

# Bay Health

Staff newspaper of Swansea Bay University Health Board



## IT'S GOOD TO TALK

### A 30 minute chat at your GP can prevent diabetes

*A quick conversation could be all it takes to avoid a life-changing chronic condition – and the mountain of medication that can go with it.*

Type 2 diabetes causes the level of glucose, or sugar, in the blood to become too high.

If diabetes is not treated it can lead to health problems, as large amounts of glucose can damage the blood vessels, nerves and organs. Complications can include heart disease and stroke, retina damage, kidney disease, foot problems and impotence in men.

Managing diabetes and its complications accounts for 10 percent of the annual NHS Wales budget – around £500 million a year.

However, pilot projects in Port Talbot and in North Wales have showed remarkable results for people whose glucose levels put them at a higher risk of future diabetes, called prediabetes.

Two-thirds of those who took part in the pilots were no longer pre-diabetic a year later.

Patients identified as being at risk after a blood test were given a 20-minute intervention with a specially-trained healthcare support worker.

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Morrison Hospital education and training pharmacist Jessica Jenkins with a year's worth of medication for a complex Type 2 case, managing not just the diabetes but associated complications too.

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**Changing for the future... today**

Putting plans into practice to create centres of excellence at our three main hospital sites.

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## Miracle drug will change my life



Holly Bevan: looking forward to a brighter future thanks to a new wonder drug

*A young mum born with an incurable disease is looking forward to a brighter future after becoming one of the first people in Wales to be given a life-changing new drug.*

Holly Bevan from Swansea, has spinal muscular atrophy, or SMA, a rare genetic condition that affects the central nervous system.

Determined not to let it hold her back, Holly, is a happily-married mother of two, a home-owner with a full-time job.

But she has always known her condition would eventually leave her relying on a wheelchair, that she would probably have to move to a bungalow, and that her husband would one day become her carer.

No longer, though.

Holly is one of hundreds of people seen by the South West Wales Adult Neuromuscular Service based at Swansea's Morriston Hospital.

And Morriston is the first hospital in Wales to prescribe a newly-approved drug, Risdiplam, to adults.

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**My job is emotionally challenging**

Lucy Whiddett, on her challenging but highly rewarding work as a Sarcoma cancer nurse.

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**Taking the organ donation lead**

ED consultant Anita Jones is on a mission to get everyone talking about organ donation.

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Mark Hackett, Swansea Bay University Health Board chief executive

Welcome to the first edition of Bay Health, our new, monthly, newspaper for staff and everyone interested in the work and services of Swansea Bay University Health Board. Bay Health is part of our plans to improve how staff are kept involved and informed about where they work. It follows consistent feedback from staff surveys that we need to communicate better as an employer and public service and that our communications need to be easier to get.

We have chosen the newspaper format following feedback that many staff don't have time during their shifts to log on and find wider news about the Health Board. Bay Health will be distributed across the Health Board's sites and GP practices, and we'll also be talking to pharmacies, dentists and ophthalmologists about providing them with copies in the future. Bay Health will also be available on the intranet and website.

In these pages we hope you'll find stories and information that interest you and are helpful. We'll provide regular reports on how we are turning our Changing for the Future plans for centres of excellence into reality with new services and investment, such as the Acute Medical Services Redesign and the new scanners at Singleton in this month's centre pages.

We'll focus on major campaigns to improve quality and safety, such as our enhanced Infection Prevention and Control work. We'll report on innovations and achievements such as the brilliant front page stories that are changing peoples' lives because of innovations created and driven by teams across the Health Board. We will also regularly look at our performance, the pressures services are facing and how staff are delivering our improvement plans. We will celebrate achievements, and this month's review of the success of the Bay Field Hospital I think is truly inspiring.

At this month's Team Brief, which everyone should hear about through their team management, we heard that Covid infections are rising with over 100 people in hospital beds at the time of writing

though mercifully none needing intensive care. That's why we've stepped up Covid safety measures again to protect patients and staff with mask wearing and regrettably limits on visiting reintroduced. We keep learning and monitoring Covid, and are ready to step up or step down protection as the situation changes.

**“We'll provide regular reports on how we are turning our Changing for the Future plans for centres of excellence into reality”**

We also had a brilliant presentation from Dr Gwen Davies, Consultant and Clinical Lead of end-of-life care on the changes she and colleagues across the organisation are making to improving this service and patient experience.

## ..Miracle Drug

..Continued from page 1

Although not a cure, it is hoped the drug will slow or even halt the progression of the disease.

Holly, 32, who lives in Birchgrove with husband Andrew, son Ellis, aged three years, and six-month-old daughter Faye, is understandably excited.

“Although I had bought a house, I pretty much knew that by about 45-50, I needed to be in a bungalow and have it fully adapted to suit me and my family, for the rest of my life.

“But if the drug works in the way I'm hoping it does, it means I don't have to move. I'm staying where I am.

