

# Bay Health

Staff newspaper of Swansea Bay University Health Board



## It's the Miracle of Morriston as Santa tunes in for virtual visit



He may be up to his twinkly eyes getting ready for Christmas, but Santa still found the time to chat to young patients in Morriston Hospital.

A little digital magic meant he was able to have virtual meet and greets with them from the comfort of his North Pole home.

This was all thanks to technology giant Cisco, which has brought

its Connected Santa programme to Morriston for several years, along with volunteers from Cisco and Swansea Bay's IT department.

Lisa Morgan, children's services play coordinator, said: "It's lovely to see their faces. They get to have a present as well, with the gifts donated by Cisco, and they all really enjoy it."

SCAN BARCODE FOR A SELECTION OF BAY HEALTH STORIES ONLINE



### INSIDE THIS ISSUE...

Swansea Bay's a leading player in global trial  
PAGE 4



Our One Bay Way Awards winners are picture-perfect!  
PAGES 6&7

# New cardiac monitor leads to huge reduction in waiting time



Senior cardiac physiologist Aled Phillips pictured with the device

A tiny device is having a massive effect on reducing waiting lists in Swansea Bay's cardiology service.

Recent advances in technology have enabled devices - designed to monitor a patient's heart rhythm - to become so small they can now be injected under the skin by a specialist cardiac physiologist.

The monitor, which is less than two inches long, is implanted using a syringe.

The benefits are numerous to patients and the NHS alike. The procedure is performed in an outpatient setting, so operating theatres and physicians are freed up to carry out more complex procedures. This not only reduces costs, but frees up beds, as patients no longer need to be admitted. The time from referral to

procedure has significantly reduced as a result of this service, which allows quicker diagnosis to treatment times - now down to between two to three weeks instead of almost 60 weeks. The service treats around 130 patients a year.

The follow-up of these implantable cardiac monitors is done from the comfort of the patient's home.

Once the implantable monitor is in place, the patient is given another device which is plugged in at home. This communicates with the implanted monitor when the patient is near it, and readings are then transmitted to the team of cardiac physiologists at Morriston Hospital.

Turn to page 3



Abi Harris, Swansea Bay University Health Board's Chief Executive

Welcome to our seasonal edition of Bay Health, showcasing some of the fantastic work and innovation which has been taking place across our health board.

Firstly, I hope everyone enjoys or has already enjoyed some quality time with friends and family over the festive period and is looking forward to the months ahead as we head into 2025.

I appreciate Christmas and the New Year is always one of our busiest times for a number of reasons and at the time of writing, we are facing considerable pressures across our health and care system with unrelenting demand on urgent and emergency care services.

As you'll doubtless be aware, we have been working extremely hard with our partners to alleviate some of these pressures, with a particular emphasis on significantly improving the flow of patients through our system.

We also made a direct appeal recently for the family and friends of patients who no longer need medical treatment to help us discharge them from our acute hospitals. Like the patients themselves, whenever possible, we want to get them back to the comfort and familiarity of their home environments because for many, that will be the setting in which they will fare best and come to least harm.

Dealing with the pressure at our front door is a team effort, involving colleagues from right across the health and care system. Together, our focus is on ensuring our patients get to the service they need in a timely way - a focus we would want for our families and friends. With the pressure felt in particular parts of the system, patients are waiting too long - long waits for transfers from an ambulance to hospital and from hospital to home.

We know only too well that patient flow has been a persistent and frustrating NHS-wide issue for a considerable time.

You'll also know of our commitment to implementing the actions identified by the Welsh Government's '50-day challenge', which is a national push to reduce the numbers of patients who are 'stranded' in acute hospitals beds but well enough to return to their home setting.

Equally, we know there is no 'silver bullet' solution to tackling this but it is undeniably one of the biggest obstacles we face when it comes to providing the best possible care for our patients.

However, the good news is, we've actually seen already over recent weeks what we need to do and it's nothing new or complicated.

We held an Urgent and Emergency Care Summit earlier in December, getting everyone around the table including our colleagues at the sharp end to identify what has been going wrong during times of most pressure and the measures and practices which actually make a difference to helping ease this pressure and in turn, ease the burden on ourselves and improve the patient experience.

In short, what it boils down to is a One Bay Way approach, in which we consider how our actions affect not just the patient and colleagues immediately around us, but our colleagues across the entire system and those patients who are stuck in an ambulance or on a trolley waiting for admission. We are now in the process of formalising our approach, ensuring we have a clear focus so the above becomes second nature across our teams. Look out for more detail around this on our staff intranet and via my Midweek Message. You can also ask me about it in one of the regular Ask Abi sessions we are running on Teams.

It's also imperative that we really do take on board that good patient flow is 100 per cent consistent with good patient care.

If you need an acute hospital bed, then hospital is the right place to be. If you don't, then the risks of infection, deconditioning and loss of independence can have serious negative consequences.

People who really do need to be urgently admitted should not face long delays at the front door (or out in the community) because these waits can harm them. Equally, patients who are medically fit to leave hospital should be able to leave on time, or

they too can be harmed by a prolonged stay.

Finally - and just as importantly - those who need unscheduled care but don't need to be admitted because they can be managed in another way - should not be coming into hospital, otherwise they could be harmed.

We must also have a clear focus on reducing incidents of illnesses and conditions escalating to the need for unscheduled care in the first place, with an emphasis on prevention and public health at the forefront of our strategic approach.

Tackling health inequities across our communities will play a significant role in reducing the numbers of people who need to be seen at or admitted to our hospitals. We know across the health board area, we have very wide-ranging levels of deprivation and health experiences.

So, it's how we work collaboratively with communities, third sector partners and local authorities to tackle some of these inequities and deliver health improvement which will be key. I know there are already lots of examples where we are doing this, so it will be a case of building upon and expanding some of the good work that is already happening.

We also know improving planned care and digital innovation will increasingly be key to service improvement for our patients. While it is vital to ensure we do not leave members of our community behind in the push to modernise access our services, our digital services colleagues both in Swansea Bay and across NHS Wales have a key role to play in helping to transform many areas of our work, including, for example, our outpatient strategy, by moving away from an automatic follow-up appointment approach to one where patients with short-term conditions can self-refer within an agreed time frame if needs be.

