

**National Assembly for Wales**  
Health and Social Care Committee

Public health implications of inadequate  
public toilet facilities – report of evidence

March 2012



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## Health and Social Care Committee

The Committee was established on 22 June 2011 with a remit to examine legislation and hold the Welsh Government to account by scrutinising expenditure, administration and policy matters encompassing: the physical, mental and public health of the people of Wales, including the social care system.

### Current Committee membership



**Mark Drakeford (Chair)**  
Welsh Labour  
Cardiff West



**Mick Antoniw**  
Welsh Labour  
Pontypridd



**Rebecca Evans**  
Welsh Labour  
Mid and West Wales



**Vaughan Gething**  
Welsh Labour  
Cardiff South and Penarth



**William Graham**  
Welsh Conservatives  
South Wales East



**Elin Jones**  
Plaid Cymru  
Ceredigion



**Darren Millar**  
Welsh Conservatives  
Clwyd West



**Lynne Neagle**  
Welsh Labour  
Torfaen



**Lindsay Whittle**  
Plaid Cymru  
South Wales East



**Kirsty Williams**  
Welsh Liberal Democrats  
Brecon and Radnorshire

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## Introduction

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1. On 19 January 2012 the Health and Social Care Committee considered the public health implications of inadequate public toilet facilities in Wales. The Committee agreed to publish a summary of the evidence received during the course of its consideration of the petition.
2. The evidence gathered by the Health and Social Care Committee is summarised in this document. Based on the evidence received, the Committee is firmly of the view that the **public health case** for better public toilet provision is strong. Furthermore, the Committee believes that the evidence collected underscores the case for further investigation of **local authority provision** of public toilet facilities. A series of practical suggestions were made by witnesses, through which local provision could be better planned and provided, with improved outcomes for public health. Such work could be undertaken by the Communities, Equalities and Local Government Committee and the relevant Minister, but it would be for them to decide whether or not to do so.

### **THE COMMITTEE'S KEY CONCLUSIONS**

In reporting the evidence outlined in this report to the Assembly, the Committee has drawn the following key conclusions:

#### **Key conclusion 1**

The evidence received by the Committee endorses the view that there is a public health case for better public toilet provision.

#### **Key conclusion 2**

A set of potential practical solutions exist – as outlined in this report – which could, if implemented, lead to improved local provision of public toilets. It is our view that these potential solutions merit further investigation by those more expert in local government matters.

## Background

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3. Councillor Louise Hughes submitted the following petition to the National Assembly for Wales' Petitions Committee in June 2010:

“We, the undersigned, call upon the National Assembly for Wales to investigate the health and social well-being implications resulting from public toilets closures and to urge the Welsh Government to issue guidance to local authorities to ensure adequate public toilet provision.”<sup>1</sup>

4. On 21 June 2011, the Petitions Committee agreed to refer this petition to the Health and Social Care Committee (“the Committee”). The Petitions Committee requested that the Committee consider undertaking an inquiry into the health aspects of the petition. The Petitions Committee also wrote to the Communities, Equalities and Local Government Committee to ask if it would consider the local government and equality dimensions of the petition.

5. In October 2011, the Committee agreed to undertake an evidence session to consider the health and well-being implications of public toilet closures. The Committee agreed that, given its remit, the focus of its work would be the public health implications of inadequate public toilet provision, leaving matters relating to local authority guidance to the Communities, Equalities and Local Government Committee.

6. The Committee consulted with relevant stakeholders during November and December 2011. A list of consultees is attached at Annex A. All written evidence submitted to the Committee can be viewed on the Committee's website.<sup>2</sup> The Health and Social Care Committee held a one-off oral evidence session on 19 January 2012. The Committee heard evidence from Louise Hughes, the lead petitioner, and representatives from Age Cymru, the Welsh Senate for Older People, Aneurin Bevan Health Board, the IBS Network, the British Toilet Association and the Welsh Government. The Committee would like to thank all those who contributed to this work.

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<sup>1</sup> National Assembly for Wales, [P-03-292 - Public toilet provision](#), June 2010 [accessed 15 February 2012]

<sup>2</sup> National Assembly for Wales Health and Social Care Committee [Public health implications of inadequate public toilet facilities](#) [accessed 15 February 2012]



## Adequacy of existing public toilet facilities in Wales

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7. The adequacy of public toilet provision relates not only to the number of public toilets provided, but also their cleanliness and state of repair (including the availability of facilities for hand washing and sanitary disposal), their opening hours, and their suitability for people with differing needs. These issues are considered below.

