

**HARROGATE
NEIGHBOURS HOUSING
ASSOCIATION
CATERING
BEST PRACTICE
GUIDELINES**



JUNE 2007

GUIDANCE AND INFORMATION

- Quality Strategy
- Operational Management Balance Scorecard
- Food Quality Monitoring
- Catering staff Capability and Skills Assessment
- Policy – Food Complaints
- Policy – Residents Nutritional Support
- Policy – Food Waste
- Policy – Quality
- Catering Audit
- Nutritional Monitoring Sheet
- Residents Meeting Example
- Catering Audit
- Catering Philosophy

HARROGATE NEIGHBOURS HOUSING
ASSOCIATION.

QUALITY STRATEGY

2006/7

Introduction

Harrogate Neighbours Housing Association Management and staff aim to achieve continual quality improvement through a performance management framework.

“Performance Management is a means of getting better results from the organisation by understanding and managing performance within an agreed framework of planned goals, objectives and standards” (Armstrong & Murliss 1991)

This document forms part of the overall quality strategy. Quality is continuous, is an attitude, a desire and firm belief, therefore affects every facet of service delivery within the organisation on a daily basis. To ensure that the strategy is live under the umbrella of performance, the programme takes three directions, ensuring staff and resident involvement.

1. Internal

- Regular review & audits in all departments
- Clinical & Non Clinical
- Resident meetings
- Relative meetings
- Service reviews

2. External (Future)

- Investors In People
- HQS
- Hospitality Assured

Aims

1. To provide high quality services to all customers.

2. To ensure that internal quality standards compare to the best in this area of health care.
3. To ensure poor quality practices are eliminated.
4. To establish the residents perception of a quality service, and incorporate that ethos into our evaluation.
5. To ensure safe systems of work are established, implemented and practiced.
6. To ensure the business objectives acknowledges and incorporates quality issues.

Objectives.

1. To provide high quality services to all customers.

- Through training, each member of staff will understand his / her role in conjunction with providing a quality service.
- All staff will maintain and prove their professional development to meet the needs of PREP and to continue to increase their knowledge base.
- All staff will receive basic Customer Care training.
- Clinical & Non Clinical Risk Management Audit will identify areas of poor clinical practices and services.
- Good clinical and best practice will be acknowledged, evaluated and shared.
- Strategies, policies and procedures will be reviewed and developed as and when necessary.

2. To ensure internal quality standards compare to the best in this area of health care.

- The staff will participate in internal and external audits and assessment of our standards of practice.

3. To ensure poor quality practices are eliminated.

- Complaints and areas of concern will be investigated to prevent any recurrence of the problem.
- Reviews of complaints will be undertaken monthly.
- A planned programme of maintenance of equipment and building will be implemented.
- Clinical audit has been established and issues raised are actioned appropriately. Additional audits are also to be put in place.

4. To establish the residents perception of a quality service, and incorporate that ethos into our evaluation.

- A resident satisfaction survey (both written and verbal) will be developed and assessed .
- Corrective actions will be taken in order to build upon good practice and eliminate weaknesses.
- Review of complaints will form part of our corrective action programme.

5. To ensure safe systems of work are established and practiced.

- Policies and procedures will be reviewed, developed where necessary and information cascaded to all staff to ensure procedures are undertaken in a co-ordinated manner.
- Statutory training will be undertaken by staff at agreed times / dates.
- Heads of Departments will undertake Risk assessment training.
- Health & Safety at Work will be provided using safe systems of work and policies, a dedicated Health & Safety file will be displayed in the Homes. These systems will be reviewed.

6. To ensure the business objectives recognises and includes quality issues.

- Through regular meetings and discussion with management and the board, quality will be incorporated into the business plan each year.

Quality Management.

Quality services provided are challenged, implemented, maintained and evaluated.

Management at a strategic level is the responsibility of the Senior Management team. This is then cascaded to Heads of Department through regular monthly meetings.

The following issues concerning the quality service provided within HNHA are discussed.

