

Standard Operating Procedure: Requesting a 2nd opinion (Ask Me Campaign) UHL Maternity Services

1. Introduction and overarching policy/guideline

The 'Ask Me' campaign is a process to facilitate pregnant women and people being able to escalate if they have concerns/questions about aspects of their care, feel they aren't being listened to or want a 2nd clinical opinion whilst they are an inpatient. This campaign is based on the story of Martha Mills (Marthas Rule). Her mother has campaigned for a robust escalation system within the NHS for relatives/patients to escalate concerns (see supporting references). The 'Ask Me' campaign is part of University Hospitals of Leicester's 'Call 4 Concern' initiative and applies to inpatients who are receiving care in Maternity Assessment Unit, antenatal/postnatal wards, birth centres and delivery suite.

This process is outlined and communicated through the use of the 'Ask Me' posters which are displayed in every inpatient clinical area (see appendix). The posters invite pregnant women and people and their families to ask questions, raise concerns and feel heard.

2. Process

2.1 Request for midwifery 2nd opinion

If a pregnant woman or person or family relative seeks a second opinion from a midwife as an inpatient, these are the following options:

- Escalate to delivery suite coordinator/ward manager
- If seen by delivery suite coordinator refer to ward manager and/or matron (in hours)
- Request 2nd opinion from delivery suite coordinator cross-site (out of hours)

2.2 Request for medical 2nd opinion (obstetric/anaesthetic)

If a pregnant woman or person or family relative requests a medical second opinion as an inpatient, these are the following options:

- If seen by a postgraduate doctor, then refer to the consultant
- If seen by a consultant (in hours) please collaborate with the consultant covering other area (MAU or Delivery Suite if obstetrician/2nd on call anaesthetist covering ITU)
- If seen by a consultant (out of hours) refer to consultant cross-site
- If seen by a consultant (in hours) and no additional consultant use the virtual communication/escalation group to seek assistance or discuss with Head of Service for escalation (they may be able to direct you to the most suited person) or provide a second opinion themselves

This second opinion can be conducted face to face during normal working hours but we have the option of a virtual/telephone review out of hours.

When a 2nd opinion is requested, the review must take place as soon as possible. If there is a delay of more than one hour, it must be clearly documented in the notes/electronic record why there has been a delay.

2.3 Documentation

If the 2nd opinion review is conducted in person, the request, discussion, advice and plan of care should be documented in the handheld maternity records.

If 2nd opinion happens virtually, the discussion, advice, outcome and plan must be documented on the electronic record as a 'telephone contact'.

If a request is made for a 2nd opinion, the patient's hospital 'S' number should be sent to the shared mailbox: maternityqualityimprovementteam@uhl-tr.nhs.uk

This should be completed by any member of staff (ideally the named midwife caring for the patient at the time the request is made).

2. Monitoring Compliance

What will be measured to monitor compliance	How will compliance be monitored	Monitoring Lead	Frequency	Reporting arrangements
Number of requests for 2 nd opinion made	Via shared mailbox	Quality Improvement Midwife	Quarterly	Patient Experience Board

3. Education & Training

None required.

4. Supporting References

[Martha's Rule: what a new second opinion law will mean for nurses | Nursing Times](#)

5. Key Words

Escalation, 2nd opinion, Ask Me, Listen to Me, Call 4 Concern

The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs.

As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.

CONTACT AND REVIEW DETAILS			
SOP Lead (Name and Title) Natasha Archer – Deputy Clinical Director Lara Harrison – Quality Improvement Lead Midwife		Executive Lead Julie Hogg – Chief Nurse	
Details of Changes made during review: New SOP			
Date	Issue Number	Reviewed By	Description Of Changes (If Any)
March 2024	1	Maternity guidelines Maternity Governance Women’s Q&S Board	New document

Appendix 1: ASK ME poster

There are no silly comments or questions, please ASK ME

You can ask to speak to a: ward manager, matron, or consultant.

A Always here to listen
We are always more than happy to help; please talk to me.

S Support
We are here to support you, if something isn't the way you'd like it, you would like a second opinion, or need extra support; please tell me.

K Keep notes
Questions or queries, big or small, on paper, phone or on an app. Note them down; please ask me.

M Maternity staff
We are ALL here to answer your questions to help you make the choice that is right for you; please ask me.

E Explain
Explain what you would like from us and we can look at how we can achieve this together; please talk to me





University Hospitals of Leicester NHS Trust

