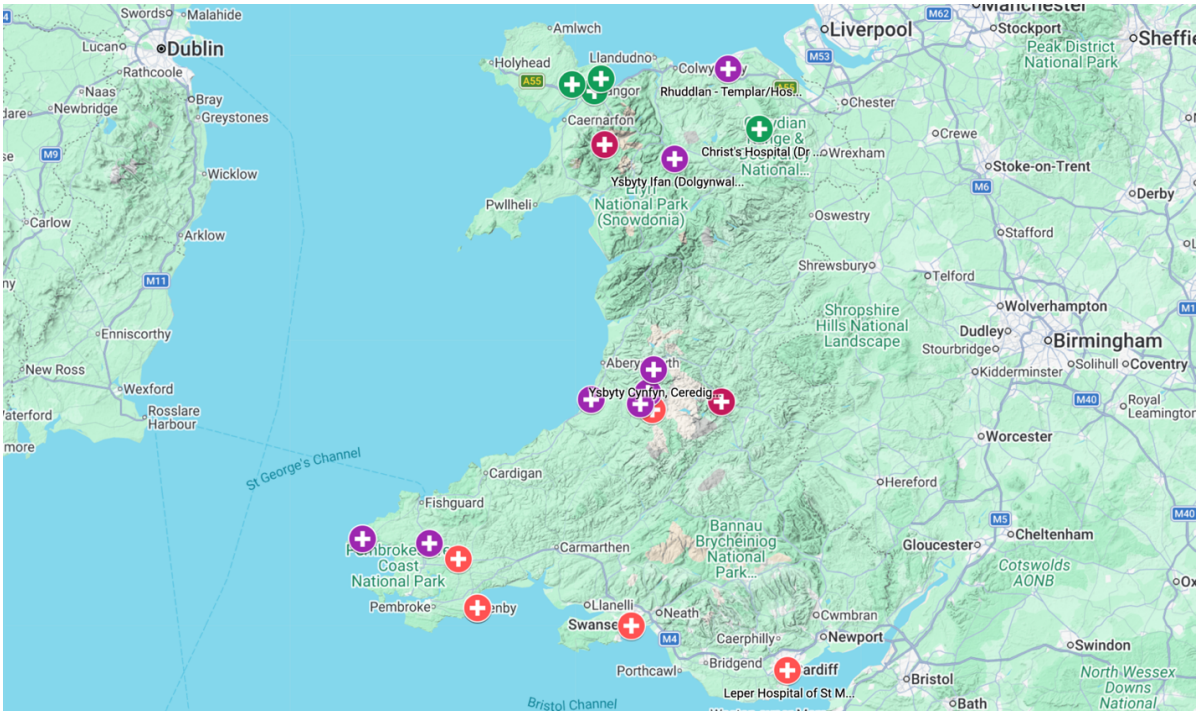
# Leprosaria and Medieval Hospitals of Wales

*A Survey of Confirmed Sites, Probable Hospices, and Lost Foundations*

Based on the KML Map: A Map of Leper Hospitals and Medieval Hospitals of Wales
Primary source: John Cule, National Library of Wales Journal, 1977
With additional references from Royal Commission Inventories, Archaeologia Cambrensis, Patent Rolls, Tithe Schedules, and the National Trust




https://tinyurl.com/Leper-Hospitals-1150-1665

*https://tinyurl.com/Welsh-Leper-Hospital-1150-1665*

*Graham T Emmanuel · Kidwelly · 2026*

# Introduction: Mercy at the Margin

Leprosy was the defining disease of the medieval mind. Its disfigurements were visible, its contagion feared, and its sufferers were cast to the literal and moral edges of society. Yet the same faith that expelled lepers from the town gate also commanded care for them. Across Wales, from the harbourside of Tenby to the pilgrims' road above Ysbyty Ifan, a network of hospitals, hospices, and religious foundations arose to provide what the age understood as both medical care and spiritual grace. This document maps and narrates what survives of that network.

The map from which this article is drawn records confirmed sites, probable Hospitaller and ysbyty foundations, post-medieval almshouse institutions, and locations that have resisted all attempts at identification. It is, as much as anything, an honest record of what we do not know. Many sites are known only through a single charter reference, a placename on an Ordnance Survey sheet, or a brief note in John Cule's foundational 1977 study for the National Library of Wales Journal. The survey presented here makes no claim to completeness. There are almost certainly more. It is a framework for further research, not a final word.

Medieval Wales was not a unified state. Its hospitals arose under bishops, Norman lords, monastic orders, crusading military fraternities, and municipal guilds. The Knights Hospitaller brought their model of the sacred hospice from the crusader routes to the roads of Gwynedd and Ceredigion. Cistercian abbeys like Strata Florida maintained infirmaries that served both their own community and the surrounding poor. Episcopal foundations at Llawhaden and Swansea provided for decayed clergy and the chronically sick. In the south, at Cardiff and Tenby, formal leper hospitals with chapels, chapels and farmland served the most stigmatised of all. In the seventeenth century, the tradition continued in a more domestic key, as Welsh gentry and clergy endowed small almshouses that carried the same obligation of care under a different name.

The Welsh word ysbyty derives from the Latin hospitium, a place of hospitality. It survives in half a dozen placenames across mid and north Wales, each one a faint trace of a building, a community, and a purpose that the landscape has otherwise swallowed. Where documentary evidence confirms a foundation, this survey provides as full an account as the sources allows. Where placenames are all that remain, it records that too. Nothing has been inflated, and nothing has been omitted to make the picture neater than it is.

The sites are grouped in four layers, following the structure of the map: confirmed leper hospitals with clear documentary evidence; Hospitaller and ysbyty foundations whose function is probable but uncertain; post-medieval almshouse hospitals of the seventeenth century; and lost or unidentified sites that remain open questions. Each layer begins with a contextual note and concludes with a summary of what has been established and what remains to be found. A general conclusion follows.

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All coordinates derive from the GPS-verified KML file built by Graham T Emmanuel. Site descriptions draw principally on John Cule, 'A History of Medicine in Wales,' NLW Journal, 1977, supplemented by the Royal Commission on the Ancient and Historical Monuments of Wales, Archaeologia Cambrensis, Patent Rolls, and site-specific secondary sources where noted. The map was drawn using Google My Maps and should be consulted alongside this document.

# Five Centuries of Care: A Chronological Survey

The twenty-one sites in this survey span roughly five hundred years, from the earliest Hospitaller grant recorded in Wales before 1148 to the almshouse foundations documented in the Bishop of Bangor's Return of 1665. That span covers the full arc of medieval and early modern charitable provision: the age of the crusading orders, the episcopal building programmes of the high medieval church, the urban leprosaria of the thirteenth and fourteenth centuries, the long decline of the medieval hospital system, the disruption of the Reformation, and the cautious reconstruction of institutional care under Protestant gentry patronage. Each century left its own distinctive mark on the Welsh landscape of charity.