Public awareness and greater access to our Swansea Bay Patient Portal, which offers opportunities to self-monitor conditions and, in some cases, to contact health professionals directly, will help make the most of the opportunities presented by the digital revolution.

So as we look ahead to another year, I'd like to once again express my sincere gratitude for all your hard work and dedication and to underline how it is only by working together, encapsulating our One Bay Way, that we will overcome our challenges.

## Special Christmas thank you for wonderful volunteers

The tireless work of Swansea Bay's dedicated army of volunteers has been recognised at a special pre-Christmas celebration.

More than 100 of them attended (see picture), representing the 300 or so people who volunteer in the health board's hospitals and other centres in the Swansea and Neath Port Talbot areas.

During the event at the Village Hotel in Swansea they were treated to a meal, a rousing performance by the Rock Choir, a quiz and a free prize draw with an array of lavish prizes donated by local businesses. Opening the celebration, which was paid for by a generous legacy donation, Swansea Bay's Volunteer Services Manager Katie Taylor said: "We really appreciate everything that you do."



"Today's event is all about you. It's about celebrating the difference that volunteers make each and every day."

Christine Morrell, Executive Director of Allied Health Professionals and Health Science, is also Swansea

Bay's executive lead for volunteering. "It's a real privilege to be here this afternoon," she said. "Volunteers play such an important part within our health service, in terms of patient experience, in terms of the added extras and the support individually to patients and to staff. We really appreciate it."

Swansea Bay Chief Executive Abi Harris has also paid tribute to the volunteers for the support they provide to the health board, patients, visitors and staff.

"We simply cannot put a price on the value you add, and we are sincerely grateful for all of your help," she said. If you are interested in volunteering or how volunteers can help you and your area please contact the Volunteer Team at: [volunteer.centre@wales.nhs.uk](mailto:volunteer.centre@wales.nhs.uk).

# Small is beautiful as monitor proves a cardiac game changer

## From front page

Consultant cardiologist Dewi Thomas is responsible for the exciting development having trained the Morryston Hospital-based physiology led clinics team.

Dr Thomas said: "This technology provides the best form of continuous heart rhythm monitoring that we have, and automatically alerts us to any episodes of heart rhythm disturbance.

"In recent years it has been improved and miniaturised to the extent where this device can now be injected under the skin rather than requiring a small operation in one of our theatres.

"By virtue of this, we've been able to move the implant procedure into an outpatient setting where it's now performed by Aled, our senior physiologist.

"This has a number of potential advantages. It has massively speeded up the time that patients have to wait for one of these - previously, patients were booked in for six monthly appointments for monitor checks while now, they are all home monitored so any arrhythmias are seen within 24 hours."

Dr Thomas said the device - known as an ILR or implantable loop recorder - detects arrhythmias, or disturbance of heart rhythm, which can result



in collapse, stroke, and dangerous heart rhythm disturbances that can place people at risk of sudden cardiac death. He added: "The innovative practice is not so much putting this device in - it's the way that we have built a physiologist-led service around that."

Aled Phillips, senior cardiac physiologist, said Dr Thomas had been instrumental in enabling Swansea Bay University Health Board become one of the first in Wales to adopt this approach.

He said: "Dr Thomas's guidance, training and

ongoing support has enabled us to successfully implement this service in Swansea Bay UHB.

"It's an advanced procedure for our profession, it's not something that's routinely done by cardiac physiologists - it's usually done by physicians.

"It's an injectable monitor. It is delivered using a syringe-like system, the implantable monitor sits under the skin layer over the heart.

"The device itself is around 45mm long and 5mm wide and 3mm thick - which is a third of the size of its predecessor.

"It's something extra that we can do to help with waiting times, costs and patient safety and outcomes.

"This service has reduced footfall in the hospital as the follow-up for this device is done from the patient's home via a home monitoring device, which means that patients no longer need to attend the hospital for routine appointments." Aled also echoed Dr Thomas' view that the development in technology benefitted all.

He said: "It allows physicians to carry out complex procedures in the catheter lab and displaces this minor procedure to an outpatient setting which increases compliance and is less daunting for patients."

## My fitness kept me alive, says bodybuilder

A Swansea bodybuilder - crowned Mr Wales 12 times - has shared how he survived a life-threatening heart infection because his fitness levels were so high.

Now he's encouraging others to take fitness seriously and embrace a healthy lifestyle.

Neil Andrews was so ill with the cardiac infection that he was advised to put his affairs in order and prepare himself for the worst the night before a major heart operation to save his life. He even recorded a video message for his daughter and wrote a will.

Thankfully he survived the operation and has since completed a remarkable recovery which has seen him go from losing 20kg in weight during a two and a half month stay in hospital to becoming a professional bodybuilder.

Morryston Hospital's cardiac centre staff attribute his amazing recovery to his physical fitness.

Neil, who won his Mr Wales titles as an amateur bodybuilder, decided to share his story to both thank the Swansea Bay staff who saved his life and to highlight the importance of keeping fit when recovering from illness.

"You reap what you sow, daily. Just look after your health and body and it will look after you," he said.

The 45-year-old from Swansea recalled his sudden illness in March 2022. He said: "I woke up on a Sunday and was shivering uncontrollably. I got changed and went out with the family but had to turn the car around because I felt so fatigued.

"I was admitted to Singleton Hospital. They thought it might be meningitis at first. They did three lumbar punctures that came back negative.



Pictured, from left to right: Vincenzo Cianci (Senior Clinical Fellow Cardiac Surgery), Afzal Zaidi (Consultant Cardiothoracic Surgeon and Clinical Director), Neil Andrews, and Sammy Bradley (Preadmission Clinic Sister)

"They sent me home but I had a phone call saying come straight back, they'd found bacteria in my blood.

"I came back and that's when I kind of went downhill. I ended up being blue-lighted to Morryston Hospital's cardiac centre."

An echocardiogram revealed that he had a heart condition called infective endocarditis of the aortic valve that required immediate lifesaving surgery.

