

RCEM Position Statement on the use of AI in Reflective Logs

1. Purpose of Reflective Logs

Reflective practice is a critical component of professional development, self-awareness, and learning within emergency medicine. The primary purpose of reflective logs is to support residents in engaging in meaningful reflection that enhances patient care, professional behaviour, and lifelong learning.

2. The Role of AI in Reflection

Artificial Intelligence (AI) tools can be useful in:

- Structuring written reflections (e.g., organising thoughts into themes).
- Enhancing clarity of expression and readability.
- Suggesting prompts or questions that encourage deeper reflection.
- Assisting with grammar, spelling, and professional tone.

However, AI tools cannot replace the individual's authentic personal reflection, which remains the cornerstone of professional development.

3. Acceptable Use of AI

Resident doctors may use AI to:

- Generate prompts to guide reflection.
- Rephrase their own written reflections for clarity.
- Explore different perspectives on an experience they are already reflecting on.
- Check language and structure for professionalism.

4. Unacceptable Use of AI:

Residents must not use AI to:

- Fabricate experiences or reflections.
- Submit AI-generated content as their own personal reflection without critical input.
- Avoid engaging in the reflective process themselves.

5. Data Protection and Confidentiality

Residents must not enter any personal, identifiable, or sensitive data into AI tools, including:

- Patient identifiers or clinical details (e.g., names, dates, demographics, hospital numbers).
- Information that could identify colleagues, supervisors, or institutions.

- Details of adverse incidents, complaints, or ongoing investigations.

Reflections should focus on the learning, insights, and emotions arising from an experience rather than specific identifying information.

When discussing a clinical scenario, it should be anonymised and generalised (e.g., “a patient with chest pain” rather than “Mr. X who presented on 12 October at Hospital Y”).

6. Transparency and Referencing

- If AI tools are used to support the reflective process, this should be declared within the log (e.g., “AI was used to help structure and edit this reflection”).
- The resident doctor remains responsible for the accuracy, authenticity, and insightfulness of their reflection.

7. Supervisor Responsibilities

Educational supervisors should:

- Encourage honest, meaningful reflection regardless of whether AI is used.
- Recognise that AI may support expression but should not substitute lived professional experience.
- Discuss with residents how AI can enhance but not replace reflective practice.

8. Summary Statement

AI can be a valuable tool to support reflective practice when used responsibly. RCEM supports the thoughtful use of AI to enhance, but not replace, authentic reflection. Residents doctors remain accountable for ensuring their logs are genuine, personal, and aligned with professional standards.

Recognising the rapid evolution of AI and its growing applications, AI in assessment will remain a standing item on the TSC committee agenda. The committee will regularly review and update current guidance, and where necessary, identify and develop additional guidance for future publication.