



A YEAR IN REVIEW
2022-23

“Once again, while we are proud of all that has been achieved this year, we will not be complacent and look forward to delivering outstanding care, innovative services and collaborative work throughout the year ahead.”

<p>Welcome from our Chair and Chief Executive</p> <p>PAGES 4 & 5</p>	<p>This year's highlights</p> <p>PAGE 6</p>	<p>Our Trust in brief</p> <p>PAGE 7</p>
<p>Rachel's story</p> <p>PAGE 8</p>	<p>Patient and family focus</p> <p>PAGE 9</p>	<p>Shaping services and leading the way</p> <p>PAGES 10 & 11</p>
<p>Our services</p> <p>PAGES 12 & 13</p>	<p>Digital Excellence</p> <p>PAGE 14</p>	<p>Frank's story</p> <p>PAGE 15</p>
<p>Research Innovation at LHCH</p> <p>PAGES 16 & 17</p>	<p>Life at LHCH – our staff agree we're TOP</p> <p>PAGE 18</p>	<p>LHCH Charity</p> <p>PAGE 19</p>
<p>Workforce education at LHCH</p> <p>PAGES 20 & 21</p>	<p>Governance at LHCH</p> <p>PAGE 22</p>	<p>Our members matter</p> <p>PAGE 23</p>
<p>Finances in review</p> <p>PAGES 24&25</p>		



Welcome

from our
Chair and
Chief Executive

We are delighted to introduce our **Year in Review** for 2022/23.

The last 12 months has been another exceptionally busy time for everyone at Liverpool Heart and Chest Hospital with the ongoing challenges created by the COVID-19 pandemic, combined with the return of patient activity levels up to, and beyond, pre-pandemic levels.

We understand that one of the biggest challenges in 'returning to normal' has been ensuring that all our patients are treated as quickly as possible. We don't underestimate what a challenge this has been, and we appreciate the work carried out by so many teams in the background, to provide safe and timely care for all our patients this year.

The quality of care provided by our staff is something we have always prided ourselves on, and therefore we were once again delighted that our patients recognised this in the National Inpatient Survey in September 2022. Being rated as the top hospital in the north of England and one of the best hospitals in the country for 'overall patient experience' is fantastic recognition for all our staff.

It was also equally pleasing that in this year's National NHS Staff Survey, published in March 2023, our staff rated LHCH as the top Trust in the country for a 'place to work' and 'staff engagement'. They also recognised our Trust in the top three in the country for 'care is our top priority' and 'a place for treatment'. It is hugely satisfying that both our patients and our staff recognise the exceptional quality of care that is provided by LHCH. However, as a Trust we are always eager to improve, innovate and collaborate with others to share our expertise wherever possible. This year has been no different.

In April 2022 we joined together with University of Liverpool to open a new mobile spirometry unit (pictured above right) that has been used by the LHCH Respiratory Team to provide comprehensive diagnostic tests and services for patients with a range

of respiratory conditions both in the hospital and in the local community. In summer 2022, LHCH collaborated with Heart Research UK to launch a new project – the Healthy Families Heart Project – to improve the heart health of the local Liverpool population.



LHCH has continued to play an active role with our partners in the Liverpool Clinical Research Facility to look at ways of addressing the needs of the local population, which has some of the highest rates of cancer and heart disease in the country. Furthermore, our clinical teams at LHCH have been working closely with colleagues at Liverpool University Hospitals to develop plans for a single cardiology service in Liverpool, to transform care for patients.

In addition, as a proud partner of the Cheshire & Merseyside Integrated Care System, LHCH has continued to work collaboratively with all of our healthcare partners this year. We have a long history of collaborating with other local hospitals, in the best interests of patient care and improving outcomes, and we know many LHCH teams, departments and individuals, both clinical and non-clinical, provide outstanding leadership and support to other local NHS services. However, we are also working actively with other local trusts to deliver the opportunities highlighted in the Liverpool Clinical Services Review,

and to find more effective and efficient ways of working together to improve clinical pathways for patients and support for staff.



It's also pleasing to note areas of progress made at LHCH in 2022/23. We have continued to develop services and improve the facilities from which we provide care to our patients and families. This has included taking delivery of a new MRI scanner (above) to improve our diagnostic technology and imaging equipment. We have introduced endoscopic vein harvesting as part of our coronary artery bypass grafting procedures to improve patient care, and our major project to upgrade our catheter laboratories is expected to be completed later this year.

We know there will be many more challenges ahead in the coming 12 months, but as always, we are 100% confident that our outstanding team will respond in the way in which they always have done – providing excellent, compassionate, and safe care for every patient, every day.

It's also important to note that behind the scenes, our outstanding team includes our Council of Governors who give their time voluntarily to support the Board of Directors on a range of issues, and our many dedicated volunteers. They give their time each week to make a significant difference to our patients and families, as well as to our staff, and we are so grateful for all their invaluable contribution at LHCH.

Once again, while we are proud of all that has been achieved this year, we will not be complacent and look forward to delivering outstanding care, innovative services and collaborative work throughout the year ahead.

Val Davies

Val Davies, Chair



Jane Tomkinson

**Jane Tomkinson OBE,
Chief Executive**



This year's highlights

LHCH was rated as one of the **TOP two hospitals in the country** and the **BEST in the North West** for 'overall patient experience' according to the NHS Inpatient Survey, published in September 2023 (see p10).



