RESILIENT PLACES? HEALTHCARE GARDENS AND THE MAGGIE'S CENTRES

Ву

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APPENDICES

A Thesis submitted to the University of Arts (UAL) London in fulfilment of the requirements for the degree of Doctor of Philosophy (PhD)

January 2014 Falmouth University

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APPENDIX 1

Maggie's case study gardens fieldwork

This appendix presents the fieldwork for the four Maggie's Centre gardens case studies (Edinburgh, Dundee, London and Cheltenham) that were the central focus of primary research for this thesis. This fieldwork includes notes, documentation, site plans, photographic records and a summary of the space syntax observational work.

1A: Maggie's Edinburgh

Three visits were made to Maggie's Edinburgh in September 2010, May 2011 and May 2012. On each occasion the weather could be described as grey with rain as well as sunny intervals, although it was quite warm on the final visit. On each visit the centre was busy with a range of activities happening both morning and afternoon as well as drop in visitors. Full use of all indoor centre spaces was observed. Use of both entrances by visitors was observed although the majority came through the main entrance.

Snapshots

In contrast the snapshots revealed very little use of the garden spaces. Apart from observing the various volunteer gardeners working no one entered the flower garden or sat on the secluded bench. Visitors and staff were observed using the main benches and on the final visit four members of staff sat here to have lunch. People were observed outside taking phone calls or simply appearing to pause in the lawn area before leaving or entering the centre. It was also noted that some people walking down the road from the hospital would look into the garden, their eyes appearing to look across the garden as they came into the centre.

Sensory impressions

First impressions of the site were from the car park along the side of the building. A recent problem with flooding meant that the first sight was sandbags by the side door. The soft bamboo hedging and the flower planting are immediately striking and a contrast with both the built and green spaces around. Rickey's sculpture is also fascinating because of its irregular movements. No particular smells of any sort were noted during visits. No wildlife was noted, although interviewees did talk about the sound of birdsong. Various sound recordings were taken and standing anywhere in the garden one is acutely aware of sound, noticing the sound of the water feature but also

the hum of the air conditioning units of the hospital buildings, the sound of the beeping car park barrier and the low level hum of cars moving slowly in and out of the hospital site. It is difficult to ignore the presence of the hospital buildings, road and car parks. There is some shelter in the front garden, especially with the seat in the flower garden, but there little shade or privacy and these were two issues that visitors referred in interviews.

Amanda's Garden

Close by to the Maggie's Edinburgh is another garden called, Amanda's Garden, created and maintained by the family of the woman whom it is named after. The Centre Head described this garden as an additional resource for his visitors and a number of participants chose to photograph this garden rather than the Maggie's site during the photo interviews. This garden is larger, more secluded, being surrounded by mature trees, with more evidence of wildlife, especially birds.





Maggie's Edinburgh garden, photographs showing the main and side entrances (Butterfield, 2010)





General shots of the garden at Maggie's Edinburgh (Butterfield, September 2010)



Maggie's Edinburgh garden: general shots, showing the George Rickey sculpture and also the closeness of the garden to the hospital buildings. Evidence of flooding with sandbags in situ. (Butterfield, September 2010)











Maggie's Edinburgh Garden: wide angle photographs (Butterfield, May 2012)







General views of the Western General Hospital site and buildings which contrast with the Maggie's Centre. (Butterfield, May 2011)







Maggie's Edinburgh garden, despite the small size of the garden and the proximity of hospital buildings there is a strong sense of greenery (Butterfield, May 2011)









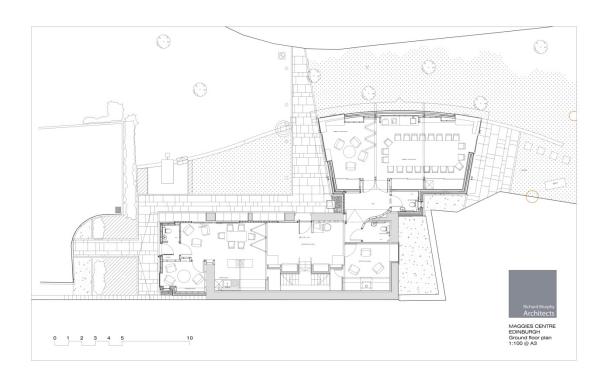
Maggie's Edinburgh, General views from within the building (Butterfield, 2011)







'Amanda's Garden', close to Maggie's Edinburgh. This garden is used by visitors to Maggie's and was photographed repeatedly during the photo-elicitation interviews (Butterfield, 2011)



Maggie's Edinburgh plan. CAD drawing, 'architectural plan' of ground floor of Maggie's Edinburgh (no original plans of the garden could be found by the author). Reproduced by kind permission of the Maggie's Centres (© Richard Murphy Architects)

1B: Maggie's Dundee

Four visits were made to Maggie's Dundee: one in September 2010, two in May 2011 and one May 2012. The weather was mixed but did include some sunshine – it was certainly warm enough to sit outside on two of the days. On each visit the centre was busy with a range of activities happening both morning and afternoon as well as drop in visitors.

Snapshots

The "snapshots" revealed use of the back terrace (on two days the door was open from the centre) where people would sit out with a cup of tea or to read. Visitors and staff from the main hospital were observed sitting using the grass banks of the labyrinth for eating, smoking, reading and walking. People were also seen sitting on the bench along the main path. No one was observed actually walking the labyrinth on any of the visits, although the interviews indicated that both staff and visitors do use it.

Sensory impressions

The initial impressions of the site were that the drama of Lennox-Boyd's design does seem to complement the quality of light and space and in contrast to all the other Maggie's sites, which are either urban or suburban. This centre does not feel cramped. However, there is a feeling of starkness, the building seems to sit very abruptly within the landscape and the landscaping and planting do little to soften this or break down what is a characteristically windy site. There is also feeling of disjointedness between the centre, the outdoor spaces and the hospital, which you do not experience at the other three case study sites. This is very much a landscaped site, and there is little feel of a garden as such. The trees do create an important backdrop for the centre and both visitors and staff relate to this woodland/estuary context. The only area, near to the car park, that has been purposefully planted appears disconnected from the centre and there is little evidence that this area is used. The most private area is that directly below the kitchen window where Howells requested a bench and, together with the small terrace, this appears to be the most used outdoor area by centre visitors.

Birdsong was noted in the trees below the centre but little evidence of wildlife beyond some bees around the azaleas was spotted. You cannot hear the sounds of the main hospital (apart from when a helicopter arrives) and this makes it a very peaceful setting.

Changes in the garden

Between the first visit in September 2010 and the visits last year various changes in the garden were noted. There has also been an initiative led by the Scottish Forestry Commission to develop green walkways around the Ninewells NHS Hospital site, encouraging people to explore the landscape features (including the labyrinth) and encouraging green exercise (Shackell & Walter, 2012: 17-19). Lennox-Boyd's design included ivy planted around the edge of the building but it struggled to grow and was eventually removed. This was replaced in 2012 with large white pebbles. In 2010 the garden appeared neglected and some of the planting, such as the grasses at the back and also the lawn around the labyrinth, needed attention. In subsequent visits the care for the garden had dramatically improved. This appears to be the results of the efforts of Polish gardener and craftsman, Andrzej Bogdan, who now tends the site regularly. Bogdan originally laid the stones of the labyrinth and his interest and concern for its maintenance has now evolved into a regular relationship with Maggie's Dundee. He said in May 2011 that he felt it was 'important that every day the garden looks good'. and that he was happy to help out because 'it is my gift to cancer sufferers'. He described his concern and also his plans to develop and improve the garden:

I visited the garden a few months ago and it was not being looked after. The labyrinth was yellow and had lots of weeds. I came and watered the garden every night and every morning through the dry weather. The helicopter creates a problem scattering weed seeds... The part nearest the car part is not well done. I would love to put more effort into it. Meeting Arabella, she has motivated me to create a garden and I am really proud that she has trusted me to do this. (MD1 male volunteer, 2011)

Filmaker Amy Hardie, who has recently made a documentary, *Tuesdays*, following the lives of a group of women with cancer who meet at Maggie's Dundee, said that she wanted to create a herb garden for the centre. Hardie is interested in medicinal plants and has proposed the idea of an 'anti-stress garden' with 'more places to sit' between the back of the centre and the line of trees. She said there was a group of regular visitors keen to work with her on this, although as yet it has not gone beyond the ideas stage (Hardie, 2012). NHS ground staff are responsible for mowing the more extensive grass areas, although Bogdan now takes care of the grass around the labyrinth.





Maggie's Dundee May 2011: The centre and labyrinth, the hospital site and the back view surrounded by grasses (Butterfield, May 2011)





Photographs of the building, car park and garden areas around Maggie's Dundee (Butterfield, September 2010)



Photographs of the labyrinth at Maggie's Dundee (Butterfield, May 2011)



Left and middle: Photographs of the terrace and patio leading off from the kitchen area at Maggie's Dundee, right: the garden area near the car park designed by Arabella Lennox-Boyd (Butterfield, 2011)



The path with seating that leads from the main hospital to Maggie's Dundee (Butterfield, May 2011)







The interior at Maggie's Dundee, showing the views and sense of light (Butterfield, May 2012)





Maggie's Dundee garden: wide angle photographs (Butterfield, May 2012)









The sculpture by Anthony Gormley at Maggie's Dundee (Butterfield, September 2010)





Lennox-Boyd had specified ivy around the building but due to the roof overhang this did not grown (*left*). *Right*: eventually pebbles were place in this area (Butterfield 2011 & 2012)



Photographs showing problems with maintenance and upkeep at Maggie's Dundee (Butterfield, May 2011)

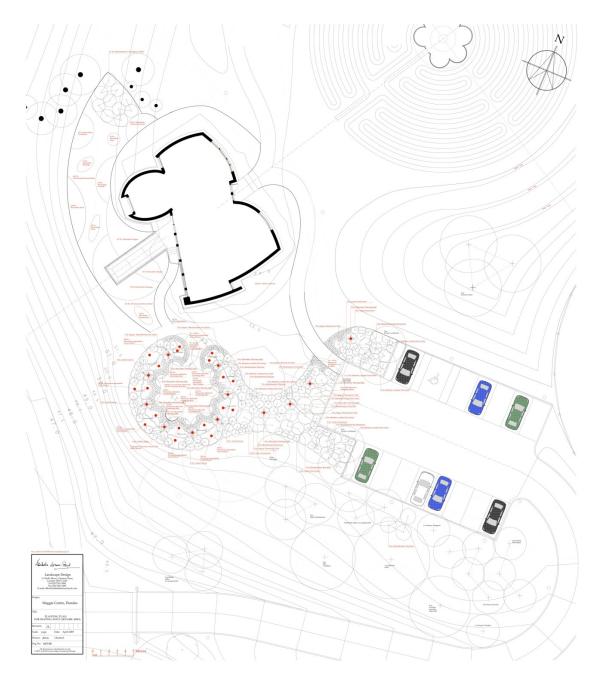




Improvements to the overall quality of the lawns was noticed once a gardener was employed on a regular basis (Butterfield, May 2012)



Publicity photographs for Maggie's Dundee (© Maggie's Centres c.2010)



The garden design at Maggie's Dundee described as "Dundee Landscaping, Planting and Car Park Plans" (CAD Drawing) by Arabella Lennow Boyd. Reproduced by kind permission of the Maggie's Centre (© Arabella Lennox Boyd, 2007)



The garden design at Maggie's Dundee described as "Dundee landscaping 3D concept (aerial)" by Arabella Lennow Boyd. Reproduced by kind permission of the Maggie's Centre (© Arabella Lennox Boyd, c. 2009)



The garden design at Maggie's Dundee described as "Dundee landscaping 3D concept (aerial)" by Arabella Lennow Boyd. Reproduced by kind permission of the Maggie's Centre (© Arabella Lennox Boyd, c. 2009)

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2012)	lot of details	s of the green	waik develop	eu at the Mille	wells Hospital s	ile (Shackeli &	vvailei,



1C: Maggie's London

Maggie's London was visited on five occasions: September 2010, April and October 2011, and May and June 2012. During these visits it was possible to observe the centre in a range of different seasonal and weather conditions, including warm summer weather and at times when it was both very busy and quite quiet. High usage of the main indoor spaces was observed including the two larger sitting rooms as well as the smaller reading area, therapy room and smaller room at the back. High usage of the large indoor courtyard was observed and often the sliding glass doors between the kitchen area and this space were open. Upstairs the office space was in constant use for regular staff as well as meetings. Staff were observed using the outside first floor terraces. No use by staff or visitors of the two smaller internal courtyard spaces was seen.

Snapshots

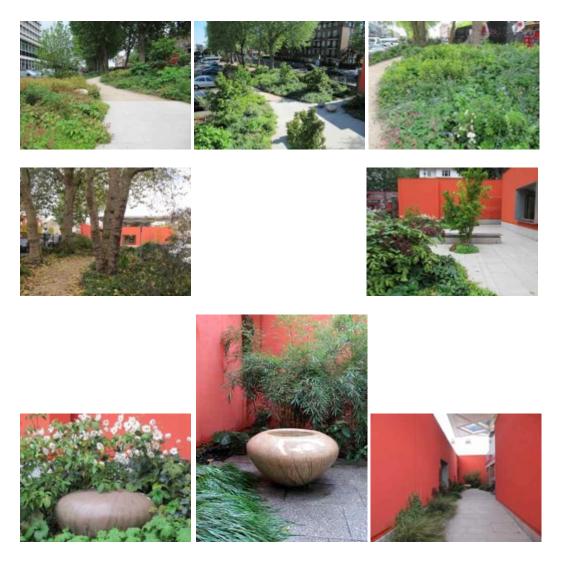
The snapshots revealed extensive use of the main internal courtyard space but less use of the main external garden space. This space appears to be used more by staff and visitors to the main hospital who sit on the bench to eat a sandwich, make a phone call, have a cigarette or simply chat. The snapshots revealed how people who are entering or leaving Maggie's tend to take time walking along the woodland path, sometimes making a phone call, smoking or appearing to simply enjoy the fresh air. It did also show that some visitors enter the building from St Dunstan Road and hence do not experience the woodland path.

Sensory impressions

First impressions included the high walled corridor leading to the entrance. This was juxtaposed to the noise of Fulham Palace Road, which is a constant presence wherever you are in the outside spaces. First impression within the building included the sense of both natural light and the presence of greenery. Repeated visits brought new surprises in terms of the stages or growth of certain plants but also in terms of different fragrances. The sounds of the nearby hospital (especially sirens) and adjacent busy road dominate the main outside space; within the inner courtyards and terraces these sounds seem less intrusive. No birdsong or wildlife (beyond insects and pigeons) was noted during site visits.

Changes in the garden

The woodland walk was quite bare during the initial visits but this changed as the garden has matured. By autumn 2012 the woodland path had begun to hide both the centre and the hospital. The planting on the terraces had also grown up considerably. In the first two autumns extensive bulb planting was undertaken to ensure spring flowers along the main woodland path. In autumn 2011 six new trees were planted to screen the garden from the car park. These trees, chosen by Pearson, were donated by a family member of someone who had died the previous year. Another addition was the carved words by George Harrison to the window seat bench in the main internal courtyard. This related to a donation towards the garden by Harrison's family.



Field book photographs (Butterfield, 2010- 2012) of Maggie's London showing the path and the entrance. Pearson said he was delighted to find the established London Plane trees already there and this inspired him to develop the idea of a meandering woodland approach. Hannah Bennett's matched the glaze colours of her sculptures to the bark of the plane trees.



Field book photographs (Butterfield, 2010-2012) of Maggie's London the main internal courtyard



The Albizia julibrissin, the Chinese Tree of Happiness in the main internal courtyard.
Apparently the bark and flowers are used as a calming sedative in Chinese medicine (Butterfield, 2011)



Field book photographs (Butterfield, 2010-2012) showing the birch trees that wrap around the building and the 'screened' windows. The exterior and interior peripheral walls are up lit so that the birches are thrown into relief from outside.



