

What do radiotherapy centres want from audit?



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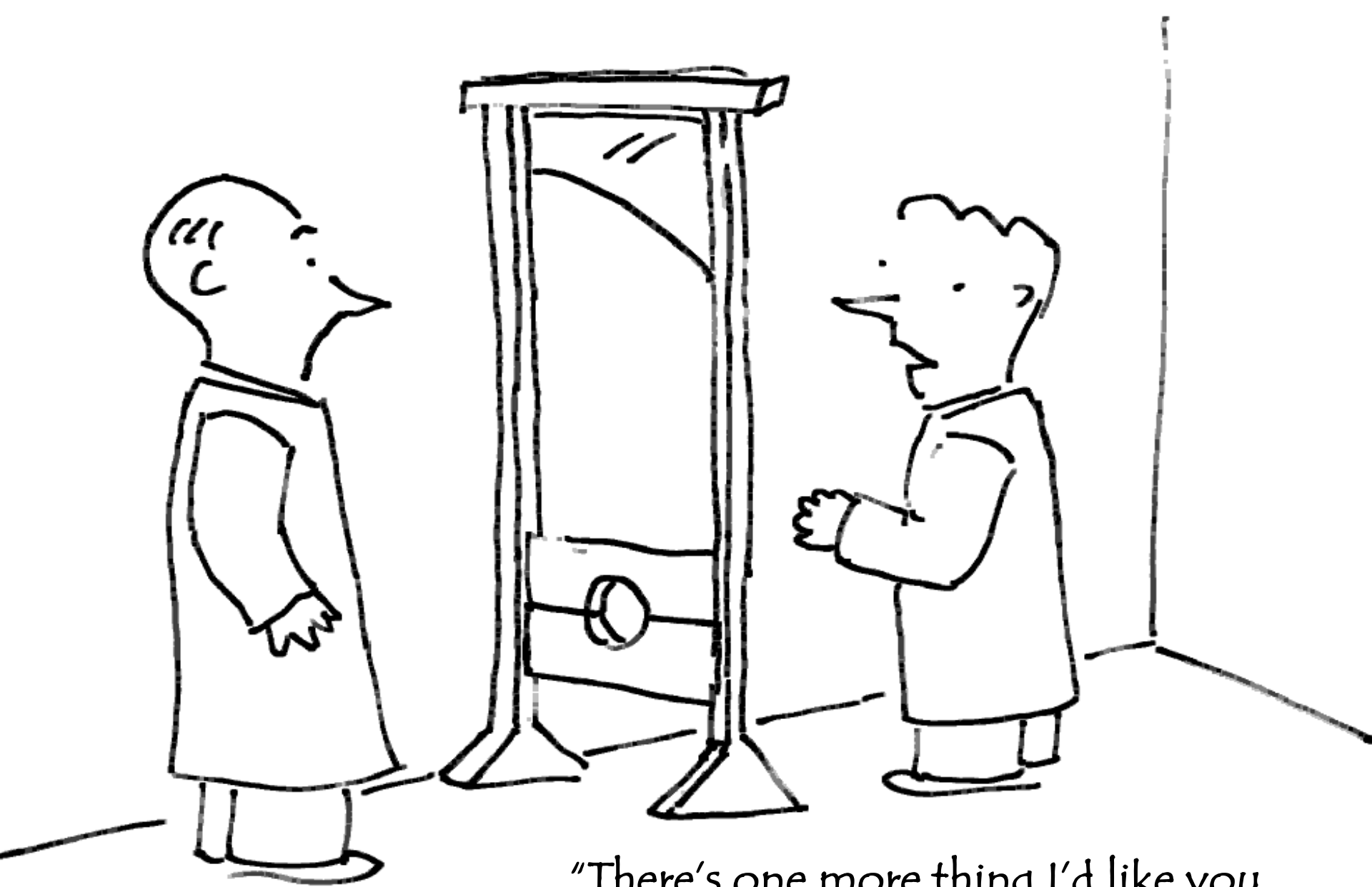
What has audit ever done for us?





Developments at Leicester

- e- code of practise
- kV code of practise
- 3 New linacs – new technology
- IGRT
- IMRT
- VMAT
- New TPS
- New R+V
- New CT scanner
- 4DCT
- Breast FinF
- SABR
- HDR



"There's one more thing I'd like you to commission ..."



Other Factors

- New staff at all levels
- Under staffed
- Constant stream of trainees
- New ways of working
- More use of spreadsheets & software
- Increased risks if incorrect
- Are we sure that what we are doing is okay?



MV





kV





e

IMRT





Other

HDR

VMAT

Small Field

Breast

SABR





Underpinned by audit

- e- code of practise
- kV code of practise
- 3 New linacs – new technology
- IGRT
- IMRT
- VMAT
- New TPS
- New R+V
- New CT scanner
- 4DCT
- Breast FinF
- SABR
- HDR

Audit has made a huge difference to the safe advancement of radiotherapy at Leicester.

What can be improved?

- More specialised – less regional
 - Is this necessary / optimal?
- Most specialised – tied to trials
 - Risk for those not in trials.
- Some areas not audited
 - IGRT
 - CT / 4DCT
 - IT

} Concomitant dose:
Challenge – what are we
doing to optimise dose

Audit



It's the closest we'll ever get to a group hug.