



A YEAR IN REVIEW  
**2023-24**



“... we know we have exceptional teams who work diligently, professionally, and innovatively to make sure that safe and timely care is provided to all our patients.”





### Welcome from our Chair and Chief Executive

It is a pleasure to welcome you to the 2020/21 Annual Report. This year has been a challenging one for all of us, but we have achieved many milestones and made significant progress in our mission to improve patient care and the lives of our staff and the communities we serve.

**Chair of the Trust**  
**Chief Executive**

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### This year's highlights

Our key achievements this year include:

- 80,142 patient appointments
- 26,539 A&E presentations
- 1,939 day case operations
- £24.6m in research income
- £16.6m in charitable donations

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### Our Trust in brief

Key statistics at a glance:

- 80,142 patient appointments
- 26,539 A&E presentations
- 1,939 day case operations
- £24.6m in research income
- £16.6m in charitable donations

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### David's story

David, a 65-year-old man, has been living with a heart condition for many years. He has been treated with medication and has had several hospital admissions. However, after a recent admission, he was diagnosed with a more serious condition. David is now undergoing treatment and is making good progress.

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### Patient family focus

Our commitment to patient and family experience is at the heart of everything we do. We strive to provide a safe, high-quality, and patient-centred service that meets the needs of our patients and their families.

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### Shaping services and leading the way

Our focus on innovation and leadership is driving our success. We are committed to providing the best possible care for our patients and to being a leading force in our community.

PAGES 10 & 11

### Shaping the leading way

Our commitment to innovation and leadership is driving our success. We are committed to providing the best possible care for our patients and to being a leading force in our community.

PAGES 12 & 13

### International cardiorespiratory network makes impact

Our international network is making a significant impact on patient care. We are committed to providing the best possible care for our patients and to being a leading force in our community.

### Digital Excellence

Our commitment to digital excellence is driving our success. We are committed to providing the best possible care for our patients and to being a leading force in our community.

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### Sophie's story

Sophie, a 30-year-old woman, has been living with a heart condition for many years. She has been treated with medication and has had several hospital admissions. However, after a recent admission, she was diagnosed with a more serious condition. Sophie is now undergoing treatment and is making good progress.

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### Research and Innovation

Our commitment to research and innovation is driving our success. We are committed to providing the best possible care for our patients and to being a leading force in our community.

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### Our people and learning

Our commitment to our people and learning is driving our success. We are committed to providing the best possible care for our patients and to being a leading force in our community.

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### Life at LHCH we're top

Our commitment to life at LHCH is driving our success. We are committed to providing the best possible care for our patients and to being a leading force in our community.

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### LHCH Charity

Our commitment to the LHCH Charity is driving our success. We are committed to providing the best possible care for our patients and to being a leading force in our community.

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### Governance at LHCH

Our commitment to governance is driving our success. We are committed to providing the best possible care for our patients and to being a leading force in our community.

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### Our members matter

Our commitment to our members is driving our success. We are committed to providing the best possible care for our patients and to being a leading force in our community.

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### Finances in review

Our commitment to finances is driving our success. We are committed to providing the best possible care for our patients and to being a leading force in our community.

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### Chief Ex

#### **Welcome to our year in review for 2024/25.**

On 5th July, we celebrated the 75th birthday of the NHS here at LHCH. We were pleased to mark this key anniversary by recognising our extraordinary members of staff who work so tirelessly to provide outstanding care.

Having this outstanding care recognised publicly, by our patients and staff, also made this a special year. Firstly, the Care Quality Commission's National Inpatient Survey rated LHCH as one of the top two trusts in the country for 'overall patient experience'. This was followed by the NHS Staff Survey rating LHCH as the top Trust in the country for a 'place to work', 'care is our top priority', 'we are compassionate and inclusive', 'we each have a voice that counts', 'staff engagement', and 'morale'.

In March 2024, LHCH joined an elite group of hospitals to be successfully validated against the Healthcare Information and Management Systems Society international EMRAM Stage 7 standards. It was an exceptional achievement to become the first trust in Europe to be assessed against these new, and more extensive, Stage 7 HIMSS standards.

A highlight of the year was the formal opening of our state-of-the-art catheter laboratory scheme. This new cardiac facility, a significant upgrade on previous facilities with new technology and equipment, will support safe and outstanding cardiology care for years to come.

It was also a special year as we welcomed a new Chief Executive. Liz Bishop assumed joint leadership responsibilities at LHCH whilst continuing as Chief Executive of Clatterbridge Cancer Centre NHS Foundation Trust. Moving to a shared Chief Executive model with Liz, who already understands the outstanding services provided at LHCH, is an opportunity for two of the country's leading specialist trusts to share expertise, develop new cardiothoracic pathways in the system, and to work more closely across cancer pathways and for the benefit of all our patients, partners and populations.

We also said goodbye to Dr Raphael Perry, who retired at the end of the financial year, after more than 30 years working at LHCH. Dr Perry had been a consultant cardiologist, clinical lead, Associate Medical Director and Deputy Medical Director, before he was appointed Medical Director in 2015, and then Deputy Chief Executive a year later. We wish him well on his retirement, and at the same time congratulate Mr Manoj Kuduvalli, Consultant Cardiac Surgeon, on his appointment as our new Medical Director from April 2024.

A number of other executive and non executive changes have taken place this year, as shown on page 20.

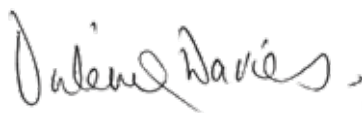
# ome from our ir and ecutive

Whilst there has been much to celebrate throughout the year, we also know there have been challenges, particularly in ensuring that patients are treated as quickly as possible. However, we know we have exceptional teams who work diligently, professionally, and innovatively to make sure that safe and timely care is provided to all our patients.

