

Pre-Hospital Emergency Care Council Annual Report 2015

Pre-Hospital Emergency Care Council Annual Report 2015

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Introduction

The Pre-Hospital Emergency Care Council (PHECC) is an independent statutory agency charged with responsibility for standards, education and training in pre-hospital emergency care in Ireland.

The Council was established as a body corporate by the Minister for Health by Statutory Instrument Number 109 of 2000 (Establishment Order) which was amended by Statutory Instrument Number 575 of 2004 (Amendment Order). These Orders were made under the Health (Corporate Bodies) Act, 1961 as amended and brought under primary legislation with the Health (Miscellaneous Provisions) Act 2007.

Under S.I. 109 Council members, excluding the chairperson, can hold office for three years or four years with lots drawn at the very first Council meeting as to which members should serve for three years and which for four years. Membership of Council is appointed by the Minister for Health.

The fourth Council is now serving since 2012 with a membership of 17 appointees, some of which are new members and some reappointed members. There are 6 Committees of Council, 2 Panels and 2 Working Groups.

Mission Statement

The Pre-Hospital Emergency Care Council protects the public by independently specifying, reviewing, maintaining and monitoring standards of excellence for the safe provision of quality pre-hospital emergency care.

Strategic Plan 2015-2017

The strategic plan links the mission statement to Council functions, governance and administrative support objectives. The specific strategies associated with each individual objective are detailed. The strategic plan gives clear direction and focus and is available on the 'Publications' page on our website http://www.phecit.ie/.

Foreword from the Chairman and Director

On behalf of the Council, the Director and I are pleased to present the 16th Annual Report for the year ended 31st December 2015. The Pre-Hospital Emergency Care Council (PHECC) continues to function in the role of protecting the public by independently specifying, reviewing, maintaining and monitoring standards of excellence for the safe provision of quality pre-hospital emergency care.

The Pre-Hospital Emergency Care Council is Ireland's Regulatory Body for Emergency Medical Services (EMS). We have a national network of 24 CPG Approved Service Providers, 43 Recognised (Training) Institutions, 4,666 Practitioners and over 150,000 Responders that we work with every day. We have a portfolio of more than 23 Standards and 352 Clinical Practice Guidelines that impact everyone in the pre-hospital emergency care environment within our jurisdiction.

At PHECC, we bring together the best of national and international experience, expertise and knowledge from emergency health services, academia, government agencies and international standards, to provide real solutions to pre-hospital emergency care challenges. It is this national consensus that creates confidence in what we do and in the standards we produce. Standards enable consistent high quality care to be provided by all service providers nationwide. By providing nationally agreed specifications for Prescription Only Medications (POMs) administration, clinical procedures and processes, they provide confidence and assurance of the quality, efficiency and public safety, and they are instrumental in facilitating good medical outcomes.

This was a productive year for Council with the continued implementation of the Strategic Plan focusing on the eight strategic objectives which drives our business operations until 2017. However, in addition to that core focus the Council has made significant contributions in areas such as:

- The development of standards and clinical practice guidelines to enable the training of lay people to administer certain POMs in accordance with SI 449:2015.
- Providing support for the implementation of the Emergency Inter-Hospital Transfer Protocol 37.
- The Quality Review Framework (QRF) for recognised institutions was implemented and the results of the first tranche of reviews are now published on the PHECC website.
- Within Registration a key development was the full implementation of the electronic reregistration of all registered practitioners, with exceptional levels of compliance and customer satisfaction reports.
- Council maintained its commitment to provide continued support in the research programme at the Centre for Prehospital Research at the University of Limerick, the OCHAR programme at NUI Galway and the joint Advanced Paramedic programme between NASC and UCD.

Council and the executive are extremely grateful for the expert committees covering the areas of clinical practice, standards, registration and examinations who gave so freely and graciously of their time and support to Council in our mission and our vision that people in Ireland receive excellent prehospital emergency care.

We extend our appreciation to the dedicated staff of PHECC who, at all times, bring a high degree of professionalism and efficiency to their work to facilitate the smooth operation of the Council and the various Committees.

