

Board of Directors (In Public)
Item 1.5

Subject: Chief Executive's Report
Date of Meeting: 23rd September 2025
Presented by: James Sumner, Chief Executive
Purpose of Report: To Note

BAF Reference	Impact on BAF
All	The report updates on a range of issues.

Level of Assurance (please tick) To be used to provide the Board / Committee with a guide on the extent of assurance and evidence of assurance provided within the report		<input checked="" type="checkbox"/>
Level of Assurance	Description	
High	There is a strong system of internal control which has been effectively designed to meet the system objectives, and that controls are consistently applied in all areas reviewed.	<input type="checkbox"/>
Substantial	There is a good system of internal control designed to meet the system objectives, and that controls are generally being applied consistently.	<input checked="" type="checkbox"/>
Moderate	There is an adequate system of internal control, however, in some areas weakness in design and/or inconsistent application of controls puts the achievement and some aspects of the system objectives at risk.	<input type="checkbox"/>
Limited	There is a compromised system of internal control as weaknesses in the design and / or inconsistent application of controls puts the achievement of the system objectives at risk.	<input type="checkbox"/>
No	There is an inadequate system of internal control as weaknesses in control, and/or consistent non-compliance with controls could/has resulted in failure to achieve the system objectives.	<input type="checkbox"/>

1. Operating Environment

The Trust, as part of the C&M system, continues to be subject to a high degree of scrutiny and control. This necessitates delivery of our ambitious and stretch delivery targets but also significant Trust engagement and participation in C&M turnaround discussions, NHSE sponsored oversight from PWC and an ongoing focus on efficiency and productivity. This is coupled with organisation wide engagement in LAASP initiatives which are growing and span pathway leadership to development of corporate services.

2. LHCH Winter Vaccination Campaigns / Flu Campaign Report

This operational plan outlines the activity in support of the Seasonal Flu vaccination programme Autumn/Winter 2025/26. The 2025 vaccination program will commence in October 2025 and is expected to ultimately conclude in February 2026 and will be offered to 100% of healthcare workers (frontline and back office functions included). The appended report provides a Trust response to the required action plan.

See enclosed report for more details.

3. NHS England – Urgent and Emergency Care Plan 2025/26

A UEC Plan for 2025/26 has been published by NHSE which seeks to both advocate and provide a framework for the development of a comprehensive approach to addressing the challenges faced by urgent and emergency care services in the NHS. There is an expectation of Board's awareness of this request but also acknowledgement that the impact on LHCH is more limited than some of our neighbours with active ED and UEC considerations. Responses that LHCH need to put in place are therefore limited however the Board is asked to note that NHSE expects that by focusing on reducing waiting times, enhancing community care, and improving patient flow, the plan aims to deliver better outcomes for patients and ensure that the NHS can respond effectively to increasing demand. The emphasis on collaboration and investment in resources is crucial for achieving these goals and improving the overall quality of care.

4. EPRR Core Standards

Each year, NHS England request that healthcare organisations self-assess their emergency preparedness against a core set of emergency preparedness and resilience response (EPRR) standards. The purpose of this is to highlight any weaknesses in systems and develop action plans to mitigate these.

During 2025 work has continued to ensure increased compliance with the EPRR programme, with policies being refined, tabletop exercises undertaken to test our responses and new audits established to measure compliance with policies/procedures. The 2025 self-assessment completed by LHCH offered a preliminary result of substantial compliance showing an improvement from the partial compliance score achieved in 2024.

See enclosed report for more details.

5. Winter Preparedness Board Assurance Statement

Planning for winter this year is more challenging than previous years due to the change in demands on healthcare services. The system is experiencing particular high levels of non-elective demands alongside ambitious elective recovery plans. The continuation of medical industrial action has added an additional layer of uncertainty.

The leadership team has been engaged with system partners to collaborative proposals for services as the region approaches winter, as well as ensuring internal readiness for the challenges ahead. The supplied paper sets out schemes implemented in previous years and the plan to do so again this year noting LHCH has no ED.

