



**St Mary's
Hospice**

Annual Quality Report 2025-2026

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Chief Executive's Statement

2025–2026 has been a year of progress, reflection, and renewed ambition for St Mary's Hospice.

Following last year's leadership changes, we have focused on strengthening services, deepening community connections, and adapting to evolving needs.

As Chief Executive, I remain honoured to lead such a dedicated organisation and thank our staff,volunteers, partners, and community for their continued support.

Our teams have shown resilience and commitment to delivering high-quality care across all services, from our In-Patient Unit to Hospice at Home and community support. This year, we prioritised expanding support for people with dementia and complex conditions, and investing in staff and volunteer wellbeing and development—making strong progress in both areas.

Despite ongoing challenges around funding and workforce pressures, we continue to work collaboratively with NHS and voluntary sector partners to provide equitable, person-centred care.

We have also strengthened alignment with NHS priorities and improved our facilities through the DHSC Capital Grant Programme.

Looking ahead, our focus remains on reaching more people earlier, reducing inequalities, and delivering compassionate, expert care where it matters most.

This Quality Report reflects both our achievements and our commitment to continuous improvement.



Catherine Burn BEM
Chief Executive Officer



Chair of Trustees Statement

As Chair of the Board of Trustees, I am pleased to introduce this year's Quality Report for St Mary's Hospice, reflecting our continued commitment to safe, compassionate, high-quality care.

Over the past year, the organisation has grown in confidence following leadership transition, with a clear focus on strengthening strategy, supporting innovation, and responding to the needs of Furness and South Lakes.

The Board provides oversight and assurance, working closely with the Executive Team to ensure quality, safety, and patient experience remain central. Regular reporting through governance committees gives confidence that risks are managed, performance is monitored, and learning is embedded.

Progress against key priorities has been encouraging, particularly in expanding support for people living with dementia, developing community partnerships, and investing in staff and volunteer wellbeing. The growth of community-led and co-produced services ensures care remains inclusive, responsive, and shaped by local voices.

While funding and workforce pressures continue to present challenges, the Board is actively supporting efforts to secure long-term sustainability. At the same time, the hospice's focus on digital development, data-driven decisions, and stronger collaboration with NHS and voluntary sector partners provides a solid foundation for the future.

On behalf of the Board, I thank our staff, volunteers, partners, and community for their ongoing dedication and support.

This report reflects both our performance and our commitment to continuous improvement and high standards of care.



Andy James
Chair of Trustees



Vision, Mission and Values



Our vision

That everyone living with illness and death in South Lakes and Furness gets the kindness, love and expert care we'd wish for ourselves.

Here at St Mary's Hospice, we want to make a community where everyone living with a life-limiting illness can access compassionate specialist care. All members of the St Mary's Hospice team are committed to making sure that no one has to go through life-changing circumstances alone.

To achieve this, we will work with our health and care colleagues in the neighbourhoods we serve to truly deliver integrated person-centred care taking our services to where people live, challenging the barriers of poverty and rurality.

We will embrace the opportunities derived from digitalisation, making data led decisions that future proof the organisation. We will do this in collaboration with the communities we serve, co-producing services that meet the ever-changing needs of our population. We will ensure we adhere to policy and legislation at all times and continually review the environmental impact of our work.



Vision, Mission and Values



Our mission

We give equitable access to expert care and compassion so those affected by advancing illness can live well and have comfort, choice and dignity.

We are dedicated to providing high quality specialist care to anyone with a life-limiting illness. We will focus on people living well and 'in the moment' providing tailored services at the right time and in the right place, where all people are treated with dignity and cared for. And when the time comes, ensure that people have a good death in a place of their choosing, surrounded by the people they love. We will work with families and loved ones to support them with bereavement and grief.

We will review how, where and when our care is delivered, engaging with people early after their diagnosis and expand our work with dementia and neurological disease. With sustainability in mind, we will review our traditional models of care and our settings. We will listen to our community and respond to their changing needs.



Vision, Mission & Values

OUR VALUES

Care



Means that we are there for anyone who needs us.

Aspiration



Means that we go the extra mile to make moments that matter.

Collaboration



Means we work together for collective success.

Sustainability



Means we play an active part in securing our future.



Our priorities for the community: Effective and efficient care



We want to care for more people, earlier, and in the right place, so that more members of our community can live well and experience good deaths.

Using data from our services, we have identified clear gaps in both geographical and demographic reach. In response, we have expanded our early and accessible wellbeing, dementia and bereavement support.

We are also partnering with local GP surgeries to offer dementia drop-in sessions, making it easier for people to access support in familiar, convenient settings.

These changes ensure help reaches those who need it most, closer to home. We know that rural isolation is an issue, and the rurality of our location can make it difficult for people to attend sessions.