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As always we are extremely grateful for the interest shown in our work by the Minister and his Department and for their on-going support and time.

Tom Mooney

Chairman 22nd June 2016

Peter Dennehy

Director 22nd June 2016

Council Functions

Council met seven times during 2015. Council members also serve on Council Committees. For attendances at Council meetings see Appendix 1.

Council has 6 Committees:

- Quality and Safety
- Education and Standards
- Medical Advisory
- Priority Dispatch
- · Fitness to Practice
- Compliance & Audit

In addition Council has the following Working Groups and Panels:

- Examination Quality Group
- Test Item Writing Group
- Appeal Panel
- Examiner Panel

PHECC's main functions are:

- To ensure training institutions, course content and examinations in First Response and Emergency Medical Technology reflect contemporary best practice.
- To ensure pre-hospital emergency care Responders and Practitioners achieve and maintain competency at the appropriate performance standard.
- To prepare and promote the implementation of clinical practice guidelines in pre-hospital emergency care.
- To source, sponsor and promote relevant research to guide Council in the development of pre-hospital emergency care in Ireland.
- To prepare standards of operation for pre-hospital emergency care providers to support best practice.
- To establish and maintain a register of pre-hospital emergency care practitioners.
- To recognise those pre-hospital emergency care providers which undertake to implement the clinical practice guidelines.

Council Membership

Name

Mr Tom Mooney

Membership at 31st December 2015

The membership of Council consists of not more than seventeen members who are appointed by the minister:

Chair, representative of special interest or expertise in pre-hospital care

Representative of medical practitioners with expertise in pre-hospital

Membership rationale

Mr Michael Dineen Vice Chair and paramedic representative of the majority of practitioners Mr Shane Mooney Advanced paramedic, trade union nominee and representative of practitioners Mr David Maher Paramedic, trade union nominee and representative of practitioners Dr Shane Knox Recognised institution nominee - NASC/UCD Mr Stephen Brady Recognised institution nominee - DFB/RCSI Mr Barry O'Brien Representative of management of the HSE Mr Martin Dunne Representative of management of the HSE Dr Cathal O'Donnell Representative of management of the HSE

Dr Mick Molloy Representative of medical practitioners with expertise in pre-hospital

emergency care

emergency care

Ms Valerie Small Advanced nurse practitioner and representative of nursing with an interest

in pre-hospital care

Mr Michael Brennan Representative of the interests of the general public

interest or expertise in pre-hospital care

Mr Thomas Keane Paramedic and representative of persons with special interest or expertise in

pre-hospital care

Changes to membership

Prof Patrick Plunkett

Dr Shane Knox was appointed in January 2015, replacing Mr Robert Kidd Dr Hugh Doran resigned in February 2015 Mr Tom Tinnelly resigned in November 2015

Council Committees, Panels and Working Groups

Council is assisted and advised in fulfilling its statutory functions by its Committees, Working Groups and Panels.

Quality and Safety Committee

A standing committee of Council. The terms of reference specify that the committee consider and make recommendations to Council on policy matters relating to, but not confined to, criteria for registration including code of conduct, practitioner's maintenance of competency at the appropriate performance standard (CPC), practice framework that incorporates credentialing, licencing and privileging of pre-hospital emergency care practitioners. Information standards, clinical audit framework and licenced provider approval to implement clinical practice guidelines (CPGs) are also included. There were three meetings held during 2015.

Membership at 31st December 2015

Name Membership rationale

Mr Shane Mooney Chair, member of Council and advanced paramedic

Mr Tom Mooney Chair of Council

Ms Valerie Small Chair of Education and Standards Committee

Dr Mick Molloy Chair of Medical Advisory Committee

Mr Michael Dineen Vice Chair of Council

Mr Thomas Keane Representative from Council and paramedic
Mr David Maher Representative from Council and paramedic
Mr Tom Tinnelly Representative from Council and paramedic

Mr David Willis Representative from the HSE National Ambulance Service (NAS)

Mr Derek Nolan Representative from Civil Defence
Mr Michael O'Reilly Representative from DFB/RCSI