LHCH was rated the **top Trust in the country** for a 'place to work' and 'staff engagement' and was in the top three trusts in the country for 'care is our top priority' and 'a place for treatment', in the NHS Staff Survey 2022, published in March 2023.



LHCH won the **Excellence in Public Service HR Award** at the Personnel Today Awards 2022 in November 2022.

LHCH was a shortlisted finalist for Trust of the Year and the Staff Wellbeing Award at the HSJ Awards in November 2022.



LHCH was a shortlisted finalist for **Excellence in Employee Engagement** at the HPMA Awards 2022.

LHCH Consultant Cardiologist, Professor Greg Lip, was awarded the **2023 Distinguished Scientist Award-Clinical Domain** by the American College of Cardiology in March 2023.



LHCH was named **winner of the Hospital Security Award** in the 2022 Health Business Awards in December 2022.

LHCH was awarded the **NHS Pastoral Care Quality Award** in January 2023 and also received a letter of thanks from the Chief Nursing Officer, Dame Ruth May.



All minimum standards of care met or exceeded as defined by the Department of Health.



LHCH delivered **strong performance against financial and operational targets** for 2022/23

British actor, **Daniel Craig**, was announced as a **new ambassador** for Liverpool Heart and Chest Hospital Charity in January 2023.



Our Trust in brief

64,190 outpatient appointments
32,077 virtual appointments

13,579 inpatient spells
2,073 cardiac surgery patients
8,451 cardiology inpatients
647 respiratory inpatients
1,920 thoracic surgery inpatients

1,956 staff
(524 males and 1,432 females)

£231m turnover

181 inpatient beds

9 operating theatres

1 Da Vinci robot

5 catheter laboratories

10 community locations

1 day case unit

2,800,000 population served by LHCH

Largest single site heart and chest hospital

Care Quality Commission
2
'outstanding' CQC ratings

One vision
– 'to be the best'

- 6** strategic objective themes
- 1** Delivering world class care
- 2** Advancing quality and outcomes
- 3** Increasing value
- 4** Developing people
- 5** Leading through collaboration
- 6** Improving population health

Rachel's story

At 32 weeks pregnant, to hear the words, 'heart attack, heart failure, rare heart condition and surgery', was a frightening prospect. But that was the situation that 32-year-old and mum of two, Rachel was facing.

After experiencing some discomfort in her chest, Rachel went to her local A&E and was stunned to be told she'd had a heart attack and was showing signs of heart failure. Rachel was immediately referred to LHCH and her clinical team discovered she had a rare heart condition, called Anomalous Right Coronary Artery.

Rachel said: "To say I was petrified was an understatement. It almost felt my world had stopped.

"The LHCH team were clear I couldn't go home and wanted to monitor my heart very closely until a plan could be put together for the rest of my pregnancy.

"In the end they decided the best solution was to transfer me to hospital in Manchester where their cardiac team could keep my heart under observation, and their specialist obstetric team could deliver my baby safely via C-section."

Rachel said the challenges only got harder, as immediately after giving birth, she was moved to intensive care for 5 days, while her daughter was taken to the post-natal ward.

"It was a really difficult time and the mix of emotions was unreal. I was so happy we were both alive, but the upset of her going off without me was heart-breaking. But eventually, I got the news I wanted. I could go home and was referred back into the care of LHCH."

However, a further challenge arrived within days of Rachel coming home as the first covid lockdown arrived.

"After being in intensive care just days earlier, surrounded by specialists and hooked up to machines for weeks, to then be isolated at home and told to shield because

of my heart, was actually pretty scary. It was almost like a battle with my mind.

"But thanks to the care, support and reassurance I received from everyone at LHCH, especially the Psychology Team, I was able to slowly build my confidence and realised I still had a life to live. Throughout covid, LHCH were my lifeline and I'll always be indebted to them for the emotional support they gave me, and for making me realise that I could get back to full fitness and return to running.

"That's why I wanted to show my gratitude earlier this year by running a half marathon and raising money for LHCH Charity, so that they can support others like me."



Patient and family focus

Quality of care is at the heart of everything we do. Patients, families, and the public have a greater expectation than ever before about the degree to which they are involved in their care and in how NHS trusts design and deliver services.

At LHCH we recognise that a positive experience during care can lead to positive clinical outcomes. Engaging with our patients, families and carers, enables an understanding of their experiences and learning from them in order to improve service delivery, resulting in an environment where individual patients feel supported and cared for.

Our ambition is to create a culture of continuous improvement and empowerment that is both patient-centred and safety focused. Our Patient and Family Experience Vision is based on 6 steps to ensure quality and safety.

LHCH has many ways of capturing patient experience, and during the year we engaged with patients, families and staff to improve the quality of care we provide. In the last 12 months we have been able to resume

our post-covid patient engagement events, supported by the Executive Team, Non-Executives, Governors and multi-disciplinary staff, while Healthwatch undertook a Listening Event. This engagement helped to shape our quality priorities for the year.

The sixth step of our patient vision focuses on Discharge and Aftercare, to ensure that the patient and their family receive on-going support. Since 2020, follow up calls have been made to patients following their discharge home. Patients who have had an overnight stay receive a follow up call post discharge home, to check on their wellbeing, levels of support at home and to answer any concerns or worries they may have. The response to the calls has been overwhelmingly positive and patients have expressed their gratitude for the call. Key themes for compliments have been that patients have received a high standard of safe care, delivered by a kind, caring and responsive team.