To help, we provide a minibus to transport people to our activities and support services.



Our priorities for the community:

Collaboration for collective success



We know that working together achieves the best outcomes. Inspired by the Furness Dementia Partnership, we are strengthening collaborations across South Lakes by working closely with local providers, community groups, and volunteers to co-produce services that meet real community needs.

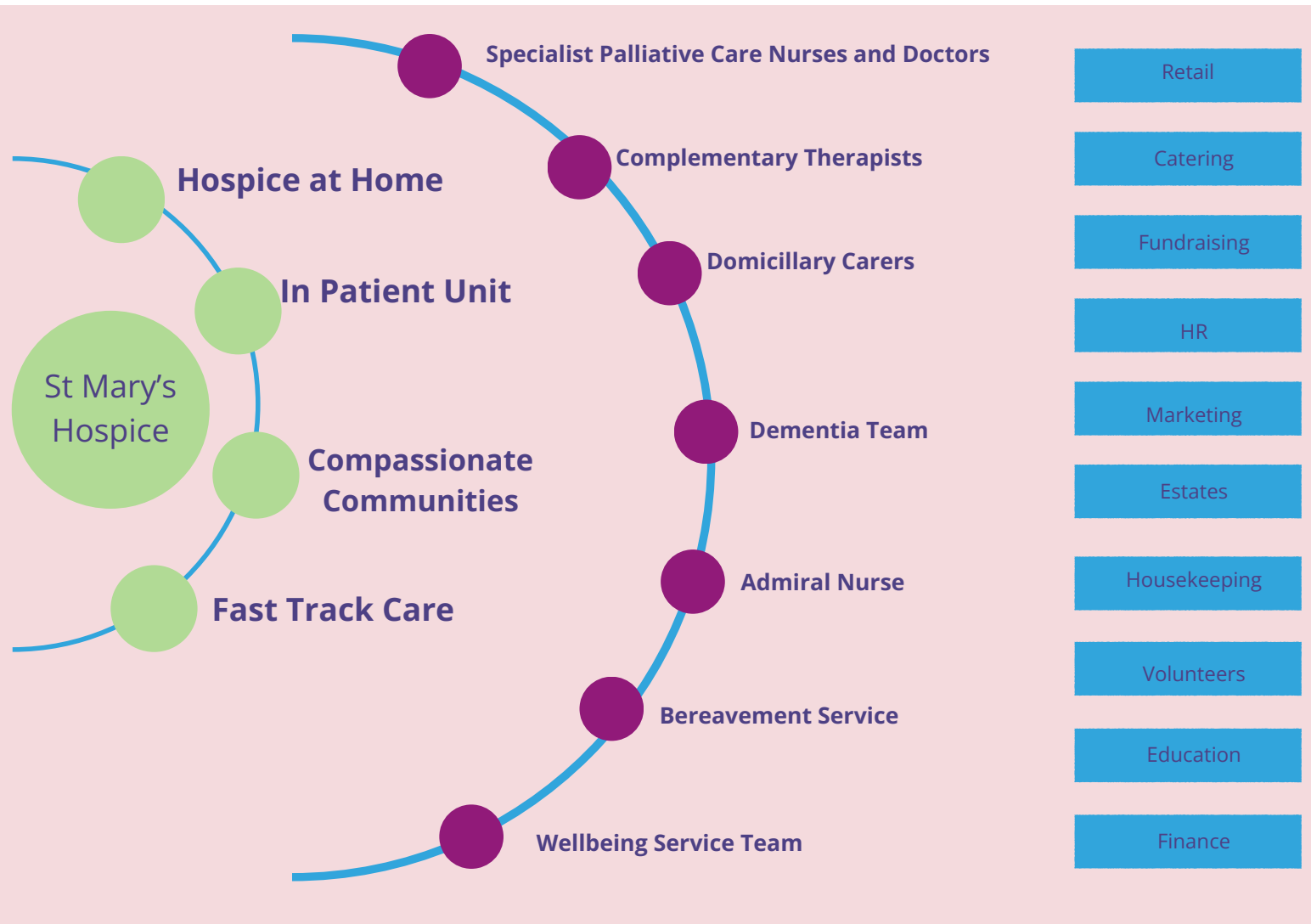
To extend our reach further, we have partnered with Impact International, Ambleside, enabling us to deliver more services directly in local communities across South Lakes. We also collaborate with other therapists to offer a wide and diverse range of therapies—from Tai Chi and Nordic walking to Woodland Wellness—ensuring people have access to activities that support physical, emotional, and social wellbeing.

