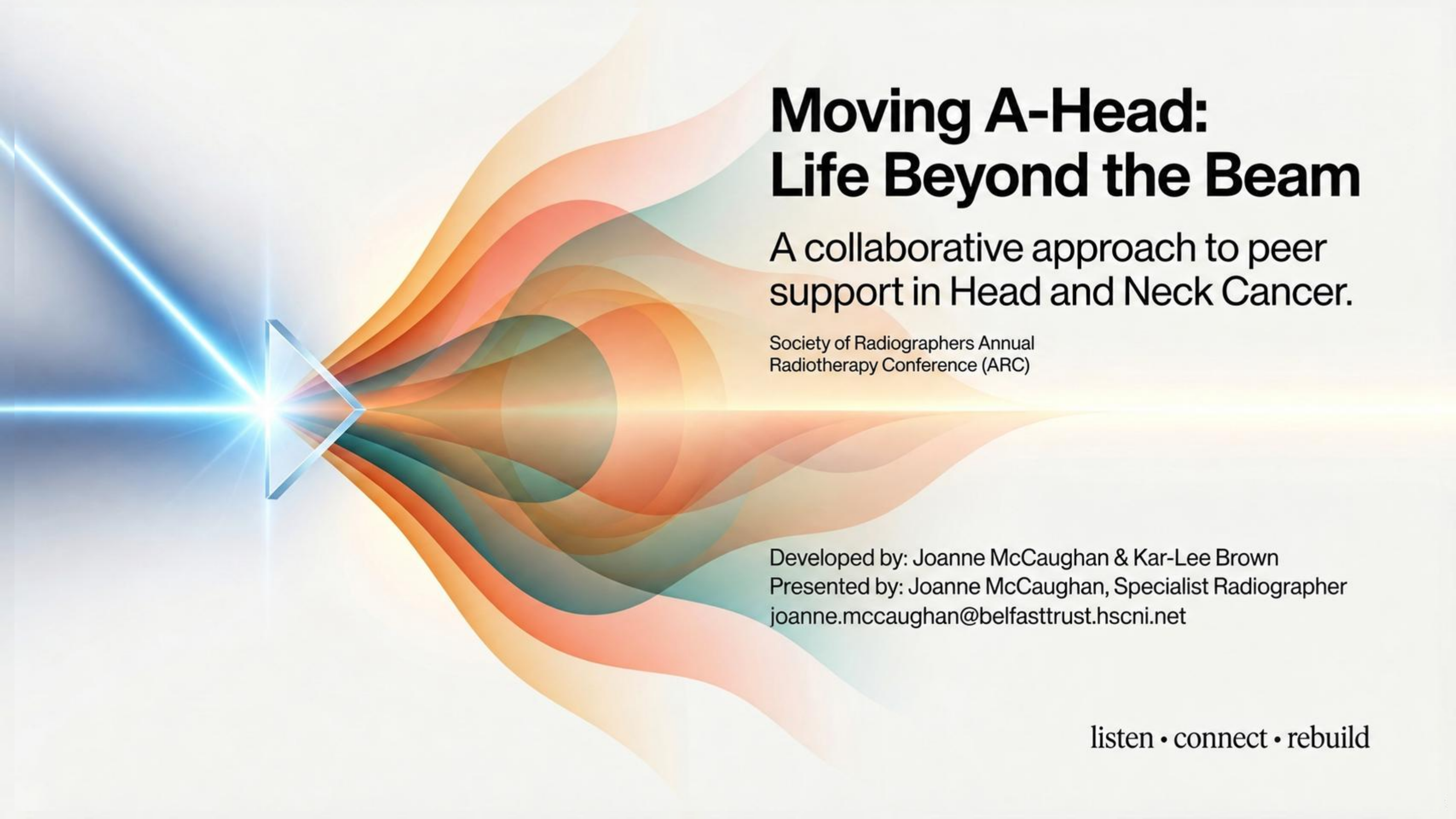




Moving A-Head: Life Beyond the Beam

A collaborative approach to peer
support in Head and Neck Cancer.

