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Title:	Guidance for the management of patients who become ill during and/or within six weeks of receiving radiotherapy at the Northern Ireland Cancer Centre			
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Responsible Director:	Moira Kearney, Interim Director, Cancer and Specialist Services			
Policy Type: (tick as appropriate)	<input type="checkbox"/> *Directorate-specific <input checked="" type="checkbox"/> Clinical Trustwide	<input type="checkbox"/> Non-clinical Trustwide	<input type="checkbox"/> Regional Policy	
If *Directorate-specific please list the name and date of the local Committee/Group that policy was approved		Does this policy have Workforce implications? N (if *Y please note the date it was approved at Workforce Governance Policy Sub-Committee		
Name: Date:	Date:			
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Version No.	3	Supercedes	V2 – May 2018 – May 2023	
Key Words:	Radiotherapy, ill, six weeks			
Links to other policies	NICAN – Regional Antiemetic Guidelines for Adult Patients Receiving Systemic Anti-Cancer Treatment and/or Radiotherapy v2 August 2021 BHSCT/SSS/CSM (14) (2022) Skin Care Policy for Adult Patients receiving Radiotherapy NICaN Acute Oncology Clinical Guidelines v2 April 2022			

1.0 INTRODUCTION / SUMMARY OF POLICY

1.1 Background

Radiotherapy is one of the treatment modalities used to treat cancer. Each year the radiotherapy department at the cancer centre treats approximately 4000 new patients with radiotherapy.

As patients spend the majority of their time in their own home whilst receiving radiotherapy, they may require additional care and support during radiotherapy, or for several weeks after radiotherapy has finished. Community care can be delivered by GPs and District Nurses in conjunction with other community care services. Patients should receive the same standard of care regardless of location, therefore the NICaN Primary Care group requested the development of network agreed guidelines for the management of patients who become ill whilst receiving radiotherapy or within 6 weeks of completing radiotherapy within the Belfast Trust.

Radiotherapy side effects vary from patient to patient. Some patients experience mild side effects during or following radiotherapy, while others experience more severe effects. Side effects from radiotherapy occur as radiotherapy temporarily causes damage to healthy cells as well as destroying cancer cells. The side effects experienced depend on the area of the body being treated, how quickly normal healthy cells can repair the damage and the dose of radiotherapy delivered.

It is therefore important that there is consistent management of all patients across interfaces, and that teams work in partnership to avoid delays in treatment and ensure prompt recovery from side effects.

1.2 Purpose

This policy has been written to provide agreed guidance with regards to the guidance for the management of patients who become ill during and/or within six weeks of receiving radiotherapy at NICC BHSCT. This is for patients who are being treated by the Belfast Trust only. Consequently patients will be treated consistently according to agreed standardised guidelines. This guidance should be read in conjunction with the BHSCT Skin Care Guidelines for patients receiving radiotherapy. [BHSCT/SSS/CSM \(14\) \(2022\) Skin Care Policy for Adult Patients receiving Radiotherapy](#)

1.3 Objectives

- To provide clear guidance around the management of radiotherapy treatment related side effects, during and after treatment
- To deliver consistent and high quality care to patients
- To encourage team working and seamless care

2.0 SCOPE OF THE POLICY

This policy will apply to any professionals providing care to patients who have received radiotherapy in the Northern Ireland Cancer Centre, at Belfast Trust.

3.0 ROLES AND RESPONSIBILITIES

It is the responsibility of:

- Authors to set a review date to ensure the guidance document is current.
- All professional staff who are managing patients who become ill during and/or within six weeks of receiving radiotherapy at NICC BHSCT to follow the content of this policy. Refer to appendix 1 for treatment and management options.

4.0 POLICY STATEMENT

During radiotherapy treatment patients are assessed daily by Therapeutic Radiographers.

Where appropriate, NI Cancer Centre staff should liaise with primary care staff, regarding the side effects of radiotherapy. If District Nursing services are required, a written request for care should be given to the patient to give to the District Nurse and a referral made via the local Call Management Centres.

Guidance for the management of patients who become ill during and/or within six weeks of receiving radiotherapy (at NICC BHSCT) (Appendix-1) should be consulted for all patients experiencing side effects while receiving radiotherapy.

Where a patient continues to experience unaddressed side-effects from radiotherapy beyond 6 weeks, the patient or the primary care team should inform the Cancer Centre Radiotherapy Department (see appendix 1 for contact numbers).

5.0 IMPLEMENTATION OF POLICY

5.1 Dissemination

This policy is for all professional staff caring for patients who have had and/or become ill within 6 weeks of having radiotherapy treatment within the Belfast Trust.

- The policy will be available on the Trust Loop for Trust staff.