“When I'm older my husband isn't going to become my carer. He will still be my husband.”

Dr Jon Walters, consultant neurologist at Morriston, said the way SMA affected people varied considerably.

“You have babies born with it who can never roll over or sit up. With babies, unfortunately, it is fatal,” he said.

“Adults in whom the condition comes on during childhood continue to walk, but lose the ability to walk later in life.

“It was relentlessly progressive, so the new drug really is a game-changer.”

SMA has certainly impacted on Holly's life. She never took part in physical activities in school, and learnt to drive in an automatic car because she could not work the clutch.

“It has massively impacted on my and my family's lives from a very early age. To list the number of ways which I physically struggle on a daily basis would make a very long list.”

The effects of the drug will not be known for some months, but Holly is already looking forward to it making a real difference.

“I just want to be more relaxed about going somewhere. I would like going up and down stairs to be a little bit easier too.

“I'd like to fatigue less quickly. It's hard when you have a three-year old and a six-month old baby to keep up. Things like walking my little boy to school is hard.

“So, for me, this new drug is really exciting.”

*\*For all the full stories online, go to our website – QR code on p1.*

Swansea has had the highest rate of people dying in hospital in Wales, and Gwen spoke about how new initiatives in hospitals, and over £800,000 of investment with the ambulance service and in the community, are improving the options patients and their families have at this tender and sensitive time. You can read more about Gwen's work and the rest of the Team Brief on the intranet.

We'll also have news about events and awards, fundraising and our partners in the NHS and social care. There'll be features on individuals, teams and services to celebrate the achievements and diversity of our organisation and shine a light on parts that people don't often hear about.

We haven't got a monopoly on what's interesting and I hope you let us know what you think and what you'd like to read about as this is a newspaper for its readers. So please let us know your views at [communications.department@wales.nhs.uk](mailto:communications.department@wales.nhs.uk)

and this newspaper. This will complement regular activities such as visiting, presenting, and listening to staff, stakeholders and patients, which we will also be doing more of. I have brought together existing resources to create a combined team in a new Directorate of Insight, Communications and Engagement to improve the consistency of and provide more communications and engagement inside and beyond our organisation, which I hope you will start to see the benefits of soon.

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## ..Diabetes GP support service

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They discussed lifestyle changes such as improved diet and increased physical activity.

A year later, their glucose levels were checked and 83 percent showed a reduction – with 62 percent seeing such an improvement they were no longer in the prediabetes range.

As of 2020, around eight percent of the population in Wales aged 17 and over had diabetes, around 90 percent of whom had Type 2. Estimates suggest a further 65,500 people are undiagnosed Type 2 diabetics.

Many more people, an estimated 580,000 in Wales alone, could be at risk of developing Type 2 diabetes.

But this new approach is paying dividends.

“In the last four to five years there has been no increase in diabetes within the Afan Cluster,” said Dr Mark Goodwin, the GP who created the pilot project.

“That was achieved without medication, using only a simple blood test and an informative consultation.

“If pre-diabetic patients, through better education and simple self-help advice can delay or avoid becoming diabetic they can remain healthier for longer, avoid the complications of diabetes and reduce pressure on the NHS.”

The success of the pilots has now been followed with the launch of the All-Wales Diabetes Prevention Programme, led by Public Health Wales.

It differs from the Afan Cluster approach in that it will be open to patients, aged over 18, who have been identified as pre-diabetic from blood tests carried out within the previous three months only.

As this is not a screening programme, the blood test would have been requested as part of the patient's routine clinical care. Public Health Wales has provided funding for two clusters in the health board area to introduce the programme.

However, Swansea Bay has agreed additional funding which means all eight clusters will be able to offer it – each with its own trained support worker who will travel around practices to see patients.

They will be supervised and supported by specialist dietitian Rachel Long, who said she firmly believed prevention was better than cure.

“Appointments could be face-to-face, over the telephone or online, and will last around 30 minutes,” she said.

“They will discuss the blood test result with the patient and talk about health complications and consequence should they develop Type 2 diabetes.

“A large part of it will be spent discussing dietary changes they could make and also increasing their physical activity.

“They will form realistic goals with the patients so they have an action plan to take home to try to implement that change.

“We can also signpost them to support services within the community or within the health board.”

Patients will be invited back for a further consultation a year later. If they are out of the diabetes range they will be taken off

the programme.

Those whose glucose levels rise beyond the upper level will go on the programme for Type 2 diabetes.

However, as the success of the Afan Cluster pilot demonstrates, this is not an inevitable progression.

For many, being told that you are at risk of diabetes is a kind of wake-up call, which is all they need to start making changes.

Swansea Bay's Head of Nutrition and Dietetics, Sioned Quirke said: “It very much encourages people to take action, as the high rate of positivity in the Afan Cluster has shown.”

*\*To read more on this story, go to our website – QR code on p1.*

## My job is emotionally challenging but I wouldn't change it for the world



**Picture:** Dedicated sarcoma support worker Lucy Whiddett, who has received a very special award.

And just three years after starting as Macmillan sarcoma support worker, Lucy has received a very special award from a major UK charity.

