

York and Scarborough Teaching Hospitals NHS Foundation Trust

## York Neonatal Unit Welcome booklet



This booklet belongs to:

Special Care Baby Unit Wigginton Road, York, YO31 8HE

York Hospital Telephone: 01904 726005 or 01904 722005

#### Welcome to the Neonatal Unit

We would like to welcome you and your baby to the neonatal unit at York Hospital.

Congratulations on the birth of your baby. We understand that having your baby admitted to the special care baby unit (SCBU) can be a very frightening experience especially for you as a parent.



We understand that having your baby admitted to a neonatal unit can be an anxious time, and hope that by providing you with this booklet we can give you an understanding of what is involved in your baby's care.

As a Unit we value parents as partners in the care of their baby. We aim to create an environment that nurtures and helps you to build a close and loving relationship with your baby. We will provide support and education so you can carry out as much of your baby's care as you wish to whilst on the unit, thus building your confidence in looking after your baby in hospital and also at home.

Our values are:



Before entering the room to see your baby we ask you to please,

- Remove any outdoor clothing (coats, hats etc.). There are coat hooks and lockers available for your use please note that the hospital does not accept any responsibility for any lost or stolen items.
- Wash your hands using soap and water and use the alcohol gel provided before entering the clinical areas (nurseries).



 Babies, especially ones requiring neonatal care, are more prone to developing infections as they have a low immune system. We ask that if you are feeling unwell, please do not visit the unit. Please telephone the unit for more information about when you will be able to visit your baby.



## Table of Contents



How to find us	6
The Unit	7
Floor plan of the unit	8
Neonatal team	9
Visiting	11
Facilities for parents	12
Monitors, machines and alarms on the neonatal	unit13
Monitor	14
Daily routine on the neonatal unit	16
Security and Parking	17
Informed Consent	18
Being there for your baby	19
Unit Accreditation	20
Feeding your special care baby	21
Family Centred care	23
Care of your baby	23
Kangaroo Care / Skin to Skin	26
Neonatal occupational therapy	28
V-CREATE	29
Getting ready to go home	32
At home	34

Outreach meetups	35
Useful links	
Tell us what you think of this leaflet	43
Teaching, training and research	43
Patient Advice and Liaison Service (PALS)	43
Leaflets in alternative languages or formats	44

#### How to find us

The door to the Special Care Baby Unit is via the Maternity entrance which is situated at the back of the main hospital.

Please note that there is no access from the main hospital corridor, unless you are coming from the maternity wards.

The Unit address is:

Special Care Baby Unit Wigginton Road York YO31 8HE



Direct Line: 01904 726005 or 01904 722005

York Hospital Main switchboard: 01904 631313



### The Unit

We are a level 2, local neonatal unit providing care for up to 15 babies. Two of our cots are dedicated for intensive care provision; the remainder are used for special care needs.

Most babies admitted to SCBU are premature (born early), at less than 36 weeks gestation.

There are other reasons which may also require your baby to be admitted.

#### Our admission criteria:

- 27 weeks and above, 28 weeks for multiple pregnancies. Below this, and your care will need to be transferred to a level 3 unit.
- Babies whose birth weight is less than 2.0kg.
- Babies who have breathing problems or appear unwell at birth and who may require oxygen therapy.
- Babies with feeding problems, including a low blood sugar.
- Babies whose jaundice requires further investigation and/or specific treatment.
- Any baby on the delivery or post-natal wards whose condition is a cause for concern and who may require further investigation and treatment.

#### Floor plan of the unit



Page 8

#### Neonatal team

The care on SCBU is provided by a consultant directed team of expert medical and nursing specialists trained in neonatal medicine. Other supporting members of the team include pharmacists, specialists from the x-ray, hearing and eye departments, physiotherapists and Speech and language teams.

Surgery on babies is not performed at this hospital. If this is required, it will be undertaken at one of the local regional units by paediatric surgeons. The closest to us are Leeds and Hull.

Our uniform guide



current members of staff and roles.



I am the ward manager of York Neonatal Unit.



Our philosophy is to maintain a safe environment, and one which encourages the highest standard of skilled and compassionate care for your baby.

