

National Safety Centre

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	National Safety Centre
Profile	A private company and a PHECC recognised institution since 2008.
PHECC courses being delivered	Cardiac First Response – Community Cardiac First Response – Community Instructor Cardiac First Response – Advanced Cardiac First Response – Advanced Instructor
Higher Education Affiliation	None
Address	732 Sarto Park, Bayside, Dublin 13

1.2 Reports Details

Date of on-site visit	16-09-16
Quality Review Panel (QRP)	
P Collins	QRP Chair – Independent
J Donaghy	QRP Member – Independent
K Walsh	QRP Member – PHECC
RI Representatives	
Jean Ahearne	Administrator
Damien Byrne	Company Partner
Date of Council Approval	15-12-2016

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 Cardiac First Response (CFR) 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	Two members of staff present for the full review. Brief introduction to a company director.
Learner Discussions	None
Exit Meeting	The QRP met with two 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	All the RIs training activities take place in external venues.
Resources	Resources for courses are stored centrally and allocated as required. Affiliate Instructors are responsible for providing and maintaining appropriate resources for each course they deliver.

2.3 Evidence Reviewed - Documents/IT

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

- Website
- Organisational Chart
- Data Protection Policy
- Affiliate Contract
- Student Feedback Form
- Course Completion Report
- Faculty Management Policy
- Assessment Form
- Affiliates Policy
- Self-Evaluation Checklist
- Internal Verification Report
- Quality Assurance Policy and Procedures
- Student Evaluation Form
- Financial Records
- Mission Statement
- Equality and Diversity Policy
- Student Appeals Form
- Resource Checklist
- Maintenance Sheet
- Health and Safety Statement
- Mutual Respect Policy
- Staff Handbook
- Faculty CPD Policy
- Course Material
- Student Records
- Faculty Records
- Record of Meetings
- Standards Form Ref; Affiliation
- Course Timetable
- Student Attendance Sheet
- Course Reports
- Results Form

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 needs to be updated to reflect how the RI accommodates the delivery of PHECC approved courses. During discussions the RI representatives outlined those responsible for the quality assurance of PHECC approved courses. Evidence was available to support this. Course and results approval have been carried out as per PHECC guidelines. Evidence was provided that self-assessment has been carried out, with the PHECC RISAR and quality improvement plan 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 is a documented policy and associated procedures for data protection which need to be updated to reflect current practice. The RI maintains student and faculty record electronically and in hard copy. Student and faculty records were reviewed and were 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 the main office, with access limited to authorised personnel. 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.	During discussions the RI representatives stated that the administrator/internal verifier has overall responsibility for the quality assurance of PHECC approved courses. Documentation is to be updated to reflect this. During discussions the RI representative outlined how faculty members are made aware of their responsibilities for the quality of PHECC approved courses. There was documented evidence to support this. There was evidence provided that internal verification has taken place. The internal verifier was present during the review process.
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	The RI has quality assurance policies and associated procedures documented. Evidence was provided which showed that procedures are in place to monitor PHECC approved courses. Evidence was also provided which showed that stakeholders were involved in the self-assessment process. Student evaluation forms were made available for review. The PHECC Recognised Institution Self-Assessment Report (RISAR) and Quality Improvement Plan were utilised

includes external evaluation.	for the self-assessment and 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.	Evidence was provided to show that students are provided with information regarding the supports available while undertaking their course. The RI website and promotional material provides relevant information to allow potential students to make an informed choice about course participation. Course reports are completed and were made available for review.
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. These are to be updated and documented to reflect current practice. Evidence was provided to show these activities had been carried out. Student documentation was reviewed to verify these activities. The RI IT system and hard copy records were 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 the protection of life and quality training through its mission statement. At the time of review plans were in place to communicate its mission statement to all stakeholders through its website and on relevant documentation.
2.2 Communication with Students and Other Stakeholders - Two way communication systems are in place between faculty, students and other stakeholders as appropriate.	The RI has a documented policy and associated procedures for communications. During discussions and in their RISAR the RI outlined a comprehensive range of methods used to communicate with students and associated stakeholders, including evaluation forms, course reports, regularly scheduled meetings etc. Evidence was provided to show that students have the opportunity throughout their course to meet with their instructor one to one to discuss any issues they may have.
2.3 Course Access, Transfer and Progression - Course information in clear, access is fair and consistent, with recognition of prior learning, as appropriate.	The RI has clear entry criteria documented for entry to PHECC approved courses. The website and promotional material provides potential students with sufficient information to make an informed choice about participation in a course. Recognition of Prior Learning is not applicable.
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.	The RI has an equality and diversity policy which was available for review and was found to be comprehensive. There was evidence that information and training on equality and diversity is provided to faculty e.g. information contained in instructor contracts. During discussions RI representative outlined and gave examples of how they accommodate individuals with additional support needs. There was evidence available to support this. Codes of practice are documented and made available to faculty and associated stakeholders.
2.5 Complaints and Appeals - Complaints and Appeals Processes are open, transparent and accessible to students and other stakeholders.	At the time of review the RI had no documented procedures for complaints and appeals. However during discussions RI representatives outlined the processes for appeals and complaints. The RI has a complaints form which is made available on request.

