

<u>Freedom of Information Act 2000 - Request Reference Fol/22/273</u> Baby Tongue Tie

Information Requested:

The Association of Tongue Tie Practitioners under the umbrella of the All PartyParliamentary Group on Infant Feeding and Inequalities is carrying out a survey of NHS tongue-tie services for babies. This will create a moreaccurate national picture of services and help in achieving improved provision of breastfeeding support.

Attached is a short questionnaire. We wouldbe grateful if you could complete this soon as possible, within the 20 days of The Freedom Of Information guidance.

Your time in completing it is greatly appreciated. If you have any questions about the survey or would like to discuss further, please contact Elizabeth Carter at reviewtt@yahoo.com

1. What is your name and role within the trust?

(Write in)

Your name	After considering your request, the UHB believes that the data requested is classed as personal data as defined under the General Data Protection Regulation (GDPR) and Data Protection Act 2018 and its disclosure would be contrary to the data protection principles and constitute unfair and unlawful processing in regard to Articles 5, 6, and 9 of GDPR. We are therefore withholding this detail under Section 40(2) of the Freedom of Information Act 2000. This exemption is absolute and therefore there is no requirement to apply the public interest test.
Role within the Trust	Infant Feeding Specialist Midwife

2. What is the name of your NHS trust? (Write in)

Cardiff and Vale University Health Board (the UHB)

3. How many babies were born in your trust in 2021?

(Write in)

5190

4. Is there currently an NHS tongue-tie division in your trust? (*Please tick one*)





YesXProceed to question 7NoProceed to question 5

 If there is no tongue-tie division service in your Trust, do you have a referral pathway to a service (e.g. which may be private or located in another Trust)? (*Please tick one*)

Yes		Proceed to question 6
No	x	Proceed to question 7

 How many referrals were made to this service in 2021? (or a recent 12 month period)? (Write in)

7. How many babies were referred for possible division? *(Write in)*

We don't keep that data as seen in community clinic to determine cause of feeding problem if TTD is queried then we use the tools to determine significance of restriction. Therefore, we may see babies that are referred for TT assessment but on examination they do not have one or by observing feed Positioning and Attachment adjusted/supply issue problem can be resolved. We do not record that on a system just in the baby's notes.

ENT also do not monitor this data as TTD referrals are made via different methods. A pathway for GP/HV's in in the process of being developed so that all referrals are made electronically so this data could then be collected.

8. How many babies actually had an NHS tongue tie division in your Trust in 2021? *(Write in)*

Maternity – 61 ENT- unknown

Any comment to add?

Paediatric ENT also have a service for babies over 4 weeks and OOA unable to obtain the numbers. They are slotted into other clinics so data not collected. At present one ENT consultant performs TTD so they are fitted into work schedule.





9. Who is the service run by?

(Please tick as many as apply)

Midwives	x
Paediatricians	
Lactation consultants	
Ear Nose and Throat	x
Maxillofacial	
Health Visitors	
Other (please Specify)	

10. For funding purposes what is the tongue tie release coded as? (Write in)

The UHB does not have one

11. Do you accept out-of-area referrals?

(Please tick one)

Yes	
No	X Maternity don't but ENT do
Don't know	

12. What are the criteria for referral?

(Please tick as many as apply)

Obvious Tongue tie x	Weight loss /poor weight gain	x	
	Obvious Tongue tie	x	





Maternal pain and nipple damage	x
Slow messy bottle feeder	x
Feeding for long periods and often despite breastfeeding support'	x

13. Do you accept referrals for formula fed babies?

(Please tick one)

Yes	х
No	

14. Does your service divide tongue-ties described as posterior/sub-mucosal? (*Please tick one*)

Yes	
No	x
Don't know	

(Write in)

Maternity – 1 week, depending on staffing availability ENT – can vary depending on Consultant availability.

16. What is the maximum age for babies to be referred to the service?

(Write in)

Maternity - 4 weeks old





17. Does your service use any specific assessment tool?

(Please tick as many as apply)

Hazelbaker	х
Tabby	x
Martinelli	
Clinical Judgement	
Other	

18. Is specialist breastfeeding support available for mothers and babies immediately after a tongue-tie division?

(Please tick one)

Yes	X For Maternity patients	
No		
Don't know		

19. What follow up do the mothers and babies have after division?

(Please tick one

Clinic review	
Phone call or text	
None unless requested	
None of the above	Please see Q27





20. When does that review occur?

(Please tick one)

Next day	
A few days	
1 week	x
2 weeks	
3 weeks	
1 month	

21. What aftercare is recommended?

(Please tickas many as apply)

LEVEL 1 No intervention, feeding the baby as usual Other than observing for any bleeding or signs of infection no other action is taken				
LEVEL 2 Feeding the baby as usual and also encouraging parents to do 'tongue exercises' with the baby These exercises might include: Encouraging baby to suck a clean finger and withdraw the finger slowly in a 'tug of war' game; running a clean finger along baby's lower gums to encourage sideways tongue movement; parent(s)sticking their tongue out at the baby to encourage the baby to mimic the action. These are detailed on the current ATP 'Care After Tongue-Tie Division (Frenulotomy)' leaflet.				
LEVEL 3 Encouraging 'tongue lifting' The parent is encouraged to insert either one or two of their fore fingers under the baby's tongue, with the finger tips at each side of the wound and lifts the tongue upwards enough to stretch the wound site. Touching the wound site itself is not encouraged.				
LEVEL 4 Active wound management (AWM) or disruptive wound massage/management (DWM) This involves using a clean finger(s) in a 'sweeping', rubbing or circulate motion (massaging) across the opened wound site. Sometimes including stretching or opening the wound in addition				





22. In comparison to pre-COVID (March 2020) have the number of tongue tie referrals....?

(Please tick one)

increased	
stayed the same	х
decreased	

23. In comparison to pre-COVID (March 2020) has your waiting list?

increased	
stayed the same	x
decreased	

(Please tick one)

24. In comparison to pre-COVID (March 2020) have your criteria for referral changed? (*Please tick one*)

No	x
Yes	
If yes, please specify	

25. Has COVID had any other impact on your service?

(Please tick one)

No		
Yes	X	
If yes, please specify	we a drop	assess Tongue ties in our breastfeeding specialist clinics as ssess and support BF first before TTD. We used to have a in service now it is appointment only so availability can etimes be an issue.





26. If you would be happy to be contacted for further details about the tongue tie services in your area, please give your email address.

(Write in)

Foi.requests@wales.nhs.uk

27. If you have any further comments relating to this survey or tongue tie services generally, please use the box below

(Write in)

The two services in this trust are different, Maternity we give BF support prior to TTD and following via clinics or home visits if required depending on the problem the TTD was causing. The mothers email us a week later to inform us if it healed well, made a difference and are still BF. Some require further support others don't.

At present ENT do not follow up following the procedure.

28. Would you like a copy of the report when it is finished?

(Please tick one)

No	
Yes	х

Many thanks for completing the survey. Your time in completing it is much appreciated. The data will create a more accurate national picture of services and help in achieving improved provision of breastfeeding support.

