AN OUTSTANDING YEAR IN REVIEW

Celebrating our ‘Outstanding’ highlights and achievements from 2016/17
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Welcome to this annual review of an outstanding 12 months at Liverpool Heart and Chest Hospital.

It has been a remarkable year for everyone associated with Liverpool Heart and Chest Hospital – a year in which we were delighted to become the first specialist trust in the country to be rated ‘Outstanding’ by the Care Quality Commission (CQC). At the time of the announcement in September 2016, we were also the first trust in Cheshire and Merseyside and one of only eight trusts nationwide to be recognised as ‘Outstanding’.

Following inspection visits in April and May 2016, the CQC highlighted that:

- patients and their loved ones were treated with compassion and empathy by all staff across the hospital
- relatives felt that staff always treated their loved ones with dignity and respect and would always talk to the patient in a caring and compassionate way
- effective teamwork and clear leadership and communication, in services at a local level, were in place at the Trust
- staff were proud of the services they delivered and proud of the Trust
- the senior team led the Trust with a strong focus on service quality and positive patient experience

The inspection process was rigorous and rightly challenging and therefore it was hugely rewarding for all our staff to be recognised nationally.

Our impressive achievements during 2016/17, in the midst of continuing financial, operational and strategic challenges faced by all NHS trusts, were highlighted further with the publication of the CQC National Inpatient Survey results in June 2016.

The national survey showed that patients rated LHCH as the best hospital in the country for the eighth time in 10 years. As well as being top in the country for ‘overall patient experience’, the findings showed that patients rated LHCH as the best trust in the country in a further five survey sections: doctors; nurses; care and treatment; the hospital and ward; waiting to get to a bed on a ward.

These impressive findings were followed by the publication of the NHS Staff Survey results in March 2017, which scored LHCH as the best hospital in the country to work or receive treatment. The survey showed that 95% of staff recommended LHCH as a place to receive treatment – more than any other hospital and the highest score in the country.

This year we have continued working closely with our commissioners and other stakeholders in the wider health economy, especially with the ongoing NHS Five Year Forward View.

Much work has been undertaken to consider the future provision of services and how Cheshire and Merseyside responds to the financial challenges facing health and social care. We have a proactive role in these discussions and are leading a work stream on cardiovascular disease across Cheshire and Merseyside, and considering ways to deliver clinically-led improvements to patient care.

Whilst concerns about NHS finances remain, here at Liverpool Heart and Chest Hospital we were pleased to be able to invest in our services and the hospital environment during the year.
In November 2016, we officially opened our new Main Entrance and refurbished Outpatients Department. Our Main Entrance now provides a true focal point for visitors, with a fully staffed reception 24 hours a day, seven days a week. The Outpatients Department benefits from a more modern and comfortable waiting area for patients and families, with an automated self check-in system and a brand new café facility, generously funded by our LHCH Charity.

Looking ahead, we are excited to be making significant improvements to the quality of accommodation and the facilities that we provide for our patients on Maple Suite, and we are also pleased to be starting a programme of work to upgrade our theatres and catheter laboratories.

This year we were delighted to welcome Claire Wilson as our new Chief Finance Officer in June 2016 and we were also pleased that our Medical Director, Dr Raphael Perry, took on the role of Deputy Chief Executive.

We must also acknowledge, once again, the contribution of our members and the invaluable support of our Governors who give their time voluntarily to raise awareness of the work of the hospital in their constituencies and assist the Board of Directors on a range of issues.

Finally we would like to place on record our sincere thanks to all our volunteers without whom the hospital would not be the same place, as well as to our dedicated staff for their outstanding efforts this year.

We have no doubt that many more challenges lie ahead in 2017/18. However we are equally confident that each one of these challenges will be fully met by our ‘Outstanding’ team at Liverpool Heart and Chest Hospital.

Neil Large, Chairman
Jane Tomkinson, Chief Executive
LHCH was the first specialist trust nationally to be awarded an ‘Outstanding’ rating by the Care Quality Commission.

For the eighth time in 10 years, patients rated LHCH as the best hospital in the country for ‘overall patient care’ in the Care Quality Commission’s National Inpatient Survey.

The National NHS Staff Survey 2016 scored LHCH as the best hospital to work and receive treatment.

The Trust’s Knowsley Multidisciplinary Community Cardiovascular Disease and Respiratory Services were named winners at the North West Coast Research & Innovation Awards 2017 in the Priority Award category.

Neil Large, Chairman of LHCH, was awarded an MBE in The Queen’s New Year’s Honours List.

Professor Rod Stables, Consultant Cardiologist, was awarded the post of honorary chair from the University of Liverpool and was also appointed as chair of the British Cardiovascular Society Academic and Research Committee.

LHCH formally opened the brand new Main Entrance along with a redeveloped Outpatients Department.

