



Making Social Care
Better for People

Inspecting for better lives

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:

zero star poor 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:
Adele Berriman	2 9 0 4 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:	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	0	8	1	2	2	0	0	8
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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.

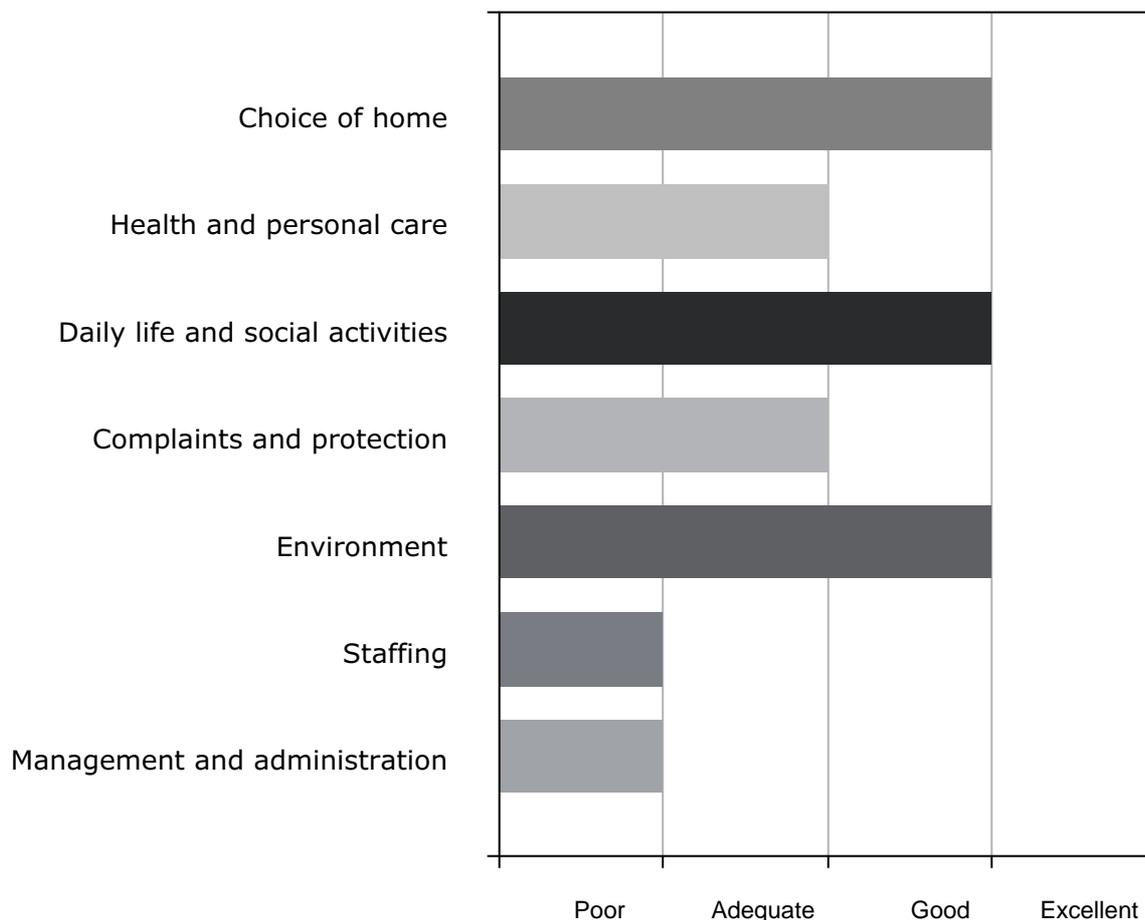
Summary

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

The quality rating for this care home is:

zero star poor service

Our judgement for each outcome:



How we did our inspection:

As part of this key inspection report we carried out an unannounced visit to the service. We arrived at the home at 11.10am and left at 6.10pm. During the visit we looked at documents including a selection of care plans, staff files, policies and procedures. We spoke to six people who live at Newlands and one of their relatives, the manager and a member of staff.

Prior to our visit the manager had completed an Annual Quality Assurance Assessment (AQAA). This document gave them the opportunity to tell us what the service does well, how they have improved over the last 12 months and their plans for improvement in the next 12 months.

Two people completed a survey form with the assistance of their relatives and one member of staff completed a survey form.

A random inspection visit was made to Newlands in December 2008. The visit was made following several concerns regarding changes to the provision of Kosher foods at the home. The issues that were raised were fully addressed by the service and a full kosher diet is available.

At the time of this visit two safeguarding issues were being investigated under Salford Social Services safeguarding procedures.

The majority of people who live at Newlands are of the Jewish faith.

