



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for older people

Name:	Edensor Nursing and Residential Home
Address:	3 - 9 Orwell Road Clacton on Sea Essex CO15 1PR

The quality rating for this care home is:

two star good service

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full assessment of the service. We call this a 'key' inspection.

Lead inspector:	Date:
Neal Cranmer	2 4 0 6 2 0 0 9

This is a report of an inspection where we looked at how well this care home is meeting the needs of people who use it. There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example Choice of home)

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

This is what people staying in this care home experience:

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

Copies of the National Minimum Standards – Care Homes for Older People can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

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- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

Reader Information

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Edensor Nursing and Residential Home
Address:	3 - 9 Orwell Road Clacton on Sea Essex CO15 1PR
Telephone number:	01255423317
Fax number:	01255423347
Email address:	ptedensor@elderhomes.co.uk
Provider web address:	

Name of registered provider(s):	Elder (UK) Limited
Type of registration:	care home
Number of places registered:	66

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	26	0
mental disorder, excluding learning disability or dementia	0	46
physical disability	0	26
Additional conditions:		
Persons of either sex aged 40 years and over, who require nursing care by reason of dementia (not to exceed 26 persons)		
Persons of either sex, aged 65 years and over, who require care by reason of a mental disorder, excluding learning disability or dementia (not to exceed 46 persons)		
Persons of either sex, aged 65 years and over, who require nursing care by reason of a physical disability (not to exceed 26 persons)		

Date of last inspection								
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Brief description of the care home
Edensor provides nursing and personal care with accommodation for younger people with dementia and older people with mental illness and/or physical disabilities. Edensor is owned by a private organisation named Elder (UK) Ltd. The home is located in a residential area within walking distance from the centre of Clacton upon Sea. The home was opened in 2002 and consists of a three-storey building. There are 34 single bedrooms and 16 double bedrooms. There is a passenger lift. The home has gardens

Brief description of the care home

to the front of the property and a secure courtyard garden that is accessible to wheelchair users. Edensor is accessible by road and rail and the nearest station is in Clacton on Sea. Parking is available in the small car park and adjacent road. The fees range is from £383.04 to £450.00 per week for residential residents, for those with nursing needs it is £484.04 to 650.00 per week. Additional charges apply for chiropody, toiletries, hairdressing and newspapers. This information was provided by the home's registered manager over the telephone during a conversation on the 25th of June 2008.

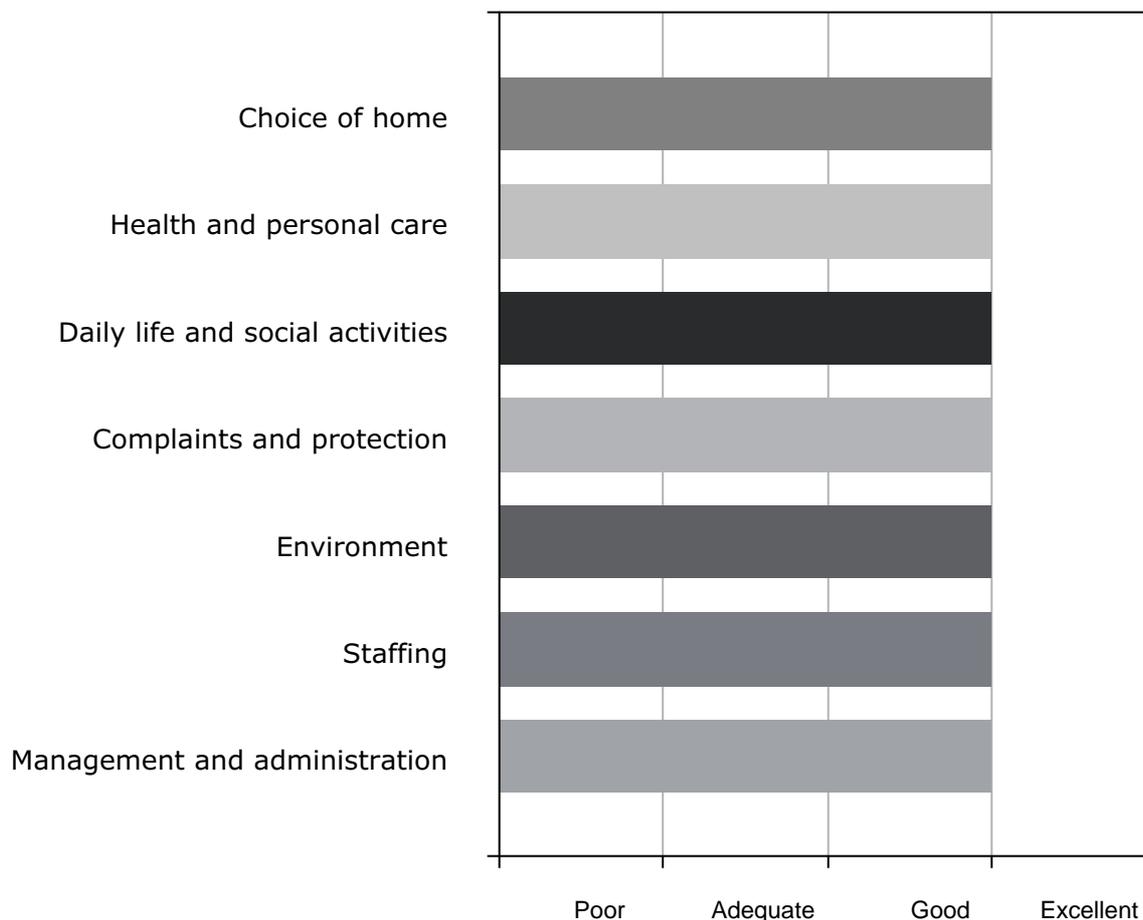
Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