The year ahead will no doubt provide many more clinical, operational and financial challenges for our teams at LHCH, but as well as these challenges, we are also excited by the many other opportunities that will also come our way. We know we have outstanding teams in place who will continue to play a leading role in innovating and improving services, collaborating with partners, and sharing our expertise where possible.

Finally, it's also important to acknowledge that behind these teams, we are also grateful to have an engaged and supportive Council of Governors, who give their time voluntarily to support the Board of Directors, as well as our many dedicated volunteers. They make a significant difference to our patients and families, as well as to our staff, and we want to thank them for their role in making LHCH such a special place.

We are proud of all that has been achieved this year, but as always, we will not be complacent. We look forward to 2024/25 as we retain our focus on delivering exceptional patient and family centred care for every individual, every day



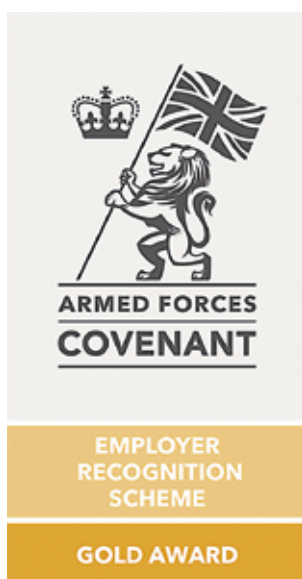
**Val Davies**, Chair



**Liz Bishop**,  
Chief Executive



# This year's highlights



LHCH was delighted to have been successful in our application for the **Defence Employer Recognition Scheme (ERS) – GOLD**.



LHCH's 'Primary Care Heart Failure Project' was recognised as the **'Most Impactful Project Addressing Health Inequalities'** at the HSJ Partnership Awards 2023, recognising their outstanding dedication to improving healthcare and effective collaboration with the NHS2.



LHCH was a **shortlisted finalist in the HSJ Patient Safety Awards 2023**, in the category Patient Safety Education and Training.



LHCH announce the appointment of its **new chief executive, Dr Liz Bishop** in December 2023.



LHCH formally opened its brand new **multi-million pound catheter laboratory suite** in February 2024.

LHCH was recognised with the **Social Value Quality Mark Bronze Award** in February 2024, demonstrating its commitment to creating, measuring and reporting social value.



**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 2023/24.

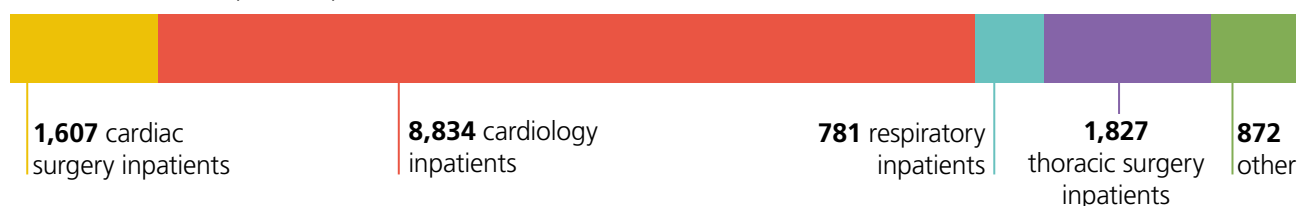


LHCH joined an **elite group of hospitals around the world** who have been successfully validated against the HIMSS (Healthcare Information and Management Systems Society) international EMRAM Stage 7 standards, in March 2024. LHCH was the **first trust in Europe** to be assessed against the new and more extensive Stage 7 HIMSS standards.

# Our Trust

## in brief

A total of **13,921** inpatient spells



**80,142**  
outpatient appointments

**181**  
inpatient beds

**1**  
day case unit

**26,539**  
virtual attendances

**9**  
operating theatres

**2.8 million**  
population served by LHCH

**1,939**  
staff (1,425 females and 514 males)

**1**  
Da Vinci surgical robot

**Largest**  
single site heart and chest hospital

**£244m**  
turnover

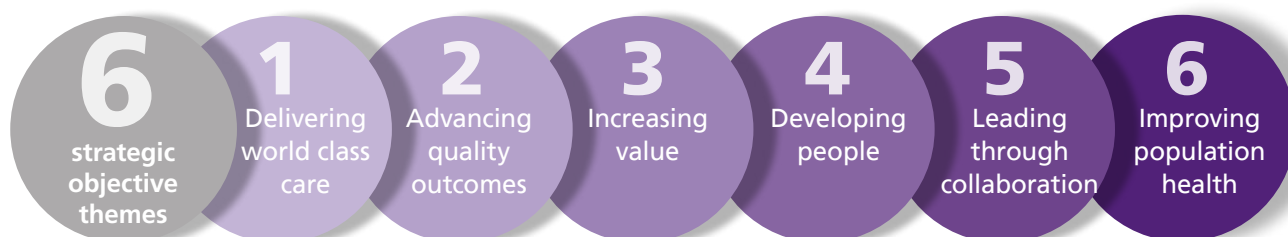
**5**  
catheter laboratories

**2**  
'outstanding' CQC ratings

**£16.6m**  
invested in hospital facilities

**10**  
community locations

**One vision**  
'to be the best'





# David's story



"I'd had some symptoms that were concerning me and so I went to my local GP in North Wales. They listened to my heart and decided to refer me to my local hospital, and after some tests were carried out, they found I had hypertrophic cardiomyopathy.

"As a result, it meant that I gave up cycling and I started to find that walking up in the hills where I live, was getting increasingly difficult.

