



University of Limerick
Paramedic Studies

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	Paramedic Studies, Graduate Entry Medical School, University of Limerick
Profile	A third level institution and a PHECC recognised institution since 2009.
PHECC courses being delivered	Cardiac First Response – Community Cardiac First Response – Advanced Paramedic
Higher Education Affiliation	University of Limerick
Address	Paramedic Studies, Graduate Entry Medical School, University of Limerick, Limerick City

1.2 Reports Details

Date of on-site visit	25-04-17
Quality Review Panel (QRP)	
P Collins	QRP Chair – Independent
J Donaghy	QRP Member – Independent
K Walsh	QRP Member – PHECC
RI Representatives	Graduate Entry Medical School, UL
Mark Dixon	Course Director
Frank Keane	Senior Fellow
Jennifer Fitzgerald	Executive Administrator
Michael Larvin	Professor, Head of School
Ray O'Connor	GP – Course Lecturer
Sharon Nolan	School Manager
Josephine Lynch	Senior Executive Administrator
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 Paramedic Studies course was selected to provide context.

2.0 Review Findings

2.1 Meetings and Discussions

Type	Comments
Entry Meeting	The QRP met with seven representatives on arrival. Following introductions, the panel chairperson outlined the agenda for the visit and the process that would be followed.
Staff Discussions	In addition to those present at the entry meeting the QRP met with three staff members at various times throughout the review. This included: an administrator and two lecturers on the Paramedic Studies course.
Learner Discussions	The QRP met with the full Paramedic Studies class and their two representatives at an additional meeting.
Exit Meeting	The QRP met with three 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 the University of Limerick (UL). The RI has administrative offices and access to a large number of well-equipped training rooms. Student also have access to the University library and research resources as well as recreation areas and canteen facilities.
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

- | | |
|---|---|
| <ul style="list-style-type: none"> - Website - UL Organisational Chart - Paramedic Organisational Chart - Emergency Medical Educator Handbook - Review Evidence Manual - BSc in Paramedic Studies Academic Year 2016/17 Autumn Semester Handbook. - Student Records - Clinical Skills Log Report - Complaints Policy - Appeals Policy - Health and Safety Policy - Student CPD Competency Record - Academic Calendar - Student Handbook - Equality and Diversity Policy - Job Descriptions - Assistant Tutor Programme Document - Course Brochure - Year 1 Course Handbook - Year 1 Student Handbook for Clinical Placements - UL Degree Education Standards - Orientation Schedule - BSc Student Pack - Student Enrolment Form | <ul style="list-style-type: none"> - CFR Student Exam - CFR Student Feedback Forms (A&B) - North West Ambulance Service Memorandum of Understanding - Higher Education Occupational Physicians/Practitioners – Paramedic Students, Standards of Medical Fitness to Train - UL Training and Development Policy - Further Study Policy - Staff Performance and Development Review System - Training Course Leave Policy - UL Work Experience/Placement Indemnity - Assessment Information Year 1, Semester 1 - Assessment Information Year 1, Semester 2 - IT Systems – Sharepoint, Moodle, Sulis, Blackboard, RADIUS |
|---|---|

2.4 Quality Standards – Review

Section One: Organisational Structure and Management	
Standard	QRP Findings
<p>1.1 Governance - The Institution has clear lines of authority and engages a system of accountability for PHECC approved courses.</p>	<p>The organisational charts for UL and Paramedic Studies were available for review and reflect 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 UL internal procedures for course and results approval. Course and results approval are carried out as per PHECC requirements. 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.</p> <p>The RI has arrangements in place with an external organisation for paramedic internship placements. A memorandum of understanding was available for review with amendments to be made as the course develops. At the time of review there was no joint working group in place.</p>
<p>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.</p>	<p>There are policies and procedures for data protection and records management, including a retention schedule for student and faculty records. The RI uses several IT systems for managing student and faculty records with access limited to authorised personnel at different levels. These system were reviewed along with student and faculty records and were found to be comprehensive in tracking the student journey. Computers are password protected and access is limited to authorised personnel. A limited number of 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.</p>
<p>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.</p>	<p>The course director has overall responsibility for the quality assurance of PHECC approved courses, as evidenced on the organisational chart. During discussions RI representatives outlined how faculty members are made aware of their responsibilities for the quality assurance of PHECC approved courses i.e. formal meetings every two weeks and induction. These meetings are documented. Course documentation was</p>

