

LHCH matters

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

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Minimal access surgical approach reaches patient milestone

Back in 2023, the Cardiac Surgery team at LHCH introduced a minimal access surgical approach called Endoscopic Vein Harvesting (EVH).

The Surgical Care Practitioner team, who carry out this procedure, are exceptionally proud to have completed their 1000th EVH procedure for cardiac patients since the launch of this service.

Vein harvesting forms part of the Coronary Artery Bypass Grafting procedure which is the most common procedure undertaken at LHCH and worldwide. This requires the harvesting of a vein from the leg and attaching it to the coronary artery. This is currently performed as an open procedure which requires one long incision or multiple incisions in one or both legs, with frequent associated wound complications.

The EVH approach allows the incision to be reduced to 2cm which lessens pain, blood loss, rate of infection and antibiotic use.

Mr Bil Kirmani, Consultant Cardiac Surgeon spoke of the success of this approach: "We are all exceptionally proud of our Surgical Care Practitioners for their commitment to deliver this advanced, modern technique. In just over two years, they have become some of the most

experienced EVH operators in the country.

"Our volumes and results have been excellent, and this has allowed faster recovery for patients with reduced infection, pain, blood loss and quicker return to normal mobility.

"The exponential jump in our ability to provide keyhole procedures to so many of our patients has also boosted our minimally invasive coronary artery bypass programme and helped to establish a growing trend towards smaller incisions for enhanced recovery."

Celia Ireland, Lead Surgical Care Practitioner said: "We launched this minimal access approach with our patients in mind, keeping them at the centre of all we do, and we have been thrilled with the results.

"Following surgery, we've seen far fewer concerns or delays to discharge caused by leg wound problems. The risk of harvest site infection has reduced from 8% to less than 2%



which is a significant achievement.

"We have five Surgical Care Practitioners trained to undertake this approach so far with plans for this to grow in the future so that more of our patients can benefit from this.

"I would like to thank the Surgical Care Practitioner team for their determination to learn a new skill, their enthusiasm for the cause and to the wider team who gave each of us the time and support we have needed to master this approach."



LHCH Staff Survey results 2025

The NHS Staff Survey 2025 results were published in March 2026 and despite a period of organisational change, we were delighted to see LHCH was TOP in the country in four out of nine People Promise elements of the Survey.

The results showed how highly staff feel about the standard of care provided by the organisation if a friend or relative needed treatment, with LHCH being ranked 2nd in the country. Furthermore, it was also pleasing to see the number of colleagues who would recommend LHCH as a place to work, with the Trust being ranked 3rd in the country.

The results showed a strengthening safety culture, a strong sign of growing trust in reporting routes and a maturing approach to safety. We also saw improvement in colleagues reporting that they had not experienced harassment or bullying from peers, indicating positive shifts in team behaviours and continued leadership focus on civility. Furthermore, it was also pleasing to note the high rate of reasonable adjustments for colleagues with a disability being in place, to support inclusion and enable performance.

In the months ahead, we'll focus on visible action in the areas where improvement is needed.

Thank you to everyone who took part – your feedback helps us improve together.

Staff Survey Area	Benchmark / Ranking
People Promise – staff engagement	TOP in country
People Promise – morale	TOP in country
People Promise – we each have a voice that counts	TOP in country
People Promise – we are safe and healthy	TOP in country
People Promise – we are recognised and rewarded	TOP Acute Specialist Trust
People Promise – we are always learning	TOP Acute Specialist Trust
People Promise – we are a team	TOP Acute Specialist Trust
People Promise – we are compassionate and inclusive	3rd in country
People Promise – we work flexibly	3rd Acute Specialist Trust
Question – I would recommend as a place for treatment	2nd in country
Question – I would recommend as a place to work	3rd in country

LHCH receive national funding to reduce carbon emissions

LHCH is set to benefit from more than £1.3 million of funding as part of a major national decarbonisation programme to support the delivery of clean energy.

The funding, from the Department for Energy Security and Net Zero and Great British Energy, will enable the trust to install solar panels at the hospital site. In total, 1,500 panels will be installed, generating more than 500,000 kWh of electricity each year.

It is estimated that the funding to support energy efficiency upgrades with the installation of solar panels, will help to save the Trust almost £140,000 each year.

Dave MacMillan, Head of Estates and Facilities for LHCH, said: "We are delighted to have received this significant national funding,

which demonstrates our commitment to delivering sustainable healthcare for the future.

"The funding, to roll out new solar PV on site, means we will be investing in greater energy efficiency and sustainability, and also allows us to make continued improvement to our hospital estate and facilities.

"The investment will enable us to reduce our long-term energy expenditure, releasing funds that can be directed into frontline services, as well as helping us to support national carbon-reduction targets, NHS net zero ambitions and our own local Green Plan.

"Furthermore, it also complements other energy saving technologies and plans that we are exploring for the hospital site, such as EV chargers, and heat pumps."

The project forms part of a wider £74 million programme to upgrade energy technologies and improve energy efficiency across public buildings, helping to cut carbon emissions and bring down energy bills.