"Shortly afterwards, I was referred from my local hospital to LHCH and was introduced to Dr Rob Cooper, Consultant Cardiologist, and it became immediately apparent that this was a specialist unit.

"Dr Cooper carried out his own series of tests and monitoring, and then spoke to me about a brand-new medicine that had been specifically developed to treat this heart condition. We discussed the merits of taking part and I read lots of information and then decided that I would like to try.

"Almost immediately after taking my first pill, I went out for a fairly arduous walk with a family member and felt that the major symptoms of my breathlessness had gone. The change was remarkable and far better than I could ever have hoped for.

"I carried on taking the medication for the next few months until I joined the next phase of the trial in September 2023. This again involved routine monitoring, visits to LHCH and adjustments to my medication, until the point that I was feeling 'almost normal'.

"It's been genuinely life-changing for me and my family. There are no side-effects than I have noticed or experienced and I feel completely normal.

"I wasn't expecting such a transformative change. Any improvement would have been great, but the care that I've had from everyone at LHCH has been world class. It's been the NHS at its absolute finest.

You can watch David's full story at [www.lhch.nhs.uk/patient-stories](http://www.lhch.nhs.uk/patient-stories)



# 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 six 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. This engagement helped to shape our quality priorities for the year.



## Our patient and family priorities for 2024/25:

### **1 Improve contact with elective cardiac surgical patients on the waiting list between referral and admission.**

Patients referred to LHCH for cardiac surgery can wait several weeks for a date for surgery. We would like to reassure patients we have received their referral and manage their expectations.

### **2 Offer pre-habilitation to patients awaiting surgery to improve their health ahead of surgery.**

Pre-habilitation supports patients improve their fitness, health and overall wellbeing before any planned operation. Better health before surgery, improves patient outcomes and reduces length of stay.

### **3 Improve psychological support for patient, families and responders to Out of Hospital Cardiac Arrests (OOHCA).**

Sudden and unexpected cardiac arrest can be a grief-filled and life-altering event, and after-effects can have a long emotional and psychological impact. Current psychological support is ad hoc and the entire pathway for psychological care could be improved.

### **4 Improve discharge experience for patients and families.**

A delayed discharge, caused by many factors, occurs when a patient is medically fit to leave hospital but is not discharged in a timely way. There are many aspects to this process that can possibly be improved.

# Shaping services and leading

## LHCH is **TOP** place to work in the country



LHCH was named the TOP place to work in the country in this year's national NHS Staff Survey, when benchmarked against all trusts.

The survey also showed LHCH was the TOP rated Trust in the country for five other areas:

- Care is our top priority
- We are compassionate and inclusive
- We each have a voice that counts
- Staff engagement
- Morale.

Furthermore, this year's findings highlighted LHCH as the BEST performing Acute Specialist Trust in eight areas, with improved year-on-year scores for each survey element.

## LHCH is a **TOP** Trust

LHCH was once again rated one of the best hospitals in the country to receive care and to work in this year's national Inpatient Survey.

It showed that LHCH was rated one of the TOP TWO trusts in the country for 'overall patient experience, and 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

## Surgeon retires after 40 years at LHCH



Mr Richard Page, a nationally respected consultant cardio-thoracic surgeon, who gave much to his patients, families, colleagues and the NHS, has retired – 40 years since first joining LHCH as a trainee doctor.

Mr Page said: "I am so proud of LHCH – what we have been able to achieve for patients and I'm also proud to have worked alongside so many excellent colleagues. One of the things I am most proud of, was being elected President of the Society for Cardiothoracic Surgery and working with colleagues nationally to make a difference."

## 25 years of lung cancer unit

In April 2000, and in response to the prevalence of lung cancer being far greater in Liverpool than the national average, clinicians working between LHCH and Liverpool University Hospitals created the Liverpool Lung Cancer Unit.

This brought together the inpatient facilities of a large district general hospital with the diagnostic and investigative capabilities of a dedicated specialist unit, with the aim of providing seamless care for patients through the diagnostic journey.

Since then, the Liverpool Lung Cancer Unit has been at the forefront of national lung cancer innovation, including most recently the Targeted Lung Health Check Programme.

Working with communities across Merseyside to diagnose cancer in its earliest stages. The programme has proved to be a success. Around 80% of lung cancers diagnosed within the service are suitable for curative treatment, which means lives can be saved – a significant shift from where we started 25 years ago.





# the way



## Minimal access surgical approach success

Two years ago, LHCH launched Endoscopic Vein Harvesting (EVH) which has led to a wide range of benefits for patients and staff.

The new initiative now undertaken at LHCH, allows significantly smaller incisions, when harvesting veins for use in coronary artery bypass graft surgery. The result is reduced pain, intraoperative blood loss, rate of infection, antibiotic use and the need for future wound management, plus quicker mobilisation and recovery for patients.

We're really pleased to have completed over 200 cases using this EVH approach, with overwhelmingly positive patient feedback. Due to its success, we have also been training a third Surgical Care Practitioner to help us increase the number of patients who are able to benefit.

## Improving outcomes for thoracic surgery patients

LHCH thoracic surgeons, Mr Michael Shackcloth and Mr Julius Asante-Siaw, were the first in the UK to use the new Echelon 3000 devices recently.

With every surgery being different, the Echelon 3000 device allows the surgeons to have greater access and more control, with excellent rotation and ease of adjustment – which should hopefully lead to further improved outcomes for thoracic surgery patients in future.

As a result of our reputation as a pioneering hospital and leading the way with surgical innovation and utilising new technologies, LHCH was the ideal centre to use these devices before anyone else in the country.

## HEAT-PPCI 10 years on

Ten years ago, at the annual meeting of the American College of Cardiology, researchers from LHCH presented the results of a clinical trial that would go on to have a massive, international impact both on cardiology care and on approaches to how clinical research is performed.

