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NHS
Liverpool Heart and Chest Hospital
NHS Foundation Trust

LHCH matters

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

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LHCH one of the TOP trusts in the country according to patients

LHCH has once again been named one of the BEST hospitals in the country, according to the results of this year's national NHS Adult Inpatient Survey 2024.

The survey showed that LHCH was in the TOP three trusts in the country for overall patient experience, and TOP in the North West.

The results also recognised LHCH in the top 3 trusts in the country for 6 question areas:

- Did the hospital staff explain the reasons for changing wards during the night in a way you could understand?
- Thinking about your care and treatment, did hospital staff take your dietary needs into account?
- During your time in hospital, did you get enough to drink?
- Thinking about your care and treatment, were you told something by a member of staff that was different to what you had been told by another member of staff?
- Were you able to get a member of staff to help you when you needed attention?
- Overall, how was your experience while you were in the hospital?

LHCH was recognised as one of the **TOP THREE** trusts in the country for the following three sections:

Section 2: Hospital and Ward
Section 5: Nurses
Section 12: Overall experience

Furthermore, LHCH received a 67% response rate – one of the highest response rates in the country.

Patients were asked for their views on various aspects of their care, with trusts then listed in one of seven categories – from 'much better than expected' down to 'much worse than expected' – based on the proportion of patients who responded positively compared to the average. LHCH was rated 'much better than expected' and 'better than expected' in every survey section.

The report, published on Tuesday 9th September 2025, summarised the experiences of more than 62,444 patients from 131 acute and specialist NHS trusts who spent at least one night in hospital during November 2024.

Lung Cancer Service invited to No.10

We are proud to share that members of our Lung Cancer Screening (LCS) team were invited to visit No.10 Downing Street.

Darren McGuinness, Change Programme Manager and Michelle Woods, Matron for the NHS Lung Cancer Screening team were both thrilled to represent LHCH as a partner organisation of the Roy Castle Lung Cancer Foundation. The charity marked its 35th anniversary with the event and shared the message that lung cancer screening is saving lives.

The LCS programme, which originated here in Liverpool, aims to improve early lung cancer diagnosis by use of mobile scanning trucks to visit local communities. More than 10% of cancers found through the programme have been detected in Cheshire and Merseyside after a successful roll out over the past few years.

Darren spoke of the visit: "It was amazing, it was such an honour to be recognised for the work we do here at LHCH and the lives we have saved. It was great to see patients at the event that had been through our programme and been cured from lung cancer as a result!"

Michelle said: "It's humbling to know that our team has contributed to such an important cause, and the difference that Lung Cancer Screening makes to our participant's and families. Most importantly it demonstrates that the Lung Cancer Screening is working, and we are saving lives. A good story to tell my future grandkids!"

Darren and Michelle outside No.10.

New NHS Oversight Framework ranks LHCH 4th nationally

LHCH has been ranked one of the top trusts in the country with the introduction of a new NHS National Oversight Framework – a tool by which all NHS Trusts are to be measured.

LHCH ranks 4th out of 134 hospitals in the acute and specialist Trust league table.

There's 22 metrics with the framework, spread across six domains, which come together to give each organisation a segment rating of between 1 at the high end down to 5.

The new quarterly league tables score each NHS trust for their performance against 22 metrics in the new 'NHS Oversight Framework', which reflect the delivery of NHS priorities. These include reducing waiting times, ensuring patient safety, improving patient and staff experience, and staying within budget. Each trust is ranked by their average score across these metrics and placed in one of four equal groups.

NHS organisations are also placed in segments (from 1 to 5) based on how they're performing. Segment 1 represents the organisations with the narrowest range of challenges while segment 4 contains those with the broadest.

LHCH has been placed in Segment 1.

The results form a league table which will be updated quarterly, making a visible and accessible way for patients, staff and the wider public, to understand how the Trust is performing. Visit the news pages of our website to access the full league table.

Hospital Leadership Team

From 1st October 2025, LHCH and Broadgreen Hospital began a new management arrangement with the formation of LHCH and Broadgreen Hospital Management Board (HMB).

The HMB is responsible for the operational management of the hospitals and is now being led by a single Hospital Leadership Team.

The new Hospital Leadership Team is:

- Jonathan Mathews – Executive Managing Director
- Mr Manoj Kuduvalli – Medical Director
- Jen Taylor – Director of Nursing
- James Bradley – Director of Finance
- Gary Price – Director of Operations
- Rachael McDonald – Director of People

In future editions, we will share further information about our wider collaboration with NHS colleagues as we look to deliver even better care and services and improved clinical pathways for the benefit of patients.

Jonathan Mathews Executive Managing Director.

