

Reference:	FOI.18871.25
Subject:	Corridor care
Date of Request:	18 November 2025

Requested:

1. Number of patients treated in corridors or other non-clinical environments within your Health Board area over the past five years.
 - a. Please provide a breakdown by hospital.
 - b. Please provide a breakdown by calendar year.

Data should cover the period 1 January 2020 to 31 October 2025

2. Average length of time patients spent receiving care in corridors or other non-clinical environments.
 - a. broken down per hospital and
 - b. per calendar year for the same period.
3. The longest recorded time any patient spent receiving care in a corridor or non-clinical environment during the above timeframe (with any patient-identifiable information removed).
4. Copies of any guidance, policies, risk assessments, or standard operating procedures relating to the use of corridors or non-clinical spaces for patient care.
5. Any internal memos, briefing notes, or reports produced in the past five years that discuss, evaluate, or raise concerns about corridor care or the use of non-clinical spaces for patient care.
6. In the past five years, has your organisation been the recipient of any Prevention of Future Deaths reports where corridor care or treatment in non-clinical environments was identified as a contributory factor?

If so, please provide copies of:

- the PFD report(s), and your organisation’s response(s), with any personal data removed.

***Please provide the information in calendar years.

Response:

Hywel Dda University Health Board (UHB) regrets to inform you that it does not hold all the information requested, as it is not all recorded in the electronic systems available. However, the UHB can provide information relevant to your request, in the accessible manner it is held, which may not be exactly as requested.

Whilst operating in accordance with the Freedom of Information Act 2000 (FoIA), the UHB reserves the right to apply appropriate exemptions to the information being disclosed. Therefore, the UHB has applied an exemption under Section 12 of the FoIA to your request, due to the volume of information requested and the way it is held.

The UHB is unable to provide you with all the information requested, as it is estimated that the cost of answering your request would exceed the “appropriate limit” as stated in the Freedom of Information

Act 2000 and the Data Protection (Appropriate Limit and Fees) Regulations 2004. The “appropriate limit” represents the estimated cost of one person spending 18 hours (or 2½ working days) in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

For questions 1, 2, 3 and 5, the UHB does not hold a central record of the information requested, as corridor care or care in other non-clinical environments is discussed in site safety and UHB meetings, which are recorded in a standalone format that cannot be extracted to form a dataset.

Additionally, the placement of patients is inherent in all flow related discussions making it difficult and time consuming to identify and collate specific references to corridor care. Whilst wait times for treatment and inpatient beds is recorded, patient placement is not identifiable on the Welsh Patient Administration System (WPAS).

To provide you with all the information requested to fulfil these parts of your request, a manual search of systems, email accounts and patient records would be required. As not all the information is recorded centrally, the searches required would exceed the “appropriate limit” allowed under the FoIA.

The UHB is therefore applying an exemption under Section 12 of the FoIA, which provides an exemption from a Public Authority’s obligation to comply with a request for information where the cost of compliance is estimated to exceed the appropriate limit.

Despite the challenges detailed within the above exemption, some information pertaining to questions 4 to 6 of your request has been identified.

Upon reviewing the information and documents in accordance with the FoIA, the UHB has applied exemptions under the following sections of the FoIA:

Section 38(1) (a) and (b) – Health and Safety

“38(1) Information is exempt information if its disclosure under this Act would, or would belikely to-

- (a) endanger the physical or mental health of any individual, or*
- (b) endanger the safety of any individual.”*

The UHB has considered the application of an exemption under Section 38(1) (a) and (b) of the FoIA to some of the documents identified as part of our response to your request. This exemption allows Public Authorities to exempt information that it believes would or would be likely to endanger the physical and/or mental health, and safety of any individual.

The UHB considers that the disclosure of all the requested documents, specifically risk assessments, would be likely to inhibit the UHB’s ability to manage risk effectively, by exposing sensitive infrastructure information that could be misunderstood without appropriate context and mitigation, which could compromise patient health and safety.

This exemption is qualified and is subject to the public interest test. Information can only be withheld if the public interest in maintaining this exemption outweighs the public interest in disclosure. The UHB has considered the following as part of the public interest test:

In favour of disclosure: There is a legitimate public interest in the UHB’s openness and transparency in decision making processes. Additionally, the UHB has a duty to inform the public of any risk to their

health, along with contributing to the public's understanding of matters that affect people's lives. Furthermore, there is legitimate public interest in knowing whether the UHB is upholding and providing the care standards required.

Against Disclosure: Disclosure of all risk assessment information requested may cause harm to the health and safety of individuals. If the UHB did disclose all the information requested without appropriate context or explanation, this could lead to misinterpretation and/or misunderstanding, which could result in panic, alarm and distress for patients and members of the wider public. Furthermore, releasing these documents could undermine any internal processes and would likely impede the public's confidence in the UHB's ability to manage health and safety matters effectively.

Decision: The UHB has determined that the public interest in withholding some of the information requested, namely the risk assessments identified, is greater than the interest in disclosing them. The UHB acknowledges that while transparency is important, it believes that releasing some of the information without full and appropriate context could lead to significant misunderstanding, which in turn could potentially cause unnecessary alarm and distress among its patients and the wider public. Therefore, the potential harm associated with disclosure of all the information outweighs the public interest in releasing it.