After graduating from university with a degree in psychology and counselling, Lucy began working in elderly care before joining the South Wales Sarcoma Service as its first support worker.

“I wanted something new – a new challenge,” she said. “This post came up and sounded amazing. I decided to go for it, and I was really lucky to get it.

“We're a regional service. A lot of communication between us and the patients, other than when they come in for appointments, is over the phone. All patients referred to the sarcoma service are given my telephone number.”

“If they have any problems or any issues, or just want to talk, whatever it is they need, they ring me.

“If I can help, I will, or it may be that I will take it up with the consultants or nurses, or

signpost them to another service.”

Sarcoma is an uncommon cancer of the connective tissue of the body such as fat, muscle, nerves, blood vessels and bone. There are many different kinds, which can affect any part of the body. Historically, because it is relatively rare and can be challenging to diagnose and treat. Patients across the UK have reported poor experience with variations in treatment, poor information and inadequate support.

In South and Mid Wales, people with confirmed or suspected soft tissue sarcoma are supported by the multidisciplinary team (MDT) of the South Wales Sarcoma Service, hosted by Swansea Bay.

The creation of the sarcoma support worker role was to help meet the service's aspirations of more equitable access to the expert team, good quality information and increased support across the region.

Lucy liaises with the MDT, attends clinics and runs a weekly telephone clinic for people newly-referred with

suspected sarcomas.

She also runs a weekly holistic needs assessment clinic to see if anything else can be done to support individual patients.

Recently she developed a digital noticeboard featuring reliable information which can be easily accessed by patients, relatives and carers.

*Lucy's background in psychology and counselling, as well as her previous caring roles, have helped her support her patients.*

“It's important to have good communication and the skill of listening so that you can fully understand what the patient is saying” she said.

“It does take a toll on you, emotionally, but I have learnt to cope much better with having these conversations as I've got older and more experienced.

“It is upsetting, when the patients are upset and

anxious. I know they are going through a really difficult time and I focus on what I can do to help, or what we can do to help as a service.”

Lucy's colleagues encouraged her to apply for Sarcoma UK's Tricia Moate Award, named in honour of a nurse and tireless patient advocate who herself had sarcoma and died in 2018.

To her delight and surprise, Lucy won. The award includes sponsorship to attend another UK sarcoma centre, and Lucy has chosen to visit The Christie NHS Foundation Trust in Greater Manchester.

Sarcoma UK described Lucy's application as outstanding, showing her real passion for the care of sarcoma patients.

“I love my job,” she said. “I love what I do. I love coming into work every day. I work with such a great team. What more can you ask for?”

*\*For all the full stories online, go to our website – QR code on p1.*

Contact the Bay Health editorial team

Bay Health will be published every month and we'd love to get ideas from staff for news, features and articles as well as receiving staff contributions for publication and information on upcoming events.

Please email us at: [communications.department@wales.nhs.uk](mailto:communications.department@wales.nhs.uk)

Bay Health

# The future taking shape... TODAY

## Newid ar gyfer y dyfodol Changing for the future



*These are unprecedented times, and the intense pressure of the pandemic has not yet waned. Dealing with Covid and soaring demands on our healthcare system may seem overwhelming at times.*

*Yet, despite this, a huge amount of positive change and investment in our services has still been forging ahead in Swansea Bay.*

Our journey on the Changing for the Future pathway is now well underway. We have also invested millions of pounds of investment in new equipment and theatres. Our strategic plans for delivering unscheduled and planned care in a much more effective way are really getting somewhere now.

To see how far we've come, we're highlighting just a few of the major steps forward over the past year. Many are directly connected to Changing for the Future and the Centres of Excellence, and others are great examples of innovation and improvements which are all part of the wider Swansea Bay success story.

Last summer's public engagement around our ambitious Changing for the Future plans received overwhelming support. Now, as the formal staff consultation on the Acute Medical Service Redesign comes to a close, we're delighted that a statement of commitment has been agreed between our CEO, Mark Hackett, and our Staffside representatives. It outlines how we will work together to ensure the AMSR plan is delivered effectively, and that staff feel engaged and supported throughout.

However AMSR is only part of the overall Changing for the Future blueprint. An overview of AMSR and how it sits in the wider picture includes:

- A newly built £3.9 million Acute Medical Hub at Morriston Hospital, to assess, treat and discharge patients that day, plus some short stay beds for patients that need to continue their assessment for up to 48 hours. It will also have a frailty service,

high care areas and isolation areas for emergency patients.