Field book photographs (Butterfield, 2010-2012) of the first floor terraces at Maggie's London



Field book photographs (Butterfield, 2010-2012) of the terraces and details of vines, strawberries and mint at Maggie's London.





Field book photographs (Butterfield, 2010-2012) of the winter courtyard with the *Tetrapanax*.



 $\label{eq:field-book-book} Field book photographs (Butterfield, 2010-2012) \ , details showing the strong contrasts between the planting and the architecture.$



Field book photographs (Butterfield, 2010-2012) showing use of the main garden space, wildlife, lack of maintenance and vandalism. In 2012 one of the Magnolias was damaged. Considering the site is so exposed there is, in fact, little damage.



Field book photographs (Butterfield, 2010-2012) of the Maggie's London site – squeezed in between Fulham Palace Road and Charing Cross Hospital.



Field book photographs (Butterfield, 2010-2012) seasonal change at Maggie's London



Spring 2010 and winter at Maggie's London (Butterfield, 2010)











Maggie's London garden wide angle views (Butterfield, May 2012)

















Field book photographs (Butterfield, 2010-2012) of the interior of Maggie's London showing the open plan design and emphasis on natural light and views of greenery







Field book photographs (Butterfield, 2010-2012) of interior details at Maggie's London.





Photographs of the gardener and volunteers working at Maggie's London (Butterfield, 2012)



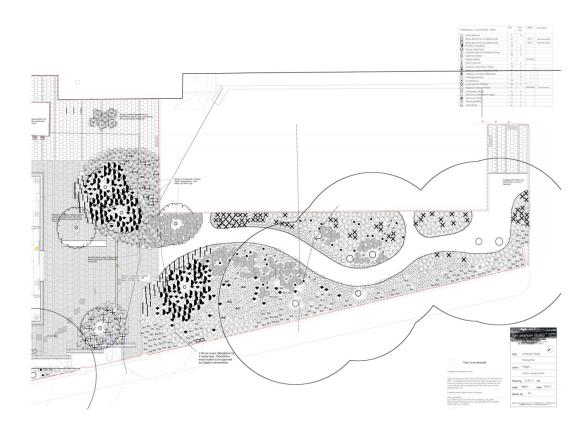
Press photograph of horticultural activities at Maggie's London (© Maggie's Centres, 2010)



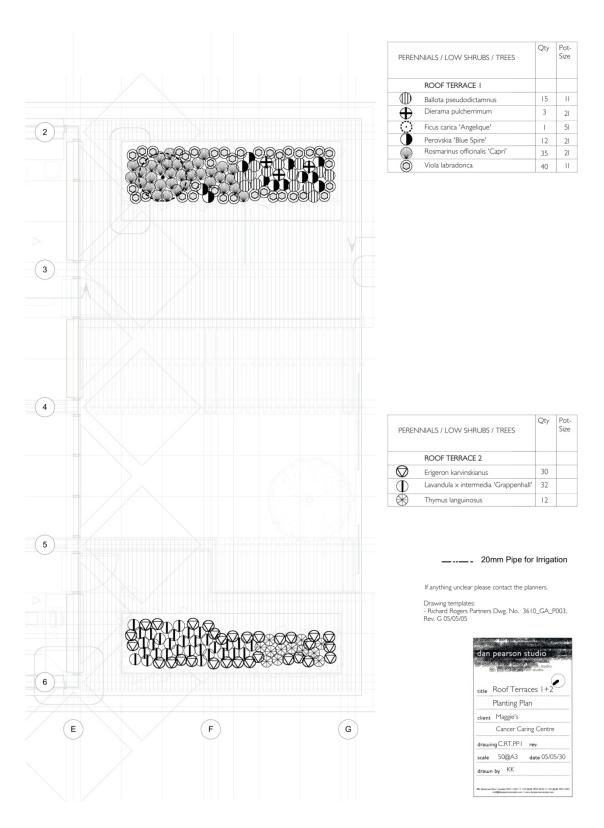
The garden design at Maggie's London showing the woodland path, entrance and birch trees wrapping around the building. 'The Design concept' by Dan Pearson, reproduced by kind permission of the Maggie's Centres (© Dan Pearson Studio, c.2004).



The garden design at Maggie's London showing the internal ground floor courtyards, entrance and birch trees wrapping around the building. 'The Design concept' by Dan Pearson, reproduced by kind permission of the Maggie's Centres (© Dan Pearson Studio, 2004)



The garden design at Maggie's London showing the woodland path and planting plans. 'The Design concept' by Dan Pearson, reproduced by kind permission of the Maggie's Centres (© Dan Pearson Studio, 2005)



The garden design at Maggie's London showing the planting plans for the roof terraces. 'The Design concept' by Dan Pearson, reproduced by kind permission of the Maggie's Centres (© Dan Pearson Studio, c.2005)



Example of press coverage for the Maggie's London garden (*The Independent*, 2011)

1D: Maggie's Cheltenham

An initial visit to Cheltenham was made before it opened in 2010 when the landscaping and interior were still in development. A further five visits were then made: April, May and October 2011, and May and June 2012. It was possible to observe the garden evolve through the seasons and mature over a two-year period. During this time the emerging role of the garden was discussed with both Christine Facer and the Centre Head, Jane Fide (Facer, 2010 & 2012; Fide, 2011 & 2012). With this case study it was possible to observe the centre in a range of different seasonal and weather conditions, including warm summer weather, and at times when it was both very busy and quite quiet.

Snapshots

The full use of all indoor centre spaces, including the pods, was observed. People seemed very relaxed and able to move around the spaces and use them as they wished, such as to make themselves a cup of tea and move to quiet spaces too. It was observed that doors were being opened to the garden from the front pod and from the main room onto the back terrace. On the summer visits it was noticeably warm in the centre itself – particularly in the main sitting room that suffers from a lack of available windows to open.

The snapshots revealed very little use of the garden spaces even on warm sheltered days. They did reveal use of the back terrace and some use of the shaded seats in the enclosed garden. Little use or activity in the main garden was observed apart from children or passersby stopping to look at the water feature. It was noted that visitors to the centre appear to enjoy following the path, looking at the water feature on the right and the 'forest of flowers' on the left before they arrived. Family members were observed wandering through the garden making phone calls or simply getting a bit of fresh air. On one visit a new couple to the centre were unable to find their way to front door and they actually turned away but a member of staff went out and brought them in. Attendance at a garden party to raise funds for the centre on a summer's day in May 2012 highlighted the impractical nature of the main garden. At this well-attended event, it was noted that there were few places to sit and few areas of shade. It was also noted that it was quite awkward to manoeuvre around the enclosed garden even with just a couple of people.

Sensory impressions

Initial impressions were that the path was able to lead visitors into the centre in quite a defined way, although the actual entrance is not in the most obvious place and visitors find it difficult to negotiate the door. The Wellingtonia tree does dominate the garden. A strong distinction between the inner (enclosed) and outer garden was noted and as the plants have matured this seems even more defined. The "enclosed garden" feels very protected, set back from the road and traffic. On all visits bird song was recorded and also ducks quacking on the river. The enclosed area includes the most shade and places to sit although at times the wooden benches can look rather stained and uninviting. In the main garden area there are no places to sit and it feels very much like a "through" area.

Changes in the garden

The growth and maturation of all the plants and new trees was recorded. In particular the development of what Facer calls her, 'flower forest', directly in front of the centre was noted (Facer, 2012). The seasonal variation and colour range of her planting was striking — though this bed is not shown off to best advantage because cars are parked directly in front of it. The water feature was installed in time for the first year celebrations in 2011. This took over from the tree as the landmark and offering sound as people make their way to the entrance. Concerns that the water feature would be vandalized because it is open to the road have so far has not come true. There have been various teething problems in the garden such as the initial grass turf not taking and the heavy dropping of needles from the Wellingtonia clogging up the water feature. The first winter in the garden was extremely cold and hence some plants initially struggled. Also the water at the top end (nearest the centre) of the feature has been splashing onto the grassed area making it boggy and unusable.







First site visit to Maggie's Cheltenham (Butterfield, July 2010)







The path and main garden (Butterfield, 2011)









Photographs of the 'Sigmoid Curve' and yew arrow heads (Butterfield, 2011). Facer (2010) describes this as 'A Sigmoid Garden for Maggie's: A Garden for Life and Living. A Metaphorical landscape of hope designed to calm, soothe and inspire with the empowering beauty of nature'.





The undulating mounds and pine cones beneath the Wellingtonia (Butterfield,2011)

Maya Lin's Wavefield (1995) at University of Michigan, Ann Arbor, US. Lin was inspired by readings in aero and fluid dynamics. (© University of Michigan)





The Oncology Centre at Cheltenham General Hospital and the buildings on the approach to the Maggie's Centre from the hospital (Butterfield, 2011)













Field book photographs (Butterfield, 2011-2012) William Pye's undulating water feature at Maggie's Cheltenham. Pye is perhaps best known for his polished metal water sculptures *Slipstream* and *Jetstream* at Gatwick Airport.



Field book photographs (Butterfield, 2011-2012) of the 'inner garden' and seating



The 'flower forest' (Butterfield, 2011)



The 'flower forest' (Butterfield, 2012)



The back terrace next the River Chelt (Butterfield, 2012)



Field book photographs (Butterfield, 2011-2012) of interior views and views out to the garden.



Field book photographs (Butterfield, 2011-2012) showing maintenance problems with the grass mounds and the water feature











Wide angle photographs of Maggie's Cheltenham garden (Butterfield, May 2012)





The garden design at Maggie's Cheltenham showing the path and undulating grass mounds. 3D CAD drawing by Christine Facer, reproduced by kind permission of the Maggie's Centres (© Christine Facer Hoffman Landscape Design Practice, c. 2009)



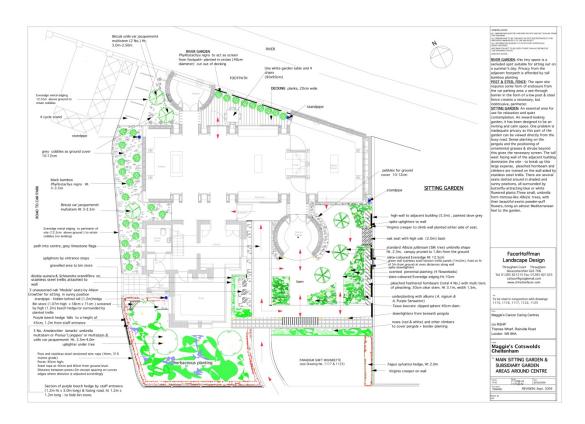
The garden design at Maggie's Cheltenham showing an aerial view of the path and undulating grass mounds. 3D CAD drawing by Christine Facer, reproduced by kind permission of the Maggie's Centres (© Christine Facer Hoffman Landscape Design Practice, c. 2009)



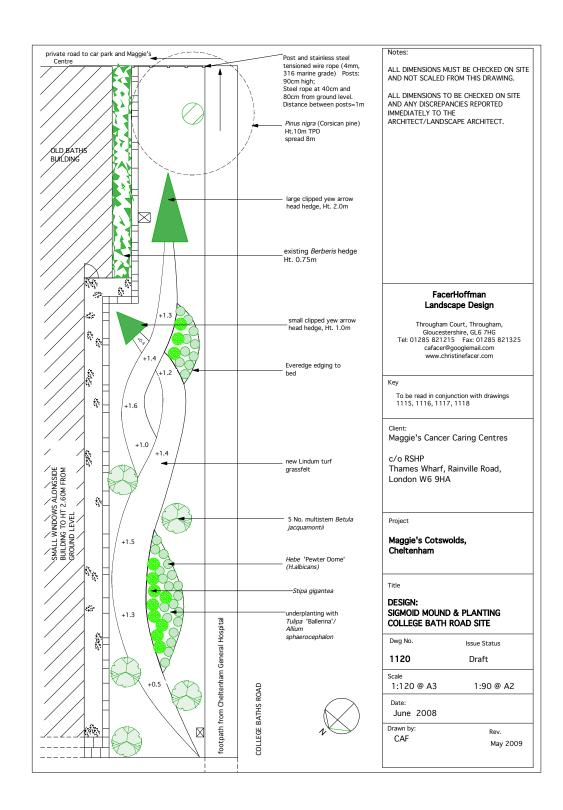
The garden design at Maggie's Cheltenham showing the path and undulating grass mounds. 3D CAD drawing by Christine Facer, reproduced by kind permission of the Maggie's Centres (© Christine Facer Hoffman Landscape Design Practice, c. 2009)



The garden design at Maggie's Cheltenham showing the bench and planting plans for the 'inner garden'. 3D CAD drawing by Christine Facer, reproduced by kind permission of the Maggie's Centres (© Christine Facer Hoffman Landscape Design Practice, c. 2009)



The planting plans for 'flower forest' and 'inner garden' at Maggie's Cheltenham. Drawing by Christine Facer, reproduced by kind permission of the Maggie's Centres (© Christine Facer Hoffman Landscape Design Practice, 2009)



The garden design and planting plans on the strip of ground leading to Maggie's Cheltenham, Sigmund curve by Christine Facer, reproduced by kind permission of the Maggie's Centres (© Christine Facer Hoffman Landscape Design Practice, 2008)

1E: Maggie's Glasgow Gartnavel

This garden was researched with a site visit on 10 May 2012 followed by an interview with Lily Jencks at her studio in London 4 July 2012.



Aerial view of Gartnavel Hospital site, Glasgow, showing the octagonal structure of the new Maggie's Centre with central courtyard (© Lily Jencks, c.2011)

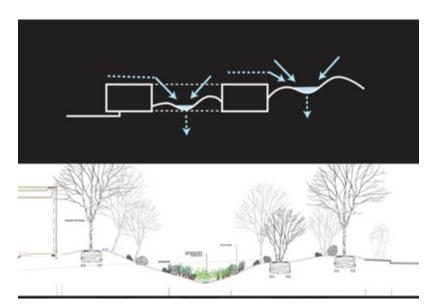


Diagram of the landscaping at Maggie's Glasgow Gartnavel showing the planting taking advantage of the drainage (© Lily Jencks, c.2011)



Maggie's Glasgow Gartnavel (Butterfield, 2012), nestled into the hillside above the main hospital and built around a central courtyard. Within the central courtyard which is planted with birch, ferns, hostas, alchemilia, and perennials such as salvias. The orange corian seats that light up at night.



Figures 278-280: Maggie's Glasgow Gartnavel, 2012 built around a hub – the presence of the landscape is everywhere within the building.



Maggie's Glasgow Garrnavel (Butterfield, 2012) ,the entrance path marked by stones (*left*). Open views (*middle*) from the main kitchen area contrast with the more private views within the centre of the building (*right*).

Lily Jencks states, 'the smaller stones (at the entrance to the main path) are about a little bit of a gateway. When you design a path you have to think about how you are moving and moving through. Initially I saw the path as about the stages of life and each zig and zag was at different stages – the idea of progression of change. Even tiny things create a gateway – like the little stones.' (Jencks, L., 2012)



Maggie's Glasgow Gartnavel (Butterfield, 2012), a zig zag path leads to a wood and the 'reflection dome'.



Lily Jencks' Reflection Dome. The designer has arranged the tree stumps in sequences. Photographs and diagram by Lily Jencks (© Lily Jencks, c. 2011)

1F: Maggie's Oxford

This centre is still in the planning stages and a site visit was not made. An interview (by phone) with Flora Gathorne-Hardy took place on 8 April 2013.



