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CATEGORY:

INNOVATION & IMPROVEMENT

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Award:
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5 Shortlisted Nominees

**Biomedical Scientist
Reporting in Bowel Cancer
Screening**

Cardiff and Vale University Health
Board, NHS Wales Performance &
Improvement

**One-Stop Clinic for Post-
Menopausal Bleeding**

Hywel Dda University Health Board

**Improving the GI
Diagnostic Pathway in
Pathology**

Aneurin Bevan University Health Board

**Advancing Peritoneal
Cancer Detection**

Cardiff and Vale University
Health Board

**Earlier Diagnosis of
Bowel Cancer Through
Screening Engagement**

Public Health Wales, Cancer
Research UK, Oxford University



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Biomedical Scientist Reporting in Bowel Cancer Screening

Cardiff and Vale University Health Board, NHS Wales
Performance & Improvement

This nomination recognises the introduction of Limited Scope Biomedical Scientist Reporting for bowel cancer screening polyps at Cardiff and Vale University Health Board, a first in the UK led by Consultant Pathologist Dr. Meleri Morgan. In partnership with the RCPATH and IBMS, Dr. Morgan designed and implemented a new training curriculum, creating a qualification that enables biomedical scientists to independently report on bowel cancer screening polyps. Following an intensive 18-month training period, two biomedical scientists from Cardiff and Vale UHB became the first in the UK to pass the qualification exams. This has already improved diagnostic turnaround times, reducing them from 18 days to 8 days, with expectations to meet the national KPI of 5 days once fully implemented. The initiative has helped to expand diagnostic capacity, optimise consultant time, and modernise cellular pathology practice.



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One-Stop Clinic for Post-Menopausal Bleeding

Hywel Dda University Health Board

This nomination recognises the introduction of a One-Stop Clinic for Post-Menopausal Bleeding at Hywel Dda University Health Board, designed to address significant delays in the Urgent Suspected Cancer (USC) pathway. Prior to this work, patients were waiting an average of 178 days for diagnosis and treatment, driven by fragmented processes and limited ultrasound availability. A multidisciplinary team redesigned the pathway, relocating ultrasound services from Radiology into the Gynaecology Department, enabling patients to receive ultrasound, clinical assessment, and hysteroscopy in a single visit. This model, initially piloted at Bronglais General Hospital in 2024 and expanded across other hospital sites in 2025, has reduced average waiting times from 178 days to 29 days. The One-Stop Clinic offers faster diagnostic clarity, improves patient experience, and ensures more equitable access to timely care across all sites.

Improving the GI Diagnostic Pathway in Pathology

Aneurin Bevan University Health Board

This nomination recognises the work at Aneurin Bevan University Health Board to optimise gastro-intestinal (GI) pathology services, improving efficiency and diagnostic accuracy within the Urgent Suspected Cancer (USC) pathway. An audit revealed that 46% of GI USC cases were not clinically suspicious for malignancy, contributing to delays and increased turnaround times. Through a series of audits and collaboration with the endoscopy teams, the team successfully reduced inappropriate prioritisation to 17%, leading to faster reporting and earlier discussion of cases at multidisciplinary team meetings. Further work on biopsy protocols also reduced unnecessary specimens, improving efficiency and reducing strain on consultant and laboratory resources. These efforts have reduced average turnaround times for USC samples by 1.5 days, enhanced diagnostic accuracy, and are projected to result in significant savings and improved patient outcomes.



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Advancing Peritoneal Cancer Detection

Cardiff and Vale University Health Board

This nomination recognises the work of Dr. Daniel Chung and Dr. Adam Williams at Cardiff and Vale University Health Board in advancing peritoneal cancer detection. Peritoneal cancer, due to its subtle and easily overlooked radiological signs, is one of the most difficult malignancies to detect early. As core radiologists within the All Wales Colorectal Peritoneal Metastasis Service, Dr. Chung and Dr. Williams have played a pivotal role in enhancing diagnostic accuracy through advanced imaging techniques, including AI-enhanced MRI interpretation and specialised abdominal imaging. Their expertise has been integral to the accurate staging and treatment planning of peritoneal cancer, enabling timely referrals for cytoreductive surgery and HIPEC. In addition to their clinical work, both have led radiology workshops across Wales, strengthening the diagnostic skills of colleagues and improving early detection of peritoneal abnormalities. Their combined contributions—clinical, academic, and educational—have helped raise the standard of peritoneal cancer detection in Wales to a level comparable with leading international centres.