Society of Radiographers Annual
Radiotherapy Conference (ARC)

Developed by: Joanne McCaughan & Kar-Lee Brown
Presented by: Joanne McCaughan, Specialist Radiographer
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listen • connect • rebuild

A Conversation Sparked a Practical Response

The Origin

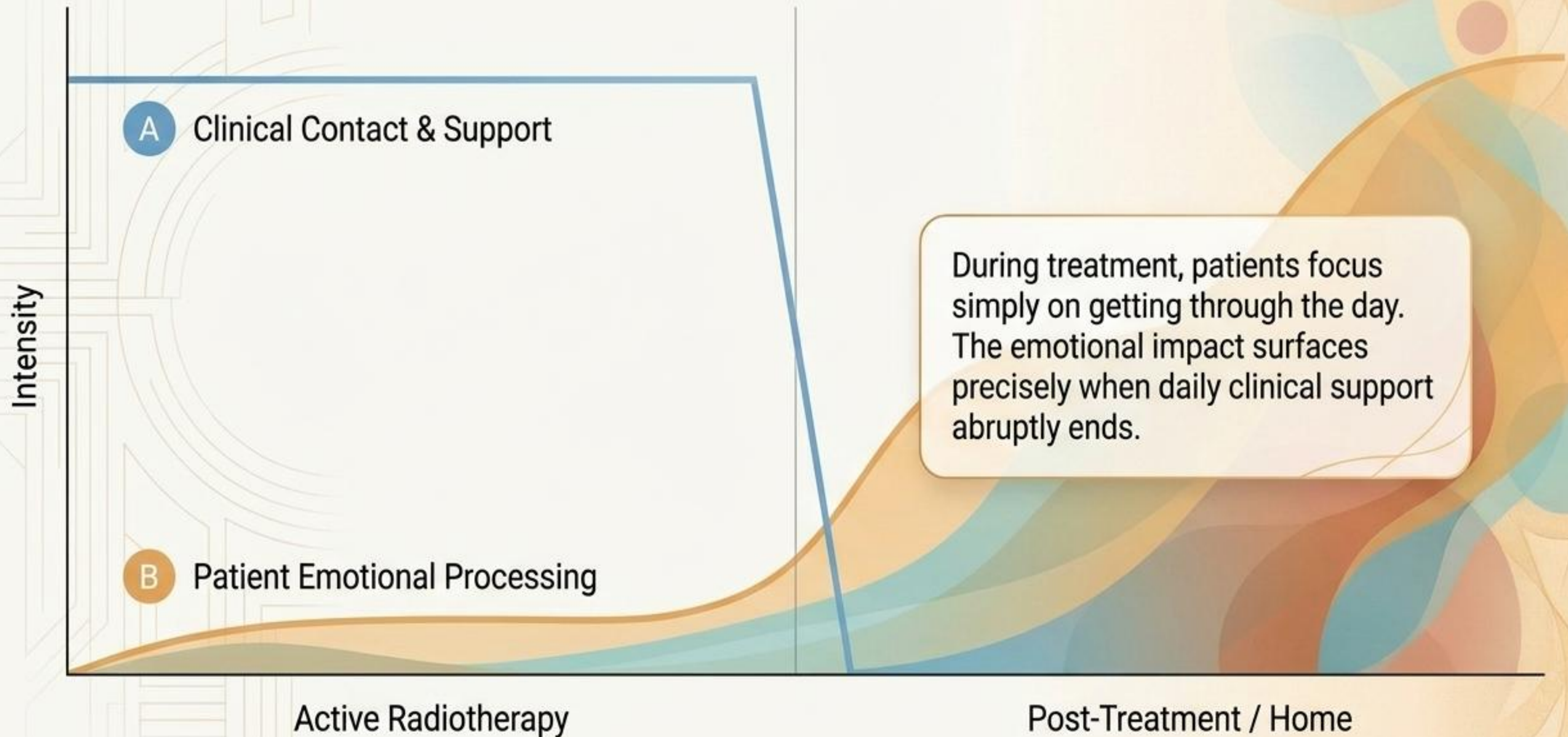
Moving A-Head originated from an open dialogue at the annual head and neck patient conference.