1. Complaints
2. Resident Needs
3. Health & Safety issues
4. Preparing for and actioning specific audit results – internal and external
5. Working towards Accreditation from External Quality Audits
6. Environmental concerns – furnishings, housekeeping, catering, maintenance.
7. Co-ordinating training needs – ie: Customer care, health & safety, fire, infection control, food handling, moving and handling.

Reporting and Monitoring.

An annual Quality report will be compiled which will take each objective as laid out in this strategy and document progress made. This will be in the form of a Quality Improvement plan which will be developed to maintain ongoing quality of all services, which will be reviewed annually

This report will be discussed at the appropriate Board meeting by the Chief Executive and at the Heads of Department meeting

HARROGATE NEIGHBOURS HOUSING ASSOCIATION

Department Quality Standards Form.

Quality Issue	Monitoring Mechanism	Frequency of Monitoring
1		
2		
3		
4		

HARROGATE NEIGHBOURS HOUSING ASSOCIATION
BALANCE SCORECARD 2006/07
Operational Management

Key Issues

▪ **Tenant and Residents Care Provision**

The primary function of Harrogate Neighbours Housing Association is to provide a home for tenants and residents. The facilities of the Home should reflect the philosophy of care and the culture of the organisation. The resident areas should allow the effective and efficient completion of home life activities, but the sociological well being of the residents should be considered in conjunction with this. The facilities must reflect current expectations of standards and endeavour to promote a homely environment. This should allow the residents to retain dignity and should actively encourage independence where appropriate. The management and staff must aim to achieve, maintain and review high standards of tenant/resident focused care. Competent, skilled care assistants who will embrace change must deliver the care. This care must be in partnership with tenants, relatives, GP's, management and other healthcare professionals. The main aim is to strive towards providing best value service that is effective as well as efficient. Staff must be actively involved in quality initiatives, which promotes the Philosophy of Care, and the ethos of the organisation.

The development of the Care Package initiative is vital to the future of the Sheltered Housing Scheme, and it is paramount that this service is developed in conjunction with a efficient and appropriate call system and close relationships are formed with the necessary bodies i.e. NYCC to take this service forward. These negotiations could lead to this service extending to other elderly persons requiring our services within the immediate local area.

▪ **Catering Provision**

The importance of food to residents has been emphasised in a number of communications with relatives, carers and residents. Providing a service that is flexible, high quality and individualised is seen as being very important. The ability of residents to eat what they want, when they want, in an appropriate environment is a key element of residents' well being. These principles do not only apply to residents, but visitors, staff and volunteers should also be able to obtain quality food and refreshment when required and have a dedicated area to relax and have time out. The provision of these items needs to be balanced with the financial implications, but this should not be the main driving factor.

▪ **Housekeeping**

The importance of ensuring that the homes are maintained to a high level of cleanliness is vital to the quality of service provision to the tenants and residents of the homes. These principles must also apply to visitors, staff and volunteers. The provision of this service needs to be balanced with the financial implications, but this should not be the main driving factor as there are legal requirements and standards with regard to infection control, cross contamination and service levels set out by inspecting bodies.

- **Appropriate maintenance and estates services**

Providing an effective and efficient service to all users of the Homes is of paramount importance. With all the changes to the Homes it is an appropriate time to examine the provision of maintenance. These must fit with the needs of a partly refurbished building and meet the needs of the users, in a cost effective and efficient manner. All these items must comply with the legal, and directives pertaining to buildings. Best practice initiatives should be utilised at all times.

- **Gardens and Grounds**

The ability to gain access to the gardens is of great importance. The facilities should give opportunities to undertake meaningful activities and pursue interests and empower residents. The site has large gardens on both sites with car parking and landscaping. The management of the maintenance of gardens, utilizing volunteers, needs further development to ensure the gardens are kept at an agreed standard and develop over the next five years.

- **Current Buildings**

Managing the estate stock is a costly business and after wage costs, is the largest area of expenditure for the Home. Buildings need to be exploited to ensure they earn their keep, and out of date buildings need to be either refurbished or replaced.

- **Legal requirements**

Changes in legislation have been prolific over the past ten years. The Association has an obligation to keep abreast of the legislation and where possible take a proactive approach to its implementation.