### **The number of public toilets in Wales and their state of repair**

8. Help the Aged in Wales (as Age Cymru was formerly known) 2009 report *Nowhere to Go in Wales*<sup>3</sup> summarises its survey of older people's views on public toilet provision in their local area. A high number of respondents to the survey felt that public toilets were difficult to find or not open when needed, and that facilities did not meet their needs and were unclean and unsafe. The Committee was told by witnesses of a general decline in the number of public toilet facilities, a claim supported by Mike Bone from the British Toilet Association who said that the number of public toilets had reduced by about 40% in recent years.<sup>4</sup>

9. Chris Brereton, the Deputy Chief Environmental Health Adviser to the Welsh Government, told the Committee that he was unable to find figures for the current number of public toilet facilities in Wales,<sup>5</sup> and therefore could not compare the overall picture with provision from previous years. Figures obtained by the National Assembly for Wales's Research Service in August 2011 show an approximate reduction in provision of 10% since 2007, although information was not provided by 3 local authorities (see Figure 1).

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<sup>3</sup> Help the Aged in Wales, [Nowhere to Go in Wales](#), 2009 [accessed 15 February 2012]

<sup>4</sup> Health and Social Care Committee 19 January 2012, RoP para 81

<sup>5</sup> Health and Social Care Committee 19 January 2012, RoP para 156

### Figure 1: Public conveniences in Wales

Until 2000 the Audit Commission used to survey local authority provision of public toilets in England and Wales on an annual basis. Since then the information has not been centrally collected, though, as part of its Public Convenience Strategy, Conwy County Borough Council carried out a survey of all Welsh local authorities in early 2007.

The following table lists the number of public conveniences in Wales by local authority area from the last two Audit Commission surveys, the Conwy survey, and information gathered from local authority websites by the Research Service in 2010 and 2011 (as of 25 August 2011). Not all local authorities provide information on public toilet provision on their websites.

Where available for 2011, links have been provided in the table to sections of the websites which provide details of specific locations.

<b>Local Authority</b>	<b>1998/9</b>	<b>1999/00</b>	<b>2007</b>	<b>2010</b>	<b>2011</b>
<a href="#">Blaenau Gwent</a>	21	21	11	11	13
<a href="#">Bridgend</a>	21	20	20	15	13
<a href="#">Caerphilly</a>	18	18	19	9	9
<a href="#">Cardiff</a>	41	41	13	8	7
<a href="#">Carmarthenshire</a>	81	81	51	42	40
<a href="#">Ceredigion</a>	55	54	47	49	49
<a href="#">Conwy</a>	54	54	56	56	46
<a href="#">Denbighshire</a>	23	4	20	18	18
Flintshire	12	13	12	-	-
<a href="#">Gwynedd</a>	74	74	102	80	78
<a href="#">Isle of Anglesey</a>	35	36	34	34	34
Merthyr Tydfil	15	11	11	-	-
Monmouthshire	26	25	17	27	-
<a href="#">Neath Port Talbot</a>	4	4	15	-	30
<a href="#">Newport</a>	15	12	11	11	7
<a href="#">Pembrokeshire</a>	109	93	99	-	96
<a href="#">Powys</a>	92	80	55	50	50
<a href="#">Rhondda Cynon Taff</a>	37	37	21	21	21
<a href="#">Swansea</a>	29	29	19	19	19
<a href="#">Torfaen</a>	2	13	2	2	2
<a href="#">Vale of Glamorgan</a>	25	24	21	20	22
<a href="#">Wrexham</a>	17	10	11	11	11
<b>Total</b>	<b>806</b>	<b>754</b>	<b>667</b>		

Source: Audit Commission, Conwy County Borough Council, Local Authority websites [accessed August 2011]

10. In addition to highlighting a decline in the number of public toilet facilities in Wales, witnesses emphasised the ageing infrastructure of facilities as a barrier to adequate provision. Many facilities were first opened several years or decades ago, and development and regeneration since then may have led to those facilities then being located in inconvenient places.<sup>6</sup> The Committee also heard anecdotal evidence that local authorities used the expense required to adapt ageing facilities to make them compliant with disability discrimination legislation as an excuse for closing the facilities altogether.<sup>7</sup> Witnesses expressed concern at this and emphasised that whilst such facilities did not meet the needs of everyone, they provide a service which should not be withdrawn as an unintended consequence of legislation.<sup>8</sup>

