Verslag van het college van geneesheren RADIOTHERAPIE-ONCOLOGIE 1 januari 2020 – 31 december 2020

Rapport du collège de médecins RADIOTHERAPIE - ONCOLOGIE 1 janvier 2020 – 31 décembre 2020

Dr. Vincent Remouchamps
Voorzitter-Président
Dr. Reinhilde Weytjens
Overnemend Voorzitter-Président sinds eind 2020

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DEEL 1 WERKING VAN HET COLLEGE VAN RADIOTHERAPIEONCOLOGIE

1.1. Inleiding

De commissie Peer Review voor Radiotherapie-oncologie werd, op initiatief van het Ministerie van Volksgezondheid, in 1995 opgericht en bestaat uit radiotherapeuten en fysici. De doelstelling van deze commissie is de kwaliteit van de bestralingsbehandelingen trachten te verbeteren door het organiseren van peer review activiteiten.

In mei 2000 werd het college van geneesheren radiotherapie geïnaugureerd.

In september 2000 werd overgegaan tot een formele integratie van het door het ministerie benoemde college enerzijds en de reeds sinds 1995 bestaande commissie Peer Review voor Radiotherapie-oncologie anderzijds.

In juli 2003 werd een nieuw college geïnstalleerd, na verschijnen in het staatsblad (KB 30-7-2003).

In 2006 werd opnieuw een nieuw college samengesteld na verschijnen in het staatsblad (KB 15-12-2006).

In 2012 werd een nieuw college samengesteld (KB 26/11/2012), de samenstelling vindt u onder 1.2.

In 2012 werd opnieuw een nieuw college samengesteld na verschijnen in het staatsblad (KB 26/11/2012).

Eind 2017 werd een nieuw college samengesteld (KB 04/12/2017), de samenstelling vindt u onder 1.2.

In 2020 was voorzien om aan verschillende projecten te werken:

- Audits
- Procalung
- Quality Indicators
- BELDART
- PRISMA-RT
- Innovatieve technieken

Ten gevolge van de Covid-19 pandemie hebben de **audits** echter niet plaats gevonden. De audits zijn wettelijk verplicht maar het KB voorziet dat een externe klinische audit maar om de vijf jaar wordt uitgevoerd. Om hieraan te voldoen zullen de audits bijgevolg terug worden uitgevoerd van zodra de pandemiemaatregelen dit toelaten.

De stand van zaken van deze verschillende projecten vindt U in deel 2 van dit verslag waar feedback wordt gegeven over de uitgevoerde projecten.

1.2. Organisatie van het college radiotherapie-oncologie

Leden van het college in de periode 2000-2003 (KB 10/6/1999):

Prof. P. Vanhoutte (voorzitter)

Dr. P. Huget (ondervoorzitter)

Prof. C. Weltens (contactpersoon en secretaris)

Dr. G. Demeestere

Dr. W. Deneve

Dr. D. Marchal

Prof. P. Scalliet

Dr. K. Vandeputte

Leden van het college in de periode 2003-2006 (KB 30/7/2003):

Dr. P. Huget (voorzitter)

Prof. P. Scalliet (ondervoorzitter)

Prof. C. Weltens (contactpersoon en secretaris)

Prof. J.M. Deneufbourg

Dr. D. Marchal

Dr. P. Spaas

Dr. K. Vandeputte

Dr. L. Vanuytsel

Leden van het college in de periode 2006-2012 (KB 15/12/2006):

Prof. P. Scalliet (voorzitter)

Dr. P. Spaas (ondervoorzitter)

Prof. C. Weltens (contactpersoon en secretaris)

Dr. C. Mitine

Dr. K. Vandeputte

Dr. D. Van den Weyngaert

Dr. L. Vanuytsel († 30-8-2008)

Leden van het college in de periode 2012-2017 (KB 26/11/2012):

Prof. Y. Lievens (voorzitter)

Dr. V. Remouchamps (ondervoorzitter)

Prof. C. Weltens (contactpersoon en secretaris)

Prof. D. Van den Weyngaert (tot december 2015)

Dr. R. Burette

Dr. L. Moretti

Dr. N. Jansen

Dr. K. Stellamans

Leden van het college in de periode 12/2017-2020 (KB 04/12/2017):

Dr. V. Remouchamps (voorzitter)

Prof. M. Lambrecht (contactpersoon en secretaris)

Prof. Y. Lievens (vice voorzitter)

Dr. L. Moretti

Dr. N. Jansen

Dr. K. Stellamans

Dr. R. Weytjens

Dr. X. Geets

Naast de door het ministerie aangestelde leden, wordt het college sinds zijn installatie vervoegd door experten (fysici, verpleegkundigen en radiotherapeuten).

Vanaf eind 2019 is de samenstelling van de commissie van experten als volgt:

radiotherapeuten

Prof. P. Scalliet

Prof. C. Weltens (tot eind 2020)

Prof. Y. Lievens

Prof. V. Remouchamps

Dr. D. Van Gestel (voorzitter BVRO)

p<u>hysici</u>

A. Rijnders

F. Vanneste

Prof. D. Verellen

M. Tomsej

J. Vandecasteele (voorzitter BVZF/BSPH)

verpleegkundigen

L. Van den Berghe (voorzitter VVRO)

W. Hontoir (voorzitter Afiter)

A. Vaandering

Opmerking aangaande de samenstelling van het College Radiotherapie-Oncologie 2020 :

Aangezien de laatste hernieuwing van de mandaten van de leden van het College plaatsvond in november 2017, dienden er nieuwe benoemingen te worden gedaan. Aangezien deze in 2020 niet in het Belgisch Staatsblad konden worden gepubliceerd, werd met de FOD afgesproken om deze wijzigingen al functioneel door te voeren.

- Luigi Moretti en Nicolas Jansen vernieuwden hun mandaat.
- Yolande Lievens en Vincent Remouchamps niet, maar ze blijven als experts.
- Sarah Roels (St Jan Brugge) en Jean François Rosier (Jolimont) treden toe tot het College.
- Maarten Lambrecht gaat verder als secretaris.
- Reinhilde Weytjens neemt het voorzitterschap over van Vincent Remouchamps.

1.3. Plenaire vergaderingen

Volgende plenaire vergaderingen (online o.w.v. de Covid-19 pandemie) werden gehouden in 2020:

DATUM	
02-06-2020	
01-12-2020	

De verslagen van bovenstaande vergaderingen vindt u hierachter.

