

How Does Your Radiation Oncology Service Line Measure Up?

RESULTS OF THE 2014 NATIONAL HOSPITAL
ONCOLOGY BENCHMARK FOR RADIATION



The National Hospital Oncology Benchmark Study, conducted annually by the Oncology Management Consulting Group, gathers data from respondent hospital-based outpatient infusion and radiation centers across the country. This article presents a selection of the radiation oncology-related survey analyses from the 27 radiation oncology programs that submitted data.

Note: in calculating data per full-time staff members, all reported staff hours were adjusted to a 2,080-hour work year. In other words, a program reporting 2,500 hours of therapist time is considered to have 1.2 full-time equivalent (FTE) therapists. Similarly, treatment equipment is adjusted to full-time equivalents. For example, a program with 2 linear accelerators (linacs) operating 50 hours per week has 2.5 FTE linacs. These calculations

Figure 1. Percentage of Radiation Oncology Treatment Modalities

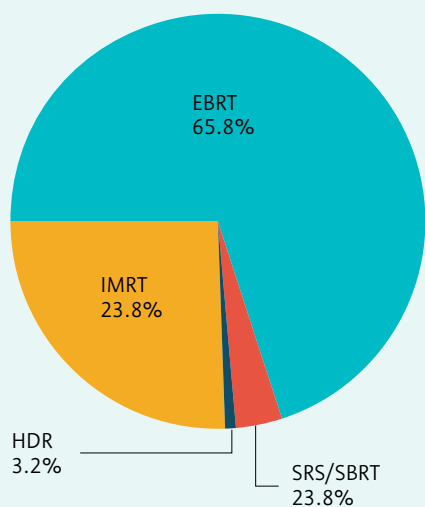


Table 1. Support Staff Serving Only Radiation Oncology Patients

- 89 percent of programs use nurses
- 56 percent have simulation therapists
- 52 percent have dedicated social workers
- 44 percent have dedicated nutritionists
- 33 percent have dedicated financial counselors
- 22 percent use non-physician practitioners
- 22 percent have navigators
- 19 percent use medical assistants
- 15 percent use licensed nurse practitioners and/or nursing assistants.

For many job categories, we calculated the number of patients seen per FTEs in the radiation center for one year. Here are the adjusted mean results:

- Total patients per nurse: 268
- Total patients per simulation therapist: 576
- Total patients per financial counselor: 861
- Total patients per social worker: 1,059
- Total patients per licensed practice nurse/nursing assistant: 552
- Total patients per FTE oncology-only navigator: 758
- Total patients per non-physician practitioner: 522
- Total patients per nutritionist: 2,697
- Total patients per medical assistant: 730

Table 2. Disease Mix for IMRT Treatments

- Prostate: 31 percent (adjusted mean)
- Head and neck: 16 percent (adjusted mean)
- Lung: 14 percent (adjusted mean)
- CNS: 7 percent (adjusted mean)
- Colorectal: 5 percent (adjusted mean).

allow us to compare data across programs that are adjusted for longer or shorter hours of operation. To define FTE physicians, we assumed that one full-time physician is scheduled to see patients for 10 half-day clinic sessions.

Disease Mix

Most cancer programs think of breast, colorectal, lung, and prostate as the top volume disease sites. For the radiation programs who reported data in our study, the top four disease sites were:

- Breast: 22 percent
- Lung: 18 percent
- Prostate: 11 percent
- Cancers of the central nervous system (CNS): 7 percent.

We calculated the mix for external beam radiation therapy (EBRT), intensity-modulated radiation therapy (IMRT), high-dose rate (HDR) therapy, and stereotactic radiosurgery/stereotactic body radiosurgery (SRS/SBRT), Figure 1, above, left.

Support Staff

We asked for hours spent serving only radiation patients: “dedicated” staff. Table 1, left, shows the percentage of all centers that report having “dedicated” staff although some were not necessarily full-time staff members (e.g., one social worker working half time in infusion and half time in radiation = .5 FTE for radiation).

Clinical Staffing

Measuring productivity can be done in numerous ways. Among the most commonly requested benchmarks is the number of patients per various clinical staff positions. On average, one FTE radiation therapist, which excludes hours for programs reporting dedicated simulation therapists, is responsible for a total of 99 patients per year. For dosimetrists that number is 323 and for physicists that number is 333. Finally, among

survey respondents, on average the FTE radiation oncologist cares for 228 patients annually.

Another commonly sought-after benchmark is the number of therapists per linac. Our survey found that there are 2.27 therapists per FTE linac (again, excluding dedicated simulation therapists). To measure the productivity of those simulation therapists, we counted the billed simulation codes to arrive at an average of 1,185 plans per year per FTE simulation therapist. Finally, to establish a productivity benchmark for physics, we applied the count of technical planning codes billed to physics staffing time—an average of 1,888 plans per year.


External Beam Treatments

Cancer programs that are facing growth in their radiation service line may find it helpful to have a grasp on the number of treatments delivered to specific disease groups, particularly if the program is engaged in strategic disease-specific initiatives. Among our findings: for patients receiving EBRT, the average number of

billed codes was 20 for all diagnoses and for breast cancer patients receiving EBRT that number was 25.

IMRT

Our data found that 23 percent of all patients received IMRT. We then looked at the disease mix for IMRT and found, not surprisingly, that prostate cancer tops the list; on average, 31 percent of all IMRT patients are treated for prostate cancer. Table 2, left, shows the disease mix for IMRT treatments.

The full National Hospital Oncology Benchmark Study is given to each participating institution and is available for purchase at: <http://oncologymgmt.com/nhobs/>. 

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Patient	Location	Lab	XRay	Inf Start	Inf Time	Est Inf Time
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