Some of the benefits of these calls has been that the caller has access to be able to escalate concerns, as well as the ability to resolve issues at the time of the call. In addition, patient experience is gathered, and learning is shared.

Our four key priorities in 2023/24

- 1 **Discharge Medication**
We will aim to ensure that the patient and their family receive their medication and have a safe and timely discharge.
- 2 **Availability and uptake of nutritional snacks**
We will aim to ensure patients receive the optimal nutritional support to enhance their recovery and wellbeing.
- 3 **Discharge equipment**
We will aim to ensure patients receive a safe and timely discharge and are provided with the equipment they require at home.
- 4 **Smoking cessation**
We will aim to ensure patients are offered support during their stay and are signposted to community support on discharge.



Shaping services and leading the way



TOP hospital

LHCH is one of the best hospitals in the country to receive care and to work according to the results of this year's national NHS Adult Inpatient Survey 2022 (published in September 2023).

It showed that LHCH was rated one of the TOP TWO trusts in the country for 'overall patient experience, and the BEST in the North West once again.

The results also recognised LHCH as SECOND in the country for three full sections: Hospital and Ward; Nurses; Respect and Dignity – and in 15 out of 51 survey questions, LHCH

was recognised as one of the TOP THREE trusts in the country.

Jane Tomkinson, Chief Executive, added: "We're very proud of these results. It's pleasing to know that patients have experienced such good care at LHCH, and we are equally pleased to know they place so much confidence in the teams giving them care. This is something we will never take for granted, and is a result of our outstanding culture and teamwork at LHCH."

Remote cardiac monitoring

LHCH is now using remote patient monitoring to pick up on deteriorations in patients waiting for cardiac surgery. Mr Bil Kirmani (left), consultant cardiac surgeon, leads the cardiac surgery telehealth project at LHCH, supported by Mersey Care and remote monitoring providers Docobo.

This nationally funded project was set up to explore communications and

reassurance for patients as they wait for surgery, and to address patient safety during the waiting period to spot any signs of deterioration, allowing patients' operations to be based on clinical need.

Mr Kirmani said: "Remote monitoring allows us to reassure patients they are being given regular check-ups, without them having to go into a hospital clinic or a GP surgery. It allows surgeons to review patients much more closely than ever before, ensuring those whose needs change on the waiting list can be picked up and treated sooner."



AI and technology in patient care

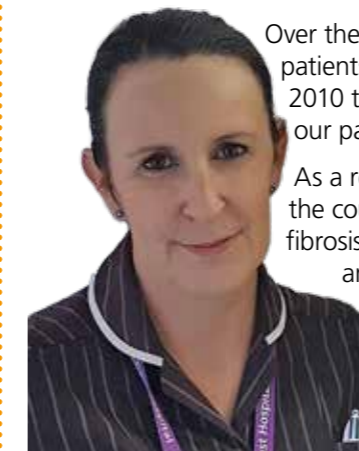
This year Professor Mark Field, Consultant Aortic and Cardiac Surgeon, talked to ABB's Robot Podcast about the effects of transcranial doppler ultrasound.

Professor Field shared how this innovative new system, which was generously funded by LHCH Charity, ensures even better and safer patient care for those individuals undergoing highly specialised aortic arch surgery at LHCH.

You can listen to this podcast by capturing the QR code here:



Leading cystic fibrosis diabetes care



Over the last ten years, LHCH has seen a growth in the number of patients with cystic fibrosis diabetes. At LHCH, we set up a service 2010 to specifically meet this demand and by 2023, over a third of our patients treated for cystic fibrosis, had cystic fibrosis diabetes.

As a result, the team has attracted attention from hospitals across the country interested in replicating our service model. Our cystic fibrosis diabetes clinic runs alongside our general cystic fibrosis clinic and plays an important part in the work of the wider multi-disciplinary team.

Since establishing this service, Paula Dyce, Advanced Nurse Practitioner (left), has joined forces with counterparts at Birmingham and Manchester Hospitals to set up a new national Cystic Fibrosis Diabetes Committee, which she now chairs.

"We're delighted that new guidelines for Cystic Fibrosis Diabetes have now been published, after gathering information and best practice from across the UK and beyond - to update guidance first published in 2004."

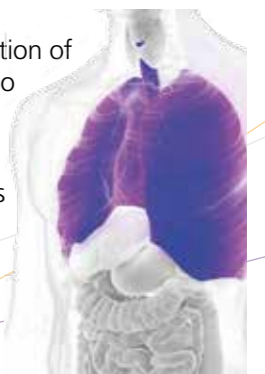
UK lung cancer screening

Pioneering research in Liverpool, including at LHCH, has contributed to new government recommendations for a national lung cancer screening programme.

The UK National Screening Committee has recommended the introduction of targeted screening for 55 to 74-year-olds with a history of smoking who are at higher risk of lung cancer.

Lung cancer is Britain's most common cause of cancer death, with smoking the most common cause. Although late-stage lung cancer has a poor prognosis, early-stage cancer can be successfully treated with a good clinical outcome if diagnosed early.

Over the past 30 years, Liverpool has played an essential role in establishing the potential of lung cancer screening for early diagnosis in the UK.