LHCH was a shortlisted finalist at the Nursing Times Awards 2016

LHCH was a shortlisted finalist at the Advancing Healthcare Awards 2017
AN OUTSTANDING TRUST IN BRIEF

- 2,190 cardiac surgery operations
- 1,260 thoracic surgery operations
- 320 cystic fibrosis patients
- 2,600 angioplasty
- 1,220 catheter
- 185 aortic aneurysm procedures
- 7,220 MRI, CT, Echo Scans
- 68,918 hospital outpatients
- 8,958 cardiology inpatients
- 193 inpatient beds
- 9 operating theatres
- 5 catheter laboratories
- 10 community locations
- 1,599 staff are employed
- £129m turnover
- 2.8million population served by LHCH
- Largest single-site heart and chest hospital
AN ‘OUTSTANDING’ RATING

In September 2016, following announced and unannounced inspection visits earlier in the year, we were delighted to learn that we had been rated ‘Outstanding’ by the Care Quality Commission (CQC).

LHCH became the first trust in Cheshire and Merseyside, and the first specialist trust nationally to be awarded the ‘Outstanding’ rating.

A team of more than 30 CQC Inspectors, made up of doctors, nurses, other healthcare professionals, managers and patients with vast experience of using healthcare services, visited our hospital and community-based teams, to examine our services and clinical pathways.

The Inspection Team, who spoke to patients, relatives, staff and external partners, made their final decision based on five key measures, asking whether they were: safe, effective, caring, responsive, and well-led.

The CQC summarised their findings by highlighting that:

- patients and their loved ones were treated with compassion and empathy by all staff across the hospital
- relatives felt that staff always treated their loved ones with dignity and respect and would always talk to the patient in a caring and compassionate way
- effective teamwork and clear leadership and communication, in services at a local level, were in place at the Trust
- staff were proud of the services they delivered and proud of the Trust
- staff went above and beyond their duty to meet the needs and wishes of both the patient and their loved ones
- staff felt supported and valued in their roles
- patients said they felt ‘special’ and staff knew their name and what needs they had
- the senior team led the Trust with a strong focus on service quality and positive patient experience
- it was clear that there was a strong culture of person centred care for patients and their families, and staff strived to meet the needs of the patients and their loved ones.

Neil Large, Chairman, and Jane Tomkinson, Chief Executive, said: “The CQC inspection process is rigorous and rightly challenging, and this ‘Outstanding’ rating is testament to the dedication and professionalism of the team.”

A special ‘Outstanding Care Event’ was held to mark the achievement, for patients and staff.
A man who collapsed during a badminton game, was thankful to be in the same building where staff from Liverpool Heart and Chest Hospital were providing cardiac rehabilitation sessions.

Peter Ventre, 63, was about to take his serve when he began to ‘feel funny’.

He said: “All I remember is being convinced it was my partner’s serve. He kept telling me it was my serve.

“I woke up in an ambulance to be told I’d had a heart attack.”

Staff, at the leisure centre where he was playing, rushed over to Peter and were supported immediately by Liverpool Heart and Chest Hospital nursing staff.

Lisa Devitt, LHCH cardiovascular disease nurse, who had been running a cardiac rehabilitation session for patients in the sports centre, was one of the nurses to care for Peter.

She said: “Our years of experience and cardiac training took over as we were able to care for Peter until the paramedics arrived.

Mr Ventre was taken by ambulance for emergency treatment at Liverpool Heart and Chest Hospital.

He said: “I can’t believe what happened to me. I feel like I’ve got a second chance and I’m so thankful to all the amazing people who helped me.”

The Liverpool FC fan returned to the leisure centre to undertake the cardiac rehabilitation programme with the same nurses who saved his life.
OUR SERVICES – MEDICINE

Clinical teams at Liverpool Heart and Chest Hospital provide diagnosis, treatment and care for patients with a wide range of complex heart and chest conditions. Our cardiology and respiratory medicine teams are based around the following areas:

- interventional and diagnostic cardiology including cardiac catheters, percutaneous coronary intervention (PCI) and Primary (emergency) PCI
- congenital heart failure
- cardiac devices and pacing
- electrophysiology studies
- imaging and electrocardiography
- cystic fibrosis and respiratory chest medicine and respiratory physiology.

We provide our hospital based services through 100 inpatient beds, our state-of-the-art daycase lounge (Holly Suite), our coronary care unit, five cardiac catheterisation labs, a pacing theatre and an endoscopy facility.

We are also a significant research centre, participating in and undertaking a number of important studies that advance the range and quality of care we provide for our patients, and ensuring that services are LHCH are the forefront of new treatments and technologies.

During 2016/17 we were delighted to have all of the services within the Medicine Division rated as ‘Outstanding’ overall by the Care Quality Commission, including our award-winning and nationally recognised community cardiovascular and respiratory services in Knowsley.

During the year, we also expanded our sports cardiology service and our service for patients with inherited cardiac conditions, and we have just recruited our first dedicated consultant for this rapidly developing service.

We continued to invest in our facilities, refurbishing Maple Suite for patients with cystic fibrosis. Consisting entirely of single bedrooms and en-suite bathrooms, this ‘hotel style’ environment matches the standard of facility we opened in Cherry Ward last year.

Looking forward, we are also continuing the planning work for the multi-million pound redevelopment of all of our catheter labs, as well as further close work with our partners across the city and region - redesigning heart attack services, urgent pacing services, heart failure services and community cardiovascular and community respiratory services.

