



Issue 1 Summer 2013

A warm welcome to the first edition of Lymphoedema Wales, your National Lymphoedema Newsletter!

Included are stories, news and reports of service developments from each of the Lymphoedema Services across Wales. This will give you an idea of the wonderful work that is taking place near to you. Telephone numbers for all the services can be found at the back of the newsletter. If you have any queries please make contact with your local lymphoedema service.

Thank you to all the lymphoedema staff for submitting to this first Newsletter. We hope you enjoy the write ups and share the work that is being achieved.

With kind regards, Cheryl and Karen

### **Foreword**

Lymphoedema services in Wales have dramatically changed over the last few years and this is due to the hard work of key individuals, most especially Eilish Lund, who has now retired blissfully in France knowing that she has laid the foundation for patients to access lymphoedema services throughout Wales.

We have been fortunate with support from Welsh Government and the Programme Management Unit in taking lymphoedema into a strategic direction.

I am delighted with this the first newsletter -Lymphoedema Wales - which showcases what we have achieved in such a short space of time. Congratulations and well done to all those involved, but remember, this is just the beginning!

Kind regards,

Melanie Thomas MBE
National Clinical Lead Lymphoedema
Welsh Government

## All Wales Lymphoedema Network Group

The All Wales Lymphoedema Network Group was set up in 2011 following the £1 million investiture into implementing the Welsh Government Lymphoedema Strategy (2009). This Group is a led by Fiona Jenkins (Executive Director of Therapies and Health Sciences, Cardiff and Vale UHB), Chief Executive of Lymphoedema Services on behalf of the NHS Chief Executives; Melanie Thomas, National Lymphoedema Clinical Lead who is directing the implementation of the Strategy, Jane Fitzpatrick, Programme Director, Programme Management Unit / Strategic Programmes, and Claire Thomas, Programme Manager, Strategic Programmes and Health Board Network Leads.

The All Wales Lymphoedema Network Group has been established to maintain a strategic oversight of the Strategy for Lymphoedema in Wales "Designed for Lymphoedema" and will:

 Oversee the planning of services for NHS Wales, ensuring the recommendations in the Strategy are implemented locally; 

- Oversee clinical education and training requirements for the network area;
- Advise on how Health Boards should respond to strategic developments as they arise;
- Provide the source of composite advice of Health Boards to Welsh Government when required;
- Advise on allocation of funding as services change or as funding arrangements change;
- Provide Welsh Government, Health Boards and relevant Boards/ Committees with an overview of activities, responsibilities and performances associated with the delivery of Lymphoedema services to cancer and non cancer patients across the Health Boards;
- Review progress, agreeing any necessary actions required to ensure that key milestones and timescales are met;
- All Lymphoedema patients have access to Lymphoedema services for assessment and management as per the £1million allocation.
   Individual Health Boards (and Velindre NHS Trust)
   will remain responsible for the delivery of services
   locally, and Chief Executives will retain

accountability for local service delivery.

# **Congratulations to Melanie!**

Fiona Jenkins, Chair of the All Wales Lymphoedema Network Group, would like to inform all colleagues of how proud we all are of Melanie Thomas (Lewis), who has been awarded an MBE in the recent national awards. This is testimony to Mel's leadership and passion for improving services for Lymphoedema which all of Wales has benefitted from, and now has the much deleveraged national recognition...well done Mel!

# National Lymphoedema Roundup

With the funding from Welsh Government in 2011, lymphoedema services have been set up throughout Wales to ensure equity of access and care for all people with lymphoedema/chronic oedema, regardless of the cause. Melanie Thomas (nee Lewis), the National Clinical Lymphoedema Lead for Wales has worked tirelessly with the various Health Boards in setting up new lymphoedema services and ensuring established services were able to provide the required level of care according to the All Wales Lymphoedema Strategy published in 2009.

In an effort to support the aims and objectives of the Strategy, a National Lymphoedema Education and Research Specialist role was created with Karen Morgan and Cheryl Pike being appointed a job share.