MEET THE SPECIALIST

We are pleased to share the second in a series of features where we hear from LHCH specialists about their career inspiration, experiences and achievements. This time, we spoke to **Amanda Walthew (Mandie)** who is a Thoracic Nurse Consultant at LHCH with over thirty years' experience nursing in cardiothoracic surgery.



Where it started

Mandie began her nursing journey in 1993 when she undertook her training at Edge Hill University with training at Aintree Hospital and The Walton Centre. We asked Mandie at what point did she decide that nursing would be her future career path.



"I had always wanted to be a nurse since childhood. My sister Lorraine is a nurse too, so it runs in the family! After I qualified in 1996, I applied for a junior nurse role at Liverpool Heart and Chest Hospital (then known as The Cardiothoracic Centre). It was much closer to where I lived, the reputation of the hospital was excellent, and I wanted to work in specialist nursing care."

Role at LHCH

Mandie's first role at LHCH was as a staff nurse on a mixed cardiothoracic surgical ward. She said:

"My first job was in cardiothoracic surgery, on a female surgical ward, and I've stuck to this speciality all the way through my career.

"I then worked within Critical Care (HDU/ITU/POCCU) for ten years as a sister and then worked as a nurse practitioner in the Outpatients clinics. I worked part-time for both, and it worked well as I had young children at the time.

"Next, I worked full time in clinic as a clinical nurse practitioner and in 2011 an MSc training post came up for a ward-based advanced nurse practitioner for thoracic surgery. The introduction of advanced nurse

practitioners enabled some services to become more nurse led.

"I've developed from a novice to an expert in the field. I became the lead for the surgical advanced nurse practitioners before taking on a new role, in 2025, as a Thoracic Nurse Consultant."

First Thoracic Nurse Consultant

Mandie was appointed in 2025 to the role of Thoracic Nurse Consultant. It's the first role of its kind to be introduced at LHCH and across the country. She presented at the Society of Cardiothoracic Surgery Annual Meeting in Belfast on 15-17th March, to share the impact the role has made so far, sharing learning and improved outcomes with peers from across the country.



Society of Cardiothoracic Surgery Executive Committee.

"The role is to mainly support outpatients following their thoracic (lung) surgery, I follow them up with a progress call around 2-3 weeks after their operation. The feedback we have so far is that patients really appreciate this earlier support. Cancer patients are keen to know their results after their surgery, so it's hugely improved the service and patient experience.

"Sometimes, if there are any issues,

I arrange for them to come in and see me face to face to help resolve them. Often either the same day or following day. This earlier contact means that any problems can be dealt with earlier, preventing readmissions, general practitioner appointments or local accident and emergency department attendances."

Service Developments

Services have developed and grown as the demand for thoracic surgery has increased over the last decade. Mandie explained:

The principal disease requiring management within thoracic surgery is primary lung cancer. The remaining conditions include other types of thoracic malignancies, effusions, pneumothorax, lung volume reduction surgery and management of emphysemas."

"The growth in demand of late has been due to increased lung cancer cases arising from the impact of screening and earlier diagnosis. Also, the emphasis on lung sparing surgery for smaller lesions has led to increased referrals. The commissioning of lung volume reduction and enhanced recovery pathways has also had an impact. Accelerated pathways for pneumothorax, urgent airway intervention and improved management and improvement of frailty and increased access to prehabilitation has led to more operable patients and the need for a robust system to manage this. New technology in particular the emergence of robotic systems has helped with earlier discharges."

When asked about some of the service developments that have supported the successful delivery increased demand on services, Mandie shared:

"The introduction of the nurse-led



Thoracic Surgery team at LHCH

chest-drain service in 2015 enabled patients to go home with their chest drain. This has reduced patients' length of stay. This work was shortlisted for a Nursing Times Award and shared nationally. This then led to me being a contributing writer for The Oxford Handbook of Nursing in 2018 and NICE guidelines on topaz chest drains".

"We also introduced ward attender clinics with patients requiring an early review post-surgery. These patients can be pre booked or via the telephone helpline. National lung cancer clinical outcomes publication data in 2021 revealed that we had the lowest readmissions nationally. This service is pivotal in aiding this and helps maintain positive levels of patient experience of care.

"The post-operative lung cancer nurse-led follow up clinic was also developed in 2019. This replaced a consultant/ registrar to review routine follow up thoracic patients requiring surveillance. This also enabled essential training time in theatres for the registrars.

"We introduced the same day management of patients with malignant pleural effusions, with long term drain insertion as a day case, education and training, and support, enabling them to manage self-drainage at home. This work was recognised nationally for which we were a finalist in the 2015 Nursing Times Awards.

"I also developed a CXR competency tool, this has been shared with other Trusts, nationally and internationally. This provides a standardised and systematic approach to chest X-Ray interpretation, diagnostics and decision making. This is still a utilised tool often shared nationally still. This was also highly commended in the Trust's CQC

'Outstanding' report as an innovation, and I received a national presentation prize for this work."