HEAT-PPCI was a single-centre randomised controlled trial which compared two different drugs that were both in routine use around the world, competing to be the anticoagulant of choice, for use at the time of emergency PCI for heart attack patients. The headline results of the trial showed that the cheaper of the two agents was at least as good as (possibly better than) the alternative that cost about 400-800 times as much.



The resulting cost savings were substantial, saving about \$700 million each year in the USA and about £500,000 annually in LHCH. The results of the study were subsequently replicated in other studies from Scandinavia and clinical guidelines on both sides of the Atlantic were changed to reflect the findings.

Perhaps just as importantly, the study pioneered some novel approaches to clinical research.

# Shaping services and **leading** the way

## First Aurora EV-ICD implanted at LHCH

LHCH Consultant Cardiologists, Dr Matthew Kahn and Dr Archana Rao and their teams, were delighted to implant the first Aurora EVICD at LHCH this year.

They said: "Transvenous implantable cardioverter defibrillators (ICDs) are the standard for prevention of sudden cardiac death. The Aurora EV-ICD offers the advantages of an extravascular system, while also providing features of transvenous ICDs. Because the lead is placed close to the heart, the energy required for pacing and defibrillation is lower than if it was further away and separated from the heart by bone.



"The Aurora system possesses important features: ATP, pause prevention pacing (backup bradycardia pacing), and 40 joule defibrillation, all in a device the same size as transvenous ICDs and with similar projected longevity."

## Telemedicine clinics improve patient experience

For patients with Cystic Fibrosis regular monitoring is crucial to ensure the best outcomes.

Since the pandemic, video-assisted

clinics (VACs) were set up every day of the working week, involving all members of the CF multi-disciplinary team and underpinned by quality assured smart cloud-based spirometry

packages and weighing scales, to allow remote management. As a result, clinical activity has increased whilst clinic non-attendance rates have reduced, and this approach has been welcomed by patients.

In the last year:

- There have been virtual clinics involving 10 different areas of Cystic Fibrosis multi-disciplinary expertise
- 70 Cystic Fibrosis team members providing 885 virtual consultation episodes.



## Renal denervation service

This year we undertook the first cases in a new service called renal denervation.

This is a treatment for resistant hypertension (high blood pressure), which is a condition where patients cannot control their blood pressure, despite taking multiple medications.

Renal denervation is a keyhole procedure that has been shown to reduce blood pressure in clinical trials. At LHCH, we undertook the first two cases in Merseyside and this service is now available to patients through our specialist hypertension service.



## New biobank for NHS researchers

A new Biobank in Liverpool will become the central facility for the storage of biological material used in research for the Liverpool Clinical Research Facility (CRF).

The Liverpool CRF is a partnership between LHCH, Clatterbridge Cancer Centre (CCC), and Liverpool University Hospitals and is designed to heighten the level of clinical research conducted in the city.

The Liverpool CRF Biobank will be a centralised repository storing samples donated by patients at all three sites that can be used to help inform future research. A biobank is a vital component in modern medical research and is used in areas such as disease modelling, genetics and personalised medicine.



## International cardiorespiratory network makes impact

Clinicians at LHCH launched a new monthly cardio-respiratory meeting this year, with a range of multidisciplinary specialists.

This meeting now has an international reach with a particular focus on chronic respiratory disease, and often has attendees joining from India and Poland, for academic and research discussions. Different approaches to manage and investigate chronic disease are considered, with special attention given to diseases associated with the ageing population in conditions such as cystic fibrosis.

Bringing together specialists in this way ensures that patients receive the very best investigation and treatment for their condition.



## Improving Care for Patients with Cardiomyopathy

LHCH is one of the first trusts in the country to provide a new life-changing treatment to heart patients.



Mavacamten, a NICE (National Institute for Health and Clinical Excellence) approved drug for NHS use, has recently been made available at LHCH

to patients with a condition known as obstructive Hypertrophic Cardiomyopathy (HCM).

HCM affects 1 in 500 people and causes thickening of the heart muscles, affecting the heart's ability to pump blood properly and causing irregular heart rhythms, palpitations, chest pain, difficulty breathing, fainting, and even sudden death. Mavacamten has been shown to be effective in relieving obstruction, improving blood flow, controlling

symptoms and improving quality of life for people with obstructive HCM. In some cases, use of this drug has removed the need for more invasive treatment.

Dr Rob Cooper, Inherited Cardiac Conditions Consultant, said: "It's really pleasing for LHCH to be one of a small number of trusts in the UK, able to offer this innovative drug to patients with obstructive hypertrophic cardiomyopathy."

## New Cath Labs open at LHCH

We were delighted to formally open our multi-million-pound state-of-the-art cardiac facility at LHCH, which will enable thousands of cardiology procedures to be carried out every year to benefit patients across Merseyside, Cheshire, North Wales, Isle of Man and beyond.

Dr Nick Palmer, Consultant

Cardiologist and Director of the Catheter Laboratory Development, said: "By significantly upgrading existing facilities, we have been able to further improve our Primary Percutaneous Coronary Intervention service, which first launched in 2009. For the past 15 years, this service has provided emergency and often life-saving treatment for

thousands of patients who have experienced a heart attack.

"It was also important to enhance patient experience by including a new forward wait area, and the introduction of a new relatives' room and butterfly suite – a private room for families of end-of-life patients – means that dignity can be maintained at all times."



"Furthermore, it has been designed to meet current as well as future demand and will allow us to care for the growing population of patients requiring congenital heart disease intervention, for example, in modern, world class facilities."

