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| Reference: | FOI.20353.26 |
| Subject: | Food bank provision |
| Date of Request: | 5 May 2026 |

Requested:

1. Referrals to food banks or emergency food provision
 - a. Any data held by the Health Board on referrals made by NHS staff to food banks or emergency food provision services, for each calendar year from 2018 to the most recent available recorded information (preferably up to December 2024).
 - b. Where this information is not held in a directly extractable or coded form, please confirm whether such referrals are recorded in any system and, if so, how.

2. Referral pathways and systems
 Whether the Health Board has any formal or informal:
 - referral pathways,
 - policies,
 - social prescribing mechanisms, or
 - partnership arrangements

that enable NHS staff to refer patients to food banks or emergency food provision services. Please provide copies of any relevant documents where available.

3. Workforce involvement (if recorded)
 Where data is held, please indicate whether referrals can be identified by staff group or service area (e.g. primary care, community services, hospital services), and provide any available breakdown.

4. Screening for food insecurity
 Whether the Health Board undertakes any routine or structured screening for food insecurity in clinical settings, including:
 - use of validated tools (e.g. Hunger Vital Sign or equivalent),
 - the clinical settings in which screening is used, and
 - the year such screening was introduced (if applicable).

5. Data availability
 If the Health Board does not hold data on referrals to food banks or emergency food provision, please confirm this and indicate whether this is due to:
 - absence of a coded field,
 - lack of centralised recording, or
 - other data limitations.

Response:

Hywel Dda University Health Board (UHB) does not hold all of the requested information as referrals to food banks are made from different sources, including individual GP Practices, which the UHB does not hold the information for. With the exception of the Managed Practices, which are directly managed by the UHB, they are all managed independently. These GP Practices hold their own information and consequently, the UHB does not have access to all of the details you require. Therefore, this information would need to be requested directly from the individual GP Practices.

The names and addresses of each GP Surgery within the UHB's geographical area has been provided at Attachment 1.

Furthermore, the UHB is unable to provide you with all of 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 (Appropriate Limit and Fees) Regulations 2004. The "appropriate limit" represents the estimated cost of one person spending 18 hours (or 2 ½ working days) in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

In order to identify the requested information for question 1a, the UHB would need to undertake a manual trawl of all individual child and family health records and patients' medical records, for the 2018 to 2024 calendar years requested, to identify any information that may fulfil this part of your request, as the data is not centrally recorded.

The UHB is therefore applying an exemption under Section 12 of the Freedom of Information Act 2000 (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.

However, under Section 16 of the FoIA, we are required as a public authority, to provide advice and assistance so far as it is reasonable to individuals who have made a request under the FoIA, which can include assisting a requestor to further refine their request.

Unfortunately, the UHB is unable to provide advice on how you can refine your request further. This is due to the UHB still requiring a manual trawl of all child and family health records and the medical records for each of its Managed GP Practices to be undertaken, to identify any information that would fulfil your request.

However, the UHB has a duty to provide advice and assistance and provides below the information it holds for its Health Visiting (HV) service and its six (6) Managed GP Practices; Ashgrove Medical Centre, Meddygfa Minafon, Neyland and Johnston Surgery, Meddygfa Penrhyn, Meddygfa Sarn and Tenby Surgery.

Four (4) of the six (6) Managed GP Practices have confirmed that they do not hold any of the information requested - Ashgrove Medical Centre, Neyland and Johnston Surgery, Meddygfa Penrhyn and Meddygfa Sarn.

1a. An exemption under Section 12 of the FoIA has been applied.

1b. The UHB's HV service records referrals to food banks within individual child and family health records, and the Managed GP Practices record referrals on a patient's medical record.

2. The UHB's HV service has informal arrangements with each of the three (3) counties for referrals to local food banks. In Ceredigion and Pembrokeshire, local food banks are contacted by telephone to make a referral. In Carmarthenshire, there is an online referral process.

Managed Practices use informal local referral pathways. Tenby Surgery does not actively screen, but practitioners use the Elemental social prescribing portal for referrals to the Pembrokeshire Hub, which can link patients with food banks. Alternatively, patients are directed to the interactive screen in the waiting area of the GP surgery where patients can access further information independently.

Meddydfa Minafon refers patients to the Cluster Social Prescriber, but the local food bank is temporarily closed.

The UHB does not hold documented information.

3. The UHB does not hold the requested information. Families are identified as part of the health visiting assessment on an individual need basis.
4. The UHB does not hold the requested information. However, the UHB's HV service provides screening of food insecurity as part of the holistic health visiting assessment on an individual need basis.
5. The UHB does not have mechanisms in place to record and extract all the information requested, as detailed within the Section 12 exemption. In addition, while Tenby Surgery referrals to Elemental are coded, it is not possible to distinguish the indication without searching each record, to identify if it is related to food provision.