Snapshot of Flora Gathorne-Hardy's design proposals for Maggie's Oxford (© Flora Gathorne-Hardy, 2012)

Gathorne-Hardy (2013b) states, '[a]s you can see, the woodland plants are chosen primarily for their ecological connections to the nature reserve setting, but some are well known medicinal plants. We are aware that the site has nettles, white nettles, violets, fox gloves, cows parsley, willow, dog roses, and goose grass as examples of forage-able and healing plants'.



rianting zones

The planting scheme is intended to strengthen the bio-diversity of the site within the Nature Reserve and to create plant communities that can thrive and evolve over time.

Trees and shrubs are planted to help frame the building and to create particular planting zones, as described below. Native and naturalised herbaceous plants found elsewhere within the Boundary Brook area are included across the site. This mix includes 80% grass with meadow species that will thrive between the newly-planted trees and shrubs, and shade tolerant woodland plants that will be able to self-propagate and gradually colonise the site as the trees and shrubs mature.

ZONE I: Riparian mix

Here, a group of willow trees link in with the existing willows along the western side of the Boundary Brook. The shrubs are all native, with dog roses, *Viburnum* species and groups of coppiced dogwoods closer to the footpath. Together, these trees and shrubs help frame the watercourse and provide a degree of enclosure for the building.

ZONE 2: Winter scent mix

Closer to the building, there is a slight shift in the tree and shrub palette, with airy birch planted in amongst shrubs that will provide scent and colour, even in the coldest months, espeically close to the entrance way to the centre. These shrubs include a *Magnolia stellata*, groups of *Hamamelis*, *Lonicera* and *Fothergilla*.

ZONE 3: Specimen cedar and birches

A group of three specimen cedars provides a connection in people's imaginations with the timber cladding on the building. Paper birch is selected to provide striking foreground interest against the cedars. Beneath these trees, loose groupings of *Fothergilla major*, dog roses and *Prunus spinosa* are planted to provide autumn colour, early summer scent and spring blossom.

ZONE 4: Hornbeam and hazel belt

Specimen hornbeams and hazel shrubs supplement the existing tree belt and filter views on approach from the north of the site. Dog roses and groups of *Fothergilla major* add early summer blossom and autumn colour.

ZONE 5a and 5b: Plants for the undercroft

Around the fringe of the undercroft (5a), groups of native ferns are planted within the form of the stone circles. Where light levels are very low, (5b) *Hedera helix* are planted within or between the concentric circles of gravel and stone. Over time and with careful management, these groupings of ferns and ivy will expand, depending on the availability of light and moisture, helping to blend the undercroft area into the surrounding woodland under-story.

Snapshot of Flora Gathorne-Hardy's design proposals for Maggie's Oxford (© Flora Gathorne-Hardy, 20011)

APPENDIX 2

Additional case study gardens fieldwork

Included here are fieldwork notes and photographs in relation to the other case study gardens that were researched to provide context for the Maggie's Centre gardens. These gardens were researched in some detail over a period of time using some of the same research methods to those applied to at Maggie's.

2A: Garden at Macmillan Ambulatory Oncology Centre (2006-8), Leighton Hospital, Crewe

Research included: site visits on 17 December 2010, and 24 May 2011; and six photoelicitation interviews conducted (4 with staff, 2 with patients). Limited use of the garden was observed during site visits. The doors to the courtyard were open on the second visit and one member of staff was seen walking around it during her lunch break.







Photographs of the Macmillan courtyard garden at Crewe (Butterfield, 2010-2011)

2B: Garden at Macmillan Ambulatory Cancer Treatment Unit (2009), Warwick Hospital

Research included two site visits on 18 December 2010 and 26 May 2011. Research included 11 interviews (9 patients and 2 staff). No use of the garden was observed and on both occasions the doors to the gardens were locked.

















Photographs of the Macmillan garden at Warwick Hospital (Butterfield, 2010-2011). This includes views from outside the centre, views of the garden within the chemotherapy unit and the internal courtyard garden that is used by staff.

2C: Garden at the Macmillan Renton Unit (2011), Hereford County Hospital

Site visit included interview with designer Karin Bostin (as walking tour), (10 October 2011). During this site visit, visitors were observed using the garden.



Photographs of the garden at the Macmillan Renton Unit, Hereford County Hospital (Butterfield, 2011). The focal point of the garden is a central cherry tree. The garden includes 14 different seats carved in wood especially for the site. Planting has been arranged to ensure some areas are more private or secluded. Plants were chosen for their scent; grasses to create noise.

2D: The Friends Garden, Great Ormond Street Hospital for Children (2008), London

This garden was researched June 2010 and 2012. Four site visits were undertaken on 26 July 2010, 26 April 2011, 2 May 2012, and 20 June 2012. Research included 19 interviews and photo-elicitation with the staff and managers. An online survey was conducted in June 2012 with 29 responses.





Photographs of the Friends Garden, showing the rooftop location, views and internal and external areas, (Butterfield, 2010-2012).













Wide angle views of the Friends Garden (Butterfield, 2012)

The Friends Garden planting plan (© Andy Sturgeon, 2008)

In 2010 the SGD organised a visit to the Friends Garden (© Andy Sturgeon and SGD)

2E: Trevarna Garden (2012), Cornwall Care, St Austell, Cornwall

This garden was researched between March 2010 and September 2012. Research included 17 interviews and photo-elicitation with the designers, staff, residents, family members and local community groups. Further interviews were undertaken in collaboration with researcher Alexandra Wagstaffe from the Sensory Trust in 2012. This collaborative work did not affect the manner in which data was collected. Research also included documenting the gradual development of the garden and attending various design and planning meetings.







Photographs of Trevarna garden before redevelopment. The photographs show the overgrown shrubs blocking light and views from the rooms as well as the uneven paving stones, which meant it was hazardous (and hence inaccessible) for residents (Butterfield, 2010).











Photographs of the sensory mapping activity (top three) developed by the Sensory Trust to engage staff and residents with the garden and to aid the consultation process in 2010. Other activities include making hanging baskets with local school children, and visits to places such as the Eden Project (bottom two), (Butterfield, 2010)



David Kamp's design guide for the redevelopment of the garden at Trevarna (@Dirtworks PC, c. 2012)



David Kamp's annotated design guide for the redevelopment of the garden at Trevarna (©Dirtworks PC, 2012)













Photographs of the redevelopment of the garden, including details showing the careful attention given to different paths and surfaces. The 'stepping stone' path was designed following a request from staff (Butterfield, 2012).





Photographs of the new garden with staff from the Sensory Trust and David Kamp (Butterfield, February 2012)







The garden on the open day (Butterfield, 14 April 2012)











Photographs of the new garden (Butterfield, 2012)







Photographs of the new garden showing the favourite seat (*left*), the need for more shade and seating (*above middle and right*), (Butterfield, 2012).







Details showing poor maintenance and weeds in the new garden (Butterfield, 2012)

2F: The Sand Rose Project (2005), Marazion, Cornwall

This garden was researched between June 2010 and August 2012. Regular site visits were made during this period. Research included 10 interviews and photo-elicitation with visitors. Families who stayed and used the garden were also invited to complete questions about the garden as part of the regular feedback form; 169 responses were received (survey ran from 1 July 2010 – 31 August 2012; 215 families stayed - 79% return). A further online survey specifically about the garden was run in 2012 with 20 responses.



Photographs of the Sand Rose Project garden showing the coastal location, seasonal variation and the folly (Butterfield, 2010-12)



Wide angle photographs of the garden at the Sand Rose Project (Butterfield, 2012)



Details showing the range of spaces, paths and seating areas in the garden (Butterfield, 2012)

APPENDIX 3

Contemporary healthcare gardens

Included here are the details of some important contemporary healthcare gardens. These gardens were visited and researched in some detail to provide context for this thesis and to help develop understanding of what designers, managers and users consider important within healthcare gardens.

3A: Culm Valley Integrate Centre for Health (2010), Devon

Site visit and interview with manager, J. Lees, 26 October, 2010

- Culm Valley Integrated Centre for Health, Devon is a rare example of where a
 health centre and GP surgery has embraced the idea of a garden to explore
 issues to do with health and wellbeing. Supported by the Department of Health
 it is the only health centre in the UK with a café and vegetable garden.
- Included on the site are a small physic garden and two raised beds of fruit and vegetables situated in the car park. The gardens are linked to two important ideas.
 - Firstly, is the idea of a garden providing opportunities and connections with
 the community. This ranges from simply providing food to be used in the
 onsite Café Sustain, to a range of community based activities including a
 regular gardening group. The manager of the café explained that the
 gardens have a community role as a social activity, as a way to discuss
 diet and nutrition, as exercise and as a productive kitchen garden (Lees,
 2010).
 - The second idea is around the concept of "the intelligent waiting room",
 whereby the usual 20 minute wait in a doctor's surgery need not be wasted
 time. A garden and café could encourage people to think about diet and
 health, and hence the idea of 'self-care', while also simply providing a more
 interesting physical environment.



Photographs of the physic garden and vegetable beds at Culm Valley Integrated Centre for Health (Butterfield, 2010)

3B: Trinity Hospice Garden, Clapham (1983), London

Site visit, interview with gardener Mike Halman (as walking tour), 27 September 2010.

- Trinity Hospice in Clapham, London is described by Worpole (2009: 85) as 'one of the most artfully designed gardens'.
- Trinity, one the oldest hospices in the UK, supports more than 2000 terminally ill people and their families each year. Situated on the north side of Clapham Common the site combines extensive gardens (almost 2 acres) with a Georgian building and a new inpatient centre designed by T.P. Bennett LLP which was opened in July 2009.
- The gardens at the back of the property were originally designed and laid out by John Medhurst and David Foreman in 1983 as a memorial to the landscape gardener Lanning Roper. Further landscaping has taken place with the new inpatient facility, which deliberately focused on the relationship between inside and out ensuring that all patients have access to garden space.
- The gardens include extensive planting and mature trees and a variety of seating, both sheltered and open. The garden is richly planted with much colour and variety, different paths with railings – it is very accessible yet feels very private.
- At the area closest to the old building there is an extensive brick patio area with colourful planting and a bronze water feature by William Pye.
- A main path leads down the garden past beds and trees to a second area
 which is even more private. This area includes more seating, a pond and a
 kinetic sculpture Four open horizontal squares by George Rickey, shrubs
 and beehives.
- The new wing is on two floors. The lower floor being below ground level. The
 landscaping has been designed around this with sloping beds to ensure that
 every room looks out onto colourful planting. There are café-type seating
 areas at both ends of the new wing. Within the new wing there is a strong

presence of the garden and the building is very light with views of the garden in all directions.

- The garden at Trinity Hospice is managed by one full-time paid gardener and a team of volunteers. There is only a small budget for plants so most of the beds are developed through dividing and propagating.
- Mike Halman, the gardener, stated that the most popular area of the garden was the most private area at the far end near to the pond that had a range of seating. He describes the garden as 'a place of tranquillity and peace very different from inside the hospice a place away. It is about life' (Halman, 2010). He also states that it is important that the garden is always a 'work in progress', and emphasises the idea of discovery for the patients and their families. He feels it is important that there are no instructions or information for patients and he had put a stop to plants being donated to the garden in memory to ensure it remained a place, as he said, 'about life' rather than death.



Photographs of the garden (including a view from inside) at Trinity Hospice, Clapham (Butterfield, 2010)

3C: North Devon Hospice Garden (2008), Barnstable

Site visit and interview with gardener, Colin Porter (as walking tour), 27 September 2010.

- This garden has been developed over a number of years and is currently managed by gardener and landscape designer, Colin Porter.
- The hospice has expanded over the years and occupies an awkward, though
 elevated site. The gardens cover nearly 6 acres and there has been much care
 and attention given as to how the outdoor spaces can work for the people who
 attend the hospice.
- Rebuilding in 2008 included the creation of a café with outdoor terrace and each room on the bedroom wing looks out onto the gardens. Close to the main building are a small retreat garden, the kitchen garden, and a physic garden. All areas of the garden are fully accessible and two wide sweeping paths lead down the site past dramatic borders, a rose garden and a winter garden to a series of ponds and a cherry orchard.
- Porter has given much thought to the design and planting at North Devon
 Hospice. His design is very much based on his practical knowledge of what he
 calls 'his craft' as a plantsman, knowing what plant grows best where. It is also
 the result of his understanding of his special position with the hospice
 community.

People do talk to me. I know that is one of my roles. I know people are here because they are losing someone very dear to them. What I can do is share the beauty of what has been passed on...There is a lot of laughter here. It is a very happy place. (Porter, 2010)

- Porter describes wanting to create a 'dynamic and vibrant' garden 'that the people here can enjoy – this is not an ecclesiastical cloister' (Porter, 2010).
- Porter works closely with not only the building management team, but also the
 nurses and pastoral care team at the hospice to ensure the garden meets the
 needs of the patients and families who use it. For example, the retreat garden,
 next to the chapel, was designed for peace and tranquillity with the sound of
 water, stones and plants. This space was developed with the palliative care

team, who worked with Porter's desire to bring a spiritual feeling to this area and throughout the grounds.

- The lower gardens and the ponds allow the 'opportunity for wildlife to do natural things' (Porter, 2010). The orchard includes a range of culinary cherries, including the Mazzard, a type local to West Country and originally grown commercially. Families connected to the hospice pick the fruit and some is used in the hospice kitchen. The orchard offers another way to link the hospice with the community.
- In 2009 North Devon Hospice opened its gardens to the public as part of the National Gardens Scheme The first hospice in the country to do so and Porter was awarded 'Professional Gardener of the Year'.
- The physic garden was planted in 2010 by Porter with the support of Professor Liz Williamson of Reading University, a leading expert in the medicinal value plants. The aim with the garden is not to grow medicinal plants for use but to enable therapists who work at the hospice to explain to patients what the benefits certain pants may bring. The garden thereby provides a context for the situation people find themselves in.
- In contrast, the ornamental kitchen garden produces real food for the café as well as offering opportunity for patients to undertake a little horticultural therapy with raised beds accessible to patients in wheelchairs.



Photographs of North Devon Hospice showing the top patio, retreat garden, physic garden and paths leading to the bottom area with pond and orchard (Butterfield, 2010)

3D: Glasgow Homeopathic Hospital Garden (1998)

Site visit and interview with artist and gardener Jane Kelly (as walking tour), 10 May 2012.

- The NHS Centre for Integrative Care: Glasgow Homeopathic Hospital (GHH)
 (1998) designed by Macmon architects and Jane Kelly. It provides an example
 of an environment where the architecture allows the garden a strong and
 constant presence from both inside and outside the building.
- The whole hospital was designed as a "healing space" and great attention was paid to colour, light, materials, interior and exterior design (GHH, 2013). It provides an example of an environment where the architecture allows the garden a strong and constant presence from both inside and outside the building. The design team brought together medics, administrators, architects and artists to work very closely ensuring quality standards but also strong aesthetics and to conceive the project as a whole. They proved that a modern hospital could be designed with comfort of patients uppermost, without any additional cost per square metre over a standard hospital.
- It should be noted that to date there has been no user-led or post occupancy research undertaken (Kelly, 2012).
- Gesler (2003: 93) cites GHH as a strong contemporary example where the designers, like the Greek builders at Epidauros, attempted to integrate buildings and landscape:

[A]ttention to inside and outside spaces and the links between the provides a sense of community protected from outside disturbances and at the same time a feeling of access to the world outside the hospital.

- The garden was designed as the focal point of the hospital, intended both as space both to walk and sit in but also to be looked out upon from within.
- There are views of the garden from all the consulting rooms, from all the wards and single rooms. The majority of services are at the front of the building while the back remains more private and focused on the garden. Most windows are floor to ceiling and those opening onto the garden each have a wooden patio

area creating a sense of the garden literally merging with the building. Originally the outside walls were painted a lavender colour further emphasizing this sense of merging.