Report Meeting 02-06-2020

15.30-17.30

Aanwezigen: Aude Vaandering, Reinhilde Weytjens, Karin Stellamans, Jan Vandecasteele, Florian Charlier, Nicolas Jansen, Burak Yalvac, Vincent Remouchamps, Francoise Vanneste, Luigi Moretti, Dirk Van Gestel, Yolande Lievens, Brigitte Reniers, Xavier Geets, Dirk Verellen, Ludwig Van den Berghe, Frederik Vanhoutte

1. Welcome

Vincent Remouchamps

2. College composition

Vincent Remouchamps

- Vincent Remouchamps and Yolande Lievens will quit the college board and will remain as experts.
- They will be replaced by Sara Roels and (Yannick Neybuch) Jean Francois Rosier
- Members in college
 - o President: Reinhilde Weytjens
 - o Secretary: Maarten Lambrecht
 - o L. Moretti
 - o N. Janssen
 - o K. Stellamans
 - o X. Geets
 - o S. Roels
 - o JF Rosier

3. Procalung Update

Florian Charlier

Cfr slides.

Remark of dr Moretti: there was a contract between the Belgian Cancer Registry and Namur (the president of the college) and this contract needs to be made with institute Bordet.

Now this contract needs to be made with Bordet.

Action Point: Dr Remouchamps will contact BCR about the transfer of data.

Dr Geets remarks: this process was very cumbersome and difficult. For future project we should take care to make things easier.

4. QI project and Covid survey

Aude Vaandering

QI project Cfr slides.

There is a plan to generate expert groups to further improve the QI project

Dr Jansen: contacted Elekta to find out how they can help us to automatically or semi automatically extract data.

There is interest in the QI project from the ministry of health of Israel. A TC will be set up.

Professor Lievens clarifies by telephone: Israel is relooking at reimbursement system. The college agrees to go further with Israel

COVID and cancer care survey: cfr slides

Key points:

- The final analysis there is a slight drop in the number of departments participating
- Not all departments are able to follow-up on the number of tested patients.
- Suspected patients: treatment was continued.
- Lowest point on a national level: 87% of the treatments.

5. Prisma RT

F. Vanhoutte

Over the last months there were no big analyses going on. Main effort get everything working. Both centers were able to use the benchmark.

Discussion on the satellites: if you want to analyze them separately you need to add them as separate centers.

Action points:

- FV: OVERLOOK what has been paid
- Proposal for a project through the quality managers

6. Beldart Update

Burak Yalvac

Cfr slides

7. National questionnaire on patient satisfaction:

Dirk Verellen

Proposal to start a national project on patient satisfaction

- Standardized Questionnaires
- Ideally linked to patient reported outcomes (PROM)
- Cavé: saturation on questionnaires
- Needs to be automated
- AV will discuss this proposal on the next quality managers meeting

8. Varia

Because of the covid HOD meeting will be virtual

• Frederik Vanhoutte will present on the HOD meeting about the new FANC law. For future meetings: proposal to make it dual: both in person and remotely accessible.











ProCaLung status report

Florian Charlier

College of Physicians for Radiotherapy Centers Meeting, June 2, 2020

On behalf of the ProCaLung team: Y. Lievens, V. Remouchamps, X. Geets, M. Lambrecht and L. Moretti

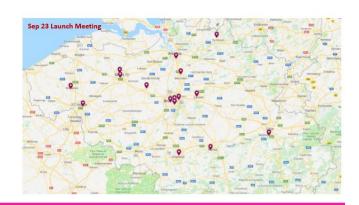
ProCaLung

In partnership with



Plan

- What happened until now
 - → All the work done and accomplishments
- What to expect next
 - → Resolve legal requirements
 - → Start ProCaLung



What happened until now

- · Organize delineations reviewing
 - Eszter's replacement (notice on 23/9/2019)
 - Training of a RTT in Bordet for a 1/3 FTE (started 15/10/2019)
 - Actively looking to hire a RTT (since October 2019)
 - We might have a new 1/3 FTE candidate (to be confirmed)

ProCaLung website

- Including public-oriented information
- Coding finalized, in pre-launch testing phase
- In three languages (EN, FR, NL)
- Mobile friendly
- Temporarily accessible via https://testv2.procalung.be



ProCaLung website

- Including public-oriented information
- Coding finalized, in pre-launch testing phase
- In three languages (EN, FR, NL)
- Mobile friendly
- Temporarily accessible via https://testv2.procalung.be



Also done

- Implementations of the clinical report forms
 - Online with Aquilab (Share Place)
 - Online on the Belgian Cancer Registry website (specific registration, similarly as the one for SBRT)
 - Paper version (not automatically generated) as support for web encoding
- Submission to the Ethics Committee
 - Settings explained (not so trivial since not a clinical trial), information for patients, protocol
 - · Comments already used to improve the project
 - Awaiting opinion

Privacy Impact Assessment (PIA)

- A 35 pages document explaining
 - Exactly what data will be collected?
 - What happens to it, exactly ? All dataflows: all software, hardware, access, backups, etc.
 - Security measures: also including software and hardware
 - · And finally an appreciation of the risks taken and their severity
 - [LOW and LOW → Best possible result]
- Done in Bordet although not mandatory since Bordet is not the controller,

It is at the disposal of FOD/SPF if necessary and useful to them

Work on contracts (started in July 2019!)

- 4 contracts: College-Aquilab, Bordet-BCR, College-Bordet, College-RT centers
- College Aquilab
 - Reviewed and modified to include data processing steps more precisely
 - · The draft is complete except for billing part
- Bordet Belgian Cancer Registry
 - The scope of work for the delegated tasks is established and agreed upon
 - The draft is complete except for billing part

Work on contracts (started in July 2019!)

- The Belgian Cancer Registry only collaborates if co-owner of data collected on their website
- Co-ownership: Approval of College required to access project data
- Agreed by SPF → SOLVED (?)

Work on contracts (started in July 2019!)

- College Bordet
 - The scope of work for the delegated tasks is established and agreed upon
 - Data processing agreement (DPA) is done
 - Draft complete but...

