UK Health Security Agency

Safer Radiotherapy

E-bulletin #20
September 2026

Welcome to the Safer Radiotherapy E-bulletin, which provides key messages and learning from the national patient safety initiative to the entire radiotherapy community.

Further information on the national patient safety initiative can be found **here**, or accessed via the QR code located on this page.

Your feedback helps us improve these publications, please don't hesitate to share your thoughts with the radiotherapy team by emailing:**radiotherapy@ukhsa.gov.uk**

National Radiotherapy Event Workshop, June 2026

On 16 June, the Medical Exposures Group (MEG), in collaboration with the Patient Safety in Radiotherapy Steering Group (PSRT), were delighted to host a national radiotherapy event workshop in Birmingham. The event focused on supporting the UK radiotherapy community in the application and analysis of the **National Patient Safety Radiotherapy Event (RTE) Taxonomy** and exploring the practical implications of **Advancing Safer Radiotherapy (ASR)**.

The workshop received strong national engagement, bringing together 73 representatives from 53 NHS and independent providers. Through presentations, interactive seminars, and roundtable discussions, attendees had the opportunity to share experiences, discuss challenges, and explore the recently refined RTE Taxonomy.

We would like to thank all speakers, facilitators, and participants for their valuable contributions, which helped make the event such a success. Feedback from attendees is summarised on pages 3–4 of this bulletin.

Latest Patient Safety News

Recommendations for a therapeutic radiographer workforce

The Society of Radiographers (SoR) has published **Recommendations for a therapeutic radiographer workforce** to complement **Principles of Safe Staffing for Radiography Leaders**. The guidance provides key recommendations for the therapeutic radiographer workforce and includes workforce modelling for safe staffing, clear role consistency, and structured staff retention frameworks.

RTE Data Analysis – April to July 2026

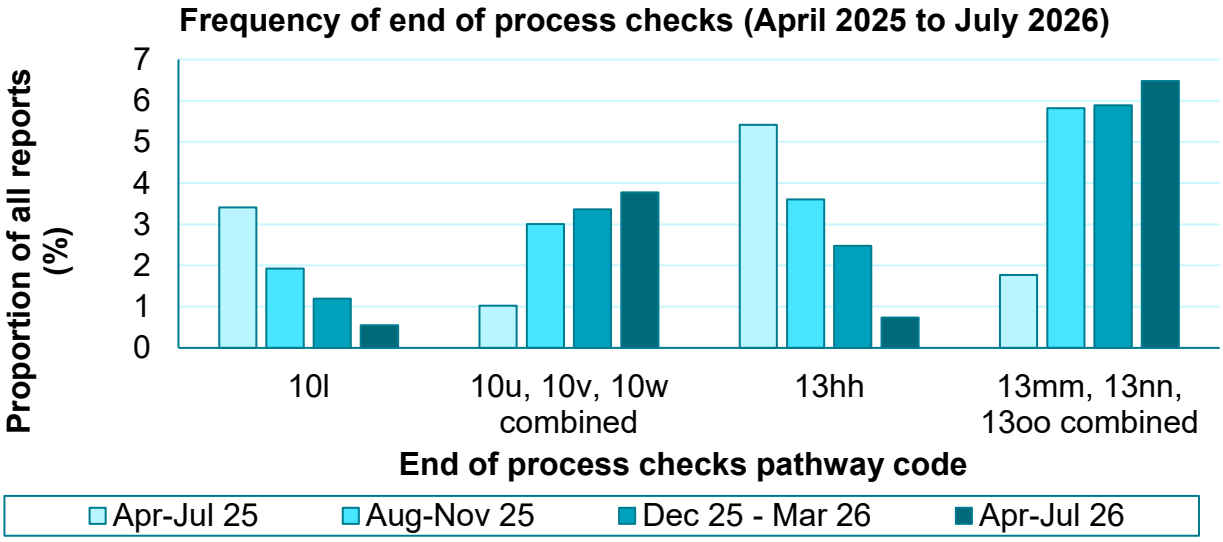
5,424 RTE reports	**96.6% classified level 3 to 5 with little or no impact on patient outcome**
26.8% more reports than the previous period	**57 providers submitted data**
19.9% of all reports related to equipment failure, decrease from 20.9% Dec 2025-Mar 2026	**Modality code in 57.4% of all reports, increase from 44.5% Dec 2025-Mar 2026**

The full **Triannual RTE analysis and learning report** is now available

Spotlight on: End of process checks

In May 2025 the **National patient safety radiotherapy event taxonomy** introduced more detailed coding for pretreatment imaging and on treatment end of process checks. The chart below compares use of the new end of process check pathway subcodes with the legacy codes they were introduced to replace. Since implementation, it is positive to note the increased use of the new subcodes (10u, 10v,10w, 13mm, 13nn and 13oo), while application of the legacy codes (10l and 13hh) has declined, supporting their planned withdrawal.

The ongoing work invested in adopting the updated taxonomy is sincerely appreciated and will inform future RTE analysis.



