







#### Routine care for patients at a Swansea hospital was put on 'paws' to accommodate some special visitors.

Rylie and Noah, a border collie and a mixed rescue dog from Romania, called in to meet those on dementia wards in Cefn Coed Hospital.

The canine companions, and their owners, volunteer for Cariad Pet Therapy and had been invited along by the hospital's occupational therapy team to boost their patients' mental health.

Swansea Bay occupational therapist in older person's mental health, Holleigh Bryan, said: "Part of occupational therapy is looking at using meaningful activities to boost the mood of our patients and to reduce their level of agitation. "We were hoping that through introducing pet therapy, it would reach some of our patients who are passionate about animals. To settle them and give them a bit of enjoyment.

"They responded fantastically. Some of our ladies and gentlemen have issues with agitation and aggression, and become distressed, but to see them with beaming smiles when the dogs walked in was absolutely fantastic. Some patients, who we don't see engaged in any activities, were on the floor stroking the dogs, really enjoying themselves.

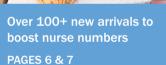
"We haven't seen that level of enjoyment from them since they've been here.

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# STORIES ONLINE

FOR ALL THE FULL





New approach to treating wrist fractures Covid-inspired change is better for patients and frees up appointments.

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# Unique new blood test used to screen bowel cancer survivors

People in Swansea Bay who have survived bowel cancer will be the first in the UK to be offered a unique blood test to make sure it has not returned.

Guidelines require these patients to have a follow-up colonoscopy after a given period to check they remain cancer-free.

But delays caused by Covid mean many of them have had to wait far longer than the guidelines recommend. So a blood test, initially created in Swansea to screen patients going to their GP with possible bowel cancer symptoms, will now be offered to 200 people who have waited the longest for their follow-up colonoscopies. Those who get the all-clear will have peace of mind. Those who do not will have their hospital tests expedited.

It has been made possible by funding of more than  $\pm 160,000$  by the Wales-based not for profit organisation, Moondance Cancer Initiative.

Singleton Hospital colorectal surgeon Professor Dean Harris (pictured), who leads the blood test project, said access to colonoscopies had come under the spotlight during the pandemic.

"It has only really been possible to do colonoscopies on patients who are suspected of having cancer – those that have come through the GP route, the urgent suspected cancer pathway," he said.

"There are about 4,000 patients in Swansea Bay alone who have waited years for a follow-up colonoscopy after they've had bowel cancer or polyps removed.

"Guidelines say they need to have a check colonoscopy done, sometimes a year later, sometimes three years later.

"But all that activity stopped in the pandemic, and now there's a huge backlog, not just in Swansea, but everywhere in Wales and the UK."

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Mark Hackett, Swansea Bay University Health Board chief executive

This winter we have had it all. A sharp rise in flu and respiratory emergencies and a resurgent wave of Covid hospitalisations. Colleagues have taken industrial action for the first time in many years as the cost of living crisis makes life harder for everyone. Demand has risen as many of the health needs supressed by Covid have now come in to all parts of the NHS. For many this has been an exhausting and frustrating time working in healthcare as no matter how hard we work the pressures we are under are constraining the quality of service we'd like to offer and are trained to provide.

I have seen and heard all of this and fully appreciate the strains everyone is working under and the outstanding effort people are making to deliver the best care possible. Our Big Conversation has been really important to ensure that what you think and feel is heard and discussed. This programme has been so important that I have led the sessions personally with colleagues, so I can hear directly what people are saying; more than **1**,000 voices have contributed so far. It has produced

important feedback and ideas about how we can improve working lives, patient services and address frustrations with how some board processes work. It is demonstrating the pride that exists in all parts of the health board in our mission to improve people's lives and support them when they are vulnerable.

The overarching picture is one of an organisation which has four of the characteristics of a quality organisation, but an intense pride, ambition and restlessness to change to a better picture. There are certain professionals, services, teams and departments which exhibit these characteristics but rarely are these shown consistently across our organisation.

There is a real restlessness for power to be handed to the front line staff who deliver services and break the current, old fashioned ways we have sought to plan, organise, control and maintain services. It is time to change. The next step is to scope what is our vision for a quality organisation and how we adhere to it. There are more events to come, details on the intranet, which I would implore you to attend so you can talk directly with me and colleagues about what this health board should stand for. It's really important that we don't only hear the loudest voices but as many views from every part of the health board contribute.

This has happened alongside one the most significant service developments we have ever made with the completion of the centralisation of the acute medical take at Morriston Hospital supported by £4 million of investment. This has been a colossal programme of changes across the health board involving hundreds of colleagues in a series of changes that are already delivering improved patient experience and flows. Thanks go to the project leadership and team as well as everyone who played their part in making the changes successfully, whilst keeping patient facing services operating as normal. Thank you.

We are making a reality of our Changing for the Future promise to create three new specialist centres of excellence in our acute hospitals and seeing a step change in out of hospital services in community and primary care, all of which are designed to see patients at the time that will make the most positive impact on their health and wellbeing in the place best suited to their needs. As we bed down these new structures, making them work effectively and discovering the new options they give us to use our training skills and commitment to best effect will be the real prize to achieve and I believe we are well placed to do so.

The outlook next year is one of continual high demand and increasingly constrained resources. We know we need to seek a fundamental change in the way we respond. This has to be built on a journey of discovery which is not about new commitments but looking at the world through different eyes. The approach needs to be based on:

- Accelerating our Changing for the Future programme to separate emergency and elective services on sites.
- Allocating our resources differently to develop alternatives to hospital-based services to reduce our dependence on them but improve patient experience and outcomes.
- Innovating around departments, service models and workforce development to organise and deliver services differently
- Aligning public expectations and behaviour around new services through engagement and involve patients and communities more in service design and their own care.

This issue of Bay Health is once again bursting with inspiring stories of achievement, innovation and mitment. Please let us know what you enjoy about com Bay Health and any ideas for what else you'd like to see in it.

Continued from front page -

"One of our ladies, who has been struggling with mobility, as soon as we mentioned that there was a dog in another room, got off the bed as quickly as she could and started walking to the day room."

Holleigh wanted to thank everyone who was involved in the project and expressed the hope that it would become a regular occurrence.

Ros Burrows and 11-year-old border collie Rylie, volunteer for Cariad.

She said: "We volunteer anywhere where they want us to do some pet therapy. We're here to help people feel better about themselves

"Dogs are shown to have a really positive effect on people's mental health. We go along to bring smiles to people's faces."

Ros added that the dogs enjoyed the experience as much as the patients

She said: "He absolutely loves it. It's one of his favourite things to do. As soon as I get his bandana out, his tail is wagging.

