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Title: FOR039 Quality Review Panel Off-Site RISAR Report	Approval Date: 12/02/2015



Dublin City University Recognised Institution Quality Standards Review On-Site Report

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1.0 Introduction

This report has been produced following the first review of the Recognised Institutions (RI) processes that support the design, deliver and review of the Pre-Hospital Emergency Care Council's (PHECC) approved courses. This is the first step in the quality improvement cycle as outlined in PHECC's Quality Review Framework (QRF). The result of this review provides both PHECC and the RI with baseline information which will inform continuous quality improvement to be outlined in the institutions Quality Improvement Plan (QIP). The review was carried out with the underlying principle of the RI "Saying what they do, doing what they say and proving it with verifiable documented evidence".

Figure 1: The QRF Building Blocks:



1.1 Institution Details

Name	Dublin City University
Profile	A University and a PHECC recognised institution since 2009.
PHECC courses being delivered	Cardiac First Response – Community Cardiac First Response – Advanced Emergency First Response
Higher Education Affiliation	Dublin City University
Address	Collins Avenue, Dublin 9

1.2 Reports Details

Date of on-site visit	17-02-17
Quality Review Panel (QRP)	
P Collins	QRP Chair – Independent
J Donaghy	QRP Member – Independent
D Brown	QRP Member – Independent
K Walsh	QRP Member – PHECC
RI Representatives	
Enda Whyte	Course Director
Noel McCaffrey	Medical Director
Siobhan O'Connor	Faculty
Miriam Downey	Faculty
Date of Final Report	
Date of Council Approval	

1.3 Scope of the Review

The review covered all aspects of the institution's activities associated with meeting the quality standards as outlined in the PHECC quality review framework. The Emergency First Response (EFR) course was selected to provide context.

2.0 Review Findings

2.1 Meetings and Discussions

Туре	Comments
Entry Meeting	The QRP met with two representatives on arrival. Following introductions, the panel chairperson outlined the agenda for the visit and the process that would be followed.
Staff Discussions	The QRP met with four staff members at various times throughout the review.
Learner Discussions	The QRP met with seven students who had undertaken the EFR course as part of their studies.
Exit Meeting	The QRP met with seven representatives. The results of the review were summarised and agreed. The panel outlined the next steps in the process and the meeting was closed.

2.2 Observation of Facilities and Resources

Area	Comments
Facilities	The RIs activities take place on the campus of Dublin City University (DCU). The RI has administrative offices and access to a large number of well-equipped training rooms. This building also has faculty and student canteens. Student have access to the University library and research resources.
Resources	Resources are stored onsite and allocated as required. The facility contains a well-stocked supply of resources and equipment for courses.

2.3 Evidence Reviewed - Documents/IT

The records and systems listed below were reviewed and discussed throughout the on-site visit

- Website
- Organisational Chart
- Assessment Awards Policy
- Quality Assurance and Improvement Policy
- Student Records
- Student Feedback
- Course Directors Report
- Quality Assurance Procedure
- Mission Statement
- Student Information Access, Transfer and Progression
- Recognition of Prior Learning (RPL) Policy
- Equality and Access Policy
- Complaints and Appeals Policy For stand-alone courses
- Health and Safety Statement
- Instructor Induction
- Faculty Quality Assurance Form
- Faculty Development Policy
- Course Report Form
- Instructor Session Evaluation Form
- Course Timetable
- Course Design and Development Policy
- Course Delivery Faculty Feedback
- Student Information
- Course Delivery Policy
- Course Attendance Record
- Course Administration Record
- Candidate Answer Sheets