- The Acute Medical Hub's same-day urgent care service will have major on-site GP input.
- The Emergency Department at Morriston Hospital will focus in future on serious trauma and 999 emergencies like stroke and cardiac arrest, but not general acute medicine (as this will be covered by the new seven-day Acute Medical Hub.)
- Seven extra operating theatres in Singleton and Neath Port Talbot hospitals are being built to tackle planned care waiting lists. This is key to plans for regional centres of excellence, involving £25m in capital investment and £16m revenue spending.
- As well as an Orthopaedic Centre of Excellence at Neath Port Talbot Hospital, the Day Surgery Unit is being expanded at Singleton, along with a surgical cancer and non-cancer elective centre. This will support most of the routine surgery to move out of Morriston, allowing Morriston to concentrate on specific and regional surgical work.
- An expansion of the new Virtual Wards service to both reduce admissions and support early discharge
- We're growing our palliative care services
- Investing more in our Care of the Elderly services
- Investing in other key services like atrial fibrillation, heart failure and hypertension, to reduce admissions and improve wellbeing



Clinical team lead Monica Martins and principal clinical scientist Catherine Humphreys are pictured with the new scanner at Singleton Hospital.

- Improving community and primary care management of conditions like diabetes, through earlier intervention
- An increased focus on preventing admissions e.g working with the Welsh Ambulance Trust to triage and manage some patients much earlier

Work is already well advanced building our new operating theatres. The new £3.3m theatre dedicated to ophthalmology

*“The precision and accuracy of the SABR technique allows a safer lower dose to be delivered to normal tissue surrounding the tumour.”*

procedures is already built and ready to carry out hundreds of extra eye operations. Staff recruitment is underway to get it open as soon as possible.

Singleton Hospital's operating theatres are expanding from three to six to help tackle surgical waiting lists, and Neath Port Talbot Hospital is having three new theatres.

They are modular in design; assembled more quickly and less expensively than traditional build,

but to a very high standard.

There's also been investment in some of the latest scanners and technology, including a highly specialised lung cancer treatment offering huge benefits to suitable patients. Now, for the first time, we can offer Stereotactic Ablative Radiotherapy, or SABR at the South West Wales Cancer Centre in Singleton.

This is a specialist technique to cure early lung tumours, and is

more effective than standard radiotherapy for early stage lung cancers.

Dr Ceri Powell, consultant clinical oncologist treating patients with lung cancer across South Wales, said: **“The precision and accuracy of the SABR technique allows a safer lower dose to be delivered to normal tissue surrounding the tumour.”**

The Nuclear Medicine department at Singleton has also had its two

oldest scanners – one the oldest in the UK – replaced with cutting-edge new ones which provide extremely sharp images.

The new equipment will help clinicians spot cancers earlier. The two new SPECT-CT scanners will be used primarily in cancer diagnoses, they will also be used in other specialties – cardiology, for example.

They use different scanning components fused together to provide more accurate information about the area being imaged.

**“The detectors enable close proximity to patients and focused scans” explained Head of Nuclear Medicine, Professor Neil Hartman.**

**“The improved SPECT resolution enables sharp images for better visualisation of fine anatomical details. This is important to help enable physicians, radiologists, and cardiologists detect disease at earlier stages.”**

**Morriston has also had a new multi-million pound CT scanner, described by the hospital's Medical Director, as being “the equivalent of moving from a flat screen TV to high definition.”**

Singleton has also had a new £4m replacement linear accelerator.

Plans for the new multi-million pound Adult Thoracic Surgical Centre for South Wales are also moving quickly. The new centre, to be based at Morriston Hospital, Swansea, will treat lung cancer patients and others who need surgery for a range of chest conditions.

It will be able to operate on an increased number of patients, potentially upwards of 20% more, and will be the third largest centre in the UK.

Siân Harrop-Griffiths, Swansea Bay University Health Board's Director of Strategy and project lead, said:

**“Developing this scheme and getting the agreement of all the clinicians and organisations across South Wales has been time consuming and complex.**

**“But we are delighted that this endorsement by the Minister means we can now take this work forward at pace to provide better thoracic surgical services for everyone across South Wales.”**

Also getting a huge endorsement from Welsh Government are plans for a state-of-the-art Vascular Hybrid Theatre for South West Wales, which combines a traditional operating room with

advanced medical imagery.

The first in South West Wales, it combines operating theatre functionality and high-powered imaging equipment. It will treat around 500 patients a year, and some patients who currently need to go to England for treatment will come to Swansea instead. It could open in 2025.

A £2.5m investment is also being made to provide enhanced recovery support for patients following some types of complex surgery, opening the way for Singleton and Neath Port Talbot hospitals to do even more to tackle waiting lists.

This enhanced care offers a step up from general ward care for patients who need extra support immediately after their operation.

It is not as intensive as the care on high dependency or intensive care units. But the additional layer of care will offer Swansea Bay hospitals greater flexibility.

Opening these services in Singleton and Neath Port Talbot hospitals mean they will soon be able to offer a wider range of certain surgeries which are currently only carried out in Morriston Hospital.