- The planting was designed to be dense and lush literally "leaping out of the paths" so that patients confined to bed could still feel close proximity to the plants.
- The planting also includes medicinal and homeopathic plants such as black bamboo, birch, fox glove, lady's mantle and lavender to provide 'an extra layer of interest in the garden' (Kelly, 2012).
- The garden comprises a series of sculpted earth mounds and flower beds full of perennial flowers, wild grasses, trees and shrubs. A wide white path "flows" through the garden linking the patient spaces and leading to the perimeter path.
- The lead artist for the interior design, art commissioning and the garden, Kelly said the design was inspired by the principles of homeopathy and the idea of 'life force' and ...the symbol of flowing energy is water, and I wanted to create the impression of water in the garden' (Kelly cited in Galbraith, 2004).
- The planting has been carefully planned to ensure interest through all seasons and offers a wide variety of forms and textures, from trees and shrubs, to exotic wild grasses, rare flowers and aromatic herbs. The colour scheme for the planting is inspired by the principles of homeopathy: subtle dilutions of white, ochre, lavender and terracotta, and echoes the artist's use of colours and shades for the interior environmental design.
- The impression today from within the hospital is that the garden is a huge overgrown jungle. Once out in the garden you realise this is not the case but the design of dense planting around the patios and the winding path from north to south gives it a feel that it is bigger than it is.
- Kelly has retained a small maintenance contract to lead the maintenance of the garden since the hospital opened. Uniquely, she has retained a strong relationship with the garden and the hospital staff and continues to work and develop the garden on a regular basis. Although she struggles to keep on top of

it and recognises it is a 'garden on the edge', Kelly is in no doubt about the importance of it. She says patients with chronic illnesses who spend repeated or long periods of time at the hospital remark on the seasonal changes and even joke that they need to be ill in the summer to enjoy the garden. Terminally ill patients often specifically request to die in the garden (Kelly, 2012).

 Kelly (2012) describes the garden as 'sculpture that can be walked' and she maintains that the garden functions as a restorative space because:

It is a garden not done by a landscape architect. Because it is gardened and I am a gardener. Because the hospital witnessed it being built and that inspired people to go and do their own gardens. Because you can't disconnect it from the building. When I first walked onto the building site it was just a concrete shell but you saw out, then it was solid. It was like breathing, a rhythm. And you don't have to walk far to see the garden. It is not a backdrop... My continued involvement and close working relationship with them [the staff] is quite unique. It's nice to be trusted. I have worked on so many PFI projects where they bang on about value for money but what we really need is money for values!













Photographs of the garden at the Glasgow Homeopathic Hospital, showing the view from inside, the decking and paths within the garden as well as the contrast between summer and winter (© Jane Kelly, 2000-2005)



Photographs showing the progress of the garden at the Glasgow Homeopathic Hospital (©Jane Kelly, 1998).

3E: The Combat Stress Therapeutic Garden, Hampton Court (2010)

Site visit May 2010. Conversation with Dorinda Wolfe Murray, 22 October 2010.

- The Combat Stress Therapeutic Garden, showcased at Hampton Court
 Flower show in 2010, was a collaboration with the charity Combat Stress,
 Dorinda Wolfe Murray of Independent Gardening, and designer Fi Boyle, to
 create a garden specifically for those affected by Post Traumatic Stress
 Disorder.
- This garden presented some specific ideas about how to design a garden for people suffering from trauma. These included not planting too densely to ensure clear sightlines, gentle, wide curving paths and dry stone walling; high backed seating set against walls with no space for hidden threats such as bombs; scented plants such as Verbena and Oreganum and a mix of evergreens and perennials for year-round interest. Red and orange plants were avoided in the belief that they disturb rather than calm.
- The garden has since been installed at Combat Stress Headquarters, Leatherhead, Surrey.



Photograph of the Combat Stress Therapeutic Garden, Hampton Court (Butterfield, 2010)

3F: Play For Life Garden at Royal Cornwall Hospital (2007-10)

Site visit and interview with designer Mike Wesley (as walking tour), 23 September 2010.

- Wesley Designs based in Falmouth, Cornwall, have worked on a range of landscape projects within healthcare. This includes projects at St Rocco's Hospice, Compton Hospice, Royal Devon & Exeter Hospital the Royal Cornwall Hospital (Westley Design, 2008).
- One project of particular interest to this research was Magharalone Healing Garden Sensory Attachment Intervention Therapy Garden where Mike Westley worked with occupational therapist, Eadaion Brannach, to develop a setting for her treatment centre in Ireland that would provide a series of specific sensory and spatial settings. The idea was that the therapist might then develop client specific sets of activities based on combinations of different experiences obtained from the landscape settings (Westley Design, 2008). This garden was never built, however the idea of using garden settings for specific therapeutic work is relevant and is perhaps comparable to the work at Alnarp in Sweden (Grahn et al., 2010) and clearly influenced the Play for Life garden in Truro.
- Westley (2010) describes the Play for Life garden in Truro as a 'playable landscape' embracing a series of rooms that can be used by all children, their carers and their families in different ways according to mobility and interest. The design includes different spaces such as a nest swing, tree house, water and ball play areas and acoustic toys, to ensure it is a place of respite and sensory richness for different users. The aim was to provide a sense of intimacy and enclosure where children could forget they are in hospital.



Photographs of the Play for Life garden at the Royal Cornwall Hospital, Truro (Butterfield, 2010)

APPENDIX 4 Definitions of a Healthcare Garden as a Resilient Place

4A: Saint Bernard (1090-1153) wrote a definitive description of the purpose of the restorative garden when he described the courtyard garden of the hospice at his monastery in Clairvaux, France.

Within this enclosure, many and various trees, prolific with every sort of fruit, makes a veritable grove, which lying next to the cells of those who are ill, lightens with no little solace the infirmities of the brethren, while it offers to those who are strolling about a spacious walk, and to those overcome with the heat, a sweet place for repose. The sick man sits upon the green lawn, while inclement Sirius burns the earth and dries the rivers, he is secure, hidden and shaded from the heat of that fiery star; for the comfort of his pain, all kinds of grass are fragrant in his nostrils. The lovely green of herb and tree nourishes his eyes and, their immense delights hanging and growing before him, well might he say "I sat down in his shadow with great delight and his fruit was sweet to my taste" [Song of Songs 2:3]. The choir of painted birds caresses his ears with sweet modulation, and for the care of a single illness the divine tenderness provides many consolations, while the air smiles with bright serenity, the earth breathes with fruitfulness, and the invalid himself with eyes, ears and nostrils, drinks in the delights of colours, songs and perfumes.

Bernard of Clairvaux (1090-1153) from J. P. Migne (ed.) (1885) *Patrologia Latina*. 281 (271), col. 569. Translated in Comito (1978: 177)

4B: Sample response within the online surveys (GOSH, Sand Rose Project and Maggie's) conducted as part of the research for this thesis to the question, 'what does a restorative garden mean to you'?

1	Time to breathe, sit and think, and it helps sort things out in my head	Jun 26, 2012 12:07
2	Somewhere quiet and pretty to relax.	Jun 20, 2012 4:29
3	Time to think Time to "not think" Contemplation Peace Nature goes on	Jun 20, 2012 12:08
4	A place for relaxation, somewhere to think things through.	Jun 19, 2012 5:57
5	It gives time to relax and get some fresh air and clear your mind. All of the words hidden around the garden are inspiring. It means having a space where you can unwind during a stressful day.	Jun 19, 2012 4:36
6	For me it is an important resource - a place away from working, but near enough that I can get away and back again quickly.	Jun 18, 2012 4:27
7	A place for peaceful reflection or a place where you can go and not be bothered by that which might be bothering you	Jun 14, 2012 3:23
8	peaceful, paints	Jun 13, 2012 4:58
9	It means a place I know I can go to that I will be welcomed and where I will want to stay. Times that I use the public ground level gardens around the hospital I am often competing for a space to sit and having to breath in cigarette fumes. Being pregnant, I appreciate the friends garden as a clean space to relax. It means I can truely relax and rejuvenate.	Jun 13, 2012 2:17
10	I think it is a brilliant idea for a staff only garden, it is important for staff to take that break and unwind from the stressful and busy jobs they do daily. It is important to keep it staff only.	Jun 13, 2012 1:52
11	coping with stress, maintaining health (mental and physical) in busy and pressurised setting. just knowing that its there helps	Jun 12, 2012 11:47
12	Quiet, reflective space.	Jun 12, 2012 10:11
13	Colourful, open, greenery, welcoming, relaxed, lots of seating options, low noise, calm.	Jun 12, 2012 8:41
14	Somewhere that is quiet and open with a variety of planting. The roof garden is so well designed that I feel instantly better whenever I visit.	Jun 12, 2012 8:18
15	Chance to recharge and clear the mind	Jun 12, 2012 7:43
16	Somewhere to get away from it all for a short while, somewhere peaceful and private	Jun 12, 2012 6:04
17	enjoyable	Jun 12, 2012 5:48
18	Somewhere peaceful yet relaxed	Jun 12, 2012 5:46
19	a place to escape work and be outside relaxing	Jun 12, 2012 5:43
20	peaceful/colourful/private area for relaxation and refreshment - open space for a chance to breathe	May 10, 2012 9:03

1	Nature can stabilise you and resonates with a person on a very deep level	Sep 9, 2012 5:51 AM
2	It means a quiet space where no one can tease me.	Jul 5, 2012 4:02 AM
3	Somewhere quiet and beautiful where you can be still and feel open and able to express anything. To feel free from stress and heavy weight, the garden at Sandrose fills all these things and more.	Jun 30, 2012 5:55 AM
4	Peace and healing	Jun 26, 2012 11:46 AM
5	somewhere to appreciate nature and gather thoughts	May 22, 2012 3:52 AM
6	peace and tranquility, and the lovely views along with the gorgous flowers and plants	May 10, 2012 5:19 AM
7	somewhere to relax, to sit, walk, listen, chat, read, think, space to be with others and share experiences or be alone and reflect.	Mar 20, 2012 6:24 AM
8	peace & tranquility	Feb 13, 2012 4:24 AM
9	Beautiful views, flowers, areas to sit and reflect. A place to watch my children run about and have fun and smile!	Jan 31, 2012 8:28 AN
10	Working as a volunteer in a hospice it is such a peaceful space where children can see things in the surroundings that connect to their special person and it opens up a channel for them to talk enabling grief to be spoken of. Questions asked and worries shared. Sometimes children and families become kindred spirits. I would as a counsellor see so much in your surroundings.	Jan 19, 2012 10:48 Al
11	Quiet private spaces. Places to sit with different views. Different textures. Open views. Planting that can move in the wind. Colour. Hearing only the sound of nature.	Dec 14, 2011 11:39 A
12	A lovely calming environment	Nov 22, 2011 4:02 AM
13	One with lovely smells and swishing grasses	Nov 18, 2011 4:57 AM
14	Therapeutic, peaceful, serene, a thinking space, an extra room to a home	Sep 20, 2011 12:34 P
15	quiet but also the isolation if needed from the outside	Aug 11, 2011 1:29 PM
16	It gave me a peaceful place to be with my own thoughts.	Aug 1, 2011 11:49 AM
17	order and tidy but not over controlled - not geometric! somewhere birds and butterflies come, somewhere full of nature but enhanced by human touch. I like little passages and views into corners.	Jul 24, 2011 8:25 AM
18	somewhere that I could go to sit amongst the sounds and sights of nature	Jul 6, 2011 1:35 AM

Sample online Survey responses to question 'What does a restorative garden mean to you?' (Maggie's Centres)

- Peaceful aspects with elements of privacy using screening, plants. Scent and colour in the planting is vital. Sculpture gives focus for stilling as do water features.
- Somewhere you can wonder around looking at lovely flowers, and water is always calming.
- A place to reflect and to settle when sometimes feeling overwhelmed and emotional.
- Somewhere you can sit in either sun or shade, a welcoming area for birds, bees and
 other insects whose sounds add to the tapestry of colour and scent. These engage the
 senses that evoke some of our earliest and happiest experiences at a time when they
 have been suppressed by the trauma and anxiety of illness, diagnosis, treatment and
 being in institutional settings. We know all that's important and necessary, but we still
 need to hear the bees and smell the flowers.
- Peace, life affirmation.
- IMPROVED STATE OF MIND
- Lots of plants, quiet spots, places to wander.
- Somewhere peaceful where you can't hear all of the hustle and bustle of the centre.
- A place where you can focus your mind and contemplate the wonders of nature.
- It helps take my mind of the often unpleasant visit to the hospital.
- It helps me relax and contemplate positive aspects of life.
- Positive environment
- Being an outdoor person it means so much. Be lovely to smell lavender, see old fashioned lupins, have a sitooterie for shade but also in rain and listen to rain pitter pattering on roof, to pick the odd bit parsley, thyme or rosemary. And how wonderful for the men to even retire to potting shed and plant or swap plants. Trees for shade and wind break. I could go on but hope that gives you some ideas. Forgot to say a bird station would be fantastic too.
- I need it to help me cope. It helps me relax, to think straight, to be connected.
- A place to gather thoughts.
- Peace and quiet, change of seasons, reminds me I have survived another year.
- Peace.
- A quiet place one can sit outdoors, weather permitting.
- A place of hope.
- Means alot as you feel relaxed.
- A place where the turmoils of the other world can be set aside for a moment or two.
- A quiet place to go and relax.

- A break from noise and bustle of hospital. A place of tranquility.
- It means a huge amount to me firstly that people care enough to build it and maintain it and that I fortunately get to walk and sit in it and close my eyes, feel safe and reflect that's so important!
- A place where I can feel centred and relaxed; somewhere to either calm me down or lift me up on difficult days.
- It helps to ease stress and distract you from negative thoughts.
- · Somewhere where I can be at peace.

4C: Poems relevant to the history and idea of the restorative garden

Andrew Marvell (1621-1678), The Garden

How vainly men themselves amaze
To win the palm, the oak, or bays,
And their uncessant labours see
Crown'd from some single herb or tree,
Whose short and narrow verged shade
Does prudently their toils upbraid;
While all flow'rs and all trees do close
To weave the garlands of repose.

Fair Quiet, have I found thee here, And Innocence, thy sister dear! Mistaken long, I sought you then In busy companies of men; Your sacred plants, if here below, Only among the plants will grow. Society is all but rude, To this delicious solitude.

No white nor red was ever seen So am'rous as this lovely green. Fond lovers, cruel as their flame, Cut in these trees their mistress' name; Little, alas, they know or heed How far these beauties hers exceed! Fair trees! wheres'e'er your barks I wound, No name shall but your own be found.

When we have run our passion's heat, Love hither makes his best retreat. The gods, that mortal beauty chase, Still in a tree did end their race: Apollo hunted Daphne so, Only that she might laurel grow; And Pan did after Syrinx speed, Not as a nymph, but for a reed.

What wond'rous life in this I lead! Ripe apples drop about my head; The luscious clusters of the vine Upon my mouth do crush their wine; The nectarine and curious peach Into my hands themselves do reach; Stumbling on melons as I pass, Ensnar'd with flow'rs, I fall on grass.

Meanwhile the mind, from pleasure less, Withdraws into its happiness; The mind, that ocean where each kind Does straight its own resemblance find, Yet it creates, transcending these,

Far other worlds, and other seas; Annihilating all that's made To a green thought in a green shade.

Here at the fountain's sliding foot, Or at some fruit tree's mossy root, Casting the body's vest aside, My soul into the boughs does glide; There like a bird it sits and sings, Then whets, and combs its silver wings; And, till prepar'd for longer flight, Waves in its plumes the various light.

Such was that happy garden-state,
While man there walk'd without a mate;
After a place so pure and sweet,
What other help could yet be meet!
But 'twas beyond a mortal's share
To wander solitary there:
Two paradises 'twere in one
To live in paradise alone.