Neil said: "I will never forget the words of the consultant, Mr Zaidi. He said he didn't know how I was alive. He told me I had been in acute heart failure for two weeks, but I was so physically fit and strong I was still alive.

"He said we had eight hours to try and do something or I wouldn't see another eight hours. He advised me

to get my affairs in order because I was in a bad way. "They took me down to surgery the next morning. I honestly didn't think I would survive."

Unsurprisingly, considering his dedication to his sport, Neil relished tackling the long road to recovery.

He said: "I had lots of ups and downs. Physically I had lost 20kg (more than 3 stone) in weight. I had to learn how to walk again. I couldn't walk without help. The physiotherapy team was brilliant.

"It was all about recovery then. I started off walking to the end of the ward. Then I was walking to the end of the corridor. Then I would walk to main reception. Then I would walk out of the hospital and around the perimeter every day.

"Every day it got a bit better and better."

He has nothing but praise for those who helped him.

He said: "The staff were amazing. I can't speak highly enough of them. They saved my life. To be honest, after two and a half months I didn't want to go home. I felt safe and secure."

Now Neil's message to anyone who finds themselves in hospital is to work alongside the staff to aid recovery.

He said: "I honestly believe that you reap what you sow daily. That's what I try to put over to my followers on social media - the importance of being fit and healthy. I honestly believe that's what saved my life."

# Swansea Bay a leading player in game-changing global trial

A global trial in which Swansea was a leading player has been a game-changer in the treatment of a particularly aggressive type of cancer.

Analysis of a clinical trial that used a combination of drugs to treat metastatic melanoma, or skin cancer which had spread around the body, shows that almost half of patients are surviving 10 years or more.

This compares with 2011 when the average survival was just six-and-a-half months.

The Cancer Institute at Singleton Hospital was one of the sites around the world that participated in the trial, called CheckMate 067, in 2013-14.

It involved using two immunotherapy drugs instead of chemotherapy, with remarkable results.

For medical oncologist Professor John Wagstaff, who has now retired from the Cancer Institute, the results mean he has ended his career on a high.

“Going back 10-15 years we used chemotherapy to treat metastatic melanoma and that was really not a very good treatment at all,” he said.

“Only about one in five people would get shrinkage of the melanoma. The average survival was around eight or nine months and virtually no-one survived longer than two years. It was a pretty dismal disease to have. “We’ve known for 30 years that the immune system does try to keep the melanoma under control. It’s just not very good at doing that on its own.

“The drug companies started to develop new medicines that work by boosting the body’s immune system.

“There were basically two main drugs that were developed. One was a drug called Ipilimumab, which was tested in clinical trials.

“Analysis was undertaken of all the clinical trials that had been done, which had just a little bit shy of 5,000 patients worldwide.

“That showed that that drug on its own would get control of the melanoma at 10 years in about 20 per cent of patients.

“That was really the first time that it been shown that a drug that works through the immune system could actually get long-term survival benefits for patients.”

The next drug to be developed was called Nivolumab. At that time, 10 years ago, there were no long-term results from that drug on its own.

The 067-trial split the patients into three groups. One received Ipilimumab, which was standard treatment at that time. A second group got Nivolumab on its own and a third group got the two drugs together.

“There were just shy of 1,000 patients in that trial, worldwide,” said Professor Wagstaff.

“There were five centres in the UK that took part in it. We recruited 17 patients from across Wales, and

Professor John Wagstaff, pictured with Maria Johnstone, the only research nurse within the Cancer Institute who worked on the clinical trial from start to finish



one from England. We were the fifth or sixth highest recruiting centre in the world and I’m co-author of all the publications that have been published about the trial.

“It was a trial that recruited extremely quickly worldwide, and the results were quite spectacular. With the combination treatment, the shrinkage rates were up at around 65 per cent.

“And then, as time went by, it became clear that the remissions we were seeing with these treatments were much better than what we were seeing previously.”

Five years after the trial, analysis showed that 53 per cent of the patients who received the combination of drugs were still alive. With Ipilimumab alone it was at around 23 per cent.

Earlier this year, the 10-year analysis showed that 43 per cent of patients with the combined treatment were still alive.

“One of the other most important things about this

trial is that we looked at all the patients who were in remission three years after they started treatment and looked what happened to them at 10 years,” said Professor Wagstaff.

“And only three per cent of the patients who were in remission at three years died of melanoma by 10 years. So virtually nobody has had a recurrence of their melanoma from between three years and 10 years. This suggests that these people are actually cured of their metastatic melanoma. So, we’ve gone

from a situation where you had a pretty uniformly fatal cancer to one where we’re curing a little bit less than half of the patients.”

The report into the 10-year outcomes has been presented at a major European cancer conference in Barcelona and the results published in the New England Journal of Medicine.

Professor Wagstaff described it as fantastic news for patients, which had changed the treatment of melanoma worldwide.

“It’s a little bit like patients with testicular cancer in the 1980s or 1990s. when we first started treating those patients with platinum-based chemotherapy,” he said.

“Testicular cancer used to be, again, a disease that people died of very, very quickly once they were diagnosed with metastatic disease. With platinum-based chemotherapy, you’re curing 80 per cent of the patients. It’s that kind of sea-change we’re seeing with this treatment.

“The interesting thing is, melanoma was the first cancer that these treatments were tried in but subsequently there have been clinical trials in non-small cell lung cancer, in kidney cancer, quite a wide range of cancers, and this treatment is effective in a broad variety of other cancers as well.

“We took part in a trial with metastatic kidney cancer using the same treatment. It doesn’t work quite as well in kidney cancer but you’re getting long-term survival in around about a third of the patients.”

The Cancer Institute was built following a £1 million charity appeal run in conjunction with the South Wales

## Going the Extra Mile for Cancer... here are some of the fantastic donations we've received so far



Sisters Emma Phillips and Rachel Bennett with their cheque for the Chemotherapy Day Unit.



Sisters Clare Hanley and Alison Davies, stepmother Carol Catley and CDU manager Sue Rowland.



Mr and Mrs Diamond with radiotherapy researcher Jonathan Helbrow and consultant clinical oncologist Dr Sarah Gwynne.



Pictured from left: Arwyn Taylor, Andrea Jones, trainee consultant radiographer Rebecca Lloyd, Peter Guy and Alison Sandy.



