

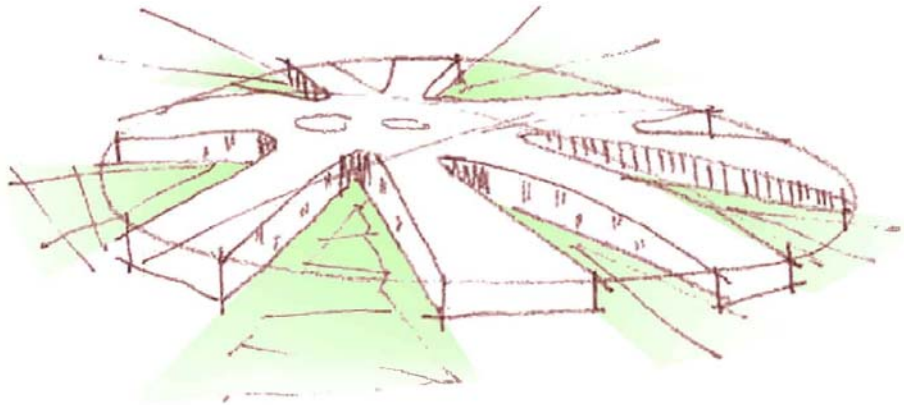
The New Alexandria Health and Care Centre

*Delivering Excellence from the
Heart of the Vale*



Design and Access Statement

May 2011



Submitted on behalf of West Dunbartonshire Community Health & Care
Partnership (CHCP)/ NHS Greater Glasgow & Clyde by

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1.0 Introduction

The delivery of a new Alexandria Health and Care Centre is an explicit commitment within the NHS Greater Glasgow & Clyde (NHSGGC) Vision for the Vale (as approved by the Scottish Government); and is the top capital development priority for West Dunbartonshire Community Health & Care Partnership (WD CHCP) as reflected within its overall Strategic Plan.

The Vision for this new Alexandria Health and Care Centre is that it be a place that is welcoming, reassuring and revitalising for its patients and their carers; its staff; and visitors from the wider community. It is being designed so as to effectively and imaginatively meet the current and developing needs and expectations of the local population – and it will do this by:

- Ensuring a clear focus on the provision of excellent and continuously improving health and care services as an integral element of a positive patient experience.
- Providing a flexible base for a range of increasingly integrated and multi-disciplinary health and care services.
- Stimulating inter-disciplinary learning and networking through the optimal provision and creative use of shared and common space.
- Empowering patients and visitors with clear information and diverse opportunities to make informed choices about their care and their health.

A guiding principle for this project has been that of “form following function”.

Consequently the fundamental elements above have been explicitly used as high-level decision rules throughout all aspects of the design process (as recommended by Architecture and Design Scotland); and clearly communicated to all stakeholders on an on-going basis. The design is the product of an intensive and comprehensive stakeholder engagement process, both in terms of the constituent staff/services who will be operating within this new Centre and the local communities who will be served by it (as summarised within the separately prepared Pre-Application Consultation

report). It has also taken inspiration from exemplar health centres identified from across the United Kingdom; and been informed by best practice guidance from authoritative bodies (e.g. the King's Fund; and the Commission for Architecture & the Built Environment).

