

Measure Number	Domain	Theme	Measure	Description & Provenance	Numerator	Denominator	Period Type	Frequency	Data Source Numerator	Data Source Denominator	Data presentation	Target	Interpretation Guidance	Construction
<a href="#">RA001</a>	Domain 1: Preventing people from dying prematurely	Clinical Process	Access to external beam radiotherapy	The number of radiotherapy attendances (a measure of the number of times a patient attends the radiotherapy department and receives treatment; this differs from previously used radiotherapy fractions in that a patient may receive treatment as part of several different radiotherapy prescriptions during each attendance.) delivered at each Trust with radiotherapy equipment, divided by the calculated radiotherapy catchment population for the Trust  (Populations have been calculated using the postcodes of patients in the	Sum of attendances (a measure of the number of times a patient attends the radiotherapy department and receives treatment; this differs from previously used radiotherapy fractions in that a patient may receive treatment as part of several different radiotherapy prescriptions during each attendance) for radiotherapy	Output for your Trust from the National modelling using NATCANSAT per 1,000,000 population as a baseline	Quarterly	Quarterly	RTDS	RTDS	Run chart		Neutral	As per NATCANSAT – locally modelled; and plans in place which are agreed and monitored RTDS 3 years data available
<a href="#">RA002</a>	Domain 1: Preventing people from dying prematurely	Clinical Process	Access to radiotherapy	The number of patients accessing radiotherapy during their cancer journey as a percentage of number of people diagnosed with cancer	Number of unique patients receiving radiotherapy in a 3 month period	Total number of cancer patients diagnosed in the same period in the previous year - Note current registry data working a year behind on this data	Quarterly	Quarterly	RTDS and cancer registry	RTDS and cancer registry	Run Chart		Neutral	37% if methodology undertaken as per NRIAG. International best practice and NRIAG strategy is 52%.
<a href="#">RA003</a>	Domain 2: Enhancing quality of life for people with long term conditions	Clinical Process	Proportion of all radiotherapy attendances receiving IMRT	Access to intensity Modulated Radiotherapy defined by percentage attendances where IMRT delivered	Number of inverse planned IMRT attendances delivered (a measure of the number of times a patient attends the radiotherapy department and receives treatment; this differs from previously used radiotherapy fractions in that a patient may receive treatment as part of several different radiotherapy prescriptions during each attendance)	Total number of attendances delivered (a measure of the number of times a patient attends the radiotherapy department and receives treatment; this differs from previously used radiotherapy fractions in that a patient may receive treatment as part of several different radiotherapy prescriptions during each attendance)	Quarterly	Quarterly	RTDS OPCS codes	RTDS OPCS codes	Run Chart		Neutral	Inverse planned IMRT 24% of all attendances (Prostate 13%, Gynaecological 1%, Head and Neck 6%, CNS 2%, other sites 2%- 24%)
<a href="#">RA004</a>	Domain 2: Enhancing quality of life for people with long term conditions	Clinical Process	Proportion of all radiotherapy attendances receiving IGRT	Use of Image Guided Radiotherapy in all appropriate cases	Attendances for radiotherapy for which IGRT is used (a measure of the number of times a patient attends the radiotherapy department and receives treatment; this differs from previously used radiotherapy fractions in that a patient may receive treatment as part of several different radiotherapy prescriptions during each attendance)	Total number of attendances delivered (a measure of the number of times a patient attends the radiotherapy department and receives treatment; this differs from previously used radiotherapy fractions in that a patient may receive treatment as part of several different radiotherapy prescriptions during each attendance)	Quarterly	Quarterly	RTDS OPCS codes	RTDS OPCS codes	Run Chart		Neutral	IGRT is at least level 2 (which is not adaptive radiotherapy) as per IGRT guidance .
<a href="#">RA005</a>	Domain 3: Helping people to recover from episodes of ill health or following injury	Clinical Process	Efficient use of facilities. Number of attendances on each unit	Average number of machine attendances per machine per treatment unit per quarter.	Number of LINAC attendances in time period (a measure of the number of times a patient attends the radiotherapy department and receives treatment; this differs from previously used radiotherapy fractions in that a patient may receive treatment as part of several different radiotherapy prescriptions during each attendance)	Number of LINACS in unit	Quarterly	Quarterly	RTDS	RTDS	line chart		Neutral	
<a href="#">RA006</a>	Domain 4: Ensuring that people have a positive experience of care	Clinical Process	Number of treatments delivered during machine	The percentage of category 1 attendances not treated during a machine breakdown, QA or routine maintenance	Number of attendances where treatment not delivered due to machine breakdown, QA or routine maintenance	Total number of category 1 (as per service specification) patient attendances booked	Quarterly	Quarterly	Provider	Provider	Run Chart		Lower is better	Less than 5% of group not delivered
<a href="#">RA009a</a>	Domain 4: Ensuring that people have a positive experience of care	Clinical Outcome	Patient Experience	Patient satisfaction of radiotherapy side-effect management	Total number of survey respondents	Total number of patients asked to complete the survey	Quarterly	Quarterly	Cancer Patient Experience Survey (CPES) 2010	Cancer Patient Experience Survey (CPES) 2011	Line graph See CCT for chartNot an annual survey but expect		Higher is better	>83% for 2010 Outputs from questionnaire actioned and national RT survey planned which could provide a baseline
<a href="#">RA009b</a>	Domain 4: Ensuring that people have a positive experience of care	Clinical Outcome	Patient Experience	Patient satisfaction of radiotherapy side-effect management	Number in denominator experiencing side effects of the radiotherapy	Total number of survey respondents	Quarterly	Quarterly	Cancer Patient Experience Survey (CPES) 2010	Cancer Patient Experience Survey (CPES) 2011	Line graph See CCT for chartNot an annual survey but expect		Neutral	>83% for 2010 Outputs from questionnaire actioned and national RT survey planned which could provide a baseline
<a href="#">RA009c</a>	Domain 4: Ensuring that people have a positive experience of care	Clinical Outcome	Patient Experience	Patient satisfaction of radiotherapy side-effect management	Number in denominator reporting that staff definitely did everything possible to control the side effects of the radiotherapy	Number of survey respondents experiencing side effects of the radiotherapy	Quarterly	Quarterly	Cancer Patient Experience Survey (CPES) 2010	Cancer Patient Experience Survey (CPES) 2011	Line graph See CCT for chartNot an annual survey but expect		Higher is better	>83% for 2010 Outputs from questionnaire actioned and national RT survey planned which could provide a baseline
<a href="#">RA010a</a>	Domain 4: Ensuring that people have a positive experience of care	Clinical Outcome	Rate of Complaints	Rate of complaints received	Total number of formal complaints where the primary complaint is related to radiotherapy	Total number of patients treated during the time period	Quarterly	Quarterly	Provider	Provider	Run Chart		Lower is better	
<a href="#">RA010b</a>	Domain 4: Ensuring that people have a positive experience of care	Clinical Outcome	Complaints upheld	Number of complaints upheld following the operation of the NHS Complaints Procedure	Number of formal complaints where any element is upheld and the primary complaint is related to radiotherapy	Total number of formal complaints where the primary complaint is related to radiotherapy	Quarterly	Quarterly	Provider	Provider	Run Chart		Lower is better	
<a href="#">RA011</a>	Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm	Clinical Process	Reporting using TSRT09	Are trusts reporting using TSRT09?	Are you reporting using TSRT09?	N/A	Quarterly	Quarterly	Provider	Provider	Yes/No		N/A	