In Brief

LHCH is the largest angioplasty (PCI) centre in the UK. We operate the region’s primary PCI service, performing about 1,000 emergency procedures each year, and providing patients suffering a myocardial infarction (heart attack) the opportunity to be brought directly to our hospital by paramedic ambulance for early and definitive specialist care.

LHCH is the largest implanting centre in the UK for implantable cardioverter defibrillators (ICD) and cardiac resynchronisation therapy (CRT) and we are the only centre in the Merseyside and Cheshire region offering these services.

Our Lung Cancer Service is the largest in the region and is at the forefront of lung cancer diagnosis and early detection.
OUR SERVICES – SURGERY

Our thoracic, cardiac and aortic teams provide the full spectrum of adult cardiothoracic and aortic services excluding transplant. We provide our surgical services through 90 beds across four wards and eight operating theatres all on one site.

During 2016/17 the Surgical Division treated the highest number of patients completing over 2,170 cardiac cases and 1,300 thoracic procedures. The unit is one of the largest in the country and receives referrals both regionally and nationally for specialist procedures.

**Thoracic Surgery**

Our Thoracic Unit at LHCH continues to be one of the largest in the country. It provides comprehensive and flexible care for patients both at LHCH and in consultant-led clinics and lung-cancer MDTs throughout the region. Outcomes after lung cancer surgery are amongst the best in the UK and the Unit has one of the largest minimally invasive thoracic surgery programmes with our thoracic consultants mentoring other units around the country.

The Unit has a significant and active interest in research and are one of the co-investigators in a £1.5 million National Institute for Health Research funded VIOLET trial. The aim of the VIOLET study is to generate high quality evidence to support (or refute) the provision of video assisted thoracoscopic surgery (VATS) by comparing open surgery with minimal access VATS in a randomised controlled trial.

**Cardiac Surgery**

Our Cardiac Surgery Service provides the full range of elective and emergency services within the specialty (excluding transplant) and is a leader in a number of these areas. These include off pump coronary artery bypass grafting, as the leading centre in the country and an expansive minimally invasive mitral surgery programme that was extended in 2016/17 with the appointment of an additional surgeon. Looking forward, the service has plans to commence a robotic surgical programme and a further expansion of the minimal access surgical workforce.

As the national centre, the aortic service at LHCH is a supraregional specialist service, receiving referrals for complex elective and emergency treatment from around the country, with the best patient outcomes for complex aortic surgery. Demand for the Aortic Service continues to grow and an additional consultant was appointed in 2016/17 to support the delivery of the service and expand the consultant team. During the year, the service implemented a one-stop-shop for all new aortic patients that aims to deliver all clinical and diagnostic assessments on one day to avoid repeat visits to the organisation and improving the pathway for our patients.
LHCH has successfully provided a borough wide integrated Community CVD Service for over 6 ½ years and we are pleased to continue delivering this innovative model.

During 2015/16, the chronic obstructive pulmonary disease (COPD) service was re-commissioned to include patients with other respiratory conditions and from 1st June 2016, the service began to support those with community acquired pneumonia and bronchiectasis, before phasing in asthma and interstitial lung disease etc from February 2017.

The successes of the integrated cardiovascular and respiratory models of care continue to serve patients in the Knowsley borough of Merseyside. In partnership with Knowsley Clinical Commissioning Group, the full outcomes of the service have achieved over and above those expected, and these innovative models of care are truly leading the way with how health services need to transform to achieve the ambitions of the Five Year Forward View.

The innovations of the community service to date include:

- achieving ‘Outstanding’ with the CQC in 4 out of 5 of the key lines of enquiry
- achieving 3 consecutive green EECS reports, enabling the Community to apply for GOLD status in 2017/18
- introducing merged cardiovascular and pulmonary rehabilitation groups, to integrate care delivery
- having four abstracts shortlisted by the European Respiratory Society and British Association for Cardiovascular Prevention & Rehabilitation
- awarding three internships to support evaluation projects in conjunction with CLAHRC, to determine if the implementation of Knowsley Community Services improved access into specialist CVD / COPD services and has had an impact on health inequalities
- a Florence Nightingale research scholarship offered to a member of staff
- piloting integrated ways of working across boundaries, to improve resilience and strengthen partnerships as part of the Sustainability and Transformation Plan
- working in conjunction with local universities to offer bespoke student placements and shadowing opportunities, developing research and evidence base practice
- working towards a community specific electronic patient record
- expansion of a collaborative administration hub.

Our teams will continue working in partnership with stakeholders to deliver the best high quality care for all.
OUR CLINICAL SERVICES

Our therapy services provide diagnosis, treatment and rehabilitation for patients with a wide range of conditions.

Our therapy team comprises physiotherapists, occupational therapists, exercise physiologists, speech and language therapists and dieticians working across the hospital and within the wider community.

These teams are focused around the following areas:
- cystic fibrosis and respiratory chest medicine
- pulmonary rehabilitation
- rehabilitation to support recovery following surgery
- community services to palliative patients
- expert exercise assessment, prescription and therapy
- respiratory physiotherapy in critical care.