The Unmet Need

Through joint work with Cancer Focus Northern Ireland, the clinical team had an established understanding of post-treatment challenges, but the conference highlighted a critical, unmet need expressed directly by patients.

We needed to move beyond understanding the problem to creating a practical response to what patients were telling us.

Treatment Finishes. The Impact Does Not.



The Invisible Burden of Head and Neck Cancer



Visible / Physical

Lasting physical effects,
eating and swallowing
difficulties.



Functional / Identity

Changes in appearance,
communication problems,
severe fatigue.

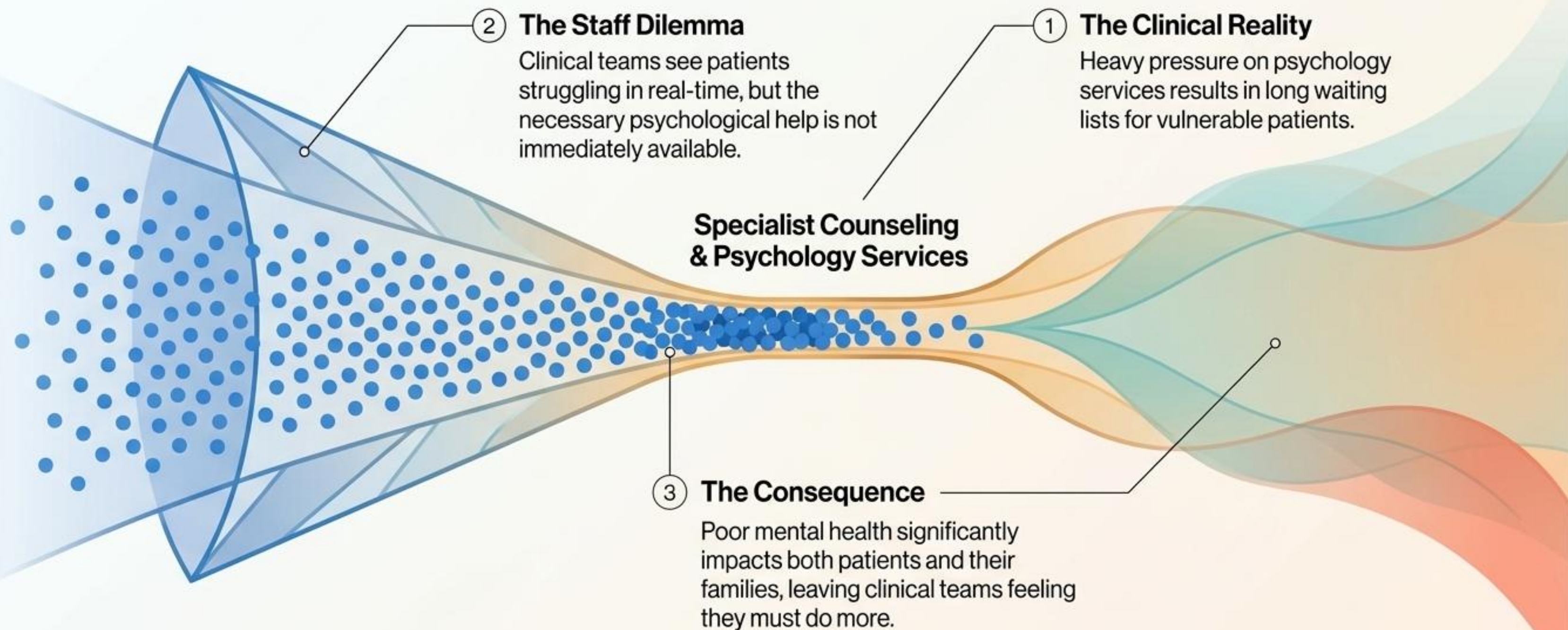


Invisible / Psychological

Anxiety, low mood,
loss of confidence,
profound isolation.

For many patients, surviving the treatment is only the beginning.
Life does not simply return to how it was before.