# Digital Excellence

Throughout 2023/2024, the team has continued to work through LHCH's 'Digital Excellence' strategy, which sets out our digital ambitions and deliverables. This strategy and our digital plans are overseen by our Digital Excellence Committee, which is chaired by the Chief Executive.

Over the past year, the team has supported many projects including implementation of electronic prescribing within the community which has contributed to a reduction in safety errors and efficiencies for prescribing staff. The prescribing interface has also gone live in Pharmacy, supporting a reduction in dispensing errors and automating work that was previously done manually.

A new digital dictation service has been introduced to enhance transcription software and to reduce administrative inefficiencies. Meanwhile our risk and incident management system has also been replaced, to improve the assurance capability within the organisation.

We have also continued to innovate using remote monitoring technologies to safely care for patients outside of the hospital environment. Remote monitoring supports keeping patients at home where

possible and provides a proactive approach to care, where intervention may need to be brought forward. The digital and communications team have worked closely to design and introduce a new website and intranet at LHCH, improving experience for staff and patients.

Several technical projects have also been completed during 2023/2024 including the launch of the 'Tech Bar' at LHCH. This is a drop-in service for staff to resolve any quick technical or system issues. The device refresh has also continued to ensure staff have the right tools to support them.

However a highlight of the year was achieving EMRAM Level 7 from the Healthcare Information and Management Systems Society (HIMSS) in early 2024, an external accreditation used to assess our digital maturity as a Trust.

Looking ahead to 2024/25, the team are working towards the implementation of an electronic anaesthetic, perfusion and critical care system, which aims to reduce safety incidents and improve staff and patient experience. We are also looking to implement a single point of access patient portal for all

LHCH patients to manage their appointments, view test results and seek clinically led advice and guidance.





# Sophie's story

In June 2023, 28-year-old Sophie was diagnosed with a carcinoid tumour in her left lung and was referred to Liverpool Heart and Chest Hospital for treatment.

When Sophie met with her consultant at LHCH, she was told that the tumour could be operated on successfully, and said it was a relief to finally have some answers.

"Over a two year period I'd experienced multiple chest infections and I was back and forth to GP appointments. It wasn't until I was sent for a CT scan that they realised what it was that was causing my symptoms.

"Although it was a bit of a shock, knowing that it wasn't a death sentence, that it could be easily operated on, and that I should make a full recovery was reassuring.

"Prior to surgery, my surgeon was able to put a camera down my throat and clear my lung at the same time, which meant that I didn't get any more chest infections.

"Everyone at LHCH was brilliant – constantly checking on me, reassuring me, telling me what they were going to do and how they were going to treat me. Even my surgeon called, which I never expected, and they made the whole experience so much easier... even after my wedding."

In the middle of all her hospital appointments, Sophie got married and so just a week after walking down the aisle, she spent part of her honeymoon recovering from her thoracic surgery!

"The staff at LHCH were great and made sure that I had my own room and that my husband could stay. They got me up walking the day after surgery and made sure my recovery went smoothly.

"Since then, life has got so much better. I can breathe properly, I can run and my old chest symptoms have gone. Knowing that I'm under their care for another 5 years is so reassuring and I'm just so grateful."

A year on from her treatment, Sophie showed her gratitude for the care she received by taking on a skydive in support of LHCH Charity.

You can watch Sophie's full story at [www.lhch.nhs.uk/patient-stories](http://www.lhch.nhs.uk/patient-stories)



# Research and Innovation



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.

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.

## Research Achievements

In 2023/24 we recruited 1,345 participants to National Institute for Health Research (NIHR) portfolio studies across 5 specialities:

- 1087 cardiovascular badged studies
- 128 cancer
- 63 respiratory disorders
- 41 critical care

- 2 surgical studies.
- In total there were 43 actively recruiting studies during the year.

## Other highlights

- Top of the Northwest Research Network leaderboard for the patient reported experience survey.
- Shortlisted for the HSJ 'Empowering Patients Through Digital' awards for our recruitment and innovative LHCH study call TICS – Telehealth in Cardiac Surgery.
- Highest recruiter to a national lung cancer study called SCOOT.
- Top UK recruiter to the Cryo Persistent PAS study.
- Exceeded recruitment to time and target by 6 months for AF big picture.
- Recruiting to time and target on 83% of our commercial research trials (National Target is 80%)
- Chief investigator for a national NIHR priority study and first recruit in the UK to ASPIRE.

## Collaboration

At LHCH we have several key partnerships with Liverpool Health Partners (LHP), Liverpool Centre for Cardiac Science (LCCS) and Liverpool Clinical Research Facility (CRF).

The Liverpool CRF is a joint collaboration with Liverpool University Hospitals and Clatterbridge Cancer Centre and has been fundamental in driving forward early phase and first in man studies. We currently have two studies in the pipeline and are collaborating on a cancer vaccine study which will commence recruitment in 24/25.

The LCCS collaboration has enabled us to joint-fund a PhD studentship for a pharmacist, to increase the opportunity for pharmacy-led research at LHCH. Through this collaboration, we are developing and designing studies for grants that will address cardiovascular issues in our surviving CF patients, right through to helping to detect and prevent heart failure.



# Our people and learning

## During the year:

- We launched a leadership framework for leaders and managers and continued our successful Foundation of Leadership Programme.
- LHCH colleagues accessed NHS Leadership Academy programmes including the Elizabeth Garrett Anderson, Rosalind Franklin, Nye Bevan, and Aspirant Executives programmes.
- As local hosts to the NHS Leadership Academy Mary Seacole programme, LHCH successfully supported 4 internal/regional cohorts in 2023 and supported Trust's from outside the region with programme delivery.