Ms Brigid Sinnott Representative from a non-government organisation (NGO) with

community focus

Dr Anthony Corcoran Representative from the Defence Forces

Mr Ricky Treacy Representative from St John Ambulance

Ms Brigid Doherty Representative for patients

Mr Gregory Lyons A representative from Irish Red Cross
Mr Ian Brennan Representative from Order of Malta

Observational representative from Licensed CPG approved Private

Ambulance Providers on a rotational basis

Changes to membership

Mr David Willis replaced Ms Katrina Mullally June 2015

Mr Tom Tinnelly resigned from Council November 2015, not yet replaced on this committee

Key activities for 2015

- In advance of each meeting a Specific Themed Workshop was held on the following subjects:
 - i) Clinical Audit
 - ii) Licencing, Credentialing, and Privileging (otherwise known as Triple Lock) and
 - iii) Continuous Professional Competence (CPC).
- Considered the Clinical Audit methodology to be undertaken by CPG licenced providers. The
 committee recommended to Council that the clinical audit methodology deployed by CPG
 licenced providers be that as specified in the PHECC Clinical Audit Standard which utilises the
 PCR, ACR or CFR report data collection tools, in addition to the current edition of the PHECC
 CPG's, as the standard and audit criteria against which the clinical audit will be conducted.
- Considered an amended CPG Approval and Renewal Process and recommended to Council for approval.
- Considered and approved an appropriate process whereby a practitioner upskilling report would be presented periodically to the committee.
- Considered feedback from CPC consultations which were carried out during the year as the business of the committee will be to consider and make recommendations to Council on appropriate CPC implementation methodologies.

Education and Standards Committee

A standing committee of Council. The terms of reference specify that the committee consider and make recommendations to Council on policy matters relating to, but not confined to, education and standards, recognition of institutions, recognition of equivalence of professional qualifications obtained from institutions both within and outside the state and maintenance and monitoring of institutions. There were three meetings held during 2015.

Membership at 31st December 2015

Name Membership rationale

Ms Valerie Small Chair, member of Council

Mr Tom Mooney Chair of Council

Dr Mick Molloy Chair of Medical Advisory Committee

Mr Michael Dineen Vice Chair of Council

Mr Shane Mooney Chair of Quality and Safety Committee, member of Council and

advanced paramedic

Mr Stephen McMahon Representative for patients

Ms Sarah Cain Representative from a non-government organisation with a

community focus

Ms Glenna Woods Member of Council and registered nurse

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Asst Prof Sandra Fleming Invited expert in education training – nursing

Dr David Menzies Invited expert in education training – medical

Ms Maeve Donnelly Invited expert in adult education

Mr Thomas Keane Member of Council and paramedic

Dr Shane Knox Representative at facilitator level from a recognised institution which

provides advanced paramedic training

Ms Róisín McGuire Representative at facilitator level from the Joint Voluntary

Ambulance Service Committee

Mr Raymond Lacey Representative at tutor level from the Irish College of Paramedics

Mr Paul Lambert Representative at facilitator level of recognised institution which

provides paramedic training

Mr David Maher Member of Council and paramedic

Mr Brian Bruno A representative at tutor level from a recognised institution that

provides paramedic training

Observational representative from Licensed CPG approved Private

Ambulance Providers on rotational basis

Changes to membership

Dr David Menzies joined the committee April 2015 Asst Prof Sandra Fleming replaced Mr Martin McNamara November 2015

Key activities for 2015

- Teaching Faculty Framework was revised and recommended for approval by Council. New additions to the framework included the role and responsibilities of course director and facilitator.
- Two separate exam related policies: NQEMT Exam View and Recheck and NQEMT Exam access to EMT sitting were considered, amended and subsequently recommended for approval by Council.
- Following consultation with recognised institutions a Quality Review Framework (QRF) was
 considered by Committee and recommended for approval by Council. The QRF is a quality
 management process which the Executive operate to ensure that recognised institutions
 quality assurance systems are effective in maintaining and improving the quality of PHECC
 approved courses. Supporting documents and guides were developed for the
 implementation of the QRF.
- As 2015 marked year one of the first three-year QRF cycle, after the initial self-assessment phase was carried out, a panel on behalf of Council conducted 13 one-day on-site reviews with the recognised institutions.
- A Quality Improvement Planning Workshop was provided to 38 persons representing 27 recognised institutions. The workshop aim was to enhance the capacity of recognised

institutions to meet the Council's quality standards through a process of continuous quality improvement.

