

Trevanion House Holidays Ltd

Trevanion House Holidays Limited

Inspection report

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Ratings

Overall rating for this service	Good ●
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Is the service safe?	Requires Improvement ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

We inspected Trevanion House Holidays Limited on 1 August 2016, the inspection was announced. This was because the service provides supported holidays for people with learning disabilities and people are often out on activities. We wanted to make sure people would be available to talk with us. The service is registered to provide accommodation and support for up to 14 people. There is accommodation available for a further seven people who do not require care and support. At the time of the inspection seventeen people were staying at the service. Four of them required support with their personal care. The service was last inspected in December 2013, we had no concerns at that time. The service was open during the Easter and summer holiday season and over the Christmas period.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

There were clear lines of responsibility in place. The business was owned by three directors who all were involved with the day to day running of the service. One of the directors was the registered manager. In addition there was an operations manager in place to support the directors. There was a duty director on shift seven days a week. An on-call system was in place so staff were able to contact a member of the senior management team at any time.

The premises were well maintained and decorated. There was a large garden which was well tended and an area for people to enjoy barbeques. The barbeque area was covered so it could be used in rainy conditions.

Guests arrived at Trevanion House on a Thursday evening. Staff showed them their rooms at this time and a meeting was held to explain evacuation procedures and other housekeeping issues. The following morning a meeting was held when people could choose what trips out they wanted to take part in on the first three days. Arrangements for the timings of meetings had been changed in response to feedback from people. A second meeting was held on a Monday for people to choose how they wanted to spend the rest of the week. Staff supported people to make meaningful and informed choices.

The atmosphere was relaxed and informal. People approached us to share their experiences of their holidays. On their return from trips out people spent time either in their room or one of the two available lounges. There was a range of DVDs and books available as well as free wi-fi.

People ate breakfast and an evening meal at Trevanion House. A packed lunch was supplied for people to have on trips out. The food was varied and people's individual dietary needs were catered for. People had access to drinks throughout the day and there was a licensed bar available.

Staff had received training in how to recognise and report abuse, and all were confident any concerns would

be taken seriously by the registered manager. Other training identified as necessary for the service was updated regularly. Staff received supervision and appraisals. New employees were required to complete a thorough induction which incorporated training, familiarisation with policies and procedures and shadowing more experienced staff.

There were enough staff on duty to support people to take part in their chosen activity and support them with any personal care. Staff took time to chat with people and reassure them if necessary. The systems in place to protect people from being supported by staff who were not suitable for the role were not robust. There was an inconsistent approach to following up on references when new staff started work. Some people did not have any references on record; some had only one and others two. The quality of one reference was poor. The organisation did not have a clear policy in place regarding references for management to follow when recruiting new staff.

The provider acted in accordance with the requirements laid out in the Mental Capacity Act 2005 (MCA) and associated Deprivation of Liberty Safeguards (DoLS). Staff recognised and respected people's rights.

When booking a holiday people were asked detailed questions about their support requirements. The registered manager used this information to decide whether they were able to meet the person's needs. They considered the needs of all the guests when deciding whether to accept a booking. Information from pre-booking forms was used to develop a care support log. This contained guidance for staff on how to support people well. Any risks were identified and staff told us they felt they had all the information they needed to do their jobs effectively.

There were effective quality assurance systems in place to monitor the standards of the care provided. People, relatives and staff were asked for their opinions and suggestions regarding the running of the service.

We found a breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. You can see what action we have told the provider to take at the end of the full version of the report.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not entirely safe. Recruitment procedures were not clearly defined. There was not a consistent approach when following up references for new staff.

Staff had received safeguarding training and were confident about reporting any concerns.

There were sufficient numbers of suitably qualified staff to keep people safe.

Requires Improvement 

Is the service effective?

The service was effective. New employees completed an induction which covered training and shadowing more experienced staff.

The service acted in accordance with the legal requirements of the Mental Capacity Act and associated Deprivation of Liberty Safeguards.