	<p>reviewed to verify quality assurance activities. It was also evident from the discussions with staff and faculty that they are clearly aware of their responsibilities.</p>
<p>1.4 Self-Assessment, External Evaluation and Improvement Planning - The Institution carries out internal assessment and engages in a quality improvement planning process (annually) which includes external evaluation.</p>	<p>The RI has comprehensive quality assurance policies and procedures documented which were reviewed and are made available to all stakeholders through the website. Evidence was provided which showed that procedures are in place to monitor the implementation and effectiveness of quality assurance procedures e.g. an external examiner. Evidence was also provided which showed that stakeholders were involved in the self-assessment process, including students' faculty and course administrators. Discussions with students and faculty confirmed their contribution to self-assessment. 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.</p>
<p>1.5 Transparency and Accountability - The institution conducts its activities in an open and transparent manner.</p>	<p>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. At the time of review course reports were not completed by faculty as it is the first time the paramedic course is being run. During discussions RI representative indicated that course reports will be completed and made available for review as the course develops.</p>
<p>1.6 Administration – Administration arrangements meet the needs of all stakeholder groups.</p>	<p>During discussions RI representatives outlined the procedures for course administration pre, during and post course. The administration of PHECC approved courses is carried by two dedicated staff with additional administrative tasks carried out by the course coordinator as required. Evidence was provided to show these activities had been carried out. The RI IT systems were reviewed and found to be effective in managing and maintaining relevant records and information.</p>
<p>1.7 Financial Management - The institution manages its' finances in a responsible manner that meets the needs of all stakeholders.</p>	<p>The RI is fully compliant with all relevant financial requirements and PHECC has verified this prior to the on-site review.</p>

Section Two: The Learning Environment

Standards	QRP Findings
<p>2.1 Education and Training Mission Statement - The Mission of the Institution is appropriately focused with education and training as a core activity.</p>	<p>The RI demonstrates its commitment to quality training through its mission statement which was available for review. The mission statement will be updated to include reference to pre hospital emergency care (paramedicine). The RI communicates its mission statement to all stakeholders through its website, documentation, discussion and meetings.</p>
<p>2.2 Communication with Students and Other Stakeholders - Two way communication systems are in place between faculty, students and other stakeholders as appropriate.</p>	<p>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: the SULIS online learning system, an annual online survey, email, text, social media, student feedback forms, regularly scheduled meetings with student representatives, student handbook, tutorials, an app for students to use during clinical placements etc. 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. Mechanisms for host site feedback will be utilised once clinical placements commence.</p>
<p>2.3 Course Access, Transfer and Progression - Course information in clear, access is fair and consistent, with recognition of prior learning, as appropriate.</p>	<p>There is a documented admissions policy and procedures in place which were available for review. Entry criteria are clearly indicated on the RI website and on relevant documentation which allows potential students to make an informed choice about course participation. While there is no Recognition of Prior Learning (RPL) for undergraduate programmes, information regarding RPL is made available to students who wish to undertake a top up programme. This was available for review and found to be in line with PHECC guidelines on RPL.</p>
<p>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.</p>	<p>The RI adheres to the UL equality and diversity and dignity and respect policies which were available for review and made available to all stakeholders on the website. There was evidence that information and training on equality and diversity is provided to faculty and that faculty have attended dignity and respect training. 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. There are separate documented</p>