Sean O'Sullivan, who brought five-year-old Noah along, said: "You only have to look at the patients, the visit has woken up the room."

One patient, Jillian Edwards, said: "It was lovely meeting Rylie. I love dogs. I used to have them when I was little, years ago."

And Jeff Martin, who was visiting his wife Jean, said: "I think it's a good idea. My wife loves dogs. We've got one at home and she can't wait to come out and see her.

"As soon as she saw the dog, it lifted her. Any animal and she cheers up, particularly dogs as it reminds her of her father, who used to breed them."

# **Finance team strikes gold**

Our Finance Department has struck gold after being recognised for the quality training delivered to staff.

It has gained Trainee Development Gold Approval Status, which benefits employees studying to become chartered certified accountants through the awarding body, the Association of Chartered Certified Accountants.

It also means that graduates studying to become chartered certified accountants can join the health board and complete their training without filling in a plethora of paperwork to evidence their work experience.

Swansea Bay is the only health board in Wales to have gold status. It has now been granted an approved employer logo to recognise the training and support available is of an excellent standard.

Stuart Davies, Swansea Bay's Principal Finance Manager, said: "This is great news for the health board, the Finance Department and everyone who is studying within the team.

"Gaining trainee development gold approval status is a form of quality assurance. We are there to ensure everyone studying has the right skills, ethics and competencies to drive the department and health board forward.

"With these competencies in place, it will enable us to work towards the level of excellence that we desire." Stuart added: "Being granted an approved employer logo is also important as it makes us a more attractive employer to prospective employees who are thinking about developing their financial career as they know we offer a quality experience that ensures the level of training and support is of an excellent standard."



confirmed. melanoma.



### Funding award will speed up cancer diagnoses

People with head and neck lumps that could signify cancer will be spared weeks of avoidable waiting and worrying before getting a diagnosis.

Some patients require a form of biopsy known as an ultrasound-guided fine needle aspiration (FNA).

This uses ultrasound pictures to guide a needle to take a small sample to be analysed by a cytologist, who evaluates cell samples and can accurately detect cancer versus benign conditions.

Sometimes, though, the sample is not adequate for the cytologist to make an assessment. So the patient has to be brought back for the biopsy to be done again.

All this adds to the time taken before a diagnosis can be

Ultrasound-guided FNAs are currently carried out at the Rapid Diagnosis Centre, or RDC, at Neath Port Talbot Hospital as well as Morriston and Singleton hospitals.

Now a new pathway is being trialled at the RDC which will allow the first sample to be checked immediately, before the patient goes home.

It's known as Rapid On-Site Evaluation (ROSE), and means that if another biopsy is necessary, it can be done in the same appointment

The trial has been made possible after consultant head and neck radiologist Dr Shaheena Sadiq was awarded funding by Wales-based not for profit organisation Moondance Cancer Initiative.

Head and neck lumps can signify various neck cancers, as well cancers from other areas such as breast. lung and

Dr Sadig said: "For some of these lumps, ultrasoundguided FNA is more suitable. It takes a few cells rather



Head and neck lump team: Dr Shaheena Sadig, fourth left with colleagues (I-r): health care support worker Julie Williams, ra ical nurse specialist Susan Black ola Ardey-Jones and cli

than a larger core of tissue and we send that sample to the cytology lab.

"However, we do not know if the sample is adequate for the cytologist to view and give a diagnosis.

"Ten days, two weeks later, we might find out the sample is inadequate, so we have to get the patient back for the same procedure. And we might have to go through it again after that, or change the type of biopsy.

"We can lose a month, sometimes six weeks before we get a diagnosis."

An audit by Dr Sadiq showed that, in 2019, adequate samples were taken around 70 per cent of the time. However, this meant almost a third of patients had to be recalled and faced a delay in diagnosis.

Moondance Cancer Initiative has now awarded Dr Sadig around £20,000 to introduce ROSE at the Neath Port Talbot RDC.

It will pay for a new microscope, the chemical stains used in the tests, and for a biomedical scientist to attend the RDC clinics.

"We can send the slides to another room with the new microscope within the radiology department while the patient is still here," said Dr Sadig.

"They will then give us the all-clear to send the patient home or get them back in the room and repeat the procedure if necessary.

"Patients will benefit because it removes the anxiety of having to come back

"We can also get the diagnosis time down to around two weeks.

"We save the clerical time that goes into organising the patient to re-attend.

"It also frees the appointment slot we would have used to repeat the procedure, for another potential cancer patient."

#### **Stub it out for good with Help Me Quit**

If your New Year's resolution to stop smoking has already gone up in flames, it's not too late to try again.

The Help Me Quit service offers 12 weeks of free behavioural and emotional support through individual or group meetings.

Patients can access weekly sessions, over the phone or face-to-face, to discuss why they smoke, behavioural changes and stresses.

They are also provided with 12 weeks' worth of stop smoking medication, such as nicotine patches, to help lessen withdrawal symptoms.

Susan O'Rourke service development manager for smoking

cessation, said: "Patients can go to their GP surgery or a community-based setting for our sessions.

"As well as the support offered during the weekly sessions, we do lifestyle chats as well to talk about what's happening in their lives and especially their worries and concerns behind why they're smoking.

"Giving up smoking benefits other chronic conditions so it can help to ease the burden on ED admissions and GP appointments."

The HMQ integrated team is also based in secondary care, and supports staff and patients across the Swansea Bay area

All GP practices across Swansea Bay can refer patients who want to get help to quit smoking.



From L-R: Smoking cessation practitioner (SCP) Linda David, engagement facilitator Anne Miles, Help Me Ouit service manager Susan O'Rourke, SCP Sian Roberts, litator Lillian Davies and SCP Nia Evans.



Continued from front page

The blood test is being developed by a Swansea University spin-out company called CanSense, which Professor Harris co-founded.

Swansea Bay will be the first health board in Wales to use the test, with the Moondance funding allowing it to screen 200 patients who have waited the longest for follow-up colonoscopies.

Professor Harris (above) said the invitation-only blood tests were expected to be offered between the summer and December this year.

"This provides a real opportunity to give those patients feedback, that if the blood test is low risk, then it's highly likely they haven't got anything worrying and it's safe to wait their turn on the waiting list," he said.

"But equally, those patients with a positive blood test could have their appointment brought forward and sped up to find disease that can then be treated early."

## **Focus on quality**

# **Falls prevention – it's everyone's business**

Eleri D'Arcy, Swansea Bay's lead for falls prevention. explains the impact a fall can have particularly on older people and how you can help reduce falls



The risk of falls is ever present but at this time of year, with colder weather, the risks can increase further.

