose one & delete as appropriate)* | Exceeds expectations / No Concerns /Concerns |
| **Comments to justify grade Identify areas** **for improvement** **and/or excellence** |  |

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| **Research & Teaching** | *E.g. Up to date with current literature and best practice, critical appraisal skills, active in unit research/Delivers effective teaching to all in MDT/Reflective learner* |
| **Rating** *(choose one and delete as appropriate)* | Exceeds expectations / No Concerns /Concerns |
| **Comments to justify grade Identify areas** **for improvement** **and/or excellence** |  |
| **Specific ICM capabilities** | *E.g. resuscitation, stabilisation, transfer. Investigation, management, Perioperative care, end of life care.* |
| **Rating** *(choose one and delete as appropriate)* | ***Clinical:****Direct supervision required**Simple cases managed independently**Complex cases managed with limited assistance**Expert (consultant) practice* *Not witnessed* |
|  | ***Procedural skills:*** *Direct supervision required**Straightforward cases performed independently**More complex cases performed with limited supervision**Independent (consultant) practice**Not witnessed* |
| **Comments to justify grade identify areas****for improvement and/or excellence** |  |

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| **Additional comments** |
| **Further details/comments.****Think particularly of areas of good practice/ areas to focus on** |  |
| **Signature of completing assessor\*** |  |

\**You do not need to add your electronic signature to the form, a typed signature will suffice*

***Please send the completed form to the ICM StR’s Educational Supervisor directly.***

**Guidance on completing this Multiple Consultant Report form**

Thank you for completing this form for the doctor in training.

This form is designed to facilitate the Educational Supervisor (ES) in constructing learning objectives for the doctor in training. It will capture the doctor in trainings’ performance in relation to the ICM curriculum’s High-Level Learning Outcomes (HiLLOs), at that Stage of training. This will be particularly helpful to the Educational Supervisor if they do not work directly with the trainee, and/or to accumulate further comments from multiple trainers with regards the doctors in training performance against that stage of training.

* This form complements but **does NOT replicate or replace** the GMC’s MSF form.
* Your judgement of performance in relation to each section (if observed) should be offered alongside free text comments.
* Comments **must** be provided to support any rating indicating ‘concerns’.
* The form will **NOT** be anonymised. All comments should be considered constructive in allowing the doctor in training to develop their practice. This will support the ES in making global judgements in relation to capability within each of these HiLLOs and supporting the doctor in training to plan and develop their future learning.
* It is important that ALL consultants the doctor in training has worked with are sent the form and can respond.
* It is recommended an absolute minimum of 4 consultants need to feedback to make this a valid feedback tool.
* A greater number of responses is expected in larger units to increase validity and reduce bias.

**ALL responses should be returned to the ES directly for analysis and will be discussed with the doctor in training before a learning plan is created.**