- Continuous Professional Competence (CPC) was considered by the Committee informed by PHECC practitioner surveys and recent Irish research on the topic.
- Preliminary work was commenced by the Committee to consider the requirements of Council
 to design courses of training in the use of six named prescription medications (as part of
 Cardiac First Response instruction). This included the administration, management of any
 immediate adverse reaction, storage and safe keeping of these medications as set out in the
 Medicinal Products (Prescription and Control of Supply) (Amendment) (No.2) 2015, Statutory
 Instrument No. 449 of 2015.

Medical Advisory Committee (MAC)

A standing committee of Council. MAC is an expert committee which considers clinical matters as referred to it either by Council, the Quality and Safety Committee or Education and Standards Committee. There were six meetings held during 2015.

Membership at 31st December 2015

Weinbersinp at 31	December 2013
Name	Membership rationale
Dr Mick Molloy	Chair, member of Council and Consultant in Emergency Medicine
Dr Niamh Collins	Vice Chair and nominee of the HSE Emergency Medicine Programme
Dr Neil Reddy	Registered practitioner with interest in pre-hospital care
Mr Seamus McAllister	Representative from the Northern Ireland Ambulance Service (NIAS)
Dr Conor Deasy	Deputy Medical Director of a statutory ambulance service (NAS)
Mr Michael Dineen	Vice Chair of Council and paramedic
Mr Dave Hennelly	Registered practitioner with interest in pre-hospital care at the invitation of the Chair
Mr Macartan Hughes	Representative at tutor or facilitator level of recognised institutions which provide training at advanced paramedic level (NASC)
Mr David Irwin	PHECC registered practitioner nominated by the Irish College of Paramedics
Mr Thomas Keane	Registered practitioner and member of Council
Dr Shane Knox	PHECC registered academic
Mr Declan Lonergan	Representative at tutor or facilitator level of a recognised institution which provides training at paramedic level (NAS)
Mr Joseph Mooney	Representative of emergency medical technicians on the PHECC register
Mr Shane Mooney	Chair of the Quality & Safety Committee
Mr David O'Connor	Advanced paramedic representative from the PHECC register

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Mr Kenneth O'Dwyer Advanced paramedic representative from the PHECC register

Mr Martin O'Reilly Representative at tutor or facilitator level of a recognised institution

which provides training at paramedic level (DFB)

Mr Rory Prevett Paramedic representative from the PHECC register

Mr Derek Rooney Paramedic representative from the PHECC register

Dr Jack Collins Emergency medical technician representative from the PHECC

register

Dr Cathal O'Donnell Medical Director of a statutory ambulance service (NAS)

Ms Valerie Small Chair of the Education & Standards Committee and Registered

Nurse, representative from the Emergency Medicine Nurses

Mr Tom Mooney Chair of Council

Prof Stephen Cusack Academic consultant in Emergency Medicine

Dr Peter O'Connor Medical Director of a statutory ambulance service (DFB/RCSI)

Dr David Menzies Consultant in Emergency Medicine nominated by the Irish

Association in Emergency Medicine

Dr Gerald Kerr Director of Defence Forces Medical Services

Dr David McManus Representative from the Northern Ireland Ambulance Service (NIAS)

Prof Gerard Bury Registered practitioner with an interest in pre-hospital emergency

care at the invitation of the Chair

Dr Sean Walsh Consultant in paediatric emergency medicine

Key activities for 2015

- Hosting of a pre-hospital spinal injury management seminar to inform developments of spinal injury management pre-hospital.
- Constitution of the spinal injury sub-group to develop policy and CPGs for pre-hospital spinal injury management.
- Reviewing of 400 recommendations from ILCOR guidelines 2015 to inform CPG development.
- Constitution of the palliative care sub-group to develop a policy and CPG for palliative care patients.
- Constitution of the Local Injury sub-group to develop a policy and CPGs to enable PHECC practitioners to transport appropriate patients to local injury units.
- Constitution of the Clinical Care at Events sub-group to develop a policy in relation to the clinical management for events.

