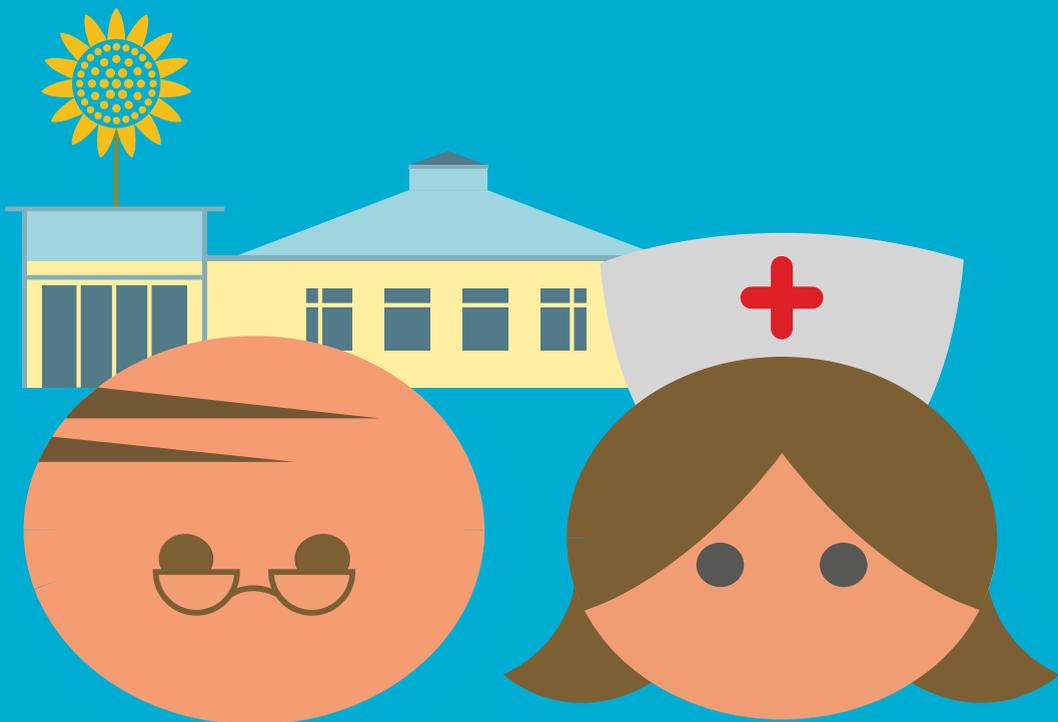


St Leonard's
Hospice

Caring for Local People



Quality Account 2017-2018



Part One

Statement from the Chief Executive

On behalf of the Board of Trustees and Executive Management Team it gives me great pleasure to present the Quality Account for St Leonard's Hospice. The account looks back on progress that we have made during 2016/17, and outlines some of our key priorities for improvements to services for patients and families in 2017/18.

St Leonard's Hospice is highly respected and has an excellent reputation in the community: it has outstanding public and business support and is well regarded by the health and social care communities. The strength of St Leonard's Hospice is 'the team', and together with our Board of Trustees I would like to thank the clinical and support teams for their contribution to providing outstanding patient care and for ensuring that our excellent reputation continues.

Here at St Leonard's Hospice we have a culture of continually working to monitor and improve quality. We actively seek feedback from our patients and their families and staff are always encouraged to make suggestions and feedback to members of the Executive Team and Trustees.

As partnership working with our colleagues in the Acute Trust and community and social care increases we are also looking to those areas to provide us with feedback on ways that care can be improved for patients.

I am responsible for the preparation of this report and its contents. To the best of my knowledge, the information reported in this Quality Account is accurate and a fair representation of the quality of healthcare services provided by St Leonard's Hospice.

Martyn Callaghan

Chief Executive



Looking back at what we achieved in 2016/17

2016/17 saw some significant events in the life of St Leonard's Hospice that we hope have resulted in improved care for our patients and their families.

