**Background**

The provision of high quality health care is an intrinsically ethical activity, yet this often goes unremarked until an ethical problem, or conflict, arises (1). Clinical ethics support services (CESS) can help address ethical dilemmas as they arise in practice, but most CESS models have arisen within and been designed for hospital settings (2). A primary care model of clinical ethics support has not been developed.

**Aims**

We set out to explore the ethical dilemmas general practitioners (GPs) and practice nurses (PNs) encounter in their everyday practice, how they address these, and their response to potential primary care based CESS models.

**Method**

Five focus groups were conducted, three with GPs and two with PNs, an additional two PNs participated in a joint interview. The focus groups were audio-recorded and transcribed, and the transcripts were analysed thematically.

**Results**

18 GPs and 19 PNs participated. The analysis identified five categories of ethical dilemma: clinical/practice dilemmas, dilemmas of responsibility; dilemmas of structure; dilemmas of place and socio-cultural, environmental dilemmas. GPs and PNs described different types of dilemmas, these reflected differences in their work and role. None of the support structures utilised offered ethics expertise and participants wanted more support. Telephone and online models were favoured, but no model fully addressed participants’ needs.

**Conclusion**

GPs and PNs frequently encounter ethical dilemmas and lack support in addressing these. This works provides the ground work for developing a primary care CESS and points towards the ethical approaches that would underpin such a model.

**References**

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 (2) National Health Medical Research Council. Clinical Ethics Capacity Building Resource Manual. NHMRC 2015 [cited 2015 Sep 23];Available from: URL: [www.nhmrc.gov.au/guidelines/publications/e114](http://www.nhmrc.gov.au/guidelines/publications/e114)