

# Bay Health

Staff newspaper of Swansea Bay University Health Board



## All smiles as 180 mums sign up for breastfeeding trial



FULL STORY: Pages 6&7

SCAN BARCODE FOR A SELECTION OF BAY HEALTH STORIES ONLINE



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Picture perfect... the new wall mural brightening up ED  
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New falls advice key to less harm and reduced ambulance trips

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# Hospital admissions cut by 1,200 thanks to virtual wards success

More than 1,200 hospital admissions have been avoided over the last year by providing the same level of care for patients at home.

Swansea Bay's virtual wards look after frail, elderly and vulnerable people where they live rather than on a ward.

This eases pressure on hospitals by reducing avoidable admissions, supports earlier discharges home when people have been admitted and reduces the risk of readmission.

A multidisciplinary team comprising doctors, nurses,

pharmacists, therapists and others discuss how to plan and manage each patient's care, with face-to-face assessment and intervention still carried out.

Over the last 12 months, the team has received 3,559 referrals with 55 per cent coming from hospitals and 45 per cent originating from primary and community care.

During that time, the virtual wards have prevented 1,236 unnecessary hospital admissions.

They are available in all eight of Swansea Bay's Local Cluster Collaboratives (LCCs) – Afan, Bay Health, City

Health, Cwmtawe, Llchwyr, Neath, Penderi and Upper Valleys. The virtual wards were introduced in 2021 and trialled in four of the LCCs.

They succeeded in reducing the number of hospital admissions and as a result, they were expanded into the four remaining LCCs in 2022 following a significant investment from the health board.

Now, each virtual ward looks after up to 30 patients, equating to 240 hospital beds in total in the community.

Virtual wards in focus: Page 5

## Plenty to shout about in another jam-packed Bay Health



Dr Richard Evans, Swansea Bay University Health Board Interim Chief Executive

Welcome to the latest Bay Health, the first of 2024. Once again, you'll find this edition jam-packed with articles celebrating some of the fantastic work and innovation taking place across our health board.

Many of the stories on the pages that follow offer examples of how we are working smarter to deliver better results and a better experience for our patients.

A shining example of this is highlighted on our front page, with 1,200 hospital admissions being avoided by the continued success of our virtual wards.

We know patients do better in their home environment, when appropriate. As a health board we've really embraced this principle and it's heart-warming to read the thoughts of Mary Duggan, a virtual ward patient whose story is featured on page 5.

Mary says being looked after at home has 'worked like clockwork' and the multidisciplinary team who have been managing her care have provided her with 'confidence and security.' I know the team will be absolutely thrilled to receive such positive feedback.

And while Mary and many virtual wards patients are doing well back in familiar surroundings, we have acute beds freed up in our hospitals for patients who aren't yet ready to return home.

Our centre pages focus on some really positive recent developments for our maternity services.

As many of you will know, our maternity and neonatal services have been the focus of much public comment and media scrutiny of late, especially before Christmas as a result of a Healthcare Inspectorate Wales report into our maternity services. We have been working for some time to improve staffing levels and to ease the burden on the existing workforce.

So it's great to read on pages 6 and 7 about some

new recruits who have now begun what I hope will be long and successful chapters in their careers with us at Swansea Bay. It's particularly gratifying to read Eliza Roberts' story, who has joined us in a new band 5 midwifery role after nearly walking away from the healthcare profession following an adverse experience while working in a similar role for a trust in England. Eliza says the welcome she has received at Swansea Bay has been 'phenomenal'. I'm delighted she feels that way and its huge credit to her colleagues that Eliza has felt so at home after some tough times.

We also feature a lovely selection of our latest 'Bay Babies', after re-instating a regular picture gallery - featuring new arrivals - on our social media channels. It's a simple idea but it's gone down a storm, with lots of positive feedback and many of our new parents only too happy to get involved by sharing an image of their newborn.

Elsewhere in this edition you'll find more examples of how our teams are embracing new approaches, ideas and technology to improve the service we provide our patients - it's great to see and it typifies the core priorities of our One Bay Way approach. But as we know, there is more for us to do as we face current challenges and work towards our long-term ambitions to establish Swansea Bay as a truly high quality organisation.

Thank you again for your hard work and dedication over recent weeks, which have been in many ways some of the toughest we have faced, and I hope by reading these pages you'll feel both inspired and proud to be part of our Swansea Bay family.

## Green grass of home comes to ED

A little bit of the outdoors is now inside Morriston Hospital's Emergency Department (ED) brightening the surroundings for patients and their families.

A giant vinyl wrap featuring an image of the Welsh countryside has been put up along one wall of the largest cubicle. It was donated by a local company, which also hung it for free in just a couple of hours.

Matron Karen Thomas said: "We know how worrying it is for patients when they are admitted to the ED. Their family and friends can also find it a stressful place to be.

"Looking at the often very grey and dull walls around the department and in the cubicles can't help, so we hope this small but generous gesture will help provide some distraction, maybe a talking point and help to relieve a little stress."

Karen has worked with a number of colleagues to brighten up the cubicle, including bed site manager Tracey Devlugt.

Tracey said: "I'm a keen photographer in my spare time and Karen approached me and asked if I had any photographs that could go up in the department. So I'm going to select some images I have taken of snowdrops and daffodils and these will be hung on the other walls of the cubicle, which have been painted a calming green."

"It's been a true team effort," added Karen.

"I'd also like to thank Dr Hannah Robinson, Kim Hampton-Evans, Glenda Morris and Philippa Bolton and especially Wesley Siddons and the team from



Pictured above, from left, Discharge Liaison Nurse Julie Banfield and Emergency Department matrons Karen Thomas and Rachel Newton, in front of the countryside scene.

Dragon Signs, who have been very generous."

Mr Siddons said: "I couldn't have been more eager to help. It's so clear how much the staff care about their patients and want to do anything they can for them.

"The final finish really made a big difference to the space and we were really very proud to have done even a small part to help this wonderful team who do such important work and give amazing care every day."