How well the skillful gard'ner drew
Of flow'rs and herbs this dial new,
Where from above the milder sun
Does through a fragrant zodiac run;
And as it works, th' industrious bee
Computes its time as well as we.
How could such sweet and wholesome hours
Be reckon'd but with herbs and flow'rs!

(Available online at www.poetryfoundation.org [accessed: 9 October 2013])

Dorothy Frances Gurney (1913) God's Garden

The Lord God planted a garden In the first white days of the world; And placed there an angel warden, In a garment of light unfurled. So near to the peace of heaven, The hawk might nest with the wren; For there, in the cool of the even, God walked with the first of men.

And I dream that these garden closes, With their shade and their sun-flecked sod, And their lilies and bowers of roses Were laid by the hand of God. The kiss of the sun for pardon, The song of the birds for mirth, One is nearer God's Heart in a garden Than anywhere else on earth.

(Available online at www.absolutewonder.com [accessed: 9 October 2013])

E. E. Cummings (1894-1962) This is The Garden

This is the garden; colours come and go
Frail azure fluttering from night's outer wing
Strong silent greens serenely lingering,
Absolute lights like baths of golden snow.
This is the garden; pursed lips do blow
Upon cool flutes within wide glooms, and sing
(of harps celestial to the quivering string)
invisible faces hauntingly and slow.
This is the garden. Time shall surely reap
And on Death's blade lie many a flower curled,
In other lands where songs be sung;
Yet stand They were enraptured, as among
The slow deep trees perpetual of sleep
Some silver-fingered fountain steals the world.

(Available online at http://hellopoetry.com/poem/this-is-the-gardencolours-come-and-go/ [accessed: 10 October 2013])

APPENDIX 5 Samples of research methods

5A: Sample information forms

Research Project

The Restorative Paradigm: Gardens and Designed Landscapes

Participant's Information Sheet

- Do you think a garden could make you feel better?
- Do you ever daydream in a garden?
- Have you ever visited a garden that gave you a sense of calmness?
- What aspects of a garden are most important to you?

This research project is looking at the role of gardens and designed outdoor spaces in relation to health and wellbeing.

The project is part of my post-graduate research, which I am currently undertaking at University College Falmouth.

The project is looking at examples such as [add name of site where participant based] where architects and designers have considered the role of the garden in their brief. The research is looking at the following key questions:

- What makes an authentic restorative garden?
- What roles can gardens plays in the design of healthcare facilities today?
- How can contemporary designers address the health needs of people in the twenty-first century?

The research will explore [add name of site where participant based] in a variety of ways in order to look at the design, creation and use of these garden spaces.

I am very interested to record people's responses and uses of these spaces. I will therefore be asking you to participate in a number of ways including an interview and the completion of a questionnaire (please see the consent form). I am interested to hear your views and experiences of the garden spaces and to know if you respond to them through different senses such as sound, smell or touch.

It is hoped that the results of this research will have impact on the future design of healthcare facilities. The [name of organisation where participant based] have fully endorsed this research and they have indicated their interest in the results.

This research will form part of my final PhD thesis. It may also become part of a publication and journal articles on the subject.

Thank you for your interest!

Angela MacDonald, 26 October 2009

Sample information form (for Maggie's Centre Heads)

Research Project

The Restorative Paradigm: Gardens and Well-being

Maggie's Centre Heads Information Sheet

Background

This research project is looking at the role of gardens and designed outdoor spaces in relation to health and well-being. The project is part of my post-graduate research at University College Falmouth. I am an art historian, gardener and trained teacher and this research develops my initial work undertaken in 2008 for an MA in Garden History. This research is funded by a university studentship and by a grant from Maggie's.

The project is looking at examples, such as Maggie's, where architects and designers have considered the role of the garden in their brief. The research is looking at the following key questions:

- What makes an 'authentic' restorative garden?
- What roles can gardens plays in the design of healthcare facilities today?
- How can contemporary designers address the health needs of people in the twentyfirst century?

I hope that results of this research will have an impact on the future design of healthcare facilities. This research will form part of my final PhD thesis. It may also become part of a publication and journal articles on the subject.

Proposed methodology

The research will explore the Maggie's gardens in a variety of ways in order to look at the design, creation and use of these spaces. I will therefore be asking you, other staff and visitors to participate in a number of ways as I am interested to hear your views and experiences of the garden spaces and to know if you respond to them through different senses such as sound, smell or touch. The key methods I plan to use will be:

- 1. **An initial field-based site investigation in July/August 2010.** This will involve a preliminary visit, an informal meeting with staff and photographic and video recording of the garden.
- 2. Following the initial site visit, I will then collect and document a variety of materials relating to each site (July-September 2010). This will involve e-mail/phone contact with centre staff, the architects/designers and I will need to gather existing plans, maps, historic photos, records and any previous research. I will need your help to identify materials and key people to talk to.
- 3. Observation of the use of garden spaces (July/August 2010 part of initial site visit). I would like to observe and record the use, movement and flow within the garden spaces. This will involve my observation of the spaces over a period of time. I plan to use techniques developed by Space Syntax (www.spacesyntax.com) to analyse the data gathered.
- 4. Audio Recorded Interviews with centre staff and designers in Autumn 2010. Ideally these interviews will take place in the gardens.

- 5. Written/ visual questionnaires for staff and visitors. Pilot in September 2010 but then developed across all sites in Spring 2011. Written and visual questionnaires tailored to each site inviting participants to comment on their experiences of the gardens. Questions will be formulated following the initial fieldwork and documentary research and in consultation with you.
- 6. Identify participants (this could be staff, visitors, and their families) to take part in more in-depth interviews/ discussions. Pilot in September 2010 but developed across all sites in Spring 2011. I will need your help to identify participants and to advise on suitable timings for this work. Participants will be invited to take photos of the garden using disposable/digital cameras, which will then be discussed within the interview.
- 7. Article for individual centre newsletters to raise interest and awareness of this research and to encourage people to give me feedback.

Information and Consent

Please note that for all interviews and questionnaires, research will only be undertaken following the provision of *A Participants Information Sheet* and completion of *A Participants Consent Form*. Likewise photography will only be undertaken with the same provisions and the use of images and material gathered will be reviewed regularly.

Angie MacDonald, 14.06.10

5B: Sample ethics form

The Restorative Paradigm: Gardens and Designed Landscapes

Participant Consent Form

You are invited to take part in a research project exploring the garden spaces at the Maggie's Cancer Caring Centres. Before you decide to take part it is important for you to understand why the research is being done and what it will involve.

Please take time to read the attached information sheet carefully and discuss it with others if you wish. If anything is unclear please do ask for further information.

Activity Consents

I understand that I have given my consent for the following to take place:

To be photographed in the garden spaces and during discussions

To take part in a video/ audio/ sensory discussion

To be interviewed

To complete questionnaires

Data Consents

- I understand that I have given approval for my image and opinions to be shown in Angela MacDonald's final PhD thesis and may also be used in future reports and publications.
- I understand that the following personal data name, address, age, health and family details will remain strictly confidential. These personal details will be anonymised by the research using a code system. Only the researchers involved in the study will have access to this data.
- It has been explained to me what will happen to this data once the initial research project has been completed.
- I understand that confidentiality cannot be guaranteed for information which I might disclose in the focus group/group interviews.

Statement of understanding

- I have read the information leaflet about the research project, which I have been asked to take part in and have been given a copy of this information leaflet to keep.
- What is going to happen and why it is being done has been explained to me, and I have had the opportunity to discuss the details and ask questions.

Right of withdrawal

 Having given this consent I understand that I have the right to withdraw from the research project at any time without disadvantage to myself and without having to give any reason.

Statement of Consent

• I hereby fully and freely consent to participation in the study, which has been fully explained to me.

Signatures			
Participant's name & contact details (BLOCK CAPITALS):	Name:		
	Address:		
	Tel:		
	Email:	-	
Participant's signature:		Date:	
Head of Research/ lead contact at xxx (participant's organization) Name (BLOCK CAPITALS):			
Head of Research/ lead contact at xxx (participant's organization) signature:		Date:	
Research Student's Name (BLOCK CAPITALS):	ANGELA MACDONALD		
Research Student's signature:		Date:	
	·		

Contacts

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Participant's copy/ Researcher's copy (delete as appropriate)

5C: Sample interview questions for interviews at Maggie's

Interview Questions for staff

- · What is your role here and how long have you worked here?
- Describe the spaces to me as we walk through them
- What area/ aspects are most important to you and why? Has this changed over time?
- Describe how you use these spaces
- Describe your observations on how visitors/ other staff use the spaces
- Describe the entrance
- Are there areas/ aspects you would like to change? Why?
- Are the views from the within the building important to you?
- How does the centre differ from other places you have worked?
- Where do you go when you are stressed or upset?
- Do you think that Maggie's should have garden/green spaces?
- In what ways do you think the inclusion of green spaces impacts on the work of Maggie's?
- What do you think a restorative garden space is? (or what is needed to create it?)
- Is it important to your work to have a garden space?
- Do you think spending time in a garden has health benefits for you?

Interview Questions for Visitors

- Is this your first visit to Maggie's or are you a regular visitor (if so, how long have you been visiting?)
- Describe the spaces to me as we walk through them
- What area/ aspects are most important to you and why?
- Describe how you use these spaces
- Are the views from the within the building important to you?
- Describe your observations on how other people use the spaces
- Describe the entrance
- Can you remember your fist impressions of the building and garden have they changed over time?
- Are there areas/ aspects you would like to change? Why?
- How does the centre differ from other healthcare environments you have been in?
- Do you think that Maggie's should have garden/green spaces?
- In what ways do you think the inclusion of green spaces impacts on the work of Maggie's?
- What do you think a restorative garden space is? (or what is needed to create it?)
- Do you think spending time in a garden has health benefits for you?

Photo Elicitation Prompt Questions

- Describe each photo is one photo more important than the others?
- Describe where you were when you took it
- Why did you take it?
- What does it encapsulate about the garden spaces for you?
- If you had to give it a caption of one word what would it be?

5D: Sample online questionnaire from Maggie's Dundee

Maggie's Dundee - Garden Research We need your help. We are currently looking at the role of the outdoor spaces at Maggie's Dundee. Along with the building, we believe the garden can help create a soothing and calming environment for our visitors. Many people find hospitals difficult and stressful places. This can be hard when you or a member of your family are undergoing cancer treatment. How can the outdoor spaces at Maggie's Dundee help to relieve some of this stress and what aspects seem to work best? With your help and feedback we can develop the garden even more. Thank you for your time! Maggie's Dundee Maggie's Dundee

Page 1

laggie's Dundee Garden Questionnaire 2011						
About you						
1. What is your usual reason for visiting Maggie's Dundee?						
2. Roughly, how many times have you visited the centre?						
3. What is your age?						
<20						
20-35						
35-50						
51-65						
66-80						
80>						
4. Gender						
Male						
Female						

Maggie's Dundee Garden Questionnaire 2011						
3. The garden spaces at Maggie's Dundee						
Please tell us which parts of the garden you have used and why.						
1. Describe your first impressions of the garden at the centre.						
2. Have you spent time in the garden spaces? If yes, please tell us where and why.						
3. Which areas or aspects of the garden do you like the most?						
E						
4. Are there areas or aspects of the garden you would like to change? If so, why?						
Y						
5. If you have not spent time in the garden spaces please tell us what prevents you?						

Maggie's Dundee Garden Questionnaire 2011
4. The impact of the garden on the life and work of the centre
Some people tell us that the garden contributes to the special character of Maggie's Dundee. Please tell us what you think.
1. The garden spaces are welcoming and easily accessible.
Disagree
Slightly agree
Agree
Strongly agree
2. The garden helps to create a calm environment and provides important 'quiet space'.
Disagree
Slightly agree
Agree
Strongly agree
3. The views of landscape and greenery from within the building are important.
Disagree
Slightly agree
Agree
Strongly agree
4. The garden provides a focus and space to encourage open conversation, as well as
access to natural light and fresh air.
Disagree Slightly agree
Agree
strongly agree

laggie's Dunde	e Garden Questionnaire 2011
5. There are suit	able places to sit outdoors.
Disagree	
Slightly agree	
Agree	
Strongly agree	
6. The design an	d planting can offer symbols helpful to people dealing with difficult
issues.	
Disagree	
Slightly agree	
Agree	
Strongly agree	
8. Are there any	aspects of the garden that remind you of other places/ times?

aggie's Dundee Ga	arden Questionnaire 2011
. Gardens and well-b	
aditionally hospitals and health hat do you think?	ncare centres have included gardens in the belief that they have restorative qualities.
1. Gardens can help t	o enhance a supportive and healing environment.
Disagree	
Slightly agree	
Agree	
Strongly agree	
2. What does a calmin	ng or restorative garden mean to you?
	A W
2 How do gardons an	─────────────────────────────────────
experiences and view	
_	<u> </u>
4. If you have any furt	ther comments please add them here.
	

5E: Sample of the framework used to process, tabulate and analyse the qualitative data from the interviews and photo-elicitation

All the qualitative data was put into frameworks for each case study. This "snapshot" is taken from the framework analysis for Maggie's London of interviewees ML9-ML17 and includes the tabulation of their comments across the three frameworks used for this research.

Comments and experiences of key features and spaces of the garden

Identity	Sample details	Main outdoor space	Path way & entrance	Internal courtyards	First floor balconies	Sound	Colour of walls
ML9	Male, prostate cancer. Has attended the centre for over a year. Lives only 10 mins away.	The walk way, the winding path, beautiful. I have sat outside possibly twice.	The walk way, the winding path, beautiful. It is so bright. This is a great idea. There are no grim corners. I can't imagine it without plants. The entrance walkway – on my first visit it was a bright summer day and the sun on the orange – I thought this beautiful!				It is so bright. This is a great idea. There are no grim corners. I can't imagine it without plants. The entrance walkway – on my first visit it was a bright summer day and the sun on the orange – I thought this beautiful!
ML10	Female, first time visitor	The moment I found the path it was like stepping into a different place.	The moment I found the path it was like stepping into a different place.				
ML11	Female, visited the centre a couple of times with her husband. Attending gardening club for first time.						
ML12	The crochet group: 4 regular visitors, 3 female, 1 male						
ML13	Female, visited centre for 1st time 3 weeks ago. Receiving weekly radiotherapy and visits the centre before she makes her long (2 bus rides) home.			The first time I came I sat out in the courtyard as the door was open and I liked the fresh air.			

Identity	Sample	Main outdoor	Path way &	Internal	First floor	Sound	Colour of
ML14	details Male, 3'a time has visited the centre (f1st time was 3 weeks ago).	space I sit out here to have a smoke.	entrance I like the entrance. The orange is great. The first time I walked along the road because I couldn't find the entrance to the centreWhen I left I discovered the winding path which I really like.	courtyards I often sit in the courtyard. I love the plants. I sit outside whenever I can.	balconies		walls The orange is great.
ML15	Female, diagnosed in June 09, attended centre regularly during treatment as a place to 'chill out'. Has attended Tai chi & art therapy classes. Is a keen gardener.	The winding path – I do stop and look at the plant association. It slows me down. I am a 'rushy' sort of person. It allows me to pause, to take a breath. I like it all. I like the associations, the different colour mixes, the contrast. It's not just as if someone has 'plonked' a few cyclamens here	The first time I came to Maggie's I had just been told. I was in a state of shockI struggled to find my way the first time – I couldn't find the entrance. I was not conscious of the gardens at all at that time.	I love the wood fire too.		I don't notice the noise.	I like the colour of the wall. Because it totally distinguishes it. It is easy to describe to other people. It works very well. I wouldn't in a million years have chosen the colour but
ML16	Female, regular visitor	I love the woodland path. Mine is very like it. My garden inspired this garden and it inspired mine! I love the north facing hydrangea because it has been difficult to thrived as in my own garden. I like to check on it. I love the walk. Its right in the middle of London. The noise of the traffic is somehow ameliorated. That's what that garden is – it's a reassurance.				Its right in the middle of London. The noise of the traffic is somehow ameliorated. That's what that garden is – it's a reassurance.	