There was a varied menu available for people which took into account individuals dietary requirements.

Good 

Is the service caring?

The service was caring. The atmosphere was relaxed and appropriate for a holiday setting.

Staff had built trusting relationships with people.

There were systems in place to help ensure people were able to make meaningful and informed choices.

Good 

Is the service responsive?

The service was responsive. Information about people's support needs was gathered when they booked their holidays.

People had access to a range of meaningful activities.

There was a satisfactory complaints procedure in place.

Good 

Is the service well-led?

Good 

The service was well-led. The staff team told us they were well supported by the registered manager and other directors.

Management and staff were focused on ensuring people had a positive holiday experience.

There was a robust system of quality assurance checks in place to help ensure the safety and suitability of the environment.

Trevanion House Holidays Limited

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 1 August 2016 and was announced. We gave notice of our inspection visit because people were often out taking part in activities and we wanted to be sure people would be available to speak with us. The inspection was carried out by one adult social care inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed this along with previous inspection reports and other information we held about the home including any notifications. A notification is information about important events which the service is required to send us by law.

We observed staff interactions with people and saw how people responded to staff. We spoke with six people staying at Trevanion House, the registered manager, the holidays director and a further six members of staff. We also spoke with a relative who was visiting the service. Following the inspection we contacted two providers who had booked holidays with the service on behalf of people they supported to hear their views.

We looked at care records for four individuals, people's Medicine Administration Records (MAR), nine staff recruitment records and other records relating to the running of the service.

Is the service safe?

Our findings

We looked at staff recruitment records and noted an inconsistency in the number of and/or quality of references held on file. For example, one staff member's records held only one reference and this was a single sentence handwritten at the bottom of the reference request letter. The registered manager told us this employee had previously worked for the organisation, had left to work elsewhere as a care worker, and then returned. Therefore they knew the member of staff well. However, it is important to gain satisfactory recent references, particularly when the staff member had been working in the caring sector. Out of the nine recruitment records we reviewed four contained two references, two contained one and three contained none. The registered manager told us one of the employees with only one reference was kitchen staff and it was the organisations policy only to seek one reference for this role. We asked to see the recruitment policy to check this. There was no recruitment policy in place. The registered manager was unsure if the missing references had been archived or incorrectly filed or had never been followed up. This demonstrated recruitment processes were not properly established or operated effectively and people were potentially at risk of being supported by unsuitable staff.

This was in breach of Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The registered manager told us they would arrange for an audit of staff files to be completed to check if the information was complete and address any gaps. Following the inspection they sent us a draft copy of a recruitment policy outlining what references were required before new employees started work. They told us they were looking for the missing references and would chase up any that had never been received. This had already been done for one member of staff who had only had one reference on file.

Before new staff started work Disclosure and Barring (DBS) checks were completed to help ensure they were suitable to work in the care sector. Potential employees were required to complete an application form from which their employment history could be checked and any gaps in employment explained. Each file except one held a photograph of the employee as well as suitable proof of identity.

There were sufficient numbers of staff to meet people's assessed needs and help ensure their safety. Staff and people told us there were enough staff on duty at all times. There was one vacancy for a kitchen assistant and these hours were being covered by staff. An application for the position was being processed. The registered manager told us they arranged rotas to help ensure staff did not work a shift following a sleep-in shift. They said if this did occur it was because staff had volunteered to do the shifts. If they had been disturbed during the night alternative arrangements would be made to make sure they were not required to drive while on duty.

Staff retention was good and there was a core team of staff in place who had been with the organisation for several years. The directors had put systems in place to help ensure staff had job security throughout the year although the work was seasonal. Some people returned to the service for holidays on a regular basis and this meant they were supported by a consistent staff team who they were familiar with.

People told us they felt safe when staying at Trevanion House. Comments included; "I do feel safe, the night staff always do security checks [of the building]." A relative told us; "I'm very happy, she's safe here." We observed people spending time with staff and noted interactions were relaxed and informal.