## Before 1150: The Earliest Foundations

The single entry from this period, the Hospitaller grant at Spittal in Pembrokeshire made by Alexander Rudepac before 1148, stands as the earliest documented act of organized charitable provision in this survey. It predates the confirmed leper hospitals by nearly a century and belongs to the first generation of Hospitaller expansion beyond the Holy Land. The Knights of St John had been formally recognized as a military-religious order only in 1113, and their rapid spread to the furthest reaches of western Europe in the decades immediately following is one of the remarkable organisational feats of the twelfth century. That Wales was included in their early expansion reflects the appetite of Anglo-Norman lords in Pembrokeshire for the prestige that came with Hospitaller patronage.

This was also the period in which the institutional landscape of Wales was being reorganised under Norman influence. Castles, new boroughs, reformed monasteries, and parish churches were being established across the south and east, and the charitable hospital, in its various forms, was part of this wider reordering of the Welsh landscape. The Spittal foundation is a small piece of a much larger transformation.

## 1150 to 1200: Pilgrimage Routes and Cistercian Foundations

The second half of the twelfth century brought two major developments that shape this survey. The Cistercian order established Strata Florida in 1164, creating the institution that would become the spiritual centre of Welsh monastic life and whose infirmary would provide care for lepers and the sick for the next four centuries. And the Knights Hospitaller consolidated their presence on the north Wales pilgrimage route to Bardsey with the foundation of the hospice at Ysbyty Ifan, probably between 1190 and 1198.

These two foundations represent two different models of institutional care that would coexist throughout the medieval period. The Cistercian infirmary was an internal institution, embedded within the monastery's daily life, that extended its charitable reach to the surrounding population as a secondary function. The Hospitaller hospice was a purpose-built waystation on a specific route, its entire reason for existing being the reception of strangers. Between them they covered the two principal reasons why medieval people needed care away from home: illness and travel. The ysbyty placenames that cluster around Strata Florida in Ceredigion may partly reflect the extension of this twelfth-century framework into the upland valleys of mid Wales.

## 1200 to 1300: The Century of Leper Hospitals

The thirteenth century is the most active period in this survey. Four of the confirmed foundations belong to this century: the St Mary Magdalen leper hospital at Tenby (c.1236), the Hospital of St John the Baptist at Tenby, the Hospital of the Blessed David's predecessor arrangements at Swansea, and the Llawhaden foundation of 1287. The Llanrhystud Hospitaller grant, confirmed in a document of 1203 to 1214, also belongs to the opening years of this period.

This was the high-water mark of leprosy in western Europe. The disease, broadly defined as it was, had been present for centuries, but the thirteenth century saw both its peak prevalence and the most systematic institutional response to it. The Fourth Lateran Council of 1215 provided a framework for leper house administration, and episcopal and aristocratic founders across Wales and England responded with a wave of new foundations. The positioning of Welsh leprosaria outside town gates, on approach roads, and at the margins of urban settlement follows a pattern established across the whole of western Christendom in this period.

Bishop Thomas Beck's 1287 foundation at Llawhaden, near the close of the century, is the most architecturally ambitious Welsh hospital of this period for which any structural trace survives. It represents the mature episcopal model of hospital foundation: well-endowed, formally constituted, with a permanent chapel and a site on an established episcopal manor. The stone vaulted chamber recorded by the Royal Commission in 1925 is the physical legacy of this century's most durable Welsh charitable act.

## 1300 to 1400: The Cardiff Spital and Episcopal Initiative

The fourteenth century opened with the most substantial Welsh hospital foundation in the confirmed layer: the Leper Hospital of St Mary Magdalene in Cardiff, built in the early years of the century outside the East Gate of the town. With accommodation for twenty-four persons, a chapel, a manor house, and fifteen acres of agricultural land, it was the largest institution in this survey and the one most closely analogous to the great English urban leprosaria of the same period.

Bishop Henry de Gower's Hospital of the Blessed David at Swansea in 1332 confirmed the continuing vitality of episcopal charitable initiative in the middle of the century. Gower was one of the most architecturally active churchmen in Welsh history, and his Swansea foundation was one element of a wider building programme that transformed the physical landscape of the Diocese of St Davids. The Patent Roll documentation of the Swansea hospital through to 1545 demonstrates that the fourteenth-century episcopal foundations had staying power that outlasted many of their contemporaries.

By the end of the fourteenth century, however, the Cardiff hospital was already in decline. The retreat of leprosy from western Europe, which had begun in the later thirteenth century and accelerated through the fourteenth, removed the primary purpose of the dedicated leprosarium. Institutions that had been built for a specific epidemic condition found themselves without their original clientele, and the endowments that had supported them were increasingly diverted or mismanaged. The late fourteenth century marks the beginning of a long institutional twilight for the Welsh hospital system.

## 1400 to 1550: Twilight and Dissolution

The fifteenth century is represented in this survey largely by absences and uncertainties. The Hospital of St Michael at Llandeweryn appears in a single 1408 grant and then disappears from the record entirely, its very location now unknown. The Llawhaden hospital continued to function until at least 1447, but its later history is unrecorded. The Hospital of the Blessed David at Swansea was still documented in the Patent Rolls as late as 1545, suggesting that it remained active through a century in which many comparable institutions had already ceased to function.

This was the century of the Owen Glyndwr rising and its aftermath, of the Yorkist and Lancastrian conflicts that periodically disrupted the institutional life of Wales, and of the general contraction of monastic and charitable provision that preceded the Reformation. The hospitals that survived into the sixteenth century were those with the most robust endowments and the most direct episcopal or aristocratic protection. The others were absorbed, abandoned, or simply ceased to function without leaving any record of their end.

The Reformation, when it came to Wales in the 1530s and 1540s, completed the dismantling of the medieval hospital system. The Cardiff Spital was confiscated between 1534 and 1536. The Swansea hospital was dissolved in 1547. Strata Florida's infirmary was already ruins when Leland visited around 1540. Within a generation, the institutional infrastructure of five centuries of charitable provision had been swept away, and only the placenames remained to mark where it had stood.

## 1550 to 1665: Reconstruction and the Almshouse Tradition

The gap between the Reformation dissolutions and the almshouse foundations of the late sixteenth and early seventeenth centuries was not a complete break. The obligation to provide for the poor did not disappear with the monasteries and the chantries; it was redistributed, through the Poor Law of 1601 and through private charitable initiative, into new institutional forms. The Welsh gentry and clergy who founded almshouses at Ruthin, Bangor, Beaumaris, and Penmynydd in this period were working within a tradition that stretched back to the thirteenth century, even if the theological framework in which they operated was Protestant rather than Catholic.