## Success on a plate as new food app serves up some big savings

Empty plates are proving two Swansea Bay hospitals are dishing up tasty meals as they stay on course to meet food waste targets.

Around 1.3million patient meals are produced every year at three of the health board's main hospitals; Morriston, Singleton and Neath Port Talbot.

To help improve meal options and cut waste, a new food ordering app has been rolled out at Singleton and Neath Port Talbot.

Following an initial trial period, it has served up big savings in terms of food waste and finances.

Over a 10-month period, just over 29,000 meals on average were made at those hospitals with 6,000 fewer meals wasted compared to the previous year.

It has led to the health board cutting its food waste to regularly meet the Welsh Government target of five per cent at the end of each meal service, though work continues to reduce that figure.

Alongside a better patient experience and reducing waste, the health board has already calculated a saving of £11,000 thanks to the new system.

There is an appetite to roll out the new food app across more Swansea Bay hospitals, with Gorseinon and Morriston next in line to take on the new system this year. Rob Daniel, Deputy Head of Support Services, said: "We're delighted with the success the new food ordering system has delivered. Patient feedback has been very positive, with many commenting on the range of food available and the quality of it.

"Patient experience is always top of the agenda, so it has been really successful in terms of how our patients are enjoying their meals at breakfast, lunch

Rob Daniel (left), Deputy Head of Support Services and Matthew Turner of Synbiotix, who developed the food app



and dinner. By switching from our previous paper format, orders are now taken on the food app via an iPad with a ward hostess.

"They are sent immediately to the catering team, which means orders can be taken as close to meal time as possible.

"We also have a commitment to meet Welsh Government guidelines regarding food wastage, and we've hovering around the required percentage across Singleton and Neath Port Talbot. It's good progress as it was at nine per cent before the food app came in, but we've got more work to do on that front."

## Hundreds sign up for early pay app Wagestream

More than 700 staff have signed up to the early pay app Wagestream.

It allows those who are active on the bank to draw down up to 60 per cent of their earnings as soon as a Swansea Bay University Health Board (SBUHB) bank shift has been worked and approved by a manager. Anyone who is registered with and active on the staff bank can use the draw-down facility for bank shifts worked, including medics, registered nurses and health care support workers.

Other staff can sign up to the app, which also offers financial planning tools, including a savings pot, but they cannot draw down funds in advance.

The health board partnered with Wagestream to launch the app in autumn 2023 following feedback from bank staff that they were waiting too long to see the financial benefit of working extra shifts. It's hoped the flexibility offered by the draw down facility will encourage more staff to work their bank shifts with SBUHB, which will help

reduce spend on expensive agency staff.

As of January 4th, 2024, there have been 745 enrolments in Wagestream, 668 transactions, £84,845 drawn down in wages and 55 savings pots created. Each draw down of bank pay is subject to a £1.95 fee, paid by the recipient.

Net pay, minus any draw downs and fees, will then be paid automatically as normal on the scheduled pay day. It can take up until 10am on pay day for money to show up in bank accounts.

The fee pays for Wagestream, a charity-backed organisation, to provide the draw-down service. The app is free to download.

• Joining the bank

Substantive members of staff can join the bank by filling in the application form on the Staff Bank

Sharepoint page. Once their manager has signed the form it should be emailed to SBU.NurseBank@wales.nhs.uk



• Enrolling in Wagestream  
Download the app to an iPhone, Android smartphone or tablet from the Apple App Store or Google Play or scan the QR code, left.

Open the app, select log in / sign up, enter your email address, then select Swansea Bay.

Enter your personal details. You will need your employee number, which can be found on your

payslip. Follow the set-up instructions. This should take no more than a few minutes. But once your part has been completed some work needs to take place behind the scenes. Confirmation of enrolment will follow between one to four days after.

# Falls advice reducing further harm and cutting ambulance journeys

Around 10 per cent fewer elderly people who fall in nursing homes across Swansea and Neath Port Talbot are being taken to hospital by ambulance, thanks to better staff education.

The unique training rolled out by Morriston Hospital clinicians to 177 nursing home staff has also dramatically reduced the number of people who have fallen having to stay where they fell because staff were afraid to move them.

Now, because of the training, there has been a 99 per cent reduction in fallers staying on the floor until an ambulance arrives. Instead, staff feel confident to move many people who have taken a tumble to somewhere more comfortable.

That has drastically reduced the chances of further harm such as pressure sores, hyperthermia, pneumonia, dehydration and even kidney failure, caused by pressure from a hard surface breaking down muscle fibres.

Unfortunately, this process starts quickly in the elderly, with the muscle fibre fragments flowing through the bloodstream to the kidneys, which stops them working properly.

The Cwtch project – the name means hug in Welsh – has turned traditional wisdom on its head. The team behind it has now reported the progress of the last 18 months in the official journal of the Academy of Gerontology in Higher Education and at the conference of the British Geriatrics Society, where it also won a prize.

“We are massively reducing the harm caused by falls through a simple, common sense intervention,” said Emergency Nurse Practitioner Debra Clee, who came up with the idea and led the training.

Specialist Registrar Dr Alexandra Burgess, who has supported the development of the service and published the work based on data gathered by colleague Alice Pritchberg, said: “We have seen a cultural shift and month-on-month reductions.

On average around 10 per cent fewer people who fall in nursing homes need an ambulance transfer to hospital, but one month that reduction was 15 per cent.

“And we previously saw 30 to 50 long liers per month – those who had been on the floor for hours following a fall before being brought into hospital. We have seen one since Cwtch began.”

Following the roll-out of Cwtch, some less serious calls to the ambulance service can be diverted straight to Debra, Alexandra and their colleagues in the Older Person’s Assessment Service (OPAS) at Morriston Hospital, who can either go out to see the patient or ask nursing home staff to bring them in for assessment and treatment. Debra said this

Left, Specialist Registrar Dr Alexandra Burgess and far right, Emergency Nurse Practitioner Debra Clee, who are part of the Cwtch roll out team, at work in the Older Person’s Assessment Service (OPAS) in Morriston Hospital. They are pictured with patient Sheila Oldroyd, 93, from Port Talbot



might include stitching up a wound or arranging X rays. Sammyjo Morgan, a registered mental health nurse and nurse manager at Burrows Hall residential and nursing home in Llangennith, Gower, said the “fantastic” programme supports residents’ physical and mental well-being.

