# Liverpool Heart and Chest Hospital NHS Foundation Trust

# LHCH matters

The newsletter for our patients, staff and communities of Liverpool Heart and Chest Hospital



Cath Lab team beam live case to India - page 9



KCRS Pulmonary Rehab Service achieves accreditation – pages 2-3

LHCH patient takes on the banker in ITV's Deal or No Deal – page 10

# Knowsley Community Respiratory Service achieves accreditation for pulmonary rehabilitation

We are extremely proud of our Knowsley Community Respiratory Service for achieving accreditation for their Pulmonary Rehabilitation Service.



## The team were assessed by the Royal College of Physicians earlier this year.

Accreditation is awarded to services which have demonstrated they meet best practice quality standards covering all aspects of a pulmonary rehabilitation service including quality and safety, patient experience and the workforce.

Furthermore, LHCH was the first pulmonary rehabilitation service across

Cheshire and Merseyside to achieve this accreditation. Feedback from the report published included:

- The service should be congratulated on their cohesive, motivated, and open ethos, culture and team approach.
- The service should be congratulated on the visible and engaged leadership at all levels of the organisation.
- The service should be congratulated on the feedback from the patients, which included excellent, transformative, responsive, friendly, caring and professional person-centred care

Sharon Faulkner, Lead Nurse for Community Services said: "A huge congratulations to all our teams (pictured) who work so hard on a daily basis to provide outstanding care for our patients and families. It's because of them that we have been able to achieve this accreditation and deliver a service we are all proud of."







## Welcome to LHCH video

We're often asked to give a glimpse into the specialist cardiothoracic care we provide here in Liverpool.

It's impossible to capture everyone and everything, however this short video provides a window into who we are, and what drives us to deliver outstanding patient care and services each day.

You can watch this on www.lhch.nhs.uk/what-we-do or by scanning the QR code.



# We are p Lead, has Since joining has establis Cardio-Once a collabora Clatterb The s of peo diseas cance

# Dr Dobson named finalist for Merseyside Women of the Year Awards 2025

We are proud to announce that Dr Rebecca Dobson, Consultant Cardiologist and Cancer Lead, has been named as a finalist for the Merseyside Women of the Year Awards 2025.

Since joining LHCH in 2019, Rebecca has established the groundbreaking Cardio-Oncology Service which is a collaboration between LHCH and Clatterbridge Cancer Centre.

The service cares for hundreds of people living with heart disease who have developed cancer or who have cancer, or those who are at risk of heart disease due to the high toxicity of their chemotherapy treatments.

Professor Jay Wright, Director of Research and Clinical Lead for Heart Rhythm said: "I'm delighted that Dr Dobson has been shortlisted for this year's Merseyside Women of the Year Awards. It's extremely well-deserved recognition for Rebecca who, thanks to her expertise and the skill of the team she has developed, has made a hugely positive impact on the quality of life for our patients and their families."

Best of luck to Rebecca – we are all rooting for you. The winner of the award will be announced at the ceremony on Friday 27th June.

# Therapies – a vital component of the patient journey and recovery

LHCH Matters met with Nicola Grieve and Sue Sutton, who manage the Therapi es Services here at LHCH, to find out about the key role therapists have in supporting patient care.

Nicola is the Therapies In Hospital
Lead who leads on inpatient
services such as Surgery and
Critical Care Physiotherapists,
Dietetics, Occupational Therapists,
Speech and Language Therapists
(SALT). Sue is the Therapies Out of
Hospital Lead and leads on therapy
services for outpatients including
Pulmonary Rehabilitation, Rapid
Access Clinic, Palliative Care,
Exercise Physiology for Cystic
Fibrosis and Adult Congenital Heart
Disease (ACHD) patients.

Sue is a practicing Occupational Therapist and works closely with colleagues to deliver end of life care too. The team also has a large cohort of support workers who work closely with the registered therapists across the patients pathway delivering excellent patient care within their teams.