MEET THE SPECIALIST

We are pleased to share a new series of articles where we hear from LHCH specialists about their career inspiration, experiences and achievements. For the first in our series, we spoke to **Professor Rod Stables** who is a Consultant Cardiologist with an international profile in both practice and clinical research.

Where it started

Rod Stables was born in Liverpool and spent his childhood in the city, attending the Liverpool Blue Coat School. When he left school at 18, Rod first went to Sandhurst and completed a short-service commission, as an infantry officer in the Army, serving in the UK and abroad. He subsequently went to university, reading medical sciences at Churchill College, Cambridge for three years and then clinical medicine at St Edmund Hall, Oxford for a further three years, qualifying as a doctor in 1985.

"I liked the sciences, and it seemed natural to go to medical school."

We asked Professor Stables what motivated him to embark on a career in medicine and specifically as a cardiologist. He said: "I grew up in a normal Liverpool household where your parents wanted you to get a good job and, as you might expect, being a doctor was high on the list of acceptable possibilities. I liked the sciences, and it seemed natural to go to medical school.

"Nobody in my family had ever been to university, and apart from my GP, I did not even know any doctors, so I had no real idea what I was getting myself into.

If I am asked now by a young person if I think they would enjoy being a doctor – the answer is always "yes." There are so many different types of career possibilities and so there is almost always a job out there to suit everyone.

"I was motivated towards cardiology because my dad had coronary heart disease and had his first heart attack in his forties, whilst I was at school, eventually dying from a heart attack when I was at medical school.

"Cardiology is a very exciting and demanding speciality because it tackles one of the UK's leading causes of death and poor health. Sometimes you are required to treat patients in the throes of a genuine, life-threatening emergency and this demands a cool head, clear thinking and the ability to make decisions under pressure. As an interventional cardiologist, much of what I do involves practical skills and I get to work with my hands, performing procedures that can be quite intricate. Finally, cardiology practice is guided by research, development and innovation, perhaps more so than some other fields."

Professor Stables worked in Oxford and at the Royal Brompton in London until the year 2000, when he relocated to join the, then, Cardiothoracic Centre – Liverpool NHS Trust which later became Liverpool Heart and Chest Hospital NHS Foundation Trust (LHCH).

Consultant Cardiologists, Dr Joe Mills and Dr Stables with Aortic Surgeons, Mr Manoj Kuduvalli and Mr Aung Oo.

Role at LHCH

Professor Stables joined LHCH when he was 40 years old, as a Consultant Cardiologist, having completed specialist training two years previously at the Royal Brompton Hospital. The opportunity here was "one of the best roles in cardiology, in one of the nation's leading specialist units".

This was coupled with the chance to move back home to Liverpool and live closer to family. Professor Stables shared: "I was the sixth cardiologist when I started, and I was the new face. I looked up to senior colleagues such as Drs Charles, Perry, Ramsdale, Harley and Morrison who were already here. It was a much smaller group in those days. There has been substantial growth since, and we now have more than 40 cardiologists.

"Even in those early years, the success and potential of the hospital was recognised and there was a nationally funded programme for growth that saw us double our size and activity in the 2000s. This recognition, and investment for expansion, has continued and we have become a national leader, not only in cardiology clinical activity and outcomes, but also in patient safety, patient experience, staff satisfaction and in research. It's been great to be part of that.

Professsor Stables with members of the Cath Lab team in 2024.

"It is demanding but satisfying work and has saved many lives over the last 15 years."

"There have been milestone developments along the way. In January 2009 we launched the Primary PCI Service so, for the 2.4 million people that we serve in the region, anyone experiencing a heart attack will be brought, directly, to us for an emergency angioplasty procedure. This provision involves a clinical team drawn from several different clinical disciplines and a lot of hard work, much of it out-of-hours. It is demanding but satisfying work and has saved many lives over the last 15 years.

"Another standout for me has been the continuing, relentless improvement in the safety and effectiveness of coronary angioplasty and stenting over the past 20 years. We are now able to offer treatment to patients who may previously have needed open heart surgery, and to do this, in the vast majority of cases, as a day-case – with no nights in hospital, with patients remaining in their own clothes and with no substantial discomfort or recovery time.

"I have very much enjoyed being part of teams that have developed, pioneered and introduced new procedures. I have a special interest in the invasive treatment of hypertrophic cardiomyopathy, having been involved in the world's first procedure, performed in London in the 90s. We are now the leading centre in the UK for this procedure and offer unique levels of efficacy and safety. Much of this comes from the use of techniques conceived and first used here, based on work that I did with Dr Rob Cooper and Dr Binukrishnan.

"We've also introduced new minimally invasive percutaneous approaches to valve treatment, like TAVI. There have been so many developments and improvements in quality of care that it is hard to pick out just a few.