“Feedback from health care staff and nurses within the home is that they feel more supported and less anxious that residents now do not need to remain on the floor waiting for the ambulance service.

“A fallen resident who lives with dementia would not understand why they need to lie on the floor and would want to get up, causing them more anxiety.

“However, Cwtch has enabled us to ensure the individual feels safe and relaxed in their own bed.”

She added: “We have also used OPAS on several occasions, which allows us to bring

residents with dementia to a calmer environment, as A&E can be very loud and busy.”

Dr Elizabeth Davies, a consultant in elderly care at Morriston Hospital, praised the “hard work and ingenuity” that has gone into the project, which is driving further developments around improving access for nursing home patients. Unscheduled care at Morriston has been under considerable pressure over recent years and this project has taken a great deal of

## The A-Z of Cwtch...

The Welsh word Cwtch, as well as meaning hug, is an acronym for nursing home staff to remember simple steps which will not only make the patient more comfortable, but could help them avoid an ambulance transfer altogether:

**C** - Can you move them? Research supports moving elderly fallers carefully because it’s unlikely to cause further harm, even if they have broken a bone.

**W** - Will it harm them? Nursing homes have registered clinicians who can check it’s safe to move fallers. Most of the time it is.

**T** - Treat. Treat open wounds and give pain relief such as paracetamol.

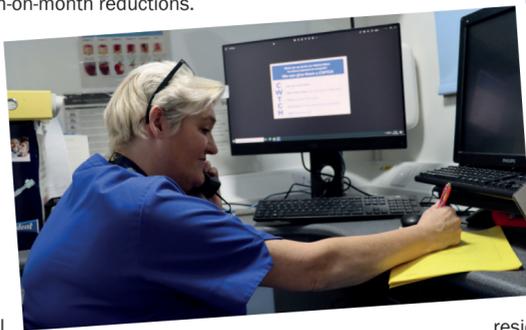
**C** - Cup of tea. Most patients can eat, drink and take routine medication as normal, halting further deterioration and potentially reducing the length of any hospital stay.

**H** - Help. What further help do they need? Some patients will still require an ambulance and will be taken to the Emergency Department after a fall.

personal commitment and time,” said Dr Davies.

“It is immensely rewarding to be part of a dedicated team which is genuinely committed to patient well-being and quality improvement.

“I am heartened to see the team recognised in this way. I know that with their dedication and simple enthusiasm for the work we do, there will be more success in line for them in the future and I look forward to it.”



# 'I was so grateful to be looked after in my own home'

A grandmother was spared a long wait for a hospital bed and instead received the same level of care at home, thanks to the virtual ward.

Mary Duggan, aged 78, was taken to Morriston’s Emergency Department after waking and not being able to sit up properly in bed.

After being told she faced an extended wait for a hospital bed to become available for her, she returned home with plans in place for a follow-up assessment.

At her appointment a few days later, a member of the hospital-based in-reach team suggested referring Mary to the virtual ward.

The in-reach team identifies Morriston patients suitable for earlier safe discharge, helping to avoid unnecessary admissions and freeing up beds for more patients. They then refer them to the relevant cluster’s virtual ward so they can be cared for at home instead.

Mary, from Port Talbot, said: “My daughter drove me to the Emergency Department and after being there for quite a while I was told there weren’t any beds available.

“I didn’t want to sit in the waiting room for hours and potentially wait overnight for a bed.

“The doctor suggested I could be put in touch with the virtual ward. He said I could be at home with people coming back and forth to monitor me.”

Mary decided to return home under the care of the virtual ward’s multidisciplinary team.

She had barely made it through her front door before Afan LCC virtual ward assistant nurse practitioner Steve Jones was contacting her to plan her care.

“He said I would receive the care at home that I

From left, Cheryl Griffiths, Mary Duggan and Steve Jones



needed. I felt as if I’d been thrown a lifeline,” Mary said.

“That was late afternoon on the Friday and on the Monday the staff arrived to take my blood pressure, among other things.

“I had regular visits from that moment on. It worked like clockwork and gave me so much confidence and security.”

After discovering Mary had low blood pressure, the team made numerous adjustments to her existing medication. They continued to visit her at home to monitor her progress with the new medication she had been prescribed.

Virtual ward staff work not only to prevent unnecessary hospital admissions but also to facilitate safe earlier discharges too, helping to free up beds for patients who really need them.

“I was so grateful to be in my own home and I feel that I benefited from it,” Mary added.

“It meant there was a hospital bed I wasn’t using and I was at home with the treatment I needed.”

Cheryl Griffiths, Afan LCC virtual ward clinical manager, said: “Being able to treat people where they want to be treated, in their homes, is fulfilling for our teams.

“Our main aim is to prevent hospital admissions and to facilitate earlier discharges wherever possible.”

# GP practice staff trained to spot signs of domestic abuse among patients

Staff working in GP practices across Swansea Bay are being helped to spot the signs of domestic abuse among their patients.

The project was initially trialled at the practices within the Upper Valleys and Neath Local Cluster Collaboratives (LCCs).

Following its success and the agreement of a three-year funding commitment, it will be rolled out to all GP practices.

Identification & Referral to Improve Safety (IRIS) is a national programme developed as an intervention for female victims and survivors of domestic abuse.

It provides training for staff based around the advocacy and support available for female patients and their families who are victims of domestic abuse, discussion of care pathways and most appropriate local and national support services for male patients who are victims and survivors.

Abuse can come in many forms including physical and sexual violence, coercive and controlling behaviours, financial control, isolation, entrapment and stalking.

The chosen partner to deliver the training to GP practice staff in Swansea Bay is Calan DVS, which is one of the largest domestic abuse charities in Wales.

Advocate educators from Calan DVS and dedicated



Dr Laura Newington

GP clinical leads work alongside each other to teach both clinical and non-clinical practice staff about how to identify if patients are potential victims of domestic abuse.