See enclosed report for more details.

6. Governance Manual Annual Review

Mersey Internal Audit Agency have traditionally supported the Trust in the annual review of the Corporate Governance Manual (CGM) in order to provide assurance that it is comprehensive and consistent with best practice. The scope of this year's audit plan was altered in order to provide contingency for audit work related to LAASP and any LHCH transition.

The scope of this year's CGM review has taken the following approach: Desktop review led by the executive office for matters of accuracy, naming, dates of review, descriptions etc. Review, where appropriate, led by relevant senior and/or director lead. MIAA review of the external environment with recommendations for changes and/or consideration.

The Audit Committee make a recommendation to the Board of Directors to approve the updates and adopt the revised Corporate Governance Manual.

See enclosed report for more details.

7. Communications Strategy Update

During quarter 1, the Communications team delivered a wide range of impactful activities that supported both strategic and operational priorities across the Trust. Notable achievements included the successful submission of key corporate documents, the launch of a widely viewed corporate video, and strong engagement across social media platforms. The team provided extensive support to divisional areas and played a central role in planning and delivering high-profile initiatives such as the LHCH Grand Awards and LAASP communications. These efforts have contributed to a consistent and high-quality communications output, reinforcing the Trust's visibility and engagement with stakeholders. Looking ahead, the team remains focused on delivering strategic communications for upcoming campaigns and events, while continuing to explore innovative approaches, including the use of AI, to enhance messaging.

See enclosed report for more details.

8. Annual Equality & Inclusion Update incl. WRES / WDES

The annual Equality, Diversity, Inclusion and Belonging (EDIB) Board paper, attached below, provides an update on key developments in delivering the Trust's EDIB strategy. It also offers assurance on equality governance and statutory requirements. The paper was reviewed by the People Committee in September, which welcomed the progress achieved and gave positive feedback on the outcomes delivered to date.

See enclosed report for more details.

9. Health & Safety Annual Assurance Report

The Health and Safety Annual Report for Liverpool Heart and Chest Hospital for June 2024 to May 2025 highlights ongoing commitment to statutory compliance, a proactive safety culture, and continual improvement. Incident reporting increased by 10%, attributed to enhanced reporting systems and a positive safety culture shift. The report details the successful transfer of COSHH management to the Health and Safety team and the introduction of a pilot scheme for risk assessments across departments. Additionally, development of a centralised safety software system is underway to improve management and oversight of safety actions in conjunction with UHLG colleagues. Mandatory training compliance has improved, with 12 staff completing RoSPA IOSH managing safely qualifications, though challenges remain in contractor safety management and establishing a formal audit programme. Leadership changes have strengthened team focus and engagement. The report sets clear objectives for 2025/26, prioritising policy updates, audit implementation, training, and enhanced contractor management, positioning the Trust strongly on health and safety compliance and assurance.

See enclosed report for more details.

10. Cheshire and Merseyside Provider Collaboration (CMPC)

See item 6.1.1.

11. Liverpool Adult Acute and Specialist Providers (LAASP)

See item 6.1.2.

12. Consultant Appointments

Grade	Name	Recruitment Stage
Locum Consultant Anaesthetist	Niranjan Dilip Waje	Pre-employment checks
Locum Consultant Cardiologist	Warkaa Saeed Jaafer Al-Shamkhani	Started 08/09/25
Consultant Cardiologist	Mohammed Nooruddin Meah	Started 04/08/25
Locum Consultant Thoracic Surgeon	Mohammad Samir Mohammad Diab	Starting 15/10/25
Locum Consultant Thoracic Surgeon	Konstantinos Kotidis	Started 07/07/25

13. Other key appointments

Title	Name	Recruitment Stage
Director of Nursing – LHCH / BG HMB	Jennifer Taylor	Pre-employment checks
Chief Operating Officer – – LHCH / BG HMB	Gary Price	Pre-employment Checks

14. Recommendations

The Board of Directors is asked to review the content of this report.