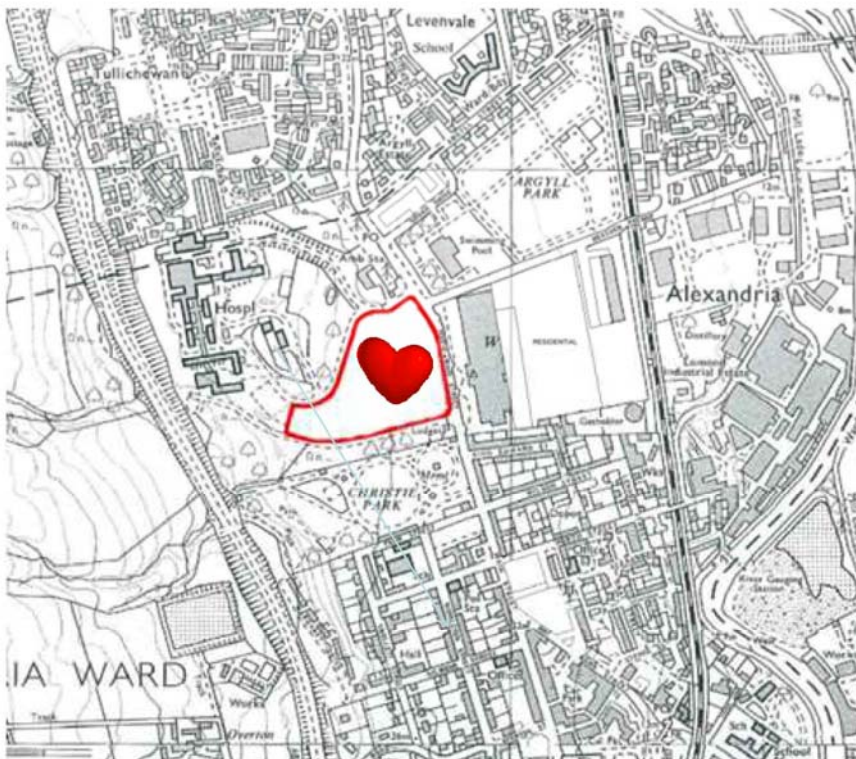
2.0 Use

2.1 Location

The location selected for the new Centre reflects both the outcome of a thorough options appraisal undertaken by NHS GGC and the explicit requirement set out within the aforementioned Vision for the Vale. Consequently locating the Centre within the Vale of Leven Hospital campus was a core element of the successful Outline Business Case for the project approved by the Scottish Government (and that has formed the basis for funding being allocated to this project by NHS GGC within its existing Capital Plan).

This location not only places the new Centre not only within the heart of Alexandria, but at the centre of the wider communities/geography of the Vale of Leven that it will serve.

Location within Town Integrate into The Community



Focus of health & wellbeing



Heart of the town



Spiritual Focus



This location also provides good pedestrian links and lies on a prominent road and bus network (all of which are being capitalised upon within the scheme presented).

2.2 Existing site

The site is located on an open area of vacant land to the south of the Vale of Leven Hospital that is currently surrounded by trees and shrubs.



On the eastern edge, a strip of existing trees separate the site from Main Street. Directly opposite on Main Street is the Grade "A" listed Argyle Motor works/ Loch Lomond outlet stores.



To the south lies Christie Park separated by a small stream. To the western edge a mature hedge strip runs around the site perimeter. Some of the trees on the

site are subject to a tree preservation order.

2.3 Proposed Use

The proposal submitted is for a new build and state-of-the-art community health and care facility within which will be based a variety of key services (as set out within the aforementioned Scottish Government approved Outline Business Case): General Practices; General Dental Practice; Dietetics; Podiatry; Speech & Language Therapy; Primary Care Mental Health; Physiotherapy; Community Dental Services; and general community consulting suites. It will also provide a local base for District Nursing, Health Visiting, Prescribing Support and Teaching facilities. The location of the Centre will also enable strong links to be fostered with the acute services operating within the main hospital buildings.

It is intended that the existing Vale of Leven Hospital access road will be used for vehicular access.

3.0 Proposed accommodation

The site is 2.95Ha in area. The proposals provide 5725sqm of accommodation over two floors, with a 3:2 proportion accommodation split between the ground and first floors. The remaining site area is to be occupied by car parking and green space.

One of the defining – and most compelling - features of the accommodation layout is that all of the public clinical functions are provided on the ground floor: thus ensuring simple and clear access for all patients/service users.

4.0 Layout

4.1 Opportunities/ Restrictions

The principle opportunity provided by the site has been the scope to develop an innovative design that:

- Optimally positions services within the facility, both to support their effectively functioning as discrete “units” and also (critically) to enable them to operate them in an efficiently integrated manner (see 4.2).
- Ensures that all of the services for the public are on the ground floor, thus optimising ease of access (as per 3.0).
- Capitalises on the green nature of the site – allowing views to trees and parkland - so as to maximise the use of natural light and ventilation - all of which enhance the *health-promoting* effect of the building itself.

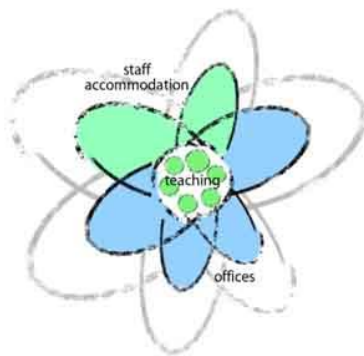
The restrictions on the site are the levels (with a fall towards the south east corner of the site) and the existing burn which has a potential to flood. The current location of trees present an opportunity for landscaping but also (currently) create some restrictions due to their proximity to Main Street.



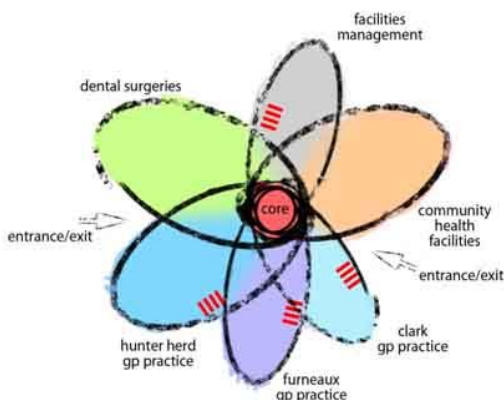
4.2 Evolution of building form

The starting point for the building’s form was to develop a clear understanding of the key spatial relationships of services and accommodation (i.e. core adjacencies) necessary in order for the overall Vision to be delivered. In addition, the CHCP has made an explicit commitment that the delivery of this Centre will reinforce its wider policy ambitions (including equality and sustainability commitments) through the achievement of an excellent BREEAM (Building Research Establishment Environmental Assessment Method) Health rating. To that end (as recommended by Architecture and Design Scotland), the CHCP set out a number of performance/criteria objectives for the Centre (to be delivered within the capital and revenue funding specified for the development) and these are set out in Appendix A.