They cover topics such as how victims may present at the GP practice and how to approach the topic of domestic abuse safely and supportively with potential victims.

Once a trained member of staff has a conversation with a patient and gains their permission, they are able to refer them to the IRIS programme where they can receive help from experienced support workers at Calan DVS.

They engage with victims to fully understand the nature of their abuse and signpost them to appropriate

services whilst supporting them closely throughout.

By the end of November, around 80 per cent of GP practices in Swansea Bay had received the training – with the aim of training the remaining 20 per cent by March this year.

Dr Laura Newington is a GP at Ty’r Felin Surgery, in Gorseinon, and is Swansea Bay’s clinical lead for the IRIS programme.

She said: “As clinical lead for IRIS, my surgery was aware of the project early after its introduction in Swansea Bay. My colleagues were keen to receive the training to enable them to identify and refer patients with an experience of domestic violence and abuse for specialised, appropriate and safe guidance and support.”

Clinical staff receive two training sessions, which are both two hours long, while reception and admin staff take part in a one-hour session. Refresher sessions are also available to staff who have previously taken part in the training.

Laura said the training had helped staff to talk about domestic abuse in a safe way.

“We have been able to improve our awareness and approach to domestic violence and abuse in primary care,” she added.

# Mum's the word as baby feeding trial boosted by 180 volunteers

Almost 200 first-time mums have volunteered for a study into whether extra support helps them feed their babies in a way that works for them.

They have joined a UK-wide study called ABA-feed, which is being led in Swansea Bay by a health board team of specialist midwives.

While breastfeeding can improve the health of mothers and babies, fewer women in the UK breastfeed than those in other countries. Many of them will stop breastfeeding within the first fortnight. Earlier research has suggested that most of these women would have liked more support to help them continue.

The latest study is open to first-time mums regardless of how they plan to feed their baby. They are allocated randomly into one of two groups.

One receives the standard information and support provided by their midwife, health visitor or voluntary groups. This is known as usual care.

The second group receive the same usual care but are also offered additional support before and after their babies are born. Research midwife Sharon Jones said: "ABA-feed is a UK-wide study which compares two ways of how we provide support for mums in relation to how they feed their babies.

"We know that, for a variety of reasons, a huge number of women who initiate breastfeeding drop off very early on. This study looks at whether having an enhanced support, as in peer support, improves continuation of successful breastfeeding.

"We came on board as a health board because we recognised it is a very important study. We really want to promote breastfeeding and are keen to explore ways to provide the most effective support for new mothers.

Breastfeeding is not for everyone, and Swansea Bay's infant feeding coordinator, midwife Heather O'Shea, said nobody would ever try to force them. But, she said, 65 per cent of women in Swansea Bay wanted to, and started, breastfeeding, only for this to drop to 45 per cent after two weeks.

"The main reason they stop breastfeeding is because



Some of the maternity team, peer supporters and mums taking part in the ABA-Feed trial

they feel either that it's too painful or they don't have enough milk," said Heather.

"Whereas actually if you give really good support early on, the pain will go, and they will be reassured that they do have enough milk. In most cases there is enough, but babies just like to feed really frequently.

"Some women do really struggle. We would never want to force anyone to breastfeed. What we try to do, especially antenatally, when women are pregnant, is to give them correct information.

"There are a lot of myths about breastfeeding. In South Wales where there is predominantly a bottle-feeding culture, a lot of women will never have been exposed to breastfeeding. They just feel automatically like it's not for them. And that's fine if they don't want to do it. We're never going to force anybody, but we want to provide the right information. We want to let people know that there are a number of benefits that they may not be aware of."

Heather said that, for women, breastfeeding can help reduce the risk of breast cancer, ovarian cancer, osteoporosis and cardiac conditions later in life. And for babies it can reduce the risk of diabetes, of childhood infections, and the risk of being hospitalised in their first two years.

"And of course it's better for the environment and it's free. So, there are loads of benefits from breastfeeding," she added.

Swansea Bay is fortunate to have a small but enthusiastic group of infant feeding peer supporters – women who have themselves breastfed. They have had additional training but are not healthcare professionals. Jessica Bevan, mum to baby Trixie, is among those who were assigned to the additional support arm of the trial.

"Having someone on hand I could contact if I was really struggling, especially in the early days was really great," said Jessica, from the Sketty area of Swansea.

## New recruit Helen reunited with midwife who proved an inspiration

A mum who had her first child as a teenager and who never forgot the care she was given has herself started as a midwife 23 years later. Amazingly, Helen Davies works at Singleton, the same hospital as the community midwife who was such an inspiration to her all those years ago. Helen, who was 16 when she had son Declan in June 2000, has completed her three-year course at Swansea University



and is one of 23 new SBUHB starter midwives. Former community midwife Carole Christie (pictured above with Helen) also works there, as interim manager of Ward 20, the postnatal ward. But it is not the first time their paths have crossed. They were previously reunited at Neath Port Talbot Hospital's Birth Centre three years ago, when Helen was on placement there as part of her training. Helen, from Bridgend, said:

"When I was 16, I got pregnant with my first child. Carole was my community midwife. She was very inspiring. I just remember the care that I received, being 16, with my first child, and quite overwhelmed. It's a lot to take in. Carole was very nurturing and caring. I remember her sitting at home with me and just talking through things. And I decided then I wanted to be a midwife – but life went in a different

direction." Helen had another two children. It was when her oldest turned 20 that she finally decided to follow her dream. And she is glad she did.

"What makes the work so enjoyable to me is the women and the difference you can make to them," she said. In the last few months, 21 newly recruited midwives, mostly Band 5s but with a few Band 6s from

other health boards, have started at Singleton, with a further two due to join them this month. In Swansea Bay, student midwives divide their week between the university and placements with the maternity service.

During her first year in 2020, Helen was given a position in Neath Port Talbot Birth Centre – where, it turned out, Carole was her new supervisor.

Helen recalled: "It had been 20 years but between us we clicked. Now we are both in Singleton."