We aim to provide an environment which encourages the relationship between parents and their baby and the promotion of the family unit.



## Visiting

As parents you are of vital importance to the well-being of your baby and not viewed as visitors, but partners in care. You are always welcome on the unit day or night. Brothers and Sisters of your baby (siblings) are also allowed on the unit at any time.

All families can have four nominated visitors during their baby's stay who may visit between

09:00 - 21:00

All other visitors may visit between 13:00 - 21:00.

Small and sick babies are very susceptible to infection and therefore we ask you to please wash your hands before you touch your baby and ensure visitors do the same before touching your baby. Hand gel should then be put on.

Please be aware that babies can be over stimulated if they are handled excessively - Please ask your nurse for ways to hold or comfort your baby without overstimulating.



#### Facilities for parents

We have facilities for you and your family to use during your baby's stay on SCBU. This includes a sitting area, parents' toilets, showers, a fully stocked kitchen with a fridge, kettle, microwave and toaster. Any food you put in the fridge must be labelled with your name and the date.

We also have two bedsits for rooming in that we offer to families on a circumstantial basis. They are primarily used for:

- \* Babies who are in ICU and who are unstable.
- \* Babies who are ready to establish breastfeeding.
- When baby is ready for home, parents are offered some optional nights in the bedsits prior to discharge.

**Please be aware:** Hot food cannot be consumed in the nurseries. You can eat cold food and have a lidded hot drink by your baby's bed side. (suitable cups can be found in the parents' kitchen)



# Monitors, machines and alarms on the neonatal unit

Your baby will need to be connected to monitors and/or other machines by tubes or wires. This is to monitor their breathing, heart rate and oxygen levels or to deliver necessary treatments.

Monitors and machines may alarm for different reasons, many of which are common and normal. An alarm does not necessarily mean that your baby requires attention.

Our nurses are trained to respond to each alarm appropriately. They will give you more information face-to-face and answer any questions you may have.







Page 14

#### Monitor

This displays your baby's heart rate, oxygen levels (saturations) and how fast your baby is breathing (respiratory rate). Your baby will have a probe on their hand or foot which will display their saturations. They will also have stickers on their chest that display their heart rate and respiratory rate.

Your baby's monitor will alarm if their observations are out of normal range, the monitor may also alarm if your baby moves around and the signal is monetarily interrupted. This is normal.

#### Ventilator

This machine supports and controls your baby's breathing so they can rest. A small tube will be placed in your baby's mouth and will sit at the top of their lungs. There are other types of respiratory support your baby may need not pictured.

#### Incubator

This is a bed that helps to keep your bay warm. In here your baby's temperature will be controlled and kept warm without needing clothes to allow the nurses to observe your baby closely.







#### IV drip pumps

These pumps allow controlled amounts of fluid to be given into a vein via a small tube (cannula) or other access if they are unable to feed. The pumps may alarm if the fluid or medication has finished or needs refilling. This is normal.

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#### Daily routine on the neonatal unit

7am – 7.30am - Nursing hand over from night team to day team.



9.30am – 10am - Ward round with doctors begins.
Parents are highly encouraged to attend ward round.
For more information see ward rounds below.

**1pm – 2pm** - Quiet time for babies (rest period - minimal handling).

**4pm – 8pm** - Visiting time for nominated visitors.

**7pm – 7.30pm** - Nursing hand over from day team to night team.

9pm – 8.30pm - Doctors handover.

In addition to this, your baby will have their own additional daily routine including specific feeding times, care times and tests and procedures.

#### Ward Rounds

A team of doctors, nurses and other specialists relevant to your baby's care will do a ward round every day (may be later than times specified above on a weekend). We are currently trialling



virtual ward rounds, which will be via WhatsApp for parents unable to be at the hospital every morning who still wish to attend the ward round. Please ask your nurse for more information regarding this.

#### Security and Parking

The unit has secured access (intercom and camera system). To keep your baby safe, please do not let anyone else through the doors with you when you gain access. We have a security tag system working, although if your baby is small, the tag may not be put on initially.

#### Parking

Parents are advised to park in the multi-storey car park, your parking is free whilst your baby in on the unit and can be validated on the unit.