The year started with the launch of our new day service in the 'Sunflower Centre'. The traditional, and largely unchanged in 30 years, service that we provided as day care was closed and re-launched to provide a more outward-facing, rehabilitative model for our patients and their carers. The shift towards getting people involved with hospice care earlier in their disease has enabled us to support whole family units to come to terms with a palliative diagnosis, and understand what the Hospice could offer in the future in relation to holistic support and planning for future care needs.

In a significant shift from previous ways of working, a 'drop-in' service was developed to enable people to come for a chat and outline concerns or fears prior to a formal referral being made. This is by far our most successful

service development to date and we now regularly see over 20 patients and family members each week. Many of those 'drop-in' contacts will result in a formal referral for support from one of our other Sunflower Centre services such as complementary therapy, art therapy, or our relaxation and re-enablement days. We have seen significant growth in demand for complementary therapy and relaxation, and have been overwhelmed with offers of support and time from volunteers wishing to support patients and carers. Feedback from our service users suggests that this is a much welcomed and valued service.

During the summer of 2016 we were inspected by the Care Quality Commission. During the two hottest days of the year a team of inspectors worked alongside us, spoke to staff, patients, family members and carers, colleagues from the acute Trust, CCG and Trustees to get 'under the skin' of St Leonard's and understand how we ensure our patients are kept safe and cared for. They visited patients in their homes with our Hospice@Home team and spent time reviewing policies and procedures. Our medicines management procedures



St Leonard's
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we are
Outstanding



Care Quality
Commission
Approved

were inspected by a pharmacist and significant evidence from audit, meeting minutes and Health and Safety systems were also reviewed.

We were delighted to receive an 'Outstanding' rating and this has prompted further on-going work and enthusiasm from staff to ensure we are able to build on that and maintain our overall rating when we are inspected next time. Staff have rightly felt proud to work for a service that is outstanding and the feedback and comments we receive from patients and our supporters tells us that our community are equally as proud.

We have continued to recruit high quality staff to ensure our services are well-led and patients get the best care possible. We successfully appointed a Matron to strengthen the clinical leadership team and have seen great benefits of this post in relation to understanding practice and developing systems to improve care. Our wider Hospice team such as catering, maintenance and housekeeping continue to augment the care team to ensure that our environment and food are at the highest standard.

Patient Safety

Care Home Education

Why was this identified as a priority?

St Leonard's Hospice recognises that only a small proportion of patients in the last year of life are able to receive direct care from our services. Our responsibilities to patients also extend to supporting and educating colleagues in health and social services to deliver better care, which is part of the Hospice's overall education strategy.

One of the areas identified by St Leonard's was to provide additional education and professional support to Care Homes in the region. Data from 2014 demonstrates 20% of the York CCG population will die in a Care Home, and its residents often have complex nursing and medical needs.

Audit work recently undertaken by York Hospital demonstrated many patients admitted to hospital from care homes died within 72h, and that there is a greater need to have advance care planning discussions with residents to avoid unnecessary admissions.



What have we achieved?

The Hospice recruited 2 additional nursing staff members to work alongside other community colleagues to visit care homes and provide face-to-face education and training in essential palliative care. This includes skills such as recognising deterioration in a patient's condition, initiating difficult conversations about the end of life with patients and their families, use of medications to manage any distressing symptoms and care of the deceased and bereavement support.

Progress to date:

Funding has been provided by the Hospice for a 2-year pilot period, with face-to-face work in care homes beginning in January 2016.

Work undertaken so far includes training and education being delivered to a total of 17 organisations across the Vale of York with a total number of 62 education sessions delivered overall. The organisations that have accessed the training to date include:

- 3 Care agencies
- 6 Nursing homes

- 2 Residential care homes
- 1 Assisted living care home
- 1 Homeless organisation
- 1 Category A prison healthcare dept.
- 1 Neurological rehabilitation unit
- 1 Benedictine convent
- 1 Monastery

Training has now been completed in the homeless sector and the prison service. As a result of completion of the training, awareness and confidence has been raised around end of life care and homelessness among the support workers and prison staff, especially regarding advance care planning.

Work within both of these sectors on advance care planning is now being developed by the staff we have supported through training.