Carole left community midwifery in 2004, taking up a Band 7 post at Princess of Wales Hospital. She returned to her previous base at Neath Port Talbot Hospital at the beginning of 2018.

Carole also remembers the moment she and Helen were reunited, saying: "I didn't recognise her at first. Then we started having a conversation and I remembered everything – even where Helen lived."

## Say hello to some of our bonnie Bay Babies!

Introducing some very special SBUHB deliveries, some of the latest batch of beautiful babies born at our maternity unit in recent weeks. Our communications team have been capturing some of those precious newborn moments, with their proud parents' permission of course, before publishing pictures on our social media pages and intranet. So, say hello to (from top, left to right), Ivy, Rae, George, Eden, Alexander, Ivy, Myla, Dallah and last but not least, Iwan



## Eliza praises 'phenomenal' support after getting career back on track

A midwife who left the profession after being bullied while training in England has fallen in love with it again at Singleton Hospital.

Eliza Roberts is one of almost two dozen, mostly newly qualified, midwives to have joined Swansea Bay over the last few months.



since starting work there. Originally from Swansea, Eliza moved with her husband to the east of England six years ago when she decided to train as a midwife. It was while on a hospital placement in her third and final year that she was bullied, an experience she recalls as truly awful. After being moved to another hospital, she finally qualified in October 2022, continuing to work for a few months afterwards.

"But I started to develop anxiety and depression which

"It's fantastic," she said. "I'm really excited to come to work and I haven't felt like that in a long, long time."

The new arrivals came together for a special event at Singleton Hospital, to meet the senior maternity services team, ask questions, and share their experiences, good or bad, in the weeks



The newly recruited midwives along with senior maternity staff at the meet and greet event in Singleton Hospital. New midwife Eliza Thomas is pictured left

continued to worsen, and I needed to take a lot of time off," said Eliza. "Last year we decided it would be best for me to move back to Swansea and apply for a new Band 5 position. "After months of time off and mental health support, I finally felt ready to try going back into the profession I'd always wanted to do and that I had poured my heart and soul into – even during the pandemic." During the meet and greet event, Interim Head of Midwifery Catherine Harris told the new midwives there would be times they will feel they could not do the work or were not good enough.

Other times, she told them, they would go home feeling there was something important they had forgotten to do. But she said these feelings were

natural and the new midwives would be supported all the way – encouraging them to talk to her and her team. Eliza admitted she had experienced those very same feelings in the weeks since starting at Singleton. "Since I've come back, I've spoken to loads of people about it and every single person has said the same thing – it's a lovely place, we'll look after you here," she said. "And the support has just been phenomenal. It's been so good to feel like a midwife again after everything I went through."

A total of 21 midwives, mostly newly qualified Band 5s but also some experienced Band 6s from other health boards, have joined over the last few months, with a further two due to start later this month.

# Simplified approach leads to fewer patients having scans cancelled

Fewer patients with medical implants such as pacemakers are experiencing delays or last-minute cancellations of Magnetic Resonance Imaging (MRI) scans thanks to simplified procedures.

Radiographers in Swansea Bay hospitals now have safety information on a wide range of commonly used devices at their fingertips, which means more scans can go ahead as planned even if they only find out a patient has a device when they turn up.

It's vital that precautions are taken with patients who have implants containing a metal component due to the magnetic field generated by the scanner, as the magnetic field can cause the implant to heat up, move or malfunction.

Previously, radiographers may have had to delay or cancel the appointment to give them time to track down the make and model of the patient's device and research if it was safe to proceed.

This proved extremely challenging in cases where devices had been fitted many years ago, in a different part of the UK or abroad.

Maria Yanez Lopez from MRI Physics, the department in charge of advising on scan safety, said new generic policies covering several types of device came into play in those cases where information on implants was not captured before the patient's appointment.

"We can try to check the records but they may be in a hospital in another part of the UK or abroad," she said.

"In one case the radiographer was told the building holding the records had burned down so that information had been lost."

As medical science advances, so the number of implants with metal components increases.

Implants are designated MR Safe, MR Conditional or MR Unsafe by manufacturers.

So far MRI Physics, in conjunction with Morriston consultant neuroradiologist Dr Hannah Khirwadkar, have compiled seven generic implant policies, each covering a particular set of implants, particularly those that are considered to present a low safety risk or where risks are typical across implants of that type.

There are also simplified procedures for MR Conditional implants whose conditions for safe scanning are more complex, such as pacemakers and cochlear implants.

Maria, Principal Magnetic Resonance Physicist, said:



Pictured above from left: Consultant Neuroradiologist Dr Hannah Khirwadkar, Clinical Scientist and Magnetic Resonance Physicist Dr Samantha Telfer, Principal Magnetic Resonance Physicist Maria Yanez Lopez and Superintendent Radiographer Barry Spedding

"With the generic implant policies, we try to review as many implants as possible within a single category and for some of them we managed to get in touch with NHS Wales procurement, so we have the complete list of all the ones bought in NHS Wales within a given period.

"We do literature reviews and look through international databases to check if any adverse effects have been reported with these implants.

"Then we make a policy for radiographers to follow which is hopefully quick and easy. It tells them what settings they need for the machine.

"It's no longer reliant on them having to go off and find out about the make and model."

Maria said the work was of ever-increasing importance due to the "sea of devices", many of which are in older people who can require urgent investigation work where there's no suitable substitute for an MRI.

She explained that in cases where implants were not covered by a generic policy or procedure, the MRI Physics team would provide a bespoke risk

assessment, as part of the so called Off Label Policy.

"What we also see a lot of these days are implants where a part has had to be replaced and that part may come from a different manufacturer to the original device. We call these mix-and-match cases," she said.

"The original manufacturer will then automatically class that device as MR Unsafe and that used to be the end of the line for these patients in terms of getting an MRI scan.

"But now with these procedures we can say what the risk is; low, medium or high and the clinical team will have to weigh up that technical risk against the clinical situation and whether an X-ray or alternative scan could be used.

"Many of these cases can now go ahead to MRI scan, within the framework of our Off Label Policy and informed patient consent."

