



Public Health  
England

Protecting and improving the nation's health

# Radiotherapy Data Set (RTDS)

## Technical Guide

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### Amendment history

Version	Date	Brief Summary of Change	Editors
v6.0 Final	16 June 2021	Final version for publication	Andrew Murphy
v6.0.1 Final	22 Oct 2021	Revised version with missing item	Michael Sharpe

### Approvals

This data set and subsequent changes and amendments have been approved by the senior RTDS development team. In addition, the changes were also discussed within the RTDS User Group (RUG) and Radiotherapy Information Strategy Group (RISG) following extensive consultation.

## Executive summary

The purpose of this document is to provide instruction to informatics personnel within provider organisations and IT software suppliers (inhouse and commercial), regarding file creation and submission of data through the Radiotherapy Data Set (RTDS).

This document describes the standards for file submission and file naming to facilitate uploading onto the National Cancer Registration and Analysis Service (NCRAS) [api.encore portal](#). In addition, it provides assurances that the proposed approach supports the implementation of DAPB0111 Amd84/2020.

This is an update to an existing information standard SCCI0111 Amd 13/2015 and is required to ensure that the data still meets the business objectives, scope and content of the standard and continues to be clinically accurate and relevant.

In order to maintain the clinical accuracy, it is important to regularly review RTDS with clinical experts from across the NHS, including the RTDS User Group (RUG) and the Radiotherapy Information Strategy Group (RISG).

Occasionally other information standards have specific data items which interact with RTDS. Where this happens, liaison with the developers of those standards was concluded to ensure all data items remain accurate and are updated where necessary.

Where a word or name is **highlighted**, this indicates that there is an embedded link that will take you to a webpage outside of this document or directs you to another page within this document that provides additional information. Please use this facility throughout the technical guide, as this improves the accessibility for users with visual impairment or those using screen readers.

# Introduction

This document provides technical guidance to support all NHS Acute Trust providers of radiotherapy services in England, private facilities where delivery is funded by the NHS or IT software developers to collect and submit standardised data monthly against a nationally defined data set.

It should be read in conjunction with the following documents, available at the designated website:

<http://www.digital.nhs.uk/isce/publication/dapb0111>:

- Specification
- Change Request
- Implementation Guide
- Information Standard Notice

[http://www.ncin.org.uk/collecting\\_and\\_using\\_data/rtds](http://www.ncin.org.uk/collecting_and_using_data/rtds):

- RTDS v6.0
- RTDS v6.0 User Guide

It is important that users read the RTDS v6.0 Implementation Guide, as this provides further support on the implementation of the changes to the standard.

The [RTDS website](#) and the [NHS Digital website](#) maintain these documents and other information. It is important to note that there is a new website under construction by the National Disease Registration Service (NDRS), which will include pages dedicated to RTDS. An update to the landing page will be issued once launched.

This is a change to the RTDS standard, which builds on the work that has continued over the past 6 years since the last update. These new changes were required in order to make the data set clinically accurate and meet the business objectives of the data set.

It was important that any changes were carefully considered by both clinical experts and provider Trust organisation representatives. All changes were discussed within the RUG and RISG, following extensive consultation.

Providers of RTDS services are required to provide a monthly return on all patients receiving external beam radiotherapy (teletherapy), brachytherapy, proton therapy,

radioisotope therapy (including radioiodine) and molecular radiotherapy using this data set.

Submissions are made by each provider to the English National Cancer Online Registration Environment (EnCORE) application programming interface ([API](#)) portal.

## Change of scope

XML will no longer be a requirement of this standard, and this has been reflected in a change to the scope of the standard. This decision was taken after review and due to the financial burden this would have cost Trusts and NDRS (RTDS) in changing reporting structures, training of staff and the reporting of data files in this format.

## Purpose and audience

The purpose of this document is to provide instruction to informatics personnel within provider organisations and IT software suppliers regarding file creation and submission of RTDS data. It should be read in conjunction with the documents listed above.

This document describes the standards for file submission, including the .csv and/or other 'spreadsheet' construction and file naming to facilitate uploading to the RTDS [api.encore](#) portal.