"I've been happy and fortunate enough to have worked in one of the most effective, collaborative and positive hospitals in the country. I have been grateful for the support and fellowship of my colleagues from all clinical disciplines and indeed from all the fantastic staff that keep this place running so effectively, and with such a good atmosphere. This makes coming to work a pleasure, just about every day."

Official opening of the Holly Suite day case unit in 2014.

Cutting edge facilities

In 2024, LHCH officially unveiled a Cath Lab re-development providing national leading, state-of-the-art facilities. Professor Stables along with Dr Perry, former Medical Director, had the pleasure of cutting the ribbon to the new facility.

Professor Stables spoke of the phenomenal changes to infrastructure and facilities over the years: "When I first started, we had three Cath Labs. One of these was very old but functional. I was here when we got the fourth, and I think, in total, we have had three or four sequential development phases to improve the facilities. The latest re-development (in 2024) has been transformational, and we now have seven spacious and well-equipped Cath Labs, with additional access to a hybrid theatre in the surgical department.

"It's much easier now to live stream live cases and share our skills with other centres. Only yesterday we were transmitting live cases to a national audience. It's good we have this capability, but also gratifying that other professionals from around the world want to watch our cases!" »

Official opening of the Cath Lab re-development in 2024.

MEET THE SPECIALIST

International profile in research

Professor Stables has an established and leading reputation for practice and research in interventional cardiology. He is the national lead for the British Heart Foundation Clinical Research Collaborative which seeks to better coordinate and deliver clinical research at a UK level.

We asked Professor Stables what his motivation is for research, why it is so important and what difference does it make: "Outside of my clinical responsibilities, research is my main interest and where I have tried to make the biggest extra contribution at LHCH.

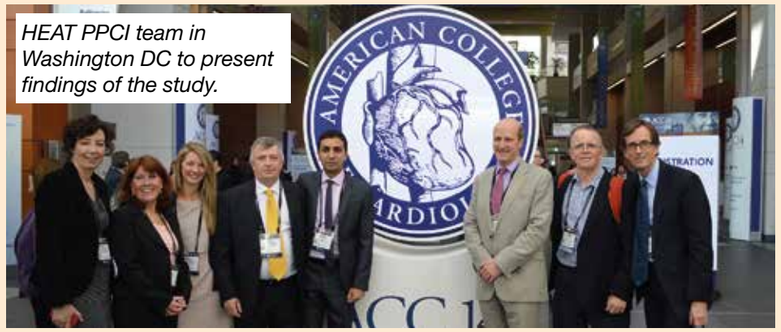
"Research is the key to improving what we do. Finding the best treatments – the most effective and most safe to provide the best quality care for the patients of tomorrow. That alone is enough of a motivation to do research.

"However, it creates an environment that encourages staff stimulation, development and hence satisfaction. Research encourages us to think about the future and about doing things differently. In clinical research we are, in effect, performing scientific experiments. This also teaches us to be disciplined and to behave in accordance with best practice protocols. Attention to detail rubs off and probably makes you a better doctor, or nurse, or radiographer, all the time. You are more informed, motivated and because you adhere to systematic methods of practice, the quality of care improves.

"Other benefits for me are that I've been able to work with younger staff members, from different disciplines, to support them in planning, conducting and reporting research. I've been able to offer 1.1 support to cardiologists in training which is very satisfying and has helped to advance their careers. I've supervised 10 higher research PHDs based on clinical research and, in truth I have probably learned as much from the students as they have from me!"

Research milestones

Asked about his 'stand out' achievements and milestones in research Professor Stables said:



HEAT PPCI team in Washington DC to present findings of the study.

"My aim for research is to answer questions about every day clinical care, which are directly relevant to what we do here at LHCH. Although I have interests in databases, registries and statistics, my main projects have involved organising large, pragmatic clinical trials, sometimes in collaboration with other UK and international centres, but also, notably, using our own teams.

"In the history of world cardiology, the two largest ever single centre randomised trials have been conducted here at LHCH. This is a big achievement and is a testament to the teamwork of our staff. We are probably the only centre that has delivered on a dream that every patient, every time gets the chance to participate in research.

"One of these trials is called HEAT PPCI* and this stands out because of its international impact and recognition – for both the clinical findings and novel research methods. In the US market, the findings of this study saves the health industry about $700 million every year. When it was the 70th birthday of the NHS, the National Institute of Health Research published a tribute naming what it considered to be the 70 greatest research achievements in the history of the NHS, and this study, conceived and delivered by us, made the list."

**How Effective Are Antithrombotic Therapies in Primary Percutaneous Coronary Intervention*

Interests

Outside of work Rod is married and has two sons and two labrador dogs.