## Where does the Therapies Team fit into the patient journey?

#### Surgery

Inpatients would typically see us after their surgery (post operatively). For example, on the first day after surgery patients may see our Physiotherapists in Critical Care for chest care and rehabilitation. They will also have input from our SALT team particularly if the patient has had a long intubation, a stroke or a hypoxic brain injury. The Complex Rehab Physiotherapists and Occupational Therapists would also support patients with these additional needs.

They may also require Dietetics input, particularly long-term patients on Intensive Care Unit, to support with their nutritional needs. The Dietitians are involved early on after surgery to support with this.

When patients are transferred from Critical Care to the wards, they are seen by the relevant team depending on ongoing needs. For example, the Surgical Physiotherapy team focus on chest care and rehabilitation or if the patient has had a stroke or hypoxic brain injury they would be supported by the Complex Rehabilitation team. Occupational Therapists would also be very involved at this stage as they look at the functional rehabilitation side and look at things like kitchen assessments, cognition, washing, dressing and supporting with discharge planning for when the patient goes home. Ongoing swallow and communication needs would have continued input from speech therapy and the dietitians continue to be involved in nutritional support to aid recovery.

#### Medicine

We have a small team of Medical Physiotherapists who would see patients who are not post operative. For example, they may see patients after a cardiac arrest, in hospital with other cardiology needs or chronic long term chest conditions. They will visit patients predominantly on Birch Ward, Acute Cardiac Unit or the Coronary Care Unit. They focus on respiratory physiotherapy, mobility and looking to improve a patient's general functioning so they can be discharged home safely.

#### **Cystic Fibrosis**

We have a team of Cystic Fibrosis (CF) Physiotherapists who see patients on Cherry Ward predominantly. They have a regular outpatient clinic, meet with the multi-disciplinary team to contribute to ongoing treatment plans and have recently set up a virtual clinic to support patients when they are at home. They work closely with the team at Alder Hey Children's Hospital to support the transition of patients over to LHCH as they reach adult age. Exercise physiologists will see CF patients in a gym setting which is located within the Therapies

Department. This team also support Adult Congenital Heart Disease patients with exercise which will help management of their long-term condition.

## **Exercise Physiology**

Our Exercise Physiologists work across in-patient and out-patient services including Cystic Fibrosis, Cardiac Rehabilitation, Pulmonary Rehabilitation, and ACHD. They prescribe and deliver specialist exercise assessment and evidence-based exercise plans to optimise physical capabilities, health benefits, and quality of life for patients with long term conditions and/ or following an acute event.

### Occupational Therapy

The Occupational Therapists see patients on the wards and may undertake home visits to support discharge home. They provide assessment and on-going rehab until the point of discharge, which may include cognitive rehabilitation, upper limb treatment, as well as support with activities of daily living. The palliative OT mainly assesses/treats patients within the out-patient clinic and in patients' homes, providing breathlessness management, energy conservation, psychological support and functional rehabilitation.

## **Pulmonary Rehabilitation**

The Pulmonary Rehab team offer the 'Breathe Programme' out in the community which consists of a tailored exercise and education session twice weekly. They also provide two sessions a week on-site within the therapies gym for higher dependency patients, including those requiring oxygen. The sessions combine exercise and education to help people with lung diseases manage their condition, improve physical wellbeing and ability

to participate in daily activities. The team are working towards a national recognised accreditation which is the gold standard. Cardiac rehabilitation also takes place within the department working in collaboration with Cardiac Rehab nurses from the Royal and Broadgreen hospital sites.

#### Admin

Finally, the team's admin support are the back bone of the Therapies department and support the co-ordination and running of the teams including appointments, letters, orders, patient calls, and answering every query under the sun!

#### What are you most proud of?

The Therapies Team. They always remember that we are all working together for the good of patients and their families. The teamwork and ethos generally in therapies is brilliant. We run 24 hours a day, 7 days a week ensuring continuity of the service. We support the training and development of staff and have had a colleague recently complete an apprenticeship to become a qualified Physiotherapist which is fantastic.