You will have 30 minutes to leave the car park after validation so please only do so when you are ready to leave.

Please note the free parking is only available for the parents of the baby although there are some exemptions i.e. if you are reliant on a grandparent bringing you to the hospital (please discuss this with a member of staff).

Please do not park round the back of the hospital, as it is staff parking; there is video licence registration monitoring, and you will likely get a fine.

Please note the hospital building and surroundings are designated "No Smoking" areas.





During your baby's stay with us they may need to undergo simple procedures, for example, blood tests as part of their routine care.



Your baby may also receive certain medications such as antibiotics which are common on a neonatal unit. Some routine procedures and treatments will have been commenced as part of the essential care of stabilising your baby soon after admission to the neonatal unit. We may not have the opportunity to explain this fully beforehand. Please be assured all our care is directed in the best interest of your baby and you will receive a full explanation as soon as possible.

You do not have to give signed consent for routine procedures and treatments but once we have explained them to you, we will check with you and ensure you are happy for those aspects of care to continue.

We will do our best to take your wishes into account, but we have a duty of care to give your baby the most effective treatment if their life or health is at risk.

Only a person with legal parental responsibility (mother and father if married to mother or is registered on the birth certificate) may sign a baby's consent form.

The Department of Health leaflet "Consent – What You Have a Right to Expect" is a detailed guide on consent. Please ask staff for a copy.

## Being there for your baby

When your baby is in neonatal care, you might feel like you cannot care for your baby. There are lots of ways you can still parent and the nurses can support you to gain confidence by:

- Help you to understand your baby's cues, behaviour and character.
- \* Help you to pick up on responsive feeding cues.
- \* Expressing milk.
- \* Nasogastric tube feeding.
- \* Working together planning daily care.
- \* Nappy Changes.
- \* Skin-to-skin and Kangaroo Care.
- \* Wrapped Bathing.
- \* Parents' support session and bedside teaching.
- Taking your baby's temperature, changing saturation probe site and ECG leads.
- \* Understanding and giving medications.
- \* Opportunity to participate in medical rounds.

## **Unit Accreditation**

#### **UNICEF Baby Friendly**

Introduced to the UK in 1995, the Unicef UK Baby Friendly Initiative is based on a global accreditation programme from Unicef and the World Health Organisation. It is designed to support breastfeeding and parent infant



relationships by working with public services to improve standards of care. It is the first ever national intervention to have a positive effect on breastfeeding rates in the UK. Baby Friendly is an accreditation programme that is implemented over several years, using a staged approach. We as a unit are at stage 1 and are currently working towards stage 2.

#### **BLISS** baby charter

BLISS Baby Charter we currently have bronze level accreditation and are working towards silver. This recognises and rewards neonatal units across the



country caring for premature and sick babies, ensuring they deliver consistent high quality family-centred care. This is an approach which places parents at the centre of their baby's care.

## Feeding your special care baby

The nutritional needs of a premature baby are different to those of the full term infant.

Sucking and swallowing reflexes are absent or poorly coordinated in babies less than 33 weeks gestation, and so specialist feeding may be required.

If your baby is not able to co-ordinate and effectively feed, then they may require a naso-gastric feeding tube. This tube passes through the nose and into the stomach and allows us to feed your baby.

Very small or sick babies may not be able to tolerate naso-gastric feeding. In this instance, nourishment may be given through a vein, this is known as intravenous feeding. If this method is necessary, then breast milk can be frozen until your baby is strong enough to tolerate milk.

You will be given help and support with whatever method of feeding you choose for your baby.



Breast feeding is the healthiest way to feed and has many benefits for both baby and yourself which include;

- Protecting against bacteria and viruses.
- Providing nutrients which are important for growth and development particularly in the gut and the brain.
- Easily digested and absorbed by baby's gut and helps prevent life-threatening gut infections.
- Reduces baby's risk of gastroenteritis, respiratory infections, sudden infant death syndrome, obesity, type 1 and 2 diabetes and allergies (e.g. asthma, lactose intolerance).
- Encourages bond between mother and baby.
- Lowers mothers' risk of breast and ovarian cancer. It is important to start expressing your milk as soon as possible after your baby is born. Ask the nursing staff about how to do this.