## LHCH offered opportunities for wider engagement.

- We actively engaged with local universities and offered placements to students.
- We put patients and families at the heart of everything. We have a dedicated Patient and Family Liaison Team that proactively encourages feedback and holds engagement sessions with past and present patients and their families.
- We supported local schools and colleges with career open days, interviewing/CV skills, and career coaching, and will continue to develop these relationships in 2024/25.
- We worked with Hugh Baird College to offer learners employability training and work placements alongside college studies.
- We welcomed 19 trainees in the last year and are due to begin a new cohort working with The Prince's Trust.
- Our T-Level programme has been developed into an annual rolling programme, enabling first year candidates to take a placement within clinical areas, and second year candidates to become valued members of the LHCH Bank. On completion of the programme, candidates gain a level 3 healthcare qualification which enables them to be employed as a healthcare assistant or gain access to nurse associate or registered nurse programmes. Last year we welcomed 13 T-Level Health and Social Care students to LHCH.
- Project Search is a supported internship for people

with learning difficulties. Last year, we gave placements for 4 interns and will continue the programme in 2024/25.

We will continue delivering pre-employment and functional skills programmes.

## We extended our wellbeing offer for staff by:

- Increasing our Wellbeing Champions and levelling up our mental wellbeing service.
- Refreshing our Psychological Wellbeing Toolkit.
- Providing Health Psychologist support for staff.
- Hosting a series of wellbeing events which included blood pressure, pulse, and cholesterol testing, and lots more health and lifestyle advice.

## We also strengthened the resilience of our people by:

- Continuing monthly Schwartz Rounds.
- Revising our learning support offer by providing virtual learning sessions
- Embedding our 'Be Civil Be Kind' campaign to address incivility and promote positive behaviours and culture.





# Life at LHCH

## Our staff agree we're top

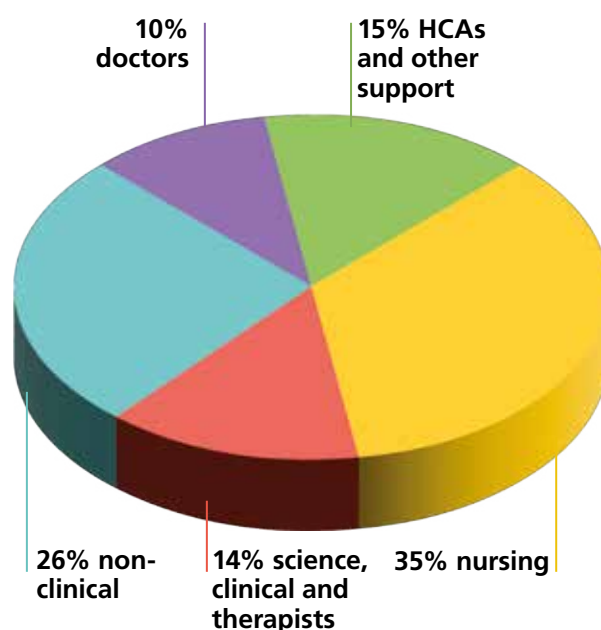
LHCH is the **TOP place to work** in the country according to the results of this year's national NHS Staff Survey 2023, when benchmarked against all trusts.

The survey results of more than 700,000 people working in 268 NHS organisations, including all 213 trusts in England, were published last week, and also showed that LHCH was the **TOP** rated Trust in the country for five other areas:

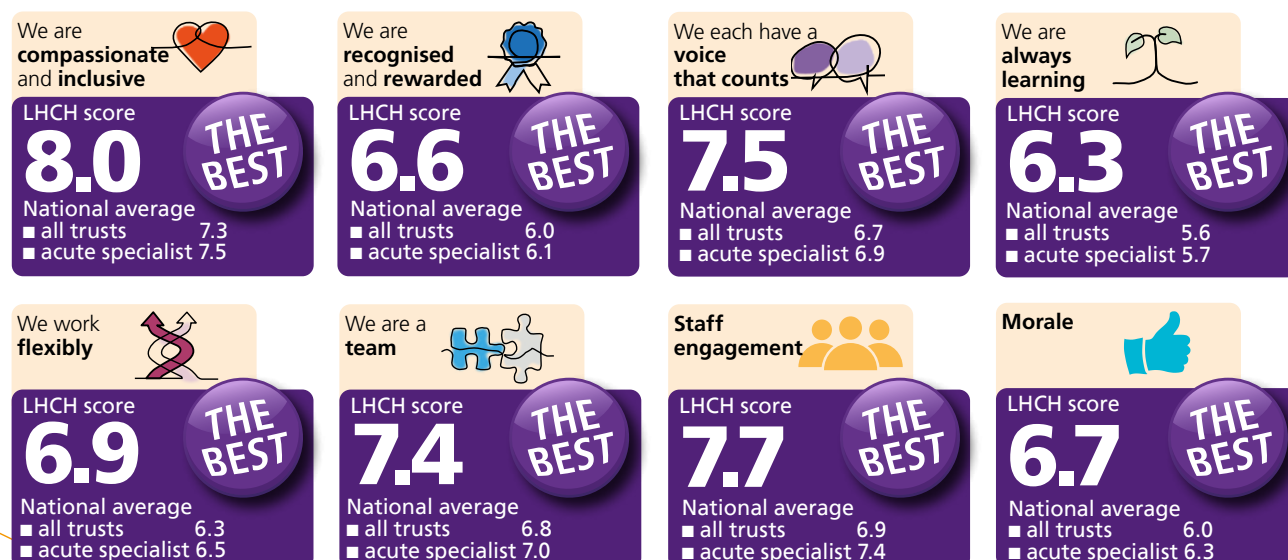
- **Care is our top priority**
- **We are compassionate and inclusive**
- **We each have a voice that counts**
- **Staff engagement**
- **Morale**

Furthermore, this year's findings highlighted LHCH as the **BEST** performing Acute Specialist Trust in eight areas, with improved year on year scores.