## Any plans for the future?

We will be taking the Physiotherapy service to a seven-day working pattern which will provide opportunities for service development and staff work life balance and wellbeing.

We are working hard to achieve accreditation for the Pulmonary Rehabilitation service.
We are also working with the Quality Improvement team to look at introducing prehabilitation for our patients that are in hospital waiting for a procedure. It's hoped this will improve the patient experience and reduce recovery time.

## Who's who?

In January we were excited to introduce the new NHS uniforms here at LHCH, designed to ensure consistency throughout the NHS. See below to see what role is assigned to which uniform.



Heads of Department Nicola (left) and Sue

Exercise Physiologist

Speech and Language Therapists



**Physiotherapists** 



**Occupational Therapists** 



**Dietitians** 



Administration

## Therapies in numbers

66 Staff wards served + Critical Care

Pulmonary Rehab classes Cardiac Rehab classes

+

variable number of Outpatient Clinics. We cover cystic fibrosis face to face and virtual, lung cancer/palliative care, dietetic input for the cardio-oncology clinic and respiratory physic clinic.

Futuristic 3D heart scans on NHS speed up diagnosis and save millions

Revolutionary Al-driven 3D heart scans cut the need for invasive tests and have already saved millions of pounds, according to new analysis.

Now rolled out across 56 NHS hospitals in England, the clever tech enables doctors to diagnose and treat patients with suspected heart disease much faster by turning a CT scan of their heart into a personalised 3D image which is then analysed using AI.

The sci-fi like tool is helping give tens of thousands of patients at risk of potentially life-threatening coronary heart disease a faster and more accurate diagnosis, while also freeing up capacity in the NHS.

One of the patients who has benefitted from the technology said that she wasn't a classic case of coronary heart disease but this enabled the cause of symptoms to be quickly identified, which was potentially lifesaving.

A new study of the technology's use, published in Nature Medicine, found that it reduced the number of patients needing invasive angiogram tests by a sixth (16%) in cases where it was later found no further treatment was required – and by 7% overall.

The number of second heart tests

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patients needed within a two-year period has also been cut by 12%.

New NHS data also shows that over 24,300 patients so far have benefitted since the technology was rolled out on the NHS in 2021, enabling hundreds of patients to avoid invasive procedures and saving the NHS an estimated £9.5m – equivalent to around £390 per patient.

A total of 6,898 patients had access to the Al-driven analysis – called Heartflow – in the last year alone.

The NHS has said that this is a prime example of how technology will make the NHS fit for future generations as part of the 10 Year Health Plan, set to be published in the summer.

Coronary heart disease (CHD) develops when fatty material builds up inside the coronary arteries, restricting the blood flow and oxygen supply to the heart, and putting patients at risk of heart attacks or heart failure. It is the most common type of cardiovascular disease, affecting 2.3 million people in England.

Previously patients suspected of having CHD would need to undergo a CT scan and if a narrowing or blockage in a coronary artery was suspected, many would need an invasive angiogram to confirm the diagnosis. This involves inserting a catheter into a blood vessel, then having dye injected so that narrowed or blocked blood vessels can be seen on an X-ray.

Instead, the new technology uses specialist analysis of the CT scan of the heart to create a personalised 3D model of a patient's coronary arteries and assess the extent and location of blockages, which is interpreted by a cardiologist.

Many patients can then be treated through medication and lifestyle changes, with an invasive angiogram only recommended if they may need to undergo surgery or have a stent fitted.



Lead clinician on the study Dr Timothy Fairbairn, Consultant Cardiologist at LNCH.

The tool also has the ability to suggest the size and position of stent that would work best for the specific patient.