Dr Gabriel Goodman's Christ's Hospital at Ruthin, founded under letters patent around 1590, is the most formally constituted of these later foundations, and its documentation through the Bishop of Bangor's Return of 1665 places it within a survey that provides the clearest single snapshot of Welsh charitable provision in the early modern period. The four foundations recorded in the Return represent the survivors: institutions that had been established with sufficient endowment and legal protection to outlast the disruptions of the Reformation century and remain functional into the 1660s.

By 1665 the medieval hospital network of Wales had been gone for over a century. What the Bishop's Return records are its Protestant successors, smaller in scale, more secular in character, and operating in a world where the church no longer provided the overarching framework of charitable organisation. They are the final chapter of the story that this survey traces, and they close it with a quiet continuity: the same obligation, the same human need, the same local act of endowment, in a world that had changed almost beyond recognition since Alexander Rudepac gave his Pembrokeshire land to the Knights of St John before 1148.

# Confirmed Leper Hospitals: Sites with Documentary Evidence


The foundations in this layer share a common characteristic: each one is recorded in a named document of sufficient precision to confirm both its existence and, in most cases, its approximate location. They are not inferences from placenames or landscape traces. They are institutions that contemporaries wrote about, endowed, regulated, and eventually dissolved. The fact that all of them have been physically destroyed, built over, or reduced to bare chapel walls does not diminish the certainty of the documentary record.

Medieval leprosy, now understood as the disease caused by Mycobacterium leprae, was in the twelfth to fourteenth centuries a catch-all category applied to a range of skin conditions. The isolation it

required was as much theological as epidemiological. The Fourth Lateran Council of 1215 regularised the status of leper houses and confirmed their right to appoint priests and collect tithes. In Wales, as in England, leper hospitals were typically positioned just outside the town walls, on a road approaching the settlement, where their inmates were visible to travellers who might give alms but kept at a sufficient distance from the healthy population. This pattern is clearly visible in the sites that follow.

## 1. St Mary Magdalen Leper Hospital, Tenby

**Founded:** circa 1236

**Founder:** Gilbert Mareschal

**Location:** Near the foot of Heywood Hill, Tenby, Pembrokeshire

**Coordinates:** 51.6727 N, 4.7036 W

**Primary Source:** John Cule, NLW Journal 1977; Royal Commission Inventory of Pembrokeshire 1925

Tenby in the thirteenth century was a prosperous walled port under Anglo-Norman control, and it supported not one but two hospital foundations. The leper hospital dedicated to St Mary Magdalene was founded around 1236 by Gilbert Mareschal, one of the Pembrokeshire Marcher lords. Its dedication was entirely conventional: Mary Magdalene was the patron of lepers throughout medieval Christendom, her association with penitence and bodily suffering making her the obvious intercessor for those whose disease was read as both physical affliction and spiritual condition.

The hospital stood near the foot of Heywood Hill, outside the medieval town on the approach from the landward side. This positioning is characteristic of the leprosarium: close enough to benefit from urban almsgiving, far enough to satisfy the requirement of segregation. The site is recorded in the Royal Commission Inventory of Pembrokeshire (1925) but no structural remains were noted by that date. It had been absorbed into the developing townscape, leaving only its documentary trace in the sources Cule assembled from Pembrokeshire local history and the NLW collections.

Gilbert Mareschal's foundation was likely modest. Welsh leper hospitals of this period were rarely large institutions. A chapel, accommodation for a small number of inmates, and a warden or chaplain to manage the endowment and maintain the liturgical obligations would have constituted the full establishment. The income probably derived from a small, landed grant and alms collected at the chapel door or from passing travellers.

## 2. Hospital of St John the Baptist, Tenby

**Founder:** William de Valence, Earl of Pembroke

**Location:** West of the Globe Inn, Tenby (Windpipe Lane area)

**Coordinates:** 51.6727 N, 4.7036 W (shared grid with St Mary Magdalen entry)

**Primary Source:** Cule 1977; drawn 1812, recorded gone by 1925

The second Tenby foundation was the Hospital of St John the Baptist, established by William de Valence, Earl of Pembroke, one of the most powerful figures in thirteenth-century Wales. Unlike the leper hospital of St Mary Magdalene, the Hospital of St John appears to have served a broader population of the sick and poor, though the two institutions may have operated in some degree of coordination within the small town.

The hospital stood west of what was later known as the Globe Inn. A notable feature was its possession of a well in Windpipe Lane, which was described as the town's principal water source. This combination of institutional care and civic infrastructure is characteristic of larger medieval hospital foundations, where the endowment included both practical amenities and charitable functions. The well gave the hospital an importance to the wider community beyond the care of its inmates.

Ruins of the hospital were still sufficiently visible to be drawn in 1812, providing a visual record of the building's form before its final disappearance. By 1925, when the Royal Commission conducted its Pembrokeshire survey, the structure was gone. The 1812 drawing preserved in the antiquarian record represents the last material evidence of a foundation that had survived from the thirteenth century to the early nineteenth.

## 3. Leper Hospital of St Mary Magdalene, Cardiff (The Spital)

**Founded:** Early fourteenth century

**Location:** Outside the East Gate on Crockherbtown (now Queen Street), Cardiff

**Coordinates:** 51.4825 N, 3.1728 W

**Dissolution:** Confiscated at the Reformation, 1534 to 1536

**Present Site:** Capitol Shopping Centre, Queen Street

**Primary Sources:** Cule 1977; Royal Commission Inventory of Glamorgan; Dic Mortimer, Cardiff's Lost Buildings

The Cardiff leper hospital is the most extensively documented of the confirmed Welsh sites, and it illustrates the full arc of such an institution from foundation through dissolution to physical erasure. Built in the early fourteenth century outside the East Gate of the medieval town on Crockherbtown, the road that is now Queen Street, it was placed in the classic extra-mural position for a leprosarium, close to the main route into Cardiff from the east.

The hospital was run by nuns of the order of St Mary Magdalene, and the complex they administered was substantial for a Welsh foundation. It comprised a chapel, a manor house, farm buildings, and approximately fifteen acres of agricultural land. The accommodation was designed to provide beds for twenty-four persons described as leprous, poor, and feeble, a formulation that reflects the medieval understanding of the hospital's threefold mission: to isolate the contagious, to shelter the destitute, and to care for the chronically incapacitated.

By the late fourteenth century the institution was in decline. The reasons are not fully documented, but the pattern is familiar across English and Welsh leprosaria: the great leprosy epidemic of the high medieval period had passed its peak, income from endowments had often been mismanaged or diverted, and the social structures that had made such foundations central to urban charitable life were weakening. The hospital limped on into the sixteenth century but could not survive the Reformation.