A National Role

In addition to her role at LHCH, Mandie is the Lead for Nursing and Allied Health Professionals (NAHP) for the Society of Cardiothoracic Surgery (SCTS) in Great Britain and Ireland. SCTS is the representative body for cardiothoracic surgery in Great Britain & Ireland. The SCTS NAHP committee has a group of experts who work tirelessly and voluntarily to make a difference. "I work closely with a team of cardiothoracic experts from across the country. We meet regularly to discuss national agenda and are currently preparing for this year's annual conference that's coming up in March 2026. "I am also involved in education both nationally and locally. We have SCTS exciting full weekend of advanced cardiothoracic teaching planned in Derby in January 2026".

"My advice for new nurses would be to never lose your passion for excellent patient care. No matter how your day is going, you shouldn't lose that drive as if you make a difference to just one person then it's all worthwhile."

Advanced NAHP Audit Day



LHCH Awards 2025

Proud Moments

Asked what she was most proud of from throughout her career so far. Mandie said:

"I achieved my Master of Science (MSc) in advanced practice in nursing when I had very young children, I really enjoyed it and was proud to complete it. And best of all I have two amazing children, my son Ben is an exercise physiologist at LHCH and my daughter Lilly is studying history in York University.

"When I was the team lead for the Surgical Advanced Nurse Practitioners, we received the 'Team of the Year' award at the annual LHCH Grand Awards. Last year, I was also so delighted to win the Patient Choice Award with Miss Susannah Love, Consultant Thoracic Surgeon. That was so lovely as it is one of the most valuable awards you can receive. However, I genuinely feel valued every day by patients and the team I work with. It means everything to receive good feedback. But most of all I'm proud of feeling valued by my patients, families and colleagues."

Interests

Outside of work, Mandie enjoys socialising and holidays. Although, she admits that as she loves her role as a nurse, she often takes on additional work commitments such as the lead role for SCTS. It's clear that she enjoys, and has a clear passion, for making a real difference to thoracic patient care across the country and beyond.

RESEARCH AND INNOVATION NEWS

LHCH awarded prestigious fellowship to improve treatment of Ventricular Tachycardia (VT)

Congratulations to Justin Chiong, Cardiology Specialty Registrar and Academic Clinical Fellow in Cardiology who has been awarded a Clinical Research Training Fellowship by the British Heart Foundation.

This is an impressive achievement and even more so as it's the first time a fellowship of its kind has been awarded to a researcher at LHCH. The prestigious grant will provide the funding for the research costs and consumables necessary to deliver the DYNAMITE-VT study. The DYNAMITE-VT study aims to improve the way we treat Ventricular Tachycardia (VT) for our patients. We hope that by better guiding ablation we can reduce recurrence, hospitalisation, the need to redo procedures, and defibrillator shocks for patients.

Ventricular tachycardia (or VT) is a life-threatening abnormal heart rhythm, and one of the commonest causes of sudden death. It can occur in people who have scar tissue in their hearts, most commonly from a previous heart

attack. Patients with VT (or at high risk of developing it) are offered an implantable cardiac defibrillator. This can deliver a lifesaving shock when VT is detected, but can be sudden, unpredictable, and painful, causing significant anxiety.

For many patients, the recommended way to treat VT and reduce defibrillator shocks is through catheter ablation. However, over 1 in 3 patients experience a recurrence of their VT within a year of the procedure. One of the key reasons for this is that it is often difficult to know where exactly to ablate within the heart and therefore the delivery of treatment can be imprecise.

At LHCH, Dr Vishal Luther, Consultant Cardiologist and team have developed a new way to better identify the areas we should be targeting which is a process we've termed Dynamic Voltage Mapping. It uses routinely collected electrical data from within the heart to create a specialised and personalised map for each individual



Dr Vishal Luther is pictured with Justin Chiong

patient. In our preliminary testing, this appears to help accurately guide ablation to successfully treat VT.

The DYNAMITE-VT (Dynamic Voltage Mapping to Personalise the Ventricular Tachycardia Substrate) study will formally evaluate this technique by means of a randomised clinical trial. The aim is to recruit 40 patients, of which, 20 will have Dynamic Voltage Maps available to help guide ablation, allowing us to compare how helpful and accurate it is, compared to conventional methods.

You can read more about this fellowship award on the news section of www.lhch.nhs.uk

APPLIED-LUNG: Transforming lung cancer screening study

We're inviting people to take part in the APPLIED-LUNG research study if they are invited to have a low dose CT scan as part of the NHS Lung Cancer Screening Service in Cheshire and Merseyside.

The APPLIED-LUNG study aims to explore the use of a new blood test to see if this can be used to accurately identify people who do and do not need a low dose CT scan as part of lung cancer screening. The study opened on the 17th of February 2026 and 138 people have agreed to participate so far.

Why is it important?

To improve early diagnosis and lung cancer survival, the NHS introduced lung cancer screening for people at high risk using low dose computed tomography (CT) scans. While CT scans can detect lung cancers, the widespread rollout of CT screening requires many resources and may not reach everyone who would benefit from lung cancer screening.

A company called Oxford Cancer Analytics (OXcan) have developed a blood test capable of detecting lung cancer by analysing proteins in the



The APPLIED-LUNG study team.

blood. The OXcan blood test has been shown to be effective in early studies.