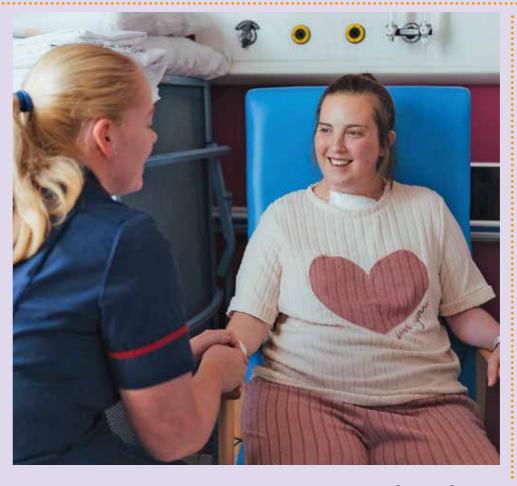
The new study looked at the use of HeartFlow Analysis among 90,000 NHS patients over three years between 2017 and 2020, with the tool used on nearly 8,000 of them. The results showed personalised imaging reduced unnecessary, potentially risky tests while increasing the number of people being treated for heart disease by more accurately diagnosing patients.

Lead clinician on the study Dr Timothy Fairbairn, Consultant Cardiologist at LHCH (pictured) and Honorary Associate Professor at the University of Liverpool, said: "These results show that this technology reduces the need for tests so that patients only undergo necessary treatments, demonstrating how AI technology can both improve care as well as increase efficiency in the NHS.

"The nationwide study, funded by the Medical Research Council, also showed that the huge benefits of this tool can be felt by all patients equally, no matter where they live."

From 2021, NHS England rolled out the technology through the MedTech Funding Mandate programme, which aims to ensure patients and the NHS benefit from clinically effective and cost saving medical technologies faster and more equitably.

Integrated Care Boards and NHS trusts fund the use of the technology, which is currently available in 56 hospitals in England.



# Patient and public involvement needed

Are you involved in, or do you run a patient support group or a patient research involvement group within Merseyside and Cheshire?

If so, the Research Department at LHCH would love to hear from you.

We are working with our partners to develop collaborative Patient and Public Involvement and Engagement (PPIE) and strengthen patient voices to shape meaningful and impactful research. For more details, please contact LHCH.Research@lhch.nhs.uk

# Recruitment achieved for first cardiac surgery trial dedicated to women

ROMA-Women is a randomised comparison of the outcome of single vs multiple arterial grafts trial in women only.

The study opened at LHCH in June 2024 and reached its target for the number of patients recruited in May 2025. The team were delighted that Jenny Jones, Clinical Research Nurse recently received the 'Golden Mug' award for her dedication and work on this study.

The study was open to women over the age of 18 requiring isolated Coronary Artery Bypass Graft (CABG) surgery. CABG is a procedure to supply the heart muscle with blood when the normal supply is compromised through disease. This procedure involves redirecting the blood supply to the heart around the blocked blood vessel by removing vessels from other parts of the body and using them for the heart. For this procedure, veins and arteries are used.

It has been observed that when this takes place using multiple grafts (MAG) using a combination of harvesting vessels from both veins and arteries in the patient, compared to using only a single arterial bypass grafts plus vein grafts (SAG), patients thrive better over time.

The results of clinical trials comparing the long-term benefits of MAG versus SAG are inconsistent however, and do not clearly show that the MAG procedure is better. To resolve this conundrum, this uncertainty is being addressed by ROMA-Women.

Uncertainty as to the best surgical strategy is compounded in women, who make up 20% of CABG patients. Women are older with more advanced disease when they present for surgery, and experience worse outcomes and lower quality of life post-surgery, than men. The vessels and structures are also smaller and more likely to constrict in women making the operation more

technically challenging. Existing trials have recruited very low numbers of women. This knowledge gap means that women are less likely to receive MAG than men, although it appears that the MAG procedure could be beneficial for women.

To gather enough evidence to be certain, the ROMA-Women study is being undertaken. This is an international study comparing the SAG procedure against the MAG. Eligible women are allocated randomly to one of two procedures and the team will monitor the differences in how well they live after surgery. The participants are followed up after surgery for up to 12 years, in which they answer a selection of questionnaires six monthly up to five years and then yearly thereafter.