The manor, by then known simply as 'the Spital,' was confiscated between 1534 and 1536 and passed first to the Herberts, the dominant gentry family of Glamorgan, and then to the Lords of Cardiff Castle. The site retained its identity in local naming for centuries: Spital Buildings and Spital Cottages appear on maps and in records into the 1880s and 1890s, by which point the area was being absorbed into the expanding Victorian city. The last physical traces disappeared under redevelopment. The site is now occupied by the Capitol Shopping Centre on Queen Street, one of central Cardiff's principal retail developments.

## 4. Hospital of the Blessed David, Swansea

**Founded:** 1332

**Founder:** Bishop Henry de Gower, Diocese of St Davids

**Location:** Site of the Cross Keys Inn (now Olde Cross Keys pub), Swansea

**Coordinates:** 51.6193 N, 3.9418 W

**Documented:** Patent Rolls to 1545; dissolved 1547

**Primary Source:** Cule 1977

The Hospital of the Blessed David in Swansea is distinctive among the confirmed Welsh foundations for two reasons: it was dedicated not to the Magdalene or the Baptist but to Wales's own patron saint, and it was founded not for lepers but specifically for blind, decrepit, or infirm priests and other poor men. This narrowing of the charitable focus towards the clergy reflects the founder's own position as a senior churchman with a particular duty of care towards his ordained brethren who had fallen on hard times.

Bishop Henry de Gower was one of the most architecturally active bishops in the history of the Diocese of St David's. He rebuilt the Bishop's Palace at St David's, extended the cathedral, and endowed institutions across his diocese. His 1332 foundation at Swansea was one of several charitable acts that marked a career of considerable cultural as well as ecclesiastical impact. The hospital was sited at what became the Cross Keys Inn, now operating as the Olde Cross Keys public house, one of those not uncommon cases where an institution of care became, centuries later, a place of refreshment.

The hospital is documented through the Patent Rolls as late as 1545, indicating that it survived the early stages of the Reformation in better health than the Cardiff foundation. It was dissolved in 1547, in the general suppression of chantries and similar institutions that accompanied the reign of Edward VI. By that date it had been in existence for over two hundred years, a respectable institutional lifespan that suggests it continued to attract some endowment income even as the medieval framework that had created it was dismantled.

## 5. Hospital of the Virgin, St Thomas the Martyr and Edward the Confessor, Llawhaden

**Founded:** 1287

**Founder:** Bishop Thomas Beck of St Davids

**Location:** Chapel Field, Llawhaden, Pembrokeshire

**Coordinates:** 51.8223 N, 4.7976 W

**Surviving remains:** Stone vaulted chamber, 27 by 18 feet, recorded 1925

**Primary Source:** Cule 1977; Royal Commission Inventory of Pembrokeshire 1925

Of all the confirmed sites in this survey, the Llawhaden hospital is the one where something physical survives above ground, and it is consequently the most tangible link to the medieval network of care. Founded in 1287 by Bishop Thomas Beck of St Davids, the institution bore a characteristically medieval triple dedication: to the Virgin Mary, to St Thomas the Martyr (Thomas Becket, still a powerful figure in the late thirteenth century despite the passage of more than a century since his murder), and to Edward the Confessor, the royal saint of Anglo-Norman piety.

The dedication to three separate intercessors in a single foundation was not unusual, but it does suggest a degree of ambition that reflects Llawhaden's status as an episcopal manor. The bishops of St David's had a castle and substantial landholdings at Llawhaden, and Beck's hospital was likely conceived as part of a coordinated programme of improvement to the episcopal estate. The hospital was active until at least 1447, a working life of a hundred and sixty years.

When the Royal Commission visited Llawhaden in 1925, they found and recorded the remains of what they described as a stone vaulted chamber measuring twenty-seven feet by eighteen feet, situated in what the Tithe Schedule called Chapel Field. This chamber is the chapel of Bishop Beck's hospital, stripped of its furnishings and roof but with its masonry walls sufficiently intact to allow measurement. It is the physical heart of a foundation that once served the sick and poor of a rural Pembrokeshire parish, and it remains the most significant surviving structural fragment of any institution in this survey.

## 6. Strata Florida Abbey: Infirmary and Leper Support

**Foundation:** Cistercian abbey founded 1164

**Location:** Pontrhydfendigaid, Ceredigion

**Coordinates:** 52.2754 N, 3.8385 W

**Infirmary mentioned:** 1291; leper support per Archaeologia Cambrensis 1848

**Primary Source:** Cule 1977; Archaeologia Cambrensis 1848; John Leland c.1540

Strata Florida was the most important Cistercian house in Wales. Founded in 1164 in the remote valley of the upper Teifi, it became the spiritual and cultural centre of medieval Welsh learning, the burial place of Welsh princes, the home of the Brut y Tywysogion chronicle, and the focal point of Cistercian influence across a vast swathe of upland Wales. Its infirmary and its support for lepers are part of this larger story.

The Firmar House, as the infirmary was known, is mentioned in records dating to 1291. Cistercian monasteries were required by the order's own constitutions to maintain an infirmary for sick monks, and the larger abbeys extended this function to provide some care for those living in the surrounding area, including lepers. The record in Archaeologia Cambrensis for 1848 confirms that Strata Florida's infirmary engaged in leper support, situating it within the network of care that operated across mid Wales and that the ysbyty placenames in the Ceredigion uplands partly reflect.

John Leland, the antiquary who toured Wales around 1540, described the state of the abbey in terms that are both vivid and melancholy. He recorded that 'the Fratry and Infirmatori be now mere ruines,' a phrase that captures the speed with which monastic dissolution could reduce centuries of institutional life to rubble. The infirmary that had provided care since at least 1291 was, within a generation of the Dissolution, unroofed and abandoned. The shell of the abbey church still stands in Cadw guardianship; the infirmary has left no visible trace above the grass.

## Layer One: Summary

Six confirmed foundations are mapped in Layer One, spanning a period from the early thirteenth century to the Reformation. They are distributed across south Wales and the Marches, with a concentration in Pembrokeshire that reflects both the density of Anglo-Norman settlement in that county and the survival of documentary sources through the records of the Diocese of St David’s. The northern counties of Wales are entirely absent from this layer, which is almost certainly a reflection of source survival rather than historical reality.

All six sites shared the same trajectory: foundation by episcopal or aristocratic endowment, a period of active function lasting between one and three centuries, decline in the later medieval period as leprosy rates fell and institutional income dried up, and final dissolution at or around the Reformation. The physical record is almost entirely lost. Tenby has nothing above ground. Cardiff's site is a shopping centre. Swansea's hospital is a pub. Only Llawhaden retains a measurable stone chamber that can still be visited. Strata Florida's infirmary is grass.

The documentary record is correspondingly patchy: for Cardiff, relatively full; for Tenby, reasonable; for Swansea and Llawhaden, adequate; for Tenby's second hospital and Strata Florida's infirmary, thin. Future archival work in the National Library of Wales, the Royal Commission's archive, and the Pembrokeshire and Glamorgan ecclesiastical records would likely add detail to each of these accounts and might recover references to further sites not yet included in any map.

