

Non-RTT PTL Validation

University Hospitals of North Midlands NHS Trust
Case Study



Overview

In common with the national picture, the pandemic created significant backlogs in elective care, putting pressure on planned care services at University Hospitals of North Midlands NHS Trust (UHNM).

Some of the key issues identified included:

- Waiting lists more than doubling in a short period
- Lack of confidence in the PTL and challenges in producing reliable reports
- Proliferation of pop-up long waiters appearing daily
- Hidden non-RTT waiting lists impeding operational efforts
- Inconsistent processes and reporting formats
- Administrative staff stretched thin and lacking adequate training
- Disruptive movement between departments
- Just five validators available to manage a growing backlog

Challenge

By March 2023, recognising the Trust's lack of bandwidth to move beyond firefighting mode, an independent external reviewer was appointed. This collaboration began to unearth issues from both a data and operational perspective.

The review uncovered underlying systemic issues, including the daily emergence of pop-up long waiters, highlighting the need for urgent prioritisation. In response, a transformational operational strategy was developed to restore stability and drive efficiency improvements.

A key recommendation was to undertake a mass validation of 10% of the Trust's 285,000 non-RTT waiting list entries, prioritising the most overdue cases. MBI Health's Managed Services team was commissioned to lead and deliver this critical validation work.

The validation focused on the following classifications:

- Patients with no due date (split into first appointments and follow-ups)
- Brand new patients
- Non-attendances and cancellations
- Delays due to duplicates

Validation Results

86%

of the waiting lists closed

14%

of patients required appointments and were prioritised for booking

A further validation of 18,000 referrals identified:

8%

closure rate

1%

of pathways incorrectly coded as RTT

The MBI Approach

To meet the scale and urgency of the validation challenge, UHNM engaged MBI Health's Managed Services team, bringing in expert resource to deliver high-quality manual validation at pace. This was not a standalone effort - the team leveraged MBI's LUNA platform to guide and target their efforts intelligently.

LUNA provided a powerful overlay to the validation process by:



- Hosting Trust-defined validation cohorts and providing a central platform for outcome recording and tracking.
- Supporting rapid identification of patient needs based on outcomes recorded by validators.
- Simplifying reporting by reducing the need for manual analysis in Excel, allowing Trust staff to focus on delivery and oversight.

The MBI team delivered more than resource - they brought structure, momentum and strategic insight by:

- Strengthening the Trust's approach through collaborative problem-solving
- Maintaining momentum while adapting flexibly to emerging needs
- Proactively identifying and fast-tracking patients at risk or lost to follow-up, enhancing patient safety

The Trust highlighted several key benefits of the approach:

- Seamless integration with existing recovery workstreams, with no additional burden on internal teams
- A sense of pooled expertise, where MBI's contribution enhanced rather than duplicated in-house efforts
- High-quality, detailed updates and communications throughout
- A consistently strong focus on pace, assurance and patient safety at every stage

Summary

Through a collaborative and well-targeted approach, University Hospitals of North Midlands NHS Trust was able to take decisive action to address growing backlogs and restore confidence in its non-RTT waiting lists. The partnership with MBI Health's Managed Services team delivered rapid impact - combining skilled validation resource with the advanced capabilities of the LUNA platform.

Together, they achieved:

- A significant reduction in hidden or overdue waiting list entries
- Improved visibility of patient need, enabling faster, safer decision-making
- Operational stability through structured process improvement
- Enhanced compliance and assurance through validated, accurate data

Importantly, this work not only delivered immediate results, it laid the groundwork for sustainable improvement. With revised SOPs, embedded learning, and a scalable validation model, UHNM is better positioned to manage patient flow and meet future elective care challenges with confidence.

The MBI team rapidly understood our situation and provided a solution that complemented our established recovery workstreams.

Their contributions, supported by deep experience, were immediate and impactful.

- Sue Perks, Head of Elective Access

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Email us: hello@mbihealth.com
Call us: 020 3600 0451