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Earlier Diagnosis of Bowel Cancer Through Screening Engagement

Public Health Wales, Cancer Research UK, Oxford University

This nomination recognises the Test, Evidence, Transition (TET) Positive Non-Responder initiative led by Bowel Screening Wales (Public Health Wales) in conjunction with Cancer Research UK, and Oxford University. The project targeted a high-risk gap in the bowel screening pathway: individuals who receive a positive FIT result but do not respond to standard follow-up invitations. The team implemented a multi-layered intervention combining behavioural science, service redesign, and personalised patient engagement. This included redesigned communications, SMS reminders, and proactive telephone outreach from Pathway Navigators, resulting in 288 participants attending further screenings and the detection of seven cancers. The initiative has contributed to earlier diagnosis, improved patient engagement, and addressed health inequalities by supporting individuals who face barriers to accessing follow-up care.



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7 Shortlisted Nominees

-  **Conformal Palliative Radiotherapy Service**
Velindre Cancer Centre
-  **Sentinel Lymph Node Biopsy for Oral Cancer**
Cardiff and Vale University Health Board
-  **Immediate Nasal Prosthetic Rehabilitation Pathway**
Swansea Bay University Health Board
-  **CAR-T Therapy for Multiple Myeloma**
Cardiff and Vale University Health Board
-  **Metastatic Spinal Cord & Cauda Equina Compression (MSCC) Coordinated Service**
South West Wales Cancer Centre, Cardiff and Vale University Health Board, Aneurin Bevan University Health Board, South Wales Spinal Network



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7 Shortlisted Nominees



South East Wales Cancer of Unknown Primary Team

Velindre University NHS Trust, Cardiff
and Vale University Health Board, Cwm
Taf Morgannwg University Health
Board, Aneurin Bevan University Health
Board, NHS Wales Performance and
Improvement, All Wales Medical
Genomics Service, Centre for Trials
Research – Cardiff University,
NHS Wales Joint Commissioning
Committee, Wales Cancer Research
Centre



SWWCC Stereotactic Ablative Radiotherapy (SABR) Service Expansion

South West Wales Cancer
Centre

Conformal Palliative Radiotherapy Service

Velindre Cancer Centre



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This nomination recognises the development of a Conformal Palliative Radiotherapy Service at Velindre Cancer Centre’s satellite unit in Abergavenny, at Nevill Hall Hospital. The unit, equipped with a CT scanner and two Ethos linear accelerators, brings high-precision radiotherapy closer to home for palliative patients. The service uses IMRT VMAT techniques, traditionally used in curative radiotherapy, to deliver more conformal palliative treatment, improving accuracy while reducing radiation exposure to healthy tissue. This approach has already benefited patients with spinal metastases, improving symptom control and quality of life. The service represents a significant shift in palliative care, with future plans to optimise the process further, potentially enabling same-day treatments. The use of AI in treatment planning is streamlining workflows and will eventually enable radiographers to manage treatment plans independently, without the need for physics colleagues, further speeding up the process.



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Sentinel Lymph Node Biopsy for Oral Cancer

Cardiff and Vale University Health Board

This nomination recognises the introduction of Sentinel Lymph Node Biopsy (SLNB) for oral cancer at Cardiff & Vale University Health Board, establishing the only centre in South Wales to offer this innovative procedure. SLNB replaces the traditional neck dissection, a more invasive procedure, with a minimally invasive approach that offers accurate nodal staging while reducing patient burden. Since its introduction in 2024, 25 SLNB procedures have been successfully performed, significantly reducing hospital stay (from 7 days to 2 days), operative time (from 300 minutes to 117 minutes), and the need for ICU admission. The introduction of SLNB has not only improved patient outcomes but also generated significant cost savings, with an estimated saving of £4,500 per case. The service's success has extended beyond the host institution, with referrals now coming from other health boards in Wales. SLNB has established a new standard of care for oral cancer staging in South Wales and is expanding to other head and neck cancers.

Immediate Nasal Prosthetic Rehabilitation Pathway

Swansea Bay University Health Board

This nomination recognises the Immediate Nasal Prosthetic Rehabilitation Pathway developed at Morriston Hospital, Swansea Bay University Health Board, for patients undergoing partial or total rhinectomy for cancer. The pathway involves the placement of osseointegrated implants during surgery, with a temporary, realistic nasal prosthesis attached immediately post-operatively. This ensures that patients leave surgery with a prosthesis in place, offering immediate psychological and aesthetic support. After an 8-week healing period, patients receive a definitive silicone prosthesis, providing optimal functional and aesthetic outcomes. This proactive rehabilitation approach helps patients maintain dignity, confidence, and social engagement during the critical early recovery phase, improving overall treatment experience and continuity of care. The pathway represents a shift from delayed to immediate rehabilitation, integrating advanced prosthetic techniques within the cancer treatment process.