At the end of March 2024, Liverpool Heart and Chest Hospital employed 1,939 staff:  
**1,425 female**  
**514 male**



**National NHS Staff Survey 2023. Response rate from 1,209 LHCH staff = 64%**



# LHCH Charity

Like many charities, it is fair to say that LHCH Charity has faced challenges during the past year.

However, with the help of our fantastic supporters, we are pleased to be able to report a 6% increase on donations from the previous year. We owe a huge debt of gratitude to everyone who gave their time and money this year and we can't thank them enough.

Their support translates into making a real difference to the lives of our patients, their families, and our outstanding medical teams.

## What have we done this year

- We made a significant contribution to the development of our cardio-oncology service with the purchase of a new, state of the art, 3D Echo machine. This will provide a speedier and more accurate reading of the effect that cancer treatments may be having on a patient's heart.
- We were also able to provide funds for a specialist cardio-oncology nurse as well as supporting continuing education and training so that the team stay up-to-date with the latest developments in the field.
- Our adult congenital heart disease service is one of the largest in the UK, and many of the young people who are being treated here for their heart condition, also have additional needs, including learning difficulties. For those with learning difficulties, the frequent monitoring and testing of their hearts can be extremely distressing. Therefore, LHCH Charity was able to help with the purchase of virtual reality goggles.

The goggles help to take the patient away from the frightening environment they are in, and has meant that we have significantly reduced the incidence of failed tests. This is less stressful for the patient and improves the efficiency of the service.

These are just three examples of the difference we can make to work of the hospital, and we are very proud of the impact that we can make thanks to your support.

Find out more about us – [www.lhchcharity.org.uk](http://www.lhchcharity.org.uk)



# 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.

LHCH has 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 in our Trust's constitution, available on our website [www.lhch.nhs.uk](http://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](http://www.lhch.nhs.uk)

## Executive Team\*



**Liz Bishop**  
Chief Executive



**Jonathan Mathews**  
Deputy Chief Executive & Chief Operating Officer



**Sarah Barr**  
Chief Digital and Information Officer



**Val Davies**  
Chair



**Dr Nicholas Brookes**  
Non Executive Director



**Professor Bob Burgoyne**  
Senior Independent Director & Non Executive Director



**Mr Manoj Kuduvali**, Medical Director



**Joan Matthews**  
Director of Nursing & Quality



**Tom Pharaoh**  
Director of Strategy



**Margaret Carney**  
Non Executive Director



**John Doyle**  
Non Executive Director



**Claudette Elliott**  
Non Executive Director



**Jane Royds**, Chief People Officer



**James Thomson**  
Chief Finance Officer



**Ben Vinter**, Director of Risk & Corporate Governance

\*Correct at time of publication



# 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.

The public constituency is split into four geographical areas as shown below.

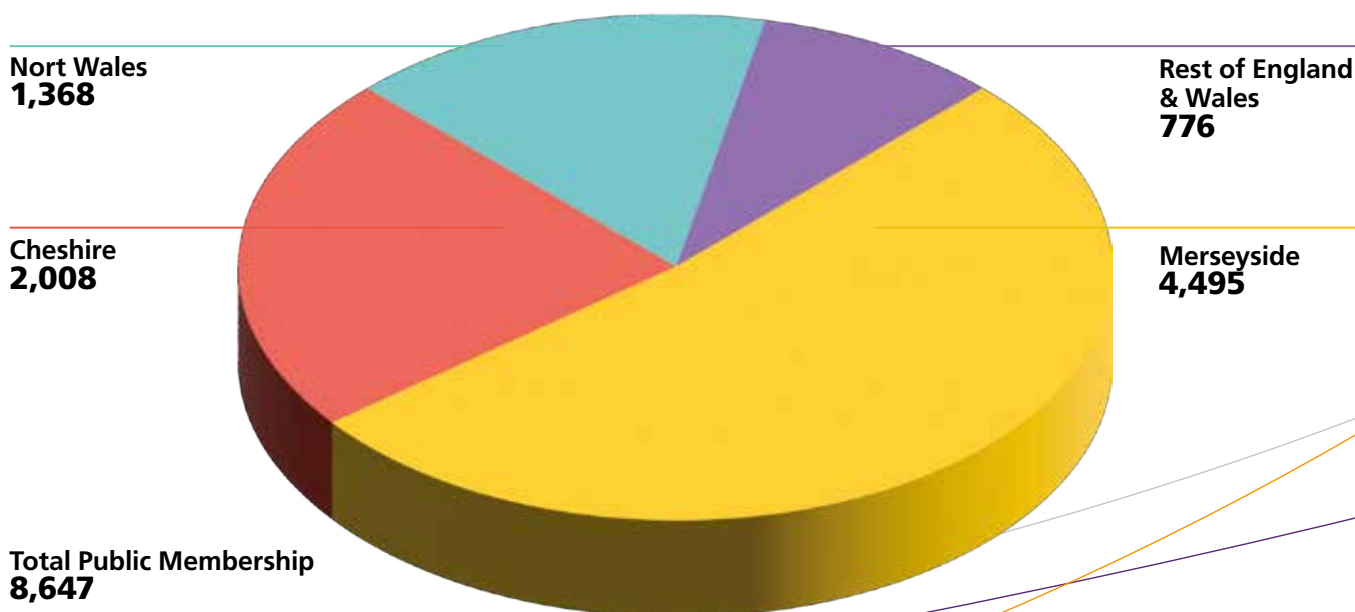
## What we've done this year

- Implemented the communications, recruitment and engagement plan, which was monitored by the Membership and Communications Sub Committee.
- Held a series of virtual and face-to-face health events featuring clinical specialists who hosted talks and discussions.
- Encouraged engagement between governors and members of the public and their own constituencies.