Pictured from left to right: Richard Diplock, Brianna Maier, Occupational Therapist (OT), Jo Perry, Physiotherapist, Leanne Thomas, Macmillan Team Lead Occupational Therapist, Rhodri Johnson, Specialist Physiotherapist, Kimi Exley, Physiotherapist, Wendy Taylor, OT student, Sophie Kirby, Macmillan Team Lead Physiotherapist, Alison Perkins, OT Tech, Rachel Cusano, OT Tech, Victoria Edwards.



Pictured from left: Sue McCauley, Lynda Jenkins, Menna Hughes and Chemotherapy Day Unit manager Sue Rowland.

Since its launch in September, our Going the Extra Mile for Cancer fundraising appeal has seen some amazing stories of our local communities giving something back for the care and compassion shown by Swansea Bay staff.

The appeal was launched to raise £200,000 for the South West Wales Cancer Centre, based at Singleton Hospital, which provides cutting-edge care for thousands of patients from Swansea Bay and Hywel Dda health board areas. It coincides with the centre’s 20th anniversary and is being run by our Swansea Bay Health Charity.

And the appeal has certainly captured the hearts of many across our region as individuals and families have got stuck in to raising funds, often in the memory of a loved one who had received treatment at the centre, by undertaking a wide variety of challenges and activities.

Pictured above are some of these fundraising stories, with the appeal having got off to a flying start. Top left are sisters Emma Philips and Rachel Bennett, who raised £5,000 to thank centre staff after Emma had been diagnosed with breast cancer last year. The dynamic duo took on a wide variety of

fundraising activities, from a supermarket bucket collection to auctioning a pair of boots and jersey donated by Wales rugby legend Leigh Halfpenny. Another sister act, Alison Davies and Clare Hanley, each walked 300,000 steps in a month to raise £1,400 for the centre’s Chemotherapy Day Unit in memory of their dad David Catley, who had been treated for bladder cancer at the centre.

Then pictured top right is another donation for £1,400 made by former Wales rugby player Richard Diplock and his family in memory of his much-loved mum, Ann.

Ann was taken ill this time last year and admitted to ward 12 at Singleton. The money raised by the amazing Diplock family will pay for rehabilitation equipment for use on the ward.

Meanwhile bottom left are Swansea couple June and John Diamond, who raised £2,000 for the centre after John received treatment for oesophageal cancer. The couple have requested the money raised goes towards paying for research at the centre, which will one day benefit patients and families.

Bottom middle is a donation for £1,000 from

organisers of the Waunarlwydd Carnival, which in part came about after carnival committee member Peter Guy was successfully treated by the centre. And finally bottom right, generous Gower gardeners made a £6,000 donation in memory of one of their own. Every year, some of the residents of Llanmadoc and Cheriton open up their gardens to visitors to raise funds for various good causes.

Among them were Roger and Menna Hughes, who were also closely involved with mixed choir Cantorian Llanmadoc.

Sadly, Roger died in July, a year after being diagnosed with pancreatic cancer. So a concerted effort saw the gardeners, choir and mourners at Roger’s funeral raise money for the South West Wales Cancer Centre.

To support the Going the Extra Mile for Cancer appeal, use this link:

<https://swanseabayhealthcharity.enthouse.com/cf/going-the-extra-mile-for-cancer>

And to find out more about the appeal, use this link:

<https://swanseabayhealthcharity.com/appeals/going-the-extra-mile-for-cancer/>

Evening Post, leading up to the opening of the South West Wales Cancer Centre in 2004.

The SWWCC provides the infrastructure for the Institute’s research delivery team, together with cancer and haematology clinicians, to run various UK and global trials. Earlier this year, the Institute moved to its purpose-built new home, a dedicated clinical trials suite alongside the Chemotherapy Day Unit on

Ward 9 at Singleton Hospital. Funding from the Welsh Government, first via the Wales Cancer Research Network and now by Health and Care Research Wales, has supported the growth of cancer research within the health board.

There can be 30 trials running at any one time. Many have led to huge strides in cancer treatments, with Swansea’s success in recruiting patients making it one

of the UK’s leading sites. Professor Wagstaff arrived in Swansea in 2003 as part of the development of Swansea Medical School.

“When I first came here, there were almost no clinical trials going on at all,” he recalled. “Now we’re regarded, certainly in melanoma and kidney cancer, as one of the top centres in the UK and also recognised internationally.”

# Every one a winner... let's hear



Winner, Always Improving Award: Developing a system to ensure continual service improvements for families in SBUHB - Paediatric Occupational Therapy Team.



Winner, Caring for Each Other Award: Occupational Health and Staff Wellbeing - Steps to Wellbeing sessions.



Winner, Working Together Award: Working across boundaries to improve wellbeing for Children and Young People.



Winner, Commitment to Research and Development Award: Developing tools to support patients and staff in Radiology.



Winner, Clinician of the Year: Angharad Ladd, Advanced Physiotherapy Practitioner.



Winner, Developing our Partnership Compact Award: Outpatient Parental Antimicrobial Therapy Multi-Disciplinary Team.

It was all change for this year's Swansea Bay staff awards, with a rebrand for 2024 coupled with a different format replacing our traditional celebration night.

The Living Our Values Awards became the One Bay Way Staff Awards while financial pressures sadly led to the cancellation of this year's big awards event.

But despite the disappointment of not having a single celebration in the calendar, there was no lack of enthusiasm for our One Bay Way Staff Awards with over 6,800 votes from colleagues across our organisation helping determine the winners.

The awards recognise many fantastic projects, ideas, leadership developments and improvements to patient care from over the past 12 months.

Every year, they showcase the amazing work and dedication from every corner of Swansea Bay, underlining our collective passion to provide the best possible care and support for our patients and local communities.

Without a set-piece event to celebrate our winners, the One Bay Way Staff Awards have been on the road with winners in 15 different awards categories receiving their trophies - and a heartfelt thanks - from members of our senior executive team who have been visiting all our main sites.