The analysis of the critical service requirements of the facility generated two simple functionality ‘bubble’ diagrams of use around a single node (illustrated below).



upper floor arrangement



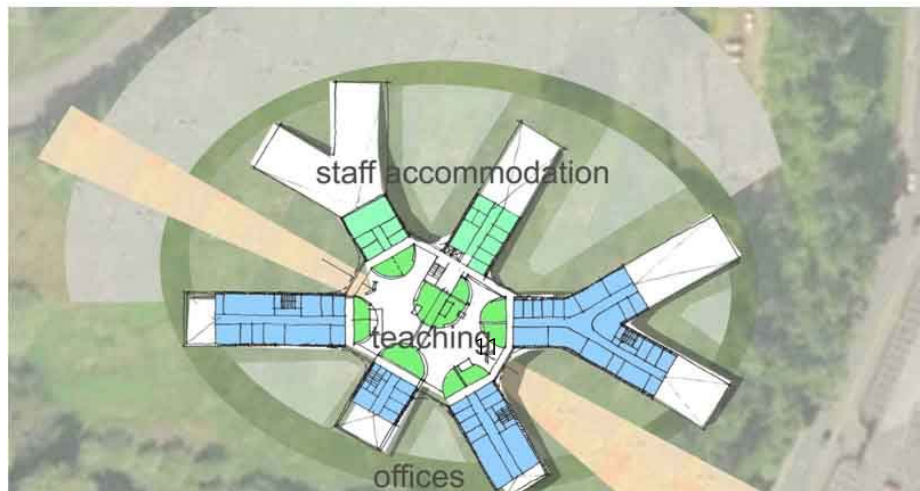
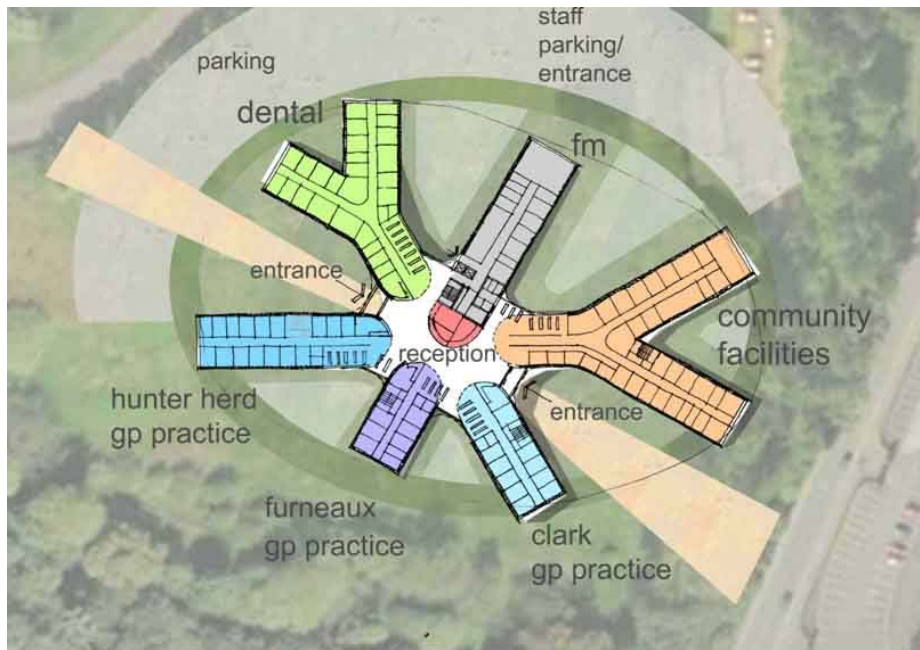
lower floor arrangement

Functionally there are six main groups within the building: three GP practices, one dental wing, one community wing and one services/facilities wing. The ground floor accommodates all of the service provision that would be accessed or provided to patients and/or their carers/families. To aid wayfinding and integrated service delivery, these functions would radiate from a single reception point.