Other amazing achievements over the past 12 months have included:

- Virtual wards, which have



Picture: Consultant surgeon Hywel Dafydd in the new operating theatre, also at Singleton.

a major impact on reducing lengths of stay and keeping people out of hospital, are now being rolled out across Swansea and Neath Port Talbot – doubling from four to eight.

- The first phase of a weight management service for children and young people in Swansea and Neath Port Talbot has now gone live.

- A life-saving service which was funded as a pilot in Swansea Bay has now secured NHS funding. The Cardiac Genetic Testing service helps families with inherited cardiac conditions (ICC) and was initially set up in Morriston Hospital in 2018 with

funding from the British Heart Foundation and the Miles Frost Fund.

- People with serious eye conditions that could lead to vision loss are now being given vital checks within weeks instead of potentially years. We are working with community optometrists to check patients for suspected wet macular degeneration and diabetic retinopathy.

- Morriston Hospital became the first in the UK to be connected to its own solar farm. The £5.9m farm is supplying almost a quarter of the hospital's power and significantly reducing carbon

emissions. We are also very proud of Wales's only perinatal mental health unit, Uned Gobaith, which has opened at Tonna Hospital.

Hazel Powell, Swansea Bay's Deputy Director of Nursing and Patient Experience, said: **“The whole perinatal mental health service and team has done an amazing job during a very busy first year.”**

**“The difference this unit is making to the mums, dads, babies and families who use it is immeasurable.”**

## Major nurse recruitment campaign underway in Swansea Bay



Picture: Senior nurse education Miranda Williams and corporate recruitment matron Melanie Joseph of Swansea Bay's dedicated nurse recruitment team

**Work is underway to almost double the number of new nurses being recruited to Swansea Bay.**

*Hundreds of nurses from overseas, known as internationally educated nurses, are being targeted to join the health board. Healthcare support workers are also being encouraged to up-skill and expand their roles.*

Swansea Bay UHB has a dedicated nurse recruitment team in place to ensure everything possible is being done to boost nurse numbers.

Staff consultations and surveys have repeatedly raised concerns around staff shortages, which have left many employees feeling over

worked and under pressure. There are now a number of initiatives in place to try and address these shortfalls, particularly in the nursing workforce.

Recruitment of internationally educated nurses is a key part of the health board's recruitment and retention plans. Other initiatives include the expansion of band four healthcare support worker roles across the organisation. The health board is also looking to identify existing staff who wish to progress further by developing additional skills.

The shortage of nursing staff is an issue faced by health boards and trusts across the UK, but Swansea Bay health board leaders have stepped up recruitment with ambitious targets to build on increasing numbers who have chosen to work with the organisation.

Last year, 140 internationally educated nurses were recruited.

This year's target has been increased to 200, with a potential additional increase to 350.

Corporate recruitment matron Melanie Joseph said: **“We have a considerable number of vacancies across the health board and that's true for most health boards.**

**“We are aware it's a challenging time for our existing staff. It has been difficult during the pandemic, and we are trying to turn services back on, and we've been short staffed for a long time.**

**“We are trying to recruit, and work on retention strategies, but it takes time. We need to take staff on as quickly as we can, whilst making sure they are knowledgeable, prepared and able to fit into teams to support the delivery of excellent standards of care.”**

The health board recruits nurses worldwide who are already

registered nurses in their own countries. The nurses attain their UK NMC registration by completing a four week OSCE preparation programme, of which the health board is proud of its 100% pass rate.

Recruiting nurses internationally is not without its additional pressures, however, as some issues – like visa confirmations – are out of the control of the team, and events like the war in Ukraine can lead to delays because the visa staff are so busy.

Senior nurse education Miranda Williams said: **“We also want to nurture our current health care support workers. We are helping those who want to expand their skills, knowledge and level of education to get to the point where they can undertake a pre-registration programme and become our band 5 and 6 and 7s of the future.”**

## A healthy future is a green one

*Healthcare isn't just about caring for people when they're ill. It's also about looking after the environment we live in every day, as it can have a direct effect on our health and wellbeing.*

Led by the Sustainable Swansea Bay Steering Group, the health board has a number of groups which cover a wide range of sustainable and environmental topics:

- The Sustainable Swansea Bay Steering Group – chaired by Siân Harrop-Griffiths, Executive Director of Strategy – covers the wider sustainability agenda including decarbonisation, the Well-Being and Future Generations Act and the environment.
- The Decarbonisation Implementation Group focuses on five areas: Our Culture and Ways

of Working, Our Buildings and Estates, Our Travel, Our Procurement and Our Approach to Healthcare. This work is supported by project specific groups.

- There's also the new Green Group – a volunteer group run by staff to challenge the health board in how it approaches sustainability; along with creating innovative projects, networking and linking with Green Health Wales. The Green Group also focuses on greener theatres; sustainable food, sustainable travel and waste and recycling.

The Green Group has also developed a staff survey which looks at what sustainability means to our staff in terms of travel, green spaces and the way we work, and it would welcome your participation. All responses will be confidential and no private details will be collected with the responses.

