

All Together Now

Overcoming Obstacles in Multidisciplinary working

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My Experience

Lead roles on
Paediatric Team

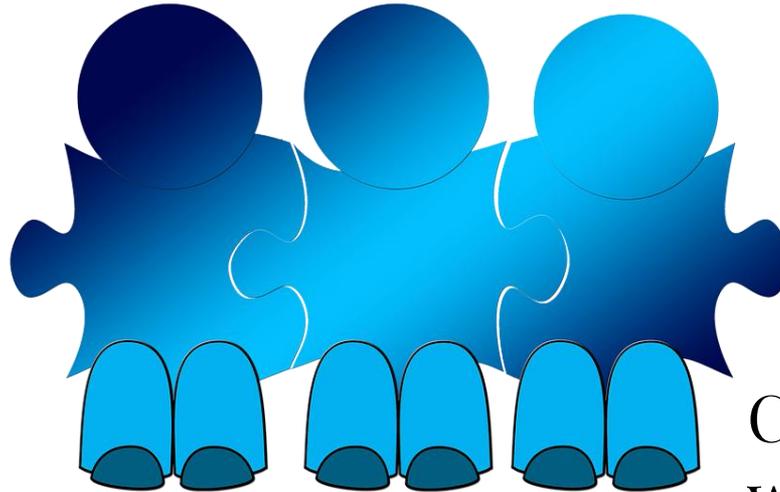


Running Kids
Days and Teen
Evenings

Conferences and
Study Days

Masters

Job Matching and
Job Descriptions



Caring for People
with Cancer Course

Bookings

Running a
unit

Rep

Obstacles



Time



Technology



Language



Location



Habit

Obstacles



Masters Project

Research

RT Info



Traditional boundaries



123 GP



Knowledge bases



Busy GPs & Rads

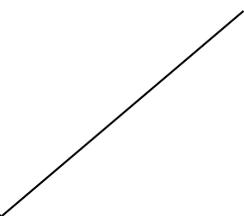
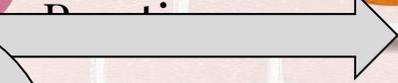
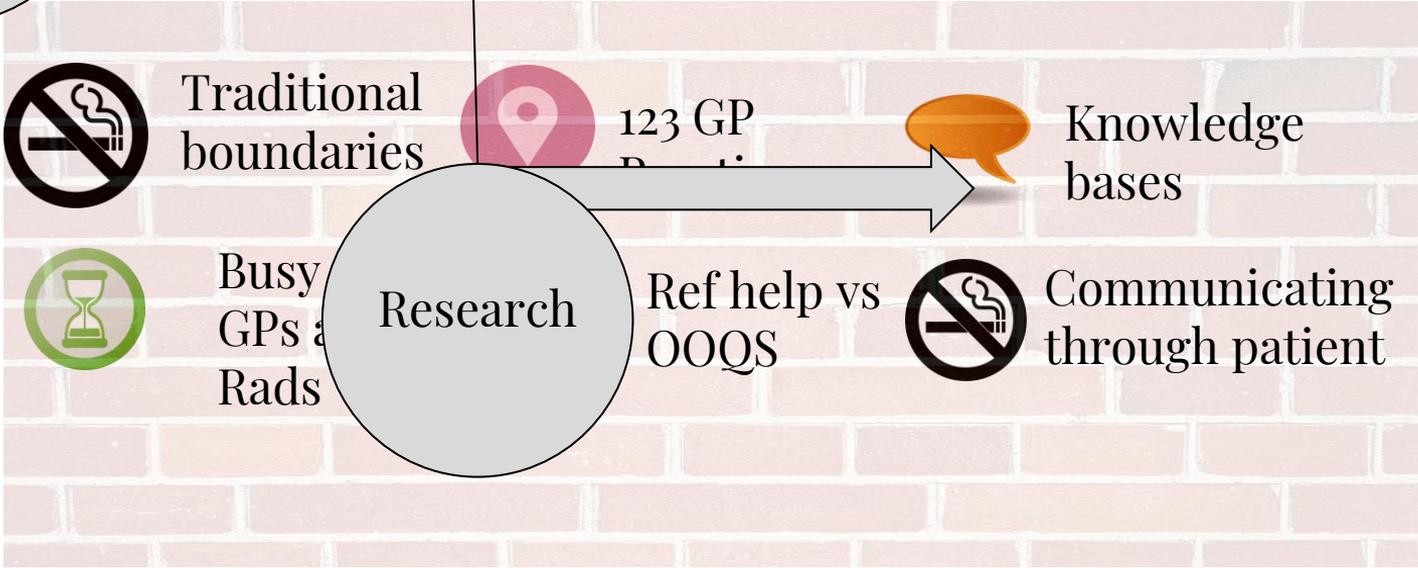
Research