2.4 Quality Standards - Review

Section One: Organisational Structure and Management	
Standard	QRP Findings
1.1 Governance - The Institution has clear lines of authority and engages a system of accountability for PHECC approved courses.	The organisational chart was available for review and reflects the overall structure of the organisation and how that structure accommodates the delivery of PHECC approved courses. It clearly indicates those responsible for quality assurance, with responsibilities delegated as appropriate. During discussions RI representatives indicated the PHECC approved courses are subject to DCU internal procedures for course and results approval. Course and results approval are carried out as per PHECC guidelines. Evidence was provided that self-assessment has been carried out, with the PHECC Recognised Institutions Self-Assessment Report (RISAR) and Quality Improvement Plan (QIP) being utilised.
1.2 Management Systems and Organisational Processes - The Institution can show that it has well documented organisational processes in place to meet the needs of all stakeholders.	There are policies and procedures for data protection and records management, including a retention schedule for student and faculty records. Student and faculty records were reviewed and found to be satisfactory. Computers are password protected and access is limited to authorised personnel. Hard copy records are stored in a secure location in an administrative office, with access restricted to authorised personnel only. Quantitative measures are in place to capture relevant information to inform practice. PHECC certification is carried out according to guidelines.
1.3 Management Responsibility - There is a clearly defined system in place showing who is responsible for ensuring the quality assurance of PHECC approved courses.	The course director has overall responsibility for the quality assurance of PHECC approved courses, as evidenced on the organisational chart. During discussions and in their RISAR RI representatives outlined how faculty members are made aware of their responsibilities for the quality of PHECC approved courses i.e. formal meetings. These meetings are documented. Course documentation was reviewed to verify quality assurance activities. It was also evident from the discussions that staff and faculty are clearly aware of their responsibilities.
1.4 Self-Assessment, External Evaluation and Improvement Planning - The Institution carries out internal assessment and engages in a quality	The RI has comprehensive quality assurance policies and procedures documented. Evidence was provided which showed that procedures are in place to monitor the implementation and effectiveness of PHECC approved courses e.g. an external examiner. Evidence was also provided which showed that stakeholders were involved in the self-

improvement planning process (annually) which includes external evaluation.	assessment process, including students' faculty and course administrators. The PHECC RISAR and QIP are being utilised for the self-assessment and the QIP will be updated with agreed actions following the review process.
1.5 Transparency and Accountability - The institution conducts its activities in an open and transparent manner.	The documented evidence showed that potential students are provided with relevant information to make an informed choice about course participation and the supports that are available to them. Students confirmed during discussions that sufficient information and support was available pre and during their course. Students are provided with a detailed course handbook which was available for review. Course reports are completed by faculty for all courses and were made available for review. Course reports are reviewed internally by the programme chair.
1.6 Administration – Administration arrangements meet the needs of all stakeholder groups.	During discussions RI representatives outlined the procedures for course administration pre, during and post course. The administration of PHECC approved courses is part of the overall administration of the programme module with additional administrative tasks carried out by the course coordinator. Evidence was provided to show these activities had been carried out. Student and faculty documentation was reviewed to verify these activities. The RI IT system was reviewed and found to be effective in managing and maintaining relevant records and information.
1.7 Financial Management - The institution manages its' finances in a responsible manner that meets the needs of all stakeholders.	The RI is fully compliant with all relevant financial requirements and PHECC has verified this prior to the on-site review.

Section Two: The Learning Environment

Standards	QRP Findings
2.1 Education and Training Mission Statement - The Mission of the Institution is appropriately focused with education and training as a core activity.	The RI demonstrates its commitment to quality training through its mission statement which was available for review. The mission statement is clearly relevant to pre hospital emergency care. The RI communicates its mission statement to all stakeholders through documentation, discussion and meetings.
2.2 Communication with Students and Other Stakeholders - Two way communication systems are in place between faculty, students and other stakeholders as appropriate.	During discussions and in their RISAR the RI outlined a comprehensive range of methods used to, a) communicate with students and associated stakeholders and, b) receive feedback. These include: student online evaluation forms, regularly scheduled meetings, student leaders, student handbook, tutorials, student reflective diaries, student, faculty and management attendance at relevant stakeholder meetings and workshops etc. Evidence was provided to show that these activities take place and that students have the opportunity throughout their course to meet with their instructor one to one to discuss any issues they may have. Students confirmed these activities during discussions.
2.3 Course Access, Transfer and Progression - Course information in clear, access is fair and consistent, with recognition of prior learning, as appropriate.	During discussions RI representatives outlined a comprehensive process for course entry. Admission onto PHECC approved courses falls under the DCU admissions policy and entry criteria. The evidence indicated that students are provided with sufficient information to make informed choices about their course. Information regarding Recognition of Prior Learning (RPL) is made available to students and was available for review. It was found to be in line with PHECC guidelines on RPL.
2.4 Equality and Diversity - There is a commitment to the provision of equal opportunities for students and faculty in compliance with relevant equality legislation.	During discussions and in their RISAR RI representatives outlined their equality and diversity supports provided through the DCU equality office. The RI has an equality and access policy and an equality and diversity statement which was available for review. There was evidence that information and training on equality and diversity is provided to faculty. During discussions RI representative outlined and gave examples of how they accommodate individuals with additional support needs. These activities are recorded on the student record. Codes of practice are documented and made available to faculty and associated stakeholders.
2.5 Complaints and Appeals - Complaints and Appeals Processes are open,	The RI has documented procedures for complaints and appeals which were available for review. During discussions and in their RISAR the RI outlined the processes for appeals