	procedures in place for handling complaints of harassment, sexual harassment and bullying for faculty and students. These were available for review.
2.5 Complaints and Appeals - Complaints and Appeals Processes are open, transparent and accessible to students and other stakeholders.	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 and complaints which are made available to students through relevant documentation i.e. student handbook. Complaints about professional practice and conduct are handled by the Professional Practice Committee.
2.6 Training Infrastructure - Courses are carried in an appropriate learning environment, sufficiently resourced in order to deliver training to the highest standards.	All PHECC courses take place in the graduate entry medical school. There are a variety of buildings and 19 multifunctional training rooms which are well equipped and provide an excellent learning environment which cater for the theoretical and practical elements of PHECC approved courses. Onsite facilities include: a virtual reality environment, driving simulator, 12 clinical skills labs, 3 anatomy skills labs, an ambulance, helicopter landing site, crashed car and area for carrying out simulations. 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 there are three technicians available 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 through the website. Health and safety procedures are in place and in line with relevant legislation and overseen by the UL chief technical officer and health and safety team. There are also specific health and safety procedures in place for paramedic students which were available for review and found to be comprehensive.
2.8 Social Environment - A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.	During discussions with paramedic class and a separate meetings with student representatives and faculty it was evident that the RI promotes a culture of mutual respect. Students outlined the supports that are available to them and indicated that they found their course interesting and challenging. The evidence indicated that students have positive learning experiences and found the problem based learning very good and beneficial. The RI is fully compliant with PHECC requirements on instructor/student ratios.

Section Three: Faculty Recruitment and Development

Standards	QRP Findings
<p>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.</p>	<p>During discussions RI representatives indicated that all organisational staffing takes place through the UL HR department. 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. The composition of faculty and staff is adequate to meet the needs of the RI. Faculty records were available for review and evidence was provided of roles and responsibilities. Documentation also indicates that the composition of the RIs faculty meets the requirements for course approval.</p>
<p>3.2 Faculty Recruitment - Faculty, are recruited on the basis of personal suitability, appropriate experience and qualifications.</p>	<p>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, with plans in place for the next five years. Evidence was available to demonstrate these activities taking place. At the time of review the evidence indicated that the RI needs to increase its number of tutors to maintain course approval.</p>
<p>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.</p>	<p>Documented procedures are in place for the continuous professional development of faculty. Faculty are encouraged to avail of opportunities to attend campus training, lectures and workshops. Training records, induction records and records of meetings were available for review. Evidence was also available to show that faculty are provided with opportunities to highlight and 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.</p>
<p>3.4 Communication with Faculty - Two way communication systems are in place between management and faculty.</p>	<p>During discussions and in their RISAR RI representatives described a range of formal and informal methods of communication between faculty and management i.e. notifications on the SULIS system, regularly scheduled faculty meetings, informal meetings, email social media 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.</p>

<p>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).</p>	<p>During discussions the RI representatives outlined the systems that are in place for monitoring the quality of learning experiences during internships at the North West Ambulance Service Trust (NFAST). At the time of review these internships had not started. However during discussions with students and their representatives they indicated very positive experiences on their clinical placements and good support from programme staff.</p> <p>At the time of review arrangements are in place with the NFAST which need to be finalised. (Reference Appendix A). As per the NFAST site visits in March 17 there is a sufficient number of mentors and clinical supervisors in place.</p> <p>Learning outcomes to be achieved during the internship period are documented and a schedule for UL staff to visit the host organisation is in place. During the March site visit documentation was viewed that is to be used to record student activities.</p> <p>During discussions the RI representatives outlined a comprehensive system for recording student activities while on their placement. This is an IT system that was demonstrated during the review and found to be comprehensive.</p> <p>All internship sites for NFAST have been provided to PHECC who carried out visits to sites.</p>
<p>3.6 Faculty and Stakeholder Management - A system is in place to ensure appropriately qualified and experienced individuals are engaged by the institution.</p>	<p>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 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. Faculty indicated during discussions that regular meetings take place with management to discuss any issues relating to courses. Evidence of these management meetings was available for review.</p>
<p>3.7 Collaborative Provision - Appropriate contractual arrangements are in place with affiliated instructors.</p>	<p>Reference section 3.5. During discussions with students they indicated that they are aware of the role of UL and NFAST in course provision. Further strengthening of the MOU to clarify the agreed quality assurance standards is identified.</p>