Karen, Melanie and Cheryl

A breakdown of the work that has taken place over the last six months is summarised below:

### **Education**

One of the first roles was to develop education courses that would be accredited and would recognise the level of skill and knowledge that participants would be achieving. Newly accredited

modules for the management of lymphoedema have been, and continue to be created in collaboration with Agored Cymru. The modules that have run thus far include Skin Care, Simple Lymph Drainage, Key Worker Skills for the Management of Chronic Oedema, Lower Limb Multi-Layered Bandaging (MLLB), Upper Limb MLLB and Exercise in Lymphoedema.

To date 27 lymphoedema staff have successfully completed the Simple Lymph Drainage (SLD) module and 14 lymphoedema assistant staff have completed the Skin Care module; all staff have passed their assessment and are awaiting their certificates of accreditation.

Future courses being planned include Casley-Smith Manual Lymphatic Drainage (MLD), Update in MLD, Specialist Skills for Head & Neck, Breast, Gynae and Obesity related Lymphoedema; Compression Garments, Advanced Assessment Skills and an exciting opportunity for patients and carers to do a module called *Living with Lymphoedema*.

### All Wales Lymphoedema Service Survey

In October and November 2012, an All Wales Lymphoedema Service Survey was undertaken and the results were presented at the 'Sharing Good Practice' study day in Bridgend in April 2013. This survey was a trial for future audit purposes but it did demonstrate the excellent work the various services are doing. Of the 591 forms that were returned for evaluation, 24 forms had to be excluded as the incorrect forms had been issued; thus 567 forms were audited. Some of the results from the audit include:

- 82% of people did not have difficulty accessing their lymphoedema service
- 96% answered that lymphoedema had been explained to them
- 60% of people knew what the risk factors were to developing lymphoedema
- 96% stated that the management of lymphoedema was explained to them

the advice given by their therapist; 10% felt it was 'easy'				
Have you received any of the following?	Yes	No	N/A	
. Skin care advice	86%	3%	1%	
2. Exercise, movement and				
ctivity advice	81%	5%	3%	
S. Simple Lymph Drainage	64%	16%	6%	
SLD) (self-massage)  . Garment care	7/10/	5%	7%	
	74%			
Weight management advice	59%	16%	12%	
pp-Ups				
	format	ive no	ว-เมทร	
Body had trast promoting atten, but and legal. Courses his fall resembly atten, but and legal.	been p			
100000000000000000000000000000000000000	ibuted			
lymp	hoeder	na ser	vices	
acros	ss Wale	s as ar	1	
The second secon	ational			
	notiona	l tool.	Plans	
A CONTRACTOR OF THE PARTY OF TH	idit the tivenes	. of +b		
eπeα ups are being discussed and-				
e the freedom to decide on t				
dit they would like to perform				
finding out what impact these				
patients and staff!				
andardication of Lucube and a	na Co	icos		
undardisation of Lymphoeder			_	
part of ensuring all clinics providers		-		
vices, policies and procedure the various skills and equipm		_		
ed within the services. These		·-	Schig	
Measuring Limb Volumes to	Deterr	nine		
Lymphoedema Vassular Ass	000:00 -	+ D = !'	/ <del></del> -	
Lymphoedema Vascular Ass Brachial Pressure Index / TB		it POII	у (тое	
Lymphassist Protocol for Ly	•	dema		
THOR Laser Protocol for Lyr	-			
Deep Oscillation Protocol fo	-		ma	
Management Strategy for L				
Patients with a Body Mass I	-			



Meetings and presentations have occurred with the All Wales Community Children's Nurses and Welsh Government officials for paediatrics, and further work is underway.

The long term goal is a dedicated Lymphoedema Paediatric Specialist.

## Welsh Compression Formulary

We have been working extremely closely with shared procurement services and SMTL in creating a tender document as well as an evaluation which is robust and patient focused. In the forthcoming months the tender process will commence which will enable us to formulate the National



Woolos Hospital, Newport.

Sister Kim Wyness said "The patients really enjoyed the day; we invited 25 people to the unit and we offered them massage treatments, facials, skincare workshops and relaxation techniques throughout the day."



"We also had speakers at the event talking about how to reduce stress, tips for a good night's sleep and how to reduce the risk of infection."



we as a team are looking forward to the next twelve months to see what it will bring.

Velindre NHS Trust

Work for the proposed repatriation of the Velindre dequipment are being tested to the maximum to investigate the most effective treatment protocos for our patients.