transparent and accessible to students and other stakeholders.	and complaints which are made available to all stakeholders through relevant documentation i.e. student handbook.
2.6 Training Infrastructure - Courses are carried in an appropriate learning environment, sufficiently resourced in order to deliver training to the highest standards.	The training rooms were reviewed and found to be well equipped and provide a well-functioning learning environment which cater for theoretical and practical elements of PHECC approved courses. There is a resource checklist for each course. All equipment is stored centrally and allocated as required. There is a documented procedure for the maintenance and cleaning of equipment and a technician is assigned to maintain and order equipment as required. Comprehensive library and ICT resources are available for students.
2.7 Health and Safety - A safe and healthy environment exists in the institution.	The RI has a health and safety statement which is made available to all stakeholders. Health and safety procedures are in place and in line with relevant legislation and overseen by the DCU health and safety committee.
2.8 Social Environment - A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.	Students have access to the DCU student support and advice centre. During discussions with students and faculty it was evident that the RI promotes a culture of mutual respect. Students outlined the supports that are available to them and that they found their course interesting and challenging. Evidence provided through the evaluation forms and survey results indicated that students have positive learning experiences. The RI is fully compliant with PHECC requirements on instructor/student ratios.

Section Three: Faculty Recruitment and Development	
Standards	QRP Findings
3.1 Organisational Staffing - All faculty are aware of their role and responsibilities when involved in the administration and/or delivery of a PHECC approved course and their conduct is professional at all times.	There is a recruitment and development policy and associated procedures in place. RI representatives and faculty indicated during discussions that they are made aware of their quality responsibilities and responsibility for quality assurance is delegated as appropriate. Evidence was provided to support this. Faculty records were available for review. Documentation indicates that the composition of the RI's faculty meets operational needs and the requirements for course approval.
3.2 Faculty Recruitment - Faculty, are recruited on the basis of personal suitability, appropriate experience and qualifications.	A role description and selection criteria for each position is documented and available for review. During discussions the RI representatives outlined their process for faculty recruitment. Evidence was available to demonstrate these activities taking place. Documentation indicates that the RI meets the minimum faculty requirements for course approval.
3.3 Faculty Development and Training - Faculty are encouraged and supported to gain additional training/qualifications appropriate to their role in or with the institution.	There are documented procedures in place for the continuous professional development of faculty. During discussions the RI representatives indicated that faculty members do receive an induction and any updates are communicated through regularly scheduled staff meetings. There was evidence provided to indicate that induction and meetings had taken place. Evidence was also available to show that faculty are provided with opportunities to take part in upskilling as required. During discussions faculty indicated that they are encouraged and supported to gain additional training and qualifications relevant to their role with the RI and that resources (time and funding) are made available. Evidence was provided of faculty membership and affiliation to a range of external bodies.
3.4 Communication with Faculty - Two way communication systems are in place between management and faculty.	During discussions the RI representatives described a range of formal and informal methods of communication between faculty and management i.e. regularly scheduled faculty meetings, course reports, informal meetings, email etc. The evidence indicated that regular communication takes place between management and faculty before, during and after each course. Procedures are in place to ensure that formal meetings take place. Records of these meetings are maintained.

3.5 Work Placement and Internship - Host organisations (internship sites) are appropriate to the course content and learning outcomes to be achieved (NQEMT courses only).	Not Applicable
3.6 Faculty and Stakeholder Management - A system is in place to ensure appropriately qualified and experienced individuals are engaged by the institution.	The evidence provided indicates that faculty meet the minimum requirements set by PHECC to deliver courses. A data base is maintained of all faculty which includes information on when they need to be recertified. The system in place ensures that only faculty with valid certification are allocated to carry out course activities. During discussions and in their RISAR RI representatives stated that faculty are observed annually during delivery and that course documentation is monitored. Evidence was provided of these activities taking place. Faculty records are maintained and were available for review and were found to be accurate and up to date. Faculty details were evident on course documentation.
3.7 Collaborative Provision - Appropriate contractual arrangements are in place with affiliated instructors.	Not Applicable.

