

Key inspection report

Care homes for older people

Name:	Newland Care Home (Residential)
Address:	18 Tetlow Lane Salford Manchester M7 4BU

The quality rating for this care home is:	two star good service
--	-----------------------

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

Lead inspector:	Date:
Elizabeth Holt	2 1 1 0 2 0 0 9

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

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.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

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

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

Reader Information

Document Purpose	Inspection report
Author	Care Quality Commission
Audience	General public
Further copies from	0870 240 7535 (telephone order line)
Copyright	Copyright © (2009) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.
Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Newland Care Home (Residential)
Address:	18 Tetlow Lane Salford Manchester M7 4BU
Telephone number:	01617920993
Fax number:	
Email address:	
Provider web address:	

Name of registered provider(s):	Angel Care Plc
Type of registration:	care home
Number of places registered:	30

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	30
Additional conditions:		
The registered person may provide the following category of service only: Care home with nursing - Code N To people of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category - OP The maximum number of people who can be accommodated is: 30		

Date of last inspection	1	8	0	5	2	0	0	9
-------------------------	---	---	---	---	---	---	---	---

Brief description of the care home
Newlands is a residential care home with nursing that provides personal care only for up to 30 people over the age of 65 and offers services to meet the needs of Jewish people and people of other religions. The home is owned and operated by Angel Care Plc who purchased the home in March 2007. The home is situated on a main road in a residential area of Salford. The home has no car park but there are generally parking spaces available on the roadside.
The home has strong links with the local and extended Jewish community.

Brief description of the care home

The weekly fees range from 575 pounds to 650 pounds. In the case of a service user requiring nursing care a contribution towards these fees are made by the local primary care trust. The Registered Nursing Care Contribution and at present this is 106.30 per week

