

## PCF Freedom of Information requests to local authorities – summary of results

The PCF conducted a Freedom of Information (FOI) audit in late 2017 of 205 local authorities with responsibility for public health services in England, Scotland and Wales. 191 out of 205 local authorities responded, or 93.2%. The percentages given in this briefing are based on the total number of local authorities approached in the audit, rather than just those who responded.

### ▪ ***Does your local authority provide a dedicated continence clinic?***

Only 31 local authorities (15.12%) said they provide a dedicated continence clinic, with 27 of these in England. 111 (54.14%) said they did not provide a clinic, while 40 (19.51%) did not hold the information. Nine local authorities redirected this question to another organisation, such as an NHS Trust or Health Board.

No local authorities in Wales provided a clinic, with one response suggesting that all responsibility for continence lies with Health Boards. Four local authorities in Scotland did provide a clinic.

### ▪ ***Which of the five continence services are covered by the dedicated continence clinic?***

Local authorities were also asked which of the five continence services were provided by their clinic, out of bedwetting, daytime wetting, toilet training, constipation and product supply. Only nine local authorities provided all five of these continence services, namely:

- Bath & North East Somerset Council
- Bury Metropolitan Borough Council
- Dorset County Council
- London Borough of Hammersmith & Fulham
- London Borough of Islington
- Northumberland County Council
- Poole Borough Council
- Thurrock Council
- South Ayrshire Council

### ▪ ***How many hours a week does the clinic run for?***

Of the local authorities which provide some sort of clinic, 24 had information on the number of hours which it runs each week – this ranged from 1 hour to 39.5 hours with an average of 9.94 hours per week.

Of those which provided clinics, 12 said the amount of time dedicated to service provision was determined by the number of children and young people visiting each week.

### ▪ ***Is continence a listed responsibility for school nurses, health visitors or other healthcare professionals?***

For all local authorities responding, 87 said continence was a listed responsibility for school nurses (42.43%), while 65 said it was a listed responsibility for health visitors (31.7%). Other healthcare professionals which were cited as having continence care as a listed responsibility included: paediatric continence advisers, children's community nurses, health & development practitioners, GPs, community paediatricians, nursery nurses and special school nurses.

- **How many children and young people with continence problems do each of these professionals have responsibility for?**

35 LAs were able to provide some sort of information about the number of CYP with continence problems that professionals have responsibility for, but only 17 were able to give information on the number of children and young people on the waiting list. These figures ranged from 35 children to 457 children.

- **How many children and young people are on the waiting list, and how long has the person currently at the top of the list had to wait?**

Ten local authorities were able to specify the number of children on their waiting list, while four said the information was not held or not available. Seven local authorities also said they did not operate a waiting list. For the question on how long the person currently at the top of the waiting list has had to wait, responses ranged from ten days to up to 12 weeks.

- **Was there a decision taken to remove continence from these professionals' responsibilities, and if so when?**

Only nine local authorities provided some information on when these decisions were taken. The most common answer to this was that the decision was taken in 2016 – four local authorities specified this.

- **Do you have plans to commission new paediatric continence services or review existing services?**

99 local authorities (48.29%) said that they do not have plans to commission new paediatric continence services, while only five said yes. 43 local authorities (20.97%) did not hold any information on the matter. 73 local authorities (35.6%) also did not have any plans to review their existing services, compared with 39 (19.02%) who did have plans.

- **Are you aware of the Paediatric Continence Commissioning Guide, and do the services in your local authority use it?**

Overall, 87 local authorities (42.43%) said they were aware of the Paediatric Continence Commissioning Guide; of these, 46 reported using it in their local authority (22.43%). 60 of the 111 local authorities which did not provide a paediatric continence clinic reported being aware of the Guide.

#### **What does this information reveal?**

Alongside the PCF's previous work on analysing paediatric continence service provision from CCGs and Health Boards, these results highlight significant disparities in the availability of these services across the UK. This is in spite of the substantial savings that can be accrued from implementing integrated paediatric continence services, as shown in the PCF's comparative case study of children's continence care.<sup>1</sup> It also raises concerns that if an area does not have paediatric continence services commissioned by either the CCG/Health Board or local authority, many of the one in ten children in the UK with bladder and bowel problems could be falling through the gaps and which could risk prolonged periods of ill health resulting from their issues.

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<sup>1</sup> 'Children's continence care: sub-optimal pathway versus pathway', Paediatric Continence Forum (2017), available at <http://www.paediatriccontinenceforum.org/wp-content/uploads/2017/07/PCF-Tobys-sub-optimal-versus-optimal-pathway-14th-March-2017.pdf>.