LAYER TWO

# Hospitaller and Ysbyty Foundations:

## Probable Sites with Uncertain Function


The nine sites in this layer share a common quality of uncertainty. Each is associated either with a known Hospitaller or Templar grant, or with a placename incorporating ysbyty, spittal, or a cognate form, or with a documentary reference that places a hospital in a location without adequately describing its nature. They are probable sites. None can be dismissed; none can be confirmed to the same level of documentary precision as the Layer One foundations.

The Knights Hospitaller of St John were founded in Jerusalem in the eleventh century to care for sick pilgrims, and they brought that mission to Wales in the twelfth century. Their Welsh houses were not typically large commanderies, but smaller hospices positioned on pilgrimage and travel routes, often staffed by only a handful of brothers. The surviving placenames in Wales testify to a network more extensive than the charters have fully recorded. Spittal, ysbyty, and their variants appear in Pembrokeshire, Ceredigion, Conwy, and the north-east, each name preserving the memory of a function that the landscape has otherwise obliterated.

## 7. Ysbyty Ifan, Conwy

**Founded:** Circa 1190 to 1198

**Location:** Dol Gynwal (original name), upper Conwy valley

**Coordinates:** 53.0243 N, 3.7284 W

**Affiliation:** Knights Hospitaller; commandery of Halston, Shropshire

**Primary Source:** Cule 1977; National Trust

Ysbyty Ifan is the most celebrated of the Welsh ysbyty foundations, partly because its name has survived into the present as the name of a village, and partly because the National Trust now holds the estate within which the original hospice stood. The hospice was founded between 1190 and 1198 on the main pilgrim route from north Wales to Bardsey Island, the sacred 'Isle of Twenty Thousand Saints' off the tip of the Llyn Peninsula, whose three pilgrimages were equated with one to Rome.

The original placename was Dol Gynwal, the meadow of Cynwal, and the settlement that grew around the Hospitaller foundation was renamed Ysbyty Ifan in honour of St John (Ioan, Ifan), the order's patron. The hospice functioned as a waystation where pilgrims, travellers, and the indigent could receive shelter, food, and basic care. It was administered from the Hospitaller commandery at Halston in Shropshire, which held the Welsh properties of this district as a subordinate unit of the order's regional organisation.

Ysbyty Ifan sits in a dramatic upland landscape on the edge of the Migneint, one of the great blanket bogs of Wales, and its position on the route south from the Conwy valley made it a natural stopping point for anyone crossing the difficult terrain between the north Wales coast and the heart of Wales. The village church, dedicated to St John the Baptist, preserves the Hospitaller dedication in its patronage and stands on or very close to the site of the original foundation.

## 8. Ysbyty Ystwyth, Ceredigion

**Location:** Ystwyth valley, Ceredigion

**Coordinates:** 52.3269 N, 3.8635 W

**Function:** Possible travellers' hospice, possible successor to Strata Florida infirmary

**Primary Source:** Cule 1977

The Hospital of the Ystwyth takes its name from the river in whose valley it stood, and its history is bound up with that of Strata Florida Abbey a few miles to the south. Cule suggests that the Ysbyty Ystwyth may have taken on some of the functions of the Strata Florida infirmary after that building's destruction, providing a form of continuity of care in a district where the abbey had been the dominant institution for several centuries.

The site is not confirmed by any surviving charter or institutional record specific to it. Its status derives from the placename, from its geographical relationship to Strata Florida, and from the broader pattern of ysbyty foundations in this part of Ceredigion. Whether it was a distinct foundation, a satellite of the abbey's own provision, or simply a travellers' resting place that later acquired an institutional character

is not known. It is included as a probable site based on the place-name evidence, which in this landscape has consistently indicated the presence of some form of organized hospitality.

## 9. Ysbyty Ystrad Meurig, Ceredigion

**Location:** Approximately two miles from Strata Florida Abbey

**Coordinates:** 52.2926 N, 3.9022 W

**Function:** Possible successor to abbey infirmary

**Primary Source:** Cule 1977

Ysbyty Ystrad Meurig occupies the same orbit as Ysbyty Ystwyth in its relationship to Strata Florida and in the nature of the evidence for its existence. The two-mile distance from the abbey is close enough to suggest a functional connection without confirming one. Ystrad Meurig was itself a place of some importance in medieval Ceredigion, the site of a castle held by various Welsh lords in the twelfth and thirteenth centuries.

The hypothesis that Ysbyty Ystrad Meurig may have absorbed the abbey infirmary's charitable function after the Dissolution is plausible but unverified. The placename is the primary evidence. The site awaits the kind of targeted archival and landscape research that might either confirm a formal Hospitaller or monastic connection or reduce it to a rest-stop of local significance only.

## 10. Ysbyty Cynfyn, Ceredigion

**Location:** Near Ponterwyd, upper Rheidol valley, Ceredigion

**Coordinates:** 52.3954 N, 3.8343 W

**Affiliation:** Probable Hospitaller commandery site; church with St John dedication

**Primary Source:** Cule 1977; Sarah Woodbury research

Ysbyty Cynfyn is notable for combining an ysbyty placename with a church dedicated to St John the Baptist, the characteristic dedication of Hospitaller foundations throughout the British Isles. The church stands within a prehistoric stone circle, a remarkable instance of Christian appropriation of a prehistoric sacred site, and its Hospitaller association is suggested by the combination of name and dedication rather than by any surviving documentary evidence from the order's own records.

The church's position in the upper Rheidol valley places it on or near one of the natural routes through the mountains of mid Wales, consistent with the Hospitallers' practice of establishing hospices on major travel corridors. The physical setting is exposed and remote, exactly the kind of environment where travellers in the medieval period would have needed shelter and where a well-endowed charitable foundation could have provided essential support to those crossing the mountains between the coast and the English border.

## 11. Spittal, Pembrokeshire

**Location:** Church of St Leonard, Spittal, near Haverfordwest, Pembrokeshire

**Coordinates:** 51.8700 N, 4.9407 W

**Date:** Before 1148 (earliest known Hospitaller grant in Wales)

**Grantor:** Alexander Rudepac, lord of Rudbaxton

**Primary Source:** Cule 1977; marked on OS as 'Rath'

The Spittal entry in Pembrokeshire carries the distinction of being the earliest known Hospitaller grant in Wales. Alexander Rudepac, lord of Rudbaxton, made the grant before 1148, placing it in the first half of the twelfth century and making it contemporary with the earliest phases of Hospitaller expansion

beyond their original Jerusalem base. The grant predates most of the other documented foundations in this survey by a century or more.