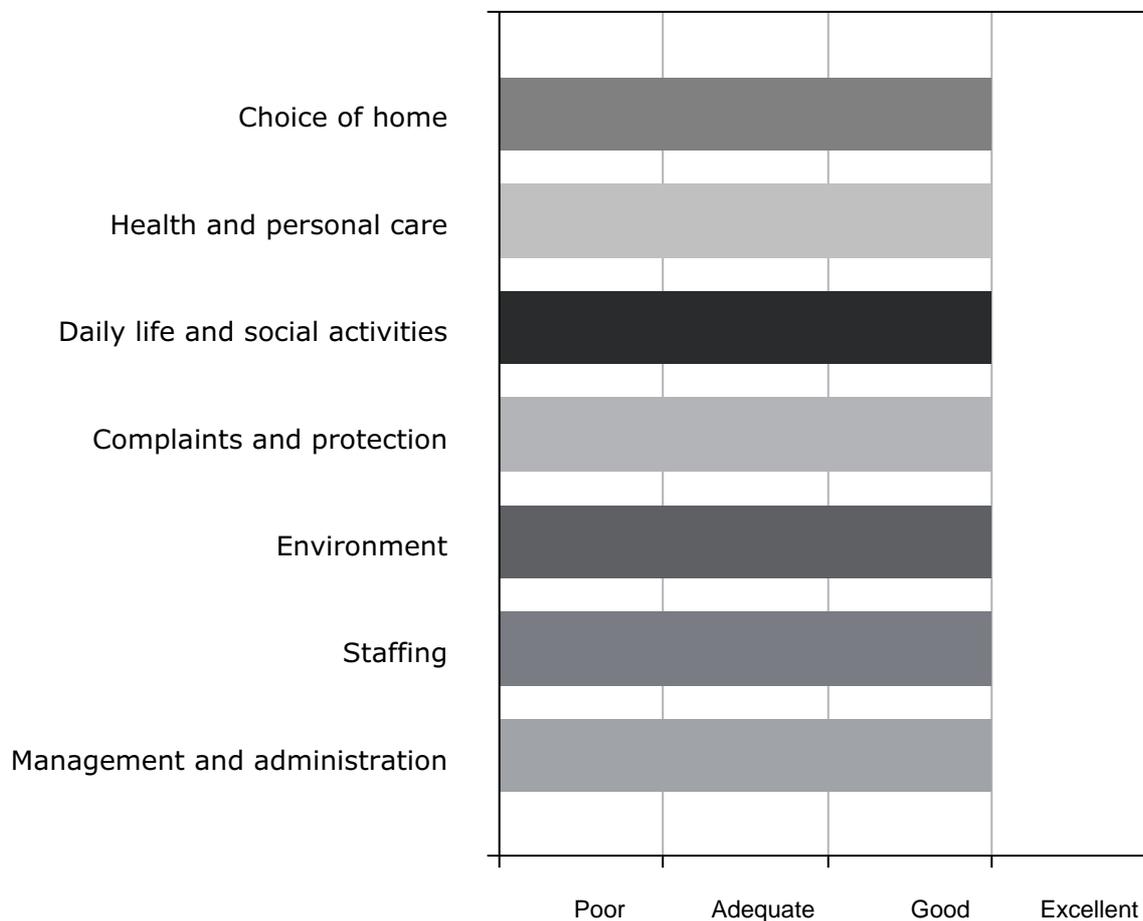
Summary

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 key unannounced inspection, included a site visit. We arrived at the home at 11.00am and left at 6.00pm. Before our visit the manager had completed an Annual Quality Assurance Assessment (AQAA). This document gave them the opportunity to tell us what they do well, how they have improved over the last twelve months and their plans for improvement over the next twelve months.

During the visit we looked at a number of records including care plans, medication records, staff files, maintenance and training records. We spoke to five people who live at Newlands, two relatives, the manager, and five staff members. Following the last key inspection there were concerns regarding recruitment practices. A statutory requirement notice was issued which gave the home a short timescale to address the shortfalls and a random inspection in May 2009 showed improvements in recruitment. Improvements were seen in relation to recruitment during this visit.

What the care home does well:

The internal appearance of the home provides a homely environment for the people living there. People said they liked their bedrooms and the home was always clean. The home offer specific cultural services and support to meet the needs of the people living at the home. This includes a Shomer who assists with cultural events and oversees food for the Kosher diet provided.

The home has flexible visiting arrangements and encourages people to have regular contact with families and friends. Visitors spoken to said they were always made to feel welcome.

The home provides a programme of regular activities which people said they enjoyed and they enjoyed the food provided.

People knew who to speak to if they wanted to raise any concerns or complaints. Staff were seen to be kind and caring and supported people in a way that promoted their dignity.

The management of medicines in the home was found to be good.

What has improved since the last inspection?

The information about the service has been reviewed and updated. Since the last inspection the programme of redecoration has continued to make the home more homely for the people living there. There was some evidence to show improvements in the recording and reviewing of care plans to show people's current health and personal care needs. There had been an increase in the identifying and recording of risk assessments and the action needed to minimise risks.

People were allocated a key worker and they had started to record people's social histories to help them understand their needs more fully.

Improvements had been made to the services recruitment procedures. Criminal Records Bureau checks and references had been sought before staff started to work at the home.

Since the last inspection the manager had increased the amount of training provided for staff and the records show that staff have undertaken some training. Staff spoken to said, "The home is getting better all the time."

Improvements have been made to the induction, supervision and monitoring of staff since the last inspection.

What they could do better:

It was evident that action by the manager to improve the quality of service in the home was being made and improvements were seen in a number of areas, some further work is still needed to make sure improvements in care plans, risk assessments and staff training is continued. Shortfalls in these areas have the potential to lead to people's needs not being met in full.

The manager has started a system to audit the care plans, records and medication to make sure they all meet the required standards, she needs to continue to develop this so that when shortfalls are identified they are improved in a timely manner.