"I enjoy climbing and outdoor activities, but it's in the Lake District mainly now. When in was younger I climbed some of the world's highest mountains such as Mount McKinley in North America, 4000 metre peaks in the European Alps and I was the Deputy Leader of the 1992, Army, Everest in Winter expedition.

"It is a similar story (of past glory) in sport, with current interests focussed mainly on golf. Previously I played Rugby, to a good level. I was forced to give up aged 42, when a lack of pace was creating liabilities for my teammates. I then coached in junior rugby and latterly became a referee. Over recent years this has been a passion, and I have managed to officiate at some good games. Last year, at a match on the Isle of Man, it was a real pleasure to walk off down a tunnel of previous patients, who had come to the ground to show their support for all the work that LHCH does for their community."

Professor Stables coached junior rugby and became a referee.

LHCH is a Research Active Trust

Thank you Professor Stables for sharing your story

RESEARCH AND INNOVATION NEWS

The HARNESS Trial: Recruitment milestone in vascular access research

The HARNESS Trial (Haemostasis AfteR veNous accESS in atrial fibrillation catheter ablation) successfully recruited over 300 patients before concluding recruitment in July 2025.

This single-centre randomised controlled trial, led by Chief Investigator Prof Dhiraj Gupta and Principal Investigator Dr Mark Mills, aimed to identify the safest and most efficient method for femoral venous haemostasis following atrial fibrillation (AF) ablation. The trial compares manual compression to a figure-of-eight suture technique secured with a three-way tap, whilst also exploring whether bed rest duration can be safely reduced.

The HARNESS trial was addressing a key knowledge gap, as many centres continue to use manual compression in the absence of comparative data. With a total of 336 patients to be enrolled, the study's design ensures broad participation and real-world relevance.

This important work would not be possible without the dedication and support of our teams at LHCH. Sincere thanks to the multidisciplinary team in the electrophysiology labs, and to nursing staff across the inpatient wards, especially colleagues on Holly Suite and Birch Ward, for their ongoing commitment to delivering high-quality research alongside excellent patient care.

For further information about the HARNESS trial, please contact the research team.

LHCH is first in Europe to randomise for BiomX-04-002 study

The research team at LHCH are thrilled to be the first in the UK, and Europe, to recruit patients to the BiomX-04-002 study.

This study is designed to investigate a new experimental drug called BX004 and to see how effective and safe it will be to treat long-term lung infections caused by a bacteria called Pseudomonas aeruginosa (PsA) in adults with cystic fibrosis (CF). BX004 is made of five natural bacteriophages. A bacteriophage is a type of virus that only infects and kills specific bacteria and does not harm or infect human cells. It only works on certain PsA bacterial strains.

Outcomes are assessed in variety of ways bloods, sputum, spirometry and patient diary.

The study has been delivered with the collaboration of consultants, research staff, physiotherapist, and respiratory physiologists.

Dr Freddy Frost, Consultant Respiratory Physician and Principal Investigator said: "We are delighted to be the first in Europe to randomise for this study. This clinical research aims to evaluate how effective BX004 is for the treatment of long-term infections in adults with cystic fibrosis. It will also consider how well this works in improving lung function and the quality of life in people with cystic fibrosis. Thank you to all the team involved in making this study possible as we seek to improve treatments for future patients."

Behind the scenes with the Perfusion team

The Perfusion team at LHCH work tirelessly behind the scenes as a crucial component of the cardiac (heart) surgery team.
Based in the Operating Theatres Department the team provide clinical perfusion cover enabling life-saving heart surgery to take place. They also provide important on-call cover in the event emergency surgery may be required.
LHCH Matters caught up with **James Bennett,** one of the Lead Perfusionists, who shared an insight into the fascinating role of our Clinical Perfusion Scientists here at LHCH.

The role

Clinical Perfusionists are Healthcare Scientists.

They use a number of highly technical, mechanical and electronic devices to ensure that oxygen reaches a patient's body through the blood, when the patient's lungs and heart are temporarily not functioning. They also control the equipment (heart-lung machine) which temporarily takes over a patient's respiration (breathing) and circulation of blood during open-heart surgery.

No two days are the same. You can be looking after two patients having the same operation, but the days can be completely different. This really depends on the patient, their stage of illness and any other health conditions. The role often means long hours, but you get great job satisfaction because you know you are playing a crucial part in helping patients through potentially life-changing experiences.

Typical day

Team brief starts at 8am and the perfusionist sets up a bespoke perfusion circuit of tubing and disposable equipment for each patient, which can take around half an hour to an hour.

We fill the circuit with sterile fluids and an anticoagulant (heparin) to prevent blood clots. Circuits typically include an oxygenator and blood pump and are mounted onto a Heart-Lung (cardiopulmonary bypass) machine.