Section 21(1) - Information accessible to applicant by other means

"21(1) Information which is reasonably accessible to the applicant otherwise than under section 1 is exempt information."

The UHB is withholding some of the requested information as it is available in the public domain and is accessible by another means.

Under Section 16, in accordance with Section 12 of the FoIA, the UHB has a duty to provide advice and assistance and provides the accessible information it holds below.

1. - 3. An exemption under Section 12 of the FoIA applied. Under Section 16, the UHB can advise that in December 2025 an electronic patient flow system was implemented, which will enable this level of detail to be accessed electronically going forward.

Additionally, during the twice daily UHB site safety meetings, reports are completed which form the basis of UHB wide focussed discussion and action planning. This is in addition to site-based patient flow meetings which also occur twice daily.

4. The UHB has applied exemptions Section 21 and 38 of the FoIA. However, the UHB provides the accessible information it holds below.

The following procedure is available on the UHB's website:

- 674 – Risk assessment procedure

A link has been provided below, which will take you directly to the policies and written control documents webpage:

[Policies and written control documents - Hywel Dda University Health Board](#)

A risk relating to the delivery of timely Urgent and Emergency Care (UEC) due to demand exceeding current capacity was discussed at the Quality, Safety and Experience Committee (QSEC) on 4 December 2025. Details of which are within item 1.3 Assurance and Risk Report – Executive Leads, which is available on the UHB’s website. A link to the relevant webpage has been provided below:

<https://hduhb.nhs.wales/about-us/governance-arrangements/board-committees/quality-safety-and-experience-committee-qsec/qsec-4-december-2025/>

Additionally, the UHB provides with the table overleaf a list of the policies, procedures and Standard Operating Procedures (SOP) identified which relate to the use of corridors or care in non-clinical spaces for patient care; copies have been provided at the following attachments detailed below:

Policy 1256 - Patient Boarding Protocol for Optimal Patient Flow	Attachment 1
Policy 1256 - Appendix 5 Risk Assessment Form	Attachment 1a
Policy 489 - Emergency Pressure Escalation Policy	Attachment 2
Policy 1373 - HDUHB ED MIU Redirection Policy	Attachment 3
Procedure 437 - Adult Outlier Procedure	Attachment 4
SOP Clinically Optimised Patients	Attachment 5

5. The UHB has applied exemptions under Section 12 and 21 of the FoIA. Under Section 16, the UHB can advise that care provided outside of designated clinical areas is integrated into broader discussions and occurs as a result of reduced flow through the health and social care system.

The UHB has an established UEC programme focussed on improving patient flow and streamlining access, providing a proactive approach to delivering timely, safe, effective, patient centred care in the most efficient way possible. It is expected that this programme will result in a reduction in attendances to the Emergency Department (ED) together with improved flow through the health system. This programme has also been extended to include an UEC Environmental Operational Delivery Group (ODG), the Terms of Reference (ToR) have been provided, at attachment 6. Each of the four (4) acute hospital sites are required to provide regular updates on actions taken in local groups, examples of the highlight reports submitted by each hospital have been provided at attachments 7 to 10.

In November 2025, a Task and Finish Group was established focussing on the provision of care outside of designated clinical areas, to ensure associated policies and procedures are applied consistently across the UHB, notes provided from the first three meetings are provided at attachments 11 to 13.

Additionally, excerpts from relevant discussions and meetings from the All Wales (AW) Partnership Forum and the Senior Nurse and Management Team meetings relating to corridor care have been provided at attachments 14 to 17.

For ease, details of the documents and attachment numbers have been provided within the table below. Please note Policy 1256, appended within attachments 16 and 17 has been provided at attachment 1.

Environmental ODG ToR	Attachment 6
Environmental ODG BGH Highlight Report 05.08.2025	Attachment 7
Environmental ODG GGH Highlight Report 05.08.2025	Attachment 8
Environmental ODG PPH Highlight Report 05.08.2025	Attachment 9
Environmental ODG WGH Highlight Report 05.08.2025	Attachment 10

Care Management of Patients meeting notes 20.11.2025	Attachment 11
Care Management of Patients meeting notes 27.11.2025	Attachment 12
Care Management of Patients meeting notes 04.12.2025	Attachment 13
AW Partnership Forum Boarding Item 14.01.2024	Attachment 14
Copy of PowerPoint Presentation – 14.01.2024	Attachment 14a
Your Next Patient (YNP) – 18.08.2024	Attachment 15
YNP Quality Governance Committee – 18.08.2024	Attachment 15a
Continuous Flow/Corridor Care 23.09.2024	Attachment 16
1256 Equality Impact Assessment (EqIA) Screening Template - 23.09.24	Attachment 16a
Acute Leadership Group Boarding Protocol 19.11.2024	Attachment 17
1256 Boarding protocol flowchart	Attachment 17a
Getting it Right First Time (GIRFT) in ED 24.02.2025	Attachment 18
RCN report – On the frontline of the UK’s corridor care crisis (insert)	Link provided below

An exemption under Section 21 has been applied to the Royal College of Nursing (RCN) report “On the frontline of the UK’s corridor care crisis” as it is available on the RCN website. For ease, a link has been provided below:

[Corridor care crisis | Publications | Royal College of Nursing](#)

- The UHB confirms that no Prevention of Future Deaths (PFD) reports have been received relating to corridor care, during the requested five (5) year period covering 1 January 2020 to 31 October 2025.