This inspection report follows a key unannounced inspection visit which was carried out over one day on the 24th June 2009, which lasted for seven hours. This report has been written using accumulated evidence gathered prior to and during the site visit, including the home's (AQAA) Annual Quality Self Assessment. This is a document which is required by law and is a self assessment tool that the service uses to tell us what they do well, and how they intend to develop.

This inspection included discussions with service users, relatives, the manager in charge of the home at the time of the inspection visit, and a number of the staff team. A tour of the premises was also undertaken and included viewing of service users bedrooms, bath and toilet facilities, communal areas and gardens. Also during the

course of the inspection a range of documentary evidence was sampled.

What the care home does well:

Service users are supported by a staff team who are well trained and skilled, and had a good level of knowledge and awareness of the needs of the service users.

Staff training in the home is generally good and continues to improve which will ensure service users are cared for by a staff team with skills and knowledge. The staff team remains stable, with staff turnover low. The recruitment process of new staff is robust, which will help to protect service users.

Service users' health care needs are well met, and service users are provided with meals that are healthy and nutritious. Responses from service users regarding the quality of the meals provided were positive.

What has improved since the last inspection?

Two requirements were made as a result of the previous inspection visit, to ensure that staff were provided with training on safeguarding vulnerable people, and to ensure that monthly Regulation 26 visits were being carried out by the registered provider, as specified by regulation. Evidence from this inspection visit shows that these two requirements remain unmet.

What they could do better:

Provision needs to be made for all staff to be provided with training on safeguarding to ensure that the staff have the necessary skills to support the service users and protect them from harm or abuse.

The home's practice relating to the administration of medicines needs to be improved, to ensure that any risk of medication errors occurring are kept to a minimum.

The registered person must ensure that Regulation 26 visits are carried out on a monthly basis, as specified in the Regulations, to ensure that the home is managed appropriately and service users' welfare is protected.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 4.

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line –0870 240 7535.

Details of our findings

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Requirements and recommendations from this inspection

Choice of home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People who use this service can expect their needs to be identified and to be provided with the necessary information to enable them to make an informed choice about the home's ability to meet their assessed needs.

Evidence:

The home's Statement of Purpose and Service user's Guide were both available to service users and relatives and were posted on the wall outside of the main office. Both documents provided prospective service users with the necessary information to enable them to make an informed choice about the home's ability to meet their assessed needs. This information included the structure of the service, the qualifications of staff and the facilities provided. The documents also included information about the home's complaints and admission processes. However both documents did require updating to reflect the current management arrangements of the home.