Our research

OXcan is working with the Cheshire and Merseyside Lung Cancer

Screening Programme run by Liverpool Heart and Chest Hospital NHS Foundation Trust, and the University of Liverpool. We're asking 11,000 people undergoing a low dose CT scan as part of the NHS Lung cancer screening programme to participate in this study to see if the OXcan blood test can accurately identify people who do and do not need a CT scan.

Who can take part?

You can take part if you've been invited to have a low dose CT scan as part of the NHS lung cancer screening programme in Cheshire and Merseyside.

What is involved?

If you agree to take part, a one-off research blood sample of up to 60 ml of blood (4 tablespoons) will be taken when you attend for your low dose CT scan. We may also ask you for a sputum, saliva, mouth swab and nose swab/scraping sample to test other methods that may help screen for lung cancer and other diseases (such as head and neck cancer and chronic lung diseases) in the future. We will also ask your permission to confidentially access your data.

Merseyside woman joins cutting-edge research trial for life-threatening heart condition

A retired estate agent from St Helens has become the first patient to receive treatment as part of a clinical



trial in Liverpool which is aiming to slow the progression of a potentially life-threatening disease which can lead to heart failure if left untreated.

Taking place at the NIHR (National Institution for Health Research) Liverpool Clinical Research Facility (CRF), which is based at the Royal Liverpool University Hospital, the trial is investigating whether lowering lipoprotein(a), a particle in the blood that carries fats and cholesterol, can slow the progression of mild to moderate calcific aortic valve stenosis (CAVS).

CAVS is one of the most common types of aortic stenosis in adults, affecting mostly those over the age of 65. It is a progressive and life-threatening condition where calcium builds up on one of the heart's main valves, making it stiff and narrow. This

restricts blood flow and, if untreated, can lead to heart failure.

Kay Malekfar, 66, began her journey after discovering her father had a hereditary heart condition. Concerned about her own risk, she underwent tests which revealed she didn't carry the same condition but did have a leaky heart valve.

Kay said: "I'm so grateful the tests found my heart condition. I had no symptoms and have always led an active lifestyle, so without the specialist test I wouldn't have known until it was too late."

Kay was referred to specialists at LHCH, where expert teams carried out advanced diagnostic tests to confirm her condition and decide the best course of care.

A yoga and fitness enthusiast, Kay has regular check-ups at LHCH as part

of her routine treatment plan to keep her heart healthy. When the research team told her about the new trial at the Royal, she didn't hesitate.

Kay said: "I wanted to take part because research is so important for finding new treatments. It also means you get more monitoring and an extra level of care from the research team that you wouldn't usually get."

Kay received her first dose of treatment in December 2025 and said the experience was simple: "I didn't feel a thing. I walk at least 10,000 steps a day and was able to carry on straight away."

The trial is being delivered through a collaborative partnership between NHS University Hospitals of Liverpool Group and The Clatterbridge Cancer Centre, working together to enable research and ensure patients across

the region have access to early phase studies.

Dr Timothy Fairbairn, Cardiology Consultant at LHCH, said: "CAVS is a progressive degenerative condition that currently has no medical treatment. Once the valve becomes severely narrowed the only option is to undergo major heart surgery.

"Our goal with this study is to explore whether lowering lipoprotein(a) can slow disease progression and reduce the need for major surgery in the future. This is an exciting step forward and we're proud that patients in Liverpool are among the first in the UK to take part in research that could transform care for thousands of people."

Read more about the study, and how you can get involved, on the news section of www.lhch.nhs.uk.

Behind the scenes with the Knowsley Community Cardiovascular Disease (CVD) Cardiac Rehabilitation team

LHCH Matters was pleased to attend a cardiac rehabilitation class at Huyton Leisure Centre to get a behind the scenes look into the work of the team.

Anthony Burns is an Exercise Physiologist/Physiotherapist and Cardiac Rehabilitation Team Lead for the Knowsley CVD service and explained the role of the service.



“Knowsley is an area with high levels of deprivation and poor health outcomes which presents significant challenges.

“The team is proud of delivering compassionate, high-quality care and achieving measurable improvements in patients’ health and wellbeing despite these. National audit results have demonstrated significant improvements across physical, psychological, lifestyle and medical risk factors.

“In 2024, our service accepted 345 referrals for patients who went on to benefit from cardiac rehabilitation. We are the only service in the UK to accept stroke patients on our programme along with patients who have cardiovascular disease such as cardiac, peripheral vascular disease and heart failure.

“The service also regularly accepts highly complex patients including individuals referred from outside the area when local services are unable to meet their needs. For example, we received a young patient who had experienced an out-of-hospital cardiac arrest resulting in hypoxic brain injury and required implantation of an ICD. While this approach is considered the norm by the team, it highlights the services’ commitment to removing barriers to care and delivering equitable, patient-centred rehabilitation to highly complex patients.”

Community Cardiac Rehabilitation sessions are delivered across the Borough of Knowsley

The service delivers weekly cardiac rehabilitation sessions operating over five days per week across four venues in Huyton, Whiston, Kirkby and Halewood.