Section Four: Course Development, Delivery and Review

Standards	QRP Findings
<p>4.1 Course Development - Courses are designed to meet the requirements for PHECC approval and certification and reflect a commitment to quality improvement.</p>	<p>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. Course material was reviewed which showed that appropriate activities were designed to allow students to meet the learning outcomes. However the evidence also indicated that the RI faced challenges when developing the assessment to meet the PHECC education and training standards. During discussions with students it was evident that the aims and objectives of the course are clearly outlined. However it was also evident that information about assessment was unclear for students which indicated the challenges the RI had with assessment development. Timetables and schedules were available for review. Documentation also indicated that appropriate student/tutor ratios are maintained for theoretical and practical elements.</p>
<p>4.2 Course Approval - There are clear guidelines for course approval.</p>	<p>During discussions RI representatives indicated that all PHECC approved course are subject to the UL 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.</p>
<p>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.</p>	<p>A course delivery policy and procedures are documented. During discussions the RI representatives 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.</p>
<p>4.4 Course Review - Courses are reviewed in a manner that allows for constructive feedback from</p>	<p>There are documented procedures in place for carrying out course reviews. During discussions RI representatives outlined a range of opportunities for students and faculty to provide feedback. During discussions with faculty they indicated that</p>

all stakeholders.	informal meetings take place to review course activities and that formal reviews are scheduled following year 1. 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 which needs to be updated to reflect current practice. The evidence provided indicated that appropriate methods were not initially used on all courses. Discussions with students and their representatives indicated that it was not clearly stated when PHECC assessment material was to be used. Students were not provided with all the assessment information prior to 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. RI representatives described examples of these activities which are not recorded. 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 UL 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. However external examiners are used for the external authentication of paramedic course modules.
4.8 Results Approval - A results approval process operates in the institution.	Results approval is followed as per the UL 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 UL 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 or part met 100% of the applicable quality standards set out in the PHECC quality review framework. There are comprehensive policies and procedures in place that indicate a commitment to internal quality assurance. The panel recognises that the RI is undertaking the first iteration of their paramedic programme and the challenges that this process brings. The governance systems within UL should provide robust oversight of all activities and ensure that students have a comprehensive and rewarding learning experience. The changes and updates highlighted during discussions, when implemented, will enhance the student experience and ensure that the RI will meet all the PHECC quality standards. They should also ensure that the quality assurance of PHECC approved courses is in line with PHECC education and training standards and clinical practice guidelines. The evidence supports the conclusion that the RIs activities meet the requirements to carry out PHECC approved courses.



Kathleen Walsh

Project Officer

PHECC

Dear Kathleen,

I would like to formally thank the Officers of the Pre Hospital Emergency Care Council for the visit and subsequent draft report regarding Paramedic education in UL.

In broad terms I am happy to progress with the report as described, however I would ask that PHECC consider a number of points where 'partially met' tags have been allocated.

- Academic year 16/17 represents the first evolution of Paramedic Studies at degree level in Ireland, the very nature of this genesis has the ramification that not all education, assessment and or procedures will have run their course; therefore criteria such as notes identified under section 1.5 cannot be completed at this stage. As and when such milestones are achieved UL undertakes to inform PHECC accordingly.
- The bulk of 'actions required' focus on or around details within the MOU between UL and NWS while we agree without reservation to implement the changes as closely as possible, this will be subject to scrutiny from both legal departments.

In summary and with awareness of the points highlighted above I would be happy to proceed as you outline. I would also like to take the opportunity to thank the PHECC Project Officers and Senior management for their understanding and cooperation in getting this exciting programme off the ground.

Regards

Mark Dixon

Course Director, Paramedic Studies