The patient will be anaesthetised ready for their operation and brought into Theatre. At this point, we run through the World Health Organisation (WHO) safety checklist. The patient is then prepared for their operation, and the Anaesthetist will give them an anticoagulant that lets us safely attach the patient's circulation to our machine and go 'on bypass'. Using the Heart-Lung machine and circuitry we take the patient's blood out of their body, and act as the heart and lungs for the patient. That's why it is called cardiopulmonary bypass because the blood doesn't go through the heart and lungs anymore. We oxygenate the blood and pump it back into the patient's body. We continuously check the patient's blood flow and pressure, blood gases (oxygen levels and glucose concentration etc) during the operation to make sure the patient is in a safe zone, so we know their brain and other organs are going to be well protected during the operation.

We also deliver 'cardioplegia' (typically a mixture of blood and a high potassium solution) into the heart to stop the heart beating and lower the amount of energy it uses. Its cooled down to a safe temperature, which protects the heart from injury and lets the surgeon operate on the heart. We keep the patient safe during that process.

After the patient's operation has been completed, we wean from bypass. This involves filling the heart back up with blood, waking it up and ensuring the ECG is back to normal. We bring the patient off bypass; their sternum is closed back up and when they are ready they are taken to the Critical Care Unit for recovery.

We tend to either do one long operation on one day or two shorter operations in the morning and afternoon.

A growing role

We have a small, highly skilled and experienced team of ten qualified perfusionists and three trainees, and we all work hard to ensure that patients can have the heart surgery that they need.

There is a growing demand for staff in the profession. Before I started in this role, I took part in the Access to Medicine programme and I was able to observe a mitral valve operation with Mr Modi, Consultant Cardiac Surgeon. I met Alice (who is now one of my colleagues) operating the equipment which literally kept the patient alive. It looked like a mad scientist's workshop and was so interesting. From that day on I knew I wanted to work in Perfusion. After a conversation with Alice, I applied to become a trainee and the rest is history!

If you are interested in the role, you need a science or medical-related degree to train for a career in Clinical Perfusion. Reach out to your local heart centre about opportunities and be proactive!

Research

Earlier this year I was awarded a PHD Fellowship by Kidney Research UK which is focused on assessing the ability of free haemoglobin filtration to reduce renal cell injury.

After life-saving surgery on the thoracoabdominal (lower region of the) aorta, around half of patients develop temporary kidney problems, and around a third of patients require temporary dialysis until this problem is resolved. This can be difficult for patients, who must remain bedbound and stay for a longer period of time on critical care.

The ambition of this project is to understand the factors involved in causing kidney injury, and to develop improved methods of protecting patients from this problem after surgery.

James Bennett, one of the Lead Perfusionists.

Returning to rugby after heart surgery

18 months since undergoing major heart surgery at Liverpool Heart and Chest Hospital (LHCH), Alex Groves is determined to leave his mark on the world of professional rugby.

However back in in January 2024, the prospect of continuing his promising career was a real concern for the 24-year-old, as he first met his consultant cardiac and aortic surgeon, Mr Omar Nawaytou.

At the time, the 6ft 9in second row was playing for Sale Sharks when he received the serious diagnosis of a leaking bicuspid aortic valve and an aneurysm in the aortic root.

An aortic aneurysm is a swelling in the main artery carrying blood from the heart to the rest of the body. If the aneurysm ruptures it can be life-threatening. A leaky bicuspid valve occurs when the valve doesn't close completely, allowing blood to flow back into the heart instead of forward into the body.

Alex said: "It all started about five years ago when I was at Bristol Bears and had a routine heart screening. They found that I had a leaking valve, which is quite common and so I wasn't too concerned. But when I did the same test in 2023 pre-season, the situation had worsened, and so the cardiologist referred me to LHCH.

Urgency

"When I met Mr Nawaytou, he talked to me very clearly about the urgency of my situation, the need to undergo surgery and the various treatment options – some of which would likely have been career ending."

According to Mr Nawaytou, the clinical team were always conscious of Alex's age and his career. He said: "There are different treatment approaches, and many centres might have considered either a mechanical valve or a bioprosthetic valve.

"However, we pride ourselves at LHCH on valve repair and natural aortic valve substitutes, and in the event that a valve does need replacing, a procedure called the Ross procedure can be carried out using a patient's own pulmonary valve. In discussion with Alex, we felt these were the best options and gave him the best chance of returning to professional sport."

In February 2024, Alex underwent a successful 7-hour operation at LHCH without complications to repair his bicuspid valve and to replace his aneurysm. Following a week in hospital, he was discharged to continue his road to recovery and back to full fitness.

