

Reference:	FOI.18385.25
Subject:	Trauma and Orthopaedic (T&O) waiting lists
Date of Request:	22 September 2025

Requested:

With regards to the FOIs' wording below, if your Health Board does not have its own BMI policy regarding access to orthopaedic surgery, please interpret the following wording in the FOIs 'your Health Board's BMI policy' as including your practice based on your Health Board's interpretation of regional or national guidelines.

1. How many patients in your health board have been removed from the T&O waiting list without receiving an orthopaedic specific treatment and/or procedure in each of the following months: January, February, March, April, May, June and July in 2025, 2024, 2023 and 2019?
2. How many patients in your health board have been removed from the T&O waiting list without receiving an orthopaedic specific treatment and/or procedure by each of the data categories you use for such removals, in each of the following months: January, February, March, April, May, June and July in 2025, 2024, 2023 and 2019?
3. How many patients in your health board have been removed from the T&O waiting list without receiving an orthopaedic specific treatment and/or procedure due to their BMI score as a consequence of your health board's BMI policy in each of the following months: January, February, March, April, May, June and July in 2025, 2024, 2023 and 2019?
4. How many patients in your health board on the T&O waiting list have had RTT clock reset, stopped or paused without receiving an orthopaedic specific treatment and/or procedure in each of the following months: January, February, March, April, May, June and July in 2025, 2024, 2023 and 2019?
5. How many patients in your health board on the T&O waiting list have had RTT clock reset, stopped or paused without receiving an orthopaedic specific treatment and/or procedure by each of the data categories you use for such cases in each of the following months: January, February, March, April, May, June and July in 2025, 2024, 2023 and 2019?
6. How many patients in your health board on the T&O waiting list have had RTT clock reset, stopped or paused without receiving an orthopaedic specific treatment and/or procedure as a consequence of your health board's BMI policy in each of the following months: January, February, March, April, May, June and July in 2025, 2024, 2023 and 2019?
7. How many patients in your health board have not been referred to the T&O waiting list from CMATS due to their BMI score as a consequence of your Health Board's BMI policy in each of the following months: January, February, March, April, May, June and July in 2025, 2024, 2023 and 2019?

Response:

Hywel Dda University Health Board (UHB) does not hold a formal policy relating to Body Mass Index (BMI), however, the UHB's Surgical teams have formally adopted the recommendations for BMI limits from the paper "Impact of Body Mass Index on outcomes of high-volume low complexity general surgery: systematic review and meta-analysis". A meta-analysis is a popular and frequently

used statistical technique used to combine data from several studies and re-examine the effectiveness of treatment interventions.

Additionally, the UHB operates in accordance with the National Institute for Health and Care Excellence (NICE) guideline: Overweight and obesity management. A link to the NICE guideline has been provided below:

[Overview | Overweight and obesity management | Guidance | NICE](#)

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.

To provide you with the information requested for question 3, the UHB would be required to undertake a manual trawl of all T&O patient records, prior to December 2024 to identify any information to fulfil this part of your request, as the reason for removal from a waiting list due to a BMI score, is not recorded centrally.

For questions 5 and 6, the UHB would also need be required to undertake a manual search of all T&O patient records to identify any occasions whereby a patient’s pathway has been adjusted or reset, as this information is not recorded centrally.

Additionally, to provide any information for question 7, a manual trawl of Clinical Musculoskeletal Assessment and Treatment Service (CMATS) patient records would be needed to identify any information that may fulfil this part of your request, as a patient’s BMI and their referral outcomes are not recorded centrally.

In response to question 3, the UHB has identified one thousand, nine hundred and ninety (1,990) patients on the T&O waiting list, that were removed without treatment for any reason, between 1 January and 31 July 2025. It is estimated that a manual search of these records alone would exceed the 18 hours stipulated within the Freedom of Information Act 2000 (FoIA). Based on the number of records identified, conducting a search of digital records taking a minimum of five (5) minutes per records would far exceed the ‘appropriate limit’, costing the UHB the following:

1,990 @ 5 minutes per item = 165 hours and 10 minutes
165 hours and 10 minutes @ £25 per hour = £4,129.25

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, this 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 T&O patient records to be undertaken to identify information that may fulfil your request.