There has been exciting advancement of the existing weight management clinic in Wresham with input from Dr. Richard Corney, Consultant Psychologist, which is being audited to assess its strengths and evaluate how best to move this very important aspect of Lymphoedema management forward.

In the future - hopefully not too far away now - two of the clinics currently in Glan Clwyd and St. David's Hospice, Llandudno, will move to new accommodation in order that services can be truly multidisciplinary and work with other Allied Health Professionals such as Physiotherapy. Tissue Viability, District Nursing, Occupational Therapy and Podiatry. This collaborative working is harmesing the expertise of all these services to achieve greatest benefit for each of the services and maximises patient management, because as we all know, Lymphoedema rarely comes alone.

Satellite clinic stabilished at Landudno General Hospital every Friday morning 9am-12pm, so thapatents to a clinic.

With so much that has happened in a year it is difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and difficult to do everything we have done justice, and dif

suggests that patients are not recalling or remembering this information and supports the need for development of further lymphoedema prevention intervention.

# **Cardiff & Vale University Health Board** A ST DAVIDS DAY TO REMEMBER!!

Friday March 1st, 2013 saw the launch of the new Lymphoedema Service in Cardiff & Vale University Health Board (UHB).



The NEW clinic has been established to provide advice, help and support for people with lymphoedema living within Cardiff and the Vale of Glamorgan; and it is proving a success. The clinic has already helped hundreds of patients and has recently enjoyed an official opening ceremony.

Fiona Jenkins, the Director of Therapies for Cardiff and Vale University Health Board, said: "The new therapist led Lymphoedema Service is based in a newly refurbished department at Whitchurch Hospital and has been set up in line with the Welsh Government's Lymphoedema Strategy.

"There are already more than 250 people making regular use of the service which is helping to improve their quality of life in a number of ways and I would like to thank everyone involved in setting up the service for a job well done."

The service is aimed at non-cancer related lymphoedema patients and as a prevention service for cancer patients whose treatment may increase their risk of developing lymphoedema.

Treatments that are offered consist of a combination of skin care advice, movement and exercise information, compression (garments and multi-layer lymphoedema bandaging) and lymphatic drainage techniques.

The clinic works in collaboration with other services within the UHB to ensure the patient receives

appropriate holistic care that is required to manage this chronic condition.

Tanya Ball, the clinical lead for the lymphoedema service, said: "The new service has been very well received by patients. It is making a real difference to their care and helping to manage the condition."

Service users Jacqueline Rattray and Nadir Robani

were invited to the launch, both expressing their sincere gratitude for this new service and the benefits they have gained from receiving treatment at the Whitchurch Clinic.



ತ್ರಿಗೆ ಪ್ರಸಿ ಪ್ರಸಿ

સ્કૃત કર્યુ કર્યુ

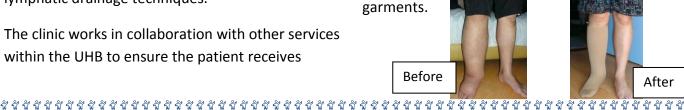
Jacqueline and Nadir officially open the clinic

### MAKING A DIFFERENCE

Since January 2012 the new lymphoedema service at Cardiff & Vale UHB have been working hard to improve the lives of those people in the Cardiff & Vale area who are living with Lymphoedema. As we know, current statistics report that lymphoedema affects around 6,000 people in Wales and has an emotional, as well as a physical, impact on the individuals living with this chronic condition. Following the initial set up of the service which involved visiting people at their own homes (and moving offices three times!) the team of five have been based at their new clinic in Whitchurch Hospital since September 2012 and continue to make a difference to patients lives.

Many patients treated at the clinic have been able to make lifestyle changes with the advice and support provided by all levels of staff at the clinic.

One patient felt that the new service has "changed his life", and receiving a letter for treatment was "like Christmas day"! Since undergoing a course of multi layer lymphoedema bandaging this gentleman is now self managing his condition with skin care, attending the gym and use of compression





The treatment has made such a difference to his life that following 8 years of being unemployed he stopped receiving benefits and has been phased back into full time employment.

