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Understanding corridor care in UK emergency departments

Submission date 10/01/2025	**Recruitment status** No longer recruiting	[_] Prospectively registered [X] Protocol
Registration date 09/05/2025	**Overall study status** Completed	[_] Statistical analysis plan [_] Results
Last Edited 30/10/2026	**Condition category** Other	[_] Individual participant data [X] Record updated in last year

Plain English summary of protocol

Background and study aims

Crowding in emergency departments leads to patient care in areas not originally designed for this use, known as “escalation areas”. This includes repurposed clinical areas and non-clinical areas, such as hospital corridors. A standardised definition of this umbrella term is yet to be generated. To date, there is no evidence describing how many patients are cared for in such environments, who these patients are and any effect on longer-term outcomes for patients with this experience. This study aims to address these evidence gaps by:

1. Defining emergency department escalation areas
2. Estimating the number of patients cared for in escalation areas
3. Describing which patients experience escalation area care

The results will evidence the scale of crowding in UK emergency departments and help to inform policy debate about resource allocation to emergency care. It will also support future research into the effect of escalation area care on patient outcomes.

Who can participate?

Patients presenting to the emergency department who spend some or all of their stay in an escalation area or who are admitted to hospital without spending time in an escalation area.

What does the study involve?

The study involves no change to the tests carried out or treatment received. It involves the collection of information that is recorded as part of the routine care provided to the relevant patients.

What are the possible benefits and risks of participating?

There is no anticipated benefit to individual patients taking part in this study. There is the potential for future benefit to participants and other healthcare users if the findings are used to inform the future use of escalation areas and how care is delivered in these areas. As there is no change to tests or treatment as part of the study, and all information used is recorded as part of routine clinical care, there is no additional risk to participants in terms of the care they receive. There are small privacy and confidentiality risks that are addressed in the manner in which data is collected and stored

Where is the study run from?
The study is sponsored by North Bristol NHS Trust (UK). It is led by the UK Royal College of Emergency Medicine (RCEM) Trainee Emergency Research Network (TERN). The chief investigator for the study is based at the University of Bristol (UK)

When is the study starting and how long is it expected to run for?
March 2024 to May 2025

Who is funding the study?
The Royal College of Emergency Medicine (UK)

Who is the main contact?
Dr Ben Clarke (TERN Fellow), tern@rcem.ac.uk

Contact information

Type(s)
Public, Scientific, Principal investigator

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Additional identifiers

Integrated Research Application System (IRAS)
343816

Central Portfolio Management System (CPMS)
65013

Study information

Scientific Title
Understanding escalation area and corridor care in UK emergency departments: an observational cohort and Delphi study

Acronym
UnCorKED

Study objectives
What proportion of Emergency Department patients are being cared for in escalation areas and who are they?

Ethics approval required
Ethics approval required

Ethics approval(s)
Approved 01/12/2024, London - Brighton & Sussex Research Ethics Committee (2 Redman Place, London, E20 1JQ, United Kingdom; +44 (0)2071048202; brightonandsussex.rec@hra.nhs.uk), ref: 24/LO/0837

Primary study design
Observational

Study design
Multi-centre observational cohort study with a combination of prospective and retrospective recruitment

Study type(s)
Safety

Health condition(s) or problem(s) studied
UK Emergency Department use of escalation areas

Interventions
Multicentre observational cohort study utilising a 'snapshot' approach to identify the proportion of patients within UK emergency departments who are being looked after in the escalation area. Data will be collected at the departmental and individual patient levels.

The potential cohort for this study is all patients in the ED at each of the five snapshots. These snapshots will be spread out over a 2-week period (with at least 48 hours between timepoints) from 3rd to 16th March 2025. From this cohort, any patient who spends any time in an escalation area OR does not spend any time in an escalation area and subsequently is deemed to require admission to hospital will be included in the study. This is a purely observational study so there is no change to any patient's management. The researchers will complete follow-up data collection in up to 28 days.

Intervention Type
Other

Primary outcome(s)
The proportion of patients in UK Emergency Departments having care provided in escalation areas, prospectively collected at sites, performed at each of the five snapshots spread out over a 2-week period (with at least 48 hours between timepoints) from 3rd to 16th March 2025

Key secondary outcome(s)
1. Demographics of patients within UK Emergency Departments who are being looked after in escalation areas, collected from the electronic health record for each eligible patient at each snapshot
2. 28-day hospital length of stay and mortality rates for patients who receive care in escalation

areas, collected from the electronic health record for each eligible patient at each snapshot
3. Type of escalation area(s) experienced, collected from the electronic health record for each eligible patient at each snapshot
4. Time spent in escalation areas, collected from the electronic health record for each eligible patient at each snapshot
5. ED diagnosis, collected from the electronic health record for each eligible patient at each snapshot
6. ED disposition, collected from the electronic health record for each eligible patient at each snapshot

These five snapshots will be spread out over a 2-week period (with at least 48 hours between timepoints) from 3rd to 16th March 2025

Completion date
31/05/2025

Eligibility

Key inclusion criteria
Any patient present in the ED at the recruitment time points, who experience ED escalation area care during their ED stay or are admitted to hospital. Escalation areas will be defined for the purposes of identifying eligible patients as any area not routinely used unless the capacity of the usual ED geographical footprint is exceeded.

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
All

Sex
All

Total final enrolment
0

Key exclusion criteria
Does not meet the inclusion criteria

Date of first enrolment
03/03/2025

Date of final enrolment
16/03/2025

Locations

Countries of recruitment
United Kingdom

England

Northern Ireland

Scotland

Wales

Study participating centre
Airedale NHS Foundation Trust
Airedale General Hospital
Skipton Road
Steeton
Keighley
England
BD20 6TD

Study participating centre
The Grange University Hospital
Caerleon Road
Cwmbran
Wales
NP44 8YN

Study participating centre
Southmead Hospital
Southmead Road
Westbury-on-trym
Bristol
England
BS10 5NB

Sponsor information

Organisation
North Bristol NHS Trust

ROR
https://ror.org/036x6gt55

Funder(s)

Funder type
University/education

Funder Name
Royal College of Emergency Medicine

Alternative Name(s)
The Royal College of Emergency Medicine, Royal College of Emergency Medicine | London, RCEM

Funding Body Type
Private sector organisation

Funding Body Subtype
Universities (academic only)

Location
United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Data sharing statement to be made available at a later date

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Other publications	Secondary analysis	05/10/2026	30/10/2026	Yes	No
Protocol file	version 6.0	10/02/2025	28/03/2025	No	No
Study website		11/11/2025	11/11/2025	No	Yes