Patients receive a comprehensive assessment at the start and end of the programme and typically attend for eight weeks. Rehabilitation is delivered through face to face sessions, digital support, home based programmes, or a combination of these approaches, using a bespoke model of care that tailors support to each patient’s clinical needs and personal goals.

In addition, the service provides diagnostic clinical assessments for peripheral

vascular disease using the Ankle Brachial Pressure Index (ABPI). Two ABPI clinics are delivered each week, and Knowsley is the only cardiac rehabilitation service known to provide this assessment.

The core cardiac rehabilitation team consists of nine staff that includes:

- 1 team leader with dual role as physiotherapist/exercise physiologist
- 4 cardiac rehabilitation nurses
- 3 exercise physiologists
- 1 therapy assistant

The Cardiovascular (CVD) Service commissioned by Knowsley PLACE is built around a single, integrated service model.

The service is clinically led by the lead nurse, the CVD matron, and the clinical lead cardiologist. It delivers a neighbourhood-based approach to cardiovascular care through four integrated components: prevention,

detection, specialist management, and ongoing support.

The Cardiac Rehabilitation (CR) team forms a core part of this model and is supported by the wider multi disciplinary team, which includes specialist nurses such as heart failure nurses and stroke specialist teams, alongside consultant led cardiology support and CVD service leads.

In essence, the Knowsley Community CVD Service provides a unified, clinically led model that delivers cardiovascular prevention, diagnosis, and management through neighbourhood teams, ensuring high quality, consistent care for the local population.

Improving outcomes for our patients

In 2024, the following outcomes were recorded from patients that had undertaken the cardiac rehab programme.

- 68% of patients improved their average fitness to exceed clinically significant levels.
- 78% achieved recommended physical activity levels at the end of the programme. This was up from 52.5% at the start.
- 89% achieved systolic blood pressure below 140 mmHg meeting national hypertension targets.

- Cholesterol levels improved significantly reducing cardiovascular risk.
- BMI was reduced to below 30 in 5% of patients.
- Specialised Therapy Assistants prescribed nicotine replacement where needed to support patients to quit smoking.
- Rates of clinically high anxiety in our patients reduced by 5.8% and clinically high depression by 3.5%.
- 98% maintained alcohol intake below 14 units per week.

Achieving national standards
The service has continued to achieve 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



cardiac rehabilitation services are recognised nationally reflecting the high standards of quality the service provides. Just over half of cardiac rehabilitation services in the country have achieved this.

The future
Early on in 2025, the service went on to participate in a study examining the benefits of cardiac rehabilitation for patients with arrhythmias. Early findings show positive outcomes, helping to strengthen the evidence base for arrhythmia rehabilitation. The study results are expected to be published in 2026.

The team is currently developing a new project for 2026 in partnership with the ISLA Care platform. This aims to improve patient access to digital education resources, including videos aligned with the weekly education programme, text message reminders, and direct links sent to patients’ mobile phones.

You can read the team’s top tips for instilling food habits and improving physical activity on the news pages of our website www.lhch.nhs.uk



INTERNATIONAL WOMEN'S DAY



To coincide with International Women's Day, which we celebrated on 8th March, we'd like you to meet **Dr Archana Rao**. Dr Rao is a known to colleagues as Archie and is a Consultant Cardiologist specialising in devices and heart failure.

largely carrying out that plan."

Dr Rao admits her career journey has not been easy, but well worth it for a career that has been hugely important and meaningful:

"It's certainly not been easy, because as overseas doctors, my husband and I were trying to build a career with a young child, with no family support in the country. It's been challenging but very worthwhile."

An advocate for cardiology, Dr Rao feels strongly about inspiring the next generation of cardiologists.

"I think for me, the journey has been one of nurturing relationships, training the juniors to become able colleagues, and succession planning as we take on the next challenge. I think inspiring people to just do what they see as a worthwhile career and accept there will be sacrifices to be made. If it's worthwhile to you, that's your decision and that's what you do."

You can read more about Dr Rao, her inspirational career journey, achievements and hopes for the future in our special IWD instalment of our 'Meet the Specialist' series which is available to read now on the news section of www.lhch.nhs.uk.

Dr Rao shared: "When you think about hands-on medical specialties, cardiology is at the forefront of that because you follow the patient journey. This is certainly what I do as a Heart Failure and Device Specialist."

"My work begins as soon as the patient is referred with shortness of breath, assess them and treat them with medical therapy. I'm interacting with the wider heart failure team and, if needed, we offer the patient a cardiac device. I implant and follow up these devices.

"I've found my perfect job. I'm able to be a medic by assessing the patient, planning for them, and then



As part of our plans to mark International Women's Day (IWD) we hosted an event to bring together colleagues and recognise achievements, share experiences and consider the actions we can each take to help advance equality.

The event was organised by the LHCH Women's Network when we welcomed a guest speaker, selfie corner and much more.

Michaela Jones, Chair of the LHCH Women's Network (pictured below) said: "It was wonderful to see colleagues from across LHCH come together to celebrate International Women's Day. A big thank you to Christina Chakalova, Head of Learning & Development for delivering such an engaging and inspirational talk and for sharing her experiences. We all left the room feeling inspired."



