Department of Health & Social Care

[redacted]
Minister of State for Public Health and Patient Safety

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HM Assistant Coroner Guy Davies
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17 August 2026

Dear Mr Davies,

Thank you for the Regulation 28 report of 18 June 2026 sent to the Secretary of State of Health and Social Care about the death of Geoffrey Gordon Fuller. I am replying as the Minister of State for Public Health and Patient Safety at the Department of Health and Social Care.

Firstly, I would like to say how saddened I was to read of the circumstances of Geoffrey Gordon Fuller's death, and I offer my sincere condolences to his family and loved ones. The circumstances your report describes are concerning and I am grateful to you for bringing these matters to my attention.

The report raises concerns over insufficient social care provision leading to large numbers of patients at Royal Cornwall Hospital Trust who are otherwise fit for discharge, thereby impeding patient flow through hospital. This is linked to greater crowding in Emergency Departments, and longer ambulance handover delays, and in turn to increased mortality risks for those patients held in corridors and in ambulances being delayed from receiving surgery or specialist treatment on wards.

The Government recognises and shares your concerns regarding the impact that delays in accessing appropriate social care and community support can have on patient outcomes.

Timely discharge relies on effective joint working between the NHS, local authorities and social care providers. The Government continues to support local systems to improve integration between health and social care through the Better Care Fund (BCF). For 2026/27, over £9 billion is committed through the BCF, with integrated care boards and local authorities required to jointly plan and deliver services that help people maintain or regain their independence, prevent avoidable admissions, and support timely and effective discharge from hospital. Recent reforms to the BCF place greater emphasis on

rehabilitation, reablement and other recovery-focused services, reflecting the importance of coordinated support in reducing delays and improving patient outcomes.

Beyond these immediate measures, this Government's vision for a National Care Service is about building a social care system that gives people greater choice, control, dignity and independence. The Prime Minister has made clear that he wants to see rapid progress on this, working in partnership with the adult social care sector. The Government is driving progress on the recommendations that Baroness Casey's independent commission into adult social care made earlier this year for immediate action on dementia, motor neurone disease and adult safeguarding. The Government has also brought forward the date for Baroness Casey's commission to make recommendations on the future of adult social care and how to deliver the National Care Service; the Commission will now report by summer 2027 rather than by 2028.

The Commission remains central to the Government's ambition to reform adult social care. The Big Conversation on Care, launched by Baroness Casey on 29 July, is a key next step, giving people across England the opportunity to say what they want and expect from a future National Care Service.

We also recognise your concerns regarding ambulance handover delays and emergency department crowding. The Medium Term Planning Framework sets out NHS England's expectations for how local systems should plan and deliver services over the coming years, supporting recovery, improved performance, financial sustainability and better outcomes for patients. The national standard for hospital handovers remains 15 minutes, and the framework makes clear that handovers should not exceed 45 minutes. NHS England continues to work with ambulance services, acute trusts, integrated care boards and wider partners to improve patient flow, reduce handover delays and ensure patients receive timely assessment, treatment and transfer to the most appropriate care setting. This includes, through delivering the Urgent and Emergency Care Delivery Plan 2025/26, having invested over £450 million to expand urgent and emergency care capacity. We have also published national clinical standards through the Model Emergency Department, Model Acute Pathway and Model Discharge programmes, which are designed to improve flow through hospitals, reduce prolonged waits and support safer emergency care.

NHS England is also deploying Getting It Right First Time clinical improvement teams to provide targeted support to trusts experiencing the greatest urgent and emergency care pressures, including where corridor care is prevalent. These teams work with local systems to identify barriers to patient flow and implement evidence-based improvements to improve patient safety and reduce prolonged waits.

We note your findings regarding the whole-system nature of these issues and will carefully consider this report alongside wider evidence on discharge delays, patient flow and urgent and emergency care pressures. The Government remains committed to working with partners across the health and care system to improve discharge arrangements, strengthen integration between services and ensure patients receive safe, timely and appropriate care.

I hope this response is helpful. Thank you for bringing these concerns to my attention.

Yours sincerely,

MINISTER OF STATE FOR PUBLIC HEALTH AND PATIENT SAFETY