In the prison service it has been found that following the training there is an increase in both confidence and knowledge around recognition of long term conditions and palliative and end of life care, and also the importance of choice at the end of life. Further work is planned for the remaining period of the project to deliver education



and training to care homes that have shown interest in accessing the training.

In addition, 'mop up' sessions are being planned for various organisations to support staff who have been unable to attend the previous sessions provided.

- Number of care homes wishing to be part of the pilot project between the period of January 2016 – July 2017 = 25
- Number of care home professionals receiving face-to-face training between the period of January 2016 to July 2017 = 250
- Total number of training sessions delivered between the period of January 2016 – July 2017 = 62
- Measurements of outcomes using the Linkert scale show a 48% increase in confidence of care home staff in regards to communication around end of life and a 59% increase in confidence around advance care planning.
- From a qualitative perspective, following the training, a member of a local homeless hostel has been able to discuss end of life care choices, values and preferences with a client in his care. He has used advance care planning and felt able to support the client's family in bereavement.
- A key focus of training with each group continues to be DNACPR and the importance of making decisions and ensuring they are documented.
- One organisation has requested further support with putting together a pack of information regarding bereavement support which they could provide for family members and also introducing advanced care planning into their organisation.
- There continues to be a noted increase in both confidence and knowledge using the Linkert Scale format in all areas of training.



Patient effectiveness

Improving Data Collection and Reporting on Patient Related Outcome Measures

Why was this identified as a priority?

In 2014 NHS England proposed that a 'tariff' should be introduced from April 2016 for Specialist Palliative Care services to provide more equity in funding services across England and Wales. This would have required St Leonard's to record clinical care provided by staff and volunteers on a database to receive funding from the CCG based on clinical activity.

In early 2016 these proposals were amended to a devolved decision between local commissioners and the Hospice as to which data are collected, but this would not be linked to a per-patient tariff.

The Hospice team have decided to continue with collecting patient related outcomes data as a means of measuring the impact of the care we provide, and allow us to benchmark this against other specialist palliative care services.

Has this priority been achieved?

The Hospice has continued to collect anonymised patient activity data, such as the number of admissions or attendances, in order to plan our services. The complete set of national data proposed (known as the 'OACC suite' of measures) requires staff to report on the health of patients on a daily basis, and this was felt to be too burdensome on patients and staff to accomplish without additional resources and improved IT infrastructure.

Instead we have selected a number of measures that we feel will have the greatest impact on patient care, and piloted their use on the In-patient Unit and Sunflower Centre day service.

After evaluation of these initial measures we are rolling out routine patient assessments using the 'iPOS' and 'Views on Care' tools, and will use this information to guide our care to individuals who use our services.

Once these measures have been fully implemented over the next year we will re-evaluate their impact and see how we can improve this further.



Patient Experience

Review and Launch of New Day Care Services – the Sunflower Centre

Why was this identified as a priority?

A review of day care services was completed in 2015 after the existing model had remained largely unchanged since the opening of the Hospice in 1984. The number of referrals and attendances was noted to be reducing month on month, with many patients being referred late in their illness. The Hospice executive management team decided changes to the service were required in order for the Hospice to meet with needs of the wider population, and to create a more sustainable model for the future.

How was this priority achieved?

The existing Day Care service was closed from September 2015 to January 2016. Existing patients were supported over this period via attendances at the Hospice for specific therapies or contact and visits in their own home. This was a difficult period for some patients and their families

and it resulted in 2 formal complaints to the Hospice. The closure however allowed a new patient programme to be designed and for staff and volunteers to undergo additional training to prepare them for changes to the service. A new Sunflower Centre manager, Wellbeing Lead and Complementary Therapy Lead were appointed and additional volunteers recruited. A Volunteer Visitor Service was also established, led by the Centre Manager and delivered by a team of 12 volunteers.

Since re-opening in January 2016 the service has gone from strength to strength with a more diverse programme of support and activities for both patients and carers. Links are continuing to be built with other services, and groups including the Huntington's Disease Association. A fortnightly Bereavement Drop-in Service (Thursday evenings, 5-7pm) has also been established – a service already accessed by 34 clients, some of whom are now moving towards one-to-one support with the Bereavement Support Service Volunteer Team. The Sunflower Centre currently has an active caseload of 82 patients across all services



offered (excluding Drop-in services). A sample weekly timetable is shown opposite.