The impact of a fall for all of us varies greatly, but it can be especially devastating to older people.

Over 300,000 older people are predicted to fall in their own homes, across Wales this year. It's thought that at least 8,000 of these falls will result in a serious injury, resulting in a significant and lasting impact on the individual's ability to function on a day to day basis. Many of these people will require additional support to return to their previous level of independence, and some may never recover.

Very sadly, approximately 750 older people will die as a direct result of a fall this year.

Falling whilst in hospital can have an even bigger impact, with outcomes less favourable, as often the length of time spent in hospital increases.

Almost all older people who fall, whether they sustain an injury or not, will report a loss of confidence. This loss of confidence, if not addressed, can lead to withdrawal from society and activity and can guickly negatively impact on physical and mental health.

The economic pressure falls puts on services is also huge. It's estimated falls alone cost the NHS £2.3 billion pounds each and every year and contribute greatly to the pressures on the Welsh Ambulance Service, our emergency departments, hospital wards and community services.

However, there are many ways we can reduce the risk of falling. Educating ourselves and sharing this knowledge widely can make a real difference. We need to become comfortable in talking about falls.

Our primary roles vary greatly but if we all accept and embrace that falls prevention is a shared responsibility, together we can make a huge difference.

There are three questions which when asked in a relaxed. conversational style can help to win trust and begin to tease out concerns or issues.

"Have you fallen in the last 12 months?"

"Do you know why or where you fell?"

"Do you want to do anything about preventing any further falls?"

If everyone had this conversation with at least one individual, we could start to see substantial and widespread change. Let's all ensure that each and every contact we have makes an impact and serves to prevent further falls.

Falls Prevention Brief Intervention training is available on ESR. We also have many quality improvement projects throughout the health board – if you are interested in getting involved or would like to know more please email Eleri.darcy@wales.nhs.uk

#### The sepsis screening tool is changing – look out for updates

Sepsis remains the number one preventable cause of death in hospitals, estimated to be responsible for the deaths of approximately **1850\*** people in Wales each year. It is defined as a "life-threatening organ dysfunction caused by a dysregulated host response to infection".

Swansea Bay UHB has a long history of sepsis improvement work and was an early adopter of sepsis screening tools. Although over the past three years, like the rest of the UK, this work has slowed, we hope to start the ball rolling again in 2023. We are launching a new sepsis screening form, supported with teaching which highlights the importance of early identification and timely treatment of sepsis. This comes after a change in sepsis guidance from the Academy of Medical Royal Colleges (AoMRC). The guidance recognises that a focus on treating all sepsis



previous guidance, meant that some patients were receiving antibiotics inappropriately. It also meant that clinicians sometimes did not have time to consider the bigger picture and prioritise end of life care, where appropriate. The new AoMRC guidance has

patients within an hour, as per

divided patients who may have sepsis into two streams: those with a NEWS Cymru of  $\geq 6$  who will continue to receive the Sepsis 6 within an hour, and those with a NEWS Cymru of 3-5 who need investigations and then re-reviewed within 3 hrs.

As the patients we care for present with increasingly complex medical conditions, tools like NEWS Cymru and the sepsis screening can help support patient assessment.

They do not replace clinical judgment but they can aid decision making when working in busy and pressured environments.

In Wales, the recognition of deterioration is standardised with the introduction of the National Early Warning Score (NEWS Cymru). NEWS of  $\geq$ 3 together with the presence of or suspicion of a new infection should prompt the use of a sepsis screening tool which is available in all clinical areas as a book. Once the form is complete, the top copy should be filed in the current notes and the carbon copy allows auditing which inform improvement and provide data so your area knows how it is doing.

We will be launching the new sepsis screening form in February 2023. Look out for training session dates and videos via TEAMS. Any queries please get in touch lisa.fabb2@wales.nhs.uk and rangaswamy.mothukuri@wales.nhs.uk



#### **Emergency Department notches up triple award success**

**Morriston Hospital's Emergency Department** has won an award for helping train the next generation of nurses working on the front line.

Swansea Bay, in partnership with Swansea University, holds the Practice Supervisor, Practice Assessor and Team awards on an annual basis. The awards are in recognition of the contribution that colleagues in practice provide student nurses and student midwives to ensure that they develop and learn their clinical skills.

The department as a whole won the Exceptionally Innovative Learning Environment award, with its Children's Emergency

Unit (CEU) picking up the Practice Education Facilitator award. In further good news, senior nurse Nicola Dunn won the Practice Assessor of the Year - Child Branch award.

Sue Jones, Lead Practice Education Facilitator in the health board's Practice Education Facilitator team (PEF), said: "The awards are important and recognise the complexities that some practice supervisors, practice assessors and teams are faced with when supporting student nurses.

"They also celebrate the achievements of those who help train the next generation.

"ED colleagues ensure that they nurture the student nurses, engage with them and develop their knowledge and skills."



The ED's triple triumph is a first in the seven years that the awards have been held.

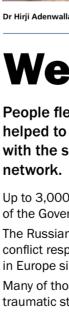
Sue added: "They are the first department ever to win three awards in one hit. They were absolutely delighted. Every department within the health board is busy, but ED is unbelievably so.

"They've got it right. They have the individuals who as a team recognise the importance of safeguarding the nursing profession and who can offer the right support for students who may require reasonable adjustments to ensure a successful placement."

Ryan Lane, a charge nurse in ED, said: "The department has worked exceptionally hard over the past two years under unprecedented pressures but has still ensured that they have kept the student nurses' learning requirements at the forefront of everything we do.

"We have a very close relationship with Swansea University and PEF at Morriston Hospital. We are all delighted within the department to have won these awards, all of our hard work has really paid off."

One nomination read: "The education team has set up a unique learning environment within an extremely busy department. As a student I have had amazing opportunities to learn and grow, develop confidence and reach my goals."



### Caring

# **Thousands raised for children's** hospital in memory of doctor's dad

A family connection inspired a Swansea Bay team to raise thousands of pounds for a children's centre in India.

The Charles Pinto Centre in Thrissur in the southern state of Kerala, treats children with craniofacial birth defects. It was founded in 1990 by Dr Hirji Adenwalla - whose son Dr Firdaus Adenwalla is consultant physician with the Neath Port Talbot Acute Clinical Team (ACT).

During his career of around 60 years, Dr Hirji Adenwalla performed more than 21,000 cleft lip and palate repair surgeries, right up until the age of 88.

He was still operating until six months before he passed away in 2020.

That was when the ACT team, which provides urgent nursing and medical care in the community, became inspired to fundraise in his memory.