11. The Committee also heard how poor facilities can deter people from using them and could have a wider environmental health impact. Dr Sara Hayes told the Committee that the availability of adequate hand-washing facilities, including warm running water and soap to wash your hands and blowers or paper towels to dry them, was fundamental to minimising transmission of infection, and referred to outbreaks of the noro-virus linked to one person not being able to wash their hands properly.<sup>9</sup> The Committee recognises the importance of Dr Hayes' message that:

“Hand-washing is known to be the key to minimising transmission of infection – it is a fundamental point that everyone must be able to wash their hands...It is almost a human right that you must be able to wash your hands after using the toilet. It is as straightforward as that. It is a core public health benefit.”<sup>10</sup>

### **Opening hours**

12. Graeme Francis, Head of Policy and Public Affairs at Age Cymru told the Committee how the opening hours of public toilets could also affect the accessibility of facilities. Witnesses recognised that vandalism was often the cause of public toilets not being open at night, but that providing the service between 09.00 – 17.00 on week

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<sup>6</sup> Health and Social Care Committee 19 January 2012, RoP para 102

<sup>7</sup> Health and Social Care Committee 19 January 2012, RoP para 25

<sup>8</sup> Health and Social Care Committee 19 January 2012, RoP para 172

<sup>9</sup> Health and Social Care Committee 19 January 2012, RoP paras 175 & 182

<sup>10</sup> Health and Social Care Committee 19 January 2012, RoP para 182

days prevented many people, including weekend visitors, from using the facilities.<sup>11</sup> Louise Hughes noted that we “do not live in a nine to five society” and that public toilets need to be accessible 24 hours a day.<sup>12</sup>

### **Equality of provision**

13. The Committee heard how inadequate public toilet facilities can have a greater impact on some groups of people, especially those with a disability or parents with young children.<sup>13</sup> Whilst modern facilities provide improved access for disabled people, witnesses felt that further improvement was needed to meet the needs of everybody.<sup>14</sup> Witnesses told the Committee how disabled people were often accompanied by a carer, but that most toilet cubicles were too narrow to accommodate more than one person.<sup>15</sup> Further problems could arise should the carer be from the opposite sex.

14. Louise Hughes also told the Committee that gender inequality was also a problem in relation to toilet provision at times, with less space needed for urinals than for cubicles for women, leading to fewer facilities for women.<sup>16</sup>

15. The written evidence from the British Toilet Association (BTA) evidence stated that postal workers, carers, bus crews, delivery personnel, taxi drivers, lorry drivers, police officers and other mobile workers all need access to public toilets as they carry out their duties, and the closure of public toilets impinges on their ability to carry out their work effectively.<sup>17</sup>

16. The BTA also highlighted that the needs of the homeless are seldom mentioned in connection with public toilets, but their toileting requirements do need to be addressed if street fouling is to be reduced.<sup>18</sup>

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<sup>11</sup> Health and Social Care Committee 19 January 2012, RoP para 58

<sup>12</sup> Health and Social Care Committee 19 January 2012, RoP para 51

<sup>13</sup> Health and Social Care Committee 19 January 2012, RoP para 12

<sup>14</sup> Health and Social Care Committee 19 January 2012, RoP para 20 & 27

<sup>15</sup> Health and Social Care Committee 19 January 2012, RoP para 20

<sup>16</sup> Health and Social Care Committee 19 January 2012, RoP para 23

<sup>17</sup> Health and Social Care Committee 19 January 2012, HSC(4)-02-12 paper 4

<sup>18</sup> Health and Social Care Committee 19 January 2012, RoP para 138

## Alternative provision

17. Under the Public Facilities Grant Scheme, operating since April 2009, the Welsh Government has provided funding for local authorities to grant up to £500 to businesses which allow free public access to their toilet facilities.

18. Age Cymru's written evidence states that this could have an important part to play, but notes that a significant number of local authorities are not participating in the scheme.<sup>19</sup> This view was further emphasised in oral evidence, with witnesses questioning whether the scheme was fit for purpose. Graeme Francis from Age Cymru told the Committee that there was a large variation across local authorities as to how the scheme was used, with no businesses having signed up to the scheme in some areas.<sup>20</sup>

19. Chris Brereton referred to the variation between local authorities in raising awareness of the scheme. Mr Brereton noted that, whilst some authorities list the businesses signed up to the scheme in their area on their website, others fail to provide details of the locations of the facilities available.<sup>21</sup> Karen Logan told the Committee that poor advertising of the scheme means that businesses are not aware that they are able to sign up for it and in turn, the public are not aware of which businesses are involved.<sup>22</sup>

20. John Vincent highlighted the reluctance of some older people to use facilities on commercial premises without purchasing anything. This, he argued, could lead them to buying a drink in a pub, for example, which in turn could lead to them needing to use the toilet again.<sup>23</sup>

21. Generally, witnesses felt that the introduction of the Public Facilities Grant Scheme was a positive step. The Committee was told that, whilst the Scheme should not be seen as a complete solution to the problem, if used properly, it could form an important part of public toilet provision.