## Help and support

For technical queries relating to the creation of these files please contact the RTDS help desk in the first instance:

- for general queries regarding RTDS contact [rtds.helpdesk@nhs.net](mailto:rtds.helpdesk@nhs.net)
- for queries regarding the Data Dictionary contact [datastandards@nhs.net](mailto:datastandards@nhs.net)

## General submission principles

Providers must only submit data relating to patients for whom they have provided radiotherapy treatments as follows:

- submitted files **must** be sent by secure file transfer methods, as specified within the RTDS standard
- files **should** be uploaded as early as possible within the reporting month for each radiotherapy treatment, to allow plenty of time to fix any errors
  - uploading on the last day will mean that the Trust may not have time to fix errors and therefore could be uncompliant for various measures
- the data set is divided into sections, each of which represents an activity or related group of activities along the treatment pathway
- individual records **must** contain the sections 'linkage and demographic details' including both 'NHS Number' and 'Local Patient Identifier' (where available)
- 'Local Patient Identifier', 'Person Family Name', 'Person Given Name', 'Postcode of Usual Address' and 'Person Stated Gender Code' have been added to the data set to allow for patient data to be recorded and submitted for patients who do not have an 'NHS Number'
- providers **should** aim to complete all the relevant data items as soon as possible
- records in each submission **should** include all applicable sections where possible

### RTDS file formats

There are two acceptable file formats for version 6.0, as follows:

- all data from External Beam systems linked to Record and Verify systems **must** be submitted to RTDS in '**CSV**' format only
- all Molecular and Brachytherapy data **may** be submitted in either the .csv format or the '**Other**' format, using a spreadsheet

### RTDS submission schedule 2022/23

Data files are required to be submitted monthly, 20 working days after the end of the month for England, to be uploaded to RTDS as follows:

Month of treatment	Submission due date
April 2022	31 May 2022
May 2022	28 June 2022
June 2022	28 July 2022



Month of treatment	Submission due date
July 2022	26 August 2022
August 2022	28 September 2022
September 2022	28 October 2022
October 2022	28 November 2022
November 2022	30 December 2023
December 2022	30 January 2023
January 2023	28 February 2023
February 2023	28 March 2023
March 2023	3 May 2023

- files containing data **must** be uploaded to the portal and all errors on the file **must** be resolved

Note: This upload schedule will continue to apply to all future months

### Data extraction in CSV format

Data will be extracted from record and verify and other electronic systems, by system software suppliers working with local IT staff in constructing extraction routines.

The database import process requires files to be in a consistent format as outlined below:

- extracted data files **must** be in a single Comma Separated Values (CSV) file only, with a .csv file extension
- a CSV file template is available from the RTDS team for data suppliers and software system developers
- CSV files **must** be of the windows type rather than UNIX, with carriage returns at the end of each line as well as linefeeds
- none of the data required is case sensitive, excluding row headers
- CSV files **must** be saved with a text delimiter set to the double-quote character in order to allow the use of commas in data values
- all dates **must** be in a consistent date format in all the RTDS data files submitted for example ccyy-mm-dd
- each file **must** have a consistent (standard) header row within all the files submitted by the Trust (see below)

Note: It will not be possible to upload a file with any errors, all errors **must** be corrected before the file can be submitted

## RTDS column header convention in CSV format

The first row of the CSV file **should** consist of the Column Headers with the column names in exactly the format shown below. CSV files **should not** be compressed or packaged in any way.

CSV files **should** contain only (and all of) the following column headers in the following order, regardless of the data items that can be supplied. The mapping to data set items is shown by the Column Number.