A link to the survey is on the digital version of this story on the staff intranet.

For more information on the above groups, email [SBU.Sustainability@wales.nhs.uk](mailto:SBU.Sustainability@wales.nhs.uk)



## 111 Option 2



**In need of urgent mental health support?**

Six years ago we were the first in Wales to pilot the new free 111 phone service aimed at helping people get urgent healthcare support and advice around the clock.

Since then many thousands of people have contacted 111 for help about a wide range of clinical concerns, and the 111 service is now available across all of Wales.

On 1st August the 111 service in Swansea Bay moves into an exciting new phase, aimed at supporting anyone with a mental health issue.

Call 111 Option 2 will put callers in direct contact with a team of mental health professionals based at Neath Port Talbot Hospital. Callers will be able to phone 111 and select option 2, where they will be put through to a qualified nurse or practitioner.

The service is available for anyone in Swansea and Neath Port Talbot with a mental health concern, including relatives.

Call 111 Option 2 will run 24 hours a day, seven days a week, offering a triage service and support or signposting as appropriate.

## BYE-BYE TO THE BAY FIELD HOSPITAL



Pictured: Bay Field Hospital Site Manager Kelly John, left, and Project Lead Sally Bloomfield on Pennard Ward, one of the last field hospital wards to be decommissioned.

*A field hospital built to care for Covid patients but which ended up vaccinating more than 400,000 people is closing its doors after two years.*

*Although it was never used for its original purpose, the Bay Field Hospital has become a mainstay of health services during the pandemic.*

As well as vaccinations, it has provided a venue for antibody testing, blood tests, nurse training and an outpatients' service for people with Long Covid.

Decommissioning work is due to begin at the end of this month.

Three hundred and fifty beds, which are not suitable for use in our main hospitals, have been donated. Some have gone to a refugee camp in Moldova for people fleeing the war in Ukraine, to families who are hosting Ukrainian refugees and local families in bed poverty.

The rest will be repurposed or donated.

The 11,000 sq metre building on the Bay Studios site just outside

Swansea, in which rear axles for Ford cars and vans were once made, was identified for transformation into one of two field hospitals for the area in spring 2020 as a wave of Covid infection swept Europe.

Swansea Council, the health board and the military worked together to deliver the £18m project.

Project Lead Sally Bloomfield said: **"It was a mammoth task and collaboration at its very best."**

Unlike England's Nightingale hospitals, the Bay was not designed to be an intensive care unit, but as a step-down unit to free up space in hospitals.

By December 2020 the BFH had

become the home of a new Mass Vaccination Centre (MVC) as the first Pfizer vaccine was rolled out to health and social care staff.

Like the field hospital, the creation of the Bay MVC was unprecedented and swift.

But it is the staff who have manned it with total commitment which has made the real difference.

More than 12,000 people were being invited there for vaccination every week at its busiest time in December 2021.

**"It's been something we will look back on as an incredible achievement,"** said clinical lead Rebecca Maus.

**"At the busiest times people were giving up their days off and staying late to make sure people were vaccinated."**

**"The enthusiasm from staff has been incredible."**

## ED consultant Anita Jonas, taking organ donation lead



Pictured: New clinical lead for organ donation Anita Jonas says it is rewarding to be able to comfort families whose loved ones are now helping others.

It's a conversation many shy away from but Anita Jonas is on a mission to get everyone talking about organ donation.

Swansea Bay's new clinical lead for organ donation (CLOD) is determined to do more to encourage those who want to "give the gift of life" after they pass to make their wishes known to their family and loved ones before it's too late to do so.

Organs donated by one person can potentially save and transform the lives of up to nine

people.

Although the law in Wales was changed to 'deemed consent' in 2015 – meaning you will be treated as if you have no objection to your organs being used to help another person in the event of your death – it is highly unlikely that doctors would do so against the wishes of the deceased's immediate family.

As a consultant in Morriston Hospital's Intensive Care Unit, Dr Jonas knows more than most about the emotive area.

Anita said: **"Throughout my career I have been involved in organ donation to some extent, because the donor can come from patients who, unfortunately, we can't help anymore."**

**"Intensive care is a challenging speciality because we deal with critically unwell patients and quite often we are, unfortunately, not able to save their lives - even though we try everything we can."**

**"It's always difficult to lose someone but, when I think about it, through organ donation their loss can have an effect on another's life - it gives some consolation."**

With around 300 people, across

the UK, currently waiting for a transplant, the need for donors is as urgent as ever.

Anita said she wanted to raise awareness of, and get people talking about, organ donation.

**"It can be difficult to make a decision when you don't know a lot about organ donation."**

**"But the more you talk about it, the more you hear about it, the more you read about it, uncertainties can disappear and you can make a decision about it."**

Making your wishes known spares your family and loved ones the anguish of having to deal with this at one of the lowest points in their lives.

**"The main message is to encourage people to have a conversation about organ donation because it's something that can happen to us all,"** said Anita.

