Ethical or faith-related concerns in practice: a step-by-step guide for GP trainees

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This guide is for any trainee who has a personal, ethical or faith-related concern about part of their clinical work, for example CPR decisions or ReSPECT forms. It sets out practical steps and where to go for help.

Step 1. Read around the topic and be clear about your concern

- Do some reading yourself first, so you understand the issue before you approach others.
- Be specific about which part of your work you have a concern with. For example, you may be comfortable with advance care planning and palliative care in general, and only have a concern about CPR decisions. Keeping it focused makes it easier for others to support you.

Step 2. Involve your educational supervisor and the management team early

- Speak to your educational supervisor first, then your clinical supervisor and Training Programme Director.
- Keep your educational supervisor and the practice management team in the loop about every decision, and copy them into emails where possible.

Step 3. Plan your clinics in advance and be open about it

- Think ahead about home visits, outreach clinics or any appointments where ReSPECT forms or CPR are likely to be discussed.
- Be open with the practice that the process may take time, and that you may not be able to cover that part of these clinics for now.
- Having an ethical concern doesn't mean you shouldn't see the patient. See them, deal with everything else, and hand over only the part you have a concern about.
- Agree beforehand who will take this on. Ideally this should be a named GP, such as the patient's own usual GP or another named colleague, rather than the duty doctor, who is there for urgent work.

Step 4. Make an emergency plan

- Think through what you would do if a decision about CPR was needed urgently.
- Ask yourself the difficult questions: what if you are the only GP in the building, on a home visit alone, or working a session with no other GP available?
- Agree a clear plan with your supervisor and the practice so that patient care is never delayed, even in the worst-case situation.

Step 5. Read the GMC guidance

- Read the GMC guidance on personal beliefs and medical practice, and on treatment and care towards the end of life.
- The key point for trainees: your beliefs are respected, but they must never delay or block a patient's access to care.

Step 6. Contact your medical defence organisation

- Medical Protection (MPS): 0800 561 9090, querydoc@medicalprotection.org
- MDU: 0800 716 646, advisory@themdu.com
- MDDUS: 0333 043 4444, advice@mddus.com

Advice is given case by case, so contact your own organisation for guidance on your situation. Written advice can take a couple of weeks.

Step 7. Seek faith or pastoral guidance if it helps you

- **British Islamic Medical Association (BIMA)**: info@britishima.org (membership may be needed)
- **Muslim Doctors Association**: info@muslimdoctors.org
- **Royal Berkshire Hospital PALS**, who can pass your query to the hospital chaplaincy (multi-faith): via royalberkshire.nhs.uk
- **Al Balagh Academy**: albalaghacademy.org (courses on Islam, end-of-life and palliative care)

These organisations can also put you in touch with scholars and senior academics in medical ethics. I haven't included individuals' contact details, as I don't have their permission to share them. If your concern relates to another faith, the hospital chaplaincy is a good place to start.

Step 8. Think about your future work

- Consider how your concern might affect future roles, for example as a salaried GP, partner, locum, or in out-of-hours, care home or palliative care work.
- Even in a team, there may be times when you are the only GP providing care. Plan for the worst-case situation in each setting.
- Think about how you would discuss this openly with future employers, so you can take a holistic approach that works for you and your patients.

Step 9. Reflect on your portfolio as you go

- Add a short reflection after each step, not only at the end.
- These make good evidence for **Fitness to practise** and **An ethical approach**.

Step 10. Once you reach a decision, update everyone

- Let your TPD, supervisors, the management team and the wider practice team know what you'll be doing from now on.
- Ask for any records of earlier discussions to be updated if needed.

Need help?

If you have concerns or ethical considerations around CPR, I'm happy to help, and to share the responses I received from these organisations.

Checklist

[ ] Read around the topic and clarified exactly what my concern is
[ ] Educational supervisor, clinical supervisor, TPD and management team involved
[ ] Clinics, home visits and outreach sessions planned in advance
[ ] Named colleague agreed to take on the part I'm concerned about
[ ] Emergency plan in place, including if I'm the only GP
[ ] Read the GMC guidance
[ ] Contacted my medical defence organisation
[ ] Sought faith or pastoral guidance, if helpful to me
[ ] Thought about my future roles and worst-case situations
[ ] Reflections added to my portfolio at each step
[ ] Decision reached and everyone updated

Contact details correct as of November 2026. Please check before use.