Please note the following **must** be true of all files submitted:

- the reporting file **must** be in a true double quote comma separated file [" ", " ", " "]
  - failure to do this will result in leading zeros and blank fields removed (resulting in data moving into the wrong reported column)
- each patient record (row) in .csv files **must** contain either or both [LG1/LG2] and [PG6] to ensure the records can be linked
- the column headers **will** always be the same as the data item name indicated below; 25 in total (csv1) and 45 in total (csv2)
- where there are multiple repeating values for any item, they **must** be reported using the semi-colon as the separator, as follow ["02;06;99"]
- each attendance will create a new row of reportable data that is defined by the 'Attendance Date:Time' (csv1)
- there **may** be multiple rows of data permitted per patient depending on the Prescription and Plan (csv2)
- both .csv1 and .csv2 files **must** be submitted, the batch will be rejected if only one available
- date formats **must** be ccyy-mm-dd format

csv file 1 (Attendance):

Column Header	Column Number	Data Set Item Number
NHS NUMBER	1	LG1
LOCAL PATIENT IDENTIFIER	2	LG2
NHS NUMBER STATUS INDICATOR CODE	3	LG3
PERSON BIRTH DATE	4	LG4
ORGANISATION IDENTIFIER (CODE OF PROVIDER)	5	LG5
RADIOTHERAPY DIAGNOSIS (ICD)	6	LG6
RADIOTHERAPY DIAGNOSIS (SNOMED CT)	7	LG7

Column Header	Column Number	Data Set Item Number
TUMOUR LATERALITY	8	LG8
PERSON FAMILY NAME	9	PG1
PERSON GIVEN NAME	10	PG2
POSTCODE OF USUAL ADDRESS	11	PG3
PERSON STATED GENDER CODE	12	PG4
ADMINISTRATIVE CATEGORY CODE (RADIOTHERAPY)	13	PG5
TRUST INTERNAL SYSTEM PATIENT ID	14	PG6
GENERAL MEDICAL PRACTITIONER (SPECIFIED)	15	PG7
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	16	PG8
RADIOTHERAPY ATTENDANCE IDENTIFIER	17	RA1
ADMITTED PATIENT ATTENDANCE INDICATOR	18	RA2
RADIOTHERAPY ATTENDANCE DATE AND TIME	19	RA3
UNSORTED PROCEDURE	20	n/a
RADIOTHERAPY ATTENDANCE PROCEDURE (OPCS)	21	RA4
RADIOTHERAPY ATTENDANCE PROCEDURE (SNOMED CT)	22	RA5
RADIOTHERAPY ATTENDANCE PROCEDURE (CODE CAPTURE ADDITIONAL PROCEDURES)	23	RA6
OTHER RADIOTHERAPY ATTENDANCE PROCEDURE (CODE CAPTURE ADDITIONAL PROCEDURES)	24	RA7
LOCAL VERSION NUMBER (ATTENDANCE)	25	RA8

The following is an example of csv1: "1234567890","PE3342567","01","1868-12-31",  
 "Y6R7A","C50.9","254837009","M","BLOGGS","FRED","AA1 6ZZ","X","01",  
 "GR4565543AZ","G99999998","TT6678","GR4565544FF","Y","1888-12-11 11:59:59",  
 "X654;X659;429479009;KV2D;TEABC","X654;X659","429479009","01;12","","654"

csv file 2 (Prescription):

Column Header	Column Number	Data Set Item Number
NHS NUMBER	1	LG1
LOCAL PATIENT IDENTIFIER	2	LG2
TRUST INTERNAL SYSTEM PATIENT ID	3	PG6
RADIOTHERAPY EPISODE IDENTIFIER	4	RE1