Evidence:

All pre-admission assessments are undertaken by the home's manager or a qualified member of the nursing team who has been designated to do so. The assessments that were reviewed were detailed, and where relevant were supported by COM 5 assessments (these are assessments that are undertaken by the local authorities before people are placed in the home). The assessments undertaken by the home provided information on people's physical, mental and social care needs. The information from these assessments is then used as the basis for the development of the person's plan of care.

Standard 6 is a key standard that relates to intermediate care, but as the home does not provide for this type of care, this standard was not inspected.

Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The health and personal care that people receive is based on their individual needs, and the principles of respect, dignity and privacy are put into practice.

Evidence:

Five care plans were case tracked, including the care plan of the person most recently admitted to the home. All of the care plans were detailed and provided information regarding service users personal wishes. The care plans provided staff with clear guidance about how people should be supported to meet their assessed needs, and there were care plans in place regarding personal care, dietary needs, communication, mobility and dexterity. Discussion with staff indicated that they took an active part in the development of service users care plans, and those spoken with had a good knowledge and understanding of people's needs. All of the care plans reviewed contained daily records relating to the care plans, and all of those seen were being kept under review on a monthly basis.

All five of the care plans case tracked contained evidence of risk assessments being

Evidence:

undertaken, which covered a wide range of areas including: manual handling, nutritional screening, assessment of risk of falls and susceptibility to pressure areas. The home's AQAA states that the home has access to a wide range of pressure relieving equipment.

All of the service users are registered with a General practitioner, and all five of the care plans examined contained record sheets of visits made by the General Practitioner, which included the date of their visit and the outcome. Other health care records seen indicated that service users were supported to attend hospital out patient appointments, and received visits in the home from chiropodists, opticians and dentists.

At the time of the inspection visit only one service user was able to self administer their medication, and the care plan showed that a risk assessment had been undertaken to enable the service user to do so. For all other service users medication was administered to them by staff. All medication is now administered by qualified nursing staff, who are on duty in the home on a twenty-four hour basis. The home has a specific room where medication is stored, which included facilities for the storage of controlled medicines and those that required storage in a refrigerator. Administration records sampled showed that medications were not being signed for at the time of their administration, but instead upon completion of the medication round. Furthermore medications that were not administered at the time of dispensing for various reasons were being left out on the side in the medication room in named pots for administration at a later date, although it was recognised that this room is kept locked so access to service user's was restricted. Both of these practices are potentially unsafe, and could potentially lead to a serious medication error. This practice was brought to the attention of the manager of the home on the day of the inspection, who gave a commitment to addressing this issue as a matter of extreme urgency.

All of the interactions seen between service users and staff were seen and heard to be respectful and friendly, and service users spoken with confirmed that staff always listened to and acted upon what they said.

Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People who use the service are able to make choices about their life style, and are supported to develop their life skills. Social, educational, cultural and recreational activities meet individual's expectations.

Evidence:

The home continues to employ an activities co-coordinator on a full-time basis. Discussion with this person indicated that a variety of in-house activities are provided, these included, bingo, floor skittles, hoopla games, card and board games, and weekly coffee mornings, one of which was taking place on the day of the inspection visit. External activities included trips to the local theatre and occasional meals out. The activities co-coordinator maintains records of activities that service users have taken part in, which recorded what they felt they had got out of taking part of in the activity. As well as supporting service users who were up and about the co-coordinator spoke of spending one to one time with service users who were bedridden, chatting to them and reading books.

Discussion with the activities co-coordinator indicated that they felt that they were provided with all of the necessary equipment that they needed to carry out their role.

Evidence:

Discussion with service users indicated that they enjoyed the input that they received from the co-coordinator, and all of those spoken with felt that it made a difference to their day.

The routines of the home are as much as possible service user led. Personal preferences regarding rising times, care preferences and individual abilities were seen within service users care plans.