Not so straightforward: the data processing framework

- Identifying stakeholders, including accountability and responsibility chain
- In particular:
 - The College is the <u>promotor</u> of this project (or rather the FOD/SPF?)
 - The Federal Public Service Health (FOD/SPF) will own collected data (so it is the <u>data controller</u> in GDPR terms)
 - May the College sign a contract in the name of the FOD/SPF and its data protection officer (DPO)?
 - · We prepared everything (6 months work!) but something went wrong...
 - Can the College sign any contract ?

"Who is the College?"

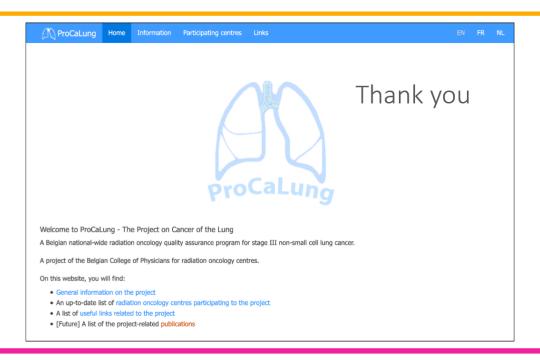
- The entity contracted by the Belgian State for the College missions is the President's institution
 - This is necessary for the financial transactions as the College is not a legal entity
 - But this also impacts (defines) the chain of responsibilities in the GDPR terms
 - Even if the College is <u>executing</u> the missions for the contracting hospital, it does not have a DPO for example
 - This changes everything: Contracts should be made with that hospital if it can take full responsibility
 - And Bordet is not the processor for the promoter/controller but rather the processor of another processor
- Within the GDPR, this must be perfectly/clearly established and respected for the legal team, and it takes <u>a lot</u> of time, especially now

What happens next?

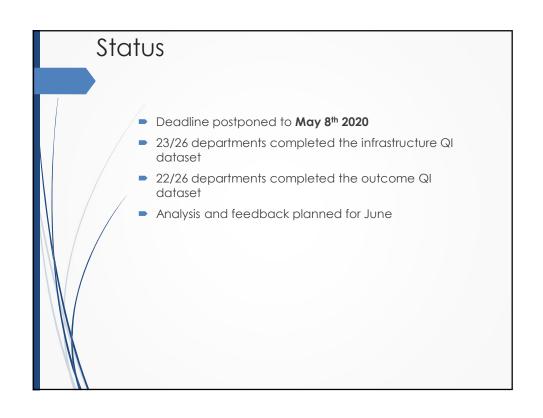
- Contracts:
 - "College Aquilab": Once billing issues are covered, ready to be submitted to Aquilab
 - "Bordet Belgian Cancer Registry": Once billing issues and data ownership are finalized, submission to BCR
 - "College Bordet": Once the <u>legal framework</u> is clear, it will be adapted or completely rewritten
 - "College RT centers": Same status
- What will happen with change of presidency?

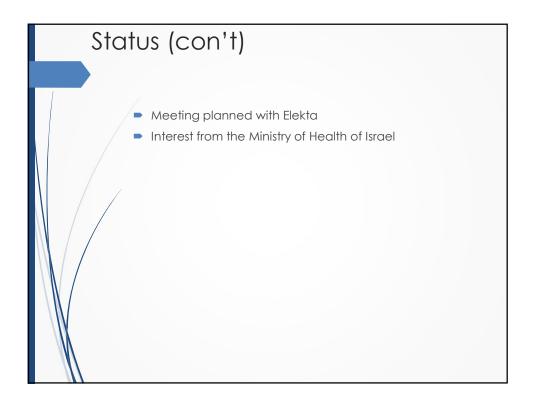
For RT centers

- Once everything is settled, RT centers will be contacted with
 - · Project information, documents and tools: Protocol, forms, manuals, OCR software
 - Contract
 - Requirements to start:
 - See with local IT department to give required access to BCR website to quality manager (and/or other, 2 is better)
 - Specify in the department who will be working on the project and log this on a provided document
 If the tasks require it, user access to the Share Place platform will then be provided, and training
 - NB: Satellite centers may participate and will be operationally "handled" as independent centers









COVID19 and Cancer Care Survey

Selma Ben Mustapha Maarten Lambrecht Liv Veldeman Aude Vaandering

Meeting of the College 2/06/2020

Aim of the survey

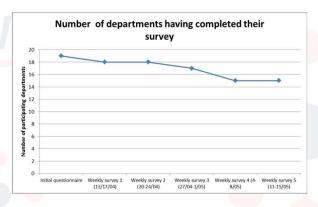
- Assess and evaluate the impact of the COVID-19 pandemic on Belgian RT departments
- Potentially evaluate the shortcomings (if any) in the current organization

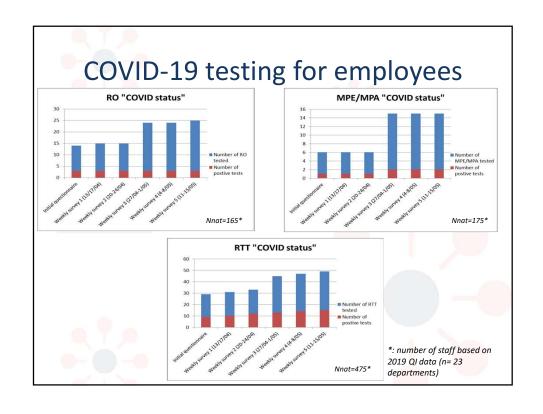
Analysis

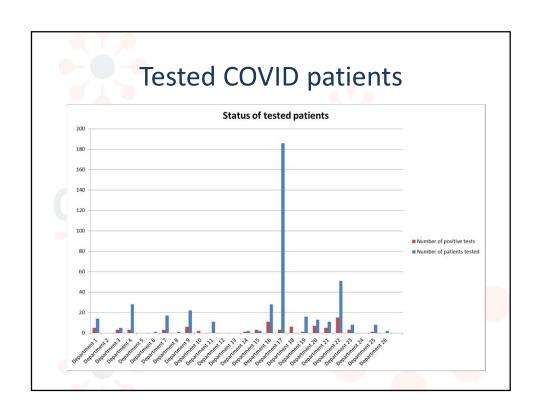
- Data export into Excel
- 1st Analysis and report (based on Initial Survey input)
- 2nd Analysis (2/03/2020 15/05/2020)
 - Initial survey (week 2/03/2020 week 06/04/2020)
 - Weekly surveys till week of 11/05/2020