Another success story of a young lady, referred to the clinic by her tissue viability nurse, has also successfully undergone lifestyle changes. She now has a more positive outlook on her everyday life. Personal hygiene needs were addressed along with weight management issues. Together with support from the community resource team and treatment which included a course of bilateral below knee lymphoedema bandaging she has lost five stone in five months. This weight loss was aided by the loss of 8 litres of fluid from each leg during her intensive treatment phase. With assistance from her father she has continued her self-management regime and weight loss plan with the hope of losing more weight.







Pre- and post-bandaging (MLLB)

Of the more than 250 patients that have been seen at the Whitchurch Clinic, these are only two examples of the impact this new service is having on peoples' lives. The team as a whole continue to strive to spread the "Lymphoedema" word and improve patient's lives.

### **Cwm Taf Health Board**

Cwm Taf Health Board Lymphoedema Service was successfully launched in November 2012 with the Health Board's Deputy Chair opening the service. Since commencing the service Cwm Taf

Lymphoedema team now has 140 patients on its caseload.

Karen Wingfield, the clinical lead for



the lymphoedema service said, "Since we started we have moved our clinics in the north of the Health Board from the old St Tydfil's Hospital to the purpose built Keir Hardie Health Park, Merthyr Tydfil, where the clinic rooms are spacious and very suited to seeing our patients". Clinics are held across two sites: Pontypridd and Merthyr Tydfil.

Various education and training events have taken place including a training day for Practice Nurses and District Nurses in March and May 2013. Presentations to the Cancer Multi-Disciplinary Teams, GP practices, Continuing Professional Development Forums and podiatry services have also been held. Forthcoming talks will be for the community podiatry teams, practice manager forums and the District Nurse team leader meetings.

Exciting new service developments have been commenced including:

Joint complex leg clinics are being held with
 Tissue Viability Nurses (TVNs) every 4 months. In
 between these clinics the TVNs and podiatrists
 attend clinics if there is need for a joint
 treatment plan with each of these specialist
 services.

- Diane Jehu, Lymphoedema Nurses, is leading on educational sessions for the Prevention of Lymphoedema following Breast Cancer treatment which commences in May 2013, and will be held alternatively between the Pontypridd base and Merthyr Tydfil clinics.
- Wendy Dury, Lymphoedema Assistant, is hosting classes to teach Simple Lymph Drainage which is an important self-massage to aid in the management of lymphoedema.

Karen Wingfield says "A big thank you to all colleagues, patients and the public for your ongoing support, patience and tolerance whilst we have been setting up our services!"

# **Hywel Dda Health Board**

Hywel Dda Lymphoedema Service provides a service to the entire population of Hywel Dda in whatever environment suits an individual's needs at

Region	Percentage of BMI >30
Carmarthenshire	40%
Pembrokeshire	62%
Ceredigion	51%
Hywel Dda Average	51%

- that point in time the service has the flexibility to adapt and treat a patient in any environment from inpatients, outpatients, satellite clinics, community, multi-disciplinary joint visits or clinics.

  The overall clinical objective of all services is to provent hospital admissions by promoting and facilitating soft management, patient education, and Health Care Professional awareness and education. Treatment interventions are directed towards ensuring maximal independence and self-management.

  Each of the 3 services provide their service to meet the needs of that population: for example, the Ceredigion Lymphoedema Service commenced officially in September 2011 with funding via the Welsh Assembly Governemnt; in line with this, the service has a strong community link and aims to provide a service as close to the patient's home as necessary.

  There are currently 1195 patients across the Health Board receiving active treatment, and during the period April 2012 to March 2013, 550 new patients were seen. From the data to myrical: we did a snapshot of people's Body Mass Index (BMI) levels and below is a table showing average percentage number of patients on the active caseload who have a BMI of over 30:

  Patient Obesity Levels

  Region Percentage of 8Mi > 30

  Carmarthenshire 40%

  Pembrokeshire 62%

  Ceredigion 51%

  Hywel Dda Average 51%

  We are currently treating a lady with a BMI of 79/which has proven extremely challenging 1

  However, through bandaging her right leg twice a week over 3 weeks, we have been able to reduce her limb volume from 38,363 litres to 19,460 litres this equates to a loss of fluid of 3 stone in weight!