National Radiotherapy Event (RTE) Workshop Feedback

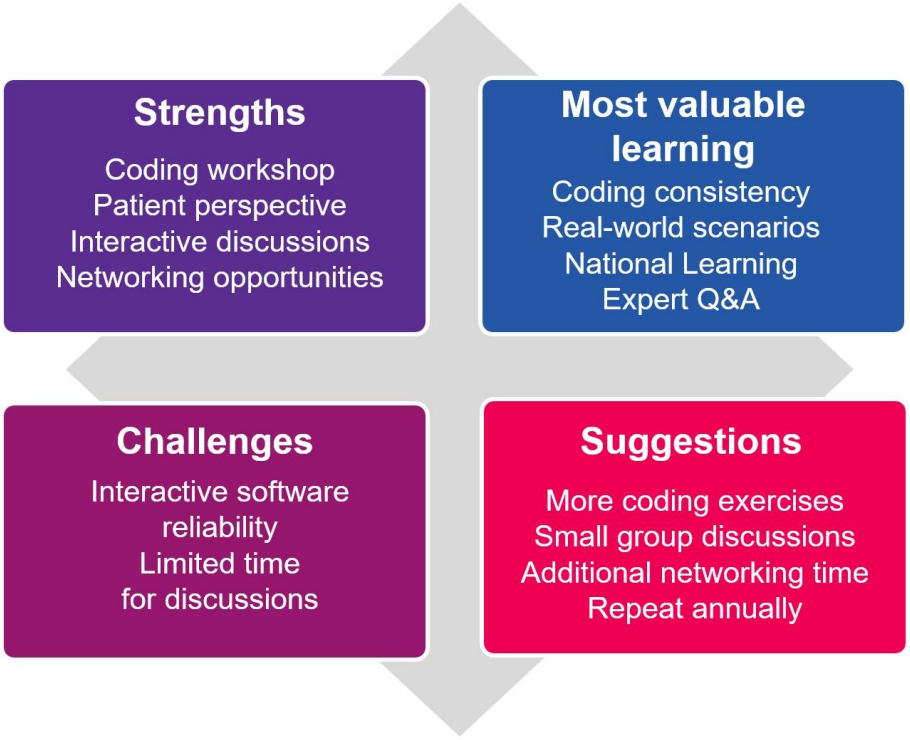
Thank you to everyone who attended and contributed to the workshop. The workshop brought together radiotherapy professionals to strengthen application of **RTE taxonomy**, support implementation of **ASR**, promote active patient safety engagement, share learning from local and national analysis and foster collaboration to improve patient safety.

The programme supported the workshop objectives through practical taxonomy coding exercises, case studies, national learning updates and a roundtable discussion with PSRT members Peter Dickinson, Spencer Goodman and Carl Rowbottom. Damian Parr shared how local RTE data can inform service improvement, while Sarah Allford provided the patient safety perspective, highlighting the impact of radiotherapy events on patients and the importance of learning from them.

What Participants Valued

Participants highlighted the value of:

- Practical coding scenarios and case studies
- Discussion of coding approaches
- Understanding variation between centres
- Improved consistency in taxonomy application
- Networking, collaboration and sharing local experiences



Sarah Allford's patient safety perspective was also widely praised for reinforcing the importance of patient safety and learning from events.

Participants suggested additional time for coding exercises, discussion, networking and interactive engagement at future events.

Key Challenges to Reporting

Participants were asked about key challenges they faced at a local level and identified several barriers to effective RTE reporting and investigation, including:

- Time pressures and workforce constraints
- Staff engagement
- Complexity of reporting systems

Most respondents reported that investigations typically take three weeks or longer to complete.

Future Safer Radiotherapy Development Opportunities

Participants identified several opportunities for future patient safety initiatives, including:

- Greater clinician engagement
- Increased focus on workforce and human factors
- More case studies and coding examples
- Shorter, more frequent learning outputs
- Exploration of dashboards, webinars, podcasts and other interactive resources
- Regular collaborative workshops to continue sharing learning and good practice.

The feedback provided valuable insight into the challenges and opportunities facing radiotherapy services. UKHSA will use this learning to inform future work and remains committed to evolving its support, developing practical resources and strengthening opportunities for collaboration, shared learning and patient safety improvement across the radiotherapy community.

Advancing Safer Radiotherapy

Forty-five per cent of participating departments completed a survey assessing implementation of the **ASR** recommendations with 64% reporting completion of the **ASR Self-Assessment Tool** locally.

Areas of greatest progress included:

- Applying the national taxonomy (Recommendation 10)
- Actively managing patient comfort (Recommendation 22)

Key opportunities for further improvement included:

- Auditing early and late radiotherapy adverse effects (Recommendation 23)
- Regional collaboration and shared learning (Recommendation 11)
- Supporting patients to actively participate in patient safety (Recommendation 19)

The PSRT will continue to develop resources and support focused on priority areas.

ARSAC Update: Notes for Guidance

The recently updated ARSAC Notes for Guidance (NfG) July 2026 can be found **here**.

A key change involves the process of employer amendment and renewal applications, which will come into effect from 1st January 2027. This involves a requirement for employers to submit full-service details (including brachytherapy where applicable) every five years, to ensure Committee review of all local services that require an employer licence.

Provided below are other updates to the ARSAC NfG that are of note:

- Updates to reflect IR(ME)R requirements on co-operation between employers and inclusion of software governance
- Updates to describe the new process for employer amendment and renewal applications which will come into effect from 1st January 2027.
- New section 2.19 describing matters considered by committee when assessing the equipment profile of an installation within an employer application