We are leading initiatives to design and deliver community-led services, such as bereavement groups tailored for men, ensuring activities reflect the experiences and preferences of participants. By sharing expertise, coordinating resources, and creating inclusive, welcoming spaces, we help people connect, improve emotional wellbeing, and build resilience. By embedding co-production and data-driven planning at every stage, we make sure our services are shaped by the people they are intended to support and deliver meaningful, lasting impact.



Our services

St Mary's Hospice provides a range of service designed to meet people wherever they are in their journey. We recognise that delivering the clinical function of a hospice is a collective effort, made possible not only by clinical staff but also by the vital contributions of teams across facilities, fundraising, and many other supporting roles.



In Patient Unit



Patients are admitted to our 8 bedded In Patient Unit for symptom management and end of life care. Holistic care is provided to our patients and those important to them by a dedicated, supportive multi-disciplinary team, that includes specialised doctors, nurses, health care assistants and complimentary therapists.

Care at St Marys Hospice is centred around each individual, ensuring that every person's needs, wishes and preferences guide the support they receive.

Family and friends are welcomed and encouraged to spend as much time together as they wish, creating meaningful moments, with even beloved pets able to visit. The focus is on supporting not just the patient, but the whole family—helping them make memories and feel cared for during a difficult time.

Average LOS

10 Days

No. of Admissions

165

Bed Occupancy

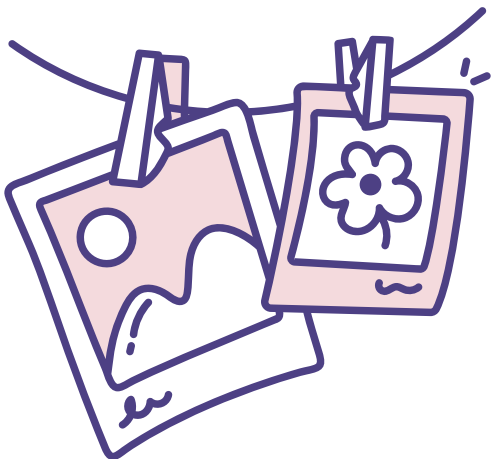
67%

Making Memories

Memory-making in a hospice is a heartfelt way to help patients and their loved ones create lasting keepsakes and special moments together. It's a meaningful part of holistic, person-centered care that supports emotional, psychological, and spiritual well-being at the end of life.

These cherished experiences can bring comfort, spark conversations about life and love, and provide a sense of connection long after a loved one has gone.

We were honoured to help one of our patients celebrate a special early 60th birthday surrounded by family, laughter, and a much-enjoyed game of bingo. Creating meaningful moments and lasting memories for patients and those closest to them remains at the heart of the care we provide.



“My mum loved it, it is very thoughtful what you have done and created happy memories that we will never forget”

Hospice at Home and Fast Track Service

Hospice at Home

Our hospice at home service, brings the hospice to you.

Offering support to people who want to spend their last days in the comfort and familiarity of their own home. The team provides specialist personalised nursing care and support to make this possible, across Furness and South Lakes. Working in collaboration with Clinical Specialist Nurses, District Nurses and GP's our service can support with personal care, symptom and pain management and emotional and psychological support.

We also offer a night sitting service, where a health care assistant will support the patient overnight so the family can get some sleep.



Fast Track

Our Fast track service offers a 12-week domiciliary care support program for anybody in Furness and South lakes who are in the last 12 weeks of life. Our team of healthcare assistants can support with personal care in your own home for up to four visits per day. This service is pre funded by Continuing Health Care enabling eligible families to access it quickly and free of charge.



No of telephone calls
9,350



Average LOS
19 days



No of visits
6,292



Miles drive
75,138



No of referrals
519

Neurological Hospice Care Coordinator and Transition Coordinator



Our team also includes specialist roles to ensure tailored support for people with specific needs.

We have a Neurological Palliative Care Coordinator who works closely with local families, providing guidance, advice, and practical support throughout the condition's progression. Additionally, our Transition Coordinator supports children and young people with life-limiting conditions as they move into adulthood, helping them and their families navigate this important stage with confidence and continuity of care.

These dedicated roles ensure that every member of our community receives personalised, expert support when they need it most.



Compassionate Communities



Our Compassionate Communities service places care and support at the heart of the community, ensuring people are supported where they live.

Delivered across the whole geographical footprint of Furness, Ulverston and South Lakes, it is available to anyone over the age of 18, offering help to patients and their families living with life-limiting conditions.

At the centre of the service is our newly developed wellbeing approach, which provides a holistic assessment to make sure each person's individual needs are understood and met. Working closely with other agencies, the service connects people to wider support where needed, helping address a broad range of challenges.