- Invited governors to attend patient and family listening events.
- 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).

The Trust aims to manage its turnover of members and to improve representation. Governors attend a number of recruitment events throughout the year to support this work including events at local universities. This is in addition to ongoing recruitment of members as part of our hospital volunteer scheme. The aim of the sub-committee is to enable better representation of younger age groups in the Foundation Trust membership.

To find out more, call **0151 600 1410** or email **[membership.office@lhch.nhs.uk](mailto: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.

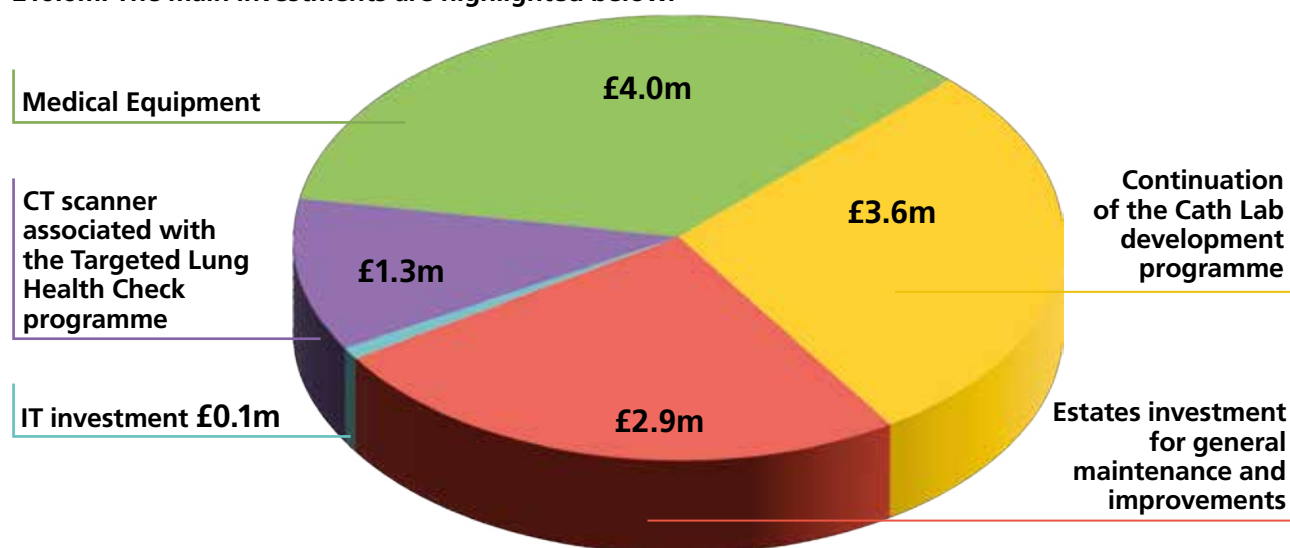
The Trust identified and delivered £3.4m of recurrent

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 £43.2m as at 31st March 2024.

*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 2023/24 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](http://www.lhch.nhs.uk) or call **0151 600 1616**.

## Statement of Comprehensive Income

	2023/24 £000	2022/23 £000
Operating income from patient care activities	223,777	206,186
Other operating income	20,583	24,864
Operating expenses	(243,810)	(225,429)
<b>Operating surplus from continuing operations</b>	<b>550</b>	<b>5,621</b>
Finance income	2,345	866
Finance expenses	(95)	(63)
PDC dividends payable	(2,441)	(2,415)
<b>Net finance costs</b>	<b>(191)</b>	<b>(1,612)</b>
Other gains	199	196
<b>Surplus for the year</b>	<b>160</b>	<b>4,205</b>
<b>Other comprehensive income</b>		
<b>Will not be reclassified to income and expenditure:</b>		
Impairments	(887)	(507)
Revaluations	821	–
Other reserve movements	–	–
<b>Total comprehensive income for the period</b>	<b>94</b>	<b>3,698</b>

## Statement of Financial Position

	31 March 2024 £000	31 March 2023 £000
<b>Non-current assets</b>		
Intangible assets	74	109
Property, plant and equipment	108,365	115,230
Right use of assets	4,059	4,152
Receivables	114	146
<b>Total non-current assets</b>	<b>112,612</b>	<b>119,637</b>
<b>Current assets</b>		
Inventories	5,247	4,350
Receivables	12,265	13,111
Cash and cash equivalents	44,537	41,348
<b>Total current assets</b>	<b>62,049</b>	<b>58,809</b>
<b>Current liabilities</b>		
Trade and other payables	(34,209)	(37,558)
Borrowings	(769)	(719)
Provisions	(220)	(515)
Other liabilities	(6,547)	(7,462)
<b>Total current liabilities</b>	<b>(41,744)</b>	<b>(46,254)</b>
<b>Total assets less current liabilities</b>	<b>132,917</b>	<b>132,192</b>
<b>Non-current liabilities</b>		
Trade and other payables	(2,211)	(2,982)
Borrowings	(3,312)	(3,415)
Provisions	(5,153)	(5,032)
Other liabilities	(81)	(81)
<b>Total non-current liabilities</b>	<b>(10,756)</b>	<b>(11,509)</b>
<b>Total assets employed</b>	<b>122,161</b>	<b>120,683</b>
<b>Financed by</b>		
Public dividend capital	75,649	74,265
Revaluation reserve	11,373	11,439
Income and expenditure reserve	35,139	34,979
<b>Total taxpayers' equity</b>	<b>121,161</b>	<b>120,683</b>



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