Our services

Clinical Services

Each of our divisions is also supported by outstanding clinical services in order to provide the very best care for our patients and families.

Our clinical services include:

- Critical care
- Outpatient services
- Pharmacy
- Radiology
- Therapies
- Clinical health psychology
- End of life / specialist palliative care
- Community diagnostic centre collaboration with Liverpool Women's Hospital

Community Services

Our Knowsley Community Services are delivered from multiple locations across the borough, providing high quality evidence-based care to treat people with cardiac and respiratory conditions. We also provide services in Crewe, Chester, Southport and Formby.

Our services include:

- Consultant-led diagnostic clinics for cardiovascular and respiratory diseases
- Community cardiology
- Asthma Clinics
- Optimisation clinics
- Rapid Response service for patients with chronic lung disease (with telephone advice line overnight)
- Facilitation of admission avoidance with staff located in the local district general hospital emergency department
- Early supported discharge
- Smoking cessation
- Annual review for respiratory patients
- Covid and respiratory virtual wards, monitoring and caring for patients at home
- Winter warmth & Fuel Poverty clinics
- Community stroke rehabilitation service (including stroke Early Supported Discharge) and stroke health and social care reviews
- Community heart failure nursing service; nurse led clinics and home visits
- Cardiovascular and pulmonary rehabilitation (Liverpool and Knowsley)
 - Knowsley ankle brachial pressure index (ABPI) clinics
 - Urgent chest clearance physiotherapy service
 - Home oxygen service – assessment and review (Liverpool and Knowsley)
 - Breathlessness management
 - Palliative care, symptom control & advanced care planning provision
 - Psychology service

Medicine

Clinical teams at LHCH provide diagnosis, treatment and care for patients with a wide range of complex heart and chest conditions. Our cardiology and respiratory medicine teams deliver the following:

- Interventional and diagnostic cardiology including cardiac catheters, percutaneous coronary intervention (PCI), including primary (emergency) PCI patients suffering acute myocardial infarction
- Transcatheter valve and structural intervention including percutaneous aortic valve replacements (TAVI)
- Congenital heart disease – outpatient appointments and interventional procedures
- Implantable electrical devices – diagnostic monitors, pacemakers and defibrillators – with remote monitoring of patients with implanted devices
- Electrophysiology studies including ablation procedures for atrial and ventricular arrhythmias
- Inherited cardiac conditions: diagnosis, treatment, genetic testing and family screening.
- Cardio-oncology services
- Cardiac imaging and diagnostics, including echocardiograms, stress studies, coronary CT scans and cardiac magnetic resonance studies
- Cystic fibrosis monitoring and treatment
- Lung cancer screening, diagnosis and treatment
- general chest medicine
- Inflammatory lung disease outpatient service
- Respiratory physiological measurements

We provide our hospital-based services through inpatient beds, our renowned day case lounge (Holly Suite), cardiac catheter labs, a pacing theatre and an endoscopy facility.

A major programme of works to upgrade our catheter laboratories is expected to be completed before the end of 2023. This will signal a significant achievement with the delivery of six new state of the art labs that will deliver the highest quality care for years to come.

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 LHCH is at the forefront of new treatments and technologies.

Surgery

Our outstanding surgical teams provide the full spectrum of adult cardiothoracic and aortic services for patients across the North West and beyond. We provide these services across four wards and nine operating theatres all on one site.

- Cardiac surgery provides excellent outcomes for patients and continues to innovate services with a wide portfolio of minimally invasive procedures.
- Patients have benefited from the introduction of endoscopic vein harvesting (EVH) – a new minimally invasive approach to vein conduit harvesting, reducing pain and the risk of infection and improving patient experience.
- Our aortic service line has joined with Liverpool University Hospitals' vascular service to create Liverpool Cardiovascular Surgery with weekly joint theatre lists at LHCH.
- Our mitral service continues to flourish with improving repair rates and minimal access approaches including use of robotic surgery. Our minimal access aortic valve service also continues to grow.
- A range of coronary artery revascularisation procedures are offered including on and off pump CABG, and also robotic LIMA to LAD surgery.
- Our Thoracic Unit at LHCH is one of the largest in the country and has expanded with the roll out of the Targeted Lung Health Check programme. We provide comprehensive and flexible care at LHCH, and in consultant-led clinics and lung-cancer MDTs across the region.
- Outcomes after lung cancer surgery are among the best in the UK. We have one of the largest minimally invasive thoracic surgery programmes, and our thoracic consultants mentor other units around the country.
- Our Diabetes and Aortic Nurse Practitioner services are expanding.
- A new remote monitoring service allows clinicians to pick up deterioration in patients awaiting cardiac surgery. With the ability to monitor patients at the touch of a button, this innovation provides safety and reassurance for patients in their own homes.
- Our robotic surgery programme has made steady progress, although volume has been reduced by Covid, as with other elective surgery. Thoracic robotic patients benefit from reduced length of stay, reduced blood loss, small incisions and less pain. Furthermore it allows patients who would not have previously been suitable for minimally invasive approaches, to undergo successful treatment.



Digital Excellence

Frank's story

Over the last year, the team has continued delivering our 'Digital Excellence' strategy, which sets out LHCH's digital ambitions and deliverables. The strategy is grounded in delivering the basics well for staff and patients and is steeped in pioneering innovation.