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CAR-T Therapy for Multiple Myeloma

Cardiff and Vale University Health Board

This nomination recognises the work led by Dr. Jim Murray at Cardiff and Vale University Health Board in establishing access to CAR-T cell therapy clinical trials for patients with multiple myeloma in Wales. Through his leadership, two CAR-T clinical trials were initiated, offering patients with relapsed or refractory myeloma a treatment option that was previously unavailable in the NHS. This initiative required extensive innovation in trial set-up, governance, and multidisciplinary coordination. To date, four patients have received CAR-T therapy through these trials, resulting in improved disease control and outcomes. Dr. Murray's work has not only expanded treatment options for patients but also laid the groundwork for the future integration of CAR-T therapy into routine NHS treatment pathways for myeloma in Wales, helping bridge the gap between clinical trials and standard care.



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Metastatic Spinal Cord & Cauda Equina Compression (MSCC) Coordinated Service

South West Wales Cancer Centre, Cardiff and Vale University
Health Board, Aneurin Bevan University Health Board, South
Wales Spinal Network

This nomination recognises the development of the Metastatic Spinal Cord & Cauda Equina Compression (MSCC) Coordinated Service across South Wales. Following the identification of fragmented care and communication barriers, a dedicated MSCC coordinator role was introduced to streamline the diagnostic and treatment pathway for patients with this oncological emergency. The service, which began in September 2024, has significantly improved early identification, increased surgical intervention rates, and reduced the time from presentation to treatment. A standardised referral pathway and weekly multidisciplinary team meetings have ensured timely access to care across multiple health boards. In its first 15 months, the service facilitated 313 referrals, with 143 patients receiving surgical or radiotherapy interventions. This initiative has improved outcomes, reduced delays, and provided more equitable access to care across South Wales, positioning the service as a model for other regions.

South East Wales Cancer of Unknown Primary Team

Velindre University NHS Trust, Cardiff and Vale University Health Board, Cwm Taf Morgannwg University Health Board, Aneurin Bevan University Health Board, NHS Wales Performance and Improvement, All Wales Medical Genomics Service, Centre for Trials Research – Cardiff University, NHS Wales Joint Commissioning Committee, Wales Cancer Research Centre

This nomination recognises the South East Wales Cancer of Unknown Primary (CUP) Team, led by Consultant Medical Oncologist Dr Sonali Dasgupta, for its innovative and patient-centred approach to managing CUP cases. The team has created a comprehensive service to address the challenges associated with CUP, a type of cancer often diagnosed at an advanced stage. Through dynamic leadership and collaboration across multiple disciplines, including oncology, radiology, and pathology, the team has developed a bespoke e-referral system, implemented a patient feedback framework, and introduced the use of molecular profiling as standard practice for CUP patients. This has improved diagnosis, treatment planning, and patient outcomes, with a significant increase in referrals and treatment rates. The team's efforts have also led to national recognition, positioning South East Wales as a leader in CUP care and influencing UK-wide best practices.



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SWWCC Stereotactic Ablative Radiotherapy (SABR) Service Expansion

South West Wales Cancer Centre

This nomination recognises the expansion of the Stereotactic Ablative Radiotherapy (SABR) service at South West Wales Cancer Centre (SWWCC). The service now provides high-precision radiotherapy for a range of cancer types, including primary lung cancers, oligometastatic disease, and pancreatic cancers. In 2025, SWWCC became the only centre in Wales offering pancreatic SABR. The service has already treated over 100 patients, with 102 treated in 2025–2026 alone. SWWCC has incorporated advanced techniques, such as abdominal compression for abdominal SABR, MRI-guided radiotherapy, and AI-driven imaging to enhance treatment accuracy. This expansion has increased access to advanced radiotherapy, improving patient outcomes and reducing the burden on other services, including radiology.



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5 Shortlisted Nominees

-  **Cancer Clinical Nurse
Specialist Rotational
Development Programme**
Hywel Dda University Health Board,
Macmillan Cancer Support
-  **Cancer Genomics Services
Workforce Stacking Model**
All Wales Medical Genomics
Service
-  **South East Wales
Immuno-Oncology Side
Effects Service**
Velindre Cancer Centre
-  **Haematology Nurse
Rotation Programme**
Cardiff and Vale University Health
Board
-  **Implementation of UK
Somatic Variant
Interpretation Guidelines
(UK-SVIG)**
All Wales Medical Genomics Service



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**Cancer Clinical Nurse Specialist Rotational Development
Programme**