Congratulations to the team on this excellent progress, led by Mr Bil Kirmani, Consultant Cardiac Surgeon who is the Principal Investigator on the study.

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## 25 years of Liverpool Lung Cancer Unit

In April, Liverpool Lung Cancer Unit colleagues marked twenty-five years of their outstanding service.

In Liverpool the prevalence of lung cancer is far greater than the national average and is the commonest cancer in the local population and the highest cause of cancer death.

Unlike many other cancers, it often presents 'late' and up to a third are only diagnosed after an acute admission to hospital.

To tackle this, in April 2000 clinicians created The Liverpool Lung Cancer Unit with the aim to provide seamless care for patients through the diagnostic journey.

Over the years the unit has always been at the forefront of national lung cancer innovation and developed the skills and expertise of experienced colleagues, who have worked tirelessly to impact thousands of lives.

You can read more about the service on the news pages of our website.



## First ACHD Echo training hosted at LHCH

On 2nd May, we were pleased to host the first Adult Congenital Heart Disease (ACHD) Echo training event here at LHCH.

Specialists from across the country attended the event which provided an insight into the diagnosis and management of ACHD.

LHCH is where all adult congenital surgery and interventional procedures are performed for patients in the North West as part of the North West Congenital Cardiac Service.

Stephen Quadir, Lead ACHD Echo Physiologist said:

"It's been fantastic to have welcomed so many peers to LHCH to share our specialist knowledge with them. Thank you to the team involved in organising such a valuable training day for colleagues that have travelled from across the UK."





## Cath Lab team beam live case to India

Our Cath Lab team were thrilled to be invited to broadcast a live complex PCI case to an international conference in India.

The team beamed a live complex calcium modification procedure to delegates in Chennai, India, which gave them opportunity to educate international colleagues and share their cutting-edge expertise and state of the art facilities.

The live event was a great success with an outstanding outcome for the patient.

Dr John Hung, Consultant Cardiologist who led the live case said: "LHCH is becoming renowned as an international centre of excellence in complex PCI. Broadcasting live cases like this allows us to deliver high quality education, striving to improve the care of patients not only in Merseyside but all around the world. A huge thank you to the team for your expertise, skill and enthusiasm."

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## LHCH patient 'Ozzy' takes on the banker in Deal or No Deal

Daren shared with presenter, Stephen Mulhearn, and viewers that he had undergone a major life-saving quintuple heart bypass at LHCH and spoke about the wonderful care he received from our teams on Birch and Cedar Ward.

After accepting a brilliant offer, Daren decided that he wanted to donate part of his winnings to LHCH Charity as a way of saying thank you for the care he received and especially to wards Birch and Cedar. Have a read of Daren's story below to see how he went from patient to winner!

"I thought it was just a trapped nerve in my shoulder, but both of my arms seemed to have this tingling effect, it just felt like pins and needles really.

"After speaking with my wife, she decided that something wasn't right and so I went to the local hospital. I had an angiogram and then when I was in the waiting room, I got told guickly that I had three blocked arteries. It was a shock at first but then I thought well maybe I'll just need a stent fitting. but this wasn't the case. I was told I needed a triple heart bypass and after that I don't remember a thing, I just

"When I was transferred to LHCH, I was put onto Birch ward where I met my consultant. To my surprise



he told me that I didn't need a triple bypass and so I thought brilliant, great news. Again, this was short lived relief as I was told that I actually needed a quintuple bypass."

Since his successful surgery, Daren has made a healthy, happy, and steady recovery and so decided that now was the time to apply for the show.

"Whilst I was on Birch ward, we used

to watch Deal or No Deal to pass the time and I said to myself once I get through this I'm going on. I never once expected to come out with the winnings that I did and now the show has been a large part of my LHCH story as I got to give something back to the people who gave me such phenomenal care.

"I'm now three and half years postsurgery and my lifestyle has just

completely changed, I'm so much heathier and next year I'll be walking my daughter down the aisle and that's all because of LHCH. I'm here and I get to make that lifelong memory. I'll be forever grateful."