The upper floor provides ancillary accommodation and office bases for the ground floor. The upper floor also provides the teaching/seminar/library

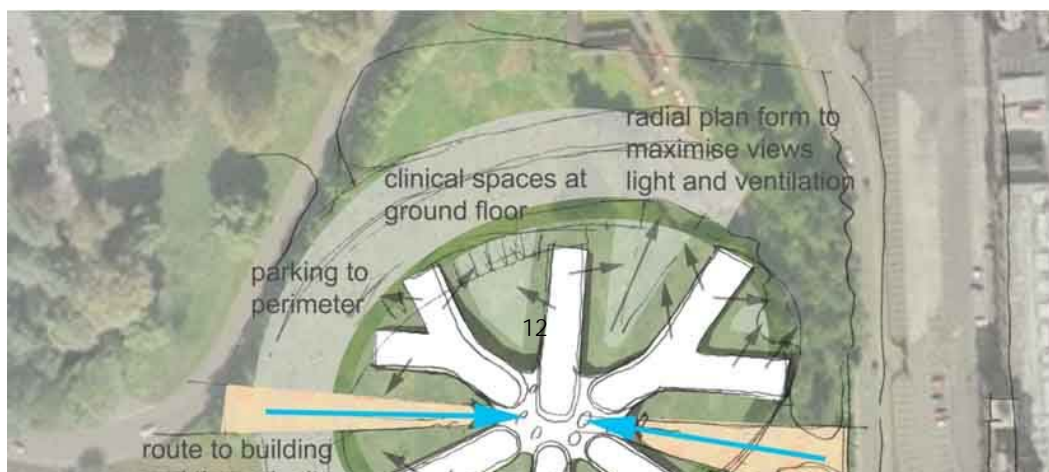
functions. These are positioned as a nodal point to act as a nexus for co-working, education and learning.

A key innovation of this scheme is that the integrity of these two functionality diagrams are have been intentionally maintained – and are clearly evident - within the final building form (as illustrated below).



The building is located so that its nodal point – i.e. its main reception - lies on a new principle route through the site. This route has then been developed as a key architectural feature to enable the Centre to present an entrance to the community while maintaining the green edged nature of the site. The main reception sits within a public concourse space from which the six wings of accommodation radiate. Circulation is simply arranged around the main reception, with waiting areas located in the wings to minimize journey times for patients and staff. Between the wings are landscaped areas which allows green spaces to feed between the elements of the building and help maintain the almost rural nature of the site. Internally fully glazed screens open up views between the wings to the garden spaces and landscape beyond (including for the waiting areas). The radiating wings maximise the views and opportunity for daylight within all of Centre's the rooms. Storage spaces are maximized in the accessible roof spaces, thus reducing clutter within the main space of the building. The whole building is design to be able to open in sections (with security measure to suit), allowing some or of all of the building to operate out of hours. The provision of a public education space on the ground floor within the public concourse allows full flexibility in the use of the spaces.

All of the aforementioned features are summarised in the illustration below.



Outwith the building and extending up to the green edges of the site is the car parking area, which is organised into three principle zones (as illustrated below).



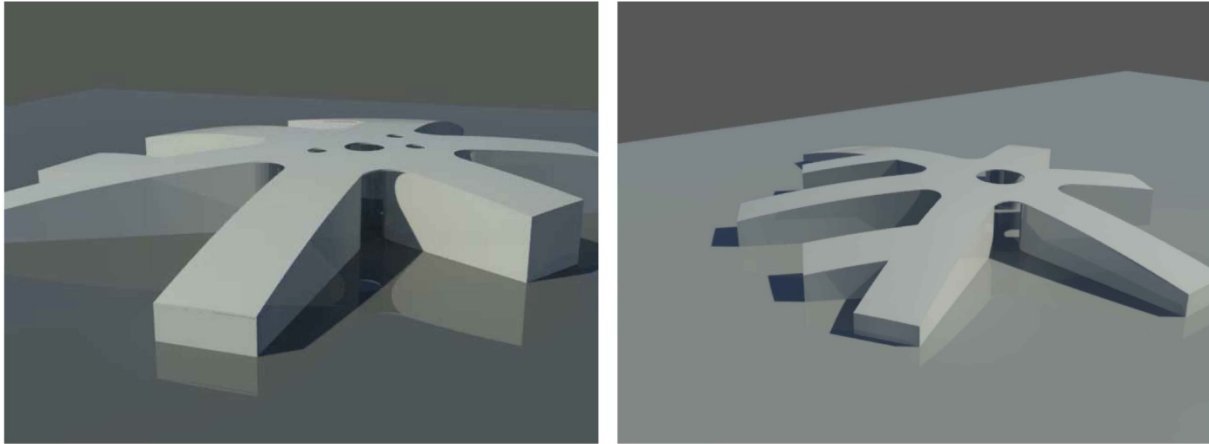
To the southwest corner sits main patient/public parking zone, with the patient drop-off point, disabled parking and ambulance bays adjacent to the west building (public)

entrance. The staff parking zone sits to the north of the building, adjacent to the facilities wing. To aide appropriate and secure access to the building a dedicated staff entrance is located on the gable of the facilities wing (intentionally separate and distant from the public entrance points). The third parking zone is for discrete (short-stay) deliveries, and sits adjacent to the "plant" areas of the facilities wing with access via a fully separate service road (running down from the north of the site).