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 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

Contents

Choice of home (standards 1 - 6)

Health and personal care (standards 7 - 11)

Daily life and social activities (standards 12 - 15)

Complaints and protection (standards 16 - 18)

Environment (standards 19 - 26)

Staffing (standards 27 - 30)

Management and administration (standards 31 - 38)

Outstanding statutory requirements

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 are given information and have their needs assessed before deciding to move into Newlands, so they know that their needs can be met.

Evidence:

In the self assessment, the manager stated that, "We always encourage people to view our home without an appointment so that at any time they can assess our practice. We provide them with as much information as possible to enable them to make an informed choice. We encourage visitors to the home to talk to existing service users about the care they receive. We offer trial visits which can be for a few hours or overnight if availability." A look at three pre admission assessments showed the manager had visited them before they moved into Newlands. Copies of pre admission information were held on each person's file. For one of these people their personal likes and dislikes were included. The information gathered was recorded on a set format which showed the person's physical, medical and care needs.

Two people spoken to stated that had received enough information about the home

Evidence:

before they moved into Newlands so they could decide if it was the right home for them and one person said, "I was given information booklets about the home which was useful for me."

Newlands does not provide intermediate care facilities.

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.

People who live at Newlands have their care needs met and their care and support is provided in a way that meets their needs for privacy and dignity.

Evidence:

During this visit we looked at the care plans for three people and the person to whom the care plan belonged was spoken to. A requirement made at the last inspection was for care plans to contain up to date information. From the sample of care plans looked these showed they had been reviewed and some had been re written to reflect the individual likes and dislikes of the person's health and personal care needs. For one person a shortfall was identified, the care plan needed to have a detailed risk assessment and care plan around the management of their diabetes. The manager stated she would review and update this following this visit. Records of visits by health professionals were in place and the daily records showed clear management of this person during a recent episode of poor health. A GP was spoken during this visit who said, "They are good about communicating with us and carrying out the necessary treatment." Some of the care plans lacked the personal likes and dislikes of how people liked to be supported and a discussion was held about developing more person

Evidence:

centered care plans. The care plans looked at showed evidence of key worker input and staff reviewing and evaluating the care plans. A recommendation was made for the evaluations to reflect on any changes in the person's health care rather than state continue care as plan.

A sample of risk assessments were looked at for three people and following a requirement made at the last inspection there was evidence to show improvements had been made. The manager had some training planned in relation to risk management. In the AQAA the manager recorded that "All service users have an individual care plan, based on their assessed needs, choices and preferences. Risk assessments are undertaken on admission for all service users around pressure sore prevention, nutrition, manual handling and falls, all are reviewed and updated regularly." This was found to be the case. The records in relation to bed rails were looked at, monthly checks are in place, however records should include an appropriate risk assessment to ensure they are appropriate for the person's needs. The manager agreed that an assessment for the use of bed rails was not recorded formally and she would address this.

We saw that people who were assessed as needing pressure relieving mattresses and cushions had these in place. Some of these cushions were worn looking and in need of replacement in order to provide the most effective pressure relief. The risk assessments for people on air mattresses should include the person's weight and setting required so staff can be assured the mattress is kept at the correct setting.

It was clear staff had worked at improving the care plans and risk assessments in place and that although some of the records still required more information and detail this was not affecting the staff from meeting people's needs. People spoken to during the visit, relatives and staff were satisfied with the way their care needs were met. One person said, " I don't think I could be looked after better anywhere, they are all very kind and caring towards me always."

Comments from people living at the home and from observations made during the inspection showed people were treated with respect and their need for dignity was promoted. One person said, "Look how they help me to get dressed, I do like keeping my clothes nice it means a lot to me."

Medication policies and procedures were in place and since the last inspection the policy for the administration of medication had been updated. During the visit we looked at how well medicines were handled to make sure people were being given their medicines properly. We found that staff made accurate records to account for the

Evidence:

medicines given and people were given their medicines as prescribed by the doctor. The manager had started a system to make regular checks about how the staff were handling medicines and some staff had received refresher training in medicines management.