The Systemic Bottleneck in Post-Treatment Care



Building on Existing Foundations



We did not set out to replace professional psychology.
We partnered to create an immediate, accessible parallel layer of support.

Creating a Safe Space: What Moving A-Head Looks Like

The Environment

A relaxed, supportive, and distinctly less clinical setting where patients can talk openly.

The Facilitation

Guided by Cancer Focus facilitators to ensure safety, spark conversation, and give everyone a voice.

The Focus

Centered around peer support, shared experience, and connection—shaped dynamically by the needs of the attendees.

The Extras

The flexibility to bring in relevant speakers or offer practical advice when the group requires it.

A space designed to help people rebuild confidence, connection, and identity.

Distinct Approaches for Different Needs

Traditional Review Clinic	Moving A-Head
Disease status, symptom management, physical recovery	Emotional processing, identity, navigating life changes
Hospital setting, time-bound, doctor-led	Relaxed space, open-ended discussion, facilitator/peer-led
Am I disease-free?	How do I live with this?

Moving A-Head operates alongside clinical care, offering what medicine alone cannot.

The Relief of Shared Understanding

I had that too.

Families often expect life to return to normal post-treatment, making patients hesitant to burden them with ongoing struggles.

Simply hearing someone else validate their specific day-to-day effects breaks the isolation.

Veterans of the group (those further along in recovery) provide tangible reassurance and practical advice to newcomers.

They helped me express what I couldn't put into words before.

Glenn

● The Story

Diagnosed with tongue and throat cancer in Feb 2024.

Endured 30 radiotherapy and 4 chemotherapy sessions; lost over 3.5 stone.

"I wouldn't have survived at home... Step by step, I built a belief I could get through it."

● The Intervention

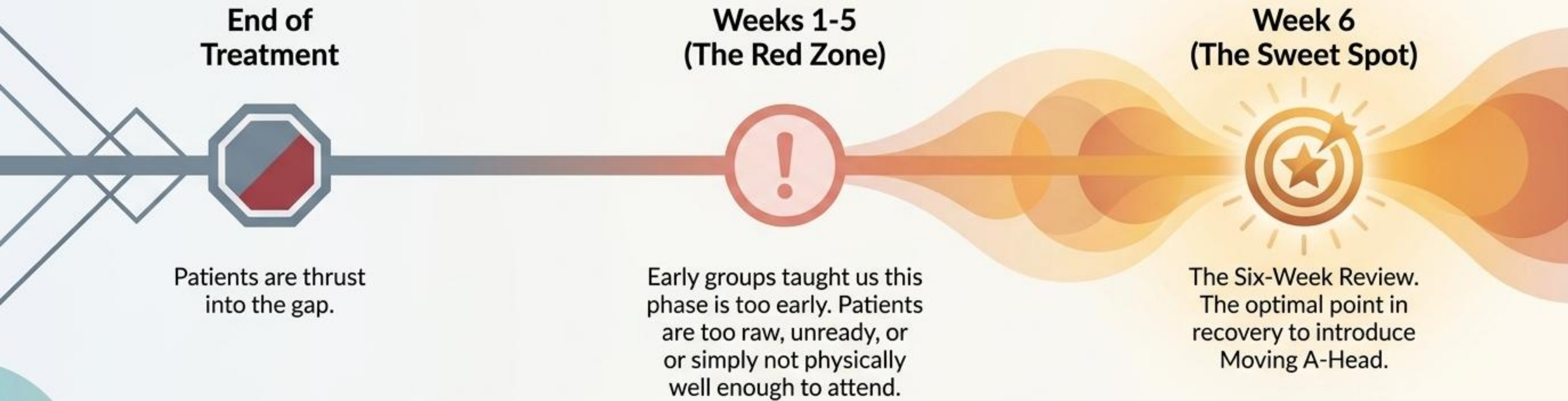
Introduced to Moving A-Head by his radiographer at the hospital.

Facilitated by Cancer Focus NI in a welcoming, non-clinical space.

Walking into that room for the first time was emotional. During the sessions, I was with people who truly understood what I'd been through... they reminded me I wasn't alone. They were invaluable, and without that support, I don't know where I'd be now."