People were protected from the risk of abuse because staff had received training to help them identify possible signs of abuse and knew what action they should take. Staff told us if they had any concerns they would report them to a member of the management team and were confident they would be followed up appropriately. One member of staff commented; "I would not have a problem with that at all." Flyers and posters in the service displayed details of the procedures to follow if they suspected abuse. These included contact details for the local safeguarding team. Staff told us they had not had any concerns about people's safety. The registered manager and a senior member of staff had attended the local authorities safeguarding training for managers.

Risk assessments were in place to help ensure people were protected from avoidable harm while on their holiday. Some risk assessments concerned the environment or regular trips and these were reviewed regularly to help ensure they remained relevant and up to date. Other risk assessments were about individual's specific needs and these were put in place using information gathered during the booking procedure and at check in. Staff told us they felt they were well informed about people's needs and able to support people safely. When one off activities were arranged risk assessments were developed to cover those particular circumstances.

People's medicines were managed safely and stored securely. The amount of medicines held in stock tallied with the amount recorded on medicine administration records (MAR). The registered manager gathered information about people's needs in respect of medicines during the booking process. When people arrived for their holiday the amount of medicine they had with them was checked and this was repeated when they left. Most people were responsible for taking their own medicine which they kept in lockable storage in their bedrooms. There was a fridge available for keeping medicines which required storing at low temperatures. Trevanion House Holidays had a policy of not accepting guests who took medicines which were subject to stricter controls by law. Staff had received general training in the administration of medicines. In addition they had undergone training in administering epipens which are used for the emergency treatment of severe allergic reactions.

On the first day of people's holiday's staff explained the evacuation procedures in case of fire. People were able to tell us how they would exit the building in such a situation. Personal Emergency Evacuation Plans (PEEPs) were developed for each individual containing information about what support people would need to exit the building in an emergency.

One shared bathroom on the ground floor had a sign indicating the water from the hot tap in a small hand basin was very hot and people should operate the cold tap first. We checked the tap and found the water was extremely hot. Some people may not have been able to read or understand the instructions and could be at risk of scalding. We discussed this with the registered manager who told us the problem had developed since having thermostatic mixing valves (TMV's) fitted in people's bedrooms to regulate the temperature. They said they would ask a plumber to look at the problem again and carry out a risk assessment the following day.

Is the service effective?

Our findings

Staff demonstrated a good understanding of people and their individual needs. They were able to describe to us the impact on people of their specific health conditions and how they supported people to alleviate any negative effects. A relative told us they found staff to be competent. They commented; "I've no worries, if I did I wouldn't let her [family member] come." A provider commented; "The team at Trevanion have demonstrated on many occasions their knowledge and skills of dealing with various situations that occur. In fact I have been surprised they have supported them so well given the short period of time they have to get to know them."

Staff had received training to equip them with the necessary skills to meet people's specific needs. This included training identified as necessary for the service and training aimed at meeting people's individual needs such as epilepsy and diabetes. Staff told us they had enough training to enable them to carry out their roles effectively. One member of staff told us; "The training is excellent and there are options to pick up extra if you want to."

Staff received regular supervision from the operations manager. This was an opportunity to discuss working practice issues, any concerns regarding people's support needs and identify any training requirements. The directors and operations manager regularly worked shifts and took these opportunities to observe staff working practices. Any concerns were quickly identified and followed up in individual's supervision sessions.

New staff were required to undertake an induction consisting of a mix of training and shadowing and observing more experienced staff. The induction process had recently been updated to include the new Care Certificate. This is a national qualification designed to give those working in the care sector a broad knowledge of good working practices.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We saw no evidence of any restrictive practices in place. Doors were unlocked and people were free to access all the shared areas of the building. Access to the kitchen was restricted to staff only as would be expected in a hotel setting. Staff demonstrated an understanding of the principles underpinning the legislation. For example, one member of staff said information given to them before one person came on holiday had suggested the person was unable to make day to day choices. They told us; "I soon found out

they could make choices, of course they could! It was just making sure they had the information they needed to make the choice."