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 benefit from the support provided in Newlands to enable them to exercise day to day control over their lives and to maintain their chosen lifestyle.

Evidence:

A part time activities co-ordinator was employed at the home to provide a programme of entertainment and activities for people five afternoons a week. A programme was displayed that detailed the planned entertainment. People told us they could choose whether they wished to join in or not. On the day of this visit a session on reminiscence and some singing was held, people spoken said they had enjoyed this very much. One person added, "I look forward to the entertainment, it keeps me from getting bored and gives me something to look forward to." One person said, "I have been on a trip to Blackpool lights recently which was a lovely." In the AQAA the manager wrote, "We have arranged for music therapy to commence in November. Service users have joined the ring and ride scheme to give them more opportunity to go on outings. We had a trip to St Annes and have other outings in the planning stages." Since the last visit the introduction of the key worker system has helped the staff to provide a snapshot of the person's life in the care plans by talking to the person and their family.

Evidence:

We saw that the entertainment schedule included festivals and activities around the Jewish culture. The manager said these were overseen by the Shomer on a daily basis.

During the visit people told us they were able to receive visitors when they wished and they could meet with them in private if this was preferred. Meals were served in a large, pleasantly decorated dining room on the ground floor. We were told the Shomer visits the kitchens on a regular basis to oversee the food preparations. All food was suitable for a Kosher diet and was prepared and cooked in a kitchen with both dairy and non dairy facilities. The meal on the day of the visit was pleasantly served and looked appetising. People spoken to made positive comments about the meals, one person said, "The meals are always good here."

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.

The home encouraged and supported people to raise concerns or complaints. Policies and procedures were in place to protect people from abuse.

Evidence:

A copy of the services complaints policy and procedure was made available for people living at Newlands and we were told there have been no formal complaints since the last visit. The manager showed a clear system for recording any concerns/complaints. People spoken to during our visit knew how to make a formal complaint and how they would do this if the need arose.

During the visit the manager showed an understanding of local safeguarding procedures and a copy of Salford Social Services joint agency safeguarding procedures were available for the staff to read. We discussed staff training in relation to safeguarding vulnerable adults with the manager who stated that three staff members had recently attended basic awareness training through the training partnership and she had plans to address the training need for other staff. The manager and two other staff spoken to were clearly aware of the procedure to follow in the event of an allegation of abuse.

Since the last visit the two situations investigated under Salford Social services joint agency safeguarding had been completed and there were no areas identified for the manager to address.

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.

People benefited from a clean, warm, comfortable and well maintained environment at Newlands that had been improved.

Evidence:

The home is fully accessible via a ramped entrance to the front of the building and provides a passenger lift. The service employ a maintenance person who provides regular testing of equipment including the fire system.

A partial tour of the premises showed that work was in progress to convert a bathroom into a shower room to meet the needs of the people more fully. We saw that a programme of re decoration and refurbishment of some rooms had taken place. The communal areas were comfortably furnished creating a homely environment for people to spend time in.

We looked at a number of bedrooms, all were personalised with people's personal effects. In the AQAA we were told, "All service users are given the choice to lock their rooms if requested. All bedrooms have a lockable bedside cabinet for the storage of personal items." People told us they were generally happy with their environment. Since the last visit staff had not yet had an update on infection control practices however this was included in the training plan.

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.

People who live at the home are supported by staff who have gone through appropriate checks so they are safe from possible harm. Staff training was being addressed so people are safe from poor practice.

Evidence:

On the day of the visit there were 28 people living at the home. The staff numbers were sufficient to meet the needs of the people living at the home. Following the requirements made at the last inspection in relation to the services recruitment procedures and lack of staff training, these areas were looked at. Recruitment files for five people were looked at. Files were well organised and included detailed application forms, documents to prove their identity, a photograph and written references. Copies of Protection of Vulnerable Adults (POVA) and Criminal Records Bureau checks (CRB) were held before staff started working at the home. The way staff were recruited had improved and the manager showed a commitment towards good recruitment practices to minimise the risk of inappropriate people being employed at the home. Discussion with the staff team, visitors and from observations made during the visit showed that people valued the staff members. Comments included, "The staff are really pleasant and friendly, I've known some of them for years, they are like friends." One person's relative said, "They are great staff here, they are very kind and helpful." Staff were heard chatting and were seen sitting and listening to people, it was clear they knew the people well.