During 2022/2023, a number of digital initiatives have been implemented at LHCH, realising many benefits. Within the safety programme, closed loop medications has been introduced and has contributed to a reduction in medication errors across inpatient areas.

One highlight of the year was achieving EMRAM Level 6 from the Healthcare Information and Management Systems Society (HIMSS), an external accreditation used to assess digital maturity. Electronic consent has also been introduced to support a safer consenting process and introduce efficiencies. Isla Care, a platform that supports the remote monitoring of patients has been rolled out to support the Community Stroke and Tissue

Viability teams, allowing patients to be monitored without bringing them into clinic.

Digital communications has expanded across LHCH to replace paper correspondence, significantly reducing the administration requirements to prepare and send letters. Imprivata has been introduced to support staff with faster sign in across all systems. Meanwhile LHCH became the first centre in the UK to implement CartoNet and clinician feedback has been very positive following the deployment. The cloud-based storage solution allows teams to review, analyse and share cases stored remotely. Previously, any such case work would need to be completed using the systems within the on-site labs.

Several technical projects have also been completed to ensure the right foundations are in place to support further digital transformation. This has included significant investment in cyber security, to keep our information secure. A complete device refresh was also completed to ensure staff had the right tools to support them.

Looking ahead, the team are working towards EMRAM Level 7 accreditation. We actively participated in the 'What Good Looks Like' and frequent engagement with the national teams occurred to ensure digital programmes are aligned with national priorities. Furthermore, we will continue to fully exploit remote monitoring technology and wider digital platforms to deliver effective and efficient care.

72-year-old Frank has never shirked a challenge. But the successful businessman, football club chairman, and Guinness World Record holder, who's rowed solo across the Atlantic, sailed half way round the world, completed 11 marathons, and raised more than £1million for charity... was faced with perhaps the biggest challenge of his life last year.

Frank discovered he needed major heart surgery at LHCH to repair his damaged aorta.

"My aorta should have been about 25mm, but tests showed that it was 49mm and because my blood pressure was also high, my consultant, Mr Nawaytoun, told me I needed

urgent surgery. Within 4 weeks, I was back for my operation.

"I have a background in engineering and like to know how things work, so I did plenty of research to understand exactly how they were going to replace the damaged section of my aorta. I was fully aware of the risks, but I also had my mind set on rowing the Atlantic for a second time. The only way I'd be able to do it, was by having the surgery and getting myself fit and healthy again.

"I was in LHCH for 9 days and the care I received was absolutely brilliant. The staff were so knowledgeable and professional, and they were always on hand to check I was ok.

"It was also reassuring that my wife was able to stay on site for the duration of my treatment. It meant she didn't have to drive back and forth from where we live, and she was close by to help with my recovery and make sure I was ok – it made a big difference.

"Since being discharged, my recovery has gone from strength and strength – probably quicker than I thought, and I can feel myself getting fitter and stronger all the time. It means I'm one step closer to my next ocean challenge."

On 12th December 2023, Frank plans to take on the 3,000-mile solo Talisker Whisky Atlantic Challenge, an annual race known as 'the world's toughest row', which sees teams and individuals row from San Sebastian on La Gomera to Antigua.

Frank added: "I'm so grateful to Mr Nawaytoun and all the brilliant team at LHCH who gave me such good care and who have made it possible for me to fulfil this next big ambition."



Research and Innovation at LHCH

Research is an integral component of LHCH's core activities, providing the opportunity to generate new knowledge and test new treatments or models of care to improve service quality. Our engagement with clinical research demonstrates our commitment to testing and offering the latest medical treatments and techniques.

It is well documented that research active trusts benefit from the 'research effect' – providing a better care experience, delivering improved patient outcomes, and finding it easier to recruit and retain staff. They also benefit from the competitive advantage gained through improved knowledge management and especially the ability to use and generate research knowledge.

As a specialist provider, LHCH can undertake more complex clinical research trials, drawing from a much smaller group of patients compared to secondary care providers when offering participation in trials to our patients.

We are dedicated to improving access to research for all our patients and we are pleased to have a good research portfolio for respiratory and cardiology. We also communicate research updates both internally and externally on a weekly basis.

Research achievements

In 2022/23, we recruited 927 participants across five specialities. While this is less than some recent years, a decrease was expected – in part due to LHCH previously sponsoring a very high recruiting trial, which significantly raised recruitment numbers.

28 new studies opened in 2022/23

17 Cardiovascular

4 Respiratory

3 Cancer

3 Surgery

1 Stroke

In total, 53 studies were open in 22/23, either in recruiting or follow-up phase.

Liverpool Clinical Research Facility

In September 2022, LHCH, Liverpool University Hospitals NHS Foundation Trust, and Clatterbridge Cancer Centre formally commenced an NIHR Clinical Research Facilities collaboration.

Each partner has long-standing relationships with academia and industry, and the collaboration will allow early phase studies in cancer, heart disease and infection. The aim is to address the collective needs of our local population and provide better, safer medicines. The combined facilities will allow us to attract cardiothoracic and cancer research up north – in line with health and population needs, and increased benefits to patients and staff.

We are well on our way to achieving our first-year objectives.