Demetia Friends Training for all Staff within the Hospice

Why was this identified as a priority?

St Leonard's is aware of the increasing numbers of patients, carers and families that we come into contact with who are dealing with a dementia diagnosis.

A clinical dementia group is already developing key resources for staff on the In-patient Unit in relation to the care of patients who are suffering from dementia-type illnesses; however it was recognised that there is a need to increase awareness in all areas of the Hospice.

The bereavement service have seen an increase in people who have dementia who have suffered a loss and some education and training has already taken place with the bereavement volunteers.

It is also recognised that staff who work and volunteer in the retail outlets need

to have an awareness of dementia amongst the public who visit our shops.

How was this priority achieved?

All staff within the Hospice (including volunteers) were offered the opportunity to attend a series of Dementia Friend workshops facilitated by the Director of Fundraising who is a trained Dementia Champion. To date 133 members of staff have completed the training to become a Dementia Friend and on-going opportunities for training continue.

Part Two

Priorities for Improvement 2017/18 – Future Planning

1: Further Improvement of Measuring Palliative Care Outcomes (Patient Effectiveness)

Why was this identified as a priority?

Understanding the impact of care on patients and families allows hospices to improve services. The need to use comparable and credible measures needs to be balanced against the

Sunflower Centre Programme

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
9.30am-4.30pm 4x Nurse-Led Assessments Outpatient appointments: Comp Therapy Lunch Club (monthly) 2pm Time for Remembrance and Reflection (monthly event)	Admin Day Volunteer Visiting Team Supervision Sessions (16 volunteers)	10.30am-3.30pm Relaxation and Re-enablement Whole and part day attendance including lunch Comp Therapy Physiotherapy O/T Family Support Spiritual Support Medical reviews	Well-Being 10.00am-12 noon Relaxation and Meditation Session 2.00pm-3.30pm Art Therapy (4 sessions x 4 per year) 1.30pm-3.00pm Catch Your Breath Workshop	10.00am-3.00pm Drop-in and Carer Support Workshops/speakers Wellness Comp Therapy Family Support 1-2-1 Support Key Partner Charities/Organisations
	7.00pm-9.00pm Huntington's Disease Association monthly meeting		5.00pm-7.00pm Bereavement Support Group (alternate weeks)	Bathing Services 4 appts For 8 baths per patient

potential burden on patients and their carers in obtaining this information. The Cecily Saunders Institute and King's Fund have developed the 'OACC suite' of measures to be used across all specialist palliative care settings for this purpose (see Part 1 above), and St Leonard's plan to utilise a selection of these that best measure the care we deliver.

How will this priority be achieved?

St Leonard's will:

- Educate staff to better understand the value of measuring care and outcomes for patients
- Develop patient information sheets to explain the selected outcome measures

- Enable data collection to directly feed into the weekly patient team meetings, and form part of the discharge summary letters for patients leaving the Hospice

2. Improve Access to Hospice Services for Young Adults (Patient Experience)

Why was this identified as a priority?

The Hospice recognises that there is a need to deliver high quality specialist palliative care to more patients and carers who have not previously accessed our services.

One area of particular development is increasing support for young adults. The local children's hospice (Martin House) has a number of patients who were initially referred as children, but have since grown into adulthood (including some aged 30 or above).

These young adults remain under the care of Martin House, but should really be accessing adult palliative care services. This area of 'Transitional Palliative Care' is recognised nationally as being in need of significant

development, and St Leonard's is keen to explore innovative ways of working collaboratively with both patients and allied services.

How will this be achieved?

The aim of our joint pilot project is to enable young people moving from the teenage world to the adult world to adjust to new demands, living and developing as fully as possible and interacting with their peer group. It will last for 30 months, run in 2 cycles over 2 years, plus a 6 month analysis, writing-up and dissemination of findings afterwards.