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- Accessible via [NICaN professionals SharePoint](#) and the Micro guide APP (to download the app to your mobile device search Microguide in your APP store. Once on the app it asks to choose your medical organisation- input Northern Ireland Cancer Network).
- Authors and group members will disseminate amongst professional lines and managers and present at team meetings and forums.

5.2 Resources

The Radiotherapy Department are mindful of the importance of information being accessible to all patients attending for radiotherapy treatment.

The team continually monitor the service, with input from service users, to identify areas with potential for improvement (e.g. staff education, patient education including alternative ways of delivering information such as audio/visual, other formats such as Easy Read, provision of Interpreters) and welcome opportunities to enhance the service.

Policy and guidelines will be available electronically via Belfast Trust Loop and the Northern Ireland Cancer network.

5.3 Exceptions

Policy will apply to patients treated within the Belfast Trust only. This policy does not provide guidance for the North West Cancer Centre Radiotherapy Department at Altnagelvin Hospital.

Paediatric patients - for advice regarding paediatric patients, please contact the Clinical Oncology Specialty Trainee (ST) on-call at Cancer Centre, Belfast City Hospital, Belfast Health and Social Care Trust.

6.0 MONITORING AND REVIEW

Compliance will be measured by observation of patients attending consultant review and oncology follow up clinics. Policy will be reviewed three yearly by the authors.

7.0 EVIDENCE BASE/REFERENCES

1. [BHSCT/SSS/CSM \(14\) \(2022\) Skin Care Policy for Adult Patients receiving Radiotherapy](#)

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2. [The Society and College of Radiographers Practice Guideline Document: Radiation Dermatitis Guidelines for Radiotherapy Healthcare Professionals. Second revised edition April 2020.](#)
3. [Society of Radiographers RTOG skin assessment tool](#)
4. [British National Formulary](#)
5. [National Institute for Health and Care Excellence\(NICE\) \(Aug 2016\) Palliative care for adults: strong opioids for pain relief.CG140](#)
6. [NICAN – Regional Antiemetic Guidelines for Adult Patients Receiving Systemic Anti-Cancer Treatment and/or Radiotherapy v2 August 2021](#)
7. [NICaN Acute Oncology Clinical Guidelines v2 April 2022](#)
8. WHO (2010) *WHO's pain ladder* - <http://www.who.int>
9. [Analgesia - mild-to-moderate pain | Health topics A to Z | CKS | NICE](#)

8.0 CONSULTATION

The authors shared previous policy version with key internal and external stakeholders below for review, input and amendments to current practice:

- Dr Elizabeth Baird, Consultant Clinical Oncologist/Clinical Lead
- Yvonne McGivern, Macmillan G.P. Facilitator
- Alison Hunter, Radiotherapy Outpatients Nursing Sister
- Cathy Millar, Treatment Clinical Co-Ordinator, Radiotherapy Dept, NICC
- NICaN
- Services/Directorate of Primary Care - SPPG
- Eastern Local Medical Committee (LMC)

9.0 NURSING AND MIDWIFERY STUDENTS

Nursing and/or Midwifery students on pre-registration education programmes, approved under relevant 2018/2019 NMC education standards, must be given the opportunity to have experience of and become proficient in the management of patients who become ill during and/or within six weeks of receiving radiotherapy (at NICC BHSCT) , where required by the student's programme. This experience must be under the appropriate supervision of a registered nurse, registered midwife or registered health and social care professional who is adequately experienced in this skill and who will be accountable for determining the required level of direct or indirect supervision and responsible for signing/countersigning documentation.

Direct and indirect supervision

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- Direct supervision means that the supervising registered nurse, registered midwife or registered health and social care professional is actually present and works alongside the student when they are undertaking a delegated role or activity.
- Indirect supervision occurs when the registered nurse, registered midwife or registered health and social care professional does not directly observe the student undertaking a delegated role or activity. (NIPEC, 2020)

This policy has been developed in accordance with the above statement.

Wording within this section must not be removed.

10.0 APPENDICES

Appendix 1 Guidance for the management of patients who become ill during and/or within six weeks of receiving radiotherapy (at NICC BHSCT).

Appendix 2 Contact numbers - Cancer centre, Belfast City Hospital, BHSCT

11.0 EQUALITY SCREENING

Under Section 75 of the Northern Ireland Act 1998 the Trust has a legal responsibility to undertake an equality screening of all policies. To fulfil this duty an equality screening template must be completed by the policy author.