LHCH colleagues came together to wish everyone a very 'Happy International Women's Day' on LHCH's social media channels.



PATIENT STORIES

This Heart Month we were thrilled that LHCH patients have shared their personal patient experience. If you have been an LHCH patient or family member and would like to share your patient story we'd love to hear from you by emailing CorporateCommunications@lhch.nhs.uk.



Valentine's special – from successful surgery to happy birthday

Valentine's Day is a special time of year, but for one mum from Lytham St Anne's, it's even more poignant as she celebrates the birthday of her young daughter – something she feared she might not see when faced with the prospect of life-saving aortic surgery.

Emma, 35, was diagnosed with a type B aortic dissection – a life-threatening tear in the inner layer of the descending aorta away from the heart – and in October 2023 was brought into Liverpool Heart and Chest Hospital (LHCH) for a 14-hour operation.

Now with the opportunity to celebrate her daughter Luna's 6th birthday on Valentine's Day, Emma says it's something she will never take for granted.

"As soon as I was transferred to LHCH, my consultant surgeon, Professor Mark Field, realised the seriousness of my condition and told me that I needed urgent surgery. It was then during the operation that he discovered that my aorta was like tissue paper.

"The thought of leaving behind my young daughter, and my long-term partner, was almost unbearable. I honestly didn't know if I would ever see them again."

However, thanks to Professor Field and his clinical team, Emma came through her operation.

"I will never have enough thanks for LHCH, and every member of the team who cared for me. Professor Field will always be my hero, as he's the person who saved my life and made it possible to celebrate birthdays with my little girl and see her future.

"I will carry that gratitude with me forever and I will never forget the kindness and support I was shown at the most vulnerable and scariest time of my life. But it wasn't just from a medical point of view, as they cared for me personally as well – kindness, reassurance, talking and listening to me – it was incredible."

Emma said it wasn't just the surgery for which she was grateful.

"Prior to my surgery, I found out about the work of the charity, Aortic Dissection Awareness UK & Ireland. They were the ones who told me about the amazing teams at LHCH and were so



Luna's birthday celebration after Emma's operation.

supportive and informative, practically and emotionally. That support has continued to this day.

"I'm also so grateful for the support of my family and friends, and my long-term partner who I was able to marry in July 2024. After everything that had happened, it made us realise how precious life is and how grateful we are to still have a future together."

Emma added that her recovery from aortic dissection hasn't been easy. She still lives with some pain and limitations and needs to take life slowly.

"Knowing that I'm under LHCH's care for life, with regular scans and follow-ups, is so reassuring for me.

"It was also thanks to their involvement, that I underwent genetic testing. This showed I carry a rare genetic condition called ACTA2, which means I'll need specialist follow-up for life. I also learned that my dad had died from an aortic dissection – something which I hadn't known at the time. However, it helped everything make sense and really reinforced how important specialist, lifelong aortic care is for families like mine... care that means I'm here to watch my daughter grow up."



Michael's story

15 years after experiencing a heart attack whilst mountain biking in Coed Llandegla, a trail mountain centre, in Wrexham, North Wales, Michael Edwards, 81, from Llangollen wanted to thank the dedicated team of professionals who provided his life-saving treatment all those years ago.

He shared: "After various tests, it was shown that my left coronary artery was blocked, and the right was narrowed. In October 2011 after various setbacks, Dr Nick Palmer, Consultant Cardiologist and his team, carried out an angioplasty procedure to unblock those arteries.

"Prior to my heart attack and subsequent treatment, I had been a serious runner with Wrexham Amateur Athletic Club. I'd completed eleven marathons, including four London and two Snowdonia Marathons.

"The cycling came later on, leading to trail mountain biking and road riding, together with triathlons. Following the procedure, I was keen to return in some way, so I asked Dr. Palmer what



I was able to do physically. His advice was to go back doing whatever I was doing previously, but obviously to work back my fitness gradually. This was like music to my ears.

"I did restore my fitness with the help of a qualified cardiac rehabilitation coach at my local sports centre, Lion Quays, Chirk. I then went on to complete a number of Sprint (shorter) Triathlons where I swam, cycled and ran. A great big thank you to Dr Nick Palmer, his team and all at Liverpool Heart and Chest Hospital who made this possible.

"Fifteen years later I'm still here at 81 years of age! I no longer swim, cycle or run because of unconnected health issues. However, I do get to the gym two or three times a week to keep up my strength, mobility and fitness. I'm also the Event Director of our local Park Run. I am positively evangelistic about the health and wellbeing benefits of parkrun where people can walk, jog, run or volunteer to gain those health benefits."

You can read more about the benefits of exercise on the NHS UK website or find your local Park Run by visiting www.parkrun.org.uk

Rachel's story

Rachel, from Preston, was only 31 when she was transferred to Rowan Suite in LHCH back in 2022 with a type B aortic dissection.