- **To hold a building stock that is flexible, meets the future needs of the residents and are fit for their purpose**

Having buildings that are maintained to an agreed standard is of course important. The aim is to ensure that the buildings are constructed to allow

flexibility where possible and are fit for their purpose. This involves a close relationship with the home strategy, to make change to current buildings or to build new buildings to meet the needs of the organisation and residents. The current building stock will meet the organisation needs within the next couple of years, but the process should be continually reviewed to ensure that strategic planning continues not only at an organizational level, but also in conjunction with the facilities strategy.

- **To develop the financial management skills of the operational team**

In an uncertain financial environment, the management of the organisation is vital to the success of the organisation. The operations must remain effective and efficient to ensure services are cost effective. The ability of the management of the departments to keep a tight control on the services is the key. Ongoing development of the operations management team is deemed very important and this area needs to continue to ensure this happens over the forthcoming years.

Financial

- Operate within unit/departmental budgets-allocated annually and monitored as element of month end reports.
- Develop a long term plan for asset replacement
- Utilise standards of comparable services to benchmark the services at the Home
- Explore ways of maximizing income streams and effectively utilize the facilities which are currently underused
- Dispose of buildings that have no further use and are beyond economic repair and if necessary replace with modern facilities.

Process Development

- Maintain development of care processes that are flexible, appropriate and of a high standard which meets current service needs, legislation and professional requirements, and embrace new technology
- To develop a Care Package system within the Sheltered Housing Site which includes rehabilitation service
- Formulate an annual review of service provision and continuous departmental review adapting the service where necessary
- Review year on year the operations strategy to ensure it keeps abreast of the changes in the Home's strategy
- Develop management systems to effectively maintain the grounds.
- Explore ways of ensuring buildings are multifunctional
- Review current maintenance practice to incorporate new equipment and plant, and to recommend an appropriate system for the continuing maintenance of the site. This will reflect best practice for the industry and comply with legislation and take a proactive approach.
- Undertake a multifaceted survey of the current building stock to identify the condition of the buildings and recommend courses of management. This should be repeated on a regular basis and reported on.

Customer

- Create a service to meet customers' needs and provide a flexible approach.
- Develop menus for residents, staff and visitors.
- Review and develop the service and hospitality services to put in place proposals to develop a flexible approach to care provision.
- Provide a service to meet the needs of all the different customer groups.
- Formulate a rolling programme of redecoration to ensure the current facilities are maintained to an agreed standard

Staff Development

- Undertake continuing professional development to ensure all operations departments keep abreast of current legislation.
- Develop systems to ensure that the maintenance function is suitable supported.
- Equip the management team with the necessary skills to professionally manage their department to agreed standards.
- Develop information technology skills in the team to maximize the use of computer software as a means of effectively managing the departments by exploiting this information stream.
- Develop the management skills of the team where appropriate, but to at least a diploma level for key personnel.
- Review the skill base and develop the operational skills of operatives in all departments. Ensure the continuing professional development of the whole of the staff team.
- Equip the team with the necessary skills to professionally manage the departments to agreed standards.

HARROGATE NEIGHBOURS HOUSING ASSOCIATION

CATERING DEPARTMENT

FOOD MONITORING

HEATH LODGE/GREENFIELD COURT

GUIDELINES

- 1. Date – to be completed at least four times a week and at different meal times.**
- 2. Presentation – to look at colour, consistency, general presentation of food on the plate/s.**
- 3. Food to be tasted and the quality of meat, vegetables etc to be checked and comments made were appropriate and applicable.**
- 4. Temperature of food to be checked on presentation.**
- 5. To indicate whether lunch or tea and what food monitored.**
- 6. Staff to ensure that residents have been consulted over choice of menu.**
- 7. Staff to sign off each check. (Either Dorothy Parish, Gill Thrush or Sue Ullmann.**

Rating

1 to 5.

1 – Poor

2 – Average

3 – Good

4 – Very Good

5 – Excellent

This monitoring is not for grumbles or moans but to be an opportunity of constructive comments.

