

Information Governance

Robert Dolan House
9 Alie Street
London
E1 8DE

Email elft.foi@nhs.net

Website: <https://www.elft.nhs.uk>

26 October 2023

Our reference: FOI DA4965

I am responding to your request for information received 20 September 2023 and clarified on 26 September. This has been treated as a request under the Freedom of Information Act 2000.

I am now enclosing a response which is attached to the end of this letter. Please do not hesitate to contact me on the contact details above if you have any further queries.

Yours sincerely,

Information Rights Coordinator

If you are dissatisfied with the Trust's response to your FOIA request then you should contact us and we will arrange for an internal review of this decision.

If you remain dissatisfied with the decision following our response to your complaint, you may write to the Information Commissioner for a decision under Section 50 of the Freedom of Information Act 2000. The Information Commissioner can be contacted at:

Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

Tel: 0303 123 1113
Web: www.ico.org.uk

Please note that the data supplied is not allowed to be re-used and/or published without the explicit consent of East London NHS Foundation Trust. Please contact the signatory to request permission if this is your intention



We promise to work together creatively to: learn
'what matters' to everyone, achieve a better quality
of life and continuously improve our services.
We care . We respect . We are inclusive

Interim Chief Executive Officer: Lorraine Sunduza
Chair: Eileen Taylor

Request: Dear informatics lead, please can you provide a response to the following questions:

Question 1: What are the core patient administration system(s) used by your organisation?

Answer: The Trust has reviewed question 1 of your request for information under the Freedom of Information Act (FOI) 2000.

Section 21(1) of the FOI Act states:

(1) Information which is reasonably accessible to the applicant otherwise than under section 1 is exempt information.

The information requested is accessible here: Question 1a

https://www.elft.nhs.uk/sites/default/files/2022-01/anon_response_-_foi_da3596.pdf

Question 2: Do you have a data warehouse solution in place to extract, transform and load data from your patient administration system(s) into a central repository for secondary use?

Answer: Yes

Question 3: What systems/software/programmes/applications does your informatics teams use to:

Question 3a: Manage workload, incorporating receiving requests internally and externally, managing work in progress and communicating to customers through to task/product completion?

Answer: Azure DevOps Services
MS Teams

Question 3b: Provide regularly available information to customers, including patient data, reports, dashboards, scorecards and other visual representations of data?

Answer: Microsoft power BI
Microsoft Excel

Question 3c: Analyse data, including descriptive, diagnostic, predictive and prescriptive analysis (as defined in table 1 below).

Table 1 Types of analysis, adapted from Gibson (2021)

Descriptive analysis	This is the simplest and most common use of data in business today. Descriptive analysis answers the “what happened” by summarizing past data, usually in the form of dashboards. The biggest use of descriptive analysis in business is to track Key Performance Indicators (KPIs).
Diagnostic analysis	Diagnostic analysis takes the insights found from descriptive analytics and drills down to find the causes of those outcomes. Organizations make use of this type of analytics as it creates more connections between data and identifies patterns of behaviour.
Predictive analysis	Predictive analysis uses the data we have summarized to make logical predictions of the outcomes of events. This analysis relies on statistical modelling, which requires added technology and manpower to forecast. It is also important to understand that forecasting is only



We promise to work together creatively to: learn ‘what matters’ to everyone, achieve a better quality of life and continuously improve our services.
We care . We respect . We are inclusive

Interim Chief Executive Officer: Lorraine Sunduza
Chair: Eileen Taylor

	an estimate; the accuracy of predictions relies on quality and detailed data.
Prescriptive analysis	Prescriptive analysis utilizes state of the art technology and data practices, such as Artificial Intelligence (AI) systems to consume a large amount of data to continuously learn and use this information to make informed decisions, communicating these decisions and even putting those decisions into action.

Answer: Microsoft power BI
Microsoft Excel

For the next section of questions, please provide an answer for each system included in response to question 3 (i.e. for parts a, b & c). A matrix has been provided for convenience.