Innovation at LHCH

LHCH is developing a culture of innovation for improving the quality of care and patient experience which has led to a solid portfolio of innovation activity. LHCH works closely with the Innovation. Acknowledging the importance of innovation, it has been incorporated into our five-year strategy and forms one of our six core strategic objectives – sitting within the portfolio of the Innovation and Strategic Partnerships team.



Life at LHCH – our staff agree we're TOP

LHCH Charity

LHCH is the TOP trust in the country according to the results of this year's national NHS Staff Survey 2022.

The survey results of more than 600,000 people working in 264 NHS organisations, including all 215 trusts in England, were published last week, and showed that LHCH is **TOP** in the country, when benchmarked against all trusts, for two key areas:

- **A place to work**
- **Staff engagement**

The findings also showed that LHCH is in the **TOP THREE** NHS organisations in the country for a further two areas:

- Care is our top priority (second)
- A place for treatment (third)

Furthermore, this year's findings highlighted LHCH as the **BEST** performing Acute Specialist Trust in eight out of nine areas.

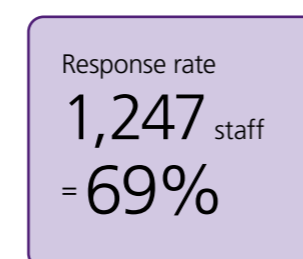
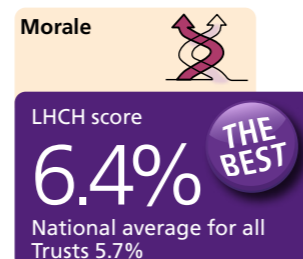
At the end of March 2023, Liverpool Heart and Chest Hospital employed

1,956 staff:
1,432 female 524 male

33% nursing 10% doctors

13% science, clinical and therapists 28% non-clinical

16% HCAs and other support



For nearly 30 years LHCH Charity has supported the hospital in all that it does. Whether this is providing funds for the latest and best equipment, enabling enhanced facilities for our patients, their families and our staff, or supporting ground-breaking research that will change the way heart and lung diseases are treated in the future.

To date, we have raised over £10 million to help LHCH stay as a leader in the field of cardiothoracic medicine and our aim is to continue to provide this support to the very best of our abilities.

This year has seen many challenges, not the least of which is the current economic climate and the difficulties many people are facing with rising bills and increased costs. Inevitably this means they reflect on what they are able to give to charity. However our donors have been absolutely magnificent in their continued support.

Thanks to them we have been able to:

- provide a new Echo Navigation System for

the Cardiac Catheterisation Centre – a dedicated Echocardiography Suite which will make for a faster, smoother patient treatment pathway

- help reduce delirium in our most poorly patients with the addition of more sky ceiling tiles in our intensive care unit
- support research with the purchase of a Pulse Wave Analysis System, which gives 'true' blood pressure readings to help in recognising untreated hypertension.

None of this, of course, would have been possible without the magnificent support of our donors. Special thanks also goes to the many staff members and others who took part in our summer of challenges by abseiling, skydiving or even getting very dirty in the Tough Mudder. There are others of course who play our lottery, give regularly, buy merchandise or even just simply send a donation.

To all of them, we give our most sincere thanks – you have been amazing.



Workforce and education at LHCH

Investment in our workforce at LHCH is essential – with more people and new ways of working, and by strengthening the compassionate and inclusive culture needed to deliver outstanding care.

This year, we have made significant investment in our workforce, with focus on the health, wellbeing, and safety of our staff.

A successful local and international recruitment drive enabled us to develop a pipeline of nurses with 130 internally educated nurses joining our workforce. Internationally recruited nurses are working across the cardiorespiratory spectrum including Critical Care, Cath Labs, medical and surgical wards and departments. Development surgeries ensure the knowledge, skills and experiences of these nursing recruits are taken into consideration for development and promotion, and that all nursing colleagues feel supported in their careers at LHCH.

All the international nurses who have undertaken their OSCEs examinations have passed, either first or second time, and are well-established into LHCH clinical teams. We also have a successful pastoral care team who continue to offer support to all our international nurses.

Our ongoing work to support staff and improve retention is key, and we are currently in a strong position regarding band 5 nurse recruitment and retention enabling a safe nursing workforce.

We have been examining new ways of working, post-covid, involving flexible working options to combat recruitment and retention challenges. Our pharmacy and therapies teams are working towards a 7-day model, and we are also partnering with

local universities to look at other opportunities via the apprenticeship route.

Delivery of our workforce plan is supported through the development of our People Strategy 2022-25, which sets out a clear roadmap moving forward that focusses on four key pillars:



The pandemic reinforced the need for LHCH to develop a much bolder strategy on Equality, Diversity, Inclusion and Belonging (EDIB) to ensure that inclusion is felt authentically at a personal level. The team were instrumental in enhancing the visibility of EDIB activity across the organisation to encourage employee voice through our newly established LHCH Belong Inclusion Network. Listening to our people has helped shape our 2022-25 EDIB strategy and created a culture of belonging and trust.

With compassion, inclusivity and wellbeing in mind, the team led a trust wide, cultural transformation project named 'Be Civil Be Kind', embarking on a back-to-basics campaign to further embed the importance of civility and kindness on our workplace, this was achieved by placing engagement back in the hands of our people by reaching out and listening to their experiences. This provided the opportunity to make people feel valued and appreciated as we understand that a culture of civility and kindness promotes a psychologically safe, harmonious, and high performing teams and importantly civility saves the lives of patients.