Young people will meet face-to-face once a month for a year at St Leonard's. The days will be planned by the young people in conjunction with the project coordinator(s) from Martin House, in line with the aims of the project.

Between the monthly sessions the young people will stay in touch, developing ideas electronically and furthering the project development. Initial suggestions include training from a local businessman on brewing and marketing beer and organising a photography exhibition.



3. Implementation of Patient Safety Huddles (Patient Safety)

Why was this identified as a priority?

We recognise that as an organisation our patients' safety is paramount.

Regular review and reporting of patient safety indicators such as falls, pressure ulcers and drug errors already takes place and we have robust governance arrangements to ensure our Trustees are aware of incidents within the organisation.

We feel that we may be able to make improvements to the numbers of incidents and errors that occur and result in either a near miss or harm by implementing safety huddles to raise the profile of safety with clinical staff.

How will this be achieved?

Safety huddles will be implemented onto the In-patient Unit (IPU). Effectiveness in raising awareness and reducing harm will be measured and progress reported to the Board of Trustees via the governance structures.

Clinical Effectiveness

Overview of services

During 2016/17 St Leonard's Hospice provided the following services:

- In-patient care which provides 24h care and support by our specialist staff
- Hospice@Home - our team of clinical staff provide care in patients' homes for those who choose to remain at home and require additional support and care at the end of life
- Day care in our Sunflower Centre providing a varied programme of activities and support to manage symptoms and promote wellbeing
- Bereavement support via a dedicated team of staff and volunteers for adults who have either previously accessed Hospice services prior to death or those who have never previously had contact with the Hospice
- Lymphoedema out-patient clinic by our specialist nurse providing assessment and treatment for limb and bodily swelling caused by the accumulation of fluid



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stleonardshospice.org.uk

Financial considerations

The income provided by the NHS in 2017/18 is due to total £1.4M, which represents 30% of the total income generated by the Hospice. The total cost of running St Leonard's in 2017/18 is projected to be £5M with the majority of income generated through donations, legacies, fundraising activities and our chain of charity shops.

Around 80% of our costs are on staffing and we review our services on an on-going basis to ensure we are spending our money wisely to ensure we deliver the best care possible to our patients and their families.

Participation in Clinical Audit

A rolling programme of audit projects has been developed by the Medical Director and Director of Clinical Services to ensure all aspects of patient care are assessed against set standards.

This enables the Hospice to keep track of current clinical care and compare our results against previous performances and other organisations where possible. The results of several re-audits are shown in the table opposite.

St Leonard's also took part in a national audit on the benefits and risks of blood transfusions in hospice in-patients during the months of October to December 2016.

During this period two patients received blood products and data was submitted for evaluation. The results will be reported in next year's quality account.

Service evaluations

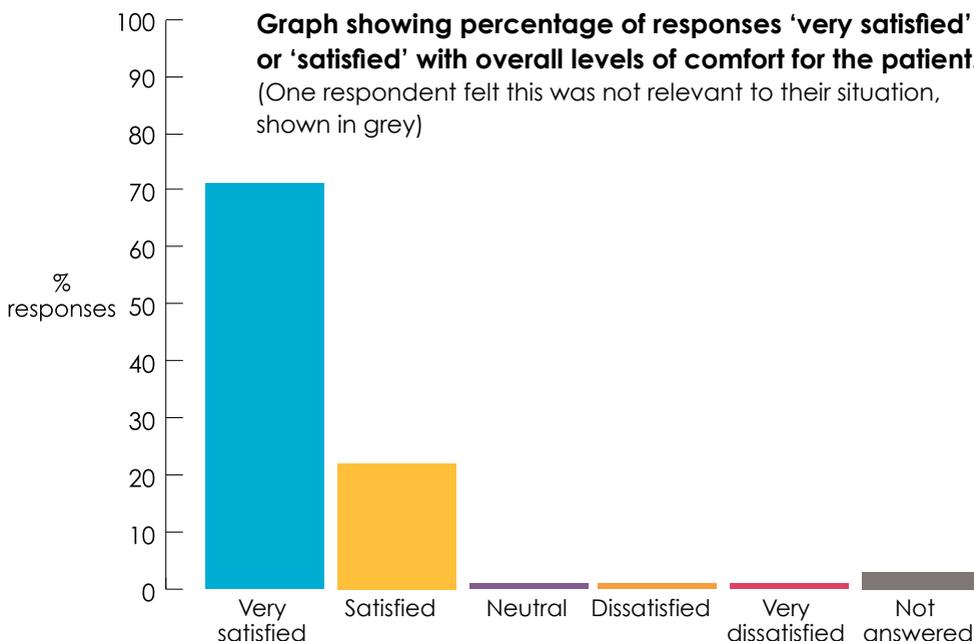
In 2016 the Hospice participated in a user satisfaction survey of bereaved relatives, organised by the Association for Palliative Medicine (APM). This service evaluation was undertaken by 59 specialist palliative care services across England, including 29 hospice in-patient units. Feedback from bereaved relatives was very positive with responses of 'satisfied' or 'very satisfied' for all aspects of care ranging from management of the patient's comfort to respecting dignity and responding to changes in the patient's care needs.