Incredibly grateful

He said: "The first step to me returning to rugby was coming through the operation. Therefore, I'm so incredibly grateful to Mr Nawaytou and all the clinical team at LHCH for the amazing care that I received from everyone at the hospital – it was a real team effort.

"But I'm not sure anything can properly prepare you for the hard work needed to get back to full fitness after heart surgery – it was intense. Initially I struggled with basic fitness that before surgery was a walk in the park, and I admit it was challenging. You need to be motivated and patient – building up your strength slowly and taking comfort from the positive signs of progress every day. Overall, my recovery was shorter than I expected and that's thanks to the care at LHCH.

He added: "It was an amazing feeling to finally get back on the pitch and do that first tackle and first carry – a real dream come true. It felt like I was making my debut all over again and was a really special moment for me and my family."

Consultant cardiac and aortic surgeon Mr Omar Nawaytou with Alex.

For Mr Nawaytou, one thing stood out about Alex which made him never doubt that he would return to professional rugby – his motivation.

"From day one, Alex said 'do what you need to do to get me through the surgery and I will do the rest' – and he has.

"I'm delighted by the outcome, but it's also important to acknowledge the excellent care from his club doctor at Sale Sharks, liaison with rugby league officials, and great support from his local cardiologist, which have all contributed to getting him back to this point."

Once again, Alex can look forward to a future in rugby and says, "I've been given a second opportunity to continue my rugby career and I'm not going to waste it. I'm determined to rip in and make it a success. To be a player who has come back from open heart surgery is massive for me and I'm really proud of that."

After 10 months out, Alex finally made his long-awaited return to rugby on December 28, 2024. Now six months later, he's returned home excited by the prospect of competing in this year's premier domestic rugby union competition in South Africa.

You can watch Alex and Mr Omar Nawaytou talk about the care and treatment received at LHCH on the news pages of **www.lhch.nhs.uk**

Life saving diagnosis for multiple family members

"Medication helped, but there were still unanswered questions – why was this affecting so many of us?"

A Cheshire dad has shared his story after the sudden death of his brother led to the discovery of a hidden genetic condition – and a life-saving diagnosis for multiple family members.

Simon Clarke, 31, lost his older brother Mike, to a heart attack in 2015. The 29 year old collapsed during a football match for Whitegate United FC in Northwich and, although stents were fitted, he passed away a week later. Blood tests revealed that Mike had high cholesterol – something Simon and his family had always struggled with but never fully understood.

Simon, from Cheshire said: "After my brother's death, we all went for tests, I was found to have high cholesterol too and received support at Leighton Hospital's lipid clinic. Medication helped, but there were still unanswered questions – why was this affecting so many of us?"

That question eventually led to a turning point, when Simon's consultant referred him to a new pilot service screening for Familial Hypercholesterolaemia (FH) – a hereditary condition that causes extremely high cholesterol from birth and significantly increases the risk of early heart disease if left untreated.

Simon underwent genetic testing through the service and a few months later received confirmation that he had FH.

"It was hard to hear – no one wants a lifelong condition – but it wasn't really about me. It was about getting answers for my family," said Simon.

"The genetic testing means I now know I have a condition that, even with diet and exercise, will always be present. It allows us to plan and make sure that when the children in our family reach the age where they can be tested, we take that step and don't ignore it."

Thanks to Simon's diagnosis, cascade testing began across the family. His nephew – the son of his late brother – was just four when he lost his father. Now 13, he has also tested positive for FH and has already started medication.

"He's been on treatment since he was 11 – that's two years of risk reduction already. We can't change what happened to my brother, but we can try to stop it happening again."

The FH Team.

Simon's story is just one of many that highlight the impact of the FH genetic testing pilot launched in 2022 across Cheshire and Merseyside. Now, the service has been commissioned on a recurrent basis by NHS Cheshire and Merseyside, with support from Health Innovation North West Coast.

The service is delivered by LHCH and offers genetic testing to individuals with suspected FH, followed by family cascade testing for first-degree relatives – parents, siblings and children. Those diagnosed receive a personalised care plan, including lipid-lowering therapy.

Since the service was launched:

- More than 1,250 referrals have been received across Cheshire and Merseyside
- 201 people have been diagnosed with FH via genetic test
- 60 children and young people have been seen by the service, leading to 20 confirmed cases
- Almost 200 family members have self-referred following a relative's diagnosis.

You can read more about the FH service by visiting the news section of **www.lhch.nhs.uk**

Knowsley Community CVD: Cardiac Rehabilitation Service achieves national certification

Congratulations to the Cardiac Rehabilitation team, from our Knowsley Community Cardiovascular Disease (CVD) service, who have achieved the NHS National Certification for Cardiac Rehabilitation for 2025/2026.