Section 4: rebuild

The Science of Timing: When to Intervene



Effective peer support isn't just about what you offer, but when you offer it. We adapted based on direct patient feedback.

The Radiographer's Evolving Role

During Treatment



Intense daily contact. We see patients at their worst, build strong bonds, and notice unspoken struggles.

Post-Treatment



We are not counsellors or psychologists, and we do not need to be.

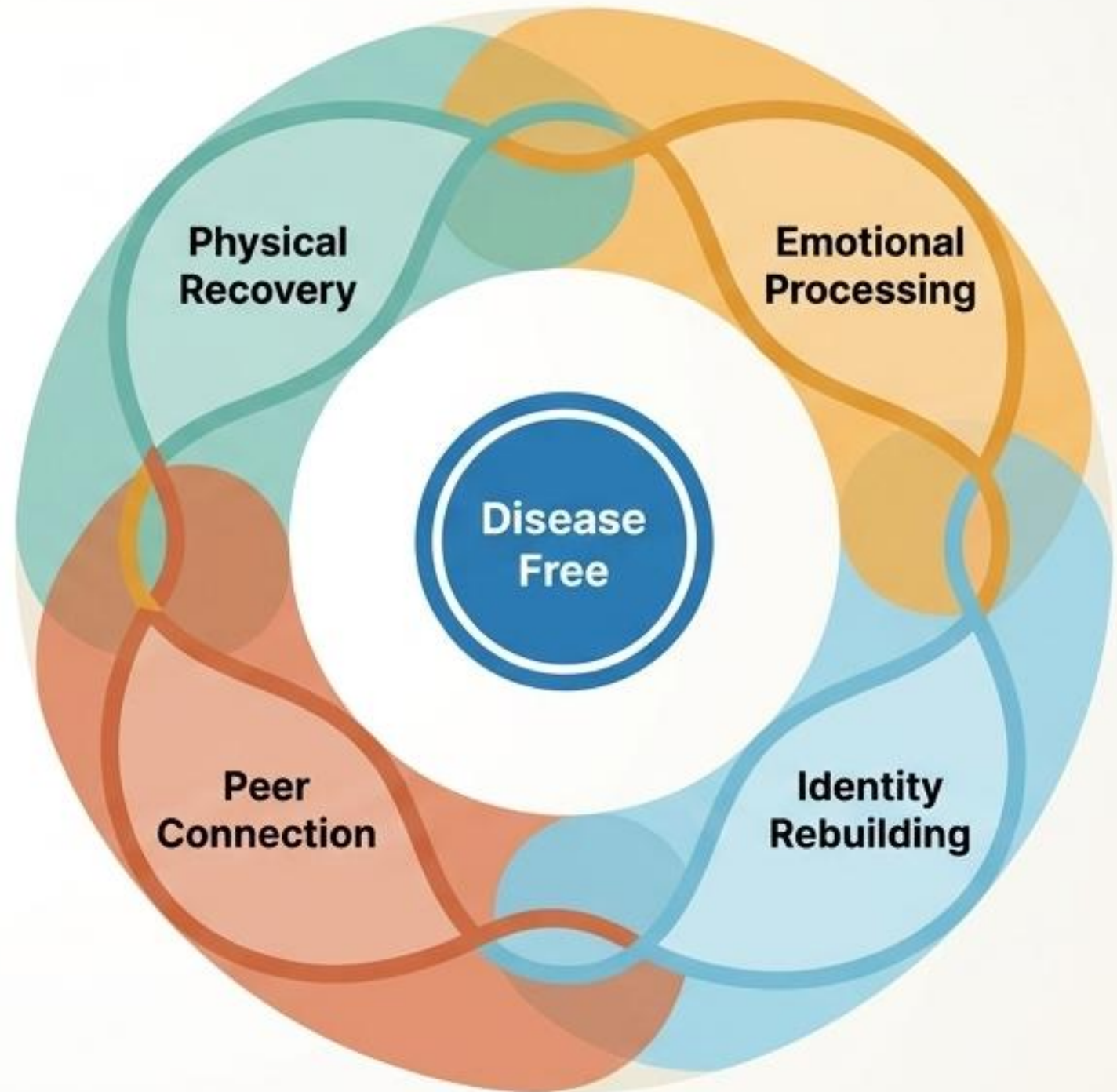
We are in the best position to recognise the need and signpost to the solution. We ensure they are not left managing everything on their own.