Column Header	Column Number	Data Set Item Number
DECISION TO TREAT DATE (RADIOTHERAPY TREATMENT EPISODE)	5	RE2
EARLIEST CLINICALLY APPROPRIATE DATE	6	RE3
REFERRAL DATE	7	RE8
RADIOTHERAPY PRESCRIPTION IDENTIFIER	8	RP1
RADIOTHERAPY TREATMENT REGION	9	RP2
ANATOMICAL TREATMENT SITE (RADIOTHERAPY)	10	RP3
RADIOTHERAPY TREATMENT MODALITY	11	RP9
RADIOTHERAPY PRESCRIPTION PRIORITY	12	RP10
PROFESSIONAL REGISTRATION ISSUER CODE - RADIOTHERAPY PRESCRIBED AUTHORISING CLINICIAN	13	RP11
PROFESSIONAL REGISTRATION ENTRY IDENTIFIER - RADIOTHERAPY PRESCRIBED AUTHORISING CLINICIAN	14	RP12
RADIOTHERAPY LATERALITY (ANATOMICAL TREATMENT SITE)	15	RP13
ROYAL COLLEGE OF RADIOLOGISTS (RCR) CATEGORY	16	RP14
RADIOTHERAPY ROUTES AND METHODS OF ADMINISTRATION	17	RP15
PRACTITIONER LICENCE HOLDER	18	RP16
ORGANISATION IDENTIFIER (CODE OF ORGANISATION COMMISSIONED TO PROVIDE ACTIVITY)	19	RP17
RADIOTHERAPY INTENT OF TREATMENT	20	RP18
PRESCRIBED RADIOTHERAPY CLINICAL TRIAL	21	RP19
RADIOTHERAPY PLAN IDENTIFIER	22	RPL1
TYPE OF PLAN	23	RPL2
DATE OF PLANNING APPOINTMENT	24	RPL3
PLAN NAME	25	RPL4
SPECIALIST RADIOTHERAPY TREATMENTS	26	RPL5
OTHER SPECIALIST RADIOTHERAPY TREATMENTS	27	RPL6
UNSORTED PROCEDURES (PLANNING)	28	n/a
RADIOTHERAPY PLAN PROCEDURE (OPCS)	29	RPL7
RADIOTHERAPY PLAN PROCEDURE (SNOMED CT)	30	RPL8
RADIOTHERAPY PLAN PROCEDURE (CODE CAPTURE ADDITIONAL PROCEDURES)	31	RPL9

Column Header	Column Number	Data Set Item Number
OTHER RADIOTHERAPY PLAN PROCEDURE (CODE CAPTURE ADDITIONAL PROCEDURES)	32	RPL10
RADIOTHERAPY PRESCRIBED DOSE	33	RPL11
RADIOTHERAPY PRESCRIBED DOSE UNIT OF MEASUREMENT (SNOMED CT DM+D)	34	RPL12
PRESCRIBED FRACTIONS	35	RPL13
RADIOTHERAPY ACTUAL DOSE	36	RPL14
RADIOTHERAPY ACTUAL DOSE UNIT OF MEASUREMENT (SNOMED CT DM+D)	37	RPL15
RADIOTHERAPY EXPOSURE IDENTIFIER	38	RX1
MACHINE IDENTIFIER	39	RX2
RADIOTHERAPY BEAM TYPE	40	RX3
RADIOTHERAPY BEAM ENERGY	41	RX4
RADIOTHERAPY BEAM ENERGY UNIT OF MEASUREMENT (SNOMED CT DM+D)	42	RX7
TIME AND DATE OF EXPOSURE	43	RX5
RADIOISOTOPE	44	RX6
RADIOPHARMACEUTICAL PROCEDURE (SNOMED CT)	45	RX8

The following is an example of csv2:

```
"1234567890","PE3342567","GR4565543AZ","712432","1888-11-11","1888-12-11","1888-10-11","GR4565544gH","PR","Z159","8","D","8",
"RD2345676634","9","1","373863008","TR775","Y6R7A","99","9","55487ttg458sc1","C",
"1888-12-11","RTLUNGAP","01","","A;X654;429479009;01;05","X654;X659",
"429479009","01;05;11;15","","15.0","229034000","15","10.0","229029004","RT456fg6778",
"RBVLA1152","T2","2256","229034000","1888-12-11 11:59:59","",""
```

## Special reporting fields

There is one field in each file which can contain multiple codes [Unsorted Procedure] csv1 and [Unsorted Procedures (Planning)]. These will be sorted on upload by a local mapping in to one of the selected codesets.

A local mapping will be requested by the portal each time a new unrecognised code is uploaded. This allows providers to record the codes in a singular location on their system.

## Other file format

This format is provided for the capture of Molecular, Brachytherapy, and non-record and verify linked Radiotherapy delivery. It is **not** intended for and **should not** be used for the submission of External Beam radiotherapy.

Please note some fields are inferred (such as Internal system ID fields) as it is presumed that the use of this file format means they do not exist in the source data. A list of these fields is found below.