If you need to go home before your baby is ready to be discharged, we can loan you a humilactor (breast pump) and everything you need to keep expressing your milk until your baby is ready to feed and be discharged.



\*\*Please ensure that all expressed milk is labelled with your baby's name and the date and time of expression\*\*

Page 22

## Family Centred care

Family-centred care means involving the family as much as possible in the daily care and routine of their baby.



At first, it can be hard to know what you can do for your baby on the neonatal unit. Getting involved on the unit can have a positive effect on you, your baby and your wider family. You might not feel very confident at first, but many families find that getting involved helps to build their confidence.

## Care of your baby

During pregnancy your baby has been protected in a dark, warm womb. After birth they are suddenly exposed to bright lights, noise, painful procedures and may no longer feel protected and secure.

We try to keep the lighting in the nurseries subdued and you may notice your baby's incubator is covered to create some shade. The unit can be a noisy place, but we do try to keep noise to a minimum. We encourage you to gently and quietly talk to your baby. Try and close incubator doors and bin lids quietly. Do not worry though if you have a lively toddler with you. Babies like to feel safe and secure, and we find that by providing boundaries or nesting in their incubators, using

blankets and sheets can help your baby become more settled and rested.

The nursing staff can help by showing you how to do this yourself.

There are a few other things that you can do to help both calm and stimulate your baby, these include:



- \* Talking, singing, reading a book, rocking and holding.
- Kangaroo care and skin to skin can all help with bonding and brain development.
- Containment holding (placing a gentle hand on your baby's head and bottom to provide comfort).
- Putting something that smells of you into your baby's incubator, for example a special blanket or muslin square.

If your baby has older siblings, we will provide you with a "Say Hello Diary." We encourage you and your children to write, draw pictures and take photographs for the diary, enabling older siblings to feel more involved and bond with their new brother or sister.



We also provide a "My SCBU Journey" keepsake bag that will be filled with items that we have used to take care of your baby during their stay on the unit, such as name bracelets and monitoring equipment. We also provide journals for parents if they wish to complete one. We would highly recommend doing this as it may be a good way for you to express any feelings you may be struggling with.

Remember you are the constant factor in your baby's life, and you contribute so much to your baby's wellbeing.

## Kangaroo Care and Skin to Skin

As soon as your baby's condition is stable, you will be encouraged to practice Kangaroo Care, and we will support you to hold and cuddle your baby as much as possible. If appropriate, your baby will be dressed in a nappy only and will be placed on your chest, skin to skin, inside your clothing. It is useful to wear a loose shirt or blouse with buttons, so that any lines and monitor leads are not disturbed. Both parents are encouraged to have skin to skin as there are many benefits including -

- Keeping baby's heart rate, breathing and temperature stable.
- Helping baby to sleep better.
- Help babies gain weight.
- Crying less and feeling comforted.
- Helps with establishing breastfeed.



Close contact between mum and baby also stimulates your breasts to make more milk. Kangaroo Care will help to boost your milk production, especially if your baby is held near to your breast.

Page 26



#### **Comfort Holding**

Even sick and premature babies can communicate their needs, so take time to watch your baby and learn to recognise what touch your baby likes and dislikes. Ask a member of our team for a Bliss booklet 'Look at Me, I'm Talking to You' which will help you recognise these signs. You will soon learn to respond to your baby's behaviour, enabling you to develop a loving bond with them.

We ask all parents to provide water wipes and nappies for their baby. We have plenty in stock until you can bring some in.

Parents are also able to bring in if they wish,

- a small teddy for their baby's bed.
- clothing (vests and baby grows).
- muslin cloths.
- a couple of blankets.
- comforter.

These can be stored underneath your baby's cot or incubator.



#### Neonatal occupational therapy

#### What is occupational therapy?

Occupational therapy helps people learn how to better perform the "occupations" of their daily life. For neonates, this means learning the skills necessary for



activities such as feeding, bathing, sleeping and moving.

An occupational therapist understands how the environment impacts on everything we do. On the neonatal unit, occupational therapists look at the effect of the environment on your baby's developing brain and support their growth and development. This helps to promote early engagement with parents, including shared occupations such as nurturing touch and the introduction of feeding, bathing and handling.

