

Ethics Consultation Procedure

Standard operating procedure (SOP) | GOV-SOP-002

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Title	Ethics Consultation Procedure
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Replaces	None (new document)
Standards and criteria supported	Standard 2A, criterion 2A.9
Evidence basis	E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Call the ethics contact; describe the question in one or two sentences.
2. If the case is urgent, treat first; ask for advice when the patient is safe.
3. Give the facts in summary, without identifiers, to the consultation.
4. Record the advice you received and what the team decided.
5. Ask the ethics contact to log the consultation.

Stop and get help straight away if: the patient is at immediate risk. Treat the risk first.

1. Purpose

To describe step by step how a staff member or family asks for ethics advice and what happens next [EC].

2. Scope

Applies to	Staff who ask for advice, the ethics contact, and consultation members
Locations	All services
When	Whenever an ethical dilemma arises in care
Does not apply to	Research ethics (SOP-N05)

3. Definitions and abbreviations

Term	Meaning in this SOP
Ethics contact	The named person who receives and arranges requests
Consultation note	The written advice from the consultation

4. Background and rationale

The policy sets the principle. This procedure sets the steps, so that anyone can use the route without needing to know who sits on the committee.

5. Responsibilities

Role	Duties in this SOP	Competence needed
Requesting clinician	Describes the case; makes the decision	Clinical competence
Ethics contact	Receives request; arranges consultation; records advice	Trained contact
Consultation members	Give advice in writing	Ethics training (EC)

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Request form	Current version	Available on each ward
Consultation log (GOV-REG-003)	Current	Updated after each consultation

7. Safety and infection prevention

- Do not include patient identifiers in writing outside the approved route.

8. Before you start

- Gather the facts, the patient's wishes and any advance decision in the record.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Make the request.	- Call or email the ethics contact, or complete the request form. - State the question and whether it is urgent.	Urgent requests are not delayed by the paperwork.
2	Prepare the summary.	- Write a one-page summary: diagnosis, options, the patient's wishes, the views of the family, and the question. - Remove names and identifiers, using a case code.	A short summary lets members focus on the ethical question.
3	Attend or send the case to the consultation.	- Attend the consultation, or send the summary if you cannot attend. - Answer questions honestly, including what you do not know.	The consultation depends on accurate facts.
4	Record the advice and decision.	- Record the advice and the team's decision in the clinical record, without the ethics note, if the policy requires. - Tell the patient and family what was decided and why, where appropriate.	The decision and its reasons belong in the record, so the next team knows.
5	Log the consultation.	The ethics contact enters the case on GOV-REG-003 within 5 days.	The log is how the route is shown to work.

Decision points

- If the advice is not followed, the team records the reason in the clinical record.

10. Special situations

Situation	What to do
Out-of-hours urgent case	Use the on-call senior clinician as the first contact; the ethics contact follows up next working day (EC).

11. Problems and escalation

- If the route fails or cannot respond, inform the chief executive the same day.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Consultations completed within the time set	100%	Monthly	Ethics contact	Escalate to chief executive
Log entries complete	100%	Monthly	Ethics contact	Complete within 5 days

13. Records

Record	Where it is kept	Kept for
Request and summary (case code only)	Restricted ethics file	{{facility.records_retention_years}} years
Consultation log (GOV-REG-003)	Governance file	{{facility.records_retention_years}} years

14. Training and competence

- Ethics contacts are trained (EC).
- Clinicians receive a short briefing on the route at induction.

15. Related documents

ID	Title	Relationship
GOV-POL-004	Clinical Ethics Consultation Policy	Principle
GOV-REG-003	Ethics Consultation Log	Log

16. Evidence

ID	Source and status
E-009	ASF Expert Committee consensus.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Approved by the ASF Expert Committee
1.1	{{document.effective_date}}	Internal quality review: corrected cross-references, status wording and document control	Approved by the ASF Expert Committee