"In 1958, my father and mother set up home in the grounds of a small 20-bedded mission hospital in south India, the Jubilee Mission Hospital," said son Firdaus.





Members of SBUHB staff on the sponsored walk

"My dad wanted to provide good and safe healthcare for those who could least afford it.

"His passion was always treating facial birth defects in children, with cleft lip and palate being the most common.

"As the hospital grew and developed and gained other specialists, he focused more on congenital facial deformities and founded a multidisciplinary unit, the Charles Pinto Centre for congenital craniofacial defects. "He was very passionate and dedicated to his work and had an extremely busy work schedule but still found time for his family."

The ACT team decided they wanted to donate money to the centre in memory of Dr Adenwalla.

Staff from the ACT and Afan Nedd Day Unit, along with family and friends, took on a sponsored walk.

They also hosted a cake sale and a curry night at an Indian restaurant, which featured raffles and an auction.

Sarah Kelly, a nurse practitioner within the team, said: "Everyone came together as a team and it was a good morale boost for us as well. It was a wonderful thing to do.

"We originally had £1,000 as our goal but we ended up raising £5,333 for the centre in Dr Hirji Adenwalla's name."

### Welcome in the hillsides for Ukrainian refugees

People fleeing war-torn Ukraine are being helped to come to terms with their trauma with the support of Swansea Bay's psychology

Up to 3,000 people are finding sanctuary in Wales as part of the Government's Homes for Ukraine scheme.

The Russian invasion has seen thousands killed in a conflict responsible for the largest displacement of people in Europe since World War Two.

Many of those arriving here have been affected by traumatic stress, leading to a recognition of the need for mental health support

Last June, the Welcome Centre for Ukrainians opened in the Swansea Bay area. It is staffed by local authority employees, led by deputy Ukraine team manager Christy Buckley. It helps refugees with welfare issues such as accommodation, healthcare and employment.

Swansea Bay's Deputy Medical Director Anjula Mehta said: "The health board ensures an initial health assessment for people arriving from Ukraine at the Welcome Centre.

"The initial screening is an opportunity to identify health issues, including mental health issues, as well as an opportunity to promote well-being. With the support of the health board leads this was implemented within two months of opening.

"Regular GP surgery-based sessions for the Welcome Centre resulted in people becoming registered with local GPs in the community and connecting the arrivals with routine and specialist care."

Swansea Bay's psychology team became active at the Welcome Centre in August 2022. During the first two months, interventions were required for 20 arrivals, arguably preventing and reducing pressure on mainstream mental health services.

Dr Nistor Becia (pictured), senior psychologist with Swansea Bay said:

"We have a capacity for 120 people here, but there are many more people who have fled Ukraine in the Swansea Bay area, some staying in hotels.

"The idea is that with our support we can prevent referral to mainstream services, and prevent those services being overwhelmed. Only a very few very severe cases have had to be referred as a result."

The centre's work is also supported by Traumatic Stress Wales (TSW) an NHS-hosted cross-sector initiative looking to improve the health and well-being of people such as refugees, asylum seekers and migrants affected by traumatic events.

In a review of the centre, which highlighted its work as a model of best practice, it concluded: "It is essential to reflect on the migrant journey and that children and have

been successfully settled in schools, but not without a considerable amount of effort made by the staff from the Welcome Centre

"Without a well-organised and efficient system in place, such as the example of the Welcome Centre, the story could be a much more tragic one, not just for the Ukrainian refugees but also for everyone else in the area supporting a group of people who have been exposed to extremely traumatic events.



Dr Nistor Becia

## **Changing for the Future**

# India recruitment trip attracts 100 nurses

Over 100 new arrivals will boost the number of nurses in Morriston Hospital thanks to the health board's first recruitment event in India.

A trip to Kochi has led to the employment of 107 nurses, some with 15 years' experience, to help fill the void of Band 5 nurses within Swansea Bay.

The new recruits are a mixture of medical, surgical and theatre nurses, and they will arrive in Swansea in February. Following compliance checks and obtaining a visa, nurses will face a four-week OSCE (Objective Structured Clinical Examination) training programme in the health board's Nurse Education Training Suite, based in Baglan HQ before sitting an exam to attain their Nursing and Midwifery Council (NMC) registration.

Following that, they will start their new roles in April. Head of Nursing Education and Recruitment, Lynne Jones, led the health board's visit, accompanied by Miranda Williams from the health board's Nurse Education department; renal matron Lisa Morris; Rhiannon Jones, Deputy Head of Nursing for T&O and Spinal Surgery, and theatre matron Stewart Dow.

Between them, they interviewed 119 nurses over the course of four days.

"We went to India to recruit medical, surgical and theatre nurses. This is where we have the most Band 5 vacancies," said Lynne.

"As part of the overseas nursing recruitment campaign, we decided to hold a face-to-face event which is something we were unable to do during the height of the pandemic.



A selection of the latest recruits to SBUHB's nursing workforce and health board representatives following the successful event in India.

# New operating theatres going up fast at Neath Port Talbot

They only arrived on-site towards the end of last year but Neath Port Talbot Hospital's new operating theatres are quickly taking shape.

The £6.1 million block is going up alongside the Minor Injury Unit and is a key part of our Changing for the Future transformation programme.

Neath Port Talbot is to become a Centre of Excellence for orthopaedic surgery, as well as spinal surgery and urology, allowing us to make rapid inroads into waiting lists.

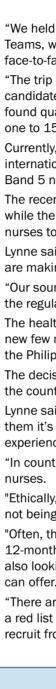
Work on the three new modular theatres will continue into the spring, ahead of them being ready to use from June. A major staff recruitment campaign has been under way since last year, following several months of workforce planning.

When the theatres are open they will initially offer the same case mix as now, but for more patients – eventually increasing to 150 a week.



The new theatres being delivered to Neath Port Talbot Hospital in early December









The new th

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"We held a lot of our interviews during the pandemic over Teams, which was successful, but there is nothing like face-to-face interviews.

"The trip allowed us to find out a bit more about the candidates and have a more personal insight, and we found quality candidates with a range of experience from one to 15 years' experience."

Currently, the health board is employing approximately 32 international nurses every five weeks to help fill the void of Band 5 nurses.

The recent trip to India has helped bolster its numbers, while the health board continues to welcome more student nurses to help raise staffing levels.

Lynne said: "The gap of Band 5 nurses is closing, so we are making progress. It's an issue being felt around the UK.

"Our sources of Band 5 nurses are our student nurses and the regular recruitment of overseas nurses."

The health board will consider a return visit to India in the new few months, having held similar recruitment events in the Philippines in recent years.

The decision to recruit specifically from India was based on the country's high number of quality nurses.