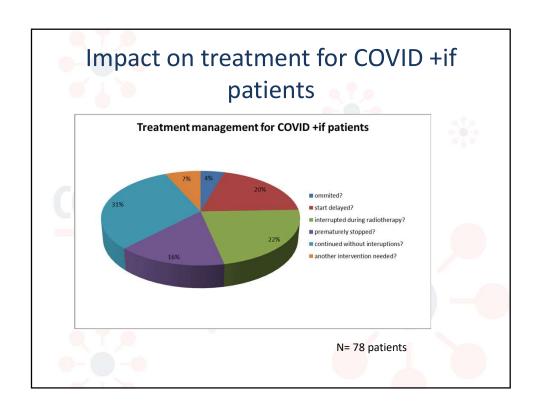
Participating departments

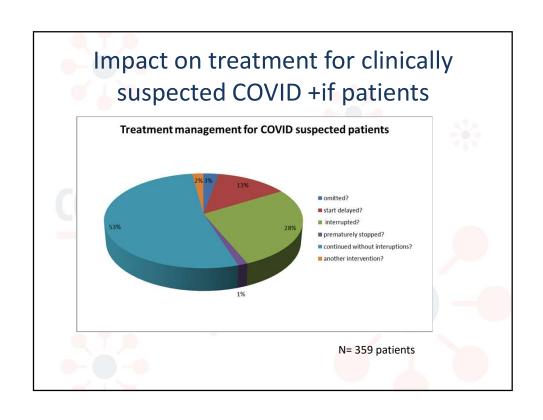
- 26 departments were contacted with the survey
 - 21 departments responded partially (n=3) or completely (n=19) to the initial survey (+1 department will do this at a later stage)

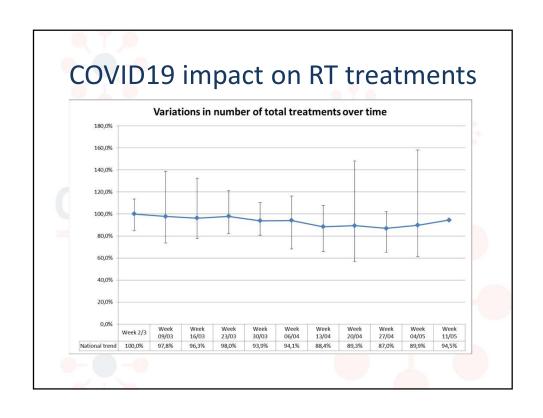


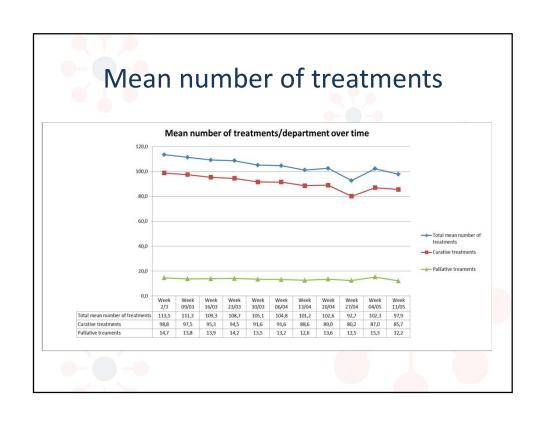


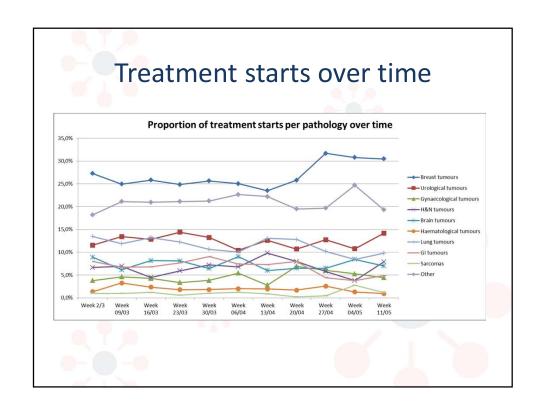


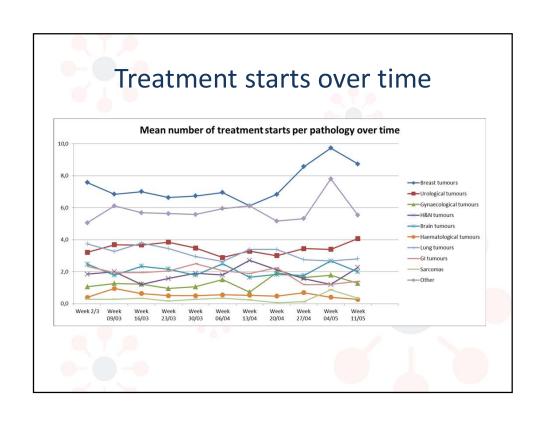












Use of LINACS

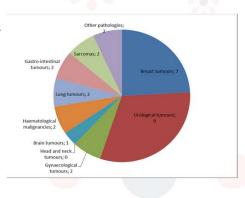
 All department except for one have kept all of their LINACs operational

Changes in RT indications

- Up until the week of **April 6**th:
- 9 out of the 17 departments that responded (52.9%) made changes in their indication for

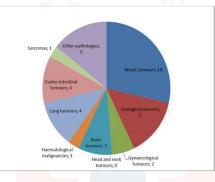
radiotherapy

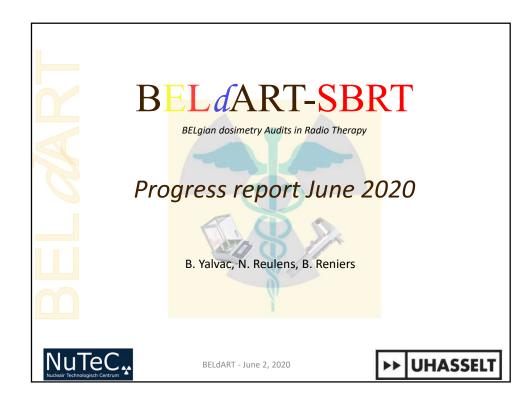
- For a 100% of these department this concerned urological
- For 7 out of 9 departments this concerned breast tumours
- For 3 departments, this was further refined at a later stage (same pathologies)