Identity	Sample details	Main outdoor	Path way & entrance	Internal	First floor balconies	Sound	Colour of walls
M17	Female, ovarian cancer, visited centre for a stress management course. Is a gardener.	space I went outside the building and walked to clear my head.	entrance	courtyards I attended the stress management course and we used the courtyard during our breaks but it was too cramped and I went outside the building and walked to clear my head.	Darconies		walis
				And the architecture – its an interesting place. I do wish the courtyard was bigger. I know it fits with the scale but a bigger courtyard space would be good. I like sitting here, at the top of the table and looking out. There is a community here.			

The garden's relationships to the life and work of the centre

Identity	Sample details	Green spaces support work of centre	Sense of ownership	Provides something to focus on / point of conversation	Creates sense of calmness, privacy, containment	Contributes to the special character of the centre	Gardens are inviting and create curiosity
ML9	Male, prostate cancer. Has attended the centre for over a year. Lives only 10 mins away.	It is so bright. This is a great idea. There are no grim corners. I can't imagine it without plants. The entrance walkway – on my first visit it was a bright summer day and the sun on the orange – I thought this beautiful!		Conversation	I always like it when the fire is on in the winter. Wonderful when you come in.	On every visit I always look at the plants. Marvellous. Last year the large leaves were all dead, I think they needed watering and then I came in one day and they were all ok. It is so bright. This is a great idea. There are no grim corners. I can't imagine it without plants. The entrance walkway – on my first visit it was a bright summer day and the sun on the orange – I thought this beautiful!	
ML10	Female, first time visitor				It is vibrant yet calming. And the light, even on a dull day like today it is busy, vibrant yet restful. Although a lot is going on, not disturbing.	The moment I found the path it was like stepping into a different place. It is vibrant yet calming. And the light, even on a dull day like today it is busy, vibrant yet restful. Although a lot is going on, not disturbing.	
ML11	Female, visited the centre a couple of times with her husband. Attending gardening club for first time.	Its [the centre] an oasis. There are lots of ideas here for my own garden. It is inspirational. It's a comfortable place Such a contrast to the main hospital where I am receiving treatment.			Its [the centre] an oasisIt is inspirational. It's a comfortable place Such a contrast to the main hospital where I am receiving treatment.	Its [the centre] an oasis There are lots of ideas here for my own garden It is inspirational It's a comfortable place Such a contrast to the main hospital where I am receiving treatment.	

Identity	Sample details	Green spaces support work of centre	Sense of ownership	Provides something to focus on / point of conversation	Creates sense of calmness, privacy, containment	Contributes to the special character of the centre	Gardens are inviting and create curiosity
ML12	The crochet group: 4 regular visitors, 3 female, 1 male	It's an oasis. It's our space. We come every Wednesday. It's a place to calm down in — to come down to an even level. I can't imagine it without the green spaces/ garden. It would be flat without the gardens.	It's our space. We come every Wednesday.		It's an oasisIt's a place to calm down in – to come down to an even level. I can't imagine it without the green spaces/ garden. It would be <u>flat</u> without the gardens.	It's an oasis can't imagine it without the green spaces/ garden. It would be flat without the gardens.	
ML13	Female, visited centre for 1st time 3 weeks ago. Receiving weekly radiotherapy and visits the centre before she makes her long (2 bus rides) home.	The centre is uplifting and positive. Full of light, very warm and friendly.			It is good to be able to come to a place to calm down – before making my journey home. I always feel a bit wobbly when I get off the metal bed.	The centre is uplifting and positive. Full of light, very warm and friendly.	
ML14	Male, 3 rd time has visited the centre (f1st time was 3 weeks ago).	I love the plants. They make the building Plants make a place feel alive.				I love the plants. They make the building Plants make a place feel alive.	
ML15	Female, diagnosed in June 09, attended centre regularly during treatment as a place to 'chill out'. Has attended Tai chi & art therapy classes. Is a keen gardener.	I remember when I first came. It lifted the spirits. Coming in now I look at the planting and think 'I must do that at home'. It does make a difference. The garden is important before and after treatment. During treatment I felt cold and I lost my finger nails. I found going out in the fresh air caused my eyes and nose to stream.			I just find the greenery very soothing. No particular spot. The winding path – I do stop and look at the plant association. It slows me down. I am a 'rushy' sort of person. It allows me to pause, to take a breath.	I remember when I first came. It lifted the spirits. Coming in now I look at the planting and think 'I must do that at home'. It does make a difference. The scale is important – there is enough to make an impact – a statement. It's the scale that works so well. It is informal yet quite clearly thought through. It does make a big different. The rest of the hospital is so cold and clinical. This separates it from the hospital.	

Identity	Sample details	Green spaces support work	Sense of ownership	Provides something to focus on / point	Creates sense of calmness, privacy,	Contributes to the special character of	Gardens are inviting and create
M16	Female, regular visitor	of centre The garden space is more important that the building, right from the start — because I didn't have to do anything. I could stop and look.		of conversation Because I didn't have to do anything. I could stop and look.	containment That's what that garden is – it's a reassurance. If we died it would look like that not neglected but real. Its great power, beauty, reassurance, sanctuary. It encapsulates an English woodland. Since then I have come to like the inside of the building – the people have become very precious. But the garden has a special place it is truly personal and private. The loving boundary that is present inside (I don't impose difficult things or feelings on the people) isn't there in the garden.	The garden space is more important that the building, right from the start – because I didn't have to do anything. I could stop and look. I had not long got my own garden. With my diagnosis and poor prognosis I kept thinking about developing the idea of a woodland garden and that I would never see it mature and develop. I've done quite a lot of it. I would just hope that people don't get too 'boxed' here. People like [the centre head] who is very grounded keep the place 'unlovely and real'. Maggie's is basic, rich and real. One of the benefits is that the garden relies on volunteers and its haphazard. It's the bare bones. Its healthy – not too much over interest or over working	curiosity

Identity	Sample details	Green spaces support work of centre	Sense of ownership	Provides something to focus on / point of conversation	Creates sense of calmness, privacy, containment	Contributes to the special character of the centre	Gardens are inviting and create curiosity
M17	Female, ovarian cancer, visited centre for a stress management course. Is a gardener.	It is a lovely space. It's a nice atmosphere here – the garden contributes. There is a sense of peace. Its special. The greenery – it all fits. It lifts – its not overwhelming, its calming. I can't imagine it without the greenery. Look at that majestic tree. Look how its moving. The greenery is the closest I get to God – its not the people, its nature, cycles, birds, purpose, never dead			It's a nice atmosphere here – the garden contributes. There is a sense of peace. Its special. This is different, this is a very personal sense of place. It lifts – its not overwhelming, its calming. I can't imagine it without the greenery. Look at that majestic tree. Look how its moving. The greenery is the closest I get to God – its not the people, its nature, cycles, birds, purpose, never dead	It is a lovely space. It's a nice atmosphere here – the garden contributes. There is a sense of peace. Its special. The greenery – it all fits. It lifts – its not overwhelming, its calming. I can't imagine it without the greenery. Look at that majestic tree. Look how its moving. The greenery is the closest I get to God – its not the people, its nature, cycles, birds, purpose, never dead	

Sensory and personal responses triggered by the garden

Identity	Sample details	Importance of natural light and presence of plants	Visual, textural, colour & seasonal contrasts	Unusual /tropical plants	Symbolism	Sensory memories
ML9	Male, prostate cancer. Has attended the centre for over a year. Lives only 10 mins away.	It is so bright. This is a great idea. There are no grim corners. I can't imagine it without plants. The entrance walkway – on my first visit it was a bright summer day and the sun on the orange – I thought this beautiful!				
ML10	Female, first time visitor	And the light, even on a dull day like today it is busy, vibrant yet restful.				
ML11	Female, visited the centre a couple of times with her husband. Attending gardening club for first time.					
ML12	The crochet group: 4 regular visitors, 3 female, 1 male	It's an oasis. It's our space. We come every Wednesday. It's a place to calm down in – to come down to an even level. I can't imagine it without the green spaces/ garden. It would be flat without the gardens.				
ML13	Female, visited centre for 1st time 3 weeks ago. Receiving weekly radiotherapy and visits the centre before she makes her long (2 bus rides) home.	The centre is uplifting and positive. Full of light, very warm and friendly.				

Identity	Sample details	Importance of natural light and presence of plants	Visual, textural, colour & seasonal contrasts	Unusual /tropical plants	Symbolism	Sensory memories
ML14	Male, 3 rd time has visited the centre (f1st time was 3 weeks ago).	I love the plants. They make the building Plants make a place feel alive.				
ML15	Female, diagnosed in June 09, attended centre regularly during treatment as a place to 'chill out'. Has attended Tai chi & art therapy classes. Is a keen gardener.	I just find the greenery very soothing. No particular spot.	I like it all. I like the associations, the different colour mixes, the contrast. It's not just as if someone has 'plonked' a few cyclamens here The scale is important – there is enough to make an impact – a statement. It's the scale that works so well. It is informal yet quite clearly thought through. It does make a big different. One thing, I haven't noticed scent in the garden here – perhaps that's because of the road. But there is plenty of colour.			

Identity Sample details Importance of natural light and presence of plants Colour & seasonal contrasts	Unusual /tropical plants	Symbolism	Sensory memories
And I like being here and you see a green thing from wherever you are. The bare bones. I love gardens in winter. I love seeing it bare and dead and thinking it won't be like that for long. Soon it will be alive and thriving. And in any old ways – through cracks (not necessarily as the gardener wants). I like the smell, the oil from the road, the dirt from the earth, the wafts of doughnut, the Thai curry – this is real life. A bit unkempt. Beautifully real.		I had not long got my own garden. With my diagnosis and poor prognosis I kept thinking about developing the idea of a woodland garden and that I would never see it mature and develop. I've done quite a lot of it. I get cross when people say its dull or its not tidy. It good for looking at our own mortality. It is very symbolic. The really important things don't feel like that I and think 'fxxx it' but the garden is like the reality — our children The last thing I think of when I leave and when I arrive at Maggie's is 'when I died, this will still be here, I don't mean Maggie's itself — the building or garden — I mean this cycle'	

Identity	Sample details	Importance of natural light and presence of plants	Visual, textural, colour & seasonal contrasts	Unusual /tropical plants	Symbolism	Sensory memories
M17	Female, ovarian cancer, visited centre for a stress management course. Is a gardener.				I once visited the Hindu Temple in Neasden. Inside the temple – I had never been to a place that felt so spiritual. I mean I was angry that the people who had made the carvings had been exploited but I found the place lifted you into another realm. There is something about that here. The greenery – it all fits. It lifts – its not overwhelming, its calming. I can't imagine it without the greenery. Look at that majestic tree. Look how its moving. The greenery is the closest I get to God – its not the people, its nature, cycles, birds, purpose, never dead	This is different. This is a very personal sense of place.

5F: Sample photo-elicitation interview from Maggie's Cheltenham

Maggie's Cheltenham

ML18, female cancer patient, (only recently visited for first time)

11 October 2011



I am impressed with the colours. I love the profusion of colour and am naturally draw to that. It jumps out at you walking up the path.



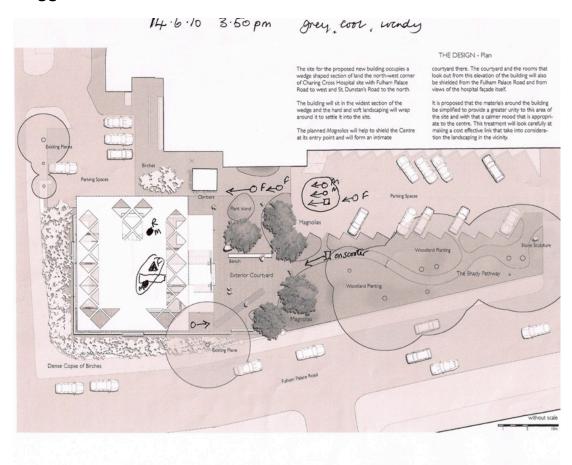
I think this one talks about longevity. Just the size. An old tree. Some things are here before and after us. It is big and solid. With this photo I wanted to get the roots and to focus on the trunk.

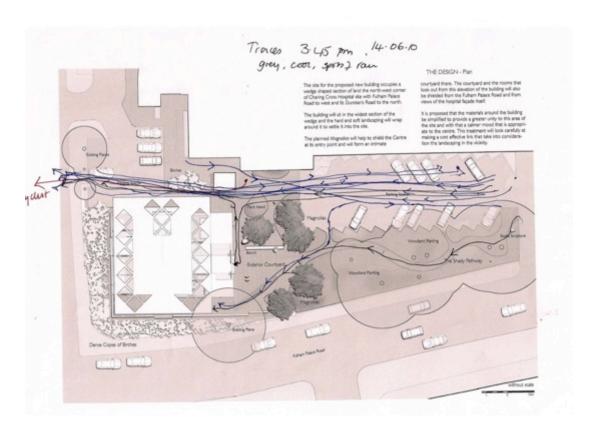


The water ... my daughter loves the water and she is really attracted to it and can't walk past it without putting her hands in it.

Originally I saw my reflection but I wanted to remove myself. I just wanted the water in the photo.

5G: Sample space syntax observations (Snapshots & Traces) from Maggie's London





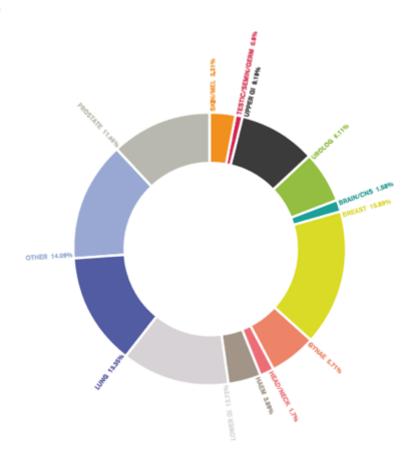
5H: Sample Maggie's Audit 2011 (including questions about the garden spaces)

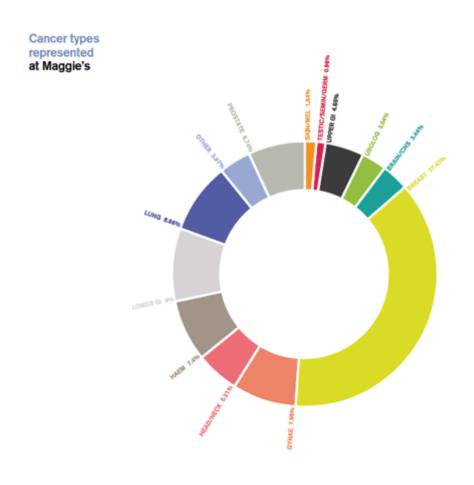
What do you think of Maggie's?	No. 1) 20
Your feedback is important. It helps us make sure our centres are offering the support you need. Everything you say in this questionnaire is confidential.	
1. What is your postcode?()()()()()()	
2. Are you	
A person with cancer? A person who has had cancer? A family member of someone with cancer? () Are you a family friend of someone with cancer? A person who has had someone die of cancer? A person who had cancer before 18yrs. of age?	()
3. Are you male () or female? ()	
4. What is your age? Under 20 () 20-35 () 36-50 () 51-65 () 66-80 () Over 80 ()	
5. How many times have you used the centre? First visit today () 2-8 times () Over 8 times ()	
7. How much have your cancer support needs been met by visiting Maggie's? Significantly () Very much () Somewhat () Not at all ()	
8. How did you find out about Maggie's? (Please tick the ones that apply to you)	
Doctor () Nurse ()	
Leaflets or posters ()	
Family or friends ()	
Someone already using Maggie's	
Newspaper, radio, TV () Website ()	
Other	
9. Why did you come to Maggie's? (Please tick the ones that apply to you) Today On your first visit	
Information () ()	
Drop-in support from Cancer Specialists ()	
Courses or workshops () ()	
Groups () () To meet other people with cancer or carers () ()	
Specific advice (e.g. benefits advice) () ()	
To see a psychologist () ()	
Access to a quiet space () ()	
Access to a garden or green space () () Other ()	
Other()	