5.0 Scale

The site is relatively hidden from the surroundings by the perimeter of trees, shrubs and parkland. It therefore has little built context in of itself: its only presence is at a proposed break in the trees where the building gable would be visible on Main Street. It would thereby appear as part of the green space beyond and so not affect the context of the Argyle Motor works opposite.

The innovative form of the building has been specifically developed to reflect the organic nature of the green site within which it is located. This dynamic organic form means that the building will create its own context and clear identity in a sympathetic manner to the surrounding area (as outlined in the early bespoke concept drawings below).



Early concept models exploring the opportunities for the buildings form

It is conceived as a landform that rises from the ground, folding up from ground level and across the site to the two storey accommodation in the middle. This is then cut out to form the landscape spaces between the wings (or “fingers”) of the building. The roof and folded gables create a simple canopy under which sit the elements of accommodation. The central concourse is defined by the void between the overarching roof and the accommodation. As the building rises then to the centre the perception of overall mass is limited – in this way, the building will not feel as if it has been imposed on the site but rather have been “grown up” as a natural extension of the site and the opportunities it affords.

6.0 Landscaping

Landscaping and amenity space are an integral part of the proposed scheme, and will be developed in a manner that is consistent with the project’s overall objectives (as per Appendix A) and that ensures a consistent design aesthetic. Within the courtyard spaces between the wings will be a mixture of soft and hard landscaping. Where the main route to a public entrance passes through a courtyard, landscaped buffer spaces will provide privacy for those services whose ground floor windows are nearby. The main routes to the building entrances will be defined in hard landscaping, with occasional

seating and waiting areas adjacent to the drop off area beside the west public entrance.

Where the building projects through the existing line of trees there will be landscaping proposals to tie-in to the naturalistic plant structure. Pathways around the site will be provided for maintenance and fire escape purposes.

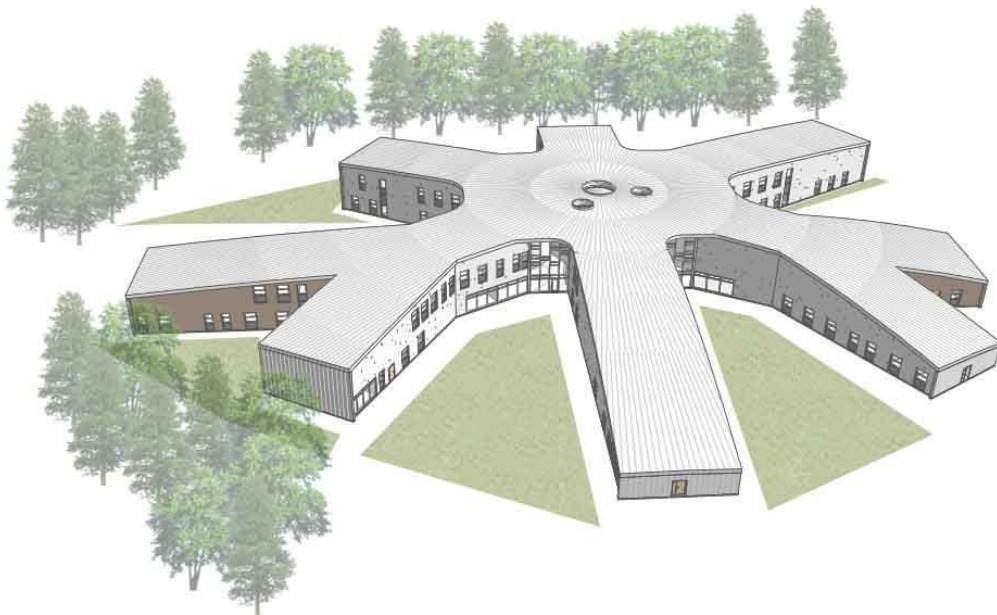
7.0 Appearance

The building will consist of four main elements: an overriding roof; walls to the accommodation wings; glazing; and landscaped courtyards.

The predominant element of the building will be its standing seam metal roof (which will incorporate the end gables). The edge detail of the roof is to be metal clad (with hidden gutters) so that the roof appears as a separate object to the walls below (as illustrated). The end gables will present a high quality of finish in keeping with the overall design aesthetic to the public perimeter.



The accommodation wings are to be simply clad in white render, wrapping around to the inside spaces as white plasterboard in the same plane. This will act as a backdrop for the landscape spaces between the wings and the roof form above. Where the wings split open in a 'fishtail', the inside will be faced in timber to soften the form facing the car park and tree belt. The wings also provide the scope for extension in the future if required, with the internal structure allowing flexibility of wall positions. Between the wings are sheets of curtain walling which will define the public concourse space. Windows and fenestration will be in the form of simple vertical slots located to suit the functionality of the rooms behind. The random fenestration will further soften the appearance of the building and tie in with the more organic elements of the site.