The church at Spittal is dedicated to St Leonard, another saint strongly associated with charitable care and the release of captives, rather than the more typical Hospitaller dedication to St John. The Ordnance Survey marks a feature at or near the site as a 'Rath,' the Irish and Welsh term for a ringfort or enclosed settlement site. Whether this earthwork is related to the hospital foundation or represents an earlier phase of occupation on the same ground is not established.

Pembrokeshire's status as a heavily anglicised county from the Norman conquest onwards, sometimes called 'Little England Beyond Wales,' gave it a different institutional character from the rest of Wales. The density of Norman castle-founding, church-building, and charitable endowment in the county makes it the most likely source for further confirmed foundations that archival research might recover.

## 12. Llanrhystud, Ceredigion

**Location:** Llanrhystud, Ceredigion coast

**Coordinates:** 52.3054 N, 4.1446 W

**Association:** Hospitaller possession; ysbyty placename; confirmed in grant to Bishop of St Davids 1203 to 1214

**Primary Source:** Cule 1977

The Llanrhystud entry is the most formally confirmed of the Hospitaller sites in this layer because it appears in a recorded document: a grant confirming Hospitaller possessions in the territory of Lord Rhys of Deheubarth, included in the confirmation to Geoffrey of Henlaw, Bishop of St Davids, dated between 1203 and 1214. The connection to Lord Rhys places it within the network of Deheubarth patronage that shaped the cultural and religious landscape of south and west Wales in the later twelfth century.

Lord Rhys (Rhys ap Gruffudd, d.1197) was the dominant Welsh lord of his generation and a significant patron of both Cistercian monasticism and the Hospitaller order. His endorsement of a Hospitaller possession at Llanrhystud fits the pattern of his broader religious patronage. The site lies on the Ceredigion coast, on the main coastal route between Aberystwyth and Aberaeron, a position consistent with a hospice serving travellers on the north-south axis of west Wales.

## 13. Rhuddlan: Templar and Hospitaller Hospital Site

**Location:** Approximately a quarter mile north-east of Rhuddlan Priory, Denbighshire

**Coordinates:** 53.2918 N, 3.4651 W

**Foundation:** Templar foundation; reference under Edward I, 1279

**Notable find:** Lead pipes connecting hospital to priory found in fields.

**Primary Source:** Cule 1977

The Rhuddlan entry is the only site in this survey associated primarily with the Knights Templar rather than the Hospitaller order. The Templars and Hospitallers were sister orders but distinct institutions, and the presence of a Templar foundation in north-east Wales reflects the order's wider pattern of landholding in Britain rather than the specifically pilgrimage-route focus of the Hospitallers' Welsh network.

The hospital is said to have stood about a quarter of a mile north-east of Rhuddlan Priory, near a farmhouse once known as Spittal or Ysbythy. The reference under Edward I in 1279 places it within the period of intensive castle-building and administrative reorganisation that followed the king's first Welsh campaign, and it is possible that the hospital served some function in connection with the royal

works at Rhuddlan, where a major new castle and planned town were under construction in the 1270s and 1280s.

The discovery of lead pipes connecting the hospital site to the priory is among the most archaeologically interesting details in the entire Cule survey. Piped water supplies were a significant infrastructure investment in the medieval period, associated with monasteries, hospitals, and royal establishments with the resources and technical knowledge to install them. The pipes suggest that the Rhuddlan foundation was a serious institutional establishment with the physical infrastructure to match.

## 14. Hospitium, near Llandridian (near St David's)

**Location:** Parc Croes, approximately two miles east of St Davids Cathedral

**Coordinates:** 51.8820 N, 5.2683 W (cathedral used as reference)

**Dating:** Early period of the church of St Davids

**Primary Source:** Cule 1977; Fenton's Pembrokeshire

The hospitium recorded near St Davids is described by Richard Fenton, the early nineteenth-century Pembrokeshire antiquary, as having been founded 'at a very early period' of the church of St Davids, with a prebend annexed to it. The prebend connection suggests that the institution was integrated into the cathedral's financial and liturgical structure rather than operating as an independent charitable foundation.

The site called Parc Croes in the Tithe Schedule lies approximately two miles east of St Davids Cathedral, placing it outside the city boundary but within the orbit of cathedral landholding. The Cross (Croes) in the field name may indicate a preaching or wayside cross associated with the hospital's charitable functions, a common feature of medieval hospice sites on pilgrimage routes. St Davids was one of the major pilgrimage destinations of medieval Wales and Britain, and the concentration of charitable institutions in its vicinity reflects the continuous flow of pilgrims that the city attracted from across the medieval world.

## 15. Whitewell Chapel Hospital, near St David's

**Founded:** 1280 to 1293

**Founder:** Bishop Beck of St Davids

**Location:** Approximately a quarter mile south of St Davids Cathedral

**Coordinates:** 51.8820 N, 5.2683 W (cathedral used as reference)

**Valuation:** Five pounds, 1326

**Primary Source:** Cule 1977

The Whitewell Chapel Hospital, referred to in records as the Priory of Whytwel, was founded by Bishop Beck of St Davids during his episcopate from 1280 to 1293. The same Bishop Beck who founded the Llawhaden hospital thus founded two charitable institutions within his diocese, an indication of the consistency of his charitable programme and of the resources at his disposal as one of the wealthiest sees in Wales.

The institution was described as a priory for sick and infirm clergy, echoing the function of the Swansea Hospital of the Blessed David in its focus on the clerical population rather than the lay poor or the leprous. The 1326 valuation of five pounds places it among the smaller foundations in the survey, consistent with its description as a chapel hospital rather than a full institutional complex. Its proximity to St Davids Cathedral meant that it functioned within the cultural and devotional world of the cathedral close, providing a form of care that complemented the cathedral's own liturgical provision for sick pilgrims.

## Layer Two: Summary

The nine sites in Layer Two constitute the most geographically extensive part of the survey, spanning from Conwy in the north to Pembrokeshire in the south-west. They represent two distinct types of institution: the Hospitaller or Templar foundation, typically positioned on a pilgrimage or travel route and affiliated with a wider military-religious order; and the episcopal hospitium, typically positioned within the landscape of a major cathedral and serving sick clergy or pilgrims.

The ysbyty placenames of Ceredigion, clustered in the orbit of Strata Florida, form a coherent group that suggests a regional tradition of organised hospitality in the upland areas of mid Wales. Whether these sites represent formal Hospitaller grants, informal monastic provision, or independently founded local hospices cannot be determined from the surviving evidence. The placenames are evidence of function, not of institutional form.

The Hospitaller sites at Spittal and Rhuddlan, and the confirmed grant at Llanrhystud, provide the firmest archival footing in this layer. The Ysbyty Ifan foundation is the best documented and the most visited, with its survival in the landscape as a named village providing a continuity that the other sites cannot match. Future research in the records of the Hospitallers' commandery at Halston, in the Patent Rolls, and in the episcopal registers of the Dioceses of St David’s and Bangor would likely add precision to the provisional accounts given here.

