



# IMPLEMENTING A ROBOTIC PROCESSING AUTOMATION (RPA) TO IMPROVE WAITLIST SUSPENSION/REMOVAL RATES; ENHANCING PATIENT AND WORKFORCE BENEFIT.

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## INTRODUCTION

The suspension/removals of inpatient and outpatient waiting lists requires each patient to be processed individually i.e. highly monotonous, repetitive tasks. Generating an automated approach to implement RPA would remove manual repetitive tasks so highly skilled members of our workforce can focus on more complex and interesting tasks. Additional benefits would be a decrease in human error, and increase in returns, the ability to run processes out of hours and could be implemented nationally.

## OBJECTIVE

Determine if implementing RPA will improve inpatient and outpatient waiting list suspension and removal rates as well as improving data quality.

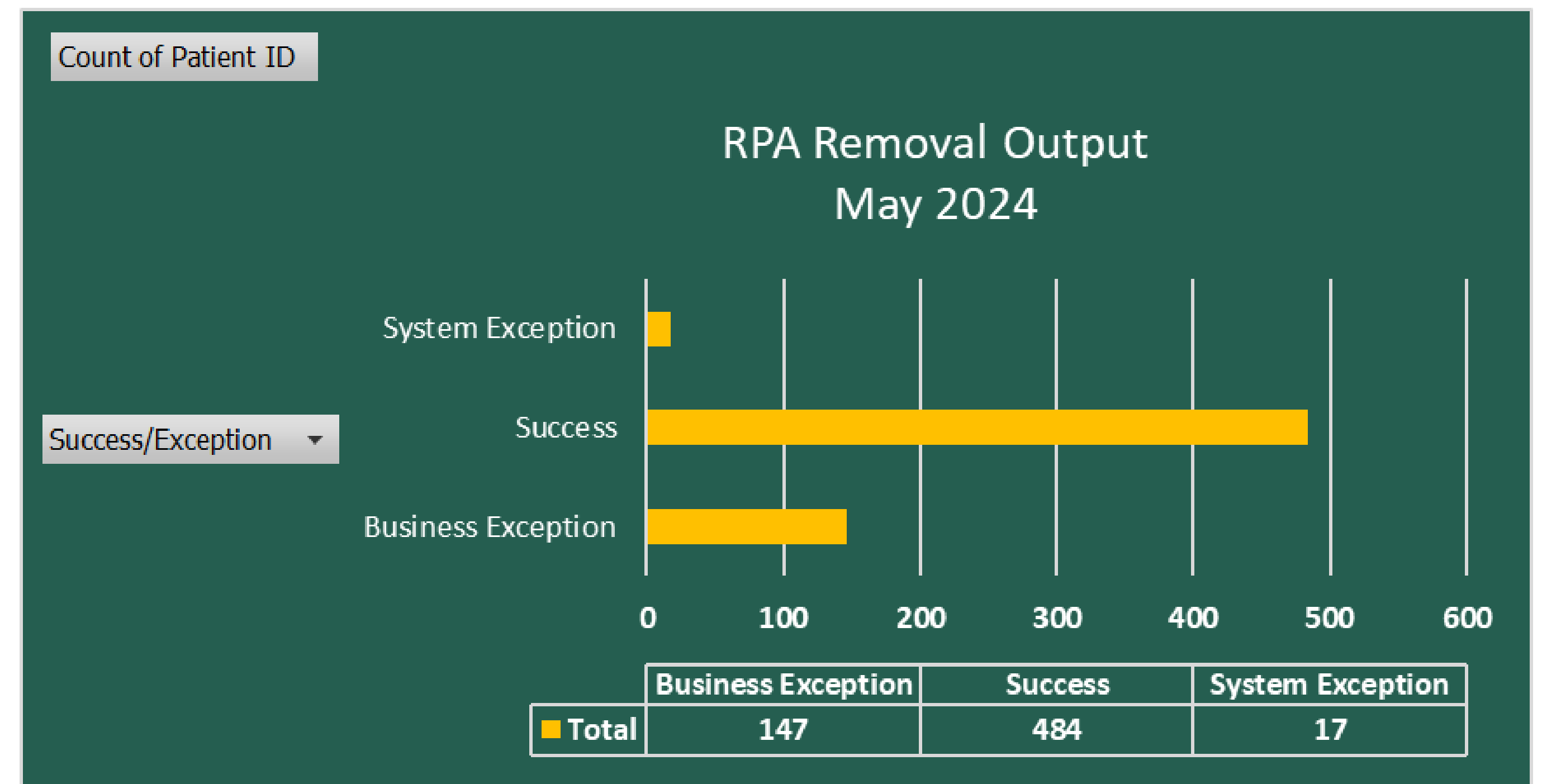
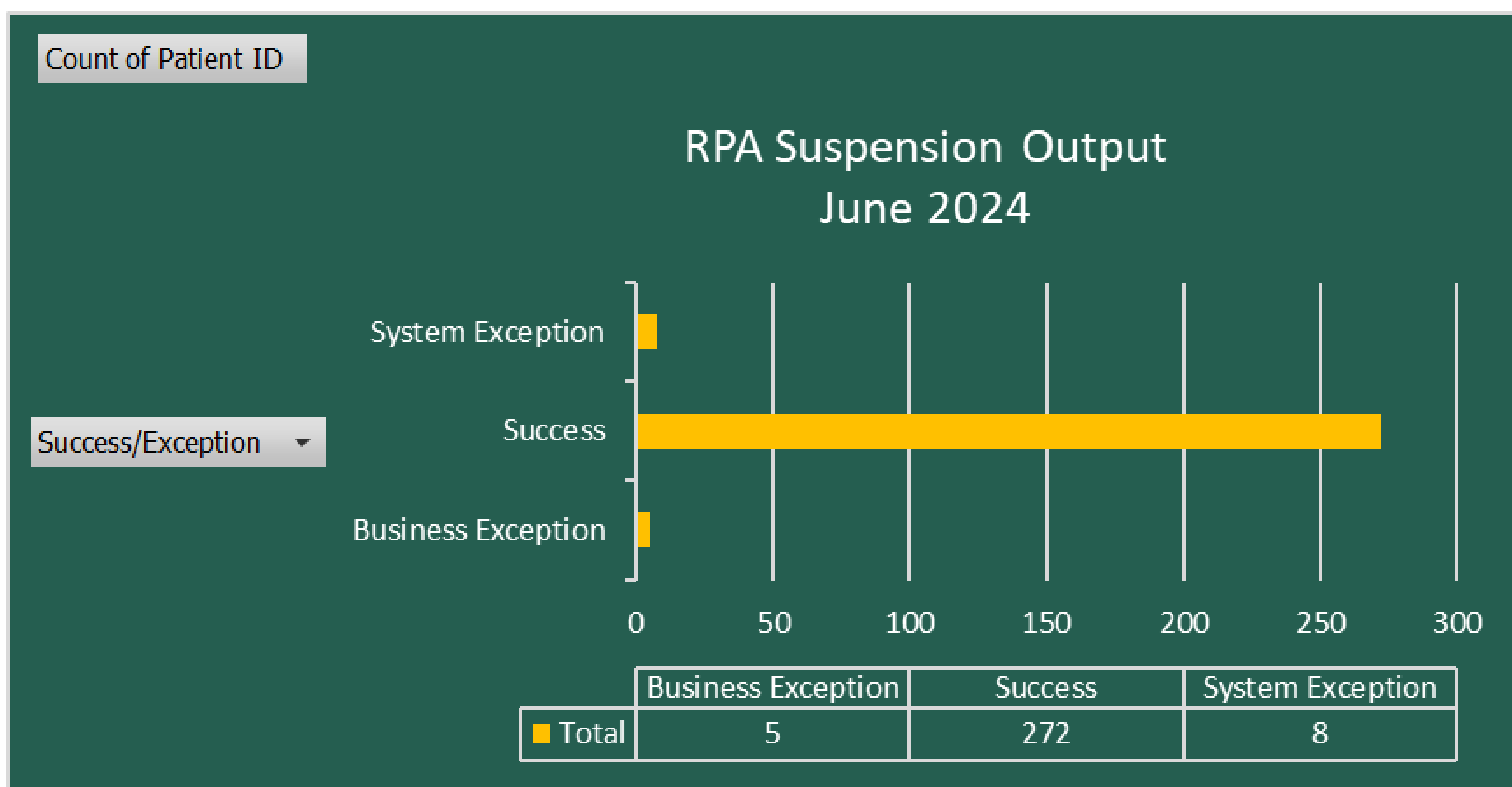
## METHODOLOGY