Swansea Bay's MRI Physics team is the only one in Wales and also provides services to other health organisations in Wales, where these advances are also having a positive impact.



Team photo shows (l-r): physiotherapy assistant Emma Stephens; booking coordinator Lorraine Mthembu; senior physiotherapist Alice Mayo; clinical lead and advanced practice physiotherapist Chris Lambert; senior dietitian Nadia Kudrjasova; dietetic assistant practitioner Rhiannon Rogers; physiotherapist Natalie Cape; physiotherapy assistant Natalie McCarthy. Completing the team, but not in the photo, is business support manager Lowri Ridings

# New team helping patients get in shape while they await surgery

People waiting for new hips or knees are being offered extra support to keep them in the best possible shape until their surgery can go ahead.

More than 2,000 of them across Swansea Bay have been invited to an assessment to see what options could be available to them.

These range from diet and exercise classes, physiotherapy, steroid injections for pain management, or mobility aids such as walking sticks or knee braces.

Although only recently launched, the health board's orthopaedic prehabilitation service has already assessed almost 150 patients.

Of these, around 100 have been referred on to one or more of the various treatments on offer, with virtual options available too.

As is the case across Wales, waiting lists for hip and knee replacements have been high in Swansea Bay for some time. The health board is working hard to address this, including opening new theatres at Neath Port Talbot Hospital, which is being developed as a centre of excellence for planned orthopaedic surgery.

But the longer people wait, the greater the risk their quality of life will deteriorate. For some it could lead to weight gain, which in turn could impact on their fitness

for surgery. The new prehab service is being funded by the Welsh Government as part of its 3Ps (promote, prevent and prepare for planned care) policy.

Service clinical lead Chris Lambert said invitations for an initial assessment had been sent out to all patients in Swansea Bay awaiting replacement knees or hips – around 2,200 of them.

"They can come into an assessment clinic where they are given options by a senior specialist physiotherapist or dietitian," Chris said.

"Then they go into the treatments according to what they need and what they are happy to attend. Treatment isn't compulsory and some do decline it or choose self-management options.

"The idea is to support them on the waiting list to try to optimize the patient's pre-surgery health status. This in turn should improve the outcome from surgery and speed up their post operation recovery.

"The fitter they go into surgery, the quicker they will recover."

One of the options is a weight loss class for people whose Body Mass Index, or BMI, is high. Because of the increased anaesthetic risks for these patients, the likelihood is that their surgery will be deferred.

Specialist weight management dietitian Nadia Kudrjasova and dietetic assistant practitioner Rhiannon Rogers are there to help.

Nadia said: "Losing weight can be challenging for many reasons. Some people may not be as active as they once were due to joint pain and reduced mobility, or their eating habits might have altered.

"We will be providing tailored support for patients based on their individual needs."

As well as the dietitians, there will also be physiotherapy-based options which extend beyond a simple exercise regime.

Physiotherapist Alice Mayo said: "We assess them in clinic and then there are three tiers to it.

"We have hydrotherapy, we have exercise groups within physiotherapy, in the gyms.

"We can also refer to the patient's local leisure centre for community-based exercise delivered by our National Exercise Referral Scheme colleagues.

"Alongside this we can offer knee braces and steroid injections.

"We have the option of doing community visits, visiting people in their own homes, and then offering walking aids."

## It's good to talk... 30-minute chat leads

A man has been able to prevent developing a chronic condition thanks to a 30-minute conversation.

After a routine eye test highlighted a change to one of his eyes, Darren Rix was sent for a blood test which later revealed he was prediabetic.

While the 50-year-old's blood sugars were higher than normal, they were not high enough for him to be diagnosed with type 2 diabetes – although he was at a high risk of developing it.

"I had an eye test and the optometrist noticed something on the back of my eye so I was referred for a blood test. I was called into my GP practice and told that my blood sugar levels were high.

"It was a bit of a shock. If I had looked in the mirror, I wouldn't have thought I was prediabetic.

"The GP asked me if I would be willing to have a discussion with the Diabetes Prevention Programme team, to which I agreed."

## to lifestyle change as patient Darren keeps diabetes at bay

The All-Wales Diabetes Prevention Programme, which launched last year, has already seen positive results.

After being identified as at risk of developing type 2 diabetes following a blood test, the programme offers patients a 30-minute intervention with a specially trained dietetic support worker.

The intervention discusses topics such as physical activity, healthy eating and promotes other lifestyle changes such as smoking cessation and alcohol

reduction. Based on work undertaken initially in the Afan Valley and North Ceredigion, there are plans for the programme to be available in all eight of the Swansea Bay clusters – with a dietetic support worker based in each. Carol Brock, Swansea Bay's deputy head of nutrition and dietetics, said: "It's a patient-centred consultation.

"It uses patient-centred goal setting, where the patient is asked what is important for them.

"The dietetic support workers can also signpost patients to community services and support."

Darren went to a consultation with a healthcare support worker at his GP practice, who encouraged him to increase his exercise.

He added: "I started swimming as a result, which I still do now as I really enjoy it. I also made food substitutes here and there to my meals and I cut back on my sugary treats."



Darren Rix, pictured before (left) and after making some lifestyle changes that have helped keep the threat of developing Type 2 diabetes at bay

# Surgeon's lifelike mannequins play victims in simulated terror attack

Lifelike models of casualties created by a Swansea surgeon have played a leading role in a simulated terrorist attack.

Morrison Hospital trauma consultant Professor Ian Pallister originally created realistic models of bomb blast victims, used to give military surgeons fully immersive training before they reached the front line. Although these consisted of specific body parts such as legs and torsos, they have now developed into full-body versions which can reproduce different injuries including blast wounds and gunshots.

Developed, as with the previous models, in partnership with the Ministry of Defence, the Surgical Advanced Mannequin, or SAM, was used for the first time in an Army clinical exercise earlier this year.

It "breathes" and can be pumped with fake blood to simulate bleeding. The model can be intubated, have "dead tissue" removed and be used for exploratory surgery. Earlier versions of the SAM have been used to train Ukrainian military surgeons.