Changes in fractionation

- Up until the week of April 6th:
- 12 out of the 18 departments that responded (66.7%) made changes in their fractionation schemes
 - For 10 out of 12 departments this concerned changes in fractionation schemes for breast tumours
 - For 5 out of 11 departments this concerned changes in fractionation schemes for urological tumours
- For 2 departments, further refinements were made but for the same pathologies
- For 1 department fractionation schemes were further adapted to include more pathologies (brain)





SBRT



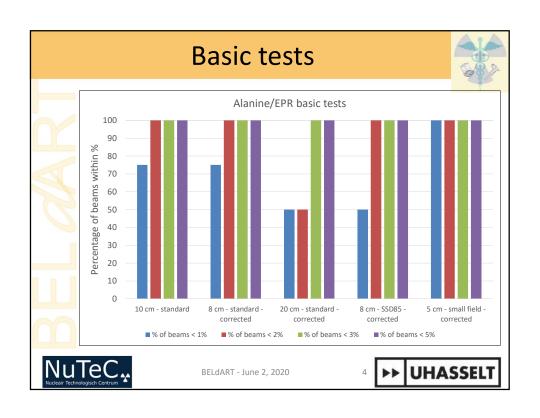
- 6 audits performed
 - 2 in analysis
- 1 planned in June
- 1 planned in September

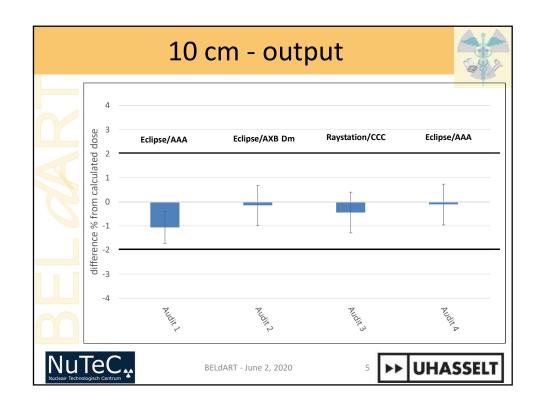


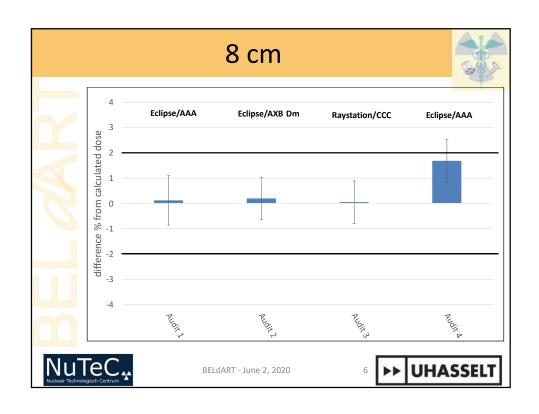
BELdART - June 2, 2020

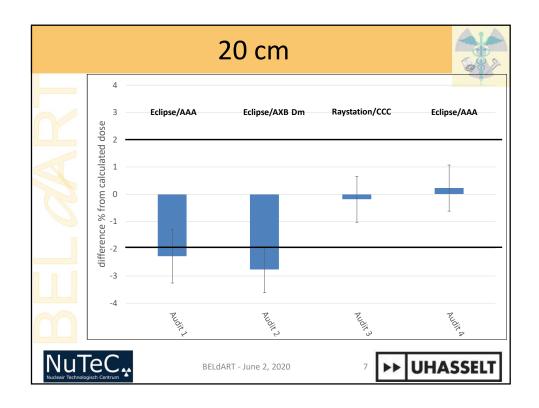


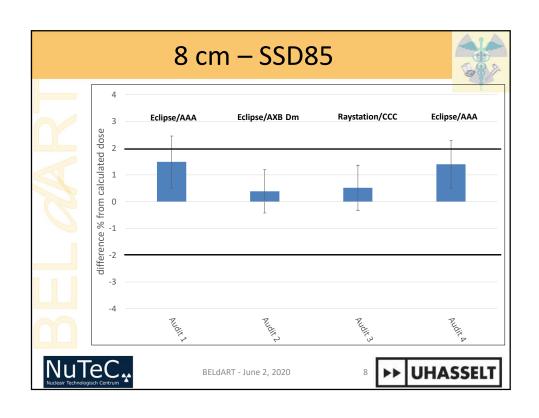
SBRT • Finished analysis **CT-slice Algorithm** (mm) **TPS** AAAAudit 1 **Eclipse** 2 Audit 2 **Eclipse** Acuros Dm 3 Audit 3 Raystation CCC 2 Audit 4 **Eclipse** AAA2 NuTeC. UHASSELT BELdART - June 2, 2020