It also offers a flexible and ever-evolving programme of therapies and support options, designed to meet the diverse needs of people and their carers across the community



Compassionate Communities at a glance

Living Well Sessions & Group Attendance

3666

Visitors to Hub

7542

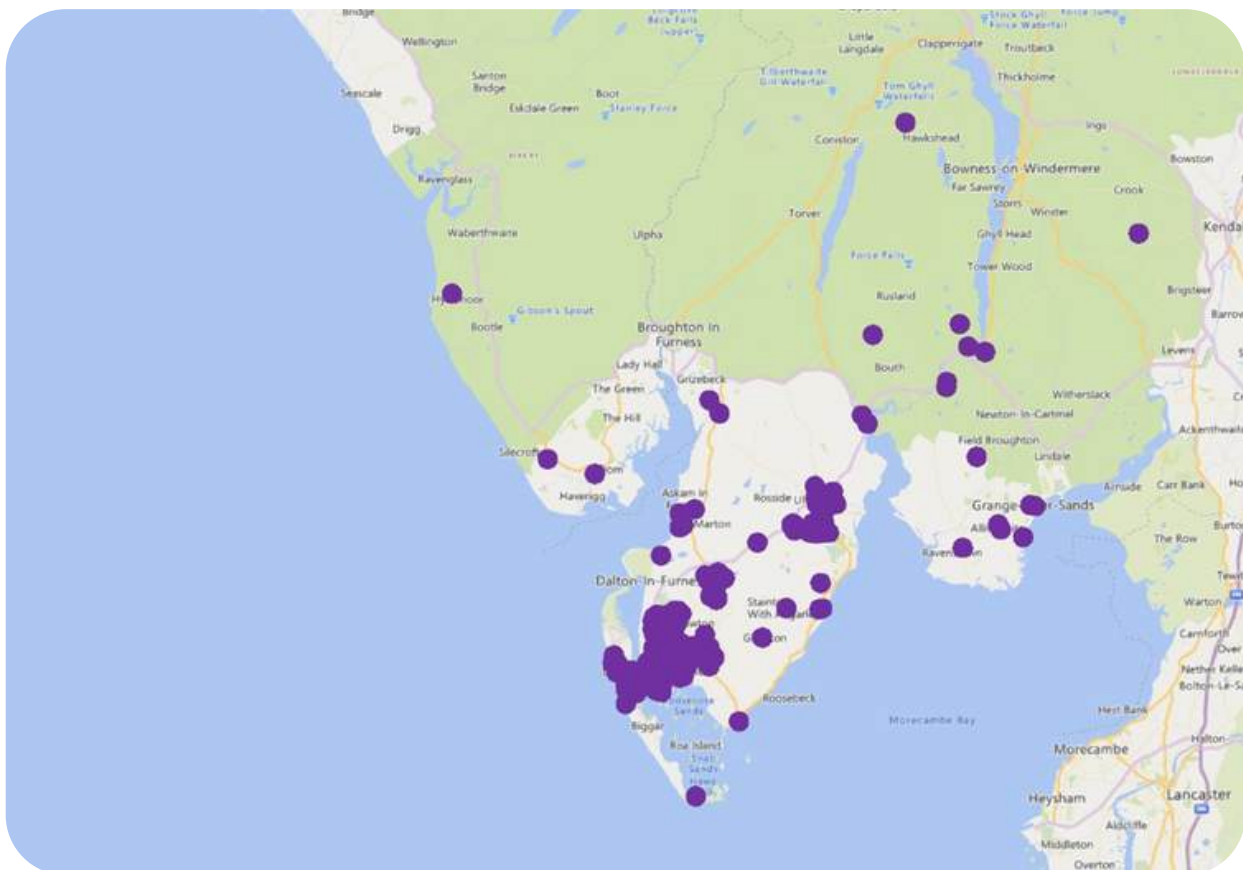
Choir Attendances

1179

Group Sessions

380

Our Compassionate Communities Reach



Dementia Service



Our dementia service provides comprehensive, holistic support to individuals living with dementia and their carers at every stage of the condition.

We offer a variety of dementia-focused day services designed around individual interests, providing therapeutic and meaningful activities that enhance quality of life. For those with complex needs, our expert team—including an Admiral Nurse—offers tailored biopsychosocial guidance to address a wide range of challenges. The Dementia Team supports anyone in Furness, Ulverston, and South Lakes, and plays a key role in educating staff and improving dementia care across the community.

To strengthen coordination and community impact, St Mary's has established a Dementia Hub within our local footprint. The Hub brings together all key services involved in dementia care, including the Local NHS Trust, Alzheimer's Society, Age UK, Churches Together, Local Libraries, and Carer Support Furness.

