**FOI Ref: 6440**

**Category(ies): Clinical – Service Activity**

**Subject: Tongue Tie Services**

**Date Received: 15/06/2022**

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| **Your request:** | **Our response:** |
| **The Association of Tongue Tie Practitioners under the umbrella of the All-Party Parliamentary Group on Infant Feeding and Inequalities is carrying out a survey of NHS tongue-­tie services for babies.****This will create a more accurate national picture of services and help in achieving improved provision of breastfeeding support.****Attached is a short questionnaire.** **Your time in completing it is greatly appreciated.**  |
| 1. What is your name and role within the trust?
 | \*Susan DouglasClinical Lead for ENT\*The name of the relevant individual is detailed above. The provision of these contact details **does not** imply consent for unsolicited correspondence on your part. As per Section 122 of the Data Protection Act 2018, **permission is not given** to use these details for unsolicited contact. Right to prevent processing for purposes of direct marketing.*S122 (5) direct marketing” means the communication (by whatever means) of advertising or marketing material which is directed to a particular individual.* |
| 1. What is the name of your NHS trust?
 | The Rotherham NHS Foundation Trust |
| 1. How many babies were born in your trust in 2021?
 | Live births Jan – Dec 2021 = 2501 |
| 1. Is there currently an NHS tongue-tie division in your trust?

*(Please tick one)* |

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| Yes | x | *Proceed to question 7* |
| No |  | *Proceed to question 5* |

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| 1. 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)* |

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| Yes |  | *Proceed to question 6* |
| No |  | *Proceed to question 7* |

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| 1. How many referrals were made to this service in 2021?

(or a recent 12-month period)?  |  |
| 1. How many babies were referred for possible division?
 | TRFT cannot provide this data as diagnosis are added to records at GP Services and then referral from there so we are unable to define tongue tie referrals in our system as there is no specific clinic at TRFT. To provide this information we would need to look at each individual record, which would exceed the allowable time limits outlined in S12(1) of the Freedom of Information Act  *Section 12(1) of the Act allows a public authority to refuse to comply with a request for information if the authority estimates that the cost of compliance would exceed the ‘appropriate limit’, as defined by the Freedom of Information and Data Protection (Appropriate Limit and Fees) Regulations 2004 (the Regulations).**These state that this cost limit is £450 for public authorities which are not part of central government or the armed forces. The costs are calculated at £25 per hour per person regardless of the rate of pay, which means that the limit will be exceeded if the work involved would exceed 18 hours. The Trust estimates that the cost of complying with this request by undertaking a manual review of all the documents would significantly exceed the above limit.* |
| 1. How many babies actually had an NHS tongue tie division in your Trust in 2021?

Any comment to add? | 7 procedures coded as tongue-tie121 Diagnosed with Ankyloglossia (tongue tie) - these include the 7 above) |
| 1. Who is the service run by?

*(Please choose as many as apply)** Midwives NO
* Paediatricians NO
* Lactation consultants NO
* Ear Nose and Throat YES
* Maxillofacial NO
* Health Visitors NO
* Other (please Specify)
 | Ear Nose and Throat  |
| 1. For funding purposes what is the tongue tie release coded as?
 | OPCS F26.3 (Procedure Code)ICD Code Q38.1 (Diagnostic Code) |
| 1. Do you accept out-of-area referrals?

*(Please tick one)** Yes
* No
* Don’t know
 | Yes |
| 1. What are the criteria for referral?

*(Please choose as many as apply)** Weight loss /poor weight gain
* Obvious Tongue tie
* Maternal pain and nipple damage
* Slow messy bottle feeder
* Feeding for long periods and often despite breastfeeding support’
 | * 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
 |
| 1. Do you accept referrals for formula fed babies?
* Yes
* No
 | Yes |
| 1. Does your service divide tongue-­ties described as posterior/sub-­mucosal?
* Yes
* No
* Don’t know
 | Yes |
| 1. What is the usual waiting time between referral and appointment with the tongue-­tie service?
 | Seen within weeks |
| 1. What is the maximum age for babies to be referred to the service?
 |  No maximum age |
| 1. Does your service use any specific assessment tool?

*(Please choose as many as apply)** Hazelbaker
* Tabby
* Martinelli
* Clinical Judgement
* Other
 | Clinical Judgement |
| 1. Is specialist breastfeeding support available for mothers and babies immediately after a tongue-­tie division?
* Yes
* No
* Don’t know
 | Community Breastfeeding support workers can be accessed for breastfeeding support via the usual channels as part of the offer of the 0-19 service. |
| 1. What follow up do the mothers and babies have after division?

*(Please choose one)** Clinic review
* Phone call or text
* None unless requested
 | None unless requested |
| 1. When does that review occur?

*(Please choose one)** Next day
* A few days
* 1 week
* 2 weeks
* 3 weeks
* 1 month
 | Not Applicable  |
| 1. What aftercare is recommended?

*(Please tick as many as apply)*

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| --- | --- |
| **LEVEL 1 No intervention, feeding the baby as usual** Other than observing for any bleeding or signs of infection no other action is taken | X |
| **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 |  |

 |
| 1. In comparison to pre-COVID (March 2020) have the number of tongue tie referrals….?

*(Please tick one)** …increased
* … stayed the same
* … decreased
 | Decreased |
| 1. In comparison to pre-COVID (March 2020) has your waiting list….?

*(Please tick one)** …increased
* … stayed the same
* … decreased
 | Stayed the Same |
| 1. In comparison to pre-COVID (March 2020) have your criteria for referral changed?
* No
* Yes. If yes, please specify
 | No |
| 1. Has COVID had any other impact on your service?
* No
* Yes. If yes, please specify
 | No |
| 26. If you would be happy to be contacted for further details about the tongue tieservices in your area, please give your email address. | Not Applicable |
| 27. If you have any further comments relating to this survey or tongue tie servicesgenerally | None |
| 1. Would you like a copy of the report when it is finished?
* No
* Yes

If you would like a copy, please provide an email address to receive it. | Yessusan.douglas6@nhs.net |