THE PRINCESS MARGARET HOSPITAL, SWINDON

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FIG. 1.—Entrance hall.

The Princess Margaret Hospital is the first modern general hospital to be built under the National Health Service. When the second stage is completed in 1963 there will be 316 beds. Further stages, which will probably embody maternity, geriatric and pediatric units, will be added in the following years, so that there may eventually be 700-750 beds.

The hospital is being built on an open site on the outskirts of Swindon, with wide views over the surrounding countryside. Powell and Moya, the architects, who have designed it for the Oxford Regional Hospital Board in collaboration with Mr. Richard Llewellyn Davies, of the Nuffield Foundation, and Mr. Jobson, the board's architect, have made the most of an opportunity for which many of their colleagues have been waiting for years, and have risen to the occasion magnificently.

The entrance hall is striking and spacious (Fig. 1). A large reception desk and a buffet run along one side, while huge windows on the other look out on to a central courtyard where fountains are playing. The consulting rooms are served by

small waiting recesses for the patients (Fig. 2), each of which is furnished in a distinctive hue, so that patients can easily find it. Comfortable modern chairs are grouped round a central table. In the consulting rooms, each couch is covered by a fresh paper sheet for each patient, obtained from a continuous roll in a paper dispenser.

The first block to be completed also contains the casualty and orthopaedic departments, receiving patients from a wide area of South-West England in which there are many important main roads. It has 32 beds arranged in two groups, each containing two six-bedded bays and one four-bedded bay with the nurses' station and a common day-room in between. The latter contains a silent television set, the sound being picked up by headphones from connections on the walls (Fig. 3). In addition, there are seven single-bedded rooms, two being soundproofed and two having private lavatories, a treatment room, a preparation room and a utility room, as well as one for the sister and one for the doctor side by side. The nurses are grouped into four teams. In this way great

FIG. 2.—Waiting recess.

FIG. 3.—Common day-room.

flexibility is ensured, it being possible to vary the number of men, women and children admitted from time to time with very little readjustment. Moreover, this unit of 39 beds embodies many new ideas which can be put into practice on a small scale before being adopted for use in the final design. When the next stage of the hospital

is completed, this unit will become the records office.

From their beds the patients look out over the surrounding countryside from large glass windows, easily controllable blinds being provided. Fig. 4. Each bed has an anglepoise lamp, a plastic curtain and a locker of new design, there being a compart-

FIG. 4.—Six-bedded bay.

ment in the back for hanging a suit, as well as a drawer and a shelf. Handbasins with paper towels and plugs for electric razors are provided. Heating is provided in the floors which are of compressed cork tiles (it will be interesting to hear the reactions of the nursing staff to this method of heating). All doors are faced with Formica. The ceilings have not been covered with noise-absorbing tiles.

A central sterile supply department is to supply the entire hospital. This contains an ultrasonic cleaner for instruments and a continental autoclave with a 22-minute cycle. Sterilized equipment is fed into closed trolleys for distribution. Heat-sealed plastic packs are provided containing disposable metal-foil gallipots and presterilized syringes supplied commercially.

In the accident department, access from the ambulances leads to a resuscitation room and

treatment rooms grouped round the main theatres with X-ray rooms alongside. A large gymnasium has an exercise area on the flat roof above.

The unit record system is to be used with 'compactus' storage shelving in the records office, the patients' details being stamped on documents by an addressograph machine.

Everywhere are light, air, colour and splendid views. The careful breakdown of the whole into small functional units within a unified design has been remarkably successful, so that it will be surprising if the patient does not feel that his individual requirements have been met within the framework of a large and magnificently impressive building. If this is to be taken as a forecast of what our hospital architects, so long starved of opportunities, can achieve in the future, it is a very hopeful portent indeed.

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