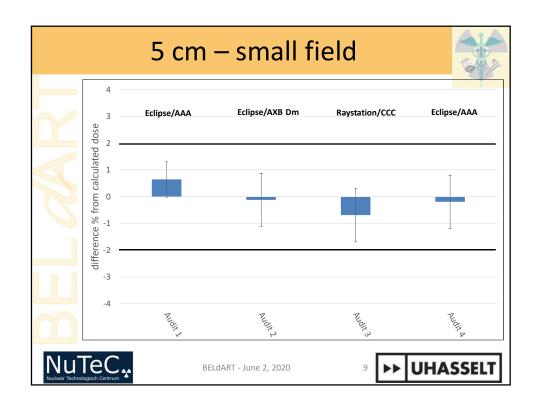


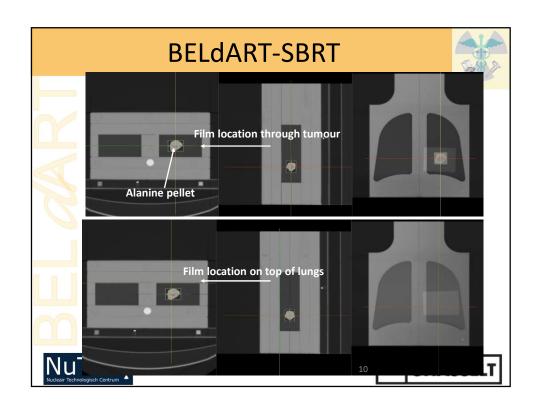


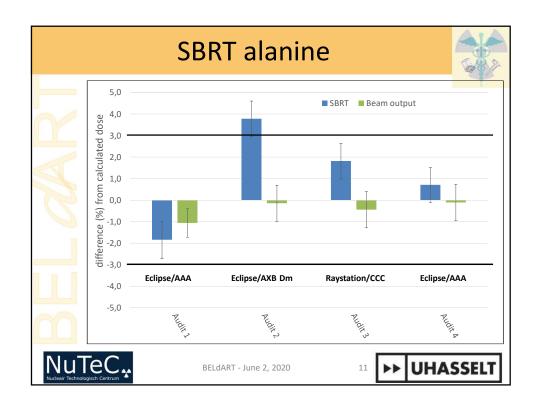


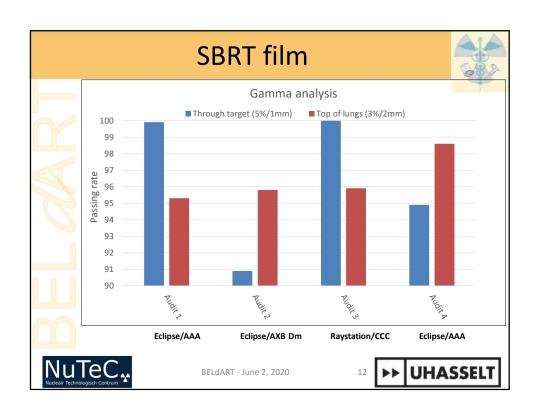












Conclusions SBRT



- · First results mixed
- To early to draw conclusions, more audits needed
- Gamma criteria under discussion



BELdART - June 2, 2020

13 ►► UHASSELT

Next steps



- Meeting with centres who performed audit
- Investigation of complexity metrics to include in analysis
- Recalculate plans with AAA or Acuros for some audits



BELdART - June 2, 2020



New alanine wrappings



- 4 pellets per wrapping:
 - Flat beams
 - Electron beams
- 1 pellet per wrapping:
 - FFF photon beams
 - Change procedure: (irradiate 3x for basic tests)



BELdART - June 2, 2020

▶ UHASSELT

New alanine wrappings





New wrapping



Old vs New



BELdART - June 2, 2020

►► UHASSELT



Minutes meeting 01-12-2020

Present: R Weytjens, Aude Vaandering, Dirk Vangestel, Dirk Verellen, Xavier Geets, Luigi Moretti, Maarten Lambrecht, Nicolas Jansen, Vincent Remouchamps, Yolande Lievens, Sarah Roels, Frederik Vanhoutte, Karin Stellamans, Florian Charlier, Jan Vandecasteele, Heleen Bollen.

1. Feedback last meeting 02/06/2020

National questionnaire on patient satisfaction: A meeting was planned through quality managers.

2. College of Oncology (Reinhilde Weytjens)

Contact with Prof M Peeters, current president. Closer cooperation was discussed: intention to invite each other's chairman for applicable/interesting agenda items and forward the meeting agenda to each other. Renewal of the mandates needed: Dr Philippe Spaas and prof dr. Paul Vanhoutte need to be replaced by two other members from the radiotherapy-oncology community.

Proposal: BeSTRO appoints 2 members, preferentially one member related to the college, from BeSTRO.

3. Prisma RT (F Vanhoutte)

Cfr Slides

Current status:

- Inclusion of satellite centers from main sites not possible without extra funding
- There is currently no clear project which has emerged from the quality manager group.
- Unclear who manages the project
 - Data belongs to the College; two members have access: dr K
 Stellamans and dr V Remouchamps
 - o The college mandates F Vanhoutte to handle the data
- Further actions
 - Vincent Remouchamps will try to contact Dr Saskia Van den Bogaert to set up a contract with Frederik Vanhoutte to handle the data.
 - Within the QM group a project will be set-up to look at specific techniques.

4. Quality Indicators (Aude Vaandering)

Cfr slides

Current status: To look at the collected data and perform statistical analysis.

Future plans: To continue the project, however the project should be on a larger scope and be able to deal with large amounts of data.

There is some concern on whether or not this project is within the GDPR legislation.

Plan: Dr Saskia Van Den Bogaert will be contacted, as well as juridical assistance from Bordet or the VBS-GBS.

5. ProCaLung update (Florian Charlier)

Cfr Slides:

- 10 Centers have not given feedback yet.
- A package is being prepared to send to the different centers and help them with the practical organization.
- Belgian Cancer Registry issues will be unblocked, after contact with juridical aid. The FOD will be owner of the data
- Legal advice provided by IJB. Means additional cost for the project.
 Template that was created for the ProCaLung project can later be used for similar College projects. We will therefore ask the FOD to use the money provided for the audits, for this legal advice.

6. Procahn (Heleen Bollen)

The follow-up study is ready to start. However currently blocked at ethical committee because of contract issues.

There was a concern raised that an agreement on authorships and acknowledgments should be reached beforehand.

7. Varia

- Meeting of the heads of department: organized during spring meeting: it will be a virtual meeting.
- The search for an exchange platform for RT data (Dirk Verellen)
 - A small group will be formed and will tackle the issues and look whether or not existing software such as Aquilab is sufficient to fulfill this task.

College meeting

December, 1 2020

PRISMA-RT.be



Follow-up

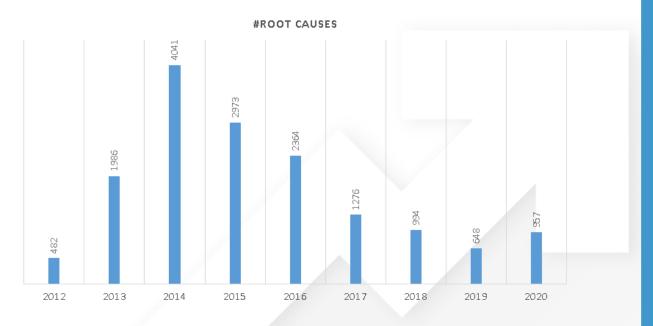
- Can we separate satellite centers from main sites?
 - · Not with additional funding
 - · But web platform has been made available to the satellite sites requesting it
- Specific project
 - No clear project has emerged from QM group
 - To be discussed
- Financing
 - Transparancy?
 - Relationship College-Adheco