Our radiology team continue to support all clinical areas of the Trust, whether with initial diagnosis or follow up surveillance imaging.

The service provides a wide range of imaging modalities, including plain X-ray, ultrasound, CT and MRI. The team also play a large role within cardiology supporting the x-ray imaging in our pacing theatre and catheter labs. Our hybrid theatre houses a state-of-the-art x-ray imaging system, allowing intra-operative imaging for complex vascular procedures.

Demand on radiology services continues to increase, which has led to the appointment of a number of new staff who will help to build on and promote our innovative and unique work, as we constantly seek ways to improve the services we offer to our patients.

The next 12 months will see our radiology team continuing to raise their profile both nationally and internationally.

IN BRIEF
- Members of the CF multi-disciplinary team presented work on a range of clinical innovations at the 2017 European Cystic Fibrosis Conference in Spain.
- Our therapists supported a CF patient with a training programme to facilitate a coast-coast bike ride in 24 hours.
- Our therapists are leading an initiative called ‘PJ Paralysis’ – supporting patients to wear clothes instead of pyjamas to improve dignity and enhance recovery.
- Our teams are developing a rehabilitation programme to support long stay patients to maximise their fitness and well-being prior to surgery.
- Our dietitians have been working with lung cancer nurse specialists to improve dietetic input to lung cancer patients, and have been developing ways to improve Malnutrition Universal Screening Tool (MUST) so that all our patients are effectively identified for malnutrition. The team are also involved in a prehabilitation project to help medically unstable patients awaiting surgery.
- Our dietitians are also represented on regional and national care groups and committees.
Liverpool Heart and Chest Hospital is committed to delivering ‘excellent, compassionate and safe care for every patient, every day’, as set out in our model of Patient and Family Centred Care.

This year we have focussed on preventing falls in the hospital and also preventing delirium in our patients.

We continue to run our patient shadowing and patient story programme. Shadowing involves committed, empathetic members of staff walking with the patient through their care pathway, whilst sharing the experiences of our patients and families enables our staff to observe the care we deliver through their eyes. The information that is gathered is then used to better understand and improve identified aspects of care.

We have continued to facilitate four listening events for patients and families during the year, with the aim of truly understanding their experiences as well as highlighting any improvements required on a continuous basis.

The learning from the events is used to embed improvements, where applicable, across the hospital and within our Knowsley community services.

Anthony and his mum shared their patient and family story with us this year.
FROM HEART BYPASS TO BYPASSING RUNNERS

Former Liverpool Echo journalist Tony McDonough made a marvellous recovery following a triple heart bypass at LHCH in December 2016.

Tony, 47, had always looked after his health but after a trip abroad started developing pains in his chest. Initially thinking it could be down to all the sightseeing, he ignored the signs.

Eventually he visited his GP who referred him to a cardiac specialist at LHCH for further investigations. Tests revealed a genetic condition and Tony’s consultant confirmed he would need a bypass.

Tony said: “The pain didn’t get worse but it never went away. When I was told I needed a triple heart bypass I began to realise my own mortality and it suddenly become very real that this was serious.

“The life-saving operation carried out by Mr Mark Pullan, Consultant Cardiac Surgeon, went fantastically well.

“I spent 5 days in hospital and when I was discharged I was supported at home by my relatives. I was also advised as part of my recovery to attend cardiac rehabilitation at the Royal Liverpool Hospital, which I found to be invaluable.”

“Eventually I managed to put my running shoes back on and joined the local joggers along the waterfront, a huge achievement for me and something which without the world class care of health professionals, would perhaps never have been a reality.”

LEADING OUTSTANDING PARTNERSHIPS

Liverpool Heart and Chest Hospital is leading a region wide improvement programme for patients with cardiovascular disease (CVD).

As a key element of the Cheshire and Merseyside Sustainability and Transformation Plans (STP), a CVD programme board, comprising a wide range of stakeholders, has been established with the aim of improving health and wellbeing, care and quality, and finance and efficiency in the delivery of cardiovascular care.

The board is focusing on a range of projects, including managing risk factors, extending cardiac rehabilitation and services for patients with cardiac rhythm disorders. These projects will offer rapid improvements and focus on long term ill health prevention.
LHCH has been delivering research of the highest quality, with a focus on developing and adapting new and improved therapies, techniques and models of care, whilst maximising the potential of innovation to improve patient care.

At the centre of this activity, is the growth in both commercial and non-commercial clinical studies undertaken at LHCH. In addition, the number of high quality National Institute of Healthcare Research (NIHR) funded studies (NIHR portfolio) has also increased.

We have seen an increased number of staff being involved and leading research projects locally and nationally. Patients who participate in research and innovation projects have the opportunity to access the latest technologies and treatments. More patients were invited and participated in NIHR portfolio studies exceeding the target recruitment set by the NIHR North West Coast Clinical Research Network. Our national profile as a centre of excellence also means we are attracting patients from outside our catchment area and we are able to achieve better patient outcomes through innovation and participation in research.