HARROGATE NEIGHBOURS HOUSING ASSOCIATION

CATERING DEPARTMENT

WEEKLY PERSONAL CAPABILITY AND SKILLS

ASSESSMENT REPORT

NAME:

DATE:

SIGNATURE:

ASSESSOR:

DATE:

SIGNATURE:

ADEQUACY OF SKILLS	A	B	C
KNOWLEDGE OF JOB	A	B	C
TAKING APPROPRIATE BREAK TIMES	A	B	C
ON TIME FOR WORK	A	B	C
WORK METHOD	A	B	C
WORK PRACTICE/ORGANISING SKILLS	A	B	C
WORK WITHOUT SUPERVISION	A	B	C
ATTENTION TO END PRODUCT	A	B	C
TIDY AND CLEAN IN METHOD OF WORK	A	B	C
WILLINGNESS TO LEARN	A	B	C
WILLINGNESS TO ACCEPT CONSTRUCTIVE CRITICISM	A	B	C
ATTITUDE	A	B	C
HYGEINE	A	B	C
ATTENTION TO UNIFORM	A	B	C

A = Good

B = Adequate

C = Poor

PLEASE CIRCLE APPROPRIATE LETTER SYMBOL

L	A	B	C
TOTAL			

COMENTS ON WEEKLY ASSESSMENT

ACTION AND SUPPORT REQUIRED

SIGNED BY ASSESSOR:

POSITION:

DATE:

HARROGATE NEIGHBOURS HOUSING ASSOCIATION
HEATH LODGE/GREENFIELD COURNT

Title: Food Complaints & Suspected Food Poisoning.

Local Policy: HL/G/6

Date: April 2006.

Purpose

To ensure staff awareness of the procedure and minimise risk.

Home Responsibilities

HNHA recognises the legal requirements under the Health & safety Act, and the importance that all staff who handle and serve food understand the principles surrounding food handling and the legal responsibilities towards the residents, staff and customers to whom they provide a service. To also ensure that staff are aware of the procedure for reporting complaints from customers, and suspected food poisoning incidents.

General Instructions

1. Any complaints of food / meals must be reported to the chef on duty.
2. A food complaint incident form will then be fully completed by the chef.
3. The form will be submitted to the Home Manager who will discuss the complaint with the Chef Manager who will then discuss the complaint with the catering staff and action as necessary in order to prevent a re-occurrence. The resident will be visited by the Chef Manager and the Person in Charge to follow up the complaint.
4. The form should then be submitted to the Chief Executive who will discuss the complaint with the Manager if necessary.. The form will then be retained in the complaints file in the main office.
5. All complaints will be discussed at staff meetings
6. All complaints will be assessed during the annual Audit process.
7. Any alleged / suspected case of food poisoning must also be reported to the appropriate Manager and chef on duty. The Home Manager and Chief Executive must be informed.
8. The Home Manager will then inform the Environmental Health Department, and as necessary the Executive Committee.
9. In these cases an staff meeting will be held to inform all staff of the situation.
10. If a food poisoning outbreak is suspected, then the SMT will meet to discuss management and likely media attention.

Signature of Chief Executive

Review Annually

Due April 2007

Appendix /FoodComplaints

Verbal Complaint Form

Name of Resident	
Room Number.	
Date / Time of Complaint	
Details of Complaint Made – in as much detail as possible.	
Action taken or required With timescale in necessary	
Name of Staff Member who Received Complaint.	

Signature of staff member _____.

Date _____.

Please retain a copy in the Complaints File in the Managers office, Chef Manager file

**HARROGATE NEIGHBOURS HOUSING ASSOCIATION
HEATH LODGE**

Title: Food Waste Monitoring

Local Policy: GC/P/24

Date: January 2007

Purpose

To ensure staff awareness and maintain a system to ensure that waste is monitored after every meal time.

Home Responsibilities

Heath Lodge understands the importance that all staff involved in the residents care must be aware of the resident's nutritional needs and of recognising the resident's nutritional status. Adequate nutritional standards of food and fluids are crucial to the well-being of the residents. It is the management's team responsibility to ensure that policies and procedures are in place, and that all staff are educated in the correct procedures for dealing with food waste. The home also acknowledges the legal standards regulated by the Registered Homes Act 1984.