Additionally, the UHB is unable to provide you with some of the requested information for question 2 as there is a potential risk of identifying individuals if this was disclosed. The UHB is therefore withholding the following details under Section 40(2) of the FoIA:

- The information broken down by month as requested, due to the low number of cases (less than 5)
- The figures in the table have been replaced with an asterisk (*) due to the low number of cases (less than 5)

This information is protected by the Data Protection Act 2018 (DPA)/UK General Data Protection Regulations (UK GDPR) as its disclosure would constitute unfair and unlawful processing and would be contrary to the principles and articles of the UK GDPR. This exemption is absolute and therefore, there is no requirement to apply the public interest test.

In reaching this decision, the DPA and UK GDPR define personal data as data that relates to a living individual who can be identified solely from that data or from that data and other information, which is in the possession of the data controller.

1. The UHB provides within the table below, the number of patients that were removed from the T&O waiting list without treatment, for any reason, during the requested periods.

Period	2019	2023	2024	2025
January	363	218	249	362
February	355	239	211	294
March	490	238	395	339
April	267	180	245	232
May	277	230	255	193
June	292	246	244	284
July	283	227	331	286
Total	2,327	1,578	1,930	1,990

Please note:- the data provided includes both inpatients and outpatients.

2. The UHB provides within the table below, the number of patients that were removed from the T&O waiting list without treatment, , by the category recorded, during the six (6) month period requested for the 2019, 2023, 2024 and 2025 calendar years.

	2019	2023	2024	2025
Inappropriate Referral	185	331	483	474
Seen via other treatment	226	228	254	212
Treatment no longer required	248	188	240	247
Seen at other hospital	458	96	102	199
Cancelled by Hospital	305	126	244	261
Patient did not phone	268	30	34	26
Entered in error	113	136	171	177
Cancelled by patient	351	253	239	250
Seen at treatment centre	*	*	15	16
Patient failed to opt-in	0	6	*	0
NHS Patient seen as Private	9	13	23	30

Seen via emergency admission	128	78	64	42
Cancelled by GP/ Referred to GP	*	*	0	*
Patient no longer traceable	0	0	*	*
Patient died	33	89	58	53
Total	2,327	1,578	1,930	1,990

3. An exemption under Section 12 of the FoIA has been applied to the information prior to December 2024.

However, in December 2024 the UHB implemented a new approach to the management of patients on a waiting list for Orthopaedic Joint Replacement, which supported the NICE guidance: Overweight and obesity management and the known associated risks of surgery for patients with a higher BMI.

Therefore, the UHB can confirm that one hundred and eleven (111) patients were put onto an optimisation pathway in January 2025 with support and guidance via the Orthopaedic Prehabilitation Service. To keep visibility of their original wait, no patients were removed from the waiting list; this approach aligns with latest National Referral to Treatment (RTT) guidance published in April 2025. Patients' RTT clocks are stopped whilst they undergo rehabilitation and as soon as patients are optimised and ready for surgery the clock is re-started, acknowledging their previous wait. In July 2025 a further seventeen (17) patients went through the rehabilitation process.

4. The UHB provides within the table below, the number of patients on a T&O RTT pathway that have had an adjustment or re-set on their pathway for any reason, as at the end of each month for the calendar years requested.

Period	2019	2023	2024	2025
31 January	191	112	76	77
28/29 February	144	105	81	139
31 March	71	108	87	170
30 April	94	102	87	242
31 May	137	98	88	261
30 June	142	106	80	255
31 July	124	93	92	244

5. - 7. An exemption under Section 12 of the FoIA has been applied.