The National Certification Programme for Cardiac Rehabilitation is a joint project between the British Association for Cardiovascular Prevention and Rehabilitation (BACPR) and National Audit for Cardiac Rehabilitation (NACR).

This means our Cardiac Rehabilitation services are recognised nationally reflecting the high standards of quality the service provides. In order to achieve this, the team had to validate and submit a huge amount of data around seven key performance indicators to provide evidence of quality standards and outcomes.

The Cardiac Rehab team comprises of Exercise Physiologists, Cardiac Rehab Specialist Nurses and Assistants who are supported by the Consultant Medical Lead, Administration and Leadership teams. The service provides cardiac rehabilitation clinics across the Knowsley area including Kirkby, Huyton, Whiston and Halewood.

Cardiac Rehab is delivered to patients with a broad range of cardiac conditions. The key aim of the cardiac rehabilitation programme is to deliver core components to not only improve physical health and quality of life but also to equip and support people to develop the necessary skills to successfully self-manage.

Well done to all the team who provide this fantastic service, making a big difference to patients and enhancing their recovery from a range of cardiac conditions.

Acute Care and Monitoring truck visits LHCH

We had a fantastic time at LHCH, week commencing 29th September, with a special on-site visit from the Acute Care & Monitoring Truck (ACM2U) from Medtronic as part of a nationwide roadshow.

The goal of the roadshow was to help build clinicians' confidence in using new tools that can improve patient recovery and outcomes. The truck has delivered valuable learning opportunities right on the hospital's doorstep every day throughout the week .

Mr Manoj Kuduvalli, Medical Director, said: "The arrival of Medtronic's ACM2U Truck at LHCH is a powerful example of how innovation can be brought directly to the frontlines of care and is a valuable opportunity to strengthen our commitment to patient safety.

"This mobile hub provides our clinicians with immersive, hands-on training in advanced monitoring technologies, strengthening our commitment to clinician excellence."

Inside the ACM2U Truck, visitors saw the Corsano multi-parameter wearable – a breakthrough device that continuously monitor a patient's key vital signs. The wearable technology allows doctors and nurses to monitor patients recovering in the comfort of their homes, whilst reducing clinical strain. Dave Macmillan, Head of Estates and Facilities (pictured) was pleased to wear the Corsano in the days leading up to the roadshow to trial the technology.

There were hands-on demos and VR simulations showcasing innovations, education and hands-on training for clinicians, and demonstrations showing how technology can transform outcomes and empower clinical teams.

Highlights

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

LHCH photo competition

Earlier this year we were thrilled to be able to launch the LHCH Photo Competition and bring the 'Great Outdoors' back to corridors near you!

We received over 200 entries from budding photographers, including patients, staff, volunteers and public, with the aim of helping us bring the 'Great Outdoors' inside here at LHCH.

The judging panel had a tough job shortlisting just 50 entries to be displayed on the main corridor walls from Pharmacy to Outpatients and Oak Ward down to Theatres. From these a first, second and third place entry was selected as follows:

1st Place - *Reflections, Liverpool* by **Andrea Cavanagh**; **2nd Place** - *Another Place with the Aurora Borealis* by **Paul Harris,** Theatres; **3rd Place** - *Sunflower* by **Claire Rawling,** Occupational Therapy Technical Instructor

A big thank you to everyone that entered the competition. You have made a big difference to patient, family and staff experience. Feedback received from previous competitions has indicated that patients enjoyed walking the corridors during their stay in hospital and have said that they have aided recovery.

Estates & Facilities Day

Colleagues across the hospital site joined together on 18th June to celebrate national Estates & Facilities Day.

The sun came out and colleagues were treated to an ice cream with the opportunity to find out about all the important roles our estates and facilities teams play, often behind the scenes, to ensure the hospital runs seamlessly.

LHCH Matters met with Maureen Hackett, Catering Assistant (pictured) who is a well known face for our patients and their families on Holly Suite to find out about her key role in delivering an outstanding patient experience.

"I joined LHCH as a Hostess in 2011. Over the years I've worked on different wards – Birch, Oak, Critical Care, ACU (was Elm) and now Holly. I love having a chat and banter with patients. They can be nervous, but just enjoy the opportunity to just get something off their chest, and having a conversation with someone who is not medical.

"I serve food for patients and always make sure they are fed according to their dietary needs. Its so important. For example diabetic, gluten free or soft diets if they have swallowing difficulties. I also look for signs if a patient is looking unwell and would ask their nurse to check on them if I'm worried.

"The best part of my job is talking to patients. I love it. I have licence to gab and enjoy chatting to patients to ease their concern and relax them. Every day is different and every patient has a story to tell. It can be hard and very hectic, so my feet are sore but its all worth it!"