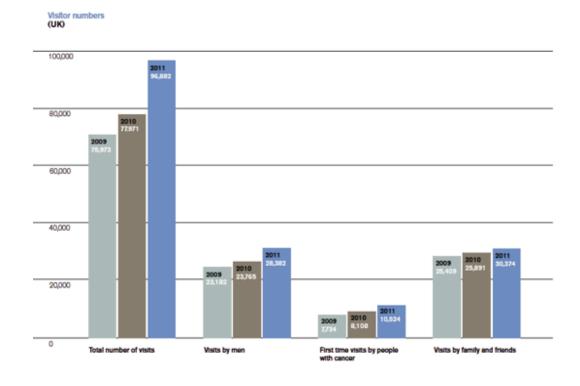
10. How have you found the support we of						
	Very helpful	Helpful	Somewh helpful	iat Unh	elpful Ver	y unhelpful
nformation	()	()	()	()	()	
Prop-in support from Cancer Specialists	Ö	Ö	Ö	Ö		
ourses and workshops	()	()	Ö	Ö	Ö	
roups	()	()	()	()	Ö	
eeting other people with cancer or carers	()	()	()	()	()	
pecific advice (e.g. benefits advice)	()	()	()	()	()	
eeing a psychologist ccess to a quiet space	()	()	()	()	Ω	
ccess to a quiet space ccess to a garden or green space	()	()	()	()	()	
Other	()	()	()	()	()	
	. ,	()	()	()	()	
. To what extent has Maggie's helped yo	u to					
			Ve	ry much	Somewhat	Not at a
a. Improve your understanding of cancer	?			()	()	()
Improve your confidence speaking wit Improve your confidence talking about	h your medic	al team?		()	()	()
 Improve your confidence talking about family 	cancer with	friends and		()	()	()
d. Improve your ability to manage stress')			()		
e. Improve your household income via ac	: fvice on heni	efit entitlem	ente	()	()	()
	21100 011 0011	SHE CHARGOIN	CHIO	()	()	()
and other financial support?					. ,	
- , 55				()	()	()
f. Feel less alone? 2. How might we improve Maggie's?					()	••••
f. Feel less alone? 2. How might we improve Maggie's? 3. What do you think of the Maggie's build	ling and the	way it is fu	ırnished?		()	
f. Feel less alone? 2. How might we improve Maggie's? 3. What do you think of the Maggie's build	ling and the	way it is fu	ırnished?		()	
f. Feel less alone? 2. How might we improve Maggie's? 3. What do you think of the Maggie's build	ling and the	way it is fu	ırnished?		()	
f. Feel less alone? 2. How might we improve Maggie's? 3. What do you think of the Maggie's build	ling and the	way it is fu	ırnished?		()	
f. Feel less alone? 2. How might we improve Maggie's? 5. What do you think of the Maggie's build 6. What do you think of the Maggie's garde	ling and the	way it is fu	irnished?	lanted?	()	
f. Feel less alone? 2. How might we improve Maggie's? 3. What do you think of the Maggie's build 4. What do you think of the Maggie's garde	ling and the	way it is fu	irnished?	lanted?	()	
f. Feel less alone? 2. How might we improve Maggie's? 3. What do you think of the Maggie's build. 4. What do you think of the Maggie's garde	ling and the	way it is fu	urnished?	lanted?	()	
f. Feel less alone? 2. How might we improve Maggie's? 3. What do you think of the Maggie's build. 4. What do you think of the Maggie's garde	ling and the	way it is fu	urnished?	lanted?	()	
f. Feel less alone? . How might we improve Maggie's? . What do you think of the Maggie's build. . What do you think of the Maggie's garde	ling and the	way it is fu	rnished?	lanted?	()	
f. Feel less alone? How might we improve Maggie's? What do you think of the Maggie's build What do you think of the Maggie's garde	ling and the	way it is fu	rnished?	lanted?	()	
f. Feel less alone? 2. How might we improve Maggie's?	ling and the	way it is fu	rnished?	lanted?	()	

APPENDIX 6
Statistics from The Maggie's Cancer Caring Centre

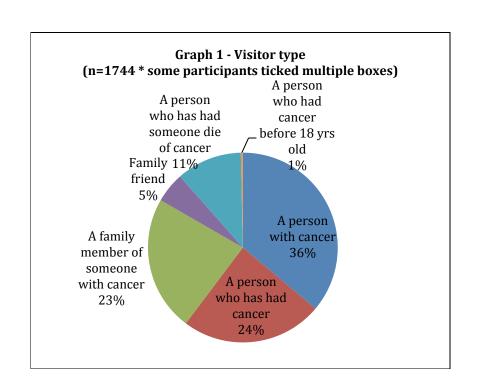
Cancer types represented as national average

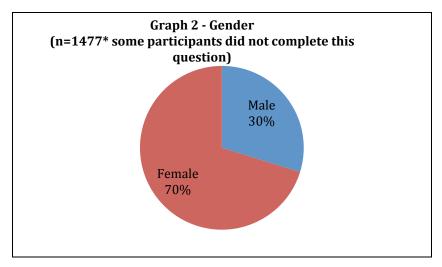


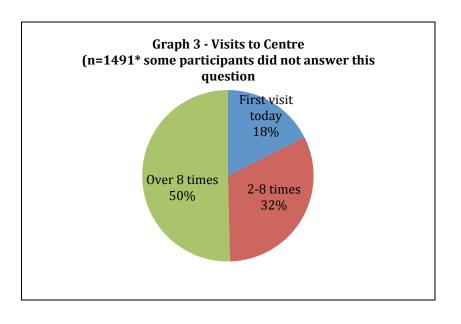


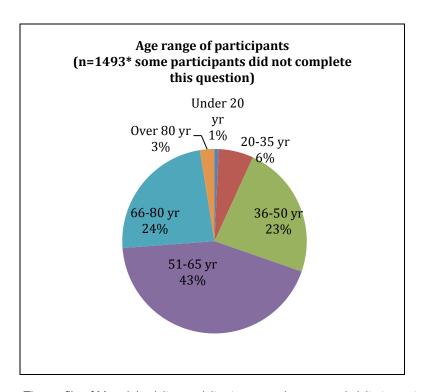


Annual Report 2011-12 (Maggie's 2012a: 7). Reproduced by kind permission of the Maggie's Centres.







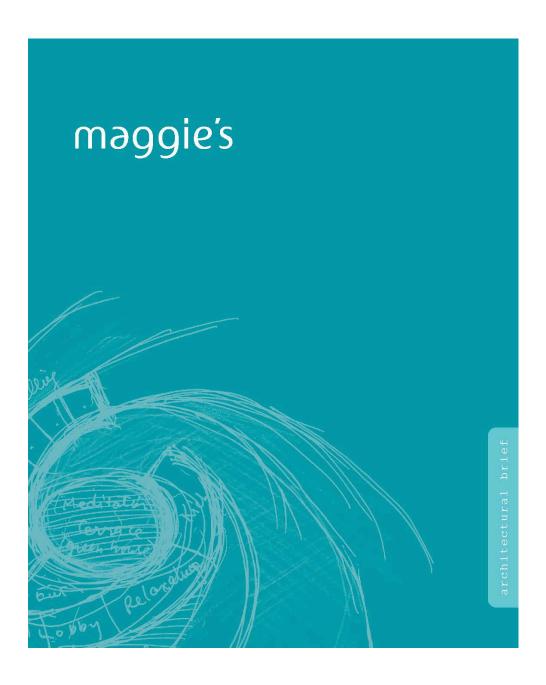


The profile of Maggie's visitors - visitor type, gender, age and visits to centre. All graphs taken from the *Annual Audit Report 2011* (Maggie's, 2011: 6-7). Reproduced by kind permission of the Maggie's Centres.

APPENDIX 7 Maggie's Architectural Brief

Appendix 7A Maggie's Architectural Brief (2013)

Available to download at Maggie's Online (2013) [Accessed 12 December 2013]. Reproduced by kind permission of the Maggie's Centres.



MAGGIE'S CANCER CARING CENTRES

Maggie's asks a lot of its buildings and hence of its architects. We expect the physical space to do a significant amount of our work for us.

A Maggie's Centre sets the scene for people going through a traumatic experience. They are places where people draw on strengths they may not have realised they had in order to maximise their own capacity to cope.

We need buildings where people can read themselves differently, as individuals in unusually difficult circumstances, not as patients, let alone cancer victims.

We identify ourselves in different ways and one of them is by our environment. This is why we choose architects who we think will rise to the challenge of making spaces for us which help this transition and also do apparently contradictory things.

We need our buildings to feel safe and welcoming. They need to be small, and domestic in scale. On the other hand these little buildings should not pat you on the head, patronise you by being too cosy. They should rise to the occasion, just as you, the person needing help, is having to rise to the occasion of one of the most difficult challenges any of us is likely to have to face. At the very least they should raise your spirits.

What we're also looking for in our architects is an attitude. We want people to deliver the brief but without preconceived ideas. We don't want to say to them: 'This is the way it is done'. We want them to open our eyes as well.

Maggie's was lucky in our architect for the first Maggie's, Richard Murphy in Edinburgh, who showed us how much a building can achieve by creating the right atmosphere.

We were also lucky to be able to draw on the close friendships of Maggie and Charles Jencks with some of the most imaginative architects working in the world today, and who have reinforced for us how much a good building can do.

We hadn't realised, until it happened, how powerful a tool it would be that each community feels so proud of its Maggie's. This works on multiple levels. Critical to the success of Maggie's is a strong feeling of ownership by the local community. It makes people feel: 'This place is wonderful and it belongs to me, and to other people in the same boat as me'. They want to come in. It provides one positive thing to look forward to in their trek to the hospital. It is critical, also, because people talk about their Maggie's. The Centres do our 'marketing' for us. Crucially, these special, unique buildings help us to raise the money we need to build them in the first place, and then to keep them running.

Our buildings are special and we chose special architects, not for some luxury add-on value, but because they are a critical component of what we do.

THE ARCHITECTURAL BRIEF

PURPOSE OF MAGGIE'S CENTRES

- To provide non-residential support and information facilities for people with cancer, and for their families and friends.
- The building will offer its users a calm friendly space where each individual can decide what strategy they want to adopt to support their medical treatment and their overall welfare.
- They will be able, if they so wish, to have a private conversation with the programme director or the clinical psychologist about their situation and needs.
- On offer within the building will be a free programme, which will include group support, family and friends support, relaxation sessions, information access and benefits advice. (See Maggie's Centre booklets and website for programme and timetables.)
- People may choose to do any of this programme or none of it. Some will want to use the Centre to have a cup of tea and a quiet pause. Others will be helped by offering volunteer services themselves, such as gardening. And others, again, will want to join support groups and actively participate.
- We do not want to suggest there are better or worse ways of dealing with cancer. Any way that helps anybody going through cancer to feel better is fine, with the important proviso that any service offered in the building will be approved by the Professional Advisory Board and will be complementary and not alternative to orthodox medical treatment.
- Approximate size of a Maggie's Centre is 280m²

We need our buildings to recognise that the world of the hospital and a cancer diagnosis turn your personal world upside down, and that in deciding to walk through the door of a Maggie's Centre people are saying to themselves and to us: "I am adjusting to a difficult and unknown situation that I am finding hard to cope with on my own."

To a greater or lesser degree, by walking in to a Maggie's Centre people are asking how they can put their lives back together again. They are hoping for transformation.

Giving them a place to turn to which is surprising and thoughtprovoking – and even inspiring – will give them the setting and the benchmark of qualities they will need in themselves. Knowing there is a place to turn to which is special in itself makes you feel valued.

So we want the architects to think about the person who walks in the door. We also want the buildings to be interesting enough that they are a good reason to come in rather than just 'I'm not coping'. The first clinical psychologist who worked for Maggie's, Glyn Jarvis, says that working from a Maggie's Centre means that he can start a quantum leap ahead of talking to the same people in a hospital context because people have actively chosen to come in.

Maggie's Centres and the way they are designed increase the sense of connectedness between people: they are not alone in this situation and people can find ways of moving forward from the crisis of a diagnosis. The architects should be thinking about the human relationships and connections, and doing the job of helping that happen.

REQUIREMENTS FOR MAGGIE'S

- Entrance: obvious, welcoming, not intimidating.
- Small coat-hanging/brolly space.
- A welcome/sitting/information/library area, from which the layout of the rest of the building should be clear. There should be as much light as possible. There should be views out to grass/trees/sky. You should be able to see where the kitchen area is, equally the sitting room and fireplace-area (hearth & home). Maggie suggested a fish tank.
- Office space for a) Centre Head and b) fundraiser/deputy. This should be easily accessible from the welcome area so that either person working at a desk can see somebody come into the Centre, in order to welcome them. Their space should be separate enough that the welcome area does not seem like an office or a reception area. There should be storage space for stationary/pamphlets/bumph accessible to the office space. Space should be allocated for a photocopier, printer, server and other office machinery. Each workstation needs a telephone, computer point and light, shelf and drawer space. As well as the main ones there should be for 5 other workstations, which can be quite small. Can we have this many work stations without it appearing to be like a huge office which dominates the Centre? They don't have to all be in one block. Somewhere for staff to hang coats.
- A video-viewing and computer-link information area or bay for the use of 4 people, probably not all together, but within shouting distance of the programme director's office area, so that he/she can help if necessary.
- A kitchen area, like a 'country' kitchen, with room for a large table to sit 12, which could be used for demonstrations/seminars/discussion groups. The kitchen should be relaxed and inviting enough for anybody to feel welcome to help themselves to coffee or tea. A central 'island' on which cooking demonstrations could take place would be helpful.

- A large room for relaxation groups/lectures/meetings. A space sufficient to take a maximum of 14 people lying down. Storage space for relaxation/folding chairs. As much as possible, you should be able to open and shut walls (perhaps between this and welcome area/kitchen area) to have flexi-space, for more or less privacy, as occasion demands. The relaxation space should be capable of being soundproof when closed off.
- Two smaller sitting/counselling room for 12 people with a fireplace or stove. This doesn't have to be very big it makes for a friendlier atmosphere if people have to budge up a bit. Perhaps there should be dividing doors to become a second large room, although each one would need to be individually soundproof.
- Two (or one if the large room can sub-divide) small rooms for counselling or therapy, preferably with big windows looking out to grass/trees/sky. They should have a bit of character and perhaps they could have sliding doors that can be left open and be inviting when not in use. They should be soundproof. One should be able to take a treatment bed, preferably facing a window.
- Lavatories (probably 3) with washbasins and mirrors, and at least one that is big enough to take a chair and a bookshelf. They should not be all in a row with gaps under the doors. Private enough to have a cry.
- A very small quiet space to have a rest/lie down.
- Outside: garden areas and 10 parking spaces. If this is unlikely on the site, if possible make a drop-off and pick-up area and perhaps a couple of disabled spaces. We like the idea of a continuous flow between house and garden space there should be somewhere to sit, easily accessed from the kitchen. We want the garden, like the kitchen, to be an easy public space for people to share and feel refreshed by. The relationship between 'inside' and 'outside' is important. A house protects you from the 'outside'. Equally the 'outside' of a garden is a buffer to the real 'outside'. It is a place where you can feel sheltered but enjoy a bit of the kinder sides of nature. There are

practical considerations about privacy, referred to later; we also want to consider how a garden can help invite you in through the door from the street (which is always a key factor) and maybe how to incorporate parking spaces without them being too intrusive.