These results shown in the graph opposite compare very favourably with other hospices who participated in the survey. Two points raised by bereaved

Audit	2016/2017	2015/2016	Issues identified and actions taken
Pressure ulcer assessment and management	96%	90%	In 2016 new Hospice UK audit tool used with different measures. Overall standards met in all areas except for one patient not having a patient information leaflet given.
Drug Errors (total number)	68	68	Also reported to local Controlled Drug Intelligence Network. Total numbers stable and continue to be monitored. Most cases a result of human error and of low risk of harm to patients.
Nursing Documentation	98%	97%	At times stool (bowel) charts not completed. Changes to layout of nursing files including laminated Bristol Stool chart have improved completion rates.
Blood transfusion documentation completion	100%	98%	Refresher training completed for all nursing staff in 2017 to ensure high standards met as a result of low numbers of transfusions conducted each year in the hospice. York Hospital's audit tool used.

Graph showing percentage of responses 'very satisfied' or 'satisfied' with overall levels of comfort for the patient.

(One respondent felt this was not relevant to their situation, shown in grey)



carers in the survey regarding being shown the kitchen facilities available to visitors and better preparation for families in supporting patients when they are discharged home have since been addressed by the management team.

Research

CS-Y (Cancer Statistics – Yorkshire)

This joint project between the Hospice, Public Health England and The University of York is analysing referral patterns for cancer patients to Specialist Palliative Care services across Yorkshire. We have shared anonymised patient details with Public Health England to compare who has accessed our services with patients entered on the national cancer registry. At the moment we are waiting for the final results to be published, but will share these in our next Quality Account.

What others say about us

St Leonard's Hospice employs 155 members of staff across the main Hospice site and the retail outlets. During 2016/17 there were 25 staff leavers and 44 new recruits. In addition to this there are approximately 470

volunteers who give time to the various departments within the Hospice and retail outlets.

St Leonard's Hospice is required to be registered with the Care Quality Commission (CQC). The Hospice received an unannounced CQC inspection lasting 2 days in July 2016, with results published in November 2016. We were pleased to receive an overall 'Outstanding' rating.

Feedback from the CQC

"The standard and quality of care was very good. We received positive feedback about the service and staff from everyone who spoke with us."

"Staff were motivated to provide compassionate care. The Hospice used a holistic assessment for each person who used the service. These not only incorporated the needs of the person using the service, but those of the people who were important to them allowing relatives and people of significance to the person to express their views and share their insights. People and relatives told us that the staff were extremely caring."



“Dignity and privacy was maintained to a high standard throughout ... The staff showed kindness and respect towards the service users and people told us that the staff were polite, respectful and protected their privacy.”

“Exceptional management and leadership was demonstrated at St Leonard’s Hospice. Our discussions throughout the inspection demonstrated that there was an open culture with staff empowering people to plan and be involved in the high quality care provided at this service. This meant that people continuously had a say in how they wanted their care to be delivered.”

