



Between 3–16 February 2025, the RCP conducted a member snapshot survey. This survey included questions specifically on temporary care environments.

What is a temporary care environment?

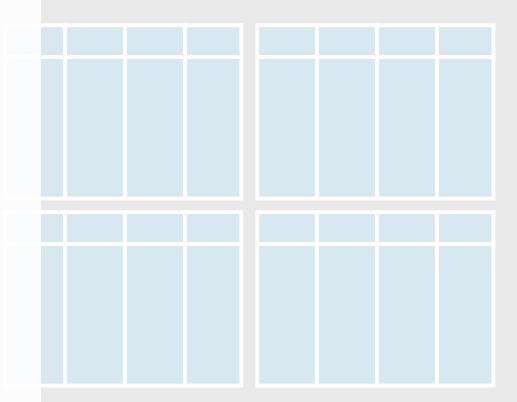
A place in a hospital that is not designed, staffed or equipped for patient care – like corridors, waiting rooms, offices, storage areas, or other inappropriate spaces in the hospital. The RCP has <u>termed these spaces</u> 'temporary care environments'.

Incidents of care delivery in these temporary environments reflect a lack of capacity within health and care systems to manage demand for patients requiring urgent and emergency care. We know from our members that a growing number of patients are being treated in these environments.

We need to understand the scale of the problem

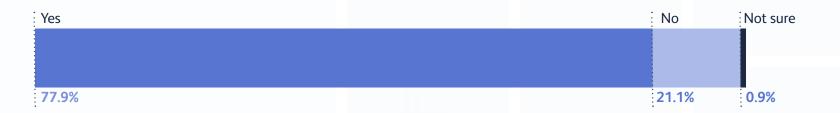
The RCP welcomes the commitment that NHS trusts will record data on the use of temporary escalation spaces from January 2025. We are now calling for NHS England to:

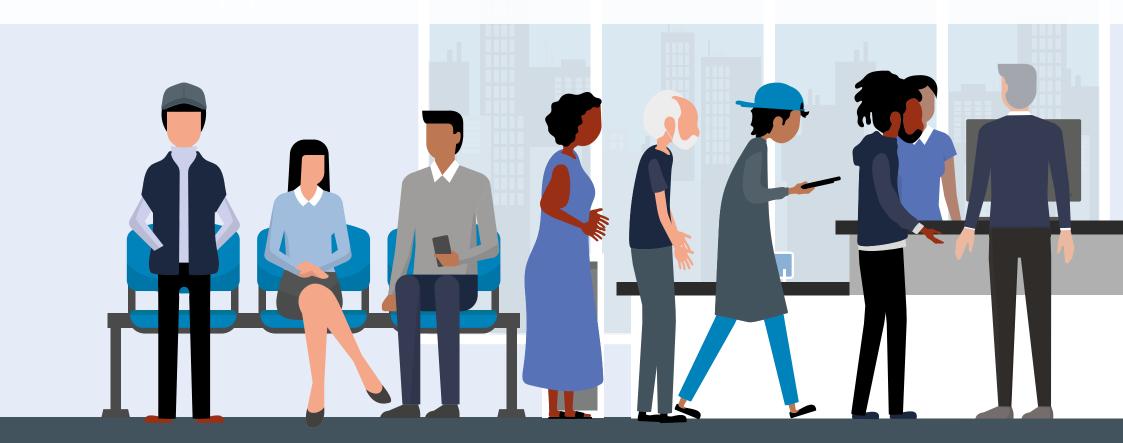
- > **publish** data all year round on how many patients are being treated in temporary care environments
- > **protect** patients and staff by supporting them when care is delivered in temporary care environments
- > **prevent** corridor care by putting safer systems and smoother processes in place.





In the past month, have you delivered care in a temporary environment?*





When you last cared for a patient in a temporary environment, where was it?*

Corridor	44.7%
Additional bed or chair in a bay	26.7%
On a ward without dedicated bed space	13.3%
Waiting room	8.9%
Another location not designed for patient care	4.5%
Ambulance outside ED	2.0%



Impact on patient care

Respondents were asked to select all options that apply

Patient's privacy and dignity was compromised	89.7% (824)
Clinical practice was physically difficult*	80.6% (741)
Patient confidentially was compromised	79.7% (732)
A lack of access to vital equipment/facilities [†]	74.6% (686)
Patients and families were less satisfied with the care they received	65.5% (602)
It was difficult to monitor patients	65.3% (600)
Increased personal stress	60.9% (560)
Infection prevention control measures were compromised	59.6% (548)
Patient safety was compromised	58.2% (535)
Patient distress was increased	56.6% (520)
Relatives become distressed	40.6% (373)
None of the above	4.4% (40)

^{*} eg restricted physical examination, administration of IV therapies

⁺ eg oxygen, toilet, call bell, hand washing facilities

Doctors' perspectives

- > 'My patient had her 100th birthday in the corridor. She will never get this day back!'
- > 'I have been in hospital medicine for 31 years and have never before experienced such an overwhelmed and pressured environment.'
- > 'Patients are spending up to 4 days in a chair ... the other day we performed a point of care echo in the waiting room.'
- 'Treatment rooms and bathrooms have been converted into patient rooms.'
- 'Corridor care is a travesty.'
- > 'We have averaged 32 temporary escalation spaces across our trust for the whole of 2024. They are not temporary at all, we went >360 days of the year in them.'
- > 'Corridor care this winter is not special for my hospital. It is all year round and has been since I have worked in the trust (2.5 years).'
- 'The solution to end corridor care is not more beds. We don't have either the staff or the money to support them. We need to be able to discharge medically fit frail patients in a timely manner.'
- 'I was taught to take accurate histories and perform thorough physical examinations. I am frustrated and saddened that I can no longer offer such assessments to all patients.'
- > 'The moral distress caused by seeing end-of-life patients waiting for hours in the back of ambulances or in ED, feeling like they are a burden, has taken its toll.'
- > 'I have had to resuscitate patients in A&E when there has been a delay reaching them as there are so many patients on trolleys blocking access to them.'
- 'I have had more than one patient die directly as a result of not being in an appropriate clinical area, ie on a trolley in the corridor rather than resus as there is no room for them.'
- > 'I had a patient left in a bed in the corridor in a ward from Friday at midday and he was still there when I came in on the Monday morning nearly 72 hours!'
- > 'As a doctor it is heartbreaking to be unable to treat patients due to systemic issues.'
- 'Many patients are spending 24–48 hours in a corridor. This affects mental health, safe monitoring, access to bathroom facilities, delivery of the very care patients came to hospital for.'



Read more

'Unsafe and undignified': RCP describes 'chaos' of corridor care and calls for action to alleviate pressure on the hospital front door

Measurement, management and elimination of temporary care environments for patients admitted to hospital

Get in touch

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