## A health care system to meet our needs The Power of Innovation

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### Our Innovation: How We Improved Care/Services

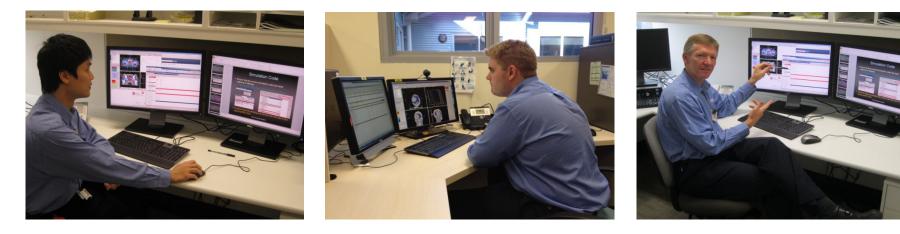
Refined Radiotherapy Quality Assurance activities to:

- Streamline and structure
   processes
  - Improve efficiency
- Improve training resources
- Reduce QA burden and improve staff satisfaction



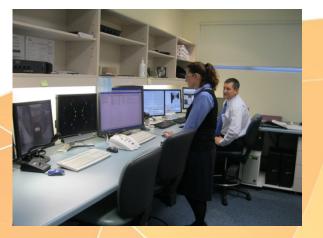


### Improved consistency Zero Radiotherapy Treatment Errors

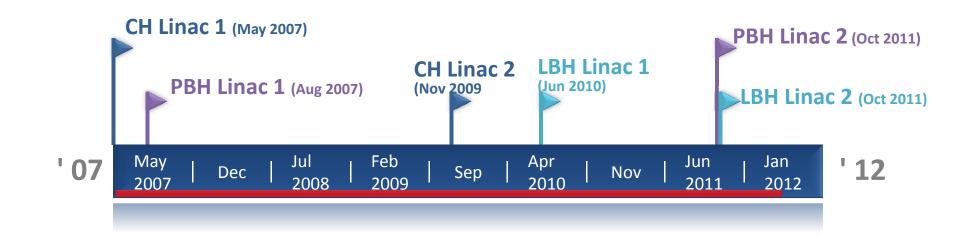


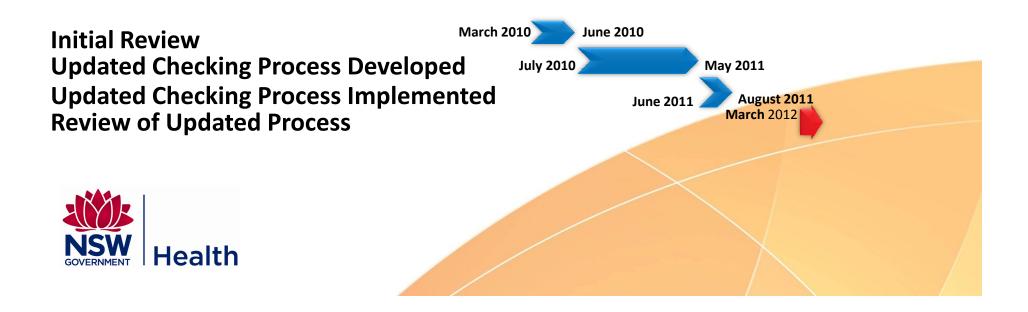


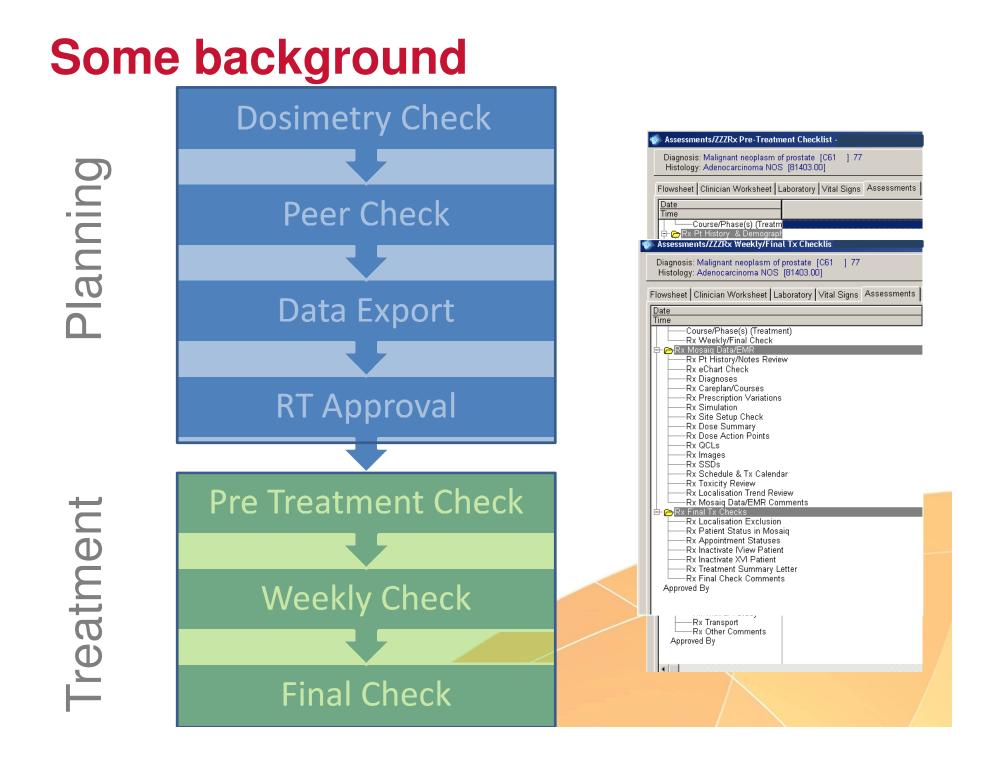




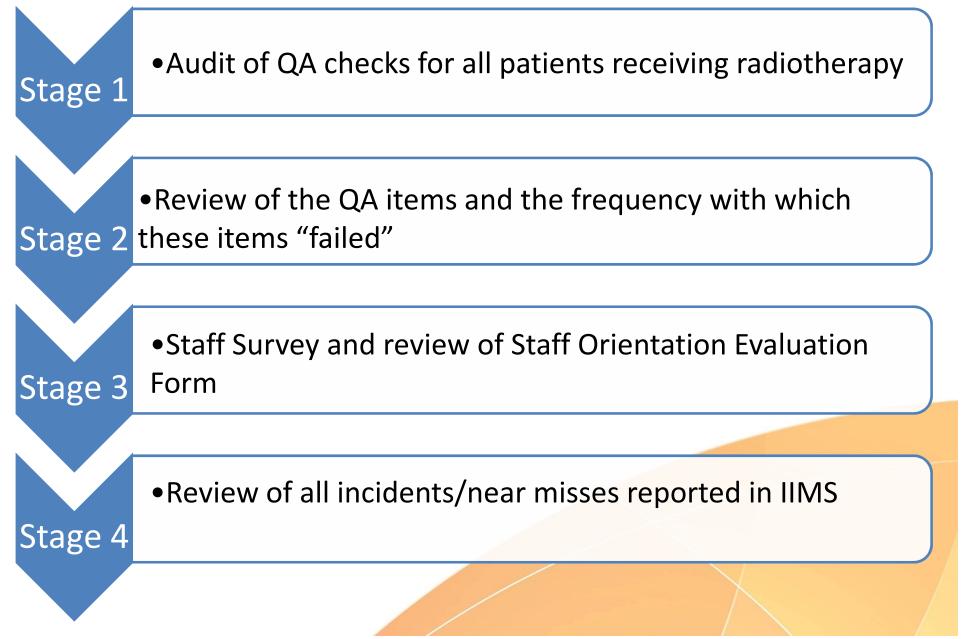
### **Our Inspiration: The Start of the Journey**