Redefining Survivorship

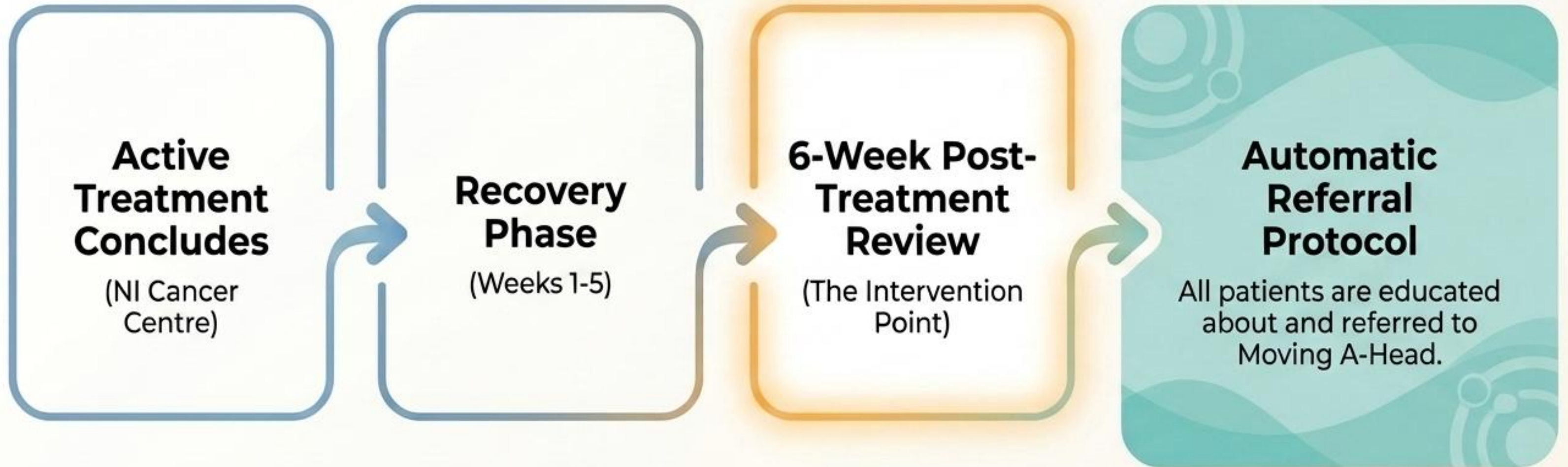
Survivorship is not a static destination achieved on the last day of radiotherapy. It is an ongoing ecosystem.

Core Insight

Radiotherapy is only one part of a person's cancer experience. When the beam turns off, the hard work of recovery is often just beginning. True survivorship means actively helping people manage the physical and emotional effects that continue long after.



The New Standard of Care



As our experience has grown, Moving A-Head has become embedded within our established follow up pathway. Participation is now the expectation, not the exception.

Recognition driven by the patient voice



The Nomination

The Moving A-Head service was nominated directly by a patient—representing the highest possible validation of its real-world human impact.

The Result

The collaborative team has been officially shortlisted as Finalists for the 2026 Inspirational Charitable Organisation award.

The Core Message

Proof that simple, well-timed, non-clinical peer support profoundly changes the survivorship experience.

Core Takeaways for Clinical Teams

Simplicity works.