  Pembrokeshire lough and some patients with open of the patient's to look at numbers of patients with IDC (invasive ductal carcinoma) that are referred on to the service. The recedigion team are to 40 a joint presentation on 'Excellence in Collaborative Work' with Dr. Rowlands (GP) and the Practice Nurse based in Brynmeddyg Surgery, Lunybydder, recognising the fantastic development of Multi-

## **Powys Lymphoedema Service**

Powys Lymphoedema Service was established in December 2011 with Delia Keen and Elizabeth Coveney sharing the Lymphoedema Clinical Lead post, and supported by Karen Jones, the Lymphoedema Assistant.

Accommodation for the service has been challenging, however in April 2012 the service was able to set up base in Builth Wells Community Hospital, mid-Powys. A satellite clinic has also been established in North Powys based at Llanidloes Hospital. Powys is currently in the middle of reorganising how services are being delivered and as a consequence the service base will soon have to move from Builth Wells, however, as yet, there is no indication as to where a suitable alternative base may be found.

Since December 2011 the service has received 191 referrals, of which 137 are on the active caseload, and 11 on the waiting list (the longest waiting time is less than 4 weeks). Patients have been repatriated from Hereford Lymphoedema service and Usk House (a Charity service based in South Powys), and stronger links are being built with the Bracken Trust (a Charity service based in mid Powys). The aim in the next few months is to set up a referral process for patients needing 'lymphoedema prevention' advice and support following cancer treatment. This will be quite a challenge as Powys patients receive treatment for cancer at Velindre and Swansea, but also Shrewsbury, Gloucester, Hereford, Birmingham and Liverpool!

We have used Juxta Cures with 3 patients as an alternative to bandaging when there has been ulceration present. The case study below is to be published in a Nursing Journal during June 2013.





Strong links have been established with the District Nursing teams through the weekly Leg Clubs taking place across Powys. On the back of this, a Link Nurse/ Key Worker group has been set up and they meet twice yearly to keep up to date with service developments and training. These nurses take the lead within their teams for collaboratively providing care, particularly with toe bandaging and Multi-Layered Lymphoedema Bandaging (MLLB), and recognising when a referral to the lymphoedema service is required.

The lymphoedema service leads have both been involved with teaching on the Palliative Care Masters Level Module, a University course which is held in Powys. Delia has also presented to the Powys Clinical Effectiveness Committee about the work of the new lymphoedema service.

Our congratulations to both Delia and Elizabeth for completing their Masters Degrees! They are an inspiration to all their colleagues!

# Abertawe Bro-Morgannwg University Health Board (ABM UHB) Lymphoedema Service

ABM UHB provides lymphoedema services to all those living in Swansea, Neath, Port Talbot and Bridgend localities. Although the base is at Singleton Hospital, Swansea, the team provides inpatient services to all hospitals; we hold clinics on the Tenovus Mobile Unit in Bridgend, and we work collaboratively with the community, tissue viability and dermatology nurses for those patients less able to travel to a hospital or clinic site.

From November 2012 the majority of breast surgery has moved to Neath Port Talbot hospital which forced the team to re-think their pre- and post-operative care for the Lymphoedema Prevention and Rehabilitation Scheme. We have employed two Band 4 Lymphoedema Assistant Practitioners who have been fully trained to provide this level of care, and to date the feedback has been very positive from the patients, and the team have fully integrated this new pathway. In this new

venture we have seen our caseload of Breast Cancer patients double since then!





Kaja Hopper and Susan Pugh – our Band 4 Assistant Practitioners!

Complex clinics/ joint working were set up in Neath Port Talbot in 2010. Since then 117 patients have been managed collaboratively, 89 are now maintained in compression hosiery and their wounds have healed. Collaborative working not only provides the patients with a seamless, efficient pathway of care, but also supports the sharing of knowledge and education between specialities. As a result of the cost effectiveness of our initial joint clinic we have established this within other areas locally and have successfully run clinics in Pencoed.

Primary Care antimicrobial guidelines now include cellulitis guidance for patients with Lymphoedema / Chronic Oedema: "Patients with lymphoedema/chronic oedema presenting with cellulitis may require antibiotics for 14 days or longer" (this reflects the guidance within the BLS/LSN Cellulitis Document). ALL patients with lymphoedema/chronic oedema and cellulitis should be referred to the Lymphoedema Service.

Independent prescribing project will commence 1<sup>st</sup> June – this is a pilot study where the two independent prescribers will prescribe all garments on FP10 instead of issuing GP recommendation forms. This is aimed at reducing the delay in obtaining garments, ensuring the correct garment are issued and so reduce waste and improve the service for the patients.