Lynne said: "We need overseas nurses here, while for them it's an opportunity to develop their skills further and experience a different lifestyle.

"In countries such as India there are a surplus of trained nurses.

"Ethically, we can recruit from these countries as they are not being left short of quality nurses.

"Often, the nurses we interview have only been given 12-month contracts in their home countries, so they are also looking at more long-term commitments, which we can offer.

"There are countries which we would regard as being on a red list and are short in terms of nurses, so we don't recruit from there."





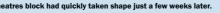
The current cohort of overseas nurses are undergoing their training in the health board's temporary training space while the new Nurse Education Training Suite is being redeveloped













## **Working together**

# **Excellent care through engagement**

We want to deliver first class care that is not just as good as everyone wants but better than anyone might be expecting.

But we cannot do it alone. Working in partnership with our patients, their carers and families, our staff and our population is critical if we are to be a quality focused, patient centred, staff driven organisation.

Our new five-year Quality Strategy sets out a clear commitment to deliver excellent high-quality care that exceeds patient and carer expectations.

To achieve this, we need to know what they, and the wider population, think of our services and how they could be improved. This is where the health board's Engagement team comes in

It's a small team – Nic O'Sullivan, Catrin Evans and BAME outreach workers Shadan Roghani and Hannah Sabatia - led by Assistant Director of Insight, Engagement and Fundraising, Jo Abbott-Davies, supported by departmental PA/project officer Emma Morris.

They ensure we work with patients, carers and the public, to listen to people, understand their views and make sure these are considered when we change and develop our services.

This is a real team effort, with our BAME outreach team, lots of clinical staff, the Patient Experience team, Corporate Nursing, Communications and volunteers helping us achieve as much as we do.





Pictured I-r: Catrin Evans, engagement manager; Jo Abbott-Davies, Assistant Director of Insight, Engagement and Fundraising; Emma Morris, departmental PA/project officer; and Nic O'Sullivan, head of engager

It's also a real team effort with external organisations and groups. We work closely with the voluntary sector, local authorities, community groups and Swansea Bay Community Health Council (CHC - the patients' watchdog).

Engaging appropriately means providing people with information they can understand and easy ways for them to let us know what they think.

We might pop into existing groups, from mother and baby groups to older people's fitness classes, or chat to people in shopping centres or supermarkets.

We attend more formal meetings of groups interested in specific issues – such as older people, LGBTQ+, disability access. These may be run by the health board or other organisations.

It is important for seldom-heard groups to have the opportunity to share their experiences and be supported in a safe space, which is why we visit them where they are most comfortable

An example of this in action is the Chai and Chat sessions Hannah and Shadan set up (with former colleague Shaz Abedean) and run in Swansea and Neath Port Talbot (see photo left).

Sometimes we seek views from people across the whole of Swansea Bay, other times around a specific GP practice population. Or anything in between.

We have a legal requirement to work with the CHC to publicly engage on substantial service change.

Recently we led engagements on Changing for the Future, older people's mental health services and hydrotherapy services. We heard the ideas and concerns of our patients and their families, which we took on board in agreeing and implementing changes.

The CHC makes sure we take account of all these views and how we address any difficulties or challenges identified by patients before deciding whether or not to support our proposals

Basically, the Engagement team will do whatever is needed to hear patients' voices and ensure these are acted on.

We are working on expanding our reach and efforts so we can improve how we hear patients' voices, and how we can work with them to co-produce change.

If you'd like to get involved, have suggestions about how we could improve our work or want to know more please contact SBU.engagement@wales.nhs.uk

#### Staff and patient collaboration is the key to life-saving research

Ahead of International Women's Day on 8th March, we spotlight Morriston Hospital's Ceri Battle. She has become Honorary Professor in Trauma and **Emergency Care with Swansea University's Faculty of** Medicine, Health and Life Science – the first woman in Wales and only the UK's fourth to achieve this.

**Professor Battle is heavily involved in research. Here** she offers a personal view on the value of research and pays tribute to everyone who makes it possible.

Part of my role as a clinical academic physiotherapist on the Ed Major Critical Care Unit in Morriston is to recruit patients to research studies.

It is well known that hospitals participating in these studies have better patient outcomes.

I've been doing my role for over 15 years. At times it has been a fairly thankless task. Quite often, neither staff or patients saw the value of research. It was often perceived as something forced upon them as an unnecessary extra.

I can't say I always disagreed. I am a physiotherapist first and foremost. I understand clinical pressures and trying to run a service.

In 2019, I completed a Wales-wide survey study, asking critical care nurses and allied health professionals what they thought about the value of research.



The results were not particularly positive and a lot of the perceived barriers related to a lack of time given by managers to get involved.

So when the pandemic hit, I thought it would just get even worse. How would staff, already under immeasurable pressure in their clinical work, want to get involved with research?

Why would patients at their most vulnerable, frightened and at times, knowing they were potentially facing imminent death, want to get involved with a research study?

I had to drop all my own research work, re-join my ITU physio team and work clinically full-time, while still fitting in the new 'urgent public health research trials' which we were told had to be carried out. The research was our only way out of the pandemic. Which I couldn't argue with.

The Research and Development team worked long hours setting up these studies at extremely short notice. Just to add - I wasn't alone in running these studies. There

was a small group of us from a number of professions. And there were the Research Delivery Team nurses. They rolled up their sleeves, donned their PPE and stood side by side with us in the clinical area, making sure the research could be delivered. Nursing staff at the patients' bedside, physically and mentally exhausted from hours in PPE, simply looked at us and said "what do you need?".

Then there were the patients and their families. Never in all my years working as a researcher, did I hear patient after patient, or their next of kin, unflinchingly saying "yes, of course, sign me up".

I don't know if the media's positive portrayal of research, and how badly we all needed it to work, influenced patients to consent to participate. And not just for one study. Some patients signed up for all the studies.

Nearly three years later, we all now realise, with no uncertainty, that research really was our way out of the pandemic.

My only hope is that this positive attitude to research isn't lost. We have so many more research studies for other conditions and diseases that are just as important as COVID-19.

I really hope we keep up one of the most positive things that came out of the pandemic.

### **Making a difference**

patients.

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## Home service success for respiratory team

A Swansea Bay respiratory team has taken on board the old adage that 'out of adversity comes opportunity' through continuing to treat patients at home rather than in hospital.

During the height of the pandemic, the team developed a 'Start and Support' initiative, which saw respiratory failure patients receive non-invasive ventilation at home - where previously they would have been admitted to a ward - thus lessening hospital pressures and reducing the risks to

Such was its effectiveness, the practice is now standard procedure, resulting in far fewer hospital admissions at a time when beds are at a premium.