The images on these pages include all staff who were available to receive their award in person. Omobola Akinade, who was joint winner of the Excellence in Equality, Diversity and Belonging Award and Hannah Thomas, who was joint winner of the Welsh Language Award, will be receiving their awards separately. Well done to everyone!

# it for our One Bay Way Awards



Joint winners, Excellence in Equality, Diversity and Belonging Award (with Omobola Akinade, who was unavailable); Engaging BAME nurses in higher banding positions, retention of newly recruited international staff.



Winner of the King's Honour: Dr Nistor Becla MBE.



Winner, Leadership that Lives Our Values Award: Jayne Shevlin.



Winner, Speaking Up with Compassion Award: Lorraine O'Leary (enhancing access to sexual health services for vulnerable populations).



Winner, Sustainability in Healthcare Award: Cae Felin Community Supported Agriculture.



Winner, the Arts in Health Award: Library of Things Project.



Winner, The Essential People Award (non-clinical staff): Julie Mock.



Joint winners, Welsh Language Award: Embedding the Welsh Language into the Dietetic Irritable Bowel Syndrome Service and Hannah Thomas (not pictured).



Winner, Volunteer of the Year Award: Sharon Harvey-Lewis.



Winner, Learner of the Year Award: Rachel Harford.

## Giving your views will help to shape quality of maternity and neonatal services in Swansea Bay

Staff and family members who have used the health board's maternity services are being encouraged to have their say in order to help inform the quality of maternity and neonatal services in the Swansea area.

As a member of staff, you or a family member may have also used the service, and The Independent Review of Maternity and Neonatal Services is calling on women and their families to share their experiences.

As part of the Review, which was launched last December, the engagement team has been out and about in the community, inviting women and families to talk to them, and the first of three online webinar days was also held last month.

So, you can contact the team directly, or you can register for a special staff only 45 minute online webinar in January.



During this webinar, the team will explain the Review process whilst discussing the mechanisms for how you can share their stories, and provide valuable input, which is so important to help shape the future of maternity and neonatal care across the region. There will also be time to ask questions, both publicly and privately.

The staff webinar will be held on Tuesday 14 January at 12.30 – 1.15pm.

To register for the event, please scan the QR code or visit: [www.nicheconsult.co.uk/swansea-maternity-and-neonatal-review/#latest-news](http://www.nicheconsult.co.uk/swansea-maternity-and-neonatal-review/#latest-news)

Ken Sutton, from The Independent Review of Maternity and Neonatal Services, said:

"We would encourage colleagues from the health board to join this dedicated online webinar, which is designed to provide an informal space for you to learn about the Review. We hope it will also encourage you to share information, so more women and families, who have used the service, can come forward to share their experiences.

"We understand some women may prefer to have a confidential, individual conversation and encourage them to email us at [swanseamaternityreview@nicheconsult.co.uk](mailto:swanseamaternityreview@nicheconsult.co.uk)."

The Review was commissioned in order to ensure public confidence in the care being delivered through the Health Board's maternity and neonatal services. The Review continues to work with recent users of Swansea Bay's maternity and neonatal services, staff and other stakeholders, who are invited to share their experiences. The Review, which is expected to report in the summer of 2025, is considering three key areas: clinical outcomes, patient and staff experience, and leadership and governance.

Swansea Bay's Patient Access Management Support Team, from left: Tom Phillips, Patient Access Data Quality Manager, Rachel Griffiths, Deputy Head of Performance and Transformation, Marnie Lake, Head of Performance and Transformation and Michael Newell, Patient Access Manager.



## The potential of PAMS to improve patient access

Every year we deliver planned, scheduled, care to thousands of patients in Swansea Bay, and beyond. We currently have more than 89,000 patients waiting for treatment, and almost 150,000 on our follow-up waiting lists.

Behind each of these appointments is a complex series of steps and processes. While this often goes well, with patients seen on time, these logistics can also be beset by delays or mishaps. This not only slows down a patient's journey along their care pathway - often leading to poorer outcomes - but also wastes precious NHS resources.

Effective patient access is about finding the most efficient and orderly ways to ensure patients get the good quality care they need, when they need it. This is from when they are first referred, to being an outpatient, receiving their treatment, and afterwards, if they need ongoing care.

Patient access covers a wide spectrum of issues including administrative processes and procedures, managing waiting times, how we best use our digital systems and how we communicate with patients and healthcare professionals.

These are governed by rules known as Referral to Treatment (RTT) times as well as other related policies and targets which may be set by the health board or at a national level. Every health board is measured against how well we meet these rules.

### What is the Patient Access Management Support Team (PAMS)?

As healthcare professionals, we all pride ourselves on the care we give to our patients. Well-structured, seamless patient access is a vital part of delivering quality care.

The Patient Access Management Support Team (PAMS) has been set up specifically to support staff to deliver improved patient access.

We will support teams to move away from less efficient, outdated habits and get on board with learning new skills and ways of working.

Together, we'll improve patient access through better:

- **Policies:** Make sure that each team's local processes align with the RTT rules.
- **Training:** Ensure that staff across the Health Board both understand the RTT rules and how to apply them in their day-to-day roles.
- **Data:** Make the health of our organisation visible to all so that teams have the information they need to understand how patients access their services.
- **Performance:** Support teams to use that information to improve patient access into our services.

There is work underway in each of these areas so you can expect to hear a lot more from PAMS in 2025.

## Academy will help Primary Care staff improve skills

A new team to help develop and support staff working in primary care has launched in Swansea Bay.

The Primary and Community Care Academy can provide and direct primary care staff to a variety of education and training opportunities to enable them to enhance their skills.

Its aim is to help develop the workforce within primary care, including GPs, pharmacists, optometrists, dentists, nurses, allied health professionals (AHPs) and more.

It is hoped that in doing so, staff will be supported to provide a wider range of services and interventions in the community.

The Academy is one of seven set up in health boards across Wales, working with Health Education and Improvement Wales (HEIW).

As its development continues, the vision is for it to become a centre of excellence for education and training for staff.

It will also focus on attracting, developing and supporting primary care staff by embedding new multidisciplinary roles and encouraging workforce planning.

Sharon Miller, Associate Service Group Director for primary and community services, has led the establishment of the Academy in Swansea Bay.