Surgery Celebration Day

On 15th September, we held our annual 'Surgery Celebration Day' to thank colleagues for the outstanding specialist work they provide every day for our patients and families.

From afternoon tea hampers, pamper sessions, 'surgery stars' awards and wellbeing sessions, our teams were well looked after. *Linda Parsley (pictured right) was presented with the Extra Mile Award as part of the Surgery Celebration Day.*

Highlights

Dr Dobson presented with award

We're delighted to share that Dr Rebecca Dobson, Consultant Cardiologist and Cancer Lead at LHCH, has been awarded the 'Women Making a Difference' Award, sponsored by Merseyrail, at the Merseyside Women of the Year Awards 2025.

Dr Dobson spoke of her award: "I'm honoured to have received this award and to be recognised for my role in establishing the Cardio-Oncology Service, a collaboration between LHCH and Clatterbridge Cancer Centre, which started back in 2019. It's a privilege to work with such an amazing team of people who are all striving to make a difference to patients living with cancer and heart disease. I'm so proud of the service, and the team, for the difference we have made to our patients and their families. A big thank you to everyone who voted and supported my nomination – it means such a lot to me."

Employee of the Month Awards

May

Ben Davies, Project Search
Ben was nominated during his placement from college. He offered great support to the catering and Holly Suite team, learnt new skills and gained so much confidence within himself.

June

Paul Hynes, Transfer Team Assistant – Cath Lab
Paul fully supported the transition of the Scope Service to Cath Lab management. He is always smiling, very positive and nothing is ever too much trouble for him.

July

Dr Alex Boughey, Clinical Psychologist
Alex proactively undertook additional training to conduct in-house ADHD assessments for people with CF. Her efforts have enhanced patient experience and reduced pressure on external services.

August

Dr Mahmuda Akter, Cardiology Doctor
Mahmuda is a valued member of the cardiology team. She always offers to help other members of the team with their workload. Nothing is too much trouble for her.

LHCH charity
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**

More LHCH Charity news on page 16

Take a walk with us down Orchard Way

Orchard Way is a beautiful forest scene which allows to share your special memories with us by dedicating a leaf to celebrate or remember a memorable time or person.

You will also be supporting the work of Liverpool Heart and Chest Hospital, and it couldn't be easier!

1. Choose your shape
2. Tell us your dedication/message
3. Return the form with your donation and dedication

To find out more, including how you can have your shape by making a monthly payment, simply visit our website at **www.lhchcharity.org.uk** or give us a call on **0151 600 1409** where a member of the team can walk you through each and every step.

Shop online?

Did you know you can raise funds for LHCH Charity by purchasing online at thousands of big brand shops by joining Easyfundraising? There are over 8,000 retailers on board and it won't cost you a penny extra to help us raise funds.

All you need to do is:

1. Go to www.easyfundraising.org.uk select LHCH Charity and sign up it's free!
2. Every time you shop online, go to easyfundraising first to find the site you want and start shopping. You can even download a handy reminder or the app to your mobile!
3. After you've checked out, the retailer will make a donation to LHCH Charity at no extra cost to you whatsoever!

There are no catches or hidden charges, and so far, we have raised hundreds of pounds by supporters just doing their normal online shopping, booking a holiday or even renewing their car or home insurance.

So, take a minute, sign up and you can make a difference without it making a dent in your finances!

Christmas is coming

Christmas has officially arrived here at LHCH Charity and this year we've got some lovely gifts on offer.

From wonderfully traditional cards to beautiful festive badges, we've got it all. See what festive goodies take your fancy by taking a look at our website and treat your loved ones to something special this festive period **www.lhchcharity.org.uk/christmas-shop-2025**

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And the Beat Goes On!

Our Ladies Lunch "and the Beat Goes On" in September brought together an amazing group of women to learn about women's heart health.

The highlight of the event was an inspiring talk by Dr. Clare Appleby, who shared her expertise on how heart disease presents differently in women, how symptoms are often misdiagnosed or dismissed, and what women can do to protect themselves.

Events like this remind us that health education is not just about awareness; it's about community, support, and taking action together. We're so grateful to everyone who attended and made the day such a success, here's to the future of LHCH Charity events!

Summer of support

Over the past few months, we've been blown away by the incredible support shown for LHCH Charity.

From football matches and marathons to hikes and garden parties, our amazing supporters have gone above and beyond to show their passion for fundraising.

Since the first signs of spring right through to the final days of summer, our supporters helped to raise over £30,000 – an incredible achievement that we truly couldn't be anymore grateful for.

Think taking on a challenge sounds like something for you? Then don't hesitate to get in touch. You can email us at **enquiries@lhchcharity.org.uk** or give us a call on **0151 600 1409**. We'd be more than happy to help you organise your fundraiser or you could even see what events we have to offer!