General Instructions

The waste from every meal time is emptied into a plastic container. The Chef Manager/Chef will identify any problems with that meal before disposal of the waste. Any issues are raised with the Home Manager/ Person in Charge and Care Staff who may have served that meal. If the concerns are related to an individual resident then the policy on Nutritional Support will be followed. All waste food will be disposed of in the correct containers i.e.; sealed black bags. The council will collect all general food waste and cardboard waste every Tuesday. All food waste will be taken to the containers in securely tied black bags, purchased purposely for this job.

Signature of Chief Executive

_____.

**Review Annually
Due January 2008**

**HARROGATE NEIGHBOURS HOUSING ASSOCIATION
HEATH LODGE**

Title: Quality

Policy: *HL/H/36*

Date: June 2006.

Purpose

Quality is continuous, is an attitude, a desire and firm belief, therefore affects every facet of service delivery within the organisation on a daily basis and must ensure staff and resident involvement.

Home Responsibilities

Heath Lodge recognises the importance of quality, and that it is managed in the best interests of the service users.

Aims

7. To provide high quality services to all customers.
8. To ensure that internal quality standards compare to the best in this area of health care.
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Signature of Chief Executive_____.

June 2006.

Date of Reviews:

Jun 2007	Jun 2008	Jun 2009

HARROGATE NEIGHBOURS HOUSING ASSOCIATION

HEATH LODGE

NUTRITIONAL RISK ASSESSMENT			
NAME			
CHECK	RATING		SCORE (tick)
Build/Weight for height	Normal	0	<input type="checkbox"/>
	Obese	4	<input type="checkbox"/>
	Underweight	3	<input type="checkbox"/>
	Recent unintentional weight loss	4	<input type="checkbox"/>
	Severly undernourished	5	<input type="checkbox"/>
Ability to Eat	Eats independently	0	<input type="checkbox"/>
	Requires assistance	1	<input type="checkbox"/>
	Requires special cutlery/bowls	2	<input type="checkbox"/>
	Has difficulty chewing	2	<input type="checkbox"/>
	Is unable to eat solids	3	<input type="checkbox"/>
	Is unable to eat/drink	4	<input type="checkbox"/>
Age	65 -74	2	<input type="checkbox"/>
	75 -80	3	<input type="checkbox"/>
	81+	5	<input type="checkbox"/>
Apetite/Dietry Intake	Usual apetite	0	<input type="checkbox"/>
	Reduced apetite	3	<input type="checkbox"/>
	Fluids only	4	<input type="checkbox"/>
	Not eating	5	<input type="checkbox"/>
Gut Function	Normal	0	<input type="checkbox"/>
	Feels Nauseous	1	<input type="checkbox"/>
	Occasional Diarrhoea/vomiting	2	<input type="checkbox"/>
	Frequent diarrhoea	3	<input type="checkbox"/>
	Profuse diarrhoea	4	<input type="checkbox"/>
Skin Type	Healthy	0	<input type="checkbox"/>
	Dry	3	<input type="checkbox"/>
	Odematous	3	<input type="checkbox"/>
	Broken skin	4	<input type="checkbox"/>
Medical Condition	Malabsorbtion	5	<input type="checkbox"/>
	Terminal illness	3	<input type="checkbox"/>

Neurological disease	4
Mental illness	4
Severe infection	5

KEY TO ACTION PLAN

Grand total

GRAND TOTAL	CATEGORY	ACTION NECESSARY
0 - 8	No nutritional risk	Weigh monthly and encourage well Balanced diet
8-11	Cause for concern	As above and record missed meals. Encourage to eat more where possible
12 -14	At risk	As above and offer additional snacks and Drinks. Discourage low fat drinks. Assist with food choices and ensure meals are always within reach.
15 -17	High Risk	As above. Discuss supplements with G.P. Supervise and assist with feeding. Weigh and review weekly.
18+	Very high risk	As above. Discuss referral to community With Dietician and GP. Record all meals on food chart.