The existing partnership with the Institute of Cardiovascular Medicine and Science continues to flourish and in September 2016, the 5th annual symposium was held.

Locally, academic links with University of Liverpool, John Moore’s University and Edge Hill University continue to strengthen, and the number of publications has increased significantly. Our links with Edge Hill University resulted in staff completing training and professional development modules, whilst there has also been a steady increase in staff taking up postgraduate degree courses, fellowships and research apprenticeships.

We have been successful in establishing new collaborations with external partners and have also built relationships in the areas of regenerative medicine and digital healthcare.

LHCH is also looking to establish state-of-the-art robotic heart and lung surgery.

Our collaboration with University of Liverpool, through ‘Sensor City’ as a technology hub, aims to accelerate the adoption of novel sensor-based devices.

We are working closely with North West Coast Academic Health Science Network to accelerate the adoption of innovative products. This has resulted in the development of the 3DLifePrints innovation project designed for 3D mapping of hearts of patients with cardiomyopathy, an approach that helps doctors plan treatment strategies.

LHCH research continues to receive excellent feedback from patients, meanwhile our Patient Ambassador, Keith Wilson, continues to play a key role in raising the profile of LHCH as a centre of excellence for public involvement in research and innovation.
The Education Centre has continued its commitment to be a leading provider of cardiothoracic education, supporting staff with their learning and development needs.

This year we continued our focus on clinical education. 145 professionally registered staff accessed academic modules to support their clinical roles in providing the best patient care. We have, in partnership with Edge Hill University, also developed a Post Graduate Certificate in Advanced Critical Care enabling staff in critical care to develop specialist competencies at masters degree level.

Medical Education is always at the forefront of our objectives and we strive to ensure medical colleagues are provided with a positive experience of cardiothoracic care, including a comprehensive induction, clinical training and educational supervision. Our annual appraisal visit by Mersey Deanery in November 2016 showed improvements in this area.

As part of a review of Leadership and Management Development, work has been undertaken to maximise the use of external opportunities, whilst internal programmes have been mapped to current NHS best practice to re-launch in early 2017/18.

One of the main objectives this year was to develop human factors training. The Human Factors Group was established to support this and during 2016/17, 271 staff completed basic Human Factors awareness training.

We are proud of our relationship with other NHS organisations. As such, we are a partner in a regional project reviewing how we train staff effectively to give outstanding care, whilst using resources cost effectively. This has resulted in a complete review of training and development and changing working practices of The Education Centre.

We have refocused efforts to support our bands 1-4 patient facing staff to complete the National Care Certificate. Through this Certificate, all our HCAs and support workers will be equipped with the right skills, values and competencies to ensure the delivery of excellent care. This year, 11 staff successfully achieved their Care Certificate Award and a further 34 staff commenced on the programme.

The Education Team has reviewed and developed widening access schemes for all levels.

LHCH is part of a wider partnership developing new roles for future healthcare systems. As part of this partnership, LHCH is piloting the Trainee Nursing Associate role, and supporting four members of staff through this programme. We have reviewed the support we give to apprenticeships, developing new partnerships with other NHS organisations, HEIs and provider organisations. This year, 23 new apprenticeship schemes have been accessed by staff. Further developments are underway.

The Education Centre has developed its work experience programmes with Access to Medicine, work experience for school leavers and has fostered relationships with schools and colleges. This year, 40 young people accessed these programmes. Further relationships are being developed to review traineeships, pre-employment programmes and returneeships enabling more people to access employment within healthcare.
Here at Liverpool Heart and Chest Hospital we are proud of our reputation for strong performance in delivering the best care for our patients and high quality clinical services.

We are also proud that this year’s national NHS Staff Survey, scored Liverpool Heart and Chest Hospital as the best hospital to work and receive treatment.

95% of staff recommended LHCH as a place to receive treatment, which was more than any other hospital and the highest score in the country. Furthermore, the figures also showed that LHCH was ranked top in the country, among similar organisations, in nine out of 32 key areas.

During the year, the following schemes have taken place linked to staff engagement:

- **Establishment of a Junior Doctor Forum.** This was created after receiving feedback from junior doctors and provides a good opportunity to raise both training and personal issues.
- **Establishment of the Equality and Inclusion Working Group.** This was created as a result of feedback from the staff survey.
- **Introduction of human factors training and simulation in catheter labs.** Feedback from staff highlighted an appetite for more human factors and simulation training opportunities.
- **Introduction of a talent management plan.** Following feedback from the national staff survey, we have developed a plan to introduce a talent management strategy to identify individuals who can be the leaders of tomorrow.
- **Staff Roadshows.** This year we held a number of staff roadshows, led by Jane Tomkinson, Chief Executive, allowing staff to highlight issues they wanted to see improved. A number of ideas raised have now been taken forward by the Project Management Office as part of Trust business.

Our dedicated staff and volunteers have continued to demonstrate a genuine desire to put patients and families at the heart of everything we do during 2016/17. They have also shown a commitment to each other, by recognising the contributions of colleagues via our hugely popular employee of the month scheme.