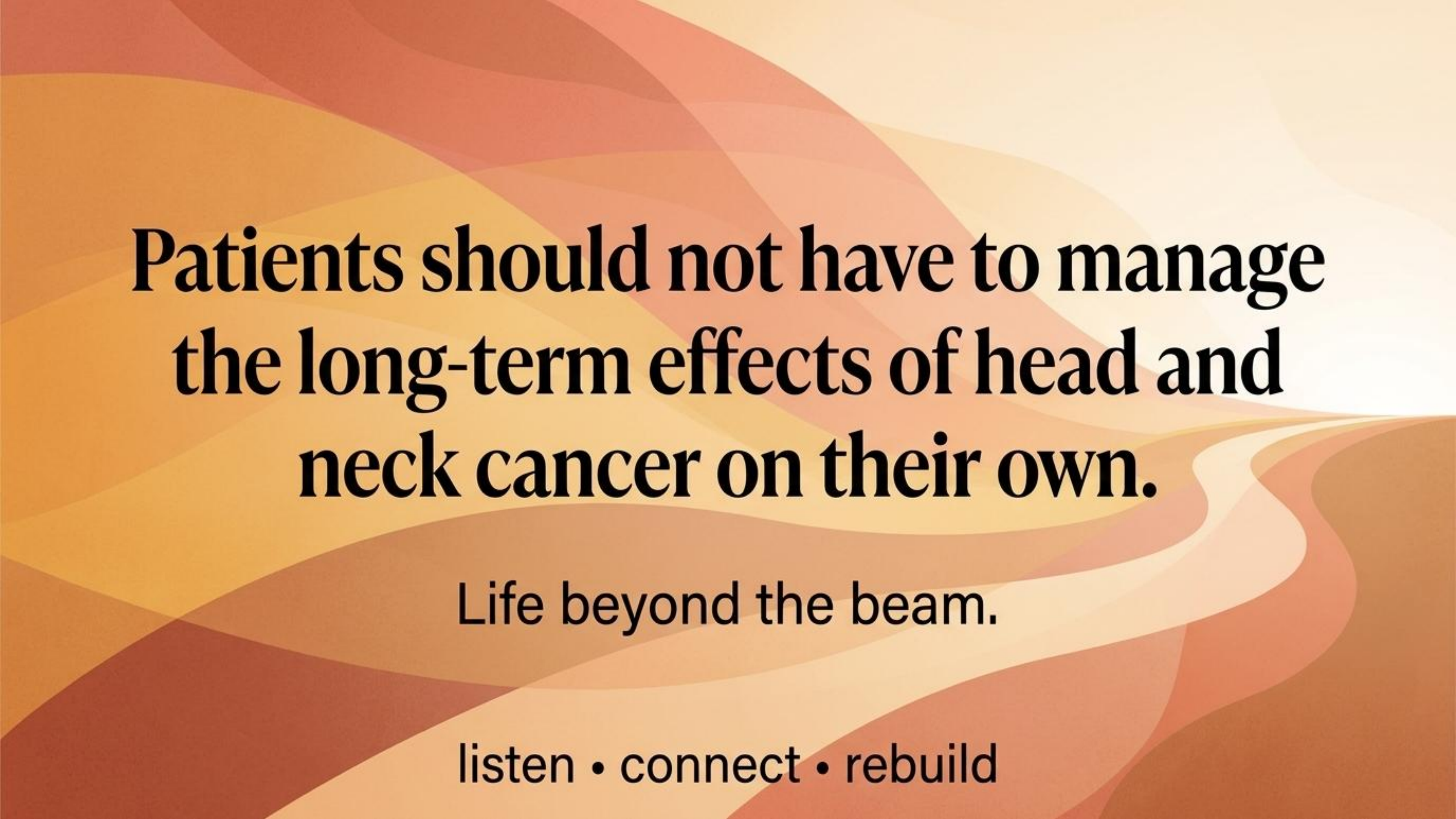
Peer support does not need to be overly complicated. Simply creating the opportunity to meet and listen is profoundly valuable.

Leverage existing trust.

Collaboration accelerates solutions. Build on the strengths already present between clinical teams and charity partners.

Let the patient lead.

Keep the patient experience at the center. Listen to their feedback, adjust the timing, and let their needs shape the discussion.



**Patients should not have to manage
the long-term effects of head and
neck cancer on their own.**

Life beyond the beam.

listen • connect • rebuild