8.0 Access Statement

The access provisions here reflect the performance criteria/objectives set for the Centre (Appendix A) and the CHCP's commitment to Centre achieving a BREEAM Excellent Healthcare rating. They have also been informed – and strengthened - by positive contributions from the West Dunbartonshire Access Panel and Strathclyde Police (specifically in relation to crime prevention), who have been consulted with as part of the design process (and who the CHCP are committed to continuing to engage with and draw upon their expertise/perspectives as the project progresses).

Pedestrian Access

There are to be two main entrances to the building:

- On the east side a safe and level accessway will be provided between Main Street and the front door of the building.
- On the west side a level accessway will be provided from the car park and drop off area.

The creation of direct link to Christie park at the south of the site had been initially considered, but following feedback from Strathclyde Police it has been decided that on-balance such a development not be pursued at this time and be excluded from the scope of this current application.

Internally all publicly accessible rooms are located on the ground floor which will be level throughout. All access routes for pedestrians will constructed so as to be suitable for wheelchair users and those with prams.

Access for the Disabled

Given the nature of the services provided within this Centre, the CHCP has placed a premium on ensuring ease and equality of physical access (both internally and externally). This is most clearly evident in the fact that one of the defining – and most compelling - features of the accommodation layout is that all of the public clinical functions are provided on the ground floor: thus ensuring simple and clear access for all

patients/service users. The Centre and its on-site access will be fully compliant with the relevant Building Standards (e.g. for provision of level/ lift access and sanitary facilities for wheelchair users) as part of Centre's overall compliance with the requirements of the Equalities Act 2010 and the CHCP's commitment to the Centre attaining a BREEAM Excellent Health care rating. These will be reinforced through the application of the objectives/criteria set for the Centre (Appendix A – e.g. in relation to wayfinding and signage), suggestions from the West Dunbartonshire Access Panel (e.g. tactile paving) and best practice (e.g. the NHS BATH [Better Access To Health] Guidance).

Vehicular access

The general vehicular access will be taken off the main hospital access road, which will then split into the separate staff and public parking zones. Each of these parking zones is formed as a one way route. Disabled parking, a drop off point and an ambulance bay have been sited as close as possible to the west entrance to the building (but in a manner that does not impede upon the privacy necessary within ground floor services overlooking from within the adjacent wings). Separate disabled parking is also provided within the staff parking zone.

For service vehicles a separate service road is formed (as per 4.2). This is for deliveries, uplifts, servicing, and discrete ambulance pick up (in the event of an emergency). This fully separates the public and staff from the potential hazard of large vehicles reversing, and minimises potential disruption to services.

There will also be a dedicated cycle route to the (secured and sheltered) public cycle stands near to the east entrance to the building. For staff a separate route links the staff car park with the dedicated staff entrance on the gable of the facilities wing (as per 4.2) with adjacent secured and sheltered cycle stands.

Links to the Hospital

The links to the Vale of Leven Hospital reflect the approach discussed and agreed with the West Dunbartonshire Access Panel as the most logical way to respond to the existing site topography. Currently the site rises substantially on the shortest route across

the site - the axis of the building – and this will require steps up to the main road. This will be accompanied by an alternative route which has no steps following the pedestrian path from the vehicular access point and which will tie in with the levels of the hospital access road.

As part of the proposals the existing junction with Main Street will be upgraded and re-aligned to form a controlled cross road junction. The detail of this will be provided separately within the separately prepared Transport Assessment.

Parking

The scheme presented can accommodate 263 car parking spaces (which is the number derived through the application of relevant West Dunbartonshire Council policy). As already outlined within 4.2, outwith the building and extending up to the green edges of the site is the car parking area, which is organised into three principle zones: public; staff; and delivery. There are disabled spaces provided within both the public and staff parking zones, which are located as close as is possible to the relevant entrance doors.

In the first instance, parking will be constructed for 213 spaces (of which 11 will be disabled spaces) which reflect the following considerations:

- The public transport links to the site, which are being enhanced through additional investment through the provision of an additional bus bay, an additional bus stop and interconnecting pedestrian crossing on Main Street directly opposite the east route into the Centre.
- The number of car parking spaces provided within new health centres of similar size within the Greater Glasgow and Clyde area.
- An analysis of current and projected levels of car ownership for the area served by the Centre.

The demand for parking within the Centre will be monitored on an on-going basis, with the provision in the design ensuring that in the event that a sustained requirement for additional spaces is identified then these can be accommodated within the provisions of this application. The detail of this will be provided separately within the Transport Assessment.