No applications to deprive people of their liberty had been made at any time and we discussed this with the registered manager. They told us people were free to leave the building and had the capacity to agree to be accompanied if this was considered necessary. They told us no-one had ever objected to this or expressed a wish to go out alone. The organisations policy for MCA and associated DoLS had not been updated to reflect the most recent changes to the legislation. While there was no evidence people were being unlawfully restricted we were concerned staff did not have access to the most recent information. The registered manager told us they would contact the local DoLS team to discuss the requirements of the legislation further to help ensure they had a good understanding of the most recent changes to the law. Following the inspection the registered manager contacted us to let us know they had updated the relevant policy.

People had a choice of meals throughout the day and the menus were varied and healthy. For example breakfast options changed daily and ranged from a traditional fry up to scrambled eggs and smoked salmon. People told us they enjoyed the food, comments included; "Really nice" and "The meals are absolutely gorgeous." People's individual preferences and needs were gathered during the booking process. On the day of the inspection one person was following a gluten free diet. A response on a recently returned survey stated; "Special thanks for providing vegetarian food with such care." The kitchen was well stocked with a range of locally produced foods. One person had lost weight recently and a food chart had been put in place to help monitor what they ate during their holiday. The dining area was pleasant and there were flowers on the tables. There was a licensed bar available.

People were supported to access other health care professionals as necessary, for example GP's, and district nurses. The registered manager told us they had a good relationship with the local GP and could contact them for advice if needed.

The interior of the building was well maintained and decorated. People had a choice of two lounges where they could spend their time as well as the dining area. An outdoor area was used for barbeques. There was overhead covering in place so it could be used in rainy conditions. All bedrooms were en-suite and those on the ground floor all had wet rooms with one exception. People had a television and an internal phone in their rooms which they could use to call staff at any time if they needed assistance. There were shared bathrooms on the ground floor close to the lounges.

Is the service caring?

Our findings

We observed staff and people laughing together and saw people were at ease and comfortable with staff. As people returned to the service from various trips out we observed staff encouraging them to put coats and shoes away and choose where they wanted to spend their time before their evening meal. The atmosphere was relaxed and friendly. One person commented; "I love it here, nice hotel, nice food, nice staff." A relative said; "They are very caring. [Person's name] would soon tell you if they weren't." Staff were enthusiastic about their jobs. Comments included; "I love this job" and "I enjoy working with the guys. We give a fantastic service."

Staff worked to help ensure people's voices were heard. In the morning of the inspection a meeting was held when people chose what activities they wanted to take part in during the next three days. Staff spoke with each person individually to make sure they understood what activities were being offered and find out what they would prefer to do. Pictures of the activities on offer were shown on a large screen to further facilitate people's understanding of the choices available. People responded well to these making exclamations of recognition when photographs of venues they were familiar with were displayed.

Some people had holidayed at the service on several occasions and staff knew them well and had developed strong trusting relationships with people. The PIR stated 75% of the business came from guests returning every year and sometimes twice a year. A provider told us; "My clients enjoy going and have returned several times." A provider commented; "The people I support don't often comment on the people who they come into contact with. However this is where Trevanion is different and they speak about the staff as friends and obviously look forward to seeing and spending time with them."

Staff described how people had developed over a period of time and voiced pleasure in their achievements. One person stood up during the meeting we attended to tell the rest of the group about a particular tourist attraction. Staff supported them to do this and applauded afterwards. This clearly pleased the person and boosted their confidence.

A relative told us their family member had recently been through a difficult personal time and they had been concerned about how they would cope with being on holiday without family support. They had rang the registered manager beforehand to discuss their worries and found them to be supportive and open to ideas about how to support the person well. A plan had been put into place and the holiday was going well.