We were delighted to see that previous

patient Daren, 'Ozzy', recently took on the

A huge thank you for sharing your story with us Daren and an even bigger thank you for your wonderful donation to LHCH Charity.

LFC fan Tim makes remarkable recovery after cardiac arrest

Slowly driving away from Anfield after a Liverpool FC match in January 2025, LHCH patient, Tim, experienced a cardiac arrest at the wheel.

You may have seen Tim's incredible story as it was recently featured across LFC social media platforms and on national news. where he was reunited with the fellow LFC fans who initially helped to save his life.

As Tim blacked out and crashed into a wall, his son immediately called for help. Two fans who ran over and realised the severity of the situation. started to perform CPR while an ambulance was called.

Tim was stabilised before being transferred across to LHCH for specialist care and treatment. Following an angiogram, Tim was told that he needed to have an ICD (implantable cardioverter-defibrillator)

After the successful procedure with his consultant cardiologist, Dr Matthew Khan, Tim has continued to make steady and healthy progress. Most recently he has been well enough to return to what he loves best supporting his football club with his son and seeing them become league champions once again.

Since his time at LHCH. Tim has been learning how to perform CPR so that he too will be able to help others in

lucky! Without those guys who were CPR trained I don't think I would be here

Tim with Consultant Cardiologist Dr Matthew Khan



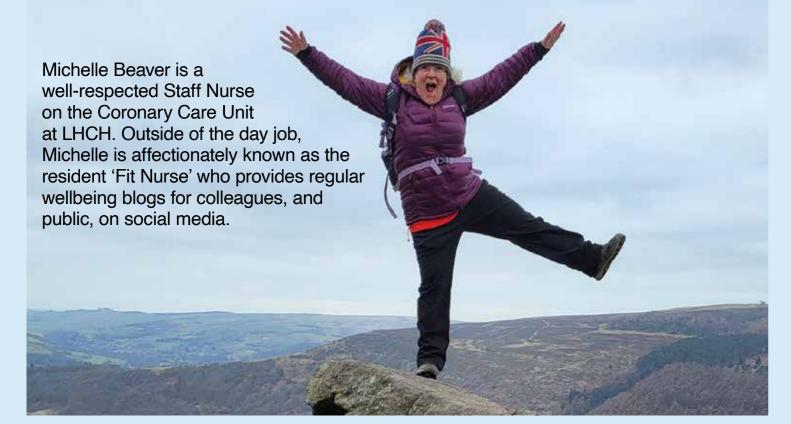
today. I'm just so grateful to everyone and especially the care I was given at LHCH. Every person I came across from nurses to consultants were just so focused on making sure I was ok.

"My mum was treated here many years ago and she said the same thing, it's nothing but great care - it really is wonderful."





# Michelle's epic thirteen-year challenge marathon



LHCH Matters met with Michelle to find out more about her nursing career, her fitness tips and why she can't resist taking on personal challenges.

#### A career in nursing

Initially I wanted to be a teacher, but I changed my mind as I didn't want to go to university. Instead, I went to the South Sefton School of Nursing. Originally, I wanted to go to Manchester, but I wasn't tall enough – you had to be 5' 2" to go there!

I told my parents the news of my future career choice and my Dad thought it was hilarious and my Mum burst out crying. Her Dad had always wanted a nurse in the family, so it meant a great deal to her!

My first jobs were temporary. I had one in the Royal Liverpool Hospital on the Medical Assessment Unit, and then one in the old Walton Hospital in the Endoscopy Theatre. Then I went on to a temporary role in Aintree Hospital as

a Coronary Care Nurse/Sister. They asked me to stay there, and I worked 23 years until I needed a change. That's when I found LHCH and joined here as a Staff Nurse in the Coronary Care Unit in 2016. I absolutely love being hands on and providing front line care for patients and their families, so I've been here ever since.

At the time I joined LHCH my Mum had just been a patient with lung cancer. Sadly, after a short time she became poorly again and lost her battle with cancer. I needed to take a step back during this difficult time and work were brilliant with me. I returned to work when I was ready and have been happy ever since.