LAYER THREE

# Post-Medieval Almshouse Hospitals of the Seventeenth Century


The four institutions in this layer represent a different tradition from the medieval leprosaria and hospices that precede them. They are not charitable responses to epidemic disease or pilgrimage need. They are products of the Protestant gentry culture of the late sixteenth and early seventeenth centuries, in which the endowment of almshouses for a defined number of named beneficiaries was both a practical act of charity and a statement of social obligation and personal piety. The medieval hospital had been a religious institution with charitable functions; the almshouse of this period was a civic institution with religious overtones.

All four foundations in north Wales are documented through the Bishop of Bangor's Return of 1665, a survey of charitable institutions within the diocese that provides a snapshot of what had survived from

earlier endowments and what had been established in the preceding century. The Return is one of the most important sources for the history of Welsh social provision in the early modern period, and Cule's use of it to map these foundations within his wider survey of Welsh medical history gives them a place in a narrative that runs continuously from the twelfth century to the seventeenth.

## 16. Bishop Rowland's Hospital, Bangor

**Founder:** Bishop Henry Rowland, died 1616

**Location:** Bangor, Gwynedd

**Coordinates:** 53.2265 N, 4.1271 W

**Provision:** Six poor men

**Primary Source:** Cule 1977; Bishop of Bangor's Return 1665

Bishop Henry Rowland of Bangor died in 1616 leaving as part of his estate the endowment for a small hospital for six poor men. Rowland was a Welsh-born bishop who served the Diocese of Bangor for over two decades, and his foundation is consistent with the pattern of episcopally driven charitable provision that runs through the entire history of institutional care in Wales.

The provision for six poor men is modest even by the standards of the period. These small foundations were typically structured around a set of statutes governing admission, behaviour, and the recipients' obligation to pray for the founder's soul, a theological transaction that gave almshouse charity its distinctively late medieval and early modern character: the giver received spiritual benefit, the recipient received material support, and both parties understood the exchange in the same moral framework.

## 17. David Hughes's Hospital, Beaumaris

**Location:** Beaumaris, Anglesey

**Coordinates:** 53.2631 N, 4.0922 W

**Provision:** Eight poor men; jointly founded with free school

**Primary Source:** Cule 1977; Bishop of Bangor's Return 1665

The Beaumaris foundation of David Hughes is notable for having been established jointly with a free school, an association that reflects the dual preoccupation of Protestant philanthropy with the care of the old poor and the education of the young. David Hughes was a member of the Anglesey gentry, and his combined foundation at Beaumaris brought together the two principal strands of sixteenth and seventeenth-century Welsh civic charity: the grammar school and the almshouse.

Eight poor men were maintained by the hospital endowment, a provision slightly larger than the Bishop's Bangor foundation but still a domestic-scale institution. Beaumaris was the administrative and legal centre of Anglesey in the Tudor and Stuart period, and the placement of a charitable foundation there was consistent with its role as the island's principal town.

## 18. Lewis Rogers's Hospital, Penmynydd

**Location:** Penmynydd, Anglesey

**Coordinates:** 53.2454 N, 4.2337 W

**Provision:** Eight poor men and two poor women

**Documentation:** Surviving statutes: Lambeth Palace MS 639

**Primary Source:** Cule 1977; Bishop of Bangor's Return 1665

The Penmynydd almshouse of Lewis Rogers is the most fully documented of the four post-medieval foundations in this layer, because its statutes survive in manuscript at Lambeth Palace, catalogued as

MS 639. The survival of statutes is unusual and significant: they give us the rules by which the institution was governed, the conditions of admission for its inmates, and the obligations that both founder and recipients undertook as part of the charitable compact.

The provision for eight poor men and two poor women is the only gender-mixed foundation in this layer, and it reflects an awareness that poverty was not an exclusively male condition. Penmynydd has a particular resonance in Welsh history as the ancestral home of the Tudor family, whose royal dynasty began with Henry VII. The placement of a charitable foundation in this village by a member of the local gentry may carry some local dynastic pride alongside the straightforwardly charitable motive.

## 19. Christ's Hospital (Dr Goodman's), Ruthin

**Founder:** Dr Gabriel Goodman, Dean of Westminster

**Location:** Ruthin, Denbighshire

**Coordinates:** 53.1149 N, 3.3103 W

**Foundation:** Letters patent, Elizabeth I's 32nd year (circa 1590)

**Provision:** A priest and twelve poor persons

**Primary Source:** Cule 1977; Bishop of Bangor's Return 1665

Christ's Hospital in Ruthin is the most formally constituted of the four post-medieval foundations, established under letters patent from Elizabeth I in her thirty-second year, which places the foundation around 1590. Dr Gabriel Goodman, the founder, was Dean of Westminster, one of the most prestigious ecclesiastical positions in England, and a Ruthin man who retained strong connections to his native town throughout a distinguished career at the heart of the Elizabethan church.

The provision for a priest and twelve poor persons gave the Ruthin foundation both a liturgical and a charitable dimension. The twelve poor persons, an echo of the twelve apostles, was a common number for almshouse foundations throughout the medieval and early modern period, and the priest's role was both to minister to the inmates' spiritual needs and to maintain the liturgical round of prayer that gave the institution its corporate religious character.

Goodman was a significant figure in Welsh cultural life: he was involved in the production of the Welsh Bible and maintained connections with Welsh scholars throughout his career. His foundation at Ruthin was a homecoming in charitable form, the investment of a successful career in the town that had produced him, and it stands as one of the most substantial and well-documented institutional acts of charity in sixteenth-century north Wales.

## Layer Three: Summary

The four almshouse foundations in Layer Three are concentrated in north Wales, specifically in Anglesey and the north-east, which is partly a reflection of the survival of the 1665 Bishop of Bangor's Return as a source and partly a genuine feature of the distribution of gentry and clerical philanthropy in this period. South Wales had its own almshouse tradition, but it is less well served by equivalent comprehensive surveys for the same period.

These institutions represent continuity as much as change. The obligation to care for the poor, the sick, and the aged did not disappear with the Reformation; it found new institutional forms and new legal frameworks. The letters patent foundation, the charitable trust governed by surviving statutes, and the episcopal endowment all reflect the same moral imperative that had built the leprosaria and the Hospitaller hospices five centuries earlier. The physical form changed; the human need did not.

# Lost and Unidentified Sites: Open Questions for Future Research


Two sites in this layer resist all current attempts at identification. They are included in the map and in this document not because they can be located or described in physical detail, but because the documentary references that record them are genuine and their existence is not in doubt. They are lost foundations, not fictional ones. The honest response to their presence in the sources is to record them, to note what is known, and to leave them open for the archival and landscape research that might one day supply the answers that are currently missing.