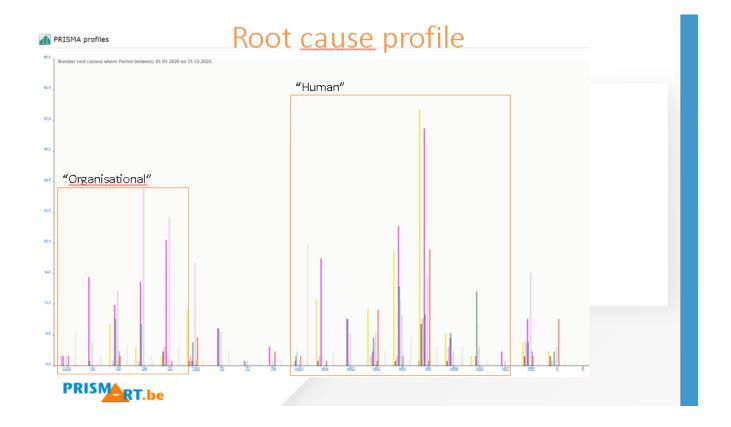
Status benchmark



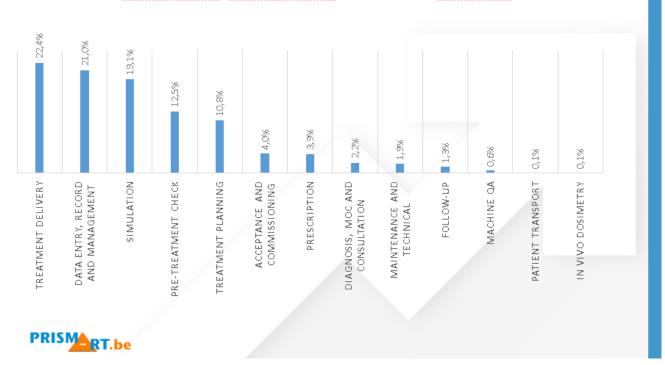
added root causes (total per year)



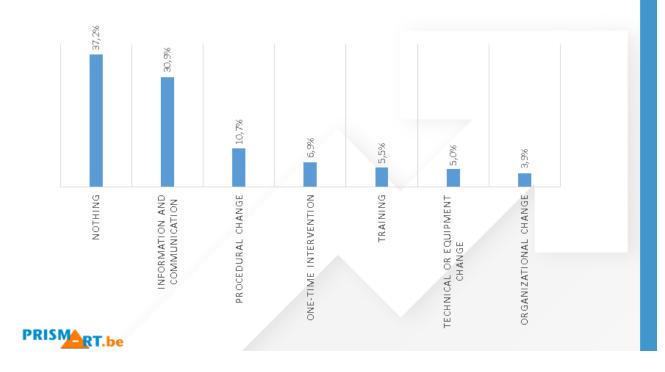




Process involved in root cause



Action <u>undertaken for root cause</u>



Question

- Data <u>belongs</u> to College
- <u>Formally</u>: access to data, <u>with center identified</u>, <u>belongs to 2 College</u> members
- In <u>practice</u>, FVH
- Who has mandate to analyse data?

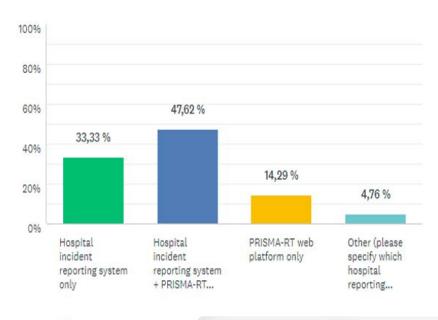


Prisma-RT survey

• 20 centers responded

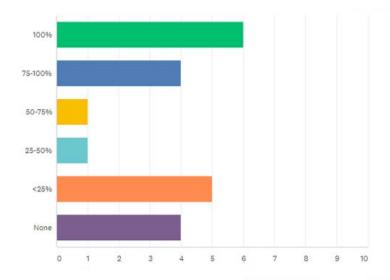


In your department, which incident reporting and analysis platform do you use?





For which percentage of those events do you carry PRISMA analysis for?





If not 100%, why not?

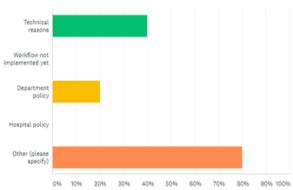
CHOIX DE RÉPONSES	·	RÉPONSES	•
▼ Not enough time to do so		64,29 %	9
▼ Not trained to do so		14,29 %	2
▼ It's not useful/helpful		42,86 %	6
▼ Due to technical/ IT reasons		7,14 %	1
▼ Other (please specify and comment)	Réponses	42,86 %	6

- ightharpoonup Need to encode twice (hospital + PRISMA ightharpoonup not enough time
- → Anonymous reporting so not enough information to do the analysis
- → Incidents that repeat themselves
- → Hospital quality vision: Prisma-RT is not needed



Are Prisma-RT analyses shared? If not, why not?

• 5 centers replied no



- → Security reasons
- No idea → no login to see if contributing
- → Finalizing technical problems



Summary status

- 23 centers willing to participate, one center abstains
- Out of 23, 22 are connected to benchmark
- Out of 22, <u>about</u> 18 do RT-Prisma analyses (survey 16 out of 20 centers)
- According to survey, about 15 contribute to benchmark
- In practice, only 10 contributors
- Frederik and Aude: closer look at survey, correlate to "nonanonymized" benchmark



Project

- Would you like to participate in a PRISMA-RT project?
 - 10 yes
 - 3 no
- Subjects
 - Any
 - Lung/ProCaLung
 - SBRT
 - Prostate/Pelvic
- Proposal: continue reporting with increased emphasis in 2021 on SBRT. Include Context Variable "Treatment" in every root cause. Question to be answered: Is "SBRT/SABR" root cause profile different from rest?



Thank you



College van Geneesheren Radiotherapie-Oncologie Collège des Médecins Radiothérapie-Oncologie

Radiotherapy Quality indicator project

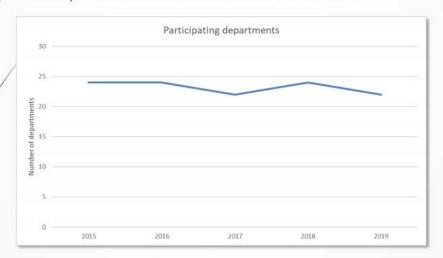
Meeting of the College 01/12/2020

Aude Vaandering (aude.vaandering@uclouvain.be)



Status of the project

- Project that started in 2015
- Yearly collection of data till 2019 included



- Including satellite sites
- +- 95% participation rate

Status of the project

- Overall analysis of data has been made
 - Benchmarking documents have been be sent
 - →!!Adaptation of data



Status of the project

- Collection of infrastructure data to be continued on a yearly basis
 - IAEA DIRAC database update
 - BELdArt





Status of the project – next steps

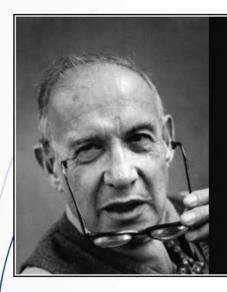
- Thorough statistical analysis to be carried out
 - Univariate and multivariate (multi-level) analyses (in collaboration with SMCS)
- Feedback from departments
 - → survey

To be finalized BEFORE mid-January!!