## 'Fit Nurse'

When I was in my 30s, I started to get really into building up my physical fitness. When my children were young it had been more difficult to fit this in but as I started exercising regularly it helped me deal with grief, bereavement

and supported my mental health. Whenever my mind wandered, I'd get out for a walk or get the weights out. Even now if I'm feeling moody, I just go out for a walk, get some fresh air, and come home feeling great.

It may be easier for me to fit it in as I work part time, but my tip would be just do what you can around your other commitments, and you won't regret it.

I mix it up and do some cardio and strength training. I walk the dog, run, cycle, do weights and just enjoy going out in the fresh air and moving in the countryside.

## The challenge bug

In 2013, I decided to take on a challenge to the Great Wall of China and since then I have signed up for a different one every year. I like to try and raise as much money as I can for my chosen charities.

This has included eight overseas challenges including the Inca Trail to Machu Picchu, in Peru, which I

completed last month. It was one of those trips that was never actually on my bucket list, but the more photos I saw, the more I wanted to give it a go. I knew nothing about the Inca Trail and Machu Picchu. All I'd heard was it was one of the Seven Wonders of the World, and Paddington Bear had been there!

Trekking along the Inca Trail at high altitude levels pushed my heart and lungs to the max. It was a real test to see if my body could cope with the changes, my mind could keep me going through the tough terrain and weather. I got there with strangers that later became friends. I always say, "a challenge isn't a challenge unless it's challenging!". It certainly was but it was worth it.

Other challenge highlights have included:

• Climbing Mount Kilimanjaro This was amazing and becoming acclimatised to the altitude challenging. I was hallucinating (seeing smiley stones on the path) but I didn't realise at the time until I told someone and realised it wasn't real what I was seeing!

Grand Canyon trek

The people I did this with were amazing. It was the funniest challenge, and we had great food. It was very hot during the day as you'd expect but cold at night as -5°.

Vietnam to Cambodia Cycle
 This was tough as we were cycling

through 30° heat it was very hard!
• Arctic dog sledding

This was the hardest challenge of them all mentally. The dogs barking in the morning upset me, but I did love the sledding. I didn't enjoy the -20° temperatures in the tent though!

• Cycling challenges I completed the Night Rider 100km around Liverpool and Wirral and Manchester to Blackpool through the night. You reach the illuminations at the end which was emotional and beautiful to see. Push up challenges

I have completed push up challenges. I was doing the ward round one day and Professor Stables, Consultant Cardiologist, stopped me and asked me to demonstrate to check my technique. I think he was impressed. I've also tried to do push ups in as many different locations as possible.

Do what you want now, don't wait to achieve your bucket list.

I went on many of these challenges alone, a couple with my daughter, but with organised tour operators and groups. I've met so many brilliant people along the way.

#### Take aways

I want people to just do what they want to do in life. Don't be held back. You don't need anyone else to achieve your own goals. There are plenty of organised activities and trips out there. Seize the day, do what you dream of, and your life will still be there when you get back.

The statistics for cancer are on the rise and now one in every two are impacted. Heart Disease is high up there too. Do what you want now, don't wait to achieve your bucket list.







Highlights

Let's have a look at some of the highlights for our team since the last edition of this newsletter.



## International Nurses' Dav

International Nurses' Day is held in May every year in line with the birthday of Florence Nightingale, who is attributed as being the founder of modern nursing. Team LHCH enjoyed breakfast pastries, treats, mini health checks, wellbeing support and entry to a prize raffle on the day. A big thank you to Costco, Chiesi, AstraZeneca, Mac Roofing, Staff Benefits for their support in making the day possible



Kelly, Clinical Audit and Effectiveness Officer was nominated for the integral part she has played orchestrating the annual National Inpatient Survey, over the last 23 years, on behalf of LHCH. Kelly has played a crucial part in the success of the survey.

