Dear Trainees and Educators

RE: Position Statement on Trainees’ Written Reflections

I am writing to you as the Postgraduate Dean and Responsible Officer for postgraduate medical trainees to clarify the position with regard to trainees’ written reflections. I am aware that there have been some confusing messages about this recently.

The General Medical Council make it clear in Good Medical Practice that reflection is the key to effective continuing professional development, and is a skill that must be developed and practised by all doctors (http://www.gmc-uk.org/education/continuing_professional_development.asp).

Doctors should reflect on all aspects of their professional work, including interactions with colleagues and patients. It is equally important that all doctors are able to reflect on critical incidents and complaints. Trainees must continue to do this in discussion with their supervisors and provide evidence of this activity at ARCP. This is no different to the expectation that all consultants, non-training grade doctors and GPs will reflect on their work and discuss this at annual appraisal. Without this evidence no doctor can revalidate.

Recently, a trainee was required to release a written reflection to a legal agency which was subsequently used as evidence against the trainee in court. This has raised questions about whether trainees should still provide reflection about incidents in their portfolios.

Health Education England in Yorkshire and the Humber is clear that all doctors have to provide written reflections for their ARCP and appraisal, and so doctors in training must continue to write reflections, especially when there are things that do not go well. This is an essential part of training and is needed to progress through a postgraduate training programme. However doctors in training should ensure that their reflections are carefully written and focus on the learning gained from such events. The focus should shift from “What would I have done differently?” to identifying individual or system wide learning points. There must be no patient identifiable information contained within written reflections.
Although the law will continue to challenge we must maintain our Professional approach, including reflection for learning. I would encourage doctors in training to continue to discuss reflections with supervisors and to seek advice from senior doctors if they have concerns about how to reflect on a specific incident. Doctors in the early years of postgraduate training may benefit from more guidance and support in developing their reflective writing skills and we expect educational supervisors to provide this.

This is a complex area where there is no single answer that will cover all situations. If you do receive a request (or a demand) for disclosure of any of your e-portfolio content, your Head of School and senior staff within HEE YH are always available to give advice and support.

Yours sincerely

[Signature]

Mr David Wilkinson
Postgraduate Dean