**"Also, you never know when you could be in a situation where you, or someone close to you, requires a transplant."**

**"There is nothing worse than having a loved one who is critically unwell and being told that there's nothing more we can do for that person."**

**"Then the conversation about organ donation comes up – it's quite a lot to think about at that time. If these conversations were held beforehand it makes it that little bit easier for the family. It is an extremely difficult situation when you are losing your loved one, but knowing that they have actually given the gift of life to other people is a really wonderful thought."**

Anita confirmed that, although the law is on their side, doctors would not remove organs for donation without the family's blessing.

**"It's something that we could do but it's very important that we have the family's blessing. I would definitely urge everyone to have a conversation about it."**

Once a potential donor has been identified, a specialist nurse in organ donation is alerted.

**"If we identify someone as being a possible organ donor we make a formal referral and, based upon the response, we go ahead,"** she said.

**"We like to have a conversation with the family when we already have a specialist nurse in organ**

**donation (SNOD) present – these people are experts in this field of communication and our aim is to talk to families when they are with us."**

**"After this conversation, and agreement from the family, further tests and checks are required to confirm that the person would be an eligible organ donor."**

**"There is also close collaboration needed between the SNOD, the organ donation team and the transplant team, to be able to identify suitable recipients for those organs, as not everyone's organs would be compatible with those for a transplant."**

Very often a donor can help change the lives of more than one person – as many as nine.

Anita said: **"Last year the health board identified seven people who donated organs to 24 individuals, transforming their lives. It's a gift of life."**

## The bug stops with me

*We all have a part to play in helping to avoid infections that don't just harm our patients but put health services under more pressure – as Swansea Bay's Head of Nursing, Infection Prevention and Control, Delyth Davies explains.*

**Healthcare associated infections (HCAs) harm our patients – directly and indirectly.**

**Infections complicate patient recovery, cause pain and increase anxiety, and the resulting longer lengths of stay, closed wards, etc mean others face delays getting their bed.**

**HCAs also greatly add to staff workload and pressures, both through the extra care these patients need, and managing the impact of an outbreak.**

It's not only in our hospitals these pressures are felt. They affect GP practices, supported living, community and social care settings, and even patients' own homes.

Stopping infections from getting a hold in the first place is key.

For many years, the political and public focus has been on a small number of key indicator infections: **C. difficile** and bacteraemia caused by **Staph. aureus**, **E. coli**, **Klebsiella** and **Pseudomonas**.

The rates of these HCAs are higher

in Swansea Bay than other Welsh health boards. Yet they aren't the majority of HCAs affecting our patients.

The main offenders include urinary, respiratory, skin and soft tissue infections, surgical site infections, and invasive device-related infections.

These infections can be precursors to bacteraemia, and they may require antibiotics, which in turn increase the risk of **C. difficile** colitis, and the risk of antimicrobial resistance.

It makes sense to target these more common infections, because preventing them in the first place can help us to reduce the key indicator infections.

So scrupulous hygiene is paramount. Wash your hands thoroughly and regularly, use alcohol gel, and always clean hands between patients.

There are other things you can do

that prevent infections, particularly around invasive medical devices like cannulas and catheters. Avoid inserting any invasive device early just in case it may be needed later. Only insert one if and when it's really needed.

You must maintain a sterile field when inserting devices, prevent contamination when dealing with them, check them on each shift, and remove them as soon as they're no longer needed.

Current pressures within health and social care are unlikely to change in the immediate future, and may seem beyond the influence of individuals.

But we can focus on the things we are able to change. Small sustainable changes that when added together improve results. Whether in clinical or non-clinical roles, we can be responsible for changing our practice, our behaviours. We can speak up to influence others.

It's time for each of us to say: *The Bug Stops with Me.*

**"Change will not come if we wait for some other person, or if we wait for some other time. We are the ones we've been waiting for. We are the change that we seek."** Barack Obama.



Pictured: Delyth Davies, Head of Nursing: Infection Prevention and Control

## Dates for your diary


**Aug 1, 2, 9, 16 and 30:  
Meet the Guardians**

Meet and greet drop-in sessions are available with the Guardian Service over a variety of health board sites and online.

**Aug 9, 15, 22 and 31:  
SBU Peer vaccinator  
training session,  
Morrison Hospital**

This session is for new and existing Peer Vaccinators. Qualified health professionals who can supply and administer medicines under a Patient Group Direction (PGD) can sign up to be Peer Vaccinators.

**Aug 10 and 23:  
SBU Peer vaccinator  
training session, Neath  
Port Talbot Hospital**
**Aug 10, 17 and 24:  
SBU Menopause Café**

Menopause Cafés are inclusive events, open to anyone interested in the menopause: all genders and all ages.

**Aug 12:  
Blood Transfusion  
Administration  
update training**

A Teams update session for those already trained and competency assessed in blood administration.