- Agreed a draft policy on verification of death by paramedics and advanced paramedics.
- Agreed a resolution process for difference of opinion by MAC members on areas of clinical importance.
- The Clinical lead handover policy document was agreed and sent to the Quality and Safety Committee for review.
- Seven CPGs were recommended to Council for updating.

Priority Dispatch Committee

The Priority Dispatch Committee is a standing committee of Council. Membership of the Priority Dispatch Committee is approved to reflect its role as an expert group to consider and advise Council on priority dispatch matters. There were no meetings held during 2015.

Membership at 31st December 2015

Name N	Membership rationale	
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Mr Stephen Brady Chair and member of Council

Dr Cathal O'Donnell Medical Director of HSE National Ambulance Service (NAS)

Dr Conor Deasy Deputy Medical Director of HSE NAS

Mr Michael Delaney HSE NAS Control Manager, special interest in AMPDS

Ms Dawn Stevenson HSE NAS Training and Competency Assurance Officer, special interest

in AMPDS

Mr Brian O'Connor Call-taker /Dispatcher from HSE NAS

Dr Peter O'Connor Medical Director of Dublin Fire Brigade (DFB)

Mr John Moody DFB, special interest in AMPDS

Mr Niall Murray Call-taker /Dispatcher from DFB

Mr Martin O'Reilly DFB Officer, special interest in AMPDS

Dr Mark Doyle Hospital based medical practitioner with an interest in priority

dispatch

Dr Mick Molloy Chair Medical Advisory Committee

Ms Kathrina Murray HSE National Ambulance Service Control Manager (with a special

interest in AMPDS)

Mr Brian Power PHECC Programme Development Officer

Key activities for 2015

 The Protocol 37 Implementation Group was constituted under the chair Mr Mark Doyle. The Group developed a training package and a job specification for a project lead for Protocol 37 implementation nationally. The HSE National Programme Office and PHECC agreed to co-fund the project lead for an 18-month period.

Compliance and Audit Committee

The Compliance and Audit Committee is a committee of Council and reports to it on such matters as, but not confined to, adequacy of the nature, extent and effectiveness of the accounting and internal control systems, review of corporate governance, risk management, financial oversight and whistle blowers provisions. There were three meetings held during 2015.

Membership at 31st December 2015

Name Membe	rshı	p ration	ıale
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Mr Con Foley, FCCA Chair and external member who is a qualified accountant

Mr Dermot Magan Finance specialist with public health sector experience

Mr Stephen Brady Member of Council

Mr Michael Brennan Member of Council

Ms Pauline Dempsey Member of PHECC staff

Changes to membership

Ms Pauline Dempsey replaced Mr Brian Power in October 2015

Appeal Panel

The Appeal Panel is appointed by Council. The terms of reference specify that the Appeal Panel consider appeals of decisions of the Director and to adjudicate on those appeals. There were two sittings of the appeals panel during 2015.

Membership at 31st December, 2015

Name Membership rationale

Ms Valerie Small Chair, Council member

Mr Stephen McMahon Patient representative

Ms Brigid Sinnott Representing a community group

Mr Michael Dineen Council member

Mr Pat Sheridan Representing a voluntary group

Examiner Panel

The terms of reference specify that the Examiner Panel membership assesses candidates at NQEMT examinations. The membership is nominated by a medical, nursing or training representative body, licensed CPG approved pre-hospital emergency care provider or recognised institution. Members must complete PHECC examiner training, and refresher, as deemed necessary.

The Panel consists of 105 active members. There was no change to this panel in 2015. Member details are available on http://www.phecit.ie/

Key activities for 2015

 Assessment of 300 candidates, including repeat candidates at the OSCE component of the NQEMT examinations.