Following a data sharing agreement, a solutions architect approach was implemented. This consisted of processing mapping, compiling a Project Initiation Document, a Solution Test Document, Solution Design Document, a Project Design Document as well as a getting sign off on a Data Protection Impact Assessment & User Acceptance Testing within the test environment of IPMS (Patient Administration System). Following successful validation and verification the solution was implemented in the live system with a period of Hypercare support from the RPA Team.

## RESULTS

We have seen a significant increase in the turnaround time for the processing of inpatient and outpatient waiting list suspensions, extension of existing suspension periods as well as inpatient and outpatient removals since the implementation of Ruadhan in Galway University Hospitals. This results in our Waiting List Report being accurate and up to date. Prior to Ruadhan staff had to manually process 100% of the effected records; we are now in a position where this has reduced to an approximate 5% manual intervention rate\*

\*figure will fluctuate pending on the number of records processed as well as the number of exceptions per process



**Figure 1.** Sample Data from June 2024 demonstrates the number of inpatient and outpatient suspensions carried out by Ruadhan. Business Exceptions and System Exceptions are agreed upon during the Solution Design Phase

**Figure 2.** Sample Data from May 2024 demonstrates the number of inpatient and outpatient Removals carried out by Ruadhan as well as issuing correspondence to the GP & patient. Business and System Exceptions were agreed upon during the Solution Design Phase

## CONCLUSIONS AND FUTURE DIRECTIONS

In conclusion we have demonstrated that we can reduce the highly mundane and repetitive task of manual processing of patient suspensions and removals from both inpatient and outpatient waiting lists as well as increasing our data quality and enhancing our process turnaround time freeing up our highly skilled workforce for more complex areas of the Scheduled Care pathway.

## REFERENCES AND ACKNOWLEDGEMENTS

### Local

- Ken Connaughton, Former ICT Manager, Galway University Hospitals
- Tim Cameron, Waiting List Manager, Galway University Hospitals
- Nuala Harlowe, Staff Officer, Galway University Hospitals

### National

- Ciara Wynne, Project Manager, RPA eHealth Team
- Shannen Dunphy, Business Analyst, RPA eHealth Team
- Gillian Martin, Developer, RPA eHealth Team
- Rishika Shetty, Developer, RPA eHealth Team
- Arsha Varghese, RPA CoE Operations Lead
- Kevin Kelly, GM, Digital Workflow Automation, Technology and Transformation