The home has an open door policy on the receiving of visitors and those spoken with said that they were always made to feel welcome in the home. The home's AQAA states that service users are free to receive visitors at any time that is suitable to them, it goes on to say that meals and drinks are available to visitors should they wish to stay. On the day of the inspection visit visitors were seen coming and going throughout the day.

The home continues to operate a five weekly rotational menu, which was seen to provide service users with two choices at each mealtime, the menus seen were varied and nutritious, and service users spoken with said that the food was nice. Service users who were able were supported to make choices regarding what they wished to eat, for those service users who were unable to make a choice then the decision was taken on their behalf by staff based upon staffs awareness of the person's likes and dislikes.

the lunchtime meal was discreetly observed, and the meals provided were seen to be presently presented and looked appetising. A number of service users required their meals to be presented in a pureed form, these meals the chef informed us were prepared and the components of the meal were presented individually to preserve their taste and texture. People requiring assistance with their meal were seen to be supported and there was sufficient staff in proximity of the dinning rooms to support people.

Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People who use the service are able to express their concerns, and have access to a robust, effective complaints procedure, which ensures that their concerns are acted upon. However people using the service cannot always be assured of being supported by a staff team who have the appropriate skills and knowledge to ensure that they are kept safe from the risk of harm or abuse.

Evidence:

The home has a complaints procedure in place, which included all of the necessary information to enable service users or their relatives to know how to make a complaint or raise a concern. The home's AQAA stated that seven complaints had been received since the last key inspection, all of which had been resolved within the twenty-eight day timescale. The home retains a complaints log for recording any complaints received, the log included information detailing the date the complaint was received, details of the person making the complaint, who it was made to, and whether the complaint was made verbally or in writing, the nature of the complaint, the investigation undertaken and its outcome, all of this information indicated that complaints were managed and dealt with in a timely and appropriate manner.. Reference to the home's complaints process was included in the home's Statement of Purpose and Service user's Guide. Service user's spoken with said that they were aware of who they should speak to in the event of them wishing to make a complaint.

Evidence:

The home had in place a comprehensive policy regarding safeguarding, which included a whistle blowing policy. The policy included details of how and to whom allegations of abuse should be reported. Discussion with staff indicated that they had a good understanding of the subject, however the training matrix when sampled showed that only 50% of the home's staff team had received training in safeguarding, further investigation however evidenced that further training on this subject was scheduled, this was evidenced by a notice on the staff notice board in the staff room, and during discussion with staff. Since the last key inspection a number of safeguarding referrals have been made in respect of the service, all of these were reported appropriately, and were investigated by the relevant agencies.

Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The physical design and layout of the home enable people to live in a safe, well-maintained and comfortable environment, which enables them to maintain their independence.

Evidence:

A partial tour of the premises was undertaken, including communal areas and a number of bedrooms, at random. On the day of the inspection visit the home was found to be clean and tidy with no evidence of any unpleasant odours or smells. Communal areas and bedrooms were seen to be in a generally good state of repair, and evidence was seen in those bedrooms visited of service users having their own personal possessions about them. Service users and relatives spoken with were generally happy with the facilities provided by the home, and felt that the home was kept generally clean and tidy.

The home's laundry was fit for purpose and was staffed daily by laundry staff, and was equipped with industrial style washing machines and dryers, and there was provision for staff to wash their hands. Service users washing is placed in individual basket for collection to be taken to their rooms. Discussion with the laundry person indicated that none of the service users were able to collect their washing independently, this task was carried out on their behalf's by their key workers. All of the service users seen

Evidence:

were well presented and tidy, which would suggest that the laundry service is fulfilling its function.

The laundry room when not occupied by staff is kept locked, to minimise any risk to service users, and cleaning materials when not in use are stored in a locked shed outside of the laundry room or in a cupboard in the laundry room.

Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Staff in the home are available in sufficient numbers to support and meet the needs of the number of people in residence, however not all of the staff team have the necessary skills and knowledge to ensure that people are kept safe.

Evidence:

Discussion with the home's manager indicated that at the time of the inspection visit the home had in residence 53 service users, 35 of whom had nursing care needs, with the remainder having residential care needs.