Ever since then Rachel has been under the care of LHCH. She shared: "In 2023, Miss Harrington, Consultant Aortic Surgeon told me that I needed valve sparing aortic root replacement surgery with the frozen elephant trunk procedure. She explained why I needed this procedure and that even though it was a more complex operation with a longer recovery, it would future proof me and make things much easier for them to operate for the future heart surgeries I'm likely to need. Everything was explained to me in detail with great care, empathy, and kindness which I will never forget as I was feeling so scared."

"After the operation I woke up in intensive care. I just felt numb and had about 20 wires hooked up to me for drains and medications. I must have had about 100 questions, my one-to-one nurses were so understanding and answered them all. They really tried their best to reassure me and make me feel better. The day after the surgery, I got up out of bed for the first time and into a chair which felt like I had climbed Mount Everest. The physio though was so understanding and patient. All the staff are truly first class. From the nurses, physios, doctors, porters and obviously the surgeons. I can't thank them enough. Especially Miss Harrington though. She really is remarkable at what she does and is so lovely too."

"I love LHCH and am so glad I was cared for at this specialist hospital."

I truly think LHCH is the best heart hospital in the UK and feel very lucky to be a patient there. My family and friends were all treated amazingly well. The team at Robert Owen House were outstanding. They were caring and compassionate with my best friend, Steven when he stayed there. He was so appreciative of them and couldn't praise them enough for all their help. He was so grateful that back in 2024 he completed the Manchester 10k to raise £700 for Robert Owen House."

Robert Owen House provides 'home from home' style accommodation for the loved ones of our patients who may have travelled some distance and wish to stay as close as possible during their patient journey. You can find out more about Robert Owen House by visiting www.lhch.nhs.uk



Sarah's story

Sarah was just 27 years old when she experienced first-hand the skill and expertise of the specialist care provided by the team here at LHCH.

Sarah was referred to LHCH, in December 2025, for aortic surgery following a revelation during her routine visit to her GP. She said:

"My journey started in December when I had a stomach bug. I'd been to my GP who had done stool tests and prescribed anti sickness meds. Eventually, I had blood tests which showed my liver and heart count were both high and I was referred to my local hospital.

"After 18 days of tests and checks, I was transferred to LHCH. I was transported by ambulance and placed on Cedar Ward while I awaited my operation. The nursing staff greeted me, sorted my tea out as I had arrived late and explained what I should expect. I was checked over and had my bloods taken.

The Consultant Aortic Surgeon and Consultant Anaesthetist came to visit days before my surgery was planned.

"On 22nd January, I was taken down to theatre for surgery. I was due to have the Ross procedure by Mr Ahmed Othman, Consultant Aortic Surgeon. I have a severe needle phobia, but my anaesthetists, Dr Clare Quarterman and Dr Steve Cai were wonderful, calm and understanding. They explained what was going to happen and what wires/pipes I would have when I awoke from surgery.

"Mr Othman chose to follow plan b, which we had discussed prior to the operation, as my heart was not in the condition expected. I had a mechanical

valve fitted where my aortic valve was and an aortic replacement with a graft/stent. I awoke in the Intensive Care Unit due to the complications. Mr Othman personally kept my family updated and came to visit me to explain the surgery. Whilst in ICU, I cannot fault the care I received from the hospital. The nurses were person centred and had all the time in the world to answer my questions. The staff were all supportive and encouraging.

"Having open heart surgery was traumatic at 27 years old but the staff at Liverpool Heart and Chest Hospital made this difficult time easier. I cannot thank them enough. LHCH saved my life and gave me a future."



TEAM LHCH Highlights

Have a look at just some of our team's highlights since the last edition of this newsletter.



At LHCH, to mark National Apprenticeship Week, the Learning & Development team held a series of events and activities to celebrate the work of our apprentices and share experiences about apprenticeship pathways.

Jen Taylor, Director of Nursing at Liverpool Heart and Chest Hospital & Broadgreen Hospital (left), joined us as the celebration

event ambassador, championing the importance of developing our future workforce. At

the event we promoted nursing careers and apprenticeship routes into healthcare roles,

progression opportunities and the vital contribution apprentices make to patient care.



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



Daisy takes on Chester 10k run

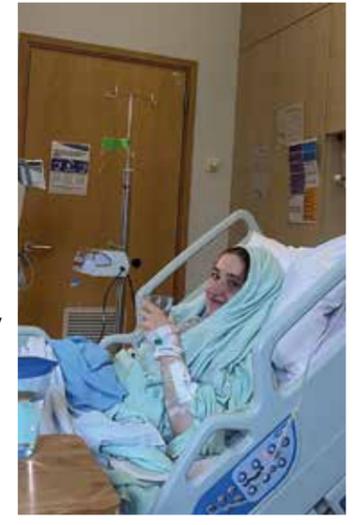
On 8th March, we were cheering on former patient and supporter, Daisy, as she took on the Chester 10K.

Daisy came into the care of LHCH after suffering from a collapsed lung (pictured right) and in November last year underwent urgent surgery.

Daisy decided to take on the challenge as a way of expressing her thanks for the care she received at LHCH and couldn't speak more highly of her experience:

"From start to finish, I was looked after so well. Every single person was so kind, compassionate, and genuinely caring. I'll always be so grateful to LHCH and that's why I couldn't wait to give something back."