What the care home does well:

They offer specific cultural services and support to meet the needs of the people living at the home.

People told us that they knew who to speak to if they were not happy.

We saw staff support people in a dignified manner that promoted their dignity.

The service benefits from having a Shomer visit on a regular basis to assist with the preparation of cultural events and oversee the food preparation for the Kosher diet provided at the home.

The environment is clean and tidy and provides a comfortable place for people to live.

What has improved since the last inspection?

They have ensured that appropriate licensing and arrangements are in place to meet the needs of the kosher diet.

They have changed how they store specific medication so that the storage complies with current guidance.

Designated fire doors were operational throughout the building.

Formal supervision sessions had been made available to staff to discuss how they are working.

What they could do better:

Improvements need to be made to the information detailed in people's care plans to ensure that their current needs are fully demonstrated. Failure to identify people's needs and wishes in full may result in a person's needs not being met.

All identified risks to individuals must be assessed and information made available to demonstrate what actions need to be taken to minimise the risk. Failure to have appropriate risk assessments in place may result in people's health and wellbeing being put at unnecessary risk from harm.

Improvements must be made to the services recruitment procedures. Relevant Criminal Record Bureau checks and references must be sought prior to people commencing employment. Failure to obtain the appropriate checks may result in people not suitable for the role being employed and people living at Newlands being put at risk.

They must ensure that staff receive appropriate training for their role and that records are maintained of all training undertaken. Lack of awareness or training may result in people not receiving the care and support they require in a safe 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 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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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 the home so they know their needs can be met.

Evidence:

The manager told us that prior to a person moving into Newlands she would visit them to carry out a pre-admission assessment. The purpose of this assessment is to ensure that the home is equipped with the appropriate resources to fully meet the needs of the individual.

Information gained during the pre-admission assessment was recorded on a set format that gave the opportunity to records people's physical, medical and care needs. We saw a needs assessment that had recently been completed by the manager who told us that as the person was unable to communicate their needs a relative had taken part in the pre-assessment process.

Evidence:

They told us that prior to a person making the decision to move into Newlands, they are invited to visit the home and any time to spend time with residents and staff, have a meal and join in any activities that are taking place. Overnight stays were also available to prospective residents.

The two people who completed a survey form with the assistance of their relatives told us that they had received enough information from Newlands to help them decide that the home was the right place for them to live.

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

People's care needs are not always fully identified in their care plans. This may mean that people living at Newlands may not always get the care and support they require.

Evidence:

We saw that the service had a system in place for the recording of people's needs and wishes relating to their care, their personal information details and personal history. This information was contained in individual's personal files.

We looked at the care plans of three people. Not all of the information that we saw was up to date. For example, the information for one person was from their previous address and we saw no evidence that the person's needs and wishes had been reviewed.

The care plan format contained a personal cleansing record sheet that gave the opportunity for staff to record when support had been given or offered to individual's with bathing, showering, shaving and personal hygiene. Not all of these records had

Evidence:

been completed in full. It is essential that all care offered and delivered to people is recorded to ensure that a consistent service is being delivered and that individual's needs are being met.

Two of the care plans that we looked at contained personal inventories of their personal effects. One had not been completed and the other had been completed at the person's previous address. A detailed up to date record of people's personal effects should be maintained at all times to ensure they can be accounted for.

Individual risk assessments for activities including moving and handling, nutrition, the management of pressure area and the use of bed rails formed part of people's care plans. We saw that several of these assessment had not been completed in full. For example, one pressure area risk assessment stated that the person was high risk, however, no actions were seen to be recorded as to how this risk was to be managed. We saw that for one person the use of bed rails had been identified as a risk, however, we saw no evidence that an assessment of the risk had been carried out. We saw a moving and handling risk assessment in which the outcome scores had been added up incorrectly. This could have an effect on how staff move people around the home. Detailed accurate assessments must be carried out on all identified risks to individual's and information made available to the staff team on how these risks can be minimised.

Daily records formed part of the people's care plans. Not all of the records we saw contained detailed information about the persons day. For example, statements such as "comfortable day - no complaints raised" and "care needs met" failed to demonstrate what care and support had been offered and delivered to people. To ensure that people receive a consistent approach to their care and support needs detailed records should be maintained.

Care plans gave the opportunity for visits from health care professionals to be recorded. People told us that they always receive the medical support they require.

The service's policy for the administration of medication was seen during the visit. The information in the policy did not reflect the practices of the home. For example, the policy referred to documents that were not in use at the home. In addition, the policy referred to another home. The manager told us that she was in the process of reviewing all of the services policies and procedures and would ensure that the review of policies and procedures relating to medication were prioritised. Policies and procedures relating to the safe administration of medication must be in place to help ensure that medication is managed appropriately.