Data Quality

St Leonard’s Hospice has continued to provide monthly and quarterly activity data to the local CCG.

St Leonard’s Hospice uses SystemOne to collect overall data on the Hospice’s clinical activity and will work towards greater use of this electronic database to form part of our patient medical records.

We also use York Teaching Hospital’s Core Patient Database for clinical information relating to patients in our care in order to retrieve results and clinical letters, and to provide information on a patient’s condition to other professionals.

The Hospice shares recorded information in accordance with the Data Protection Act and monitors the handling of data through its Information Governance Working group. In 2016 the Hospice submitted a self-assessment score for the NHS Information Governance Toolkit. The Hospice is fully compliant at Level 2 and continues to work towards Level 3 compliance over 2017/18.

Part Three

Review of Quality Performance

This section of the account shown opposite and on the following page, will present the information for St Leonard’s Hospice. This is in keeping with the activity data collected nationally on Hospice activity as part of the Minimum Data Set (MDS).

In-patient Unit Services	2016/2017
Total number of patients	281
% new patients	83%
% re-referred patients	17%
% occupancy	73%
% patients discharged	33%
Average length of stay for in-patients	17 days

Sunflower Centre	2016/2017
Total number of referrals	116
Attendances of complementary therapies	397
Attendances at therapeutic groups	123
Attendances at volunteer visitor service	54
Attendances at drop-in service (for referred patients, non-referred patients and families)	413

Hospice@Home Service	2016/2017
Total number of patients	498
Number of referrals in normal hours (8am to 6pm)	348
Number of referrals in extended hours (6pm to midnight)	150

Bereavement Services	2016/2017
Number of new referrals	58
Number of cases closed	32
Attendances at remembrance and reflection events	243
Number of visits	239
Number of phone calls	191
Attendances at 2-monthly bereavement drop-in	85

Complaints

In addition to the limited amount of quality data submitted as part of the minimum data set, St Leonard's Hospice also monitors the number of complaints received by the service as a measure of quality.

During the period 2016/17 St Leonard's Hospice received no formal written complaints. The Hospice did deal with one verbal complaint and one sent via social media, but following further communication, the complainants decided not to raise this as a formal written complaint.

No complaints were received by the CQC or the CCG in relation to the care of patients at St Leonard's Hospice.

Responses to St Leonard's Hospice Quality Account 2016/17:

Healthwatch York

Thank you for giving Healthwatch York the opportunity to comment on your Quality Account this year. It has been a pleasure to read about some of St

Leonard's achievements in 2016/17 and key priorities for 2017/18.

We were very pleased to see the re-launch of the new day service and feel that the rehabilitative model will bring benefits to both patients and carers. It is good to hear about the success of the drop in service and the positive feedback from service users.

Healthwatch York is a Dementia friendly organisation and we were particularly pleased to see the priority given to Dementia Friends training for hospice staff and volunteers throughout the organisation. It's great that so many staff have completed the training.

We very much welcome the priority to improve access to hospice services for young adults during the coming year. The pilot project with Martin House sounds an exciting development and the involvement of the young people in planning the meetings and keeping in touch between the monthly sessions sounds very positive.

The Hospice's commitment to partnership working across all sectors

Patient Safety Indicators	2014/2015	2016/2017
Number of patient slips, trips and falls	55	55
Number of falls resulting in fracture	0	0
Number of patients who were admitted with pressure ulcers reportable to the CQC*	0	11
Number of patients who develop pressure ulcers in our care	13	9
Number of patients who developed a healthcare acquired infection in our care		
1. MRSA	1	1
1. Clostridium difficile infection	0	0

* Regulatory requirements for reporting were amended and clarified during this period

is good to see. Healthwatch York looks forward to developing our working relationship with St Leonard's in the coming year.

12 months and NHS Vale of York Clinical Commissioning Group is especially pleased to note the following achievements:-

Vale of York Clinical Commissioning Group

NHS Vale of York Clinical Commissioning Group is the lead Commissioner for St Leonard's Hospice and I am pleased to be able to review and comment on the Quality Account for 2016/17.