We can't thank Daisy enough for her support and the magnificent £400 she raised for LHCH Charity..



Employee of the Month Awards

September 2025

John Roberts, Hospital Coordinator

John was nominated for the compassion he shows for both patients and colleagues alike. He is always approachable, listens to colleagues and regularly checks in to ensure colleagues are ok on a night shift.



November 2025

Denise Dearing, Lung Cancer Screening Nurse

Denise was nominated for going the extra mile for a patient who had taken part in the Lung Cancer Screening programme which highlighted a large aortic aneurysm. Denise's quick thinking ensured the patient had swift and pertinent advice enabling them to have a chance of being treated.



December 2025

Lee Stanfield, Access Team Supervisor

Lee has been instrumental for turning around the Surgery Outpatient booking list, working tirelessly alongside his team to achieve results. Lee also shows genuine care and commitment to ensuring his team's wellbeing.



January 2026

Debbie Heseltine, Switchboard Supervisor

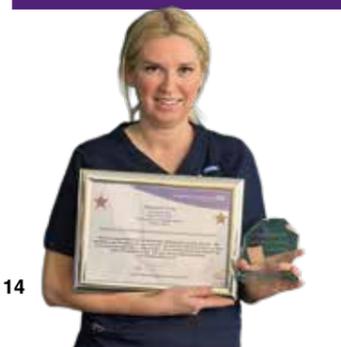
Debbie has shown resilience and leadership in the face of very difficult circumstances and reduced availability of staff. She supported her colleagues, Switchboard and indeed the wider hospital ensuring the switchboard continues its 24/7 operation despite the difficulties placed on the department.



October 2025

Steph Bray, Sister – Oak Ward

Steph was nominated by several patients on the ward who shared how tirelessly she worked. They praised her professionalism and 'outstanding' competence.



Could 2026 be your chance to win big?

It could be if you sign up to the LHCH Charity Lottery.

More than 300 supporters have already won prizes, including one lucky winner who took home £1,000. And playing couldn't be easier. No queuing, no fuss. Your ticket is automatically entered into every draw, and it costs just £1 per week per line.

By playing the LHCH Charity Lottery, you're also helping to support people living with heart and lung disease. Every ticket helps us provide the latest equipment, make the hospital a more comfortable place for patients and families, and support vital research that could change how heart and lung conditions are treated in the future.



It really is the lottery where everyone wins. Simply click the link or scan the QR code to sign up and start making a difference today.

Why your support matters

Every day, Liverpool Heart and Chest Hospital delivers life-changing care to patients with heart and lung conditions.

But behind every successful treatment, pioneering research project, and patient support service, there's the generosity of people like you. By supporting Liverpool Heart and Chest Hospital Charity, you help fund cutting-edge equipment, innovative research, and vital services that improve outcomes and enhance quality of life for patients and their families. Your contribution isn't just a donation. it's something that makes a real difference to the lives of those living with heart and lung disease.



Follow the link or scan the QR code to find out how you can support us today **www.lhchcharity.org.uk/get-involved/donate**

Or call us on **0151 600 1409** and a member of the team will be happy to help!



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
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LHCH Charity: Changing lives in lung care

Every day at LHCH, lives are being transformed and much of that is thanks to the generosity of our supporters.

Donations to LHCH Charity help bring pioneering treatments, advanced technology, and vital training to our hospital, making care faster, safer, and more effective for people living with lung disease.



The Limax Laser

Thanks to our supporters and the Marina Dalglish Charity, LHCH has introduced laser-assisted lung surgery.

This is a major development for patients with complex or previously inoperable tumours.

This incredible technology allows surgeons to reach hard-to-access areas of the lung, remove multiple or deep-seated tumours, and preserve healthy tissue. Recovery is quicker, complications are reduced, and pain is minimized. For some, it opens the door to surgery that wasn't possible before; for others, it brings relief, improved breathing, and a better quality of life.

New Ultrasound machine for Cystic Fibrosis care

Last year, LHCH Charity purchased a new ultrasound machine for our cystic fibrosis team.

This new piece of equipment allows clinicians to more easily identify veins in people with CF, making blood draws and iv line insertion significantly faster and less painful and enabling faster delivery of antibiotics.

Consultant Respiratory and Intensive Care Physician, Dr James Greenwood, commented: "It's an amazing piece of equipment that we use pretty much every day. It allows us to seamlessly place IV access cannulas into our patients and we use the lung scanning to easily and safely investigate our patients. Since we've had the ultrasound it's made a



difference to dozens if not hundreds of people living with CF which has made a real difference to their experience here at LHCH."

"Because of this equipment, we are able to continue delivering world-class care to our cystic fibrosis patients. Thank you to LHCH Charity for making this possible."



Robotic lung surgery

With help from the Ken Dodd Charitable Trust, LHCH Charity has provided a Robotic Console to train our thoracic surgeons in robotic lung surgery.

This cutting-edge technology means six of our seven surgeons will be fully qualified to perform robotic procedures, giving patients faster, safer operations and a shorter stay in hospital.