To complete an equality screening use this template: ([LINK](#))

For support with completion of the template go to: [Equality Screening Toolkit](#)

For any queries and/or to obtain approval contact the Planning and Equality Team contact: equalitiescreenings@belfasttrust.hscni.net or 028 95 048734

Equality Screenings are public documents and previously completed documents can be viewed at [Equality and Human Rights Screening | Belfast Health and Social Care Trust \(hscni.net\)](#)

12.0 DATA PROTECTION IMPACT ASSESSMENT

New activities involving collecting and using personal data can result in privacy risks. In line with requirements of the General Data Protection Regulation and the Data Protection Act 2018 the Trust considers the impact on the privacy of individuals and ways to mitigate against any risks. A screening exercise must be carried out by the Policy Author to ascertain if the policy must be subject to a full assessment. Guidance is available on the Trust Intranet or via this [link](#).

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If a full impact assessment is required, the Policy Author must carry out the process. They can contact colleagues in the Information Governance Department for advice on Tel: 028 950 46576

The outcome of the Data Protection Impact Assessment screening for the policy is:

- Not necessary – no personal data involved**
- A full data protection impact assessment is required**
- A full data protection impact assessment is not required**

12.0 13.0 STATUTORY RURAL IMPACT ASSESSMENT DUTIES

The Trust has a legal responsibility to have '**due regard**' to rural needs when developing, adopting, implementing or revising policies, and when designing and delivering public services. For more information go to [Rural Needs Duties](#)

To satisfy this '**due regard duty**' Trust staff must consider the impact of any policy, proposal or decision on the social and economic needs of people who live in a rural community. For Belfast Trust, this is particularly so when the policy/proposal/decision impacts regional services.

Please tick the box to indicate that you have paid 'due regard' to the social and economic needs of the rural community when developing, adopting, implementing or revising policies, strategies and plans and when designing and delivering public services and that a rural impact assessment is not required.

OR

Please complete a [Rural Needs Impact Assessment Template](#) if there is an impact on the social and economic needs of people who live in a rural community.

Please go to the: [Rural Impact Assessments Toolkit for HSC NI](#) to find out how to undertake a rural impact assessment.

Contact Estella.Dorrian@belfasttrust.hscni.net for further advice

14.0 STATUTORY EQUALITY DUTIES – MAKING REASONABLE ADJUSTMENTS AND INFORMATION ACCESSIBLE

Under the Disability Discrimination Act 1995 (as amended) the Trust has a statutory duty to **make reasonable adjustments** in respect of disabled patients/service users/carers/visitors. This includes making all communication (in person, by phone, via email) *and* any information provided (in writing, verbally) accessible using alternative formats. The aim of the reasonable adjustment duty is to reduce or remove any barrier a person with a disability

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faces when accessing or using goods, facilities and services. This is a non-delegable duty.

Accessible/ Alternative formats can include, for example, information translated into Easy Read format or into Audio format - when a patient/service user/carer/visitor has a learning disability or is visually impaired.

In addition, if a patient/service user/carer/visitor does not speak English as their first language or has poor English, the Trust has a statutory duty **to provide an interpreter and to translate written information**. This facilitates informed consent, better understanding and greater independence.

For information, advice and guidance about these duties contact the Trust Planning and Equality Team equality.team@belfasttrust.hscni.net

Please tick the box to indicate that you have developed the policy in accordance with the Trust's legal equality duties and that all staff will make reasonable adjustments and information accessible as appropriate.

SIGNATORIES

(Policy – Guidance should be signed off by the author of the policy and the identified responsible director).



05/08/2024

Date: _____

Policy Author



05/08/2024

Date: _____

Director

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Appendix 1 Guidance for the management of patients who become ill during and/or within six weeks of receiving radiotherapy (at NICC BHSCT). Please note – during radiotherapy treatment patients are assessed daily by healthcare professionals