Public Transport Links

The location of the site already benefits from good public transport links (which are detailed within the Transport Assessment). As part of the project, these will be enhanced through the provision of an additional bus bay, an additional bus stop and interconnecting pedestrian crossing on Main Street directly opposite the east route into the Centre.

Emergency Service Access

Access for fire tenders is to be provided to three elevations of the building: from Main Street; from the service road; and from the drop off area adjacent to the west entrance.

9.0 Conclusion

The Vision for this new Alexandria Health and Care Centre is that it be a place that is welcoming, reassuring and revitalising for its patients and their carers; its staff; and visitors from the wider community. West Dunbartonshire CHCP is committed to delivering an exceptional facility that delivers excellent health and care services for the communities of the Vale of Leven. The design and proposal presented are the result of a comprehensive, rigorous and on-going development process to ensure the delivery of such a scheme. As detailed within the separately prepared Pre-Application Consultation Report, these proposals have also received a consistently enthusiastic reception from the many community groups engaged with, while having further benefited from their constructive input.

More than that though, the CHCP is committed to the ambition that this new Centre can be viewed as an exemplar facility across both Scotland and the UK. The Commission for Architecture and the Built Environment (CABE) has specified ten key elements for creating a high quality health care building. As will be evident from the content of this report, this design for a new Alexandria Health and Care Centre meets each of these in full, i.e.:

- Good integrated design
- Public open space
- A clear plan
- A single reception point
- Circulation and waiting areas
- Materials, finishes and furnishing
- Natural light and ventilation
- Storage
- Adapting to future changes
- Out of hours community use

The CHCP is strongly committed to the principle that a high quality building and surroundings can contribute to local people making the most of their local health and care facilities; and is confident that the facility proposed here will make such a substantial – and much needed – contribution towards improving the health and wellbeing of the communities of the Vale of Leven.

Appendix A: ALEXANDRIA HEALTH AND CARE CENTRE - DESIGN STATEMENT

The Vision for the Centre

The new Alexandria Health and Care Centre will be a place that is welcoming, reassuring and revitalising for its patients and their carers; its staff; and visitors from the wider community. Its aim is to effectively and imaginatively meet the current and developing needs and expectations of the local population. It will do this by:

- Ensuring a clear focus on the provision of excellent and continuously improving health and care services as an integral element of a positive patient experience.
- Providing a flexible base for a range of increasingly integrated and multi-disciplinary health and care services.
- Stimulating inter-disciplinary learning and networking through the optimal provision and creative use of shared and common space.
- Empowering patients and visitors with clear information and diverse opportunities to make informed choices about their care and their health.

This Design Statement is being developed as a key control document for the overall design and delivery of the above as part of the implementation of the NHSGGC Vision for the Vale of Leven (in keeping with the principles set out within the Scottish Capital Investment Manual and guidance from Architecture & Design Scotland).

The Non-Negotiables For The Design And Build Of The Centre

The new Alexandria Health and Care Centre is to be located within an already specified area within the Vale of Leven Hospital Campus. The key spatial relationships of services and accommodation (i.e. core adjacencies) already agreed will clearly underpin the layout of the Centre. Its development and delivery will primarily align with the broader policy context (including NHSGGC equality and sustainability commitments) through the achievement of an excellent BREEAM (Building Research Establishment Environmental Assessment Method) Health rating.

The success of this development will be predicated on the delivery of the following performance/criteria objectives within the capital and revenue funding specified for the development.

For Service Users

(1) Access

- To be clearly accessible for the communities that it is designed to serve, including:
 - o Central to residential populations.
 - o Pleasant and easy walking/cycling routes.
 - o Easy access to public transport.
 - o Sufficient space for adequate and safe parking, including drop-off and disabled parking. Importantly, parking not to be dominating initial impression of the Centre, or lengthen walking routes from public transport.
 - o Clear intuitive wayfinding from outwith the site to indicate presence of facility and route to it, with pleasant and safe routes on site (even during hours of darkness).

(2) Overall impression – external and internal

- To project an impression that is welcoming, reassuring and revitalising.
- To provide clear information about and direction to the range of services available.
- To convey the ethos of an approachable, considerate, high quality and integrated resource - not an alienating nor austere institution.
- To emphasise the critical importance of continuous learning to the delivery and experience of high quality health and care services.

(3) Internal environment - common requirements

- To provide a main public space that is human in scale and humane in nature, including:
 - o Being straightforward to navigate for all (including those with physical and/or sensory disabilities and mental impairments, e.g. dementia), with clear wayfinding to minimise the user journey.
 - o Empowering learning, through the use of graphics, art and Information Technology to convey and provide access to evidence-based health and up-to-date service information.

- o Good use of natural light and ventilation, optimising views of green space surrounding Centre.
- o Public-facing areas and services easily accessible to all service users.

(4) Reception

- To have a main reception area that operates as a nexus, guiding journeys and experiences through the Centre.
- To minimize number of sub-receptions and make their use clearly identified to prevent misdirection.
- To be approachable, informative, reassuring and considerate (including providing scope for confidential/sensitive conversations).