Its primary aim is to promote and coordinate services for people living with dementia and their carers, foster dementia-friendly communities, and identify gaps in provision. By working collaboratively and in co-production, the Hub not only strengthens service delivery but also provides a framework for evaluating services and highlighting priority areas for research and innovation.



Groups held
153



Group
attendance
724



Admiral Nurse
contact
187

Bereavement Service

At Mary's Hospice, we understand that life-limiting illnesses affect not only the patient, but also their families, friends, and carers.

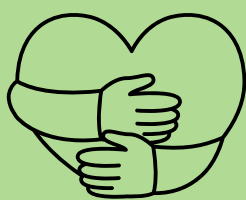
Our Family and Bereavement Support Service is committed to offering compassionate psychological, emotional, and spiritual support, both during the patient's illness and in the time following their death.

We recognise that grief and loss are deeply personal experiences, and we tailor our support to meet the individual needs of those affected, providing flexible, non-judgmental listening services at a time when they need it most.

We offer a range of services designed to provide comfort and support, from one-to-one supportive listening to group activities such as bereavement cafés, gardening groups, and craft sessions.

Our service is available to anyone over the age of 18 who is experiencing loss, regardless of how much time has passed, the cause of death, or the nature of the relationship. There is no requirement to have previously accessed hospice services, ensuring we are open and accessible to anyone in need.

Our dedicated work together to provide a safe, supportive space where individuals can express their feelings and be heard. By offering both individual and group support, we aim to foster resilience, healing, and a sense of community, helping families and carers navigate the complex emotions of loss.



1-2-1 sessions
1,332



Group sessions
209



Group
attendance
673

Feedback



'As a family we felt completely at ease in the hospice from the moment our loved one was admitted. The love and care we were all shown made us feel supported throughout the few days we were here. We tell everyone how amazing all the staff are.'



Our family cannot thank you enough for the support you gave, you enabled us to bring our mum home for her last days and spend precious time with her, being with her when she passed.
Thankyou.



'I didn't realise there was so much help available. The carers were like special friends and it brightened up our day when they came.'

Investing in our people

Strengthening our community

Strengthening our community

2024-25 Priority 1-Community Partnership and Coproduction

One of our main priorities for 2024–25 has been to strengthen the way we work with the community. By partnering with other local organisations, as well as primary and secondary care providers, we can offer a wider variety of services at times and places that suit the people who need them most.

We have made great progress through several key initiatives:



Furness Dementia Partnership

St Mary's Hospice has set up a Dementia Hub within our local community, bringing together all the key services involved in dementia care. The Hub helps coordinate and promote support for people living with dementia and their carers.

By working together and involving the community in decision-making, the partnership helps create dementia-friendly communities and highlights areas where services could be improved. This collaborative approach also provides a clear way to measure the impact of current services and identify opportunities for innovation. The group, chaired by St Mary's, meets every two months to ensure continued progress.



Bereavement Champions

St Mary's has developed the Bereavement Champions Education Programme, giving local companies the knowledge and tools to support employees who are experiencing grief.

During a one-off training session, participants learn about the emotional and physical impacts of bereavement, effective communication, and practical ways to offer support.

This programme helps workplaces create compassionate, understanding environments and began in late 2024/early 2025.



Bereavement
Champions
Trained
198



Organisations
who attended
27

Grief Fest

In December, as part of National Grief Awareness Week, St Mary's Hospice hosted its first GriefFest at Barrow Town Hall. The event brought together the Bereavement Champions we've trained throughout the year, providing a supportive space to share experiences and celebrate the vital role they play in helping others.

Guests took part in activities, reflections, and conversations to explore their own experiences while learning from one another. We were proud to welcome community speakers, including Benjamin May, founder of the New Normal Charity, who gave the keynote address and shared his insights on grief and resilience.

Young Adult Bereavement Service

Recognising that existing bereavement services are mainly accessed by older adults, St Mary's Hospice is leading the development of a new service for young adults aged 18–35 across our geographical footprint.

Through co-production sessions, we have listened to young people about their experiences of grief, the barriers they face, and the type of support they would feel safe and comfortable accessing. Sessions were held in welcoming, informal venues, with alternative ways to share feedback to ensure everyone could contribute.

The insights gathered will directly shape the new service, launching in June 2026, to make it meaningful, accessible, and designed around the needs of young people.



Feedback



**Staff showed not just sympathy, but also empathy (felt our pain).
Acknowledged and respected our faith**



I think this is a wonderful service which is of huge benefit to the local community. It is a friendly, non-judgemental 'listening ear' environment which helped me process things and move forward in a positive manner.