She said: "We are delighted to have established this new academy in the health board in partnership with HEIW.

"It is estimated primary care deals with 90 per cent of patient contacts within the NHS and it is important



Jessica Beer, primary and community care education and training development officer at the Academy, Sharon Miller, Associate Service Group Director for primary and community services, and Rhian Jones, Academy manager

that the workforce is supported. We have provided training for over 200 colleagues in the first year and are on track to double this in the current year."

Rhian Jones, Primary and Community Care Academy Manager for the health board, said: "The Academy aims to increase opportunities for education and training for the primary and community care workforce.

"Our focus is to meet the needs of staff in Swansea Bay and it is hoped it will help with staff retention, as well as upskilling."

Practices and teams can contact the Academy

individually to discuss education and training opportunities. Jessica Beer, Primary and Community Care Education and Training Development Officer at the Academy, said: "We have utilised the primary, community and therapies service group and HEIW funding to support and deliver the education and training to staff.

"The topics covered have included obesity and weight management, learning difficulties, women's health and GP updates."

For more information on training and education opportunities available, please contact [sbu.pccacademy@wales.nhs.uk](mailto:sbu.pccacademy@wales.nhs.uk)

## New test means pharmacist could solve your sore throat

A scheme where pharmacists can help determine whether a sore throat needs to be treated or not is helping people in the community.

The Sore Throat Test and Treat Scheme allows community pharmacists to assess patients over the age of six with a sore throat.

During the assessment, the pharmacist will decide whether it is appropriate to swab the patient's throat.

If the test is required, the result will determine if the sore throat is due to a bacterial infection.

Following the result, the pharmacist may provide treatment to the patient if it is necessary or offer self-care advice.

The scheme is available in a number of community pharmacies across Swansea Bay, with people advised to contact their local pharmacy to check if it is accessible to them.

Kelly Jones-Lewis, Swansea Bay's Deputy Head of

Primary Care, said: "The service allows the pharmacist to assess patients' symptoms and, where appropriate, swab their throat.

"The pharmacist will ask questions about their medical history, symptoms and any medication they have taken and will complete a clinical assessment to determine if the throat swab test is appropriate.

"If the patient's answers suggest that their sore throat is likely to be a viral infection, the test may not be necessary.

"If the test is clinically necessary, it will then tell necessary, it will then tell

the pharmacist if the infection is likely to be bacterial." Once the throat swab test has been carried out, patients only have to wait a few moments to receive the result. Depending on the result and the patient's symptoms, treatment may be offered by the pharmacist, without needing to get a prescription from a GP.

Dr Charlotte Jones is a GP partner at Uplands and Mumbles Surgery and the health board's clinical lead for antimicrobial stewardship, a role which helps educate and support staff to follow evidence-based guidelines for prescribing.

"If they receive a positive result it means the sore throat has most likely been caused by a bacterial infection," Dr Jones said.

"Based on the patient's symptoms, the pharmacist could supply antibiotics or will advise them to manage it with self-care if it is suitable. While the service is available to patients, our advice to patients who can self-care at home would be to do so as a sore throat, in most cases, will resolve on its own."

Sandfields Pharmacy, in Port Talbot, introduced the service last year and community pharmacist Christopher Perrington said it had been very well received.

"To be able to get prompt, easy access to treatment when needed has been really beneficial for people," he said.

"Patients can get a diagnosis, conversation and medication all in the same place, which is very convenient."

Christopher Perrington, a community pharmacist at Sandfields Pharmacy, with the swab test



## News in BRIEF



Nigel Stevenson, pictured with his wife and daughter

## Former Swan Nigel hits the target with IMPACT Award

Former Swansea City star Nigel Stevenson has been awarded an Executive Director of Allied Health Professions & Health Science IMPACT Award by Executive Director Christine Morrell at Cefn Coed Hospital. Nigel, a Physiotherapy Technician in Mental Health, was rewarded for his long and outstanding contribution to the NHS.

Nigel is highly skilled at running dementia activity groups on the wards, making a difficult job look easy. Christine Morrell said: "Nigel's impact on both colleagues and patients over the years has been nothing short of remarkable.

"His natural ability to connect with people, especially those with dementia, has left a lasting impression. "Whether through leading activity groups or simply drawing from his rich local knowledge and football background, he has continuously found ways to inspire and uplift those around him."

## Diabetes prevention goes from strength to strength

A prevention programme aimed at helping people avoid developing type 2 diabetes is going from strength to strength in Swansea Bay.

The All-Wales Diabetes Prevention Programme, which launched in 2022, targets people who are found to be prediabetic, or at high risk of becoming diabetic, and helps them make the necessary lifestyle changes to avoid developing the disease.

Recent figures show that of the nearly 3,400 people who had an initial appointment with the programme following referral from a GP, 30 per cent were no longer prediabetic 12 months later.

The programme offers patients a 30-minute consultation with a specially trained dietetic support worker. This focuses on topics such as physical activity, healthy eating and promotes other lifestyle changes such as smoking cessation and alcohol reduction. The programme is now available in all eight of the Swansea Bay primary care clusters.

## Donation in Ann's memory

The family and friends of a much loved former health care support worker have donated £1,400 to the Macmillan Occupational Therapist Team which did its best to support her. Ann Diplock was known to so many people through her work on ward one at Neath General Hospital, and, later in her career, at Neath Port Talbot Hospital's Dermatology Day Unit, having worked into her 70s.

## Sticking power... Aditi's idea is a winner



(From left) Staff nurse Nia Bryant; Emergency Department consultant Sue West-Jones; staff nurse Cerys Parry; Aditi Kolli; Children's Emergency Unit sister Gabby Wilcox; Mari Higginson; Children's Safeguarding Nurse and clinical observer Kinaan Khalid.

A teenager's bright idea has inspired a greener approach in one of Morriston Hospital's busiest services.

The Children's Emergency Unit (CEU) has adopted a more sustainable stance in its use of equipment, and is also educating young patients – plus adults and staff – around climate change.

It's all thanks to the 15-year-old Aditi Kolli, whose father Sreedhar is a Consultant in Rehabilitation Medicine at the hospital. Aditi came up with the idea for a fun and creative project for paediatric patients in the form of a sticker competition, which invited children to create stickers encouraging energy-saving

habits, like switching off lights and computers when not in use.