**Aug 16 and 30:  
SBU Peer Vaccination  
Training Session Cefn  
Coed Hospital**
**Aug 17:  
Neath Port Talbot  
Flying Start Health  
Visitors' family event**

Come along and enjoy Neath Port Talbot Flying Start Health Visitors' second FREE family event at Ysgol Bae Baglan.

**Aug 17 and 26:  
Supporting Employees  
with Menopause**

The aim of this session is to raise awareness of the menopause to managers and provide support in utilising the NHS Wales menopause policy and how managers can support employees experiencing menopause symptoms.

**Aug 24-31:  
Dementia care  
training - skilled**

A five day training programme for staff who wish to become a dementia champion or to develop their understanding of dementia care to a high level. The training will incorporate preparation for a competency assessment in clinical practice.

**Aug 24:  
SBU Peer Vaccinator  
Training Session,  
Singleton**
**Aug 27:  
March with NHS Wales  
at Pride Cymru**

Join us in Cardiff on Saturday, August 27th to march with our NHS Wales colleagues for Pride Cymru.

## Grieving dad raises £1,400 for Swansea baby loss support group



Pictured: Dean Osell, who walked 150 miles to raise funds for the baby loss support group.

A father who experienced the death of his unborn baby has trekked 150 miles to raise funds for a support group which helped him and his wife come to terms with their grief.

Dean and Fiona Osell are parents to three daughters but lost their baby son during pregnancy in February last year.

She and husband Dean found solace in the Swansea Bay Baby Loss Support Group, which provides support to bereaved parents.

Former tree surgeon Dean raised funds by completing the nine day long walk from his birthplace near Hednesford, Staffordshire, and ending at the family's home in Rhos in the Swansea Valley.

Fiona worked at Morriston Hospital for ten years before she became site lead radiographer in Prince Philip Hospital in Llanelli.

Fiona said: **"We sadly lost our baby boy at 27 weeks. While the situation we found ourselves in was devastating, the help and support we received during this time and the resources that were made available to us helped a great deal."**

**"It surprised me how many people in the community had their own personal loss story, all devastating for the families involved, with the grief often being dealt with inwardly."**

**"We wanted to raise awareness of this group and the work it does, and raise money to help aid those that need their**

**service and continue to support bereaved parents and families"**.

Dean carried camping equipment weighing 15 kilos during his challenge, only walking paths and trails and avoiding roads, meaning it was neither the flattest nor most direct route. It passed through the Shropshire hills, Offa's Dyke, Hay on Wye and Pen y Fan.

**"I arrived home to a surprise welcome home party. A beer and burger went down well, but I must admit I was virtually sleeping standing up at this point"** said Dean.

His efforts raised almost £1,500 for the group which provides online support and a monthly meeting at Llandarcy Pavillion for parents to talk about their grief and feelings.

Specialist bereavement midwife Christie-Ann Lang said: **"Thank you to Fiona and Dean for helping to raise awareness of baby loss within Swansea Bay and for the monies raised during your walk in your son's memory."**

## Swansea bank worker donates £20,000 to palliative care

*A specialist palliative care team has received a £20,000 donation in memory of one of the patients it supported in his final days.*

Swansea Bay's specialist palliative care team offers a range of support to people with a life-shortening illness - including managing symptoms and psychological support, alongside many other aspects of care.

As well as the Ty Olwen inpatient hospice at Morriston Hospital, team members work from Singleton and Neath Port Talbot hospitals, while some provide end of life care and support in the community too.

Ruth Morrison's family was just one of many who chose to give back to the team who went over and above for them almost a decade ago. Mrs Morrison, from Swansea, sadly lost her husband Ben Harvey, in 2013, four months after he was diagnosed with pancreatic cancer.

**"He was diagnosed with pancreatic cancer in the August and he died on Boxing Day that year,"** the 52-year-old said.

**"He spent the last two weeks of his life at Ty Olwen. We have three children and had a new**



Pictured l-r: Helen Murray MBE, chairman of the Ty Olwen Trust, Ruth Morrison, Dr Gwenllian Davies and department manager for HSBC UK, Helen Gillan

**puppy at the time and the staff were just so accommodating to us, allowing us to bring the puppy in.**

**"We just could not have managed to get through that situation without their support."**

Mrs Morrison works for HSBC UK. Each year it awards a sum of money to a member of staff to donate to a charity of their choice in recognition of their actions to prevent financial crime, such as fraud or money laundering.

**"I was nominated after helping a customer who was involved in a romance scam during**

**lockdown who stood to lose everything, even her house,"** Mrs Morrison added.

**"I managed to get the sale of her house reversed and get her money back for her."**

As a result, she was awarded £20,000 to donate to a charity of her choice and decided to gift it to Ty Olwen as a way of thanking the team who cared for her husband.

Mrs Morrison added: **"It's quite a special thing for our family to be able to donate this money. It's a way of us being able to give something back."**

# Bay Health



Staff newspaper of Swansea Bay University Health Board

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