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<sup>19</sup> Health and Social Care Committee 19 January 2012, HSC(4)-02-12 paper 2

<sup>20</sup> Health and Social Care Committee 19 January 2012, RoP para 46

<sup>21</sup> Health and Social Care Committee 19 January 2012, RoP para 172

<sup>22</sup> Health and Social Care Committee 19 January 2012, RoP para 144

<sup>23</sup> Health and Social Care Committee 19 January 2012, RoP para 48

22. Mike Bone suggested to the Committee that a requirement to make toilet facilities within public buildings open for public use, such as libraries and community centres would provide a valuable resource and allow better use of existing facilities.<sup>24</sup>

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<sup>24</sup> Health and Social Care Committee 19 January 2012, RoP para 105

## Impact on health and social wellbeing of individuals

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23. Witnesses told the Committee that all members of the community would need to use a public toilet at some stage, but that the need was more prevalent amongst certain groups such as the elderly, disabled, children and those suffering from bladder or bowel conditions. Karen Logan, a clinical nurse specialist in incontinence at Aneurin Bevan Health Board, highlighted the high proportion of people that are effected by urinary or bowel conditions. Her research demonstrated that within the area serviced by her own health board, 22,000 people out of a population of 600,000 would suffer from bladder or bowel incontinence.<sup>25</sup>

24. Karen Logan also spoke about the wider knock-on effect of inadequate public toilet facilities on the NHS. She said that by not being able to go out in their community, people could become inactive. This, in turn, can impact on health and social care as, in the future, inactive individuals likely to become more immobile, isolated, ill and depressed leading to a possible need further treatment.<sup>26</sup>

25. Gillian Kemp from the IBS Network told the Committee:

“Irritable bowel syndrome effects all ages, not just elderly people, and it is about the sense of urgency. If you need a toilet, you just have to go, and if there are no toilets, you just do not go out. It is as simple as that. That brings in the health implications of isolation and mental health problems.”<sup>27</sup>

### Impact on physical health

26. *Nowhere to Go in Wales*<sup>28</sup> highlights that older people are more likely to suffer from incontinence or have continence issues. This includes the need to use the toilet more frequently and with greater urgency due to muscle weakness, leading to an increased dependency on public toilets as people age.

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<sup>25</sup> Health and Social Care Committee 19 January 2012, RoP para 125

<sup>26</sup> Health and Social Care Committee 19 January 2012, RoP para 93

<sup>27</sup> Health and Social Care Committee 19 January 2012, RoP para 85

<sup>28</sup> Help the Aged in Wales, [Nowhere to Go in Wales](#), 2009 [accessed 15 February 2012]

27. The Committee was also told that age-related difficulties, including restricted mobility, can also make getting to a toilet more challenging. Coupled with continence factors, witnesses noted that this can add to the stress and worry of not being able to find a toilet. Karen Logan told the Committee:

“Holding on to a full bladder or bowel increases the heart rate and the blood pressure, and for very old, ill or vulnerable people this could cause a stroke or a heart attack or have other health implications.”<sup>29</sup>

28. In their written evidence, both Age Cymru and the Welsh Senate of Older People describe some actions that people take to avoid needing to use the toilet when away from home. This includes skipping essential medication (water tablets for example) that might exacerbate the need to urinate frequently, and limiting fluid intake, which may give rise to dehydration and associated health problems.<sup>30</sup>

29. Graeme Francis of Age Cymru re-iterated this in oral evidence, stating that he was aware of instances when, if a person had no choice but to leave their home, they had taken themselves off their medication for a day or so “just to cope.”<sup>31</sup> Louise Hughes, the lead petitioner, added that she had met people who had stopped or reduced their fluid intake in an effort not to need the toilet which, in some cases, had led to hospitalisation for treatment for dehydration or cystitis.<sup>32</sup>