PRACTICALITIES

We have got to run each Maggie's Centre as economically as possible without compromising what we are trying to offer. We know that any kind of complex building costs more to build, but it will have to be borne in mind, at design level, that we have a small building budget and that subsequent building maintenance and cleaning should be as cheap as possible: wood floors/ease of access/6 light fittings preferable to 56.

It might help to think of this as a 'positive' restraint, not an economic constraint, in the sense that the aim of this project is to build a modest, humane building, which will encourage and not intimidate.

OVERALL

We want to make spaces that make people feel better rather than worse (most hospitals).

Some things are obvious:

- As much light as possible.
- Important to be able to look out and even step out from as many 'rooms' as possible into something like a garden, a courtyard, or 'nature'. At the same time, the sitting/counselling rooms (8) and (9) should have privacy, ie if they do have doors to the outside 'rooms', passers-by shouldn't intrude.
- The interior spaces shouldn't be so open to the outside that people feel naked and unprotected. They should feel safe enough inside that they can look out and even go out if they wanted...this describes a state of mind, doesn't it?

- We want to have the minimum possible 'administration office' type atmosphere. No doors with 'fundraiser' on the outside. We want the ethos and scale to be domestic. We need to think of all the aspects of hospital layouts, which reinforce 'institution' corridors, signs, secrets, confusion and then unpick them.
- As a user of the building, we want you to approach the building, and see an obvious and enticing door. When you come in, we want the first impression to be welcoming.

 People may come to 'have a look', the first time.
- ¹ We want Centre users to feel encouraged and not daunted: they are likely to be feeling frightened and very low anyway. We want them to have an idea of what is going on in the whole building when they come in. We want them to feel they have come into a family community in which they can participate, make their own tea or coffee, use a computer, sit down and borrow a book, even find somewhere they might have a sleep for half an hour. Things shouldn't be too perfect.
- The rooms used for counselling should be completely private when they are in use; but it would be no bad thing if they could be opened up when they were not. We want users to know that they can say things in confidence and be quiet, but also be conscious that other things are going on around them that they might be interested in. For instance, they might be able to see what is going on in the kitchen but will not necessarily want to participate in the kitchen chat.
- We want the building to feel like a home people wouldn't have quite dared build themselves, and which makes them feel that there is at least one positive aspect about their visit to the hospital which they may look forward to.
- We want the building to make you feel, as Maggie made you feel when you had spent time with her, more buoyant, more optimistic, that life was more 'interesting' when you left the room than when you walked into. Ambitious but possible?

Appendix 7B Proposed Design Brief for Maggie's

MAGGIE'S CENTRES

Design Brief (Re-drafted based on the findings of this research)

Note: text highlighted indicates areas re-written

Maggie's asks a lot of its buildings and landscapes and hence of its architects and garden designers. We expect the physical space, both inside and out, to do a significant amount of our work for us.

A Maggie's Centre sets the scene for people going through a traumatic experience. They are places where people draw on strengths they may not have realised they had in order to maximise their own capacity to cope.

We need buildings and landscapes where people can read themselves differently, as individuals in unusually difficult circumstances, not as patients, let alone cancer victims.

We identify ourselves in different ways and one of them is by our environment. This is why we choose designers who we think will rise to the challenge of making spaces for us which help this transition and also do apparently contradictory things.

We need our Centres to feel safe and welcoming. They need to be small, and domestic in scale. On the other hand these little places should not pat you on the head, patronise you by being too cosy. They should rise to the occasion, just as you, the person needing help, is having to rise to the occasion of one of the most difficult challenges any of us is likely to have to face. At the very least they should raise your spirits.

We need our buildings and gardens to recognise that the world of the hospital and a cancer diagnosis turn your personal world upside down, and that in deciding to walk through the door of a Maggie's Centre people are saying to themselves and to us: "I am adjusting to a difficult and unknown situation that I am finding hard to cope with on my own."

To a greater or lesser degree, by walking in to a Maggie's Centre people are asking how they can put their lives back together again. They are hoping for transformation.

Giving them a place to turn to which is surprising and thought- provoking – and even inspiring – will give them the setting and the benchmark of qualities they will need in themselves. Knowing there is a place to turn to which is special in itself makes you feel valued.

So we want the designers to think about the person who walks into the garden or through the door. We also want the buildings and gardens to be interesting enough that they are a good reason to come in rather than just 'I'm not coping'. The first clinical psychologist who worked for Maggie's, Glyn Jarvis, says that working from a Maggie's Centre means that he can start a quantum leap ahead of talking to the same people in a hospital context because people have actively chosen to come in.

Maggie's Centres and the way they are designed increase the sense of connectedness between people: they are not alone in this situation and people can find ways of moving forward from the crisis of a diagnosis. The designers should be thinking about the human relationships and connections, and doing the job of helping that happen.

What we're also looking for in our architects and garden designers is an attitude. We want people to deliver the brief but without preconceived ideas. We don't want to say to them: 'This is the way it is done'. We want them to open our eyes as well.

Maggie's was lucky in our architect for the first Maggie's, Richard Murphy in Edinburgh, who showed us how much a building can achieve by creating the right atmosphere. Since then the collaborative work of both architects and garden designers at sites such as Maggie's London and Glasgow Gartnavel have taken these ideas further.

We were also lucky to be able to draw on the close friendships of Maggie and Charles Jencks with some of the most imaginative architects working in the world today, and who have reinforced for us how much a good building can do. The thoughtful designs of garden designers such as Dan Pearson, Christine Facer and Kim Wilkie have emphasised the importance of overall site.

We hadn't realised, until it happened, how powerful a tool it would be that each community feels so proud of its Maggie's. This works on multiple levels. Critical to the

success of Maggie's is a strong feeling of ownership by the local community. It makes people feel: 'This place is wonderful and it belongs to me, and to other people in the same boat as me'. They want to come in. It provides one positive thing to look forward to in their trek to the hospital. It is critical, also, because people talk about their Maggie's. The Centres do our 'marketing' for us. Crucially, these special, unique buildings and gardens help us to raise the money we need to build them in the first place, and then to keep them running.

Our Centres are special and we chose special designers, not for some luxury add-on value, but because they are a critical component of what we do.

THE SITE DESIGN BRIEF

PURPOSE OF MAGGIE'S CENTRES

To provide non-residential support and information facilities for people with cancer, and for their families and friends.

The building and garden will offer its users calm friendly spaces where each individual can decide what strategy they want to adopt to support their medical treatment and their overall welfare.

They will be able, if they so wish, to have a private conversation with the programme director or the clinical psychologist about their situation and needs.

On offer at the Centre will be a free programme, which will include group support, family and friends support, relaxation sessions, information access and benefits advice. (See Maggie's Centre booklets and website for programme and timetables.)

People may choose to do any of this programme or none of it. Some will want to use the Centre to have a cup of tea and a quiet pause. Others will be helped by offering volunteer services themselves, such as gardening. And others, again, will want to join support groups and actively participate.

We do not want to suggest there are better or worse ways of dealing with cancer. Any way that helps anybody going through cancer to feel better is fine, with the important

proviso that any service offered at the Centres will be approved by the Professional Advisory Board and will be complementary and not alternative to orthodox medical treatment.

Approximate size of a Maggie's Centre is 280m2.

REQUIREMENTS FOR MAGGIE'S

Entrance: obvious, welcoming, not intimidating.

INSIDE

Small coat-hanging/brolly space.

A welcome/sitting/information/library area, from which the layout of the rest of the building should be clear. There should be as much light as possible. There should be views out to grass/trees/sky. You should be able to see where the kitchen area is, equally the sitting room and fireplace-area (hearth & home). Maggie suggested a fish tank.

Office space for a) Centre Head and b) fundraiser/deputy. This should be easily accessible from the welcome area so that either person working at a desk can see somebody come into the Centre, in order to welcome them. Their space should be separate enough that the welcome area does not seem like an office or a reception area. There should be storage space for stationary/pamphlets/bumph accessible to the office space. Space should be allocated for a photocopier, printer, server and other office machinery. Each workstation needs a telephone, computer point and light, shelf and drawer space. As well as the main ones there should be for 5 other workstations, which can be quite small. Can we have this many workstations without it appearing to be like a huge office which dominates the Centre? They don't have to all be in one block. Somewhere for staff to hang coats.

A video-viewing and computer-link information area or bay for the use of 4 people, probably not all together, but within shouting distance of the programme director's office area, so that he/she can help if necessary.

A kitchen area, like a 'country' kitchen, with room for a large table to sit 12, which could be used for demonstrations/seminars/discussion groups. The kitchen should be relaxed and inviting enough for anybody to feel welcome to help themselves to coffee or tea. A central 'island' on which cooking demonstrations could take place would be helpful. A large room for relaxation groups/lectures/meetings. A space sufficient to take a maximum of 14 people lying down. Storage space for relaxation/folding chairs. As much as possible, you should be able to open and shut walls (perhaps between this and welcome area/kitchen area) to have flexi-space, for more or less privacy, as occasion demands. The relaxation space should be capable of being soundproof when closed off

Two smaller sitting/counselling room for 12 people with a fireplace or stove. This doesn't have to be very big – it makes for a friendlier atmosphere if people have to budge up a bit. Perhaps there should be dividing doors to become a second large room, although each one would need to be individually soundproof.

Two (or one if the large room can sub-divide) small rooms for counselling or therapy, preferably with big windows looking out to grass/trees/sky. They should have a bit of character and perhaps they could have sliding doors that can be left open and be inviting when not in use. They should be soundproof. One should be able to take a treatment bed, preferably facing a window.

Lavatories (probably 3) with washbasins and mirrors, and at least one that is big enough to take a chair and a bookshelf. They should not be all in a row with gaps under the doors. Private enough to have a cry.

A very small quiet space to have a rest/lie down.

OUTSIDE

10 parking spaces. If this is unlikely on the site, if possible make a drop-off and pick-up area and perhaps a couple of disabled spaces.

We like the idea of a continuous flow between house and garden space there should be somewhere to sit, easily accessed from the kitchen. We want the garden, like the kitchen, to be an easy public space for people to share and feel refreshed by. The 'Maggie's kitchen garden' is introduced to express this type of space. This is a new and more expansive interpretation of the idea of the kitchen garden; one that may

include growing flowers, fruit and vegetables but which is also about a very special 'place apart' in fresh air.

The relationship between 'inside' and 'outside' is important. A house protects you from the 'outside'. Equally the 'outside' of a garden is a buffer to the real 'outside'. It is a place where you can feel sheltered but enjoy a bit of the kinder sides of nature. There are practical considerations about privacy, referred to later; we also want to consider how a garden can help invite you in through the door from the street (which is always a key factor) and maybe how to incorporate parking spaces without them being too intrusive.

We want to consider how the garden design can operate in relation to the following themes:

Thresholds

How the garden can provide spaces that are intimately connected with the activities of the organization - open yet contained. The gardens should provide a buffer zone for entering and leaving the Maggie's buildings. The outside spaces and garden features can provide landmarks and way finding for visitors to a Maggie's Centre. The garden spaces can provide a particular type of sanctuary.

The provision of sheltered (from sun) and protected (from wind and rain) outdoor spaces or conservatories, where people can sit out in the fresh air all year round, is important.

Sensory Richness

Careful attention needs to be given to the sensory presence of plants and materials within the garden. How the gardens can provide opportunities for sensory moments, helping to provide a calm, soft space for visitors and staff, both inside and out. This suggests an emphasis on sensory richness (colour, sound, fragrance, texture), opportunities for sun, warmth, coolness and shade, and a garden that is 'in action' in all seasons. Consideration as to how the garden can contribute to sensory qualities (not just visual) – that 'inside outside feel'. Also the inclusion of 'practical' and edible plants. Consideration also for the inclusion of water features.

The Density of Time

Seasonal change and cycles within the garden can be helpful to visitors and staff. It is important that the role of the garden in both winter and summer is considered. Strong symbolism and memorials should be avoided. Consideration should be given to how the garden spaces can provide opportunities for people to pause or slow down. How the garden can provide places for solitude as well as places for both staff and families to take a break. Also how the garden spaces can provide opportunities for walking, conversations and group therapeutic activities such as Tai Chi or yoga. Privacy considerations are important here.

Homeliness

The role of the garden in providing comfortable, intimate, 'homely' places should be considered. How the garden can contribute to the idea of sanctuary conveying both a sense of intimacy and interconnectedness. That the garden can enhance feelings of homeliness and set a tone and assist people (staff, patients and family members) in feeling more comfortable and 'at home'. Perhaps the garden can perform the same role as the kitchen table within the Centre?

Care

From the outset, careful consideration should be given to how the garden might evolve and be cared for. Maggie's gardens should always feel loved. Providing opportunities for staff and visitor engagement will be important. 'Low maintenance' styles should be avoided, but at the same time, complex and strongly metaphorical designs can reduce sense of ownership and value.

PRACTICALITIES

We have got to run each Maggie's Centre as economically as possible without compromising what we are trying to offer. We know that any kind of complex design (both building and gardens) costs more to create, but it will have to be borne in mind, at design level, that we have a small budget and that subsequent building and garden maintenance and cleaning should be as cheap as possible: wood floors /ease of access /6 light fittings preferable to 56.

It might help to think of this as a 'positive' restraint, not an economic constraint, in the sense that the aim of this project is to build a modest, humane building and garden, which will encourage and not intimidate.

OVERALL

We want to make spaces that make people feel better rather than worse (most hospitals).

Some things are obvious:

As much light as possible.

Important to be able to look out — and even step out — from as many 'rooms' as possible into usable outdoor spaces (courtyards, patios and enclosed gardens). At the same time, the sitting/counselling rooms (8) and (9) should have privacy, ie if they do have doors to the outside 'rooms', passers-by shouldn't intrude.

The interior spaces shouldn't be so open to the outside that people feel naked and unprotected. They should feel safe enough inside that they can look out and even go out if they wanted...this describes a state of mind, doesn't it? Likewise, the garden spaces should also feel protected from the wider world beyond.

We want to have the minimum possible 'administration office' type atmosphere. No doors with 'fundraiser' on the outside. We want the ethos and scale to be domestic, both inside and out. We need to think of all the aspects of hospital layouts, which reinforce 'institution' – corridors, signs, secrets, confusion, low maintenance plants – and then unpick them.

As a user of the Centre, we want you to approach the site (garden and building), and see an obvious and enticing entrance. When you come in, we want the first impression to be welcoming. People may come to 'have a look', the first time.

We want Centre users to feel encouraged and not daunted: they are likely to be feeling frightened and very low anyway. We want them to have an idea of what is going on at the Centre as they approach it. We want them to feel they have come into a family community in which they can participate, make their own tea or coffee, use a computer, sit down and borrow a book, even find somewhere they might have a sleep for half an hour. Things shouldn't be too perfect.

The rooms used for counselling should be completely private when they are in use; but it would be no bad thing if they could be opened up when they were not. We want

users to know that they can say things in confidence and be quiet, but also be conscious that other things are going on around them that they might be interested in. For instance, they might be able to see what is going on in the kitchen but will not necessarily want to participate in the kitchen chat. Likewise, outdoors there should spaces for private communal activities such as Tai Chi and yoga where participants do not feel overlooked by the hospital or street. There should also be sheltered outdoor spaces that are more private for one to one conversations.

We want the Centre, both inside and out, to feel like a home people wouldn't have quite dared design themselves, and which makes them feel that there is at least one positive aspect about their visit to the hospital which they may look forward to.

We want the Centre to make you feel, as Maggie made you feel when you had spent time with her, more buoyant, more optimistic, that life was more 'interesting' when you left the room than when you walked into. Ambitious but possible?