(5) Waiting Areas

- To provide a calming and pleasant environment, optimising views of green space surrounding Centre.
- To provide access to visible and safe area for children's play and interactive learning.

(6) Consulting rooms

- To be supportive of open and confidential/sensitive discussions, assessments and treatments.
- To provide a calming environment, through good use of natural light and ventilation, optimising views of green space surrounding Centre.
- To support individual behaviours that minimise Healthcare Acquired Infections.

For Service Staff

(1) Access

- To be readily accessible to staff working from the Centre in a manner that promotes *active* and *sustainable travel*, including:
 - o Central to residential populations.
 - o Pleasant and easy walking/cycling routes.
 - o Easy access to public transport.
 - o Sufficient space for adequate and safe parking, including drop-off and disabled parking.
 - o Clear intuitive wayfinding from outwith the site to indicate presence of facility and route to it, with pleasant and safe routes on site (even during hours of darkness).

(2) Overall impression – external and internal

- To reinforce the ethos of a friendly, co-ordinated, high quality and integrated resource - not an alienating nor austere institution.
- To provide affirmation of the value placed upon staff.

(3) Internal environment – common requirements

- To provide a main public space that is human in scale and humane in nature, including:
 - o Promoting a sense of community amongst staff within and across disciplines/services, encouraging dialogue, collaborative working and joint learning.
 - o Empowering learning, through the use of graphics, art and Information Technology to convey and provide access to evidence-based health and up-to-date service information.
 - o Designing and arranging accommodation in an optimal fashion that:
 - Maximises accommodation that is flexible in use.
 - Maximises shared use of space.
 - o Designed to enable efficient and appropriate storage, access to and transportation of equipment/materials.
 - o Designed to be easy and cost-effective to clean and maintain to the appropriate standards.

(4) Reception:

- To be considerate (including providing scope for confidential/sensitive conversations).
- To be designed to reduce physical risk.
- To incorporate a discrete space distinct from “front-facing” element of Reception for other work to be undertaken when required.

(5) Consulting Rooms

- To be supportive of open and confidential/sensitive discussions, assessments and treatments.
- To be designed to reduce physical risk.
- To support individual behaviours that minimise Healthcare Acquired Infections.

(7) Office Space

- To be discrete and separate from public-facing areas.
- To provide a revitalising environment, through good use of natural light and ventilation, optimising views of green space surrounding Centre.
- To provide secure accommodation for the access of confidential data/records.
- To incorporate dedicated space for private discussion (including sensitive telephone conversations).

(8) Staff respite areas and touch-down bases

- To provide a revitalising environment, with the opportunity for ad-hoc interaction between staff from different services.
- To provide a “step away” from public-facing areas.

(9) Dedicated staff learning and development area

- To be designed as the heart of the staff experience of the Centre.
- To enable both on-going individual development and encourage collaborative learning.
- To incorporate accommodation for seminars, tutorials and group work.

For Visitors (inc. carers and/or dependants accompanying service users)

(1) Access

- To be clearly accessible for the communities that it is designed to serve.

(2) Overall impression – external and internal

- To be welcoming, considerate, reassuring and approachable.
- To provide clear information about and direction to the range of services available.
- To convey the ethos of a friendly, co-ordinated, high quality and integrated resource - not an alienating nor austere institution.

(3) Internal environment – common requirements

- To provide a main public space that is human in scale and humane in nature, including:
 - o Being straightforward to navigate for all (including those with physical and/or sensory disabilities and mental impairments, e.g. dementia), with clear wayfinding to minimise the user journey.
 - o Empowering learning, through the use of graphics, art and Information Technology to convey and provide access to evidence-based health and up-to-date service information.

(4) Reception

- To have a main reception area that operates as a nexus, guiding journeys and experiences through the Centre.
- To be approachable, informative, reassuring and considerate (including providing scope for confidential/sensitive conversations).

(5) Waiting Areas

- To provide a calming environment, designed to be pleasant and reduce physical risk.
- To provide access to visible and safe area for children's play and interactive learning.

Stakeholder Consultation on the Design - Establishing Benchmarks

Following the clarification of the non-negotiables, the development of a design statement then requires the identification of *benchmarks* for each non-negotiable, i.e. what are the standards to be met and/or views on what success might look like.

For the purposes of this development, the formal stakeholder consultation process will be structured to identify suggested benchmarks from across constituencies of interest - through the use of text and/or pictures of other buildings.

All of those suggestions will then be used to devise a final set of benchmarks against which the Project Board can self-assess the final design (pre-confirmation) and the final build (as part of post-occupancy evaluation).

Mr Soumen Sengupta
Head of Strategy, Planning and Health Improvement
West Dunbartonshire Community Health & Care Partnership

December 2010