Another person's health needs meant they could become anxious in particular situations. It was not always possible to avoid the likely triggers whilst in the community and we heard the holiday director and registered manager discuss how they could best support the person to minimise the risk of them becoming distressed. The registered manager said; "Put him with [staff member's name]. He gets on well with her." They told us they always tried to match staff with people and also with trips, taking their interests into account. For example they told us; "[Staff member name] has no interest in plants so it's no use sending them to the Eden Project. They won't be enthusiastic." This demonstrated the management were able to adapt in order to meet people's individual needs.

People's privacy and dignity was respected. Everyone had a key for their bedroom and could spend time alone if they wished. People were able to make day to day decisions, for example when to get up and go to bed. One member of staff told us people sometimes became anxious due to being in an unfamiliar environment, particularly at the beginning of their holiday. They said they would sit up late with people to offer reassurance if necessary.

There was a range of information available for people in their bedrooms. This gave people information on topics such as laundry services, how to operate the television, the structure of the day and how to make a complaint. The information was well laid out using simple language and symbols. The symbols used to facilitate understanding were easily identifiable.

Photographs were taken by staff during the holiday and, with people's permission, these were displayed on a large screen in the dining room. In addition people were able to purchase a wristband with a usb connection containing all the photographs which they could then take home as a memento. A small booklet of photographs of the holiday was also produced and a black and white version was sent to people following their holiday. A colour version was available for purchase. A provider commented; "They come back with photos of things they have done."

One regular holiday maker had set up a 'Friends of Trevanion House Holidays' group on social media. This had over 50 members and enabled people to keep in touch following their holiday. The group was closed to protect people's privacy. This meant people were only allowed to join following the approval of the group organisers.

People were supported to write postcards to their families and friends during the holiday. A pay phone was available for people to use if they wanted to phone home at any time although this was out of order on the day of the inspection. The registered manager told us people were able to use the office phone if necessary.

Is the service responsive?

Our findings

When people initially enquired about booking a holiday they were required to complete a pre booking form. This enabled the management team to assess whether or not they could meet the person's needs. If they were unable to do this they did not accept the booking. The registered manager and holiday director told us it was important that everyone have a good holiday and if one person's needs impacted on other's this would spoil the experience for everyone. The effectiveness of the booking system was evidenced by the fact that they had only needed to send people home on two occasions in seven years when it had become clear they would not be able to support the person efficiently.

People were required to complete the pre-booking form even if it was not their first holiday at Trevanion House. This helped ensure staff were aware of any changes in people's needs. A relative confirmed they were always asked for this information.

Information in pre booking forms was used to create a care support log. Areas covered included; medical details, assistance needed with personal care, dietary needs and communication. Sometimes more information was gathered when the person arrived for their holiday, either from themselves or support staff or relatives. This was added to the care support logs and a briefing sheet was created. This allowed staff to get an overview of people's needs.

Staff were kept up to date with people's changing needs. Staff coming on shift had a verbal handover to make sure they were aware of any changes to people's care and support. The registered manager told us; "The handover is so important." Staff told us communication amongst the team was good and they were quickly made aware of any changes in people's needs. Diaries were kept for each person which were an individual record of how people had spent their time. When people returned from trips out staff who had accompanied them briefed the senior member of staff on duty as to how the trip had gone and any concerns they had.

People were encouraged to take part in a range of activities which reflected their personal interests and preferences. Three mini buses were available to help ensure people could be offered a variety of activities. On the day of the inspection it was raining heavily and this affected people's choices. Some people's health needs also impacted on what activities they would enjoy. Staff took these factors into account when making suggestions as to where people might want to go. Some people chose to have a day relaxing; others went to a local shopping centre, others to an animal sanctuary and others to a nearby tourist attraction. Trips for later in the week went further afield and offered people a variety of choices. People told us they enjoyed the trips and we saw people returned from their day out smiling and happy to share stories of their day.

Activities for the evening were arranged in the service including a disco and barbeque and a games evening. People also had access to free wi-fi and people were enjoying this on the day of the inspection.