Professor Pallister created the SAM using CT scans and 3D printed masters of specific wounds, which also include pelvic injuries.

"They have progressed to the point where wherever possible, we're using a whole-body model rather than just a truncated injured part," he said.

"This helps reinforce the immersion in the simulated situation as a whole, rather than just looking at it purely as the execution of a task.

"The execution of a task is important, but we also want people to experience something of the reality of the situation. Obviously not the full reality. We can't or wouldn't wish to reproduce that but just to help reinforce and help people immerse in things and so on, rather than feel that sense of disconnect from performing a simple task."

After their debut at the Army training exercise, the SAMs were put into action again in November – this time at a special event held at Cardiff's Principality Stadium.

Professor Pallister is a member of the British Trauma Society, a national organisation for health professionals involved in trauma care.

It held its Annual Scientific Meeting at the Principality Stadium over two days, which included a simulation-based training day which Professor Pallister ran, and which featured three of his SAMs.

He is also Welsh ambassador for the UK-wide citizenAID charity, set up by a group of civilian and military clinicians in 2017.

It prepares people, communities and organisations to help themselves and each other when there are multiple casualties particularly from deliberate



Some of the SAM mannequins, developed by Professor Ian Pallister (pictured below)

attacks. CitizenAID was also involved in the Cardiff event.

"The day was themed around a vehicle being used as a weapon," said Professor Pallister.

"After some introductory talks in one of the rooms in the Principality Stadium, everyone moved out on to the concourse where we had a simulated street scene with models set out as the casualties.

"Some of the participants were given citizenAID wristbands, but they were not told why. They were effectively the good Samaritans. The armed police had already 'shot'

the assailant and established that the hot zone was safe. But the good Samaritans were trapped in the hot zone, and they attended to the casualties as best they could."

After that, two crews from the Emergency Medical Retrieval and Transfer Service – the so-called flying doctors which travel on the Wales Air Ambulance – arrived to take over and provide a professional level

of care. Then the "casualties" were carried to another area, where the participants spent the rest of the day going through different skill stations.

"These were to do with how the patients would be managed, partly reviewing what would be done at the point of wounding, but more to do with what would then happen in terms of damage control, resuscitation and surgery," said Professor Pallister.

"The goal was to broaden and deepen the participants' understanding of the simple things which can be done to help save lives in such tragic circumstances.

"Feedback was very good."

It was one of the first major events, and certainly the first in Wales, that citizenAID had participated in since the pandemic. Professor Pallister said that due to Covid it had almost fallen off the radar.

"But with circumstances being as they are, the idea of having members of the public switched on to the possibility that they might have to provide improvised care when they least expect it is probably more relevant now than it was just a few months ago," he added.

"We need to start generating some more interest and more awareness."

More about citizenAID here: <https://www.citizenaid.org/>



Pictured left, Carys Howell and Rebecca Gillman, who created a project which showed the extent to which swapping metered dose inhalers (MDIs) for dry powder inhalers (DPIs), where appropriate, would be good for patients and for the planet. Pictured right, members of our Estates team who won a Staff Well-being Initiative of the Year award for the creation of live nature links across our sites. Meanwhile inset below, anaesthetic team staff have been involved in an energy saving project which involves double-checking theatre equipment is switched off when not needed

## 2023 a big year for sustainability, but we've more to do in the year ahead

Sustainability remains a big focus in Swansea Bay, and 2023 has highlighted how staff and the health board have fully embraced it – now we want to build on this in the year ahead.

While the level of care we provide patients is always at the forefront of what we do, we are always looking at ways in which we, as a health organisation, can cut our carbon footprint.

This year has certainly been one in which we have plenty to shout about.

Our biggest success in terms of sustainability has been the expansion of our solar farm near Morrison Hospital.

The solar farm – the first of its kind in the UK to directly power a hospital – has reduced our carbon footprint since October 2021, with a saving of 1,933 tonnes CO<sub>2</sub>e – the equivalent in miles of 521 flights from Cardiff Airport to Sydney – underlining its impact from an environmental perspective.

Now it's in the process of having a 1MW extension – taking it to 5MW – and a special battery which will be able to store any excess solar power generated on the brightest days, for use after the sun sets. The works should be completed by this April, with the extension and battery expected to generate a third of Morrison Hospital's power.

While the solar farm will continue to deliver massive energy and financial savings, we are mindful that changes – no matter how big or small – all add up when embraced across the organisation.

That's why we created a Wales-first sustainability awards event called the Green Team Competition.

We linked up with Hywel Dda to set up the event, which encouraged staff and services to showcase their innovative ideas. While a winner was announced on the night, the standard of each entry were extremely high while the efforts of staff and the potential savings in terms of energy were very encouraging.

Among the exceptional entries was a hugely beneficial project from our pharmacy team.

Their work looked at how asthma patients could cut our carbon footprint by the equivalent of 552 round-the-world car trips – simply by switching metered dose inhalers (MDIs) for dry powder inhalers, where appropriate. Staying on the subject of inhalers, eight pharmacies in the Upper Valleys Cluster ran a first-in-Wales pilot that saw all elements of an inhaler recycled for plastic and metal while remaining gases are compressed and reused.

There are plenty of other great examples of our staff seeking innovative approaches to delivering more sustainable healthcare.

At the start of last year we launched a new food ordering app, which has helped cut costs, reduce food waste and deliver a better menu for patients.

It underwent a successful trial before being rolled out across our three main sites, and really benefits us as we aim to meet Welsh Government guidelines for food waste reduction.

Our switched-on theatre staff have also shown their initiative by making small changes that deliver big results. To combat the rising cost of electricity and to reduce the energy used by the health board, an 'elective theatres shutdown check' has been created

by the anaesthetic team which encourages staff to turn off specialist equipment when they are not in use.

Our laboratory staff have also been evaluating their methods and have improved their recycling and disposal procedures, along with making changes to save energy in their quest to minimise their service's carbon footprint. Most recently, our Estates team won the Staff Wellbeing Initiative of the Year award at the Institute of Healthcare Engineering and Estates Management (IHEEM) annual function. They have created live nature links across our sites, developed green spaces and helped wildlife flourish, which in turn has boosted the wellbeing of staff, patients and volunteers.