We have also significantly enhanced our wellbeing offer, looking after the mental, physical and financial wellbeing of our staff.

The results and impact of our people centred initiatives show that resilience has improved, team working has improved, mental health absence has reduced, and morale and civility has become the heart of our behaviours, even during challenging and unprecedented times.

LHCH have developed an accelerated development project with a first cohort who have started the Mary Seacole Leadership Programme, have shadowing opportunities arranged scenario-based learning sessions planned. We have received very positive feedback on the programme so far and look forward to expanding the programme later in the year.



Governance at LHCH

As a foundation trust we are governed by an elected council of governors and independently regulated by Monitor. We have approx. 8,500 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.

Our Board comprises six Non Executive Directors, including our Chair, and nine Executive Team Members, including our Chief Executive.

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

Non Executive Directors



Val Davies
Chair



Julian Farmer
Deputy Chair &
Senior Independent
Director



Dr Nicholas Brookes
Non Executive
Director



Professor Bob Burgoyne
Non Executive
Director



Margaret Carney
Non Executive
Director



Louise Robson
Non Executive
Director

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

Executive Team



Jane Tomkinson
Chief Executive



Dr Raphael Perry,
Deputy Chief
Executive & Medical
Director



Sue Pemberton
Director of Nursing
& Quality



Karen Edge Chief
Finance Officer



Jonathan Mathews
Chief Operating
Officer



Jonathan Develing, Director
of Strategic
Partnerships



Karen Nightingall
Chief People Officer



Karan Wheatcroft
Director of Risk
& Improvement



Kate Warriner
Chief Digital and
Information Officer

Our members matter

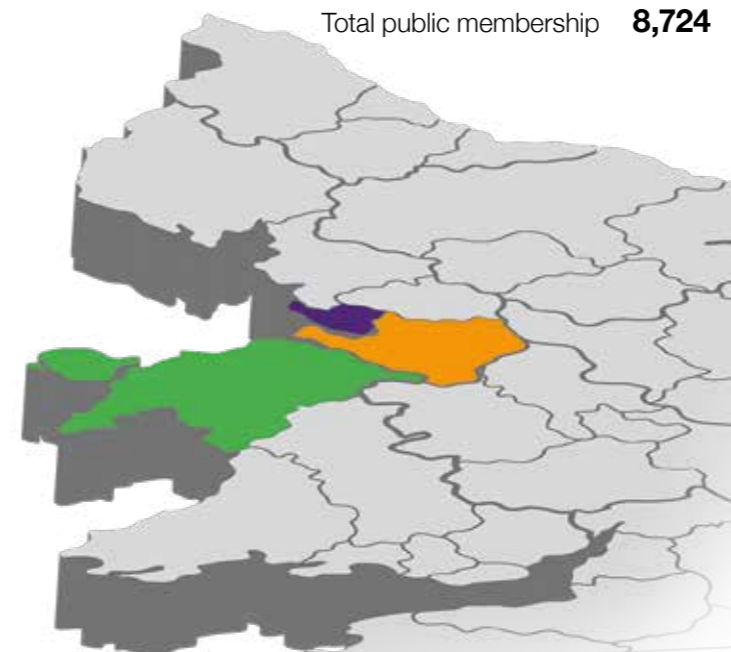
LHCH's foundation trust members make a real contribution to improving the health of our communities. By actively keeping an engaged membership, this supports the delivery of our Trust's 'Patients, Partnerships and Populations' strategy and our vision to be the best – leading and delivering outstanding heart and chest care and research.

Our membership strategy is to maintain a minimum of 8,000 public members and to focus on retention and engagement of members, whilst ensuring a quality membership experience. Anyone over the age of 16 is eligible to become a public member.

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

The public constituency is split into the following four geographical areas:

North Wales	1,422
Merseyside	4,502
Cheshire	2,037
Rest of England & Wales	763
Total public membership	8,724



What we've done this year

- ✓ A series of virtual and face-to-face health events were held during the year, featuring clinical specialists who hosted talks and discussions. These events were advertised to public members, members of the community and other stakeholders and partners.
- ✓ We were also pleased to support a local football club with a highly engaging interactive CPR and defibrillator training session.
- ✓ Our Public Governors engaged with their own constituencies, including any community groups with whom they were personally involved. Governors were also invited to attend patient and family listening events.
- ✓ Our Membership Office supports and helps facilitate these opportunities and activities. Through these activities, Governors canvass the views of members and the public in order to inform our plans, priorities and strategy. These views are communicated to our Board of Directors at quarterly Council of Governor meetings, strategic workshops and other sessions, where appropriate.
- ✓ Members are welcome to attend quarterly Council of Governor meetings and our Annual Members' Meeting.
- ✓ They received regular communications including electronic and paper editions of LHCH Matters – our newsletter for all our staff and public members.
- ✓ Given opportunity to stand for election to the Council of Governors to represent their constituents.
- ✓ Voted in Council of Governor elections to share their views on their preferred candidate(s).

To find out more about becoming a member, visit www.lhch.nhs.uk, call **0151 600 1410** or email membership.office@lhch.nhs.uk

Finances in review

As the NHS recovers from the Covid-19 pandemic, elements of the simplified financial framework were maintained in 2022/23, most notably the retention of fixed contract sums from English commissioners.