**At the end of March 2017, Liverpool Heart and Chest Hospital employed 1,599 people**

**Highest Staff Survey Response Rate in the Country – 69%**

**AN OUTSTANDING YEAR IN REVIEW**

**AN OUTSTANDING PLACE TO WORK OR VOLUNTEER**

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<thead>
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<th>Total people</th>
<th>1,599</th>
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<td>35% nursing</td>
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<tr>
<td>14% science, clinical and therapists</td>
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<td>28% non-clinical</td>
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<td>6% Support &amp; Additional Clinical Services</td>
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<td>7% doctors</td>
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Liverpool Heart and Chest Hospital was delighted to receive excellent results from the fifth annual PLACE Inspection (Patient Led Assessment of the Care Environment) which took place during 2017.

PLACE is an annual assessment of the non-clinical aspects of the patient environment, and looks at how this environment supports the privacy and dignity of patients, and its suitability for patients with specific needs e.g. disability or dementia.

PLACE aims to promote the following principles established by the NHS Constitution:

- putting patients first
- active feedback from the public, patients and staff
- adhering to basics of quality care
- ensuring services are provided in a clean and safe environment that is fit for purpose.

Each of the assessment areas were reviewed by a team comprising patients and patient groups, and were found to be above the national average for the fifth year running. This is important to us as we aim to provide the very best care environment possible for patients and families.
LHCH CHARITY – BUILDING FOR THE FUTURE

Over the past year LHCH Charity has started to reap the benefits of work of the previous 12 months with donations rising almost 30% at a time when most charities have been reporting a 14% decline in support.

The past 12 months has seen the inaugural In Living Colour run attract nearly 300 participants, our Autumn newsletter feature the very first LHCH Charity Christmas Cards – which were very well received, as were the various LHCH Charity badges which have literally flown out of the badge boxes as soon as they have been placed there.

Of course, we should not forget our Hope Mountain Hike which still raises many thousands for the charity each year and all those who chose to support us in less energetic ways – from holding coffee mornings, bake sales or just simply make a donation, we owe them all an enormous debt of thanks because without them we would not be able to continue to support the hospital in all it does.
A man whose wife underwent a life-saving heart operation at LHCH decided to show his gratitude by raising funds for the LHCH Charity.

Marc Flackett, 33 years, took part in the charity’s first ‘In Living Colour’ as his small way of saying thank you for the treatment his wife, Laura, received for a faulty heart valve and aortic aneurysm.

The Wrexham couple initially discovered the problem during a routine check-up for their IVF treatment. Laura, 30, a primary school teacher in Rhyl, was immediately referred to LHCH to have a carbon valve fitted and to have the aneurysm removed.

Marc said: “The day of the operation was one of the hardest and most worrying days of my life.

“But thanks to the skill of her aortic surgeon, Miss Deborah Harrington, and the rest of the surgical team, Laura came through the procedure successfully – although we found out later on that the aneurysm had actually caused a small tear which made the operation even more delicate.”

Laura was in hospital for 10 days, but as soon as she was on the road to recovery Marc knew he wanted to show his gratitude and decided to sign up for the charity event.

He said: “When I heard about In Living Colour, I thought it sounded like it would put smiles on faces and so I signed up a team of four with my brother, his girlfriend and a work colleague.

“It was a perfect way for us to show our thanks!”
SHARING OUR EXPERTISE

BBC One comes to LHCH
TV broadcaster Angela Rippon visited LHCH to film a BBC One health programme about the use of aspirin with heart patients. As well as hearing from patients before and after their procedures, the programme featured extensive interviews inside and outside the catheter laboratories with Dr Raph Perry, Medical Director, and further discussions with Danny Forrest, Deputy Chief Pharmacist, about the history, usage and prescribing of aspirin.

Improving care for coronary artery disease patients
LHCH clinicians now have access to non-invasive technology (HeartFlow FFRCT Analysis) that helps them identify the appropriate treatment approach for patients with coronary artery disease. The HeartFlow Analysis provides a definitive understanding of both the anatomical and functional findings without any additional testing or risk for patients. Here at LHCH we anticipate this to transform the quality of care we can provide for patients, ensuring the most accurate diagnosis and the best treatment plan as well as reducing the need for invasive coronary angiography – a procedure not without its risks. This work was featured by ITV News.

National Guardian, Dr Henrietta Hughes, visited LHCH
We were delighted to welcome Dr Henrietta Hughes, National Freedom to Speak Up Guardian, recently. It was an opportunity to hear about the development of Freedom to Speak Up networks around the country, as well as to discuss the steps that we have taken as a trust to launch and embed a culture of openness. Dr Hughes spent time visiting some of our clinical areas, speaking with staff and finding out more about the important role played by our own Freedom to Speak Up Champions.

Surgical expertise shared
LHCH consultant cardiac surgeons, Mr Mark Pullan and Mr Andrew Muir, welcomed colleagues from Papworth Hospital in Cambridgeshire to provide specialist off-pump cardiac surgery training. This technique offers lower risk surgery for higher risk patients with as good a result if not better than traditional on-pump surgery. LHCH is the most prolific off–pump cardiac unit in the country, and as such we are in a unique position of being able to provide this specialist training.

