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**Gandy, RJ, Audisio, RA, Franci, A, Gurrieri, C and Maurizi, F**

**Comparing Radiotherapy Patient Flows in England and Italy**

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### Article

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| <b>Criteria</b>  | <b>English Study</b>   | <b>Italian Study</b>   | <b>Inference</b>  |
|--|--|--|---|
|  | Reference XXXX   | Reference XXXX   |   |
| <b>How radiotherapy services are commissioned and provided</b> | Services commissioned by many small CCGs, and provided by limited number of large providers  | Services commissioned by limited number of (large) statutory regions, and provided by many (small) providers                             | Likely to result in greater patient flow and less self-sufficiency in Italy   |
| <b>Cultural expectations</b>                                   | Service quality monitored by central agency (CQC); Broadly similar quality services across country; Patient choice available but effectively limited | Service quality varyingly monitored by regions; Variations in service quality across country; Patients able to travel for care and do so | Variations in service quality in Italy likely to result in greater patient flow as patients travel to access best quality care; Choose and Book arrangements in England limited to preferred providers and so constrain patient flows |
| <b>Definition of the base areas</b>                            | Used catchment areas determined by patient flows   | Used statutory regions   | Catchment areas created using patient flow data and will change as patient flows change; therefore more likely to result in greater self-sufficiency  |
| <b>Data used</b>   | Comprehensive data on all patients treated for radiotherapy for a whole year   | Data limited to inpatients and day cases who received radiotherapy for six month period  | Absence of related outpatient data in Italy means observed patterns could be different if comprehensive data available  |
| <b>Analyses undertaken</b>                                     | <i>NdiG</i> analyses undertaken  | <i>NdiG</i> analyses undertaken  | No differences in approach  |
| <b>Research Results</b>  | A great deal of self-sufficiency found, with most patient flow in London and South East  | Limited self-sufficiency, with great deal of patient flow  | There is greater patient flow and less self-sufficiency in Italy; highlighted by fact 18.4% of inpatients and day cases crossed more than one regional boundary   |

**Table 1 Summary of comparisons between the two research studies**