### **Impact on mental health**

30. In addition to the physical impact of taking measures to avoid needing to use the toilet, the Committee also heard evidence of the detrimental effects this can have on people’s mental health. In particular, the Committee was told that the isolation created by not leaving home - in order to avoid the need to find a toilet - could have a significant impact on individuals’ mental health. John Vincent of the Welsh Senate for Older People told the Committee that many people choose not to leave their homes if they do not know where they would be able to access a toilet, which can lead to social isolation.<sup>33</sup> Graeme

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<sup>29</sup> Health and Social Care Committee 19 January 2012, RoP para 91

<sup>30</sup> Health and Social Care Committee 19 January 2012, HSC(4)-02-12 paper 2

<sup>31</sup> Health and Social Care Committee 19 January 2012, RoP para 17

<sup>32</sup> Health and Social Care Committee 19 January 2012, RoP para 18

<sup>33</sup> Health and Social Care Committee 19 January 2012, RoP para 15



Francis added that the social isolation of older people – often caused by a fear of being unable to access adequate toilet facilities – was a particular area of concern for Age Cymru.<sup>34</sup>

31. Age Cymru’s written evidence stated that people who experienced incontinence, or needed to use the toilet with greater frequency or urgency, would be more likely to suffer both anxiety and depression. Karen Logan told the Committee:

“We know that incontinence does not kill people, but it certainly kills their quality of life. They are already challenged by that and the fact that, when they go out, they do not have access to a public toilet when they need to go.”<sup>35</sup>

32. Ms Logan went on to explain that experiencing an embarrassing episode of incontinence in public could be enough to “tip them over”, citing an example of a patient of hers who had attempted to take her own life due to her incontinence.<sup>36</sup>

### **Impact on environmental health**

33. The Committee heard how inadequate public toilet facilities could also have environmental health implications, especially when a lack of provision leads to street fouling. Dr Sara Hayes spoke about the risk of infection from street fouling, especially in areas where children might play, and also of the impact regular fouling could have on the wellbeing of people living in that area.<sup>37</sup> Chris Brereton told the Committee that street urination was a particular problem at night, when people leave licenced premises having consumed quite a lot of alcohol.<sup>38</sup>

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<sup>34</sup> Health and Social Care Committee 19 January 2012, RoP para 17

<sup>35</sup> Health and Social Care Committee 19 January 2012, RoP para 87

<sup>36</sup> Health and Social Care Committee 19 January 2012, RoP para 87

<sup>37</sup> Health and Social Care Committee 19 January 2012, RoP para 167

<sup>38</sup> Health and Social Care Committee 19 January 2012, RoP para 165

## **Possible solutions**

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34. During the oral evidence session, Members of the Committee asked witnesses for their views on how the provision of public toilet facilities in Wales could be improved. Suggestions made by witnesses are outlined below.

### **Making the most of existing resources**

35. Witnesses generally took a positive view of the Public Facilities Grant Scheme, but believed that more could be done to improve take up by some local authorities, and to advertise the participating locations in others. There is certainly scope for the Scheme to make a greater contribution in the future. Mike Bone suggested to the Committee that a requirement to make toilet facilities within public buildings open for public use, such as libraries and community centres would provide a valuable resource and allow better use of existing facilities.<sup>39</sup>

### **Charging**

36. In her evidence, Louise Hughes cited the refurbished public toilet block in Porthmadog as an example of good practice. Ms Hughes told the Committee that the new facility requires users to insert 20p into a slot on the door to allow it to open. The toilet is, therefore, accessible 24 hours a day.<sup>40</sup>

37. Other witnesses agreed that a nominal charge of 20p would be an acceptable solution to ensure access to a public toilet at all times, addressing issues relating to opening times highlighted earlier in this summary (see paragraph 11). Mike Bone of the British Toilet Association added that such a charge would cover the cost of provision without impacting on the finances of local authorities.<sup>41</sup>

### **Planning**

38. The possibility of using planning powers to insist on the provision of publically accessible toilet facilities in new developments was raised by several witnesses. Witnesses suggested that local authority planners work with developers to ensure that toilet facilities are

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<sup>39</sup> Health and Social Care Committee 19 January 2012, RoP para 105

<sup>40</sup> Health and Social Care Committee 19 January 2012, RoP para 51

<sup>41</sup> Health and Social Care Committee 19 January 2012, RoP para 147

available for public use when considering planning applications for new buildings and regeneration projects, and when leasing their own estate.<sup>42</sup>