There was a complaints policy in place and information on how to make a complaint was available in an easy read format in people's bedrooms. When complaints had been raised the registered manager and

directors had responded appropriately and investigated thoroughly. Meetings were held at the beginning of the week and mid- week to give people an opportunity to air any concerns. In addition people were asked to complete feedback forms following their holiday. There were thank you cards on display from people who had enjoyed their holiday at the service.

Is the service well-led?

Our findings

There was a clear management structure in place. The business was owned by three directors who were all involved with running the service on a daily basis. One of them commented; "It's our livelihood, we have to know it's running well." Each had clearly defined roles and responsibilities. One was the registered manager, one the holiday director and one the managing director. The registered manager explained which areas of the business each of them had oversight of. For example, the managing director had responsibility for the premises, health and safety and risk assessments. The directors were supported by an operations manager who had responsibility for staff supervisions. Staff told us they were aware of the management structure and one commented; "It works very well."

Staff and a relative all told us they considered Trevanion House Holidays a well- managed and organised service. They said the management team were approachable and available for support and advice at any time. A member of staff commented; "They [the directors] work with us, they come on the trips, it's very hands on." The directors and a senior member of staff shared responsibility for an on-call system so staff were able to contact someone quickly if necessary. Calls were usually made to request advice although directors were sometimes called on to cover shifts at short notice when staff were off work due to sickness.

The aim of the service was to offer a hotel experience for people visiting the area with opportunities to visit local attractions. The PIR stated; "The principle guiding the provision of holidays at Trevanion House is to offer guests the same opportunity of exploring Cornwall as that of any other visitor staying in a small hotel in Cornwall." One member of staff told us; "I enjoy my role, giving people a good day." All staff referred to people as "guests" demonstrating the ethos of the service was embedded in the working practices of staff.

Regular checks relating to the quality and safety of people's care were carried out. For example, environmental and vehicle checks. However, these had not identified the potential risk in respect of the very hot water in a communal toilet referred to in the safe section of this report. The management team had not recognised that people may not have been able to read or understand the instructions for using the taps which were displayed next to the sink.

The staff team shared responsibility for various daily and weekly checks. For example, one staff member was responsible for completing vehicle checks. Night staff had a task checklist to complete each evening. Members of the housekeeping staff team carried out weekly walk rounds of the premises to check for any defects. All staff were able to log any maintenance requests on the computer system. The registered manager told us any identified jobs were usually completed quickly.

People and their support providers or relatives were asked for their views of the service provided following every holiday. Any concerns or areas for improvement were highlighted and acted upon. For example, some people had commented they found having a meeting on the evening of their arrival tiring. In response the meeting had been shortened so it only covered housekeeping issues such as fire safety. Another meeting was then scheduled for the following day to decide what trips people wished to take part in during the first half of the week. We saw responses from this year's survey and the responses were positive.

Staff meetings were held at the beginning and end of the holiday season and in response to any specific issues. Areas covered included general working practices and other matters affecting the service people received. Staff told us they were an opportunity for them to raise any concerns. A recent staff meeting had been held as the directors had identified there was some dissatisfaction within the staff team regarding pay and conditions. The registered manager told us they were able to pick up on any problems like this quickly because of their daily presence and practical input into the running of the service. They commented; "We tackle things quite quickly, we don't let things lie." Board meetings took place quarterly. Senior management meetings were held every week during the holiday season.

Records relating to the management and running of the service and people's care were accurately maintained and securely stored. Records were kept on a computer system and there were clearly defined parameters of use in place which meant staff access to information was dependant on their role. This meant only staff who needed to had access to people's confidential information.

Trevanion House Holidays previous inspection report was clearly displayed within the building. Before the inspection we checked the organisations website and found the link to the CQC report was not easily located. We informed staff of this when we rang to inform them of the inspection visit. By the day of the inspection this had been addressed and the link was clearly available on the websites homepage.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed Recruitment processes were not established or operated effectively. Information specified in Schedule 3 of the Act was not available for each person employed. Regulation 19(1)(2)(3)(a)