Strengthening our community through education

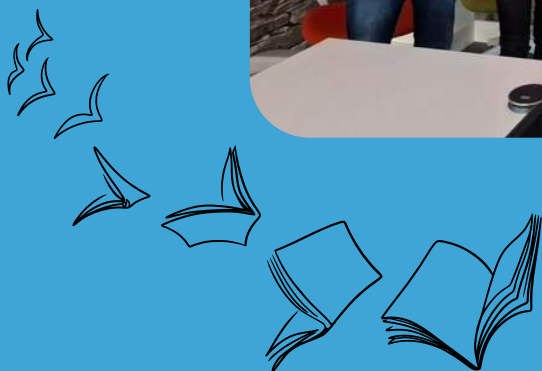
We are committed to strengthening our community by sharing knowledge, raising awareness, and supporting care beyond the hospice. Our team has developed a programme of community education sessions covering important topics such as recognising and supporting people living with dementia and busting common myths about cancer.

We are also running a project to train both volunteers and staff to confidently discuss cancer screening with members of the community, helping people access vital preventive care and make informed choices about their health.

In addition, we provide external education to local Nursing Homes, domiciliary care providers, and social care agencies, ensuring they understand how to care compassionately and effectively for people approaching the end of life.

By equipping other care providers with practical guidance and best practice, we help ensure that everyone in our community receives dignified, safe, and person-centred care, no matter where they are.

Through these initiatives, we are not only empowering our local community with knowledge but also building stronger, more compassionate networks of care across the area.



Investing in our people

(24-25) Priority 2- Investing in Staff and Volunteer Wellbeing (Empower through conversation, Sustainability)

Learning and development

We are committed to investing in our staff and volunteers, ensuring they have the knowledge, skills, and support needed to provide excellent care. Our in-house Education Team delivers a comprehensive programme tailored to all hospice services, combining online and face-to-face sessions to meet individual needs. Inclusivity is at the heart of our approach: each staff member is confidentially asked about any learning requirements, and adjustments are made to accommodate different learning styles.

We have also developed innovative learning opportunities, such as our Journal Club, created in partnership with Marie Curie to develop a toolkit for setting up and running successful sessions. The Journal Club is presented by staff from across all departments, giving team members the opportunity to share their knowledge and experience. Journal Club brings together staff and volunteers from all departments, with presentations covering topics ranging from how patients and housekeeping staff communicate, to neurodiversity in nursing, and assisted dying.

To make learning more accessible, we have introduced “Lunch and Learn” sessions, providing informal opportunities for staff and volunteers to engage in non-mandatory training while enjoying lunch. Sessions have included presentations on the pharmaceutical industry and drug development, improving knowledge on CQC in “Rate Your Hospice,” and fundraising initiatives. Through these programmes, we ensure that our team continues to grow, innovate, and deliver high-quality, compassionate care across the hospice.



Staff voice and improvements

Our staff are the experts in care, and to harness their knowledge, we have established Quality Improvement Groups on a range of topics.

These groups give staff the opportunity to come together, share ideas, and help shape policies and processes that enhance care and ensure safety for everyone.

We regularly gather feedback through staff surveys to understand their needs and priorities.

95% Staff feel they are treated kindly



97% are confident to ask questions



96% feel concerns about safety are listened to



Wellbeing support

We are committed to investing in the wellbeing of our staff and volunteers, recognising that happy, supported teams provide the best care. This year we have offered Health Coaching sessions to support personal and professional wellbeing.

Beyond this, we provide a wide range of social and recreational activities to foster connection and balance, including quizzes, wild water swims, needle felting, fitness sessions, and our own hospice netball team. By supporting staff both professionally and personally, we create a positive, inclusive workplace where everyone can thrive.

We further support our staff by providing access to professional guidance and reflective practice. Our team of Professional Nurse Advocates regularly holds restorative clinical supervision sessions, open to all staff, offering a safe space to discuss challenges, reflect on practice, and receive guidance. In addition, we engage external clinical supervisors to provide staff with additional options, ensuring everyone has access to the support they need to maintain wellbeing, develop professionally, and deliver the highest standards of care.



Checking, learning and getting better every day

How we stay accountable

At the heart of our hospice is a commitment to openness, responsibility, and continuous oversight. We recognise that patients and families place enormous trust in us, and we take that responsibility seriously.

Our organisation is led by a Board of Trustees, who are responsible for setting the strategic direction of the hospice and ensuring that high standards of care are consistently delivered. The Board meets regularly to review performance, risks, and future priorities, with quality of care as a standing and central focus supporting the Board are several key committees that provide detailed scrutiny and assurance:



Quality & Governance Committee

Oversees patient safety, clinical effectiveness, reviews incidents and patient experience

Committed to excellence



Peoples Committee

Focuses on workforce wellbeing, staffing, volunteers and development



Finance Committee

Reports on fundraising, retail and Hospice finances

These groups work together to ensure that information flows clearly from frontline services to leadership, enabling timely decisions and meaningful improvements.