Examination Quality Group

Criteria for membership of the Examination Quality Group is that members must be on the PHECC Examiner Panel. The terms of reference of the group dictates that it reviews examination relative components and timing, content, pass mark and criteria for resits in addition to examiner criteria, training and performance.

Membership at 31st December, 2015

Name	Membership	rationale

Ms Jacqueline Egan Chair, PHECC Programme Development Officer

PHECC Examiner

Mr Brian Power PHECC Programme Development Officer

Ms Julie Woods **PHECC Examiner** PHECC Examiner Mr Ray Carney Mr Ricky Ellis **PHECC Examiner** Mr Michael Garry **PHECC Examiner** Mr Ben Heron **PHECC Examiner** Mr Lawrence Kenna **PHECC Examiner** Dr Shane Knox **PHECC Examiner** Mr Paul Lambert **PHECC Examiner** Mr David Sherwin **PHECC Examiner** Mr Rod Tobin **PHECC Examiner**

There was no change to the membership in 2015.

Key activities for 2015

Mr Mark Wilson

 Review of the examination material, including test items at NQEMT Paramedic level in preparation for transition to the multiple choice question (MCQ) component of the paramedic examination being facilitated at Prometric test centres in 2016.

- Review of NQEMT EMT skills assessment, scenarios and equipment lists at the level of NQEMT EMT.
- Review of the exam weightings for the question banks at the level of EMT and Paramedic.
- Provision of examination quality oversight at all PHECC OSCE EMT examinations 2015.

Council Activities in 2015

Statements of key activities

Governance:

- Implementation of PHECC Strategic Plan 2015 2017.
- Approval of the 2015 Risk Framework.
- Appointed Peter Dennehy to the position of Director.

Education and Standards:

- Approval of the Quality Review Framework (QRF) for Recognised Institutions.
- On-site reviews completed and reports approved on a number of recognised institutions.
- Approval of new applications for training institution recognition and courses.
- Approval of renewals of existing recognised institutions.
- Approval of the Teaching Faculty Framework.

Registration

- Completed implementation of electronic re-registration for all registered practitioners.
- Approval of 2015 Registration Rules.
- Approval of the Code of Professional Conduct & Ethics.
- Approval of applications for recognition of professional qualifications obtained overseas.

Examination and Certification

 Approval of revised NQEMT Examination Policy to facilitate allowable fixed periods post training to successful assessment for NQEMT, EMT candidates.

Clinical Practice Guidelines (CPGs)

- Approval of an Interim Directive Policy for medication authorisations within Licensed CPG Providers.
- Approval of revised Council Rules for Licensed CPG Providers.
- Support for the implementation of the Emergency Inter-Hospital Transfer Protocol 37.
- Approval of new applications to become Licensed CPG Provider.
- Approval for annual renewals of existing Licensed CPG Providers.

Quality & Safety

- Approval of Clinical Audit Standard.
- Approval of development and implementation of the CISM e-learning Stress Awareness Training Module.

First Responders and Co-Responders

- Re-Launch of the Citizen CPR awareness campaign.
- Support for CFR Ireland network.
- Maintained support for the development of the Responder Alert Application (RAApp).

Pre-Hospital Care Research

• Maintained support for the Centre for Prehospital Research University of Limerick.

National Retrieval Service

• Maintained support of the work of the National Transport Medicine Programme.

Other Items

• Achieved ISO 9001:2008 Recertification.

PHECC Team and Organisational Chart

Anne Keogh Registration & Reception Clerical Officer

Barry O'Sullivan Deputy Director & Registrar

Beth Breslin Finance & Corporate Services Support Officer*

Brian Power Programme Development Officer

Claire Finn Registration Officer

Deirdre Borland Programme Development Support Officer

Jacqueline Egan Programme Development Officer
John Lally ICT & Administration Support Officer

Liz Dempsey Examinations Officer

Margaret Bracken Examinations & Reception Clerical Officer
Marian Spence Council Secretary & Accreditation Officer

