Policy Statement

Radiotherapy: commissioning

This policy statement aims to provide an overview of Cancer Research UK’s position on the commissioning of radiotherapy services. It is one of a number of policy statements on radiotherapy which explore different issues in detail.

Background

Commissioning refers to the process by which services are planned and paid for in the NHS. The cost of radiotherapy varies widely across English trusts, from £82 to £242 per fraction.\(^1\)

Additionally, the lack of a suitable tariff has been identified as one of the biggest barriers to delivering more advanced forms of radiotherapy.\(^2\)

The level at which radiotherapy is commissioned in the NHS after the reforms is also up for debate.

Our position

Strong commissioning is at the heart of delivering a comprehensive network of radiotherapy centres with consistency of process and outcome. We would therefore like the Department of Health to make recommendations on the commissioning of cancer services in the new health architecture. We believe that radiotherapy services should be commissioned at the national or regional level.

In evidence to the Department of Health in 2010\(^3\) the National Radiotherapy Implementation Group reported that the real growth in commissioned capacity achieved over the past two years has been minimal, although some local successes have been achieved. They also noted that local planning and commissioning has led to inequalities in radiotherapy provision, price and the standard of treatments offered across the country.

The majority of radiotherapy activity is commissioned through block contracting, with some local tariffs in place.\(^4\) The lack of consistency in the service is one reason why the cost of radiotherapy ranges across Trusts.\(^5\)

Block contracting is particularly concerning. Services commissioned in this way are not rewarded according to the amount or complexity of radiotherapy required for each patient, simply the number of patients treated at each centre. This means that improvements in service delivery and quality of radiotherapy go unrewarded.

While the quality of information on treatment and outcomes is being improved, there is a lack of transparency from some providers about how they deliver radiotherapy and what they charge for it.\(^6\)
A survey by Cancer Research UK and the Society and College of Radiologists of over 90 staff working within the service showed concern amongst the community about proposed changes to commissioning structures within England.

The lack of a suitable tariff for radiotherapy has been cited as one of the major barriers affecting the implementation of new technologies across England. We welcome plans to introduce the full mandated tariff in April 2013. It will be important to ensure that it has the flexibility to adapt as advanced techniques are introduced.

For more information, please contact Cancer Research UK’s Policy and Public Affairs team on 020 3469 8360 or publicaffairs@cancer.org.uk.

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1 Cancer Research UK 2009 Achieving a world class radiotherapy service across the UK.
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