Importantly, accountability is not just about structure—it is about culture.

We aim to create an environment where staff feel confident to speak up, where concerns are taken seriously, and where learning is prioritised over blame.



Reflecting, learning and improving



Providing safe, compassionate care requires constant reflection. We actively encourage all staff to report incidents, concerns, and near misses using our electronic reporting system, Vantage. This helps us understand what is happening in our services and where improvements are needed.

Every patient safety incident reported is reviewed and, where appropriate, investigated. Our focus is always on understanding why something happened, rather than who is at fault. From this, we identify learning and take action to reduce the likelihood of recurrence.

Learning is shared widely across teams through:

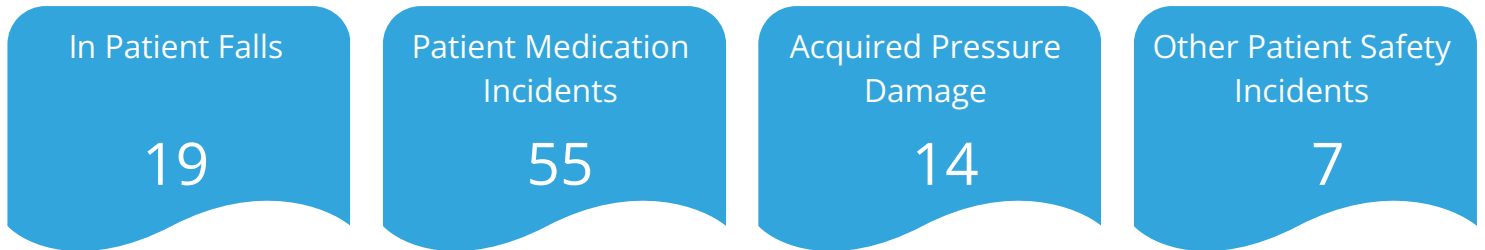
- Feedback and learning reports
- Staff meetings
- Staff newsletters
- Targeted training sessions



This ensures that improvements are embedded across the organisation, not just within one area.



What we have learned this year



What this means in practice

A rise in patient falls in the year prompted a review of mobility assessments which led to the introduction of an enhanced 24-hour assessment following admission.

Patients are also encouraged to use the call bells for assistance which is supported by having 'Call don't fall' posters in the patient's rooms.

Due to the ongoing deteriorating nature of some of our patients conditions, unfortunately some patients do developed some pressure ulcers. Regular monitoring of patients (especially with those who have reduced mobility) quickly identifies any deterioration in the patient's skin condition. Preventative measures and processes are immediately put in place. On admission, we use the Purpose T pressure ulcer risk assessment tool which helps identify those at risk of developing a pressure ulcer but also helps those with existing ulcers by outlining preventative measures and treatment to take.

Medication incidents, predominately low harm, resulted in improvements to checking processes and clearer guidance for staff. We are also moving to an electronic prescribing system which will reduce the number of incidents.

These are not simply numbers, but people entrusted to our care; each one matters deeply to us and strengthens our commitment to learn, improve, and provide the outstanding care every day.



Phil's story



Phil lost his son Aaron and his wife Michelle in a heartbreakingly short space of time. The grief was unimaginable. "Lost, lonely, and don't know where to turn to — don't know who to turn to," Phil says quietly.

Phil was left trying to figure out how to live in a world that had gone quiet. That's when he found St Mary's.

"St Mary's really helped me," Phil says. "I joined an Art class that helped me get out and meet people going through the same things I was. That really helped."

At first, Phil was unsure. "I thought, is this going to be heavy? Like — boom — do I have to say what happened?" But it wasn't like that. "You just relax. Sometimes people open up, and sometimes you don't. And that's okay."

He found peace in the gardening group, too. "I love the gardening group," he smiles. "We meet up, we have a brew, we talk. You don't even have to talk if you don't want to. You're just around people who get it."

Checking learning and getting it right

Learning alone is not enough—we must also ensure that improvements are effective and sustained. This is where our programme of audits and quality monitoring plays a vital role.

Throughout the year, we carry out a range of clinical and operational audits, including:

- Medication management audits
- Infection prevention and control checks
- Documentation and care plans audit
- Admissions and referral audits

These audits help us answer important questions:

- Are we doing what we said we would do?
- Are we meeting best practice standards?
- Are patients receiving consistent, high-quality care?