2.6 Training Infrastructure - Courses are carried in an appropriate learning environment, sufficiently resourced in order to deliver training to the highest standards.	During discussions the RI representative indicated that training is carried out externally in pre-approved premises which are checked annually. Evidence was provided to support this. There is a premises selection criteria for each course. The resource requirements for each course are documented and there is a resource checklist for each course. There are documented procedures for the maintenance and cleaning of equipment and a maintenance sheet is maintained.
2.7 Health and Safety - A safe and healthy environment exists in the institution.	The RI has a health and safety statement which is available to all stakeholders and was available for review. Health and safety procedures are in place and in line with relevant legislation. Risk assessment is carried out on each venue used for course activities and records maintained.
2.8 Social Environment - A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.	The RI has a mutual respect policy in place. Evidence provided through the evaluation forms 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 RI has a recruitment and development policy and associated procedures in place. During discussions the RI representatives indicated that faculty are made aware of their quality responsibilities through induction and regular communication. Evidence was provided to support this. Records were made available for review of faculty activities associated with PHECC approved courses. Documentation indicates that the RI meets the minimum faculty 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. Documentation indicates that the RI meets the minimum faculty requirements for course approval. During discussions and in their RISAR the RI outlined their process for faculty recruitment, if required.
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 representative indicated that faculty members do receive an induction. There is evidence to indicate that induction had taken place. Faculty are provided with opportunities to highlight upskilling requirements and records are maintained of all CPD activities. These records were reviewed and found to be comprehensive. Plans are in place to develop a child and vulnerable adult's policy to reflect current changes in legislation and RI activities.
3.4 Communication with Faculty - Two way communication systems are in place between management and faculty.	During discussions the RI representative described a range of formal and informal methods of communication between faculty and management i.e. email, regularly scheduled meetings, relevant documentation etc. Evidence indicated that a combination of these activities takes place before, during and after each course. Procedures are in place to ensure that formal meetings take place. Records of these meetings are maintained. Faculty are encouraged to provide feedback during and after each course. Course reports were available for review.
3.5 Work Placement and Internship - Host organisations (internship sites) are appropriate to	Not Applicable

the course content and learning outcomes to be achieved (NQEMT courses only).	
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. Faculty records were reviewed and found to be up to date. The system in place ensures that only instructors with valid certification all allocated to deliver courses. RI representatives also indicated that instructor activities are monitored through a review of documentation. Faculty records are maintained and were available for review and were found to be accurate and up to date. Faculty details are recorded on course documentation.
3.7 Collaborative Provision - Appropriate contractual arrangements are in place with affiliated instructors.	There is a comprehensive written contract in place for all affiliates which was made available for review. The contract outlines the responsibility of each party for the quality assurance of PHECC approved courses. Evidence was provided that students are made aware of the role of each party.

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.	The RI has a documented course development, delivery and review policy and associated procedures in place. Course material was reviewed which showed that appropriate activities were being carried out to allow students to meet the learning objectives. Detailed timetables for each course are available for students and were reviewed and found to be comprehensive. Course information is clearly stated and outlined on the website and promotional material. Documentation also indicated that appropriate student/tutor ratios are maintained.
4.2 Course Approval - There are clear guidelines for course approval.	During discussions RI representatives outlined a process for internal course approval and updates. 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.	There is a documented policy and procedures for course development, delivery and review. 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 instructors. Course content was reviewed and meets PHECC education and training guidelines. Students have the opportunity to meet with their instructor for feedback and remedial work and evidence was available to support this.
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 which need to be updated to reflect current practice around PHECC approved courses. Student course evaluation forms were available for review. During discussions RI representatives indicated that instructor feedback is obtained through course reports and regularly scheduled meetings. Records of these meetings and course reports were available for review. 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	There is a documented policy and associated procedures in place. The evidence provided indicates that appropriate methods are used on all courses and it is clearly stated when

certification operates in a fair and consistent manner by all tutors and instructors in line with PHECC assessment criteria.	PHECC assessment material is being used. Students are provided with assessment information prior to and during their course. RI representatives indicated that students are provided with reasonable accommodation on request. Evidence was available of these activities taking place. There are written procedures for the security of assessment related material. 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 has documented procedures in place for internal verification. These were not available for review. During discussions the RI representative indicated that internal verification takes place on all courses. There was evidence to support this. The internal verifier was present for the review.	
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.	During discussions the RI representative indicated that the instructor checks the results and they are checked again by the administrator/internal verifier. There was evidence to support this i.e. results approval form which was available for review. Once checked the results are made available to students. Certificates are then issued to students.	
4.9 Student Appeals - A process is in place for students to appeal their approved result.	At the time of review there is no appeals policy in place.	

3.0 Conclusions and Outcomes

The findings from the review indicate that the recognised institution met or part met 93% of the applicable quality standards set out in the PHECC quality review framework. There are policies and procedures in place that indicate a commitment to internal quality assurance and continuous quality improvement (CQI). However a number of the policies and associated procedures need to be updated to reflect current practice. The evidence also indicated that the controls around external faculty need to be strengthened to ensure the quality of PHECC approved courses is consistent across all courses and associated activities. The updates and revisions highlighted during discussions – when implemented – will ensure that the RI meets all the PHECC quality standards. The evidence provided would support the conclusion that the RI's activities when supported by appropriately focused and updated policies and procedures meet the requirements to carry out PHECC approved courses.

Appendix 1: Comments and	Feedback from	National Safety	Centre
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04th November 2016

Dear Kathleen.

Thank you for sending us the details of the external authentication.

Your visit and inspection of our systems was very much welcome and we look forward to working with PHECC in the future

Some details need to be changed on the Report:

- 1. Damien Campbell to Damien Byrne
- 2. Jean Aherne to Jean Ahearne
- 3. Damien is a Partner in the Company (not Director)

On the day of the inspection there was one IT issue. The computer would not let me open a file on Internal Verification procedures. I discovered later that day, I had many files open and once I closed them, the file opened for me.

NSC will endeavor to meet all the part met and not met requirements and to continuously make improvements to their Quality Review Framework when required or necessary.

Kind regards,

Jean Ahearne Quality Control Manager/Administration National Safety Centre 018225963 0872316975 jean@nationalsafetycentre.com