Section Four: Course Development, Delivery and Review		
Standards	QRP Findings	
4.1 Course Development - Courses are designed to meet the requirements for PHECC approval and certification and reflect a commitment to quality improvement.	There is a documented course development policy and associated procedures. During discussions RI representatives outlined a process for course development and implementing any changes in PHECC education and training standards or clinical practice guidelines. Evidence was available to indicate these activities take place. Course material was reviewed which showed that appropriate activities were being carried out to allow students to meet the learning outcomes. Course information is clearly stated and outlined for students, including timetables and schedules. Documentation also indicated that appropriate student/tutor ratios are maintained theoretical and practical elements.	
4.2 Course Approval - There are clear guidelines for course approval.	During discussions RI representatives indicated that all PHECC approved course are subject to the DCU internal course approval process prior to submission to PHECC for approval. This process is documented and evidence was provided of these activities. All the information required for PHECC course approval has been supplied.	
4.3 Course Delivery, methods of theoretical and clinical Instruction - Courses are delivered in a manner that meets students' needs and in accordance with PHECC guidelines.	A course delivery policy and procedures are documented. During discussions the RI representative indicated the student induction takes place. There was evidence to support this. Attendance records are maintained for each course and were available for review. The evidence indicated that all courses are delivered by appropriately qualified and certified faculty and in keeping with PHECC education and training standards and clinical practice guidelines. Students indicated during discussions that they are encouraged and facilitated to take responsibility for their own learning i.e. facilities are made available to students after scheduled classes. Students also indicated that they have the opportunity to meet with their instructor for feedback and remedial work if required. Evidence was available of these activities.	
4.4 Course Review - Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	There are documented procedures in place for carrying out course reviews. During discussions and in their RISAR RI representatives outlined a comprehensive range of opportunities for students and faculty to provide feedback. Evidence was provided of these activities taking place and of analysis of the feedback feeding into practice. Student course evaluation forms and faculty course reports were made available for review. Areas for improvement are noted and	

	actioned as required e.g. changes to course delivery schedule. The RI has submitted a quality improvement plan based on their self-assessment findings and will be updating this based on the findings from the external review.
4.5 Assessment and Awards - Assessment of student achievement for certification operates in a fair and consistent manner by all tutors and instructors in line with PHECC assessment criteria.	There is a documented policy and procedures in place for course assessment activities. The evidence provided indicates that appropriate methods are used on all courses and it is clearly stated when PHECC assessment material is being used. Students are provided with assessment information prior to and during their course. Formative assessment is carried out which provides students with information and feedback. During discussions RI representatives indicated that students are provided with reasonable accommodation on request. Representatives described examples of these activities which are recorded on the student record. There is a robust documented procedure in place for the security of assessment related material. Assessment related material is stored centrally and only issued upon request. Responsibility for the PHECC certification system is allocated to a named member of staff.
4.6 Internal Verification - There is a consistent application of PHECC assessment procedures and the accuracy of results is verified.	The RI representative indicated in discussion that the internal verification of PHECC approved courses takes place under DCU procedures for programme internal verification. These procedures are documented and records maintained.
4.7 External Authentication - There is independent and authoritative confirmation of assessment and certification, where relevant, in accordance with PHECC guidelines.	External Authentication is currently carried out by PHECC.
4.8 Results Approval - A results approval process operates in the institution.	Results approval is followed as per DCU policy and procedures. In addition there are documented procedures in place for the results approval of PHECC approved courses, which were available for review and found to be satisfactory.
4.9 Student Appeals - A process is in place for students to appeal their approved result.	Student appeals are as per DCU policy and procedures. Students are made aware of their opportunity to appeal before, during and after their course. Evidence was provided to support this.

3.0 Conclusions and Outcomes

The findings from the review indicate that the recognised institution met 100% of the applicable quality standards set out in the PHECC quality review framework. There are comprehensive, up to date and relevant policies and procedures in place that indicate a commitment to internal quality assurance and continuous quality improvement. The evidence also indicated that the RIs systems provide robust oversight of all activities and ensure that students have a comprehensive and rewarding learning experience. They also ensure that the quality assurance of PHECC approved courses is carried out in an effective and efficient manner and in line with PHECC education and training standards and clinical practice guidelines. The updates highlighted during discussions, when implemented, will enhance the student experience and ensure that the RI continues to meet all the PHECC quality standards. The evidence supports the conclusion that the RI's activities meet the requirements to carry out PHECC approved courses.

4.0 The Assessment Matrix

The Assessment Matrix is a summary of the findings of the on-site review and represents the organisation's overall performance against the standards. The QRP has rated your organisations performance against each standard, by applying the following ratings:

- Met: written and verbal evidence clearly demonstrates that the RI meets all the requirements of the quality standard
- Part Met: written and verbal evidence clearly demonstrates that the RI only meets part of the requirements of the quality standard
- Not Met: written and verbal evidence clearly demonstrates that the RI does not meet the requirements of the quality standard
- Not Applicable: a not applicable rating may apply; where an RI does not provide recognition of prior learning (refer to quality standard 2.3)

Once each quality standard has been rated, the overall review result can be determined. The review result has been determined by applying the following:

- **Met:** all the requirements of each quality standards have been met
- Part Met: the requirements of one or more quality standards have not been fully met
- **Not Met:** the requirements of no quality standards have been met.