

Trust Headquarters  
Russell's Hall Hospital  
Dudley  
West Midlands  
DY1 2HQ

**Ref:** FOI-102024-0001174

**Date:** 18.12.2024

**Address / Email:**

Dear

**Request Under Freedom of Information Act 2000**

Thank you for requesting information under the Freedom of Information Act 2000.

I was hoping you'd be able to answer the following question under the Freedom of Information Act:

1. How is waitlist validation carried out in your Trusts? Please select one of the following options: ~~Manually~~ / Semi-automated / ~~Automated~~.

a. If your response was semi-automated or automated, which tools do you use? Please specify the types of tools or software used.

- We manually validate pathways and also use the Envoy text messaging service to send out validation texts to patients every 12 weeks.

2. How many FTEs currently work on waitlist validation and what band are they? Please specify the number per band.

- There will be a team of 11 once all the staff are in post, 1 band 5 (24hr per week), 1 band 4 and 9 band 3, all FTE.

3. How has your FTE count working on waitlist validation increased in the past 2-3 years? Please provide an estimate if you do not have the exact number.

- 4 years ago, there were 4 in the team, during Covid we were given 3 extra staff on fixed term contracts, these were subsequently made permanent.

Following a study done by NHS England last year we were giving the funding for 4 extra FTE posts.

4. In the past 12 months, approximately how long has the waitlist validation process taken? Please provide an estimate if you do not have the exact number.

- We have yet to have all team members start their roles, so we are unable to validate all 18 week breaches on a weekly basis. The team work on validation all week and are able to validate opens pathway every week, ASI/OPF every 6 weeks and ELA every 12 weeks.

This amounts to around 8,500 pathways per week.

5. What data quality issues have been identified the most frequently as part of the waitlist validation process? Please select those that apply from the list below:

*- There are automated data quality reports, these reports highlight a number of RTT/waitlist exceptions including; patients on multiple pathways, potential first attendances with an incorrect outcome, appointment slot issues future appointments and records without an active RTT clock.*

- a. Decision to admit but no waiting list entry - yes
- b. Missing waiting list or pathway information (e.g. due date, intended procedure) - yes
- c. Patients on an admitted waiting list without an active RTT (Referral to Treatment Pathway) clock - yes
- d. Past TCI (To Come In) dates - yes
- e. Potential duplicates - yes
- f. Other - please specify – Patients on a Planned pathway where the repeat date has past, and patients on a Planned pathway without a repeat date.

6. What are your current approaches to linking data? Please select one of the following options: Manually or semi-automated / Automated - both

Reports either run daily on Power BI or can be extracted from Power BI reports, these are then manually corrected by the Validation Team.

From an information/report provision perspective: semi-automated – The data elements to support the reporting process are taken from from various applications including electronic staff record, our patient administration system and our pre-op database. These data sources are linked together via a number of SQL reporting procedures, within MS SQL server management studio. Report outputs are shared with the relevant ops teams via MS Power BI.

The referral data from electronic staff record requires a daily manual extract, however there is an extract, transform, and load (ETL) process that imports this data into data warehouse.

The data points from the various sources are linked via local pathway identifiers.

7. What is the proportion of data linkage that is manual and automated? Please provide an estimate if you do not have the exact number.

- Approximately 1800 patients receive a validation test per week, and approximately 8.500 pathways are manually validated.

a. If automated, what tools are used? Please provide the name of the tools.

- From an information/report provision perspective - - Most of the data reporting process is automated, as described in question 6

b. If manual, what tools are used e.g. R, data bricks? Please provide the name of the tools.

- From an information/report provision perspective - As described in question 6, the only manual steps require a member of staff to export/saved the daily files from electronic staff record

8. Currently, is the data linking process cumbersome? Please select one option: Yes/~~No~~ -for the Validation Team

- From an information provision perspective – No, as we have built a number of automated queries and processes to lessen the burden around information provision.

9. And does it take away from people's everyday role? Please select one option:

- Yes - for the validation Team
- No from an information provision perspective – the automated processes have lessened the input required to provide data.

If you are dissatisfied with our response, you have the right to appeal in line with guidance from the Information Commissioner. In the first instance you may contact the Information Governance Manager of the Trust.

Information Governance Manager  
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Email: [dgft.dpo@nhs.net](mailto:dgft.dpo@nhs.net)

Should you disagree with the contents of our response to your appeal, you have the right to appeal to the Information Commissioners Office at.

Information Commissioners Office  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF  
Tel: 0303 123 1113  
[www.ico.org.uk](http://www.ico.org.uk)

If you require further clarification, please do not hesitate to contact us.

Yours sincerely

**Freedom of Information Team**  
**The Dudley Group NHS Foundation Trust**