HARROGATE NEIGHBOURS HOUSING ASSOCIATION

HEATH LODGE

RESIDENTS MEETING

15TH JUNE 2006

Present: D. Blair, J. Smeed, E. Smith, P.Hobbs, K. Stacey, S. Jillings, E. Jones, L. Evans, S. Ullmann, E. Ruddock, W. Clarkson

1. Food – General feeling that some times meals are inconsistent, the meat is tough sometimes, and the vegetables can be undercooked, and over cooked. Sue Ullmann explained that we are about to change our meat supplier who has been recommended so we will monitor the quality of the meat. Gill Thrush to ensure that meat and veg quality is consistent. Some residents asked if bread and butter could be taken round before the main meal is served at tea time. Gill will ensure that bread and butter is ready on a platter, and the Linda to ensure care staff take it round to residents. Suzanne would like grilled kippers from time to time. Gill to ensure and liaise with Suzanne. Residents felt that they would like variety with the soups not always potato and leek. Gill to ensure variety. Residents felt that on the whole the food was good, there were some things on the menu they didn't like – but Sue explained that the new menus would be reviewed after the four week cycle and changes made where necessary.
2. Activities – All liked the Motivation and Co sessions and look forward to more of these. Also like the reminiscence, didn't like the gentleman who came on Wednesday – too loud and too energetic. Would like to gentleman who played the guitar from the college.
3. Housekeeping – very happy with the cleanliness of their rooms and the home, and like Gloria, the new Head Housekeeper.
4. Care – all pleased with the care, and said the staff were very good.
5. Sue Ullmann explained that we have update the fire procedure and changed the time of the drills from lunchtime (1.00pm) to 8.30am. The residents at the meeting confirmed that in the event of a fire they stay put wherever they are in the building and wait for a staff member for instructions.
6. Sue and Linda reminded everyone about the Garden Party on the 15th July, and hoped everyone and their families would attend. Suzanne asked if we would like contributions to the fair for gifts. All contributions for the tombola and raffle are gratefully received from everyone.

HEATH LODGE

CATERING DEPARTMENT

AUDIT TOOL

MONTH: TIME:

NO	STANDARD	M	PM	NM	SIGNED	ACTION
1	Table cloths are clean, and ironed					
2	Crockery matching, not cracked or chipped					
3	Cutlery clean, polished and matching					
4	Glass ware clean, not chipped or cracked					
5	Bud vases present with fresh flowers					
6	Cruet sets complete and clean and full					
7	Sauce bottles available and clean					
8	Daily menu displayed in dining room					
9	Room generally clean and tidy					
10	Lighting in good repair, clean and bright					
11	Serviettes available for all residents and are clean					
12	Fresh fruit basket available					
13	Staff pleasant, courteous to residents					
14	Staff ensure residents catering needs are met					
15	Staff are correctly and appropriately dressed					
16	Water and juice available as well as tea and coffee					
17	Residents are offered a choice					

18	The servery is clean and used appropriately					
19	Staff ensure residents are finished before clearing					
20	Trays are clean and presented appropriately					
21	Where appropriate meals are covered					
22	Wastage is monitored by care and catering staff					
23	Fridge's are clean and temp controls complete					
24	Food in fridge's is dated and labelled					
25	Frozen food is dated and rotated					
26	Foods are stored appropriately i.e. meat, dairy					
27	Cleaning schedules are up to date					
28	Kitchen is clean including sills, under counters					
29	Cookers are clean – top and inside					
30	Fly screens and zapper are In use					
31	Probing of deliveries is carried out					
32	Evidence of special diets documentation					

M = met PM = Partially met NM = Not met

Comments:

Signed: Date:

Position:

HARROGATE NEIGHBOURS HOUSING ASSOCIATION

HEATH LODGE

Philosophy

Catering Department

We believe that the home should provide a full and varied choice of menu that all residents are able to access.

- We will encourage all residents to have a choice
- We will welcome input and feedback from residents and families
- We will endeavour to provide a good quality service in all areas of the department
- All staff will be encouraged to assist in meeting the needs of residents requirements at mealtimes
- The service provided will adhere to policies and safe practices including health and safety and COSHH regulations

JUNE 2007