Radiotherapy site	Initiation therapy (at commencement of radiotherapy)	Side-effect/symptoms	Required action
All sites	Skincare Emollient cream (e.g. Cetabene) – frequency of application advised by staff at Cancer Centre, Belfast City Hospital, BHSCT	Refer also to BHSCT Skin Care Policy for Adult Patients Receiving Radiotherapy Deterioration of radiotherapy skin reaction in patients not under care of radiotherapy nurses Suggestion of infection	Refer also to Appendix 1 of BHSCT Skin Care Policy for Adult Patients Receiving Radiotherapy Contact radiotherapy nurses at Cancer Centre, Belfast City Hospital, BHSCT - see Appendix 2 of this policy Contact Clinical Oncology Specialty Trainee (ST) on-call at Cancer Centre, Belfast City Hospital, BHSCT- see Appendix 2 of this policy
	Nausea/Vomiting Note: Patients may be on antiemetics when required or regular antiemetics depending on irradiated area	Nausea/vomiting – mild to moderate Severe nausea/vomiting - requires intravenous fluids	Refer also to NICAN regional Antiemetic Guidelines for Adult Patients Receiving Systemic Anti-Cancer Treatment And/Or Radiotherapy Contact Clinical Oncology Specialty Trainee (ST) on-call at Cancer Centre, Belfast City Hospital, BHSCT - see Appendix 2 of this policy
Head and Neck	Mouthcare Sodium Chloride 0.9% mouthwash 10ml four times daily, Biotene® mouthwash 10-15ml four times daily, artificial saliva replacement products when required (e.g. Oralieve spray/Oralieve gel when required)	Mucositis - able to swallow Mucositis – Unable to swallow. Requires iv fluids	AVOID alcohol containing mouthwashes e.g. Chlorhexidine 0.2% or Benzydamine oral rinse as these can irritate and sting Oral care <ul style="list-style-type: none">• Increase frequency of mouthcare• Prescribe protective mouthcare e.g. Gelclair® sachets topically four times daily, as a mouthwash• If lips sore prescribe white soft paraffin/yellow soft paraffin when required Pain relief Step up pain relief as per WHO analgesic ladder. Some patients may require strong opioids e.g. morphine sulfate oral solution 10mg/5ml Oral candida Nystatin oral suspension orally 100,000units/ml, 1ml four times daily ,after food or Fluconazole 50mg orally once daily for seven days Contact Clinical Oncology Specialty Trainee (ST) on-call at Cancer Centre, Belfast City Hospital, BHSCT - see Appendix 2 of this policy

NOTE: Some patients may be on combined modality treatment i.e. receiving chemotherapy along with radiotherapy (see also [NICAN Acute Oncology Clinical Guidelines v2 April 2022](#)).

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Patients will have treatment site specific information for future advice and guidance or contact the Cancer Centre on the numbers below (appendix 2).

Appendix 1 (cont'd)

Upper GI/Lung	May be initiated on regular antiemetics e.g. 5HT3 antagonists	Oesophagitis	Pain relief – as above. Consider Sucralfate liquid orally 1g four times daily. Antacid and oxetacaine suspension (unlicensed product) may be recommended – refer patient back to radiotherapy department, NICC, BHSCT for prescribing and supply due to cost and availability in primary care
		Cough	1st line - Simple Linctus orally 5ml four times daily when required. 2nd line - Codeine Linctus orally 5- 10ml four times daily
		Haemoptysis	Consider admission to nearest ED. Contact Clinical Oncology Specialty Trainee (ST) on-call at Cancer Centre, Belfast City Hospital, BHSCT - see Appendix 2 of this policy
		Severe shortness of breath	Consider admission to nearest ED. Contact Clinical Oncology Specialty Trainee (ST) on-call at Cancer Centre, Belfast City Hospital, BHSCT - see Appendix 2 of this policy
Urology (e.g. prostate)/Lower GI/Gynae	NB: Prostate patients may be prescribed a micro enema 30 minutes pre-radiotherapy to ensure rectal emptying and accurate radiotherapy treatment	Diarrhoea	Prescribe Loperamide orally 4mg initially, then 2mg after each loose stool (max 16mg daily)
		Diarrhoea despite maximum dose of antidiarrhoeals or with pyrexia	Contact Clinical Oncology Specialty Trainee (ST) on-call at Cancer Centre, Belfast City Hospital, BHSCT - see Appendix 2 of this policy
		Abdominal cramps	Hyoscine Butylbromide orally 20mg two to four times daily
		Cystitis	Potassium Citrate mixture orally 10ml three times daily. Query UTI – consider antibiotics
		Urinary retention	Contact Clinical Oncology Specialty Trainee (ST) on-call at Cancer Centre, Belfast City Hospital, BHSCT - see Appendix 2 of this policy
		Proctitis	Prescribe rectal products containing local anaesthetics and corticosteroids topically/rectally e.g. Uniroid HC® or Scheriproct®. DO NOT USE products that contain metal ions if patient receiving radiotherapy, e.g. Zinc oxide containing products such as Anusol®

Appendix 2

Contact numbers - Cancer centre, Belfast City Hospital, BHSCT

Contact	Working hours (08:30 – 17:00, Mon-Fri)	Other times
Radiotherapy department	028 9504 0457 On-Treatment Review Clinic	For items listed in red only and out of hours please contact: 028 90329241 (BCH switchboard) - Clinical Oncology Specialty Trainee (ST) on-call at Cancer Centre, Belfast City Hospital, BHSCT
Radiotherapy nurses	028 9504 0477/028 9504 0478	
Clinical Oncology Registrar on-call, Cancer Centre, Belfast City Hospital, BHSCT	028 90329241 (BCH switchboard) for those issues highlighted in red.	

* These guidelines refer to the management of adult patients receiving radiotherapy. For advice regarding paediatric patients, please contact the Clinical Oncology Specialty Trainee (ST) on-call at Cancer Centre, Belfast City Hospital, BHSCT.