The Quality Account provides a clear and concise summary of the invaluable work of the staff and volunteers at St Leonard's Hospice over the past

- The opening of the Sunflower Centre – providing a range of services to patients, families and carers from therapy to drop-in. The resulting excellent user feedback is a clear indication of 'getting it right for people'*
- The CQC rating of 'outstanding' is a notable achievement and one which St Leonard's should be very proud*
- The appointment of a Matron to provide clinical nursing leadership*
- Your education strategy, reaching out to the wider community to provide*

support and training. Thus ensuring end of life care for people who do not die in the hospice is of a good standard

- *Undertaking dementia friends training to ensure a wider understanding care for people and their families with dementia.*

The priorities identified in the Quality Account for 2016/17 clearly identify and focus on the three elements of quality and in particular:

- *Increasing the use of palliative care outcome data to further improve care*
- *Transitional palliative care services*
- *The use of patient safety techniques such as safety huddles*

As the Executive Lead for Quality for NHS Vale of York Clinical Commissioning Group I commend this Quality Account for its accuracy,

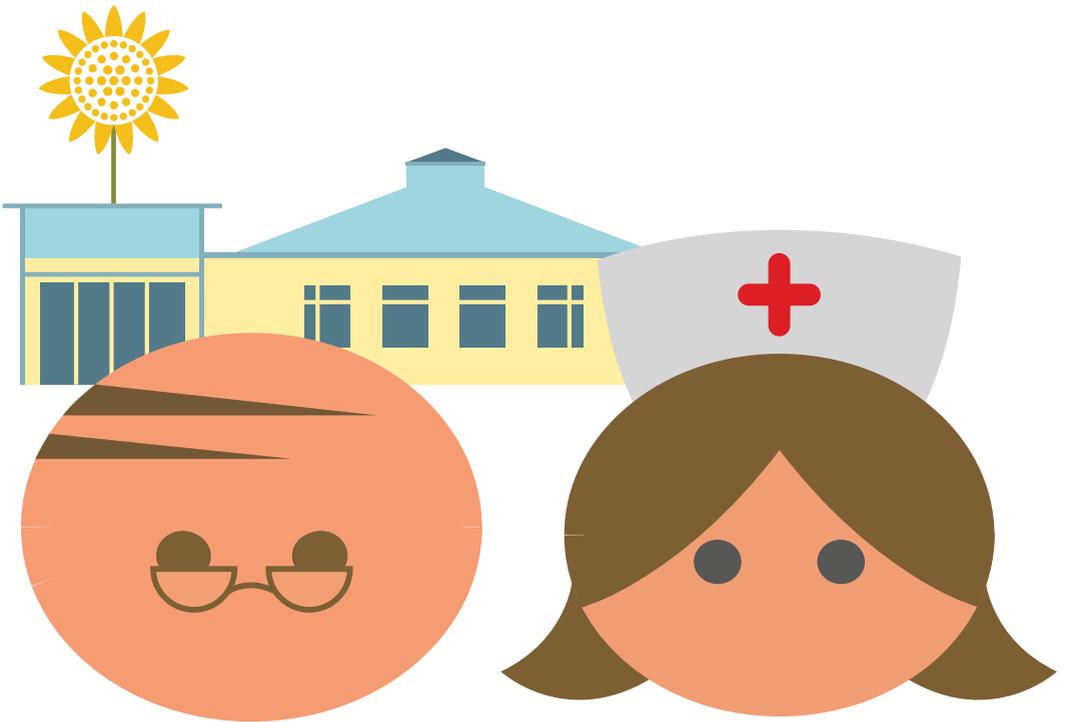
honesty, and openness. I recognise that St Leonard's delivers excellent palliative and end of life care for patients, and I look forward to working with the hospice to bring about further service developments and improvements in quality in the future.

Michelle Carrington
Executive Director for Quality and Nursing

NHS East Riding of Yorkshire Clinical Commissioning Group

The East Riding of Yorkshire CCG are delighted with the excellent care provided to our patients and their families/carers by St Leonard's Hospice.

Johanne Evans
Commissioning Lead – Community Services





Tesco Superstore



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