Please note that for the fields UNSORTED PROCEDURES (PLANNING) and UNSORTED PROCEDURES, each instance of these fields is expected to record a single code from one of the relevant procedure datasets (for a reference of which fields, see the CSV format above).

Prescriptions consisting of multiple attendances **can** be submitted on a single return – in that instance each attendance **should** have a single line, with all duplicate information (likely everything but the delivery section) repeated.

All attendances from a single prescription **must** be submitted on a single return, as splitting a prescription over two returns will result in two prescriptions being made, due to the inferred IDs.

A blank OpenDocument Spreadsheet version of this file is available from the EnCORE API Portal.

Section	No	Column Header	Column Number	Dataset Number
organisation	01	ORGANISATION IDENTIFIER (CODE OF PROVIDER)	1	LG5
	02	ORGANISATION IDENTIFIER (CODE OF ORGANISATION COMMISSIONED TO PROVIDE ACTIVITY)	2	RP17
demographics	01	LOCAL PATIENT IDENTIFIER	3	LG2
	02	NHS NUMBER	4	LG1
	03	PERSON BIRTH DATE	5	LG4
	04	ADMINISTRATIVE CATEGORY CODE (RADIOTHERAPY)	6	PG5
	05	ADMITTED PATIENT ATTENDANCE INDICATOR	7	RA2
diagnosis	01	REFERRAL DATE	8	RE8
	02	DECISION TO TREAT DATE (RADIOTHERAPY TREATMENT EPISODE)	9	RE2
	03	EARLIEST CLINICALLY APPROPRIATE DATE	10	RE3
	04	RADIOTHERAPY DIAGNOSIS (ICD)	11	LG6
	05	TUMOUR LATERALITY	12	LG8
	06	RADIOTHERAPY TREATMENT REGION	13	RP2
	07	RADIOTHERAPY INTENT OF TREATMENT	14	RP18

Section	No	Column Header	Column Number	Dataset Number
	08	ANATOMICAL TREATMENT SITE (RADIOTHERAPY)	15	RP3
	09	RADIOTHERAPY LATERALITY (ANATOMICAL TREATMENT SITE)	16	RP13
	10	RADIOTHERAPY PRESCRIPTION PRIORITY	17	RP10
	11	ROYAL COLLEGE OF RADIOLOGISTS (RCR) CATEGORY	18	RP14
plan	01	PLAN NAME	19	RPL4
	02	SPECIALIST RADIOTHERAPY TREATMENTS/OTHER SPECIALIST RADIOTHERAPY TREATMENTS	20	RPL5/RPL6
	03	UNSORTED PROCEDURES (PLANNING)	21	n/a
	03	UNSORTED PROCEDURES (PLANNING)	22	n/a
	03	UNSORTED PROCEDURES (PLANNING)	23	n/a
	03	UNSORTED PROCEDURES (PLANNING)	24	n/a
	03	UNSORTED PROCEDURES (PLANNING)	25	n/a
	03	UNSORTED PROCEDURES (PLANNING)	26	n/a
	04	DATE OF PLANNING APPOINTMENT	27	RPL3
	05	PRESCRIBED RADIOTHERAPY CLINICAL TRIAL	28	RP19
	06	RADIOTHERAPY PRESCRIBED DOSE	29	RPL11
	07	RADIOTHERAPY ACTUAL DOSE	30	RPL14
	08	RADIOTHERAPY ACTUAL DOSE UNIT OF MEASUREMENT (SNOMED CT DM+D)	31	RPL15
	09	PRESCRIBED FRACTIONS	32	RPL13
	10	RADIOTHERAPY TREATMENT MODALITY	33	RP9
delivery	01	RADIOTHERAPY ATTENDANCE DATE AND TIME	34	RA3
	02	UNSORTED PROCEDURE	35	n/a
	02	UNSORTED PROCEDURE	36	n/a
	02	UNSORTED PROCEDURE	37	n/a
	02	UNSORTED PROCEDURE	38	n/a
	02	UNSORTED PROCEDURE	39	n/a
	02	UNSORTED PROCEDURE	40	n/a
	3	RADIOISOTOPE	41	RX6
	4	RADIOPHARMACEUTICAL PROCEDURE (SNOMED CT)	42	RX8
	5	RADIOTHERAPY ROUTES AND METHODS OF ADMINISTRATION	43	RP15
	6	PRACTITIONER LICENCE HOLDER	44	RP16
	7	MACHINE IDENTIFIER	45	RX2
	8	RADIOTHERAPY BEAM TYPE	46	RX3
	9	RADIOTHERAPY BEAM ENERGY	47	RX4
	10	RADIOTHERAPY BEAM ENERGY UNIT OF MEASUREMENT (SNOMED CT DM+D)	48	RX7
	11	PROFESSIONAL REGISTRATION ISSUER CODE - RADIOTHERAPY PRESCRIBED AUTHORISING CLINICIAN	49	RP11
	12	PROFESSIONAL REGISTRATION ENTRY IDENTIFIER - RADIOTHERAPY PRESCRIBED AUTHORISING CLINICIAN	50	RP12