The move earned the team the Always Improving Award in Swansea Bay's 2022 Living Our Values Awards.

Respiratory nurse specialist, Kirsty Eastwood, said: "We had to discover a different model of care for these patients. We devised an initiative where we were able to safely commence this therapy in the patient's home using a start and support model of care.

"There was no requirement to come to hospital as a day case and these patients could still receive this essential therapy in a time where things felt so uncertain for these group of vulnerable patients."

Members of the team carefully monitor the patients in their homes and provide ongoing support.

Kirsty said: "Moving forward it became clear that these patients needed intensive support, so part of this model included daily phone calls and home visits to carry out blood tests for oxygen and carbon dioxide levels from our respiratory technician and CNS team. This ensured that these individuals felt comfortable with their therapy and that the therapy was effective.

"This new model meant that patients were receiving a more intensive standard of care and support in a period



The respiratory team. Left to right: Michelle Davies (respiratory clinical nurse specialist), Kelly John and Claire Grey (respiratory technicians), Valentina Parisi (respiratory specialist nurse). Catherine Bellamy (admi

when they were extremely anxious due to the pandemic.

"They felt relieved that they did not need to enter the hospital during a pandemic and this has obviously lessened pressures on the organisation during a difficult time.'

Kirsty said that the patient's welfare was at the centre of the changes.

She said: "We identified that this area was in need of change. This new model enhances communication, emotional support, smooth access to care and empowerment for patients in their own environment."

Kelly John, a respiratory technician, said: "Our patients are extremely grateful when we go out to see them. Most of them are housebound and unwell and struggle to get out, so it makes a difference to their lives."

Alison Lewis, respiratory clinical lead, said: "I am extremely proud to work with a team that provides such a high standard of patient care despite facing many challenges currently

"They always make patients the priority and do everything possible to support them and help them improve their quality of life. They are innovative and always strive for excellence.



### How change-maker Amanda is inspiring future generations

A Swansea Bay manager has been declared inspirational for helping bring about positive change in Wales.

Amanda Davies has made it onto the Future Generations Changemaker 100 list in Wales.

Compiled by Future Generations Commissioner for Wales Sophie Howe, it highlights those who are helping to create change via the Well-being of Future Generations Act.

Amanda (pictured), Service Improvement Manager, developed the Bed Poverty Relief Scheme at Swansea Bay, a highly innovative initiative that has improved the lives of many.

It has supplied hundreds of emergency beds from the Covid pandemic to homes where people were experiencing bed poverty and also to nursing and residential homes throughout Wales.

Beds were also donated to a children's and cancer hospital plus refugee camps in Moldova for Ukrainian people fleeing the war.

Amanda also helped deliver the largest communitysupported agricultural farm on health board premises in the UK, at Morriston.

And she is working with colleagues to improve procurement practices in local NHS supply chains and oversees the

integration of art in clinical areas to improve patient wellbeing.

Amanda was one of only eight speakers asked to deliver a presentation during the unveiling of the list at the Wales Millennium Centre in Cardiff.

She said: "It's an honour to be recognised in this way alongside so many other inspirational people.

"It was a moment of great pride when the Commissioner's office asked that I speak at the event and share the work done on the beds."

She said that none of it would have been possible without the support of health board and Shared Services colleagues, Welsh Government, Swansea Council, Neath Port Talbot Council, the two councils for voluntary service, the Communication Workers Union, MS Jeremy Miles and his office, along with local removal company Britannia Robbins.

"It has been my absolute privilege and honour to have worked with such a great team," she added.

Swansea Bay CEO, Mark Hackett, said: "I would like to congratulate Amanda.

"She has been instrumental, along with her team, in delivering the initiative to reallocate surplus beds to those most in need at home and abroad – something which epitomises the values of our health board."

## **Patient care**

# Wales-first response team keeping vulnerable children out of hospital

A first-in-Wales rapid response team is helping to keep vulnerable children out of hospital when they develop potentially serious infections.

Instead, the team supports them to be looked after in their own home - and works with families, schools and carers to try and prevent them becoming unwell in the first place. Launched last year, the Paediatric Respiratory Physiotherapy Rapid Response Outreach Service is available to youngsters aged from two to 18 years with complex medical needs.

It's not uncommon for children to pick up seasonal viruses and chest infections during the winter months. But those with health conditions and disabilities can be at a higher risk



amantha Davies, Mari Powell and Briony Guerin at the awards ceremony in Cardiff.

Samantha Davies, who manages the paediatric physiotherapy service, said: "Due to protective measures imposed during the pandemic, children and young people were not exposed to the usual childhood viruses.

"Children with complex needs have altered muscle tone that limits their ability to cough effectively and reduces their lung function.

"When they get a chest infection, they end up with a thick mucus called sputum on their chests that they can't clear by themselves.

"This is where physiotherapists become involved. We use manual techniques such as chest physio and, potentially, suctioning into their lungs to get rid of it."

The service was introduced to try to manage how the surge in cases of chest infections could potentially impact young people with complex needs, who are at higher risk of contracting them.

"The first element of the service is preventative where we liaise with schools, parents and carers and teach them how to perform prophylactic chest physio," Mari, a physiotherapist on the team, said

"The second element is the rapid response where they can call us directly so we can do a telephone triage."

Taking sputum samples at the child's home means they could receive specific antibiotics targeting the infection rather than general antibiotics.

Samantha said: "Within 48 hours of the sample being taken results are available, allowing Mari and Briony to ring the GP or paediatrician to ask them to prescribe specific antibiotics."



Samantha Davies recently gave a presentation on the service at the Senedo

Team members have celebrated some success of their own after being highly commended in the New Ways of Working category at the recent Advancing Healthcare Awards Wales. Mari added: "We were extremely pleased to be highly

commended because the standard was amazing.

"It was great to get that recognition and raise the profile of our service.'

# Helping patients gain control of cellulitis

A specialist Swansea Bay team has pioneered an innovative approach to tackling a painful and potentially life-threatening skin condition.

Cellulitis is an acute skin infection that causes pain, poor quality of life and impaired activities of daily living, plus a life-threatening risk of sepsis if mismanaged.

A new digital CELLUPROM system has been developed to help plan care and support patients with the issues they find most challenging.

It is a system that has led to success at a national healthcare awards event.

CELLUPROM has been developed through the Cellulitis Improvement Programme, run by a team based in Cimla and the health board's designated clinical area in Swansea University's Singleton campus, and measures cellulitis specific patient related outcomes.

Patients complete a CELLUPROM after their very first contact in the programme and again when they are discharged, rating a number of categories about how cellulitis is affecting them.

