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

| Your name             |                                    |
|-----------------------|------------------------------------|
| Role within the Trust | Deputy Matron Maternity Inpatients |

#### 2. What is the name of your NHS trust?

| The Dudley Group NHS Foundation Trust |
|---------------------------------------|
|---------------------------------------|

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

| 4156 |  |
|------|--|
|------|--|

# 4. Is there currently an NHS tongue-tie division in your trust?

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

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)?

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

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

#### 7. How many babies were referred for possible division?

1074 triage calls made

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

996 babies seen in clinic, 507 frenulotomies performed.

Any comment to add?

TT service has been closed to OOA babies since March 2020. Reopened for in area babies June 2020 Reopened for LMNS May 2022 Plan to restore service fully from Sept 2022

#### 9. Who is the service run by?

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

## 10. For funding purposes what is the tongue tie release coded as?

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

| Yes        | See above |
|------------|-----------|
| No         |           |
| Don't know |           |

## 12. What are the criteria for referral?

| 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?

| Yes | x |
|-----|---|
| No  |   |

# 14. Does your service divide tongue--ties described as posterior/sub--mucosal?

| Yes        | x |
|------------|---|
| No         |   |
| Don't know |   |

*15.* What is the usual waiting time between referral and appointment with the tongue--tie service?

Currently less than 1 week Pre-covid 2-4 weeks

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

10 weeks

### 17. Does your service use any specific assessment tool?

| x | Hazelbaker         |
|---|--------------------|
|   | Tabby              |
|   | Martinelli         |
|   | Clinical Judgement |
|   | Other              |

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

| Yes        | x |
|------------|---|
| No         |   |
| Don't know |   |

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

| Clinic review         |   |
|-----------------------|---|
| Phone call or text    | x |
| None unless requested |   |

### 20. When does that review occur?

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

21. What aftercare is recommended? (Please tick as many as apply)

| LEVEL 1 No intervention, feeding the baby as usual<br>Other than observing for any bleeding or signs of infection no other action is taken  | х |
|---|---|
| LEVEL 2 Feeding the baby as usual and also encouraging parents to do 'tongue<br>exercises' with the baby<br>These exercises might include: Encouraging baby to suck a clean finger and<br>withdraw the finger slowly in a 'tug of war' game; running a clean finger along<br>baby's lower gums to encourage sideways tongue movement; parent(s)sticking<br>their tongue out at the baby to encourage the baby to mimic the action. These are<br>detailed on the current ATP 'Care After Tongue-Tie Division (Frenulotomy)' leaflet. |   |

| <b>LEVEL 3 Encouraging 'tongue lifting'</b><br>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<br>massage/management (DWM)<br>This involves using a clean finger(s) in a 'sweeping', rubbing or circulate motion<br>(massaging) across the opened wound site. Sometimes including stretching or<br>opening the wound in addition                        |  |

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

| increased       |   |
|-----------------|---|
| stayed the same |   |
| decreased       | x because full service has been suspended |

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

| increased       |   |
|-----------------|---|
| stayed the same |   |
| decreased       | x because full service has been suspended |

## 24. In comparison to pre-COVID (March 2020) have your criteria for referral changed?

| No                     |  |  |
|------------------------|--|--|
| Yes                    | x  |  |
| If yes, please specify | We are currently asking for referral from Infant feeding teams, not<br>currently accepting self-referrals. To ensure feeding support has been<br>provided. |  |

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

| No |
|----|
|----|

| Yes                    | х            |  |
|------------------------|--------------|--|
| If yes, please specify | Reop<br>Reop | ervice has been closed to OOA babies since March 2020.<br>Dened for in area babies June 2020<br>Dened for LMNS May 2022<br>to restore service fully from Sept 2022 |

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.



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

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

| No  |          |
|-----|----------|
| Yes | X please |

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.