Section	No	Column Header	Column Number	Dataset Number
end	01	LOCAL VERSION NUMBER (ATTENDANCE)	51	RA8

## Inferred fields

Inferred fields have been created to simplify the recording of the 'Other' file format. It is recognised this will be (in most instances) recorded by hand, therefore several fields are inferred.

There are

- TIME AND DATE OF EXPOSURE – this is inferred as the same as the Attendance date and time, item RA03
- NHS NUMBER STATUS INDICATOR CODE – this is inferred as 03
- RADIOTHERAPY PRESCRIBED DOSE UNIT OF MEASUREMENT (SNOMED CT DM+D) – this inferred to be the same unit of measurement as supplied for ,item RPL15.
- RADIOTHERAPY EPISODE IDENTIFIER, RADIOTHERAPY ATTENDANCE IDENTIFIER, RADIOTHERAPY PRESCRIPTION IDENTIFIER, RADIOTHERAPY PLAN IDENTIFIER, RADIOTHERAPY EXPOSURE IDENTIFIER – as this data is not from a Record and Verify system, these items will be created based on a combination of existing fields in the return



## File submission via the EnCORE api

When the CSV files and/or spreadsheet files are ready for submission to RTDS, staff at the reporting organisation can connect using the National Cancer Registration and Analysis Service (NCRAS) secure file upload system which sits behind the English National Cancer Online Registration Environment (EnCORE) application programming interface (API) web portal.

This can be accessed via a whole host of browsers, including Internet Explorer, Firefox, Safari, Edge and Chrome, as well as on a Mac, PC, iPhone, iPad, tablets and even mobile phones. However, access from a **Health and Social Care Network (HSCN)** is required.

The URL for the web portal is [https://nww.api.encore.nhs.uk/users/sign\\_in](https://nww.api.encore.nhs.uk/users/sign_in). The portal requires each registered user to agree to the site's terms and conditions. User logins are held within the repository database along with encrypted passwords for authentication.

Once users have logged in to the portal, there are several steps required to complete each upload as follows:

### Step 1

**Upload the .csv1, .csv2 or spreadsheet file to the portal:**

All files **should** be placed into a folder and then this **must** be converted into a zip file. This zip file should then be submitted as follows:

- click 'New Upload' on the top menu bar
- you are then presented with a new screen where you are required to update 5 upload questions:
  - provider - enter your trust name
  - file type - select Radiotherapy - RTDS
  - file - click the 'select file for upload button' and select your file
  - date - type the date of activity in file
  - notes - type any notes applicable in the free text field
- now click 'Upload'
  - file progress is shown in the 'Actions' tab
- once a file has been uploaded, a unique password is generated for each batch, this password **must** be saved before clicking off this page

Note: This is a one-time-only password which **cannot** be re-generated or accessed by the helpdesk staff. This password **must** be used in order to access the portal reporting. The only way to access portal reporting if this password is not recorded is to delete the file and reload the file again.