Evidence:

The manager had improved the training made available for staff since the last inspection and was committed to continue to improve this. In the AQAA, the manager said, "A total of 7 out of 12 care staff have achieved NVQ level 2 in Care with another person completing level 2 this year. We have developed a training programme that is constantly updated. We have accessed distance learning in Palliative care, dementia awareness and nutrition and health." A look at the training record showed where training needs for staff had been identified. Staff spoken to were positive about training they had attended and they looked forward to more. The manager had staff booked onto training and was planning to provide inhouse training in areas, such as, moving and handling, food hygiene, health and safety, infection control, diabetes and induction. Training had been booked for fire safety and she planned to access more POVA training. It is strongly recommended the manager puts this training plan into practice as soon as possible so staff have the skills to meet the needs of the people living at Newlands.

Staff at the home have an induction programme. Examples were seen of completed induction checklists for some staff. Plans to start Skills for Care induction were in place. It was evident the manager had plans in place to make sure staff receive training appropriate for their role.

Staff spoken to knew each person and were aware of their individual needs and preferences. One relative spoken to said, "This place is literally like home, there is a warmth, the majority of staff are long serving. I always go away from here knowing that my mother is well cared for and that means a lot. They know about people's individual foibles, I see alot that goes on. The staff communicate well amongst themselves and with me. The manager responds and reacts to us and acts upon what we say. I always feel welcomed here."

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.

Systems were in place to monitor care practices, to safeguard the interests and well being of the people living at the home.

Evidence:

The manager had been in post since December 2008. She is a registered general nurse and holds the registered managers award. A number of improvements had been made including recruitment, care plans and staff training and she showed she was aware of the need to continue to develop these areas. Comments during this visit were positive from people who use the service, visitors and staff. One staff member said, "Everything here is gradually getting better all the time."

In relation to her application to register with the Care Quality Commission she stated her application was in process and she will submit this soon. This visit showed that a period of management stability was leading to the service responding more fully to promote and protect the health, welfare and safety needs of the people who are accommodated and employed there.

The manager stated all policies and procedures had been updated since the last

Evidence:

inspection. The service use both formal and informal methods of quality assurance. This included talking and listening to people and having positive interactions. A survey's analysis had just been returned for one carried out in July 2009.

A procedure was in place for the management of people's personal spending money. A sample of people's pocket monies were looked at and showed amounts were accurate and receipts were present.

A sample of maintenance records looked at showed appropriate checks were being carried out regularly in relation to fire safety, lifts and gas to ensure that everything was in good working order and well maintained.

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	29	19	<p>The recruitment process must involve seeking evidence that the the prospective employer has the correct work permit status.</p> <p>This will help ensure that only people suitable for the role are employed a the home.</p>	10/09/2009
2	31	8	<p>An application must be submitted by the service to register a manager with the Care Quality Commission.</p> <p>This will ensure that regulation 8 is met and aid continuity to the service provided at Newlands.</p>	05/06/2009

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

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

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	7	A recommendation was made for the care plan evaluations to reflect on any changes in the person's health care during the previous month rather than state continue care as plan, when there have been changes for the individual during this time frame.
2	8	Worn pressure relieving cushions should be replaced in order to provide the most effective pressure relief for people.
3	8	The records should include an appropriate risk assessment in relation to bed rails to ensure they are appropriate for the person's needs and to ensure there is no risk of entrapment for the person.
4	30	It is strongly recommended the manager puts the staff training plan into practice as soon as possible so staff have up to date skills to meet the needs of the people living at Newlands.

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

Copyright © (2009) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.