Chinese clinicians welcomed
During the year we were delighted to welcome clinical colleagues from Xi’an Taikang Hospital Management Company in China to discuss best practice in healthcare and surgery and to explore opportunities for sharing learning in the future.
As a foundation trust we are governed by an elected council of governors and independently regulated by NHS Improvement. We have more than 10,200 members with whom we engage regularly to help develop our strategy and service planning.

The role of the Board of Directors is to set the strategy and organisational culture and be responsible for all aspects of our operation and performance. The Council of Governors provides a key role in ensuring local accountability for the Board’s decisions to members and the public.

In 2016/17, our Board comprised six Non Executive Directors and five Executive Directors, supported by three Associate Directors (non voting).

Our Board of Directors and the Council of Governors are committed to the highest standards of corporate governance. The way our governance operates is set out in our Trust’s constitution, available on our website www.lhch.nhs.uk

Our Council of Governors has responsibility for representing the interests of the members, partner organisations and members of the public in discharging its statutory duties.

To see a full list of our Board of Directors and Governors, visit www.lhch.nhs.uk

Non Executive Directors (as at 31/03/17)
Neil Large, Chair
David Bricknell, Deputy Chair/Senior Independent Director
Mark Jones, Non Executive Director
Julian Farmer, Non Executive Director
Marion Savill, Non Executive Director
Professor Lawrence Cotter, Non Executive Director
Nicholas Brookes and Darren Sinclair joined the Trust as Non Executive Directors following the retirement of Professor Cotter in June 2017

Executive Team (as at 31/03/17)
Jane Tomkinson, Chief Executive
Dr Raph Perry, Deputy Chief Executive & Medical Director
Sue Pemberton, Director of Nursing & Quality
Tony Wilding, Director of Strategic Partnerships & Chief Operating Officer
Claire Wilson, Chief Finance Officer
Dr Mark Jackson, Director of Research & Informatics
Lucy Lavan, Director of Corporate Affairs
Joanne Twist, Director of Workforce Development
OUR MEMBERS

We believe our members make a real contribution to improving the health of the local communities and our emphasis is on encouraging an active and engaged membership, as well as continuing to engage with members of the public.

We are committed to ensuring that members are representative of the population we serve. Anyone living in England and Wales over the age of 16 is eligible to become a public member. The public constituency is divided into the following four geographical areas:

- Merseyside
- Cheshire
- North Wales
- Rest of England and Wales.

All permanent members of staff and those who have worked for our Trust for more than twelve months are members on an ‘opt out’ basis.

Members support LHCH in many ways.

Having their say on quality account priorities and providing key feedback through the regular members’ survey.

Attending our annual programme of member events, including Annual Members’ Meeting and Annual Health Event and Open Day.

Keeping informed regarding the latest news and hospital developments through our Members Matters newsletter.

Engaging with the Council of Governors, enabling them to effectively represent their views for example through patient and family engagement events.

Standing for election or voting in elections to the Council of Governors.

Attending meetings of the Council of Governors.

To find out more about becoming a member at our Trust, please email: membership.office@lhch.nhs.uk or call 0151 600 1410.
As the financial context in which we operate continues to become more and more challenging, in 2016/17 Liverpool Heart and Chest Hospital delivered a normalised deficit of £392k. This was in line with the requirements set by our regulator, NHS Improvement.

We have delivered efficiency improvements of 2.7%, alongside the normalised deficit of £392k. This has been done whilst maintaining the highest levels of quality and safety in the services we provide.

Good financial management and performance has enabled LHCH to continue investing in the equipment, buildings and environment necessary to provide the best possible patient care.

In summary, we reported a normalised deficit for the year of £0.4m.

This included total income of £128.6m (+), total operating expenses of £125.1m (+), financing costs of £2.3m (+), and exceptional items (excluded from the normalised position) of £2.0m (+).

During 2017/18 we plan to spend £5.4m on our capital programme, which will include:

- £1.4m to purchase the first Cardiac Surgery Robot in the UK
- £0.4m to complete the replacement of our bedside monitoring equipment – total spend £1.3m
- £1.3m for the replacement of medical equipment
- £1.3m for IT investment and replacement
- £1.0m for the development and maintenance of the estates infrastructure.

Financial statements for our Trust are independently audited by Grant Thornton UK LLP, who issue a report to the Council of Governors and Board of Directors with their opinion of the accounts.

Grant Thornton reported that, in their opinion, the 2016/17 financial statements give a true and fair view of the financial position of our Trust and have been properly prepared in accordance with the NHS Foundation Trust Annual Reporting Manual and the directions under paragraph 25(2) of Schedule 7 of the National Health Service Act 2006.