	3a	3b	3c
Question 4: According to Q3a, 3b, and 3c How long have these systems been in place/used for?	1<2 years	1<2 years	1<2 years
Question 5: What are the annual costs to use these systems?	144,340.92	335,307.60	335,307.60
Question 6: Were there any initial set up costs to implement these systems? Is so what costs were incurred?	N/A	N/A	N/A
Question 7: Have these systems been assessed for their return on investment? If so, what was the outcome?	No	No	No
Question 8: Do you intend to continue to use these technological solutions in the next 3-5 years? If not, what other solutions are you considering?	No plans to change technological solution at present	No plans to change technological solution at present	No plans to change technological solution at present

Section 2:

Clarification: 'Receiving requests internally' refers to the process of how requests are received from internal customers who need data/information to facilitate the running of the hospital's services and whether these requests are made via a



We promise to work together creatively to: learn 'what matters' to everyone, achieve a better quality of life and continuously improve our services.
We care . We respect . We are inclusive

Interim Chief Executive Officer: Lorraine Sunduza
Chair: Eileen Taylor

system to manage this process or just via the likes of email/telephone (in which case how are they logged and tracker)

'Information requests' is only mentioned in terms of excluding anything about provision of freedom of information requests that require some form of data extraction and aggregation. However, if the query related to section 2 and 'information provision' then this relates to requests for one off pieces of information that are made to the relevant informatics team, that require some form of data to be presented, typically data that's extracted from the above patient administration systems, aggregated in a form such as tables and charts and then returned to the requestor.

Question 9: On average (excluding Freedom of Information requests), how many requests in total do you receive per week or month from both internal and external colleagues/customers for:

a. Information provision

Answer: 200 or more per month.

b. Regular reports

Answer: Not measured.

c. Analysis

Answer: Not measured.

Question 10: On average (excluding Freedom of Information requests), how long does it take from a request being received to completion (i.e. turnaround/process time) for:

a. Information provision

Answer: 5 – 10 working days.

b. Regular reports

Answer: Not measured.

c. Analysis

Answer: Not measured.

Question 11: How many staff (whole time equivalents) are employed in any capacity to service these types of requests?

a. Information provision

Answer: 20<30 - All members of the department (25 WTE) are employed in some capacity to support requests, none are employed exclusively for this duty.

b. Regular reports

Answer: 20<30 - All members of the department (25 WTE) are employed in some capacity to support requests, none are employed exclusively for this duty.

c. Analysis

Answer: 20<30 - All members of the department (25 WTE) are employed in some capacity to support requests, none are employed exclusively for this duty.



We promise to work together creatively to: learn 'what matters' to everyone, achieve a better quality of life and continuously improve our services.
We care . We respect . We are inclusive

Interim Chief Executive Officer: Lorraine Sunduza
Chair: Eileen Taylor

Question 12: Do you use business intelligence cubes / OLAP (Online Analytical Processing) cubes to standardise, consolidate or aggregate relevant data for fast and efficient analysis?

Answer: No.

Have you implemented or experimented with the use of artificial intelligence or machine learning?

Answer: No, but its planned/in development

Question 12a: If so, what has this been used for?

Answer: Not applicable

Question 12b: How often is this type of analysis conducted?

Answer: Not applicable

Question 13: Would you be willing to provide more information and discuss these points on a one-to-one basis? If so, please can you provide your details below:

Name:	Not applicable
Job title:	Not applicable
Email address:	Not applicable
Phone number:	Not applicable

Question 14: Do you have any other comments you would like to add?

Answer: Not Applicable.



We promise to work together creatively to: learn 'what matters' to everyone, achieve a better quality of life and continuously improve our services.
We care . We respect . We are inclusive

Interim Chief Executive Officer: Lorraine Sunduza
Chair: Eileen Taylor