Survey to be sent out

- Evaluation of the perceived usefulness and impact of the collected QI (infrastructure/process and outcome)
 - Ease of data collection- how easy was it for departments to be able to extract the data needed for this QI
 - Importance of QI- do the departments believe that the information collected through the QI is useful to monitor performance and/or to set up quality improvement initiatives?
 - Scientific acceptability do the departments believe that the measure is precisely defined and that it is reliable?
- Use of RedCap tool
- To be sent out to all departments in upcoming week

Do we continue?



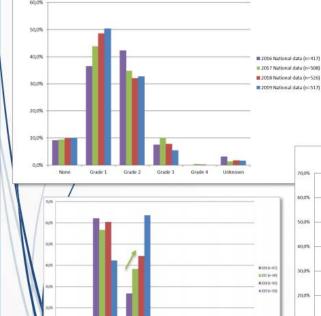
You can't manage what you don't measure.

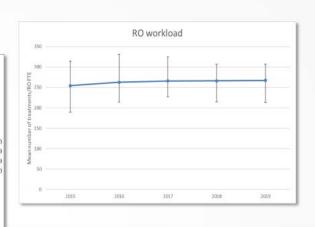
— Peter Drucker —

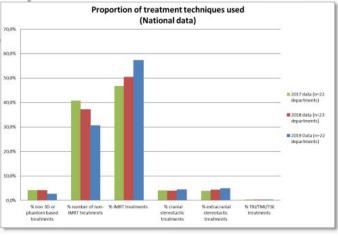
AZ QUOTES

QI project

Radiodermatitis









- Ethics committee!!!! + GDPR contracts to be finalized
- Refinement of QI collected
 - As per data analysis and per expert groups
- BIG data
 - BCR
 - eHealth
 - External company?













ProCaLung status report

Florian Charlier

College of Physicians for Radiotherapy Centers Meeting, December 1st, 2020

On behalf of the ProCaLung team: Y. Lievens, V. Remouchamps, X. Geets, M. Lambrecht and L. Moretti

ProCaLung

In partnership with

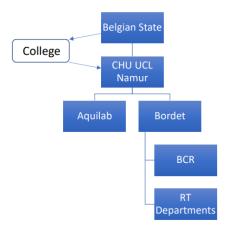


Plan

- Contracts
- Contacts with RT departments
- Testing Aquilab software

Work on contracts (started in July 2019!)

• 4 contracts: College-Aquilab, College-Bordet, Bordet-BCR, Bordet-RT centers



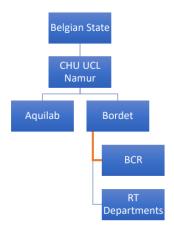
College - Aquilab

- · The draft is complete except for
 - Billing part which is unusual
 - Aquilab still has to provide information for Privacy Impact Assessment (PIA)



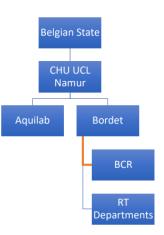
Bordet – Belgian Cancer Registry (BCR)

- The BCR wanted to be co-owner of data collected on their website
- Co-ownership: Approval of College required to access project data
- Agreed by FOD/SPF → SOLVED (?)



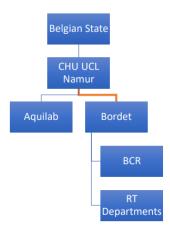
Bordet – Belgian Cancer Registry (BCR)

- The BCR wanted to be co-owner of data collected on their website
- The Belgian State must remain unique controller (FOD)
- The BCR agreed to collaborate without being co-owner if they can compare ProCaLung's data collected on their website with their "classic" registration.
- So the contract was adapted to include that the BCR is entitled to do
 these analyses, if the College oversees analyses and publications of data
 related to ProCaLung's database.



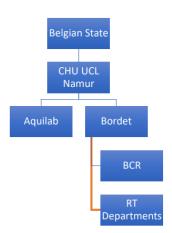
CHU UCL Namur – Bordet

- College Bordet
 - Since the contract is between the Belgian State and CHU-UCL Namur
 - · Conversion to a CHU UCL Namur Bordet is done
 - Basically we are waiting for the Aquilab and BCR contracts to settle everything



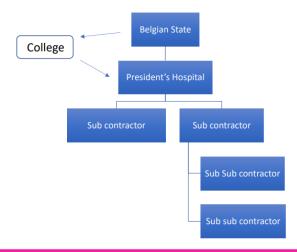
Bordet – RT centers

- Centers have been contacted approx. every month since Aug 18 with the setup information to start center activation to start registrations
 - Delegation log
 - Contract



Contracts

• Much work has been done on these contracts over the last 18 months



Contacts with RT centers

- 7 centers have already sent back the delegation log
- 7 centers have already sent back their review of the contract
- Many centers have asked questions
 - Mainly about ethics committee approval and information for patients documents
 - The monitoring plan is under review and should be sent to all centers requesting it (only one now)
 - What about insurance
- 10 centers have not given any feedback yet → Will be contacted again

Testing Aquilab software

- We need to continuously test Aquilab products (ProCaLung is also a big project for them)
- The software is not completely ready, bugs are still present
- Yet, they are responsive, and all should be fine for the first patients included
- Further improvements will be made throughout the project

Next step

- Centers have volunteered to test the registrations
- Testing of full workflow is about to start in one center per region
 - Aquilab SharePlace and Artiview
 - Belgian Cancer Registry forms



Thank you

Welcome to ProCaLung - The Project on Cancer of the Lung

A Belgian national-wide radiation oncology quality assurance program for stage III non-small cell lung cancer.

A project of the Belgian College of Physicians for radiation oncology centres.

On this website, you will find:

- General information on the project
- An up-to-date list of radiation oncology centres participating to the project
- A list of useful links related to the project
- [Future] A list of the project-related publications