Ref help vs OOQS



Communicating through patient

GPs



You are in > Oncology

Radio

 Malignant Spinal Tumours

Radiotherapy is the use of high energy beams to kill cancer cells. There are two main forms of radiotherapy: external beam radiotherapy and brachytherapy. Radiotherapy is used to treat a wide range of cancers, including breast, lung, prostate, and colorectal cancer. It can be used to shrink tumours, relieve symptoms, and prevent the cancer from spreading. Radiotherapy is often used in combination with surgery and chemotherapy. Radiotherapy is delivered at the Royal Edinburgh Hospital in Edinburgh.

You are in > C

Ma

Malignant

You are in > Oncology > Radiotherapy > Radiotherapy - Skin Care Post Radiotherapy

Post Radiotherapy Skin Care

Information

Some patients may develop a skin reaction during radiotherapy that is a bit like a sun burn. This will depend on the dose delivered and the area of the body treated. This reaction can continue to develop for 7-14 days after treatment, but will begin to settle after that. It will only occur within the boundaries of the radiotherapy treatment field.

Patients treated at Edinburgh Cancer Centre are provided with skincare advice and creams according to their assessed risk level for a skin reaction (low, medium or high).

Patients at a low risk for a skin reaction are not provided with any creams. If they develop a reaction they may be provided with Diprobace cream.

Patients at a medium risk for a skin reaction are provided with Diprobace cream and advised to apply it every morning and night from the start of treatment. If they develop a reaction they may be provided with Betamethasone 0.1%.

Patients at a high risk for a skin reaction are provided with Disprobase and Betamethasone 0.1%. They are advised to apply the Diprobace twice a day and the Betamethasone once a day from the start of treatment.

Patients are advised to apply any creams that have been provided by the Cancer Centre for two weeks after the completion of treatment, or until their skin reaction settles.

[Referral Guidelines](#)

[Primary Care Management](#)

[Patient Information](#)

[Resources and Links](#)

Leadership

Education

Bookings

Doctors



Limitations of Booking form



Booking form jargon



Trak vs chemo care vs time planner



Radiotherapy Department



Crowded bookings room



Short interactions



Different physical locations



Doctors in bookings room

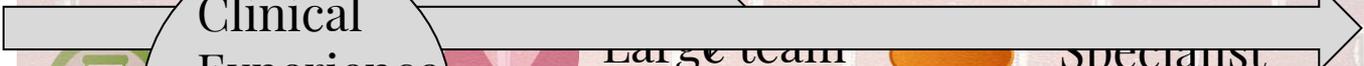
Paediatric Team

Clinical Experience across pathway



Maintaining team to patient/family relationship while also maintaining relationship between MDT members

Patient Info



Clinical Experience across pathway



Large team



Specialist Language



Different hospitals



Different systems for equipment/ Transport etc



Communication through gatekeepers

Across paediatric pathway

**“A pessimist sees the difficulty in every opportunity;
an optimist sees the opportunity in every difficulty.”**

-Winston

Churchill

Four Pillars of Advanced Practice

Research

Education

Leadership

Clinical
Practice

2

2

Community Liaison Expert Radiographer



Any Questions?