We saw that a system was in place for the ordering of medication and that medication

Evidence:

was stored appropriately. All medication administered was recorded on Medication Administration Records (MARs) supplied by the dispensing pharmacist.

During our visit we observed staff addressing and supporting people in a respectful manner that promoted their dignity.

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 receive the cultural and dietary support they need to maintain their chosen lifestyle.

Evidence:

A part time activities co-ordinator was employed at the home to facilitate entertainment and activities for people five afternoons a week. A monthly programme that details what entertainment was planned was available throughout the home. People told us that they had a choice of whether they wished to participate in the planned activities.

Both people who completed a survey form told us that there were always activities arranged for them to take part in. One person wrote that they would like 'more activities, its a long day with only entertainment for one hour Monday to Friday.' People told us during our visit "we like the entertainment."

We saw that the entertainment schedule also included festivals and activities around the Jewish culture. These activities were overseen by the Shomer who visits the home on a daily basis.

Evidence:

A notice board in the hallway displayed information for people including when the Shabbat starts and ends.

During the visit people told us that they were able to receive visitors when they wished.

Meals were served in a large, pleasantly decorated dining room on the ground floor. People told us that they were encouraged to eat in the dining room to socialise, however, if they wished they could have their meals in their bedroom.

The Shomer visits the kitchens on a regular basis to light the ovens and oversee the food preparations in the kitchen. All food was suitable for the Kosher diet and was prepared and cooked in a kitchen with both dairy and non-dairy facilities.

A four weekly menu was in use that demonstrated that people had a choice at mealtimes. We had lunch in the dining room with people. The menu was soup, Jacket potatoes with a selection of fillings and cauliflower cheese followed by a choice of desert. The food that we had was hot and adequate. People told us that they usually liked the meals served at the home.

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

Policies and procedures relating to safeguarding must be reviewed and updated to ensure that people have access to up to date information.

Evidence:

A copy of the services complaints policy and procedure were readily available throughout the home. The manager demonstrated a clear system for recording any complaints received regarding the home.

They told us that three formal complaints had been made about the service since we last visited, all of which had been resolved within 28 days.

We looked at the complaints that were on file. the majority of the complaints were relating to the with drawl of the Manchester Beth Din license on December 08 for a short period of time. This issue was resolved and the license is now back in place.

During the visit the manager demonstrated a awareness of local safeguarding procedures, however, they were not available for the staff team.

People who spoke to us during our visit and people who completed a survey form all told us that they knew who to speak to if they were not happy. Not everybody that we spoke to during our visit knew how to make a formal complaint about the service. We

Evidence:

recommend that people are made aware of the complaints procedure on a regular basis.

There was no up to date information relating to Salford Social Services joint agency safeguarding procedures available. A copy of this information should be available at all times to ensure that that staff are aware of how to respond in the event of a concern being raised. Failure to have this information may result in a situation not being dealt with appropriately. The manager told us that she would make it a priority to ensure that the appropriate information is available to all staff.

There was no information available to demonstrate the staff had received awareness training in Safeguarding adults on the day that we visited. We were later given information that demonstrated that several staff had attended awareness sessions on safeguarding people, these sessions had been organised by Salford City Council.

At the time of our visit two situations were being investigated under Salford Social Services joint agency safeguarding procedures.

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.

A clean, pleasant and comfortable environment is provided for the people who live at Newlands.

Evidence:

The home is fully accessible via a ramped entrance to the front of the building. A passenger lift gives people access to both floors of the accommodation.

They employ a part time handy person to carry out general maintenance, repairs and the regular testing of equipment and the fire detection system.

We saw that re-decoration and refurbishment of some rooms had taken place since we last visited.

We looked at several communal areas around the building. They were comfortably furnished to meet the needs of people creating a pleasant environment for people to spend time.

We looked at several bedrooms, all were personalised with residents personal effects. We saw that some people had furnished their rooms with a mixture of their own furniture and furniture supplied by the home.

Evidence:

People told us that they liked their rooms and that they were happy
During our visit we found the environment to be warm, clean and tidy. People told us
that home always fresh and clean.

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

Failings in the service's recruitment procedures may put people at risk from unnecessary harm.

Evidence:

At the time of our visit there were 3 carers, 1 registered nurse, 2 domestic staff, the handy person, the chef, a kitchen assistant and a laundry assistant on duty to meet the needs of the 25 people in residence (4 of which had nursing needs.) The manager was also on duty.

People told us positive things about the staff team. Comments included they "take good care of me", "staff do their best, they are very good" and staff are wonderful."