### **Our Idea Comes to Life**



### **Initial Review**

Possibly Over Checked

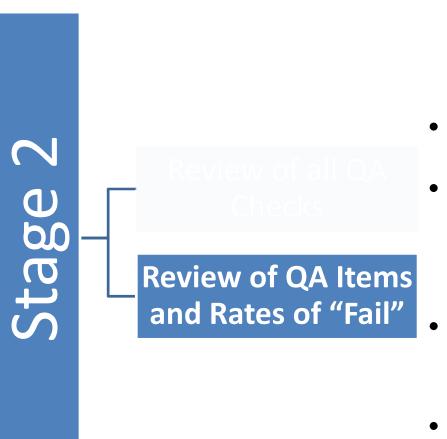
<b>Information Checked</b>	<b>CT</b> Assessment	Planner	Peer	<b>RT Approval</b>	Pre-treatment	Weekly
Implanted Devices	х	х	x	x		_
Consent Form		х	x	x	x	
Bolus/Packing		х	x	x		
Prescription OK		х	х	x	x	X
History Check		х	x	x	x	x
QCL's		х	x	x	x	x
Photos		х	х	x	x	
Toxicity Assessment		x	х	x	x	Х

#### Review of all QA Checks

Possibly At risk

<b>Information Checked</b>	<b>CT</b> Assessment	Planner	Peer	<b>RT Approval</b>	Pre-treatment	Weekly
Image Import					X	
Annotations					Х	
iCom					X	
XVI Import					X	
Conebeam Setup					X	
Demographics					x	
Medications					Х	

### **QA** failure rate review



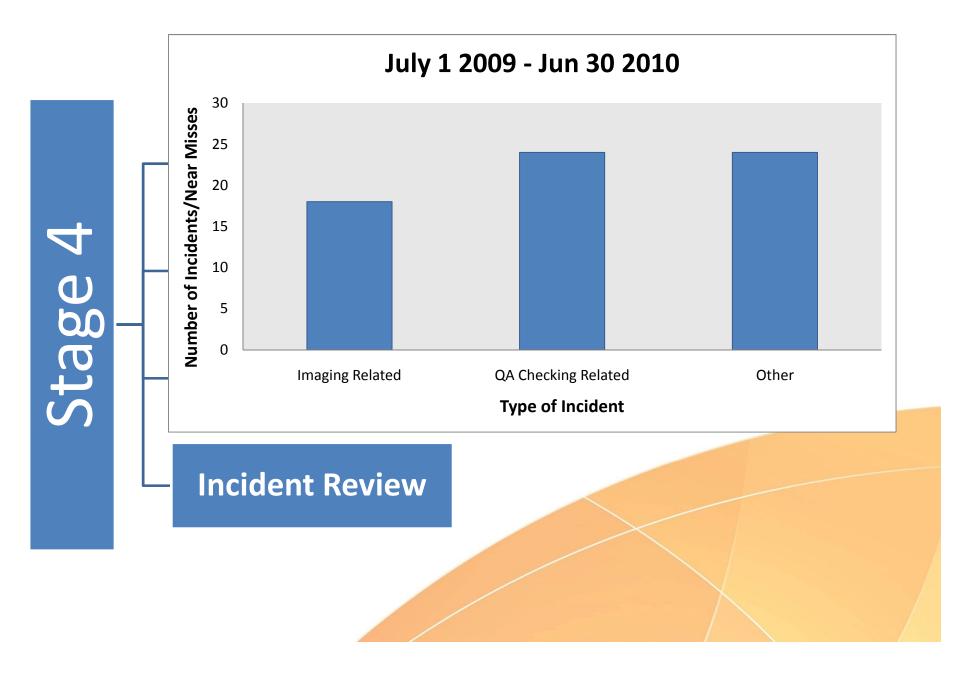
- Rates of "fail" across all stages of the checks
  - 1. Prescription
- 2. Consent Form
  - 3. Toxicity Assessment
- 4. Fields Approved by Planner
  5. Quality Check List
  - 6. Focal Shift = Isocentre
  - 7. Photos
  - 8. Prescription Compliance
  - 9. Implanted Device
- 10. DVH

failing.