This core income was supplemented with Elective Recovery Funding (ERF), with a clear focus on funding the Trust to maximise planned care and address the growth in patient waiting lists.

The operating surplus (after adjusting for impairment charges and non-operating transactions) was a surplus of £3.2m.

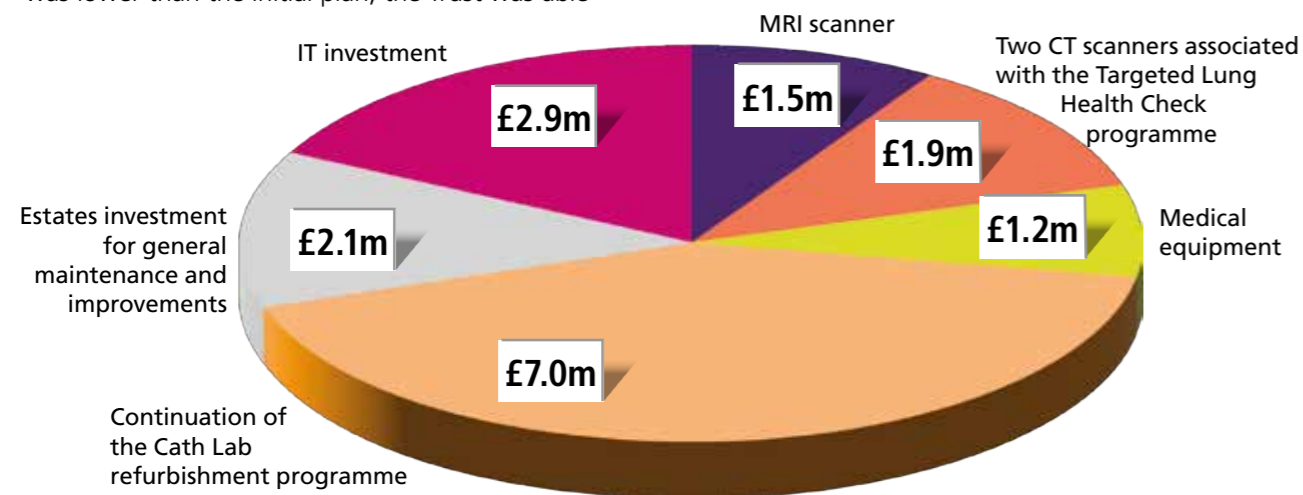
The Trust identified and delivered £3.4m of recurrent cost improvements during the year. Although this was lower than the initial plan, the Trust was able

to achieve its financial targets due to non-recurrent funding and higher than anticipated interest income.

In summary, during 2022/23 total income for Liverpool Heart and Chest Hospital was £231.1m, with total operating expenses of £218.4m.

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

During the 2022/23 financial year, the total capital investment in improving hospital facilities was £16.6m. The main investments are highlighted below.



After funding the capital programme outlined above, the Trust had a closing cash balance of £41.3m as at 31st March 2023

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 2022/23 financial statements give a true and fair view of the financial position of our Trust, and have been properly prepared in accordance with the Department of Health and Social Care General Accounting Manual (GAM) 2022/23, with detailed requirements for Foundation Trusts set out in the NHS Foundation Trust Annual Reporting Manual (ARM) and the directions 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.

STATEMENT OF COMPREHENSIVE INCOME


	2022/23 £000	2021/22 £000
Operating income from patient care activities	206,186	192,183
Other operating income	24,864	23,405
Operating expenses	(225,429)	(210,165)
Operating surplus/(deficit) from continuing operations	5,621	5,423
Finance income	866	23
Finance expenses	(63)	(72)
PDC dividends payable	(2,415)	(2,079)
Net finance costs	(1,612)	(2,128)
Other gains / (losses)	196	(231)
Surplus / (deficit) for the year	4,205	3,064
Other comprehensive income		
Will not be reclassified to income and expenditure:		
Impairments	(507)	(1,375)
Revaluations	–	3,430
Other reserve movements	–	3
Total comprehensive income / (expense) for the period	3,698	5,122


STATEMENT OF FINANCIAL POSITION


	31 March 2023 £000	31 March 2022 £000
Non-current assets		
Intangible assets	109	180
Property, plant and equipment	115,230	107,846
Right use of assets	4,152	–
Receivables	146	129
Total non-current assets	119,637	108,155
Current assets		
Inventories	4,350	4,334
Receivables	13,111	9,258
Cash and cash equivalents	41,348	42,735
Total current assets	58,809	56,328
Current liabilities		
Trade and other payables	(37,558)	(31,052)
Borrowings	(719)	(451)
Provisions	(515)	(1,068)
Other liabilities	(7,462)	(6,578)
Total current liabilities	(46,254)	(39,149)
Total assets less current liabilities	132,192	125,334
Non-current liabilities		
Trade and other payables	(2,982)	(3,575)
Borrowings	(3,415)	(2,716)
Provisions	(5,032)	(6,960)
Other liabilities	(81)	(81)
Total non-current liabilities	(11,509)	(13,331)
Total assets employed	120,683	112,003
Financed by		
Public dividend capital	74,265	69,283
Revaluation reserve	11,439	11,949
Income and expenditure reserve	34,979	30,771
Total taxpayers' equity	120,683	112,003

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