We looked at the recruitment files of four staff who had been employed since we last visited. It was of concern that the recruitment procedures had not improved following a requirement that we made when we carried out our last key inspection. Information available to us demonstrated that three staff members had commenced employment prior to appropriate Protection of Vulnerable Adults register (POVA) and Criminal Records Bureau checks (CRB) being completed or references received. To minimise the risk of people not suitable for the role being employed appropriate POVA, CRB and reference checks should be completed. Failure to carry out appropriate employment

Evidence:

checks may put people at unnecessary risk from harm.

The recently recruited manager demonstrated a good awareness of recruitment procedures that would minimise the risk of inappropriate people being employed at the home. They told us that they had recently started to recruit new staff.

We saw little evidence of training being made available to the staff team within the last twelve months. This demonstrated to us that no improvements had been made in this area since our last key inspection in which we made a requirement about staff training. It is essential that staff receive appropriate training for their role to ensure they are able to deliver the care and support people require in a safe manner.

The manager told that she had recently become a member of Salford Training Partnership and was in the process of planning training for the staff team.

We saw no evidence to demonstrate that newly recruited staff had received an induction into their role. However, the manager demonstrated an induction programme that would be made available to all newly recruited staff. It is essential that newly recruited staff have the opportunity to have an induction into their role.

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

The current recording systems in place do not fully ensure the efficient running of the home.

Evidence:

It was of concern that the home had not had a registered manager for a period of two years.

The newly recruited manager had been in post since December 2008. She is a qualified registered general nurse and also holds the registered managers award. During our visit she demonstrated a good awareness of working in social care and had a clear understanding of what improvements were needed within the service. The manager must make an application to register with the Care Quality Commission as the registered manager of the service.

Prior to our visit taking place the manager of the service completed an Annual Quality

Evidence:

Assurance Assessment. This document gave the service the opportunity to tell us what they do well, how they have improved in the last 12 months and what their plans are for the next 12 months. The information in the AQAA did not tell us everything we wanted to know and it did not tell us how many staff had completed a National Vocation Qualification (NVQ).

It was of concern that we found little evidence of any improvements in the areas of care planning, risk assessing, safeguarding and recruitment, key areas in which we made requirements on following our last key inspection. It is essential that systems are in place to minimise the risk of people not receiving the care and support they require whilst living at Newlands.

They told us that their quality assurance system includes sending out survey to people who use the service four times a year. The surveys are sent out by the company's head office who collate all of the information returned, feedback is then given to the manager. The manager told us that since she has been in post two resident/family meetings have taken place (one in December 08 and one in February 09) and that she plans to have regular meeting with residents and their families throughout the year.

A procedure was in place the safe management of people's monies.

We saw that the manager was in the process of reviewing and updating all of the home's policies and procedures. She told us that reviewing the policies and procedures were a priority to ensure that suitable and up to date guidance is available to promote people health, safety and wellbeing.

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	7	15	<p>Care plans and risk assessments must be devised for all people resident at the home to ensure that all their needs and any identified risks are managed appropriately.</p> <p>Residents care plans must contain consistent, up to date information and all care offered and delivered needs to be recorded appropriately to ensure that that residents receive the care and support they need at all times. Timescale of 20/09/07 not met.</p>	17/06/2008
2	30	18(1)(c)	<p>To ensure that residents receive the care they require all care staff must receive regular up to date training in all aspects of their role. Timescale of 27/09/07 not met.</p>	17/06/2008
3	31	8	<p>The person managing the home must be registered with the Commission for Social Care Inspection.</p>	30/06/2008

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	7	14	<p>Care plans must contain up to date information and all care offered and delivered needs to be recorded.</p> <p>This is to ensure that people receive the care and support they require.</p>	12/06/2009
2	7	13	<p>Risk assessments must be completed for all identified risks for individuals.</p> <p>This is to ensure that all known risks are recorded and actions are taken to minimise the risks.</p>	12/06/2009
3	18	13	<p>Policies, procedures and awareness of Safeguarding procedures must be developed.</p> <p>This is to ensure that staff are aware of the appropriate actions they need to take if a safeguarding concern is raised.</p>	05/06/2009

4	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
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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	Daily records should contain detailed information that fully demonstrates the care and support that has been offered and delivered to the person.
2	7	To ensure that appropriate records are maintained on behalf of individuals, detailed up to date records of people's personal effects should be maintained.
3	16	People living at Newlands should be reminded on a regular basis of how to make a formal complaint about the service.
4	38	To ensure that people health, safety and welfare are protected up to date policies and procedures that include best practice should be available at all times.

Helpline:

Telephone: 03000 616161 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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