There have also been important discussions and events across the year, ranging from promoting sustainable travel in Bike Week and our Cycle to Work scheme, along with gathering thoughts from colleagues in our staff travel survey.

Moving forward, we have recently appointed three sustainable clinical leads – a health-board first.

Elana Owen, consultant anaesthetist; Sue West-Jones, Emergency Department consultant and Alexandra Strong, Jill Rowe Neurology Ambulatory Unit manager have been appointed to take on the roles.

Alongside their day-to-day clinical responsibilities, they are also tasked with embedding sustainability across the health board to meet climate change objectives and work closely with colleagues and staff groups.

These are very important appointments which underline our determination to enhance our sustainable approaches and responsibilities.

But we want to do more, and along with the support, ideas and enthusiasm of our staff, we can achieve that.



## What's on

### Dates for your diary



January 17

**Supporting Employees with Menopause - session for managers. MS Teams: 10-11am**

This session is aimed at Managers to provide helpful information in supporting employees experiencing menopause symptoms and adjustments that can be put in place to support our employees.

If you have any issues / queries, please email [SBU.OHWBTraining@wales.nhs.uk](mailto:SBU.OHWBTraining@wales.nhs.uk)

January 22

**SBU Menopause Cafe MGH**

Menopause Cafes are inclusive events, open to all SBU staff interested in the menopause: all genders and all ages. Come and Join us to discuss all things Menopause. Taking place at the Meeting Room. Morrision Hospital Library

January 30

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

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.

What to expect? 1hr15 - 1hr30 training session delivered via MS Teams, from 11-12.30pm.

February 5

**Patient Flow Workshop - Managers Pathway - Lecture Theatre, NPTH, 9-430pm**

The Patient Flow Workshop is aimed at clinicians and colleagues involved in planned care patient clinics.

How we often run our current planned care clinics unintentionally but predictably results in queues and the feeling

of chaos.

This workshop raises awareness of the Health Care Systems Engineering approach to collaboratively diagnose, design and deliver effective solutions to some of these common design flaws that leads to safer and calmer clinics for both staff and patients.

February 6

**Undertaking Pregnancy Risk Assessments- Session for Managers -12-1pm, MS Teams**

This session is aimed at Managers to provide helpful information on supporting pregnant employees and undertaking pregnancy risk assessments.

If you have any issues / queries, please email [SBU.OHWBTraining@wales.nhs.uk](mailto:SBU.OHWBTraining@wales.nhs.uk)

February 20-21

**WARRN training (MH&LD)**

Taking place at the chapel, Cefn Coed Hospital.

Please note by requesting a booked place you will have agreed with your line manager that you will be released to attend both days as spaces are limited. To book a place please email - Liz.Mann@Wales.nhs.uk

February 20

**Tailored Adjustments for Managers - MS Teams, 2-3pm**

A 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. If you have any issues or queries, please email [SBU.OHWBTraining@wales.nhs.uk](mailto:SBU.OHWBTraining@wales.nhs.uk)

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

## Charity and events

### Swansea Bay Health Charity setting sights on another bumper year in 2024



Oncology and haematology services benefitted from a £2,500 donation after fundraising by patient Helen Morgan, pictured second from right. Helen undertook a 10 mile sponsored walk. Family friend and Wales rugby captain Jac Morgan was on hand to present the cheque for the funds. Meanwhile below, left, staff show off prizes won in the Big Christmas Raffle. And right, Swansea City stars of past and present played Santa by delivering gifts, including a PlayStation and TV, to young patients at Morrision Hospital



Our Swansea Bay Health Charity is aiming to build on a bumper 2023 by supporting some key projects in the coming year.

The last 12 months proved to be a big success, with our services benefitting from a remarkable number of gifts in kind.

Around £250,000 has been received in one-off pledges, with the health charity keen to extend a huge thank you to all involved in raising funds and everyone who has given so generously over the last 12 months.

The festive period proved to be particularly beneficial, with the Big Christmas Raffle and Bake Sale raising roughly £2,500 for the South West Wales Cancer Centre Fund.

"We've had a great year and we'd like to thank everyone for their work and generosity," said

Swansea Bay Health Charity fundraising support manager Lewis Bradley.

"Looking ahead to this year, there will be some major fundraising campaigns to look out for, including the NICU accommodation refurbishment at Singleton and the 20th anniversary of the South West Wales Cancer Centre. There are many more projects in the pipeline."

- If this story has inspired you to raise funds for your local NHS then Swansea Bay Health Charity would love to hear from you.

Email the charity team at: [swanseabay.healthcharity@wales.nhs.uk](mailto:swanseabay.healthcharity@wales.nhs.uk).

Swansea Bay Health Charity (registered charity number 1122805) is the official charity of Swansea Bay University Health

Board. It plays a vital role in raising money for projects and activities that support patients, whilst it also supports a range of projects to improve the working conditions and support available to staff.

Nearly all wards and departments have their own fund, which all come under the Swansea Bay Health Charity umbrella.

So if someone wants to give something back for the care they or a loved one has received, the charity ensures the funds raised will go directly there.

The charity does not replace NHS funding but uses generations donations received from patients, their families, staff and local communities to provide above and beyond what they NHS can provide. To find out more, refer to the link to the Swansea Bay Health Charity website below.

## CHALLENGE YOURSELF IN 2024!

ELUSEN ICHYD  
BAE ABERTAW  
SWANSEA BAY  
HEALTH CHARITY

We have spaces for:

- CARDIFF HALF MARATHON
- LONG COURSE WEEKEND WALES

Please email:

[Swanseabay.HealthCharity@wales.nhs.uk](mailto:Swanseabay.HealthCharity@wales.nhs.uk)



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: [sbuhb.nhs.wales/swansea-bay-health-charity/](http://sbuhb.nhs.wales/swansea-bay-health-charity/)

# Bay Health



Staff newspaper of Swansea Bay University Health Board

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