#### March

Hannah Frodsham, Urgent Surgical Care Co-ordinator was nominated for making such a big difference to patient experience in her new role. Hannah streamlined the process of referral to surgery in such a short period of time.



#### **February**

Hannah Platt, Physiotherapist was nominated by a patient who explained how Hannah 'saved her life'. The treatment Hannah provided her with had 'improved her quality of life significantly'. She was described as being patient, kind and exemplary in her role every day.



help their patients when they need it the most during such a difficult time.

Due to the success of the 'Gloves Aware' project Gloves in Critical Care the campaign was rolled out site wide on 3rd April. The project team visited Aware wards and departments to highlight the positive impact that can be made by just using protective gloves when necessary. The team chatted to colleagues to provide hand hygiene advice and to reinforce that just wearing gloves when recommended had huge benefits and promoted compassionate care and sustainability.





Caring for people with heart and lung disease

To find out more about LHCH Charity give them a ring on 0151 600 1409 or email enquiries@lhchcharity.org.uk

## Cystic Fibrosis patients benefit from charity support

In November of last year LHCH Charity launched a campaign which aimed to raise funds to purchase a new ultrasound machine for our Cystic Fibrosis (CF) patients.

This vital piece of equipment was needed to help those who have had to have multiple in-patient stays to help fight the infections they are so vulnerable to. Of course, with each intravenous intervention the veins become weaker, and collapse making it harder to find suitable IV insertion sites. This is where ultrasound plays its part by providing real time guidance, guickly identifying the right vein, and speeding the treatment that our patients so desperately need.

Thanks to the generosity of our supporters, we can say that we have now raised sufficient funds to be able to provide a new Ultrasound for Cherry Ward which will be in operation very shortly.

Dr James Greenwood, Respiratory Consultant and specialist in Adult Cystic Fibrosis said: "Everyone is thrilled with the response which has allowed us to purchase the Ultrasound for use on the ward. It will help us to provide the vital IV antibiotics that our patients need, and we can't thank LHCH Charity supporters enough for helping us in this way."







## Ben Nevis conquered for LHCH Charity!

17th May 2025 saw 21 of Richard Wick's friends conquer Ben Nevis to raise funds for LHCH Charity after Richard's treatment at the hospital.

Richard was admitted to LHCH on 3rd January when a CT scan showed that his chest pains were, in fact, an aortic dissection. After a 10-hour operation and the skill of our surgical teams Richard was recovering when unfortunately, the stent failed, and another dissection occurred. This is only the second time in the world that such an occurrence had happened and the plan for repair involved

specialists from around the world. Thankfully the second operation was a huge success, and Richard is now well on his way to recovery.

To say thank you 21 of Richard's friends took on the challenge of climbing Ben Nevis raising £6,906 in the process. All the funds raised will go to the Aorta Aneurysm Research project headed by Mr Othman, Richard's lead surgeon.

We can't thank everyone who took part enough for helping to support Richard, research into Aortic Dissection and LHCH Charity - we can't thank you enough!!

## What is Gift Aid and why is it important?

Gift Aid is a government introduced scheme which allows people who pay UK tax to increase their donations by a further 25% at no extra cost to

All you need to do is when you see a gift aid form is

just enter your name and address and sign and date. Nothing could be simpler and it raises even more money for LHCH. So, if you are thinking of making a donation to support our work - please don't forget to Gift Aid it!

# Your chance to win big with LHCH Charity



## And don't just take our word for it. The stats speak for themselves!

376 Winners £25,220 in total prize money awarded Over 10 people have won £1,000

## So the LHCH Charity Lottery really is the one where everyone wins!

And it couldn't be simpler to join. Simply contact the Charity Office on 0151 600 1409 and we will send you a form or alternatively you can join online by visiting our website at www.lhchcharity.org.uk.

"I played the Lottery to support LHCH Charity because the hospital did so much for the family. Winning over a £1,000 was certainly a wonderful bonus!"

Mrs D, Leyland

So, what's stopping you – you could be another of our lucky winners!