We have a neonatal occupational therapist and a neonatal physiotherapist who attend the ward round Monday - Wednesdays.



#### V-CREATE

V-create is a secure video and photo sharing service we use to share photos of your baby when you go home.



#### How does it work?

Families register for a secure account and provide consent to receive reassuring updates about their baby. Once activated, clinical staff record videos and take photos of your baby, assigning them to your private account.

When a new picture or video is available, you will receive an email inviting you to securely log in and view the videos, photos and messages.

Please ask one of the nurses for more information if you are interested



#### Financial support for parents

If you have been on SCBU for seven days, the support group will offer you a one off £50 supermarket voucher. Currently we are using Tesco, Asda,



Morrisons and Co-op. If your baby has been transferred in from another hospital, or we have to transfer your baby out to another hospital for treatment, the support group will offer you a £200 donation towards your costs.

#### **Benefits and grants**

You may be eligible for certain benefits such as a sure start maternity grant if you are on a low income We recommend getting in touch with your local **Citizens advice bureau** to make sure you are getting all the support available to you.

www.citizensadvice.org.uk.

#### Parental and Neonatal leave and pay

As of the 6th of April 2025, if your baby requires more than seven days of hospital care you may be entitled to neonatal care leave and pay. see either **Gov.uk** or **Bliss.org.uk** for more information to see if you are eligible.

\*\* For more financial advice, please see the SCBU financial support information board on the unit or ask the nurse caring for your baby.\*\*

## Mental health support

We understand that having a baby on the neonatal unit may be a stressful time and can have a negative effect on your mental health as a parent.

There is support available to you, so please let us know if you are struggling and we can sort this for you.

We recommend downloading the **Canopie app**, which is a free app that focuses on supporting the mental health of parents of babies requiring neonatal support. Please scan the QR code to download.

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#### Getting ready to go home

The most important thing you will want to know while on SCBU is when you are able to take your baby home. As your



baby may be quite small, they may have to stay in hospital a while before being discharged home. The timing will vary for each individual baby but the main criteria to meet in order to go home are:

- Being able to maintain their temperature in a cot.
- Taking all feeds orally and are putting weight on.

Before discharge home there are also a few things the nursing staff may have to discuss with you. These include bathing your baby, resuscitation training, hearing (audiology) tests, follow up appointments and administering medications. Some babies may be discharged home on oxygen therapy. You will receive guidance and support from the nursing staff and neonatal outreach nurse if this is the case.

As your baby nears the end of their stay on SCBU you will be invited to stay in one of the purpose-built bedsits on the unit. There is a single and a double bedroom where you can stay with your baby to get used to looking after them independently. Babies and children on no account are to be left unattended in these areas. If your baby is born at 34 weeks gestation or below, you will be discharged under the neonatal outreach team once you are home.

The neonatal outreach team consists of specialist neonatal nurses, and they will visit you and your baby in your home to offer support. They will regularly weigh your baby to ensure their growth is steady once home. If your baby is born above 34 weeks but has extra medical needs for example will be going home on oxygen or has a nasogastric tube in then you may also require the neonatal outreach team.



If your baby is above 34 weeks and has no extra medical needs at discharge, they will go home under the care of the health visitor.

You will be given a named neonatal outreach nurse who will visit you when you are home, it will either be:

Vikki Smith - 07974316755 Kirsty Flintoft - 07816180499 Catherine Bolton - 07730494024



#### At home

If you are taking your baby home in the car, please remember to practice with your car seat before discharge – not all car seats fit all cars.

When you initially take your baby home the temperature needs to be kept at a constant draught free 18-20 degrees centigrade.

It is important that you follow the recommendations set by the foundation of infant deaths (Lullaby Trust) when putting your baby to bed. These recommendations are implemented on SCBU when your baby is almost ready for home and will be discussed with you, which include -

- Putting your baby to sleep on their back.
- Do not let them overheat use several layers and remove as required.
- Provide a smoke free environment.
- Place baby's feet at bottom of the cot (feet to foot position).
- Seek medical advice if you have any concerns.