When comparing results with specific cellulitis-related outcome measures, scores tend to reduce, meaning cellulitis is having less impact on their life. For example, patients report feeling less fearful of suffering another episode of cellulitis when they've left the programme.

Dr Melanie Thomas, clinical director of Lymphoedema Wales, along with Linda Jenkins, national cellulitis

improvement specialist physiotherapist, and a Swansea Bay team were behind the creation of CELLUPROM.

"Cellulitis is a horrible condition which makes people feel really unwell," said Dr Thomas. "On top of that, there is the fear of having another episode, so by managing the modifiable risk factors, it allows the person to take responsibility for their own health."

The programme also delivers better results for patients and helps ease some of the pressures on the NHS via their value-based health care.

Nearly 10,000 people from all over Wales have received a Reducing the Risk of Cellulitis leaflet and a clinical appointment invitation. To date, nearly half have opted in to receive an assessment.

Treatment including skincare, healthy eating, exercises, wound management and compression occurs virtually and face-to-face at mobile clinics and health centres. That enables care closer to home, which raises patient awareness in identifying, managing and reducing the risk of cellulitis.

As a result of their work, the programme was successful at the UK Advanced Healthcare Awards, winning the Welsh Government's award for value based care: making best use of resources to maximise outcomes.

The awards identify and share examples of good innovative practice throughout the UK. It also scooped the Scaling Up Innovation and Transformation accolade at the MediWales Innovation Awards 2022 in December.



National Cellulitis In vement Team Leads Linda Jenkins, Joanne Browr Graham-Woollard.

Dr Thomas added: "We are all absolutely delighted to win the awards for our new Cellulitis Improvement Programme. "The results highlight how beneficial providing the right information at the right time can be in preventative medicine."



The first Covid lockdown forced a rethink in how simple fractures that did not require surgery were managed. Clinicians at Morriston agreed the best approach would be for patients to self-manage at home, with instructions on how to remove the plaster cast and what physiotherapy exercises they should do.

approach





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# New approach to treating wrist fractures breaks with tradition

A specialist team at Morriston Hospital has made a clean break with tradition when it comes to treating fractured wrists.

It proved so successful it has become the standard

A minimally displaced distal radius (wrist) fracture is where the bone cracks part or all the way through but maintains its proper alignment. This is opposed to a displaced fracture, where the bone snaps in two or more pieces and the ends do not line up

Treatment for minimally displaced fractures usually involves a plaster cast, worn for four to six weeks before being removed. But restrictions imposed during Covid forced a rethink.



Eira Griffiths, pictured with son Hugh Deeley, has experienced the new approach

Consultant orthopaedic surgeon Andrew Bebbington explained: "People were still getting some injuries and we had to decide how they could be treated.

"Displaced fractures need to be brought back for surgery or manipulation.

"But there are patients who only need a plaster cast for five weeks

"Usually we would see them in the fracture clinic a few days later, then again in five weeks when they had the plaster removed."

Instead, patients were advised they did not need to be seen in the clinic and could remove the plaster after five weeks. That saved two appointments.

Around a year later, said Mr Bebbington, these patients were followed up to see how they were doing.

He added: "There were so few problems we thought we could roll it out as a way of going forward."

Satisfaction levels were found to be high, though a small number had issues with the instructions they had been given.

Consultant physiotherapist Anne-Marie Hutchison said: "We took that on board. We improved the information booklet and have made a video.

"This features Mr Bebbington explaining it is a stable, simple fracture which does not require them to come back to hospital, but can be safely managed at home. They do not need another X-ray or a splint."

The video also features Dr Hutchison demonstrating exercises patients should carry out while they are in the cast and after it has been removed

Eira Griffiths, 87, fractured her wrist in a fall outside her Gorsenion home just before the start of the pandemic in 2020

Eira, who has since made a full recovery, spent six weeks in a cast before it was removed at home by her son, Hugh Deeley. He said: "I was a first aider in the mines so it wasn't a problem for me.

"It might not be suitable for everyone so as long as there is provision for them, I think it's great. There are some massive benefits. Anything that helps keep people out of hospital is really positive.'

In fact, all patients have the option of contacting the fracture clinic to arrange a follow-up appointment with a doctor or physiotherapist if they have any issues.

Some do, as the new approach does not suit everyone. But the study confirmed that most do not need any follow-up support.

The Morriston team has since published its findings into this self-care approach in a specialist clinical journal, Bone and Joint Open.

#### Brushing up on oral hygiene with denture campaign

A denture campaign is helping patients and staff brush up on oral hygiene skills to prevent prolonged stays in hospital and reduce the risk of life-threatening complications.

Failing to maintain a healthy mouth can result in a number of wide-ranging problems, varying from very minor discomfort to even putting life at risk.

At its worst, poor oral hygiene can lead to respiratory infections, chest infections, aspiration pneumonia or even bacterial endocarditis.

An educational programme is getting to the root of the problem by spreading the word about good oral hygiene to both patients and staff.

The Denture Daisy was developed by Sarah Francis, who works in Morriston Hospital's Head and Neck Department.

Its focus was initially around denture awareness for colleagues, but has since led to further training for staff as well as promoting oral hygiene to patients.

Sarah's efforts led to a nomination for the health board's Living Our Values Awards 2022, while she received an Executive Director of Nursing award certificate of excellence for her work.

Sarah, a dental nurse for 33 years, said: "I came up with the Denture Daisy during the first outbreak of Covid when

dental nurses were asked to work on the wards to help out. When we asked patients if they wanted us to clean their teeth, they would often say they didn't have anything with them, or they didn't do it because their gums would bleed, and they'd be scared by that.

"We'd reassure them that by cleaning their teeth and gums regularly then that would stop their gums bleeding and they'd be a lot healthier for it.

"There were occasions when patients' dentures were not cleaned daily and denture pots were not always provided as staff were unaware some patients had dentures, so we needed a way of correcting that."

Sarah then planted the seed of the Denture Daisy, which began as a symbol placed on a patient's bed to inform staff that they wear dentures.

Working alongside Belinda Walters and Sian Morgan from the Medical Illustrations team, Sarah designed posters to highlight where dentures get lost - under bed sheets, wrapped in tissues and on meal trays.

As well as improving patient care, the scheme also saves money, as the cost of replacing lost dentures can range between £280-£2.500.

It is the value in health benefits, however, which top the priority list. Sarah added: "If a patient's mouth is not clean it could lead to respiratory infections, chest infections



Sarah Francis developed the Denture Daisy to highlight the importance of oral hygiend

or aspiration pneumonia, which is caused by breathing in vomit, a foreign object such as a peanut or a harmful substance, such as smoke or a chemical. All of these can add to a patient's length of time in hospital.