To access a full set of our annual accounts, please visit the About Us section of our website: www.lhch.nhs.uk or call: 0151 600 1616.
## Consolidated Statement of Comprehensive Income

<table>
<thead>
<tr>
<th></th>
<th>Group 2016/17</th>
<th>Group 2015/16</th>
<th>Trust 2016/17</th>
<th>Trust 2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating income from patient care activities</td>
<td>£000</td>
<td>£000</td>
<td>£000</td>
<td>£000</td>
</tr>
<tr>
<td>Other operating income*</td>
<td>117,702</td>
<td>114,802</td>
<td>117,702</td>
<td>114,802</td>
</tr>
<tr>
<td>Total operating income from continuing operations</td>
<td>128,822</td>
<td>123,126</td>
<td>128,553</td>
<td>122,904</td>
</tr>
<tr>
<td>Operating surplus/(deficit) from continuing operations</td>
<td>3,394</td>
<td>665</td>
<td>3,458</td>
<td>905</td>
</tr>
<tr>
<td>Finance income</td>
<td>39</td>
<td>59</td>
<td>18</td>
<td>36</td>
</tr>
<tr>
<td>Finance expenses</td>
<td>(28)</td>
<td>(36)</td>
<td>(28)</td>
<td>(36)</td>
</tr>
<tr>
<td>PDC dividends payable</td>
<td>(2,264)</td>
<td>(2,193)</td>
<td>(2,264)</td>
<td>(2,193)</td>
</tr>
<tr>
<td>Net finance costs</td>
<td>(2,253)</td>
<td>(2,170)</td>
<td>(2,274)</td>
<td>(2,193)</td>
</tr>
<tr>
<td>Surplus for the year from continuing operations</td>
<td>1,140</td>
<td>(1,514)</td>
<td>1,183</td>
<td>(1,297)</td>
</tr>
</tbody>
</table>

### Other comprehensive income

**Will not be reclassified to income and expenditure:**

- Impairments: (1,403) (1,579) (1,403) (1,579)
- Revaluations: 1,648 2,259 1,648 2,259

**May be reclassified to income and expenditure when certain conditions are met:**

- Fair value gains/(losses) on available-for-sale financial investments: 80 (23)

Total comprehensive income/(expense) for the period: 1,465 (857) 1,428 (617)

Surplus/(deficit) for the period attributable to:

- non-controlling interests: - - - -
- the Foundation Trust: 1,140 (1,514) 1,183 (1,297)

Total comprehensive income / (expense) for the period attributable to:

- non-controlling interests: - - - -
- the Foundation Trust: 1,465 (857) 1,428 (617)

## Statement of Financial Position

<table>
<thead>
<tr>
<th></th>
<th>Group 31.03.17</th>
<th>Group 31.03.16</th>
<th>Trust 31.03.17</th>
<th>Trust 31.03.16</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Non-current assets:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intangible assets</td>
<td>665</td>
<td>707</td>
<td>665</td>
<td>707</td>
</tr>
<tr>
<td>Property, plant and equipment</td>
<td>78,666</td>
<td>75,460</td>
<td>78,666</td>
<td>75,460</td>
</tr>
<tr>
<td>Investments in associates and joint ventures</td>
<td>37</td>
<td>18</td>
<td>37</td>
<td>18</td>
</tr>
<tr>
<td>Other investments</td>
<td>607</td>
<td>527</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total non-current assets</strong></td>
<td>79,975</td>
<td>76,712</td>
<td>79,368</td>
<td>76,185</td>
</tr>
</tbody>
</table>

| **Current assets:** |               |               |               |               |
| Inventories         | 3,746         | 3,004         | 3,746         | 3,004         |
| Trade and other receivables | 7,717 | 6,543 | 7,831 | 6,715 |
| Non-current assets for sale | 5 | 37 | 5 | 37 |
| Cash and cash equivalents | 5,123 | 8,216 | 4,868 | 7,856 |
| **Total current assets** | 16,591 | 17,800 | 16,450 | 17,612 |

| **Current liabilities:** |               |               |               |               |
| Trade and other payables | (16,038) | (16,134) | (16,925) | (16,117) |
| Other liabilities | (789) | (393) | (789) | (393) |
| Borrowings | (394) | (142) | (394) | (142) |
| Provisions | (582) | (1,273) | (582) | (1,273) |
| **Total current liabilities** | (18,703) | (17,942) | (18,690) | (17,925) |

| **Total assets less current liabilities** | 77,863 | 76,570 | 77,128 | 75,872 |

| **Non-current liabilities:** |               |               |               |               |
| Other liabilities | - | (608) | - | (608) |
| Borrowings | (653) | (261) | (653) | (261) |
| Provisions | (125) | (81) | (125) | (81) |
| **Total non-current liabilities** | (778) | (950) | (778) | (950) |

| **Total assets employed** | 77,085 | 75,620 | 76,350 | 74,922 |

**Financed by:**

- Public dividend capital | 63,322 | 63,322 | 63,322 | 63,322 |
- Revaluation reserve | 14,167 | 14,497 | 14,167 | 14,497 |
- Income and expenditure reserve | (1,139) | (2,897) | (1,139) | (2,897) |
- Charitable fund reserves | 735 | 698 | - | - |

| **Total taxpayers’ and others’ equity** | 77,085 | 75,620 | 76,350 | 74,922 |