If you have any questions regarding this, please do not hesitate to ask.





#### Outreach meetups

Our outreach team runs a meet up session with SCBU graduates and their parents which can be a great way to meet other parents and carers who have also had a SCBU experience.

These sessions are held on the second Tuesday of every month between



During the winter months, they are held indoors at Tesco's community room at Askham Bar.

In summer, they are held in various parks around York (weather dependant). The location of each will be posted on our Facebook page. "York neonatal unit" or "York special care baby unit support group".



If you want to stay up to date with news from York NNU, please feel free to follow our Instagram page using the QR code below.

We also have a Facebook group with the same name. @YORKNNU



Page 36

#### Common neonatal terms

It is common for staff to use abbreviations in neonatal care. Here are some of the most common ones you may come across.

NICU - Neonatal intensive care unit.

SCBU - Special care baby unit.

CPAP - Continuous positive airway pressure (respiratory support machine).

HF - High flow (respiratory support machine).

spO2 - Saturations. This is the level of oxygen in your baby's blood.

O2 - Oxygen. 21% is room air.

NBM - Nil by mouth.

NGT - Nasogastric tube.

EBM - Expressed breast milk.

NP1 - Nutri Prem 1 (preterm formula).

NEC - Necrotising enterocolitis - A gastrointestinal emergency.

PDA - Patent ductus arteriosus. A common cardiac condition in premature babies.

SBR - Serum bilirubin result (Jaundice level test).

#### York SCBU Support Group Charity Number 5fi6552

We are lucky enough to have a fantastic support group which was formed in 1984. The members on the support

group are parents and unit staff, who work together to give a better start in life to the tiny or sick babies and their families who have been treated and cared for on the unit.



#### The aims of the support group

The object of the group is to help support the care and treatment of premature and sick newborn babies in the Special Care Baby Unit at York Hospital. They help by funding for specialised medical or surgical equipment and improved amenities and facilities including funding educational courses for staff.

The support group can give assistance and advice to anyone who is willing to raise money for us. Often parents express a wish to maintain contact with the support group and become active members. We always welcome new members with new ideas and motivation and this can be arranged through the nursing staff on the unit or by contacting us either by email scbufundraising@gmail.com or Facebook messenger



#### **Useful links**

Bliss (the National Charity for the Newborn UK): www.bliss.org.uk

Breastfeeding Network: www.breastfeedingnetwork.org.uk

Cry-sis (excessive crying/sleepless/demanding babies): www.cry-sis.org.uk

Gingerbread (for single parent families): www.gingerbread.org.uk

Home Start: www.home-start.org.uk

The Lullaby Trust (support for safer sleeping): www.thelullabytrust.org.uk

Multiple Birth Foundation: www.multiplebirths.org.uk

Neurodiverse family support: www.neurodiversefamilysupport.org.uk

Peeps: www.peeps-hie.org

Premature baby clothing: www.little-mouse.co.uk

Rainbow Trust Children's Charity: www.rainbowtrust.org.uk

Sands (charity for neonatal bereavement): www.uk-sands.org

Shine2fi: is a charity in North Yorkshire that is dedicated to the lives of children with Down Syndrome: www.shine21.org



TAMBA (charity for twins and multiple births): www.tamba.org.uk

Teddy and Me (premature baby clothes): www.teddyandme.co.uk

Tommy's (support for families who have lost a baby): www.tommys.org

Treasure chest (breastfeeding support in York) https://treasurechest.org.uk/

Twins Trust: www.twinstrust.org

Unicef: www.unicef.org.uk/babyfriendly

WellChild organisation: www.wellchild.org.uk

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#### Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact York Neonatal Unit on Telephone: 01904 726005 or 722005.

#### Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

# Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email yhs-tr.patientexperienceteam@nhs.net.

An answer phone is available out of hours.

## Leaflets in alternative languages or formats

If you would like this information in a different format, including braille or easy read, or translated into a different language, please speak to a member of staff in the ward or department providing your care.

Patient Information Leaflets can be accessed via the Trust's Patient Information Leaflet website: www.yorkhospitals.nhs.uk/your-visit/patientinformation-leaflets/



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#### www.yorkhospitals.nhs.uk