Tenovus performed an audit of the use of the mobile unit which showed that patient activity and referrals have doubled over the last year, and that the number of non-attendance (UTA/DNA) of patients has significantly reduced since holding

clinics in Bridgend. We now hold two clinics a month in the Bridgend locality, which are fully subscribed and a waiting list for appointments is being carefully monitored.

We also hold Breast Cancer Lymphoedema Prevention and Rehabilitation sessions on the Tenovus Mobile Unit at Morrisons, Morfa (Swansea) and at Morrisons, Baglan (Port Talbot); and there are plans afoot to hold a session in Bridgend in the near future.

As part of one of the Agored Lymphoedema Management modules, a patient was advised to perform daily skin care and was given simple exercises to build thigh muscle strength and improve mobility until multi-layered bandaging (MLLB) could be performed. Below are photos of the patient at his assessment, and the 'after' photo showing the improvement of his skin condition and the dramatic change in limb shape in the two weeks from his assessment until the start of the MLLB! It just goes to show how effective our advice is when patients take it on board the basics of looking after their skin and taking on a more active lifestyle.



୍ଷି ସେ ବିବିଷ୍ଟି ବିବିଷ୍ଟ



Afte

Continuing professional development is actively encouraged in the team and Jodie has now passed first year of her Master's degree. Melanie is hard at work with her Doctoral Programme, and Cheryl is about to embark on her Doctoral Programme come October 2013! Rebecca is due to do her Casley-Smith MLD training which will be shortly followed by her independent prescriber's course in September 2013!

Up and coming events for the ABM UHB Lymphoedema Service:

 The majority of the team will be running, walking and probably crawling as part of a Health Board initiative to get the staff moving! We are naming

cross the 10 kilometre walk/run/jog in Llanelli on	Health Board	Base	Telephon
30 <sup>th</sup> June.  In an effort to promote Lymphoedema	Aneurin Bevan	St. Woolos Hospital, Newport	01633 238464
Awareness and provide education for our patients, we will be holding a "Lymphoedema"	Abertawe Bro- Morgannwg UHB	Singleton Hospital, Swansea	01792 285252
and Me": a patient information day on 16 <sup>th</sup> September 2013 at Margam Park, Port Talbot.	Betsi Cadwaldr	Wrexham Maelor Hospital, Wrexham	01978 726257
OP the PRESS: we have just had formal	Cardiff & Vale	Whitchurch Hospital, Cardiff	02920 336176
rmation that the ABM UHB lymphoedema	Cwm Taff	Dewi Sant Hospital,	01443
n have now been adopted by Macmillan Cancer port! We have also been short listed for the	Hywell Dda -	Pontypridd Prince Phillip	443499 01554
cmillan Team Award! Go Team!	Carmarthenshire	Hospital, Breast Unit, Llanelli	783370
	Hywell Dda - Ceredigion	Bronglais General Hospital, Aberystwyth	01970 628858
	Hywell Dda - Pembrokeshire	Withybush General Hospital, Haverfordwest	01437 773053
	Powys	Builth Wells Community	01982
	, ,	Hospital,	554331
	Singleton Hospita	Builth Wells  nd Cheryl can be con  I, Swansea; 01792 28  You enjoyed the re	35252.
	Singleton Hospita	nd Cheryl can be con I, Swansea; 01792 28	35252.
	Singleton Hospita	nd Cheryl can be con I, Swansea; 01792 28	35252.
	Singleton Hospita	nd Cheryl can be con I, Swansea; 01792 28	35252.
	Singleton Hospita	nd Cheryl can be con I, Swansea; 01792 28	35252.
	Singleton Hospita	nd Cheryl can be con I, Swansea; 01792 28	35252.
	Singleton Hospita	nd Cheryl can be con I, Swansea; 01792 28	35252.
	Singleton Hospita	nd Cheryl can be con I, Swansea; 01792 28	35252.
	Singleton Hospita	nd Cheryl can be con I, Swansea; 01792 28	35252.
	Singleton Hospita	nd Cheryl can be con I, Swansea; 01792 28	35252.
	Singleton Hospita	nd Cheryl can be con I, Swansea; 01792 28	35252.