### **Strategy for Wales**

39. Witnesses told the Committee that adopting a strategy for Wales was the best way to ensure that public toilets be accessible to all. Members were told that such a strategy should identify the number and locations of public toilet facilities needed to service local populations. Witnesses agreed that guidance was required on the number of toilets needed, depending on population numbers and the nature of the area being served. They also argued that local authorities were best placed to assess where facilities in their areas should be located.<sup>43</sup>

40. Witnesses suggested to the Committee that the starting point in considering the location of public toilets would be to link facilities to essential services, transport intersections and shopping and entertainment centres.<sup>44</sup> Mike Bone of the British Toilet Association told the Committee that he believed a strategy should include a requirement on local authorities to provide public toilets, including public buildings making their facilities available and commercial companies stating in planning applications that public toilets be provided.<sup>45</sup>

41. The Committee welcomed Dr Sara Hayes', Acting Deputy Chief Medical Officer (Public Health), opinion that:

“There is a clear case for, at least, exploring the potential for national level action, but also stimulating local level action.”<sup>46</sup>

### **Community involvement**

42. The Committee received written evidence from Llanfrynach Community Council outlining their experience of taking control of the running and upkeep of the public toilet in their village following the

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<sup>42</sup> Health and Social Care Committee 19 January 2012, RoP para 73 & 186

<sup>43</sup> Health and Social Care Committee 19 January 2012, RoP para 160

<sup>44</sup> Health and Social Care Committee 19 January 2012, RoP para 56 & 102

<sup>45</sup> Health and Social Care Committee 19 January 2012, RoP para 105

<sup>46</sup> Health and Social Care Committee 19 January 2012, RoP para 188

county council's decision to close the facility.<sup>47</sup> According to the Community Council's evidence, the consequences of closing the public toilets had such a detrimental effect on the village that a group of local people volunteered to work together to keep the facility open. The written evidence explains how donations cover the cost of cleaning materials and how volunteers work on a rota basis to clean the toilet, thereby removing the cost of paying for a cleaner. According to the written submission received, the experience of the Llanfrynach volunteers has been very successful and demonstrates how local communities can take action to keep their facilities open.

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<sup>47</sup> Health and Social Care Committee, [Consultation response PT 5 - Llanfrynach Community Council](#), December 2011 [accessed 15 February 2012]

## Conclusion

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43. The evidence gathered by the Health and Social Care Committee is summarised in this document. In undertaking this work, the Committee set out to test the proposition that inadequate public toilet provision has a detrimental impact on public health in Wales. Based on the evidence received, the Committee is firmly of the view that the proposition is correct: the **public health case** for better public toilet provision is strong. The Committee draws this conclusion based on the views it has heard – both clinical and non-clinical – in favour of the argument that a lack of adequate toilet provision can impact on an individual’s physical and mental health, as well as the wider environmental health of the Welsh population, bringing implications for health and social services.

44. In considering this matter, the Committee received evidence in areas which were allied to, but not directly about, the public health implications of inadequate public toilet provision. In particular, the Committee heard views about the role of local authorities in providing facilities, the possible solutions available to improve the network in Wales, and the costs involved in maintaining these facilities across Wales. Although the Committee has expressed a clear view on the importance of the public toilets network to ensuring the maintenance and improvement of public health in Wales, it is the Committee’s view that further work is necessary to provide a robust analysis of how the public toilet network should be structured to deliver its intended aims, one of which is adequate public health outcomes.

45. It is the Committee’s view that, given the central role of local government in the provision of public toilet facilities, further investigation of the development of this network is a matter better considered by those more expert in local government matters. The Committee believes that the evidence not only supports the **public health case** for better public toilet provision to be strong, but also underscores the case for further investigation of **local authority provision** of public toilet facilities. Such investigation could be undertaken by the Communities, Equalities and Local Government Committee and the relevant Minister, but it would be for them to decide whether or not to do so.

## **Annex A – Consultation list**

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- Older People’s Commissioner for Wales
- Age Cymru
- Welsh Senate for Older People
- Local Health Boards
- Public Health Wales
- Faculty of Public Health
- Disability Wales
- Mencap Cymru
- Scope Cymru
- British Toilet Association
- IBS Network
- Bladder and Bowel Foundation
- National Association for Colitis and Crohns Disease
- Association for Continence Advice
- All Wales Continence Forum
- British Society of Gastroenterology
- Joseph Rowntree Foundation
- Children’s Commissioner for Wales
- Children in Wales
- One Voice Wales
- Welsh Local Government Association