When audits identify areas for improvement, we develop clear action plans and monitor progress through our governance structures. This creates a continuous cycle:



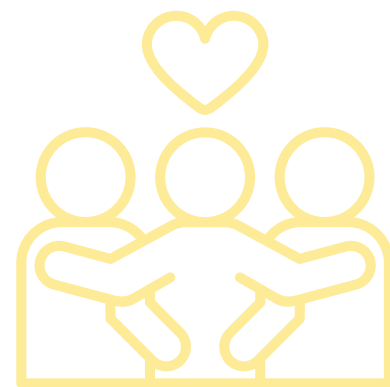
For example:

Following the Admission audit, this led to a review of our referrals processes to strengthen communication between ourselves and referrers.

A new referral form will be introduced in 2026-27 to aid with triage.

The documentation audit informed a move to digitalise care plans and reduce duplication.

Quality monitoring and improvement groups



- Regular review of performance data
- Feedback from patients and families
- External benchmarking where available

By bringing together data, experience, and professional insight, we develop a deeper understanding of the care we provide—helping us to recognise where we are doing well and where we can do better. This learning is actively used to drive meaningful and continuous quality improvement.

To support this, we have established a number of Quality Improvement Groups, bringing together colleagues from across the hospice to share expertise and lead change in key areas of care.

These include:



These groups play an important role in reviewing incidents, shaping action plans, and regularly reflecting on best practice.

Through this collaborative approach, we continue to strengthen our knowledge, build our experience, and enhance the care we provide to every person and family we support.

Statements of assurance

Services Provided

St Mary's Hospice provides NHS-funded specialist palliative care services, including inpatient and community-based care. We have reviewed all the data available to us on the quality of care in all these NHS services.

Clinical Audits and Research

We did not participate in any National Clinical Audits in 2024-25.

We undertook 10 local clinical audits which have resulted in a review of referral processes and clinical documentation. These audits included:

- Identifying Dying Phase and Care Plans
- Urgent Referrals
- CQC Controlled Drug Self Assessment
- Care plan documentation
- Baseline assessment tool for opioids in palliative care: safe and effective prescribing of strong opioids for pain in palliative care of adults (CG140)

The number of patients receiving NHS services, provided by or subcontracted by St Mary's Hospice in 2025-26, who were recruited during that period to participate in research approved by a research ethics committee, was NONE.

CQUIN

We were not subject to any CQUIN payment schemes in 2025/26.

Care Quality Commission (CQC) Statement

We are required to register with the CQC for the following regulated activity -Treatment of disease, disorder or injury.

The CQC has not taken any enforcement action against St Mary's Hospice during 2025/26.

The CQC rated our Hospice as "Good"

Secondary Users Service

We did not submit any records to the secondary Users Service during 2025/26 for inclusion in the Hospital Episode Statistics which are included in the latest published data.

Data Security and Protection Toolkit (DSPT)

We achieved compliance across all mandatory areas of the DSPT in 2025/26.

Clinical Coding Error

We were not subject to the payment by results clinical coding audit during 2025/26.

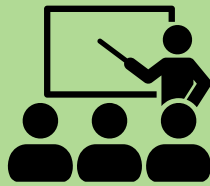
Priorities for 2026

Focused initiatives to enhance our services and community engagement

As we move into 2026, St. Mary's Hospice prioritizes key initiatives aimed at enhancing service delivery and community impact. Our focus is on training staff, leveraging technology, expanding our outreach, and securing the necessary funding to sustain our mission.

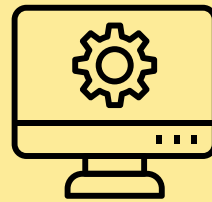
Enhanced training will ensure our staff are equipped with the latest skills and knowledge to provide exceptional care. Improved technology will streamline our operations and enhance patient experiences. We aim to expand our reach to serve more individuals in need and seek increased funding to support these vital initiatives, ensuring quality care for our community.

Committed to improvement



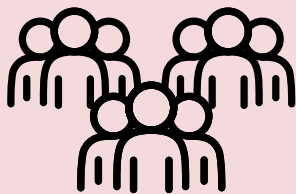
Enhanced training

Continuous education will empower our staff to excel in their roles.



Improved technology

Upgrading systems will enhance patient experiences and operational efficiency.



Expanded reach

Outreach programs will bring care to more individuals in our community.



Increased funding

Securing resources will support the sustainability of our mission and services.

Summary



St Mary's Hospice remains committed to working alongside our communities to deliver compassionate, high-quality care across Furness and South Lakes.

Over the past year, we have strengthened our partnerships, deepened our engagement with local people, and expanded services that respond to the real needs of our population.

By collaborating with healthcare providers, community organisations, and individuals, we are building more connected, supportive networks of care that extend beyond the hospice itself.

Through this collective approach, we are creating lasting social impact—helping people live well, supporting families through loss, and ensuring that no one in our community faces life-limiting illness or bereavement alone.