## 20. Hospital of St Michael, 'Llandeweryn'

**Known from:** Warden appointed 1408 (grant to John Feriby)

**Approximate pin:** 52.3 N, 3.5 W (central Wales; not a confirmed location)

**Status:** Parish unidentified; possible corrupted or obsolete placename

**Primary Source:** Cule 1977

In 1408, a warden was appointed to the Hospital of St Michael at a place recorded as Llandeweryn. The grant to John Feriby is the sole documentary reference to this institution. John Cule, whose 1977 study is the principal source for this survey, was unable to identify the parish from the name as recorded, noting that it may represent a corrupted or obsolete form that does not correspond to any current or recent placename in Wales.

The dedication to St Michael is unusual for a hospital; the archangel was more commonly associated with hilltop chapels and churches dedicated at prominent landscape features than with charitable foundations for the sick and poor. The name Llandeweryn contains the Welsh element llan, indicating a church or enclosed settlement, and a second element that does not readily correspond to any known saint's name or topographical term in its recorded form. The corruption of the name in transmission is a common hazard with medieval Welsh placenames recorded by English clerks or copied through multiple manuscript generations.

This site is a clear candidate for targeted archival research. The Patent Rolls, episcopal registers, and the records of the relevant diocesan court for the period around 1408 might produce further references to the same institution under different spellings, and comparison with the full corpus of Welsh church-name records might allow the parish to be tentatively identified.

## 21. Hospital of the Holy Spirit, Snowdon

**Known from:** Henry III grant: 'Hospitale Sancti Spiritus de Snauda'

**Approximate pin:** 53.0685 N, 4.0760 W (Snowdon massif; not a confirmed location)

**Status:** Exact site within Snowdonia not identified

**Primary Source:** Cule 1977

The Hospital of the Holy Spirit of Snowdon, recorded in Latin as Hospitale Sancti Spiritus de Snauda, appears in a Henry III grant that gave the prior and brothers of the institution royal protection. The dedication to the Holy Spirit was uncommon in hospital foundations, which more typically invoked the Virgin, Mary Magdalene, St John, or a local patron saint. The royal grant of protection suggests an institution of some standing since such grants were not given routinely to minor local establishments.

Snauda is a Latin form of Snowdon, and the institution was associated with the Snowdon massif, but its precise location within that large and geographically complex landscape cannot be determined from the surviving reference. Snowdonia in the medieval period was a region of mountain passes, upland routes connecting the north Wales coast with the interior, and a landscape through which armies, pilgrims, and traders moved along predictable corridors. A hospital or hospice positioned to serve travellers on one of these routes would have been both practically useful and potentially important enough to attract royal notice.

The Holy Spirit dedication, the royal protection, and the Snowdon location together suggest an institution that may have had some connection with the Augustinian or Hospitaller tradition of caring for mountain travellers, like the great Alpine hospices of continental Europe founded on the same principle. Whether this connection is genuine or merely circumstantial remains to be established. The site is perhaps the most intriguing open question in the entire survey.

## Layer Four: Summary

Two lost sites. One with an unresolved placename; one with a probable but unlocatable mountainous setting. Both are attested in genuine documentary sources. Neither can be dismissed, and neither can currently be resolved. They stand as evidence of the limits of the present survey and as an invitation to future researchers.

The honest acknowledgement of what is not known is as important to good heritage research as the confident assertion of what is. These two entries keep the map and this document honest. There are almost certainly more lost foundations that will emerge from future archival work, and the framework set out here provides a structure into which new discoveries can be placed as they are made.

# Conclusion: A Network of Care

Twenty-one sites, spread across five centuries, from a pre-1148 Hospitaller grant in Pembrokeshire to a 1665 survey of almshouses in Anglesey. They range from the heavily documented to the barely traceable. They were founded by Norman lords, Welsh bishops, crusading military orders, Cistercian abbots, Tudor deans, and Elizabethan gentry. Their inmates were lepers, blind priests, poor pilgrims, decayed clergy, and the merely destitute. What they share is the conviction that organised care for those who could not care for themselves was a Christian obligation that no historical period, no political upheaval, and no theological revolution could entirely extinguish.

The geography of the survey is uneven, and this unevenness is significant. The south and south-west of Wales, above all Pembrokeshire and the anglicised lowlands of Glamorgan and Gower, dominate the confirmed layer. This reflects both the density of Anglo-Norman settlement in these areas and the survival of records in the archives of the Dioceses of St David's and Llandaff and the records of the Pembrokeshire local history tradition. The north, outside of the Conwy valley and Anglesey, is almost entirely absent from the confirmed layer. This is almost certainly a distortion of the historical record rather than a reflection of the historical reality. Gwynedd and Powys in the high medieval period were not without charitable foundations, and future research in Welsh-language sources, episcopal registers, and the records of the Welsh princes may recover foundations that are currently invisible.

The Welsh ysbyty tradition, embedded in half a dozen placenames across mid and north Wales, suggests a network of organised hospitality that the documentary record has only partially preserved. These placenames are heritage evidence of the same order as earthworks and standing walls. They mark where something stood, even when every stone has been removed and every document lost. The clusters around Strata Florida and along the north Wales pilgrimage routes to Bardsey are particularly suggestive of a systematic provision that the surviving sources allow us only to glimpse.

What this survey makes clear is that medieval Wales had a working infrastructure of care, distributed across its landscape according to the logic of pilgrimage routes, episcopal manors, town approaches, and monastic estates. It was not a comprehensive welfare system in any modern sense. It was patchy, uneven, subject to the financial instability of endowments and the variable commitment of wardens and chaplains. But it existed, it functioned, and it mattered to the people who passed through its doors.

The map that accompanies this document is a beginning, not an end. It records what is currently known, distinguishes the confirmed from the probable and the probable from the lost, and provides GPS coordinates and source references that allow any site to be followed up in the archives. New discoveries will be added as they emerge. The map will be updated. This document will grow.

For now, twenty-one sites stand as witness to the long Welsh tradition of ysbyty: hospitality, care, and the obligation to receive the stranger and the sick. The buildings are almost all gone. The obligation remains.


*Primary source: John Cule, A History of Medicine in Wales, NLW Journal, 1977. Additional sources: Royal Commission on the Ancient and Historical Monuments of Wales, Inventories of Pembrokeshire (1925) and Glamorgan; Archaeologia Cambrensis (1848); Richard Fenton, A Historical Tour through Pembrokeshire (1811); John Leland, Itinerary in Wales (c.1540); Lambeth Palace MS 639; Patent Rolls (various dates); National Trust (Ysbyty Ifan); Sarah Woodbury heritage research (Ysbyty Cynfyn). Map coordinates derived from GPS-verified KML file built by Graham T Emmanuel, Kidwelly.*

https://tinyurl.com/Welsh-Leper-Hospital-1150-1665