Hywel Dda University Health Board, Macmillan Cancer Support

This nomination recognises the Cancer Clinical Nurse Specialist (CNS) Rotational Development Programme implemented at Hywel Dda University Health Board, in collaboration with Macmillan Cancer Support. The programme was designed to strengthen the cancer nursing workforce by providing newly recruited Band 6 CNSs with rotational experience across Upper GI, ENT, Breast, and Colorectal specialties over a two-year period. The structured programme includes induction, clinical placements, and support for achieving nationally recognised competencies aligned with the ACCEND and Core Cancer Capabilities in Practice (CCCiP) frameworks. By offering exposure to multiple cancer pathways, the programme enhances clinical versatility, improves patient care, and ensures that CNSs are well-prepared to meet the evolving demands of cancer services. Early results show that CNSs are delivering safe, compassionate, and person-centred care, while also contributing to service improvements through their participation in co-creation and service development initiatives.

Cancer Genomics Services Workforce Stacking Model

All Wales Medical Genomics Service

This nomination recognises the Cancer Genomics Services Workforce Stacking Model implemented by the All Wales Medical Genomics Service. In response to increasing demand and limited capacity, the service applied Lean methodology to optimise workforce deployment and improve patient flow across cancer genetics pathways. The model offers real-time visibility of workload, enabling staff to dynamically adjust priorities and ensuring patients receive timely care. Since its implementation, the model has significantly reduced delays and improved coordination between teams, leading to faster access to genetic testing. Patients are now experiencing more timely progression through the pathway, with fewer disruptions. For the workforce, the approach has improved collaboration, reduced duplication, and allowed staff to focus on value-adding activities, increasing overall capacity. This has made a tangible difference for patients, providing more efficient care and supporting better outcomes.



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South East Wales Immuno-Oncology Side Effects Service

Velindre Cancer Centre

This nomination recognises the establishment of the South East Wales Immuno-Oncology (IO) Side Effects Service at Velindre Cancer Centre, designed to manage immune-related adverse events (irAEs) for patients undergoing immunotherapy. Before the service, patients often faced delays, fragmented care, and increased risks due to limited access to specialist support. The service introduced proactive, nurse-led clinics, a dedicated multidisciplinary team, and a specialist telephone advice line, enabling earlier detection and intervention for irAEs. As a result, the service has successfully avoided hospital admission for 65% of patients and managed 40–60 complex cases at any one time. Patients have reported faster access to expert care, fewer hospital admissions, and improved continuity, with many able to continue immunotherapy safely. Staff have also gained increased confidence in managing irAEs, with 92% reporting improved capability. The service has resulted in approximately £615,000 in cost savings by reducing emergency bed days and hospital admissions. It is now recognised as one of the leading services in the UK and is being adopted in other regions, demonstrating its scalability and impact.

Haematology Nurse Rotation Programme

Cardiff and Vale University Health Board

This nomination recognises the Haematology Nurse Rotation Programme at Cardiff and Vale University Health Board, designed to address workforce challenges and enhance the skills of newly recruited nurses in this highly specialised area. The 12-month rotational programme provides nurses with hands-on experience across key service areas including the inpatient ward, Day Unit, and specialist teams such as CNS services, transplant, and apheresis. The programme includes structured induction, preceptorship, and competency development, supported by an education framework and a focus on staff wellbeing. As a result, the programme has achieved a 95% retention rate, improving workforce stability and ensuring that nurses gain a broad understanding of the haematology patient pathway. Nurses have progressed into chemotherapy training more quickly, increasing the number of competent chemotherapy nurses and improving treatment capacity. This initiative has enhanced patient care by ensuring continuity, improved team cohesion, and more timely, confident care delivery.



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Implementation of UK Somatic Variant Interpretation Guidelines (UK-SVIG)

All Wales Medical Genomics Service

This nomination recognises the implementation of the UK Somatic Variant Interpretation Guidelines (UK-SVIG) by the All Wales Medical Genomics Service (AWMGS). The guidelines, a nationally recognised framework for classifying somatic variants identified through genomic cancer testing, were rolled out across AWMGS in December 2025, following a year of intensive preparation ahead of their national publication. This initiative involved a cross-team working group of approximately 70 scientists from five specialist laboratory teams. The group led the implementation collaboratively, delivering two key innovations: a bespoke web application to support real-time variant classification and a structured training package. The hands-on delivery of training ensured that all staff had the opportunity to learn, apply, and fully embed the guidelines in their practice, building confidence and capability across teams. Since the guidelines went live, AWMGS has classified over 1,100 unique variants and completed more than 3,000 classifications. This has led to more accurate, consistent results, improving clinical decision-making and aligning practice with national standards.



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