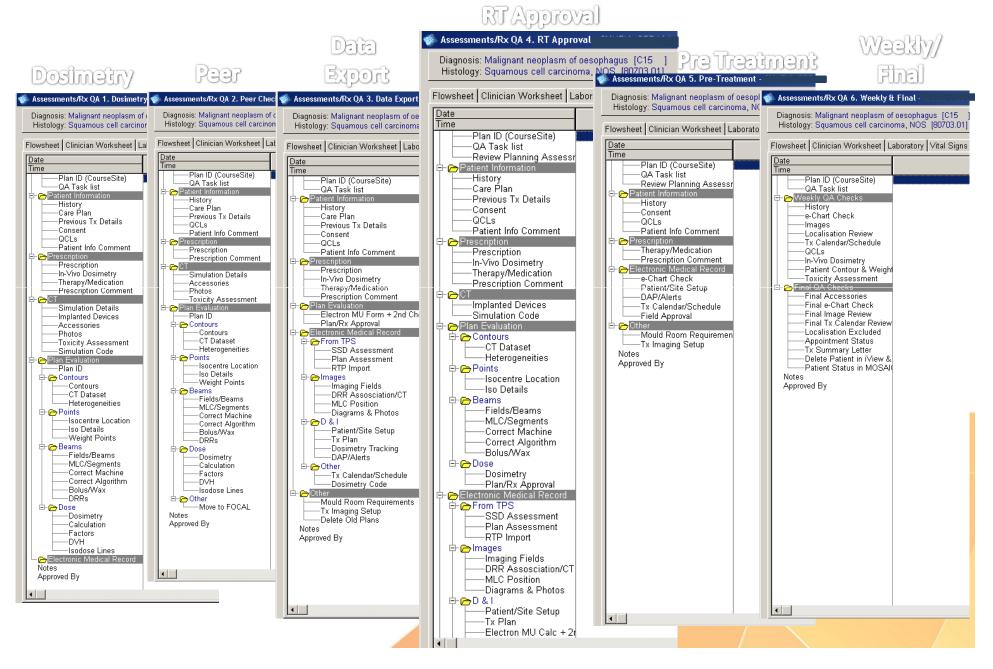
### **Staff survey and input**



#### **Incident Review**



#### **Updated Checks – Mosaiq Assessments**



### **Education Outcome**

	Original Checking Process		Reduction in the Number of Checks
Data Items	83	65	- 18
Number of Individual Checks	206	146	- 60