"Bleeding gums can lead to bacteria entering the blood stream through the veins in a patient's neck and attack heart muscles which can lead to bacterial endocarditis a potentially life-threatening condition."

#### 12 What's on

**Dates for** your diary

February 20 - March 6 **Dementia Care training: Skilled Cohort 17** 

February 20 **Supporting Employees with Menopause - for Managers** 

February 21 SBU Safeguarding -**MCA - Essentials of Mental Capacity Assessments** Training

February 21 & 23 **Patient Experience Risk** and Legal Services: **Datix drop-in session** 

February 22 **SBU Intranet - Critical** care outreach team drop-in teaching

February 22 **SBUHB Libraries** monthly book club.

February 23 SBU Safeguarding -Safeguarding people Level 3 (F2F only)

February 25 / 26 **SBU Safeguarding: Ask** and Act drop-in sessions

February 27 Q&A: SBU and the Welsh Language

February 28 **SBU Occupational** Health and Wellbeing -**Training for Managers** 

MAR FEB

March 3 **Newborn baby life** support course

March 7 **SBU Safeguarding – MCA** Level 3 training

**SBU Occupational Health** - Menopause Café (NPT Hospital) **Patient Experience Risk** and Legal Services – Risk

management Level 2 training March 10 SBU Safeguarding -**Safeguarding people** Level 3 (F2F only)

March 13 **SBU Safeguarding: Ask and Act Group 3 training** 

**SBU Occupational Health:** Time to change Wales -**Challenging Mental Health** stigma

March 14 **SBU Safeguarding: DoLS Level 2 training** 

March 16 **Patient Experience Risk and Legal Services: Civica training** 

March 20 - 31 **SBU Dementia Care** training: Skilled Cohort 19

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

#### **Update on Our Big Conversation**

Following the fantastic response we had to phase 1 of Our Big Conversation, we are now into the next phase of the engagement programme.

As a reminder, Our Big Conversation aims to support



the empowerment of our workforce, help create a culture of quality improvement and enable local decision making, delivered by those directly providing care and services across the health board.

During November and December 2022, a fantastic total of 984 of our valued staff, student and volunteers took part and shared their views and ideas, through our pulse survey, e-mails, face to face and virtual focus groups as well as open walk-in galleries.

As a result, we have had a significant 96 pages of valuable data and a word count of more than 40,000 to read through, analyse and report on.

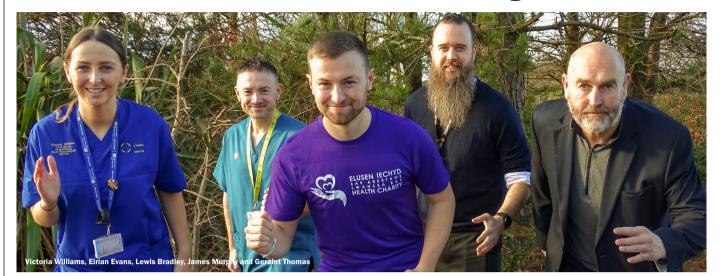
We then launched phase 2 of Our Big Conversation to run during January and February 2023. It aims to:

- feed back what you told us and what we have heard from across the organisation
- share a proposed vision for the organisation

· engage on how we take this vision forward together As with phase 1 of the programme, we will be providing the opportunity for all staff, students and volunteers to get involved through virtual, face to face and digital means. Please see the staff intranet for further updates.

#### **Charity and events**

## Swansea Bay staff on the run in the name of charity



A team of health board staff hopes to lead by example in this year's Swansea Bay Half Marathon - in the fundraising stakes.

Ten staff members, from across our sites and services, have signed up for the 13.1 mile run with the promise of raising as much money for Swansea Bay Health Charity as possible. The team will be recognisable through each wearing the charity's distinctive purple T-shirts.

The health board's official charity, which uses donations from patients, families, staff and communities to provide above and beyond what the NHS can provide, has registered the runners in the event in return for them promising to fundraise for the cause.

Although Eirian Evans, a nurse practitioner in Neath Port Talbot Hospital, is a seasoned triathlete he has had to overcome long Covid before being able to train again. The 43-year-old said: "I couldn't run after an ice cream van at the time, but I've been back training since April last year and train six times a week - swimming, cycling and running. "Hopefully I can go under two hours and raise lots of money for a good cause."

James Murphy, a member of the health board's Health Care Systems Engineering team, is looking at using the challenge as motivation to keep fit. He said: "It's more of a motivational tool for me - to get me up and going. I'm reasonably self-motivated but I'm even more so when I have something to aim for and a race in mind."

When it comes to setting a time the 40-year-old is determined to beat his last effort.

He said: "I enjoyed doing a half marathon a few years back but had a time in mind which I didn't guite get. I'm determined to get it this year - under two hours - I was just over by two minutes."

Victoria Williams, a trauma orthopaedic nurse practitioner, is still relatively new to running but has already beaten the two-hour barrier for the distance.

The 31-year-old said: "I started running just before lockdown, entering my first half marathon in 2019.

"I'd like to raise money for our MSK department, continuing on from our efforts made during International Nurses Day last year.

"My personal best is one hour 57 minutes so I would like to get around one hour 55... challenge set!"

Lewis Bradley, the charity's fundraising support manager, said: "We wanted to give the staff an opportunity to challenge themselves and to focus on their well-being during a time of rising costs and uncertainty."

#### **Putting the focus on LGBT+ History Month**

February is LGBT+ History Month, and this year's theme is "#BehindtheLens", which celebrates LGBT+ peoples' contribution to cinema and film from behind the lens.

This includes directors, cinematographers, screen writers, producers, animators, costume designers and beyond. Around the world, organisations, schools and individuals will be hosting events and sessions for the month-long observance of lesbian, gay, bisexual and transgender history, and the history of the gay rights and related civil rights movements.

Swansea Bay University Health Board is proud to host the CALON network for LGBT+ staff members and allies.



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: www.swanseabayhealthcharity.wales

Robert Workman, CALON representative, said: "LGBT+ History Month is an integral and important part of the LGBT+ calendar that claims the past, celebrates the present and creates a space for the future.

"Within Swansea Bay UHB, the CALON staff network looks to create, develop and contribute to the inclusive culture within our health board."

As part of this year's LGBT+ History Month, CALON attended a special film in event in Swansea's Taliesin Theatre.

If you would like to hear more about future events or to join the CALON network, please email: Calon.LGBTStaffNetwork@wales.nhs.uk We are also on Twitter: @SBNHSLGBT



Staff newspaper of Swansea Bay University Health Board



the SBUHB Intranet.