Emergency Department consultant Sue West-Jones, who is one of three Sustainable Clinical Leads within Swansea Bay UHB, was thrilled by Aditi's idea and said: "The sticker competition has proved really popular with children in CEU – it's a perfect combination of keeping their minds busy while waiting for their appointment and, at the same time, getting them thinking about how we can all be more aware of our energy usage.

"Aditi's observation was the spark for this really great idea."

## New roles focus on sustainable future

Consultant Anaesthetist Elana Owen is playing a leading role in helping Swansea Bay's theatres become more sustainable – and has a foil tray to thank for it!

Elana is one of three staff members named as sustainable clinical leads within Swansea Bay University Health Board. The others are NAU Unit Manager Alex Strong and A&E consultant Sue West-Jones. This role is in addition to the trio's day-to-day responsibilities, with Elana, Alex and Sue aiming to embed sustainable practices across the health board to meet climate change objectives.

Elana was already actively promoting several sustainable projects in theatres but now she has stepped into an official role – the first of its kind in the health board. It will see her work closely with colleagues and staff groups to encourage, promote and develop ideas to help deliver more sustainable healthcare and, where possible, save Swansea Bay money.

Elana said: "I've been interested in sustainable practices and climate change for many years. I've become increasingly aware of the negative impact of healthcare on the environment, and the impact of anaesthesia and surgery in particular.

"It started with a foil tray! Every time I set up medications for a patient I would have multiple foil trays – similar to takeaway containers - to put syringes in. After every patient we'd discard these containers.

"Something just clicked in me at that point that we could change this and be more savvy and kinder to the environment. I suggested that we used reusable plastic trays, and it snowballed from there. We worked out that we only needed to use the plastic trays 13 times to break even, without compromising on cleanliness or patient safety. That was the driver for me. After that, it was a case of what else can we do?"

Elana delivers care to patients undergoing both emergency and elective surgery. She has the benefit of working with many different specialities and departments, and hopes this can help her link up sustainability projects across these areas.

Elana added: "Introducing more sustainable healthcare practices can sometimes be quite challenging.

"But one thing the pandemic has shown us is that we can change our ways of working." To join the Swansea Bay Green Group, or for more information please email [sbu.greengroup@wales.nhs.uk](mailto:sbu.greengroup@wales.nhs.uk)

## News in BRIEF

## Janet retires after nearly 40 years of NHS service

Janet Williams, Service Group Director of the Mental Health and Learning Disabilities Service Group retired in early December after nearly 40 years in the NHS. Janet started her working career in 1985 as an NHS Wales Graduate Management Trainee and started work in Neath General Hospital as Medical Support Services Manager.

Janet continued to progress throughout her career, working in a variety of operational roles across different sites. She worked in Singleton Hospital, as Head of Business Development, Head of Operations and Hospital General Manager, before becoming Associate Service Director for Medicine Service Group in Morriston & Singleton, managing USC and medicine, as well as Deputy Locality Director, covering Primary Care & Community Services.

For the last eight years, Janet has worked as Associate Service Director and Service Director for Mental Health & Learning Disabilities, bringing a breadth of experience and knowledge that has truly made an impact on staff and patients.



## How to stay independent and at home longer...

To mark Occupational Therapy Week 2024, Swansea Bay's Older Person's Mental Health Occupational Therapy Service (OPMHS) put on an information stand at Port Talbot Resource Centre to highlight the support available to help service users stay independent and at home longer.

Following referral to the OPMHS, the Occupational Therapy Service offers a wide range of support and interventions which really can make a big difference to service users' quality of life.

The information stand proved popular and informative for visitors to Port Talbot Resource Centre and OT specialists in mental health and dementia are keen to get the message out about how the team can help. **For more information and support, go to the following web address: [www.dementiafriendlyswansea.org/](http://www.dementiafriendlyswansea.org/)**

## Ailsa awarded Fellowship

Ailsa Wallis – Head of Clinical Physiology – has recently been awarded a Fellowship from the British Society of Echocardiography.

This award is the highest honour that the society can bestow, and is recognition for the huge contribution Ailsa has made to the field of echocardiography. Her journey into echocardiography began in 1995 where she began learning the complex skills needed to set up the echocardiography service at Morriston hospital, a post where her passion for teaching echocardiography led to and many colleagues benefitting from her expertise and tuition.



Dean Fyfield, who works in Swansea Bay's Radiotherapy Physics department, has been awarded registration with the Register for Clinical Technologists - a UK first

## Dean sets standard with a tech UK first

Keeping the machines that treat cancer running smoothly is a hugely important job – one which has led to Swansea Bay scoring a UK first.

Singleton Hospital-based assistant IT systems manager Dean Fyfield has become the first clinical computing technologist to be registered with the Register for Clinical Technologists, or RCT.

This is a national organisation that aims to protect the public by advocating statutory professional regulation for clinical technologists.

Dean, who works in the Radiotherapy Physics department, had to complete a rigorous portfolio to demonstrate his competency and commitment to safe clinical practice. It covered everything from risk assessments to PAT testing of electrical equipment.

"Becoming the first registered clinical computing technologist is a big milestone," he said. "Not just for me but for the whole field of clinical computing in healthcare."

Clinical technologists work across various healthcare settings. They apply physics, computing, engineering and technology to healthcare, contributing to diagnosis, treatment and disease prevention.

The role of clinical computing technologist is crucial in managing and maintaining software medical devices and their hardware infrastructure.

Improper management of these devices can pose significant risks to patient safety, making specialized

training and RCT registration essential. Achieving registration shows an individual possesses the necessary skills, competence, and adherence to safety practices required for working with medical devices. Singleton's Radiotherapy Physics Department recognised that employees with standard IT training needed greater experience and clinical awareness when working with medical devices.

This led to it developing an in-house training programme for clinical computing technologists, in collaboration with the RCT and the Institute of Physics and Engineering in Medicine, or IPeM.

Dean is part of a team maintaining and managing a variety of computer systems running the linear accelerators, which deliver radiotherapy, CT scanners, patient databases, treatment plans, and more.