Sampling of the home's duty rota, as well as discussion with the manager and staff indicated that the home's staffing level are eight care staff and one qualified member of staff in the morning and seven care staff and one qualified member of staff in the afternoon. Night time support is provided by five staff made up of four care staff and one qualified member of staff. In addition to the above direct care staff the home employs cooks, kitchen assistants, domestics and laundry staff.

Discussion with staff during the course of the inspection visit indicated that they felt the staffing levels were sufficient to meet the assessed needs of the service users in residence.

Evidence:

The home's AQAA indicated that the home employs twenty-five direct care staff, of this number the AQAA states that fifteen have a National Vocational Qualification (N.V.Q) at level two or above. This statement was supported by records sampled, including the home's staff training matrix.

The home's staff recruitment practice was sampled through the viewing of staff recruitment files. All of the files sampled contained the necessary information to indicate that a robust recruitment process was being applied by the home, this information included: copies of application forms, written references, criminal records bureau checks, and evidence of induction and training.

All of the files sampled showed that these staff had received a wide range of training including: manual handling, fire safety, first aid, health and safety, infection control and safeguarding. However as mentioned in the Complaints and protection section of this report not all staff had received training in safeguarding, and therefore a requirement has been made for all staff to be provided with this training as a matter of urgency.

Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The management and administration of the home is based on openness and respect, and there were effective systems in place for reviewing and keeping under review the quality of the home's service provision.

Evidence:

Since the last key inspection undertaken in June 2008 the registered manager had resigned from the home. At the time of the inspection visit the home was being managed day to day by a registered manager from a sister home. Although the manager at the time of the visit had only been in the home for a short period of time, the feedback provided from staff was positive, all spoke of the manager being supportive and approachable.

Further discussion with staff indicated that the staff turnover in the home remained low, and the indications were that the staff team remained stable, and had not been to adversely affected by the loss of the previous manager.

Evidence:

The home has a quality assurance system in place, which use surveys to seek the views of service users and other interested stakeholders. meetings with service users and staff are held bi-monthly and minutes were seen to be kept. Regulation 26 visits (these are visits that the provider is required to make under regulation) were not being made monthly (last was made in January 2009). The manager was reminded that the provider is required to make these visits and provide a copy of the report of their visit to the home under regulation. The manager was also reminded that these visits may also form part of the home's quality assurance process, as they are an opportunity for the provider to spend time with service users.

The home's procedures for the handling of service users monies continue to be robust. Receipts are held for expenditure and records were confirmed by signature. The procedures were well adhered to and amounts held were confirmed as correct. It was however noted that some quite large sums of money were being held in the home, and despite there being stored in a secure safe it is strongly recommended that provision needs to be sought to ensure that such sums be stored safely and externally to the home.

Staff records examined confirmed that staff had been provided with health and safety training. Records further showed that all relevant health and safety checks were being undertaken including, fire alarms, fire drills, water temperature checks and maintenance of hoists.

Are there any outstanding requirements from the last inspection?

Yes



No



Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action
1	18	13	The registered person must ensure that all staff receive training in adult protection, to ensure that resident?s are adequately protected.	31/08/2008
2	33	26	Provision for monthly visits to be made to the home in line with Regulation 26 of the Care Homes Regulations must be made, and the home provided with reports of the outcomes of the above visits. This is to ensure that the home is managed appropriately and resident?s welfare is protected.	31/08/2008

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action
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Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
1	9	13	<p>The registered person must ensure that arrangements are in place for the safe handling, recording and administration of medicines.</p> <p>To ensure that service users are protected from harm by the home's practice relating to the administration of medicines.</p>	31/08/2009
2	18	18	<p>The registered person must ensure that staff have the appropriate training to meet the needs of the service users. This relates specifically to the need for all staff to receive training on safeguarding vulnerable people.</p> <p>To ensure that service users are supported by a staff team who have the necessary skills and training to ensure that they are protected from harm or abuse.</p>	31/08/2009

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No.	Refer to Standard	Good Practice Recommendations
1	35	It is strongly recommended that provision be made to limit the amount of service users monies held in the home at any one time.

Helpline:

Telephone: 03000 616161 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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