

## HTP Focus Group

### Critical Care / Oncology terrace garden with Severn Rotary

Held on Friday 5<sup>th</sup> December 2025  
10:00 – 12:00hrs via MS Teams

#### QUESTIONS/ANSWERS

	<p><b><u>HTP Focus Group</u></b></p> <p><b><u>Critical Care / Oncology Terrace Garden with Severn Rotary</u></b></p> <p><b>Team responding to public questions</b></p> <p>Julia Clarke – (JC) Director of Public Participation Adam Ellis Morgan – (AEM) Technical Lead for HTP Ed Rysdale – (ER) Emergency Medicine Consultant and Clinical Lead for HTP Johnathan Callwood – (JCa) Director, Builder, Restorer &amp; Honorary Research Fellow, University of Chester Rotary Dr Dewi Eden – (DE) Consultant Haematologist Aaron Hyslop – (AH) Public Participation Team Facilitator Fiona Jutsum – (FJ) Consultant</p> <p><b><u>Q&amp;A's FOLLOWING PRESENTATION</u></b></p> <p><b><i>Comment: The original suggestion was three bed spaces, but if you made it two it would leave more seating for patients that aren't in a bed and for visitors to use, so two spaces are preferable.</i></b></p> <p><b><i>Comment: From the picture within the presentation, the seating does not look very high off the ground and older people would struggle to get up.</i></b></p> <p><b>A: (JC) –</b> The seating will need to be higher off the ground for easier access when visitors and patients are using.</p> <p><b>Q: What is the maximum number of people permitted in the garden?</b></p> <p><b>A:</b> The fire officer will need to sign off the plans once we have. They will always be subject to the fire department agreeing to the design. It's about means of escape for beds, staff and everything else. There will be fire alarms and emergency buttons, equally it'll be about weight distribution. Whilst it will take 10 kilonewtons (a unit of force in the International System), it depends if you come up with a design and where the weight is distributed. The key thing is to come up with a design between all of us</p>

and then present it back to the contractor and the fire officer to see if we're on the right track.

**ACTION:** Adam Ellis-Morgan and Johnathan Callwood to draft a proposal that satisfies the fire officer and the construction team to make sure all the weight is evenly distributed so that we don't have it all in one area.

**Comment:** Any comments or suggestions, please email Aaron Hyslop (Public Participation Team Facilitator) [aaron.hyslop@nhs.net](mailto:aaron.hyslop@nhs.net)

**Q:** Is it ok to have birds, bees and butterflies outside the critical care unit, as a lot of the plants will be pollinators and these kinds of things matter as it helps people connect with nature?

**A:** (Fiona) Yes

**Comment:** The bench seating outside looks uncomfortable with its straight lines. If a patient goes outside in a wheelchair with their family they will want to possibly sit outside also, so it needs to be comfortable seating.

**Comment:** Olive trees are low maintenance, pretty and takes years to grow.

**A:** Plants that are seasonal are very important. The space needs to be designed first, but plants are an important part of it. Designing with plants is one of the most difficult things to do because you've got to think about so much of what is involved in seasons and everything like that.

**Comment:** Leah Morgan (Cancer Survivorship Improvement Facilitator) informed the group her team work closely with a Horticultural Therapist (Occupational Therapist by background) called Alexis Stones who has had horticultural therapy courses recently funded by Lingen Davies Cancer Support. If you would like, we could reach out to her when you are ready to talk in more details about shrubs/trees/nature-based ideas.

**Comment:** Lighting is important and there would probably need to be better lighting in the places where beds will be taken due to equipment that would need to be set up properly. There could be more lighting in the rest of the garden.

**Q:** Regarding the NHS call bell systems, could it be a bell that rings in the garden which needs to ring through to either oncology or critical care or both ideally.

**A:** (JCa) – Yes it will.

**Comment:** I do the intensive care follow-up clinic, and the majority of patient suffer horrible delirium. It's a real problem and I'm slightly worried about pictures on the glass.

**A:** (AEM) – There is just plain frosted glass at the moment.

***Comment: Not sure about the name Sky Garden, for a couple of reasons. Firstly, it feels like we're on our way to heaven and secondly, again for delirious patients, if we're talking about a sky garden, I think that could be problematic.***

**A: (JC) –** For publicity it captures the imagination, but it can be called whatever the majority prefer.

**ACTION: (JCa)** agreed to change the name of the garden from Sky Garden to Terrace Garden.

***Comment: Regarding canopies, if you're taking patients outside and the weather is terrible, we must make sure we've got a canopy, but a canopy that has some privacy and is durable so we can pull the curtains around.***

***Comment: If you did have the piped oxygen, it could be very near to the wall, and we've got long tubing that we would use.***

**A: (AEM) –** This was to do with the weather as it must be frost rated so it's a different system altogether and equally it needs the approval of the fire officer.

**ACTION: To discuss options with Kate Tantom**