"As technology gets more advanced it tends to use computers to do a lot of the heavy lifting to keep everything running," he said.

"Something we have to be mindful of is that you cannot just switch things off and on. Each system could be affecting treatment.

"That's what registration as a clinical technologist is all about – to show that you have the ability to understand these are clinical systems.

Dean is now aiming to continue his professional development with the ultimate goal of becoming a registered clinical scientist.

## What's on

### Dates for your diary



December 18

#### Tailored adjustments for managers

1-2pm, via Teams.

A one hour session for Managers to look at the Tailored Adjustments part of the Managing attendance at work policy and how to support employees with Tailored adjustments to reduce sickness absence and support employees within their workplace.

Please email SBU.

OHWBTraining@wales.nhs.uk for more details.

Dec 23

#### REACT Mental Health - How to have psychologically savvy and supportive conversations with colleagues

11.30-1pm

REACTMH® is a tool, developed by experts at March on Stress, which aims to help you have psychologically savvy and supportive conversations with a colleague about their mental health.

To book, use this link: <https://outlook.office365.com/book/SBUPeerVaccinators@wales.nhs.uk/s/nd7qX97RW0arzBQ0m8TXrA2>

January 13

#### Safeguarding People Level 3

9.30am, Health Board HQ (Baglan), Dinas and Brombil

January 17

#### Steps to wellbeing - steps forward with fatigue

9.30-10.30

The Occupational Health and Staff Wellbeing service has developed a range of sessions which we invite you to join. These are open to all staff, students and volunteers.

This session is designed to be a short, interactive opportunity to reflect on fatigue and to consider ways to manage it.

If you have any queries please email SBU.OHWBTraining@wales.nhs.uk

January 23

#### Occupational Health Referrals/ Wellbeing Support- Training for Managers

10-12pm

The target audience is managers and supervisors who are managing sickness absence/ attendance in line with the Managing Attendance at Work Policy 2018, and submitting referrals to Occupational Health as part of this process.

Use this link to sign up: [https://outlook.office365.com/book/SBUPeerVaccinators@wales.nhs.uk/s/3amP045askaf\\_YybTAGyfw2](https://outlook.office365.com/book/SBUPeerVaccinators@wales.nhs.uk/s/3amP045askaf_YybTAGyfw2)

For more events for your diary, log on to the events listings on the SBUHB Intranet.

## Charity and events



The Afan Need Breast Cancer Support Group, with their fantastic donation to Swansea Bay's Breast Unit

# Support group's golden goodbye with £25k gift

A support group which has helped hundreds of people affected by breast cancer has donated thousands of pounds to Swansea Bay's Breast Unit as it winds up after more than 30 years.

The Afan Need Breast Cancer Support Group launched in December 1992 to provide practical advice, support and friendship, as well as raise funds for breast cancer services.

At its peak it boasted 35 members, but with just six members remaining the team have decided to call it a day – and donate their remaining funds of £25,000 to the hospital's Breast Unit.

Treasurer Betty Jones said: "We have all benefited from breast cancer treatment at some point and have raised money for the likes of Maggie's.

"We are mostly in our eighties now and have run out of puff!

"We are not able to do what we used to do, so sadly we have come to the conclusion our fundraising days are over.

"It's the end of an era really, so we just need to book our Christmas dinner now and raise a glass of bubbly to ourselves – we will just be ladies who lunch now!"

The group, which was founded by breast care nurse Ann Baker and five others, used to meet monthly in the nurses' home of Neath General Hospital, and hosted various speakers over the years.

It also ran trips and meals out, and even hosted a fashion show, which raised £1,300. Funds were used to support the unit to buy pieces of equipment which the NHS doesn't fund; their first purchase was a Trucut Biopsy Gun which reduced the waiting time for the result of a biopsy from one week to one day.

It followed that up with a new digital mammogram machine in 1997 – at the time one of only four in the world, helped with a generous donation by Fuji of £175,000, to meet its £250,000 cost.

Other items and projects the group has funded is furnishing and decorating a family room, the purchase of a mammogram chair, a pressure sleeve, trolleys, wheelchairs, gowns, bags, and toiletries.

They also created mosaics that enhance the corridors of the breast cancer suite.

Fellow group member Marilyn Cardy added: "It has been lovely to do these things together and provide support for each other, but it is the right time to wind up the group now."

Sam Jenkins, Directorate Manager, Surgical Specialties added: "We are extremely grateful to the Afan Nedd Breast Cancer Support Group for their kind donation and would like to thank the Group for their generosity over the years. As a thank you to the Group we are having a plaque made which will be on display in the Breast Unit at Singleton Hospital".

## Triathlon thank you

A grateful mum has put herself through extreme discomfort so other parents may enjoy a bit of respite while their newborn babies are in hospital.

Bethany Carnegie entered the ROC England triathlon - a brutal test of endurance held in the Lake District - to raise money for Singleton Hospital's neonatal intensive care unit (NICU). The event consisted of a 1.5km swim in Lake Windermere, a 45.5km bike ride to England's highest mountain, Scafell Pike, before an 8.75km run to the summit, followed by another 8.75km run back down and a 45.5km bike return to the lake before a 1km trail run completes the course.

In the process of completing the challenge, in around nine hours, Bethany, who was supported by her partner James Cutler, a Morriston Hospital Emergency Department doctor, raised £355 towards helping refurbish the parents' room in NICU.

The cause is close to the couple's hearts as their daughter, Delilah, spent the best part of a week in NICU last December after experiencing breathing difficulties soon after birth.

Bethany said: "We had Delilah on the labour ward in Singleton in December 2023 but after a few days she had to go to the neonatal intensive care unit. She went a bit blue in the face and she needed some help with her lungs.

"The staff were absolutely brilliant. We want to say a massive thank you."



Have an idea to raise money to support staff and patients in Swansea Bay?

Contact the Swansea Bay University Health Board charity via our website: <https://swanseabayhealthcharity.com> (Registered charity number 1122805)

# Bay Health



Staff newspaper of Swansea Bay University Health Board

Contact Editorial: [communications.department@wales.nhs.uk](mailto:communications.department@wales.nhs.uk)