## Step 2

### View errors on the portal:

- to view the errors, click on the 'Batch Report' within the actions tab
- this will show you an error summary, highlighting the severity of the error
  - critical error - cannot be mapped
  - local error - can be mapped
- regimen mapping can only be completed by registered mapper(s)

### This screen also explains:

- the field with the error
- a description of the error
- the current field value and an ability to map from here

Note: Critical errors **cannot** be mapped and **must** be fixed at source. The file **must** then be re-uploaded to the portal.

## Step 3

- for critical errors, delete a file and correct errors on local system/file and re-upload to the portal
- where applicable map incorrect values to the national standard through the portal
- review and internally approve data being submitted with the help of the reports on the portal

## Step 4

- once there are no remaining errors or queries, then the file can be submitted to the data set

Note: To support end users process data in version 6, there will be a new step-by-step guide available on the [api.encore](#) web portal, early in 2022.

## Data submissions and file naming convention

The following file naming convention is to be used for all .csv submissions:

- UnitID-Attendance.csv
- UnitID-Prescription.csv

Where UnitID is an agreed unique identifier for the supplying RTDS provider and matches the user login's unit code followed by either 'Attendance' or 'Prescription'.

For all other 'spreadsheet' file formats, providers **must** make sure the file contains the word '**Other**' in the file name, as follow:

- UnitID-Other, followed by the extension of the spreadsheet programme you are using.
  - where MS Excel is used, this would be either:
    - UnitID-Other.xls or UnitID-Other.xlsx
  - where a non-MS Excel programme is used, change the file extension to the programme you are using, for example if you are using an open document spreadsheet this would be:
    - UnitID-Other.ods

Files are transferred using the secure web based Hypertext Transfer Protocol Secure (HTTPS)/Secure Socket Layer (SSL) encrypted protocol, which is used on a daily basis for online shopping, online banking, etc. No extra action is required at the data suppliers end to establish this apart from being on a HSCN connection.

## What data items should be submitted?

All applicable data items specified as either mandatory or required in the data set **should** be submitted as soon as available.

The mandatory, required, optional or pilot (M/R/O/P) column indicates the requirement for the inclusion of data:

- M = Mandatory: this data item is mandatory; the record cannot be submitted if the mandatory data items are not completed – the file will be rejected if mandatory items are absent and other data items are completed
- R = Required: this data item is required as part of NHS business rules and must be included where available or applicable, however, the section can be submitted without completing all the required items
- O = Optional: this data item can be included at the discretion of the submitting organisation and their commissioners as required for local purposes

- P = Pilot: this data item will not normally be included in the direct submission from cancer service provider organisations unless the provider Trust is part of the specific pilot exercise

## The use of 'choices' and 'grouped' sections

There are new sections that provide a choice of items to upload. In some cases, you can submit all the options (if known), although this is not usually necessary. These have been added to improve data quality and reduce misinterpretation and burden

In other places there are sections that are required, but the items within them are mandatory. This is because you **must** submit both the data items, if you choose to submit these data. These are designed to help improve both ascertainment and enforce data quality throughout the RTDS.

## Validation

All data will be validated by RTDS (on upload, via the web portal), according to a set of rules. If the data validation rules are not met, the whole or relevant parts (data set sections or records) of the extract **may** be rejected. All fields will be validated against:

- the information standard, to ensure that mandated fields are submitted
- the NHS Data Model and Dictionary, to ensure that only valid attributes are submitted (where applicable)
- local NDRS validation rules around registerable and reportable cases

An indication of the areas which require attention **will** be provided in the form of an error report on screen.

The provider **may** start validating their data whenever they are ready to do so, however:

- the provider is expected to have resolved any errors/issues or add missing data, re-extracted the file for sending to the RTDS web portal if necessary
- to have submitted the file via the submit button (available once all local and critical errors have been resolved in the batch) by the end of the deadline date for the submission of that month's data
- this is normally 20 working days after the end of the month of treatment

## Reporting

RTDS have worked with the National Disease Registration Service (NDRS) and developed standardised reports which are available to all providers submitting data through the NDRS conformance portal ([CancerStats2](#)). This is only available through a HSCN connection.

Providers **should** continue to contact the RTDS helpdesk or their regional NDRS office to request any data they require, which is not made available via standardised reporting.