#### Original Checking Process (6 months Prior to Implementation)

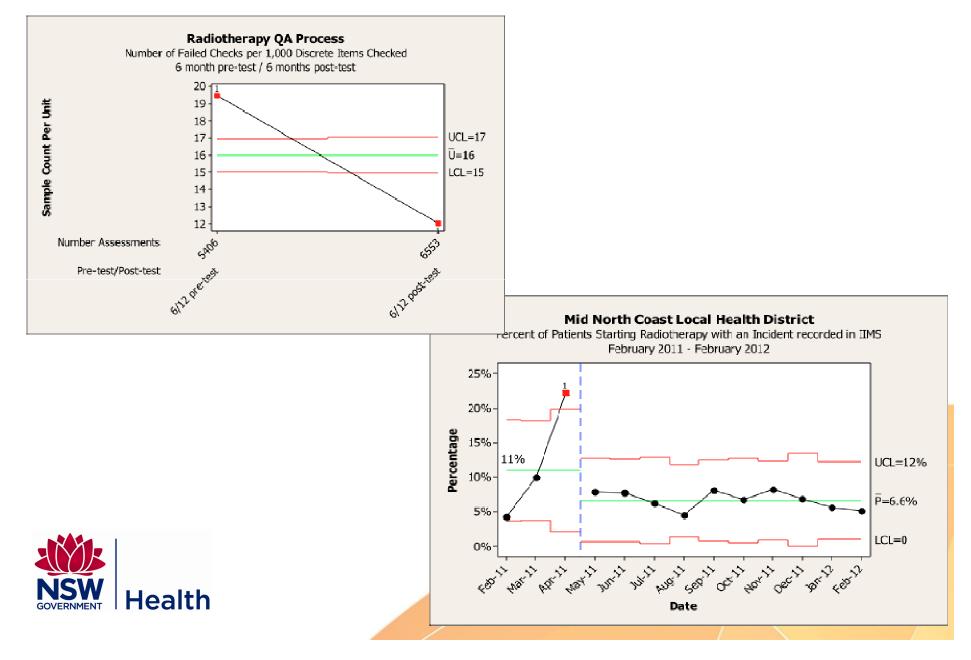
Total				
Assessments 5406				
Data Items 206				
Discrete Items Checked 152 117	,			
Total Number of Fails 2963				
% of Fails 2%				
Jpdated Checking Process (6months Post Implementation)				
Total				
Assessments 6553				
Data Items 146				
Discrete Items Checked 133 105				
Total Number of Calls 4000				
Total Number of Fails 1603				
% of Fails     1%				



### **Education & Training Resources**

Quick Ref Sheet	Dosimetry Check	Peer Check	Data Export	RT Approval
Course/Phase (s) ` (Treatment)				
Review Planning Assessments				
Patient Information				
History	Notes & Documents	Notes & Documents	Only if Previously Pending	Notes & Documents
Care Plan	RFC	RFC	Only if Previously Pending	RFC
Previous Tx Details	Booking Assessment & Documents	Booking Assessment & Documents	Only if Previously Pending	Booking Assessment & Documents
Consent	Sim (IV) and T'ment		Only if Previously Pending	
QCLs	Check Dates	Check Dates	Only if Previously Pending	
Prescription				
Prescription	Remains Pending,	Remains Pending	Confirm Approval	Rx details & approval
In Vivo Dosimetry	Booking & MOSFET, Assessment, QCL, Interest Point on Plan		Only if Previously Pending	Booking & MOSFET, Assessment, QCL, Interest Point on Plan
Therapy/Medication	Chemo Timing, Booking Ass'ment for Meds		Only if Previously Pending	Chemo Timing, Booking Ass'ment for Meds
СТ				
Simulation Documentation	Cross Check photos and Notes, CTDi, Landmarks, Brst Doc 'complete'	Cross Check photos and Notes, CTDi, Landmarks, Brst Doc 'complete'		
Implanted Devices	ls ext-CT scale req? Check CT & XiO, if p'mker follow protocol			ls ext-CT scale req? Check CT & XiO, if p'mker follow protocol
Accessories	Labelling, Orientation storage location.	Labelling, Orientation storage location.		
Photos	ID & positioning	ID & positioning		
Toxicity Assessment	Radical pts, all criteria complete	Radical pts, all criteria complete		
Simulation Code	As in Booking Ass			As in Booking Ass

### **Quality Award submission**



### **Our Insights: What We Have Learned**

There is scope to decrease the QA burden maintaining or even improving Quality

Use of detailed clinical practice data provides significant confidence when changing practice.



KISS - Staff readily adopt clearer simpler practices.

### **Our Insights: What We Have Learned**

QA can in some respects be likened to searching for the needle in a haystack. The trick is to make the haystack smaller so the only thing left is the needle.

Accurate tracking of QA activity allowed NCCI to do otherwise impractical analysis and identify opportunities for safe improvements in efficiency



# Thanks to all the NCCI Radiation Therapists and especially the project team!