Marion O'Malley Business Manager*

Pauline Dempsey Programme Development Officer

Peter Dennehy Director*

Changes to PHECC Team

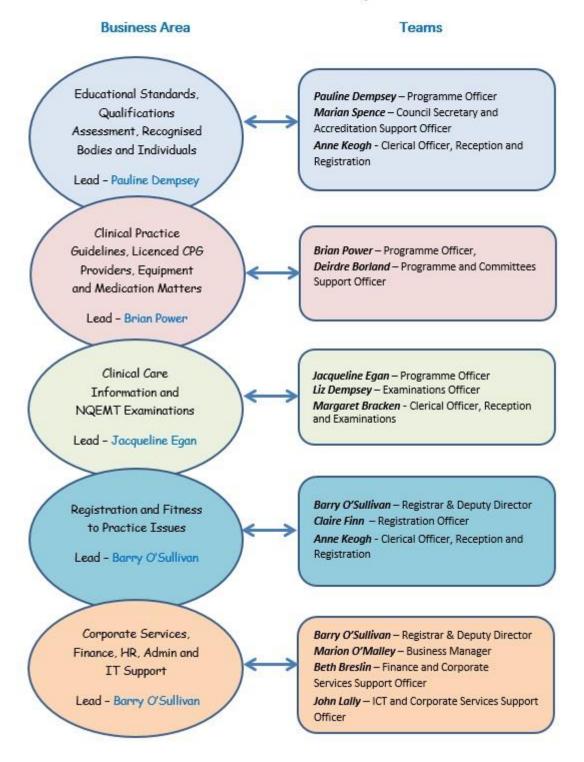
Peter Dennehy was appointed Director in June 2015

Beth Breslin was appointed Finance & Corporate Services Support Officer in October 2015 following the retirement of Sylvia O'Mahony

Marion O'Malley was appointed Business Manager in October 2015

PHECC Organisational Chart

Director - Peter Dennehy



Financial Statements 2015

PRE-HOSPITAL EMERGENCY CARE COUNCIL

FINANCIAL STATEMENTS 2015

for

YEAR ENDED 31 DECEMBER 2015

These draft accounts have been submitted for audit and certification by the Comptroller and Auditor General

Council Members' Report

For the year ended 31 December 2015.

Council Members' Responsibilities

Financial Statements

The Council is required by Article 25 of the Pre-Hospital Emergency Care Council (Establishment) Order, 2000 (SI 109/2000) to prepare financial statements for each financial year which give a true and fair view of the state of the affairs of the Council and of its income and expenditure for that period.

In preparing these financial statements, the Pre-Hospital Emergency Care Council is required to:

- Select suitable accounting policies and apply them consistently
- Make judgements and estimates that are reasonable and prudent
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that it will continue in operation
- > State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in financial statements.

The Council is responsible for keeping proper books of account which disclose, with reasonable accuracy at any time, its financial position which enables it to ensure that the financial statements comply with Article 25 of the Pre-Hospital Emergency Care Council (Establishment) Order, 2000 (SI 109/2000).

The Council is also responsible for safeguarding its assets and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

On behalf of the Council	
Mr T. Mooney	Mr P. Dennehy
Chairman	Director

Statement on Internal Financial Control

On behalf of the Pre-Hospital Emergency Care Council (PHECC), we acknowledge our responsibility for ensuring that an effective system of internal financial control is maintained and operated.

PHECC, through the Director, is responsible for monitoring the system of internal control and providing assurances to the Council.

A system of internal control is designed to reduce rather than eliminate risk. Such a system can provide only a reasonable and not an absolute assurance that assets are safeguarded, transactions authorised and properly recorded, and that material errors or irregularities are either prevented or would be detected in a timely manner.

Key Control Procedures

The following is a description of the key processes which have been put in place by PHECC to provide effective internal financial control.

- PHECC has an established organisational structure with clearly defined lines of accountability, responsibility and reporting.
- 2. The system of internal financial control in PHECC is documented in Quality Management System (QMS) process maps.
- 3. PHECC has established procedures around segregation of duties and the authorisation of expenditure.
- 4. TAS and SAGE Financial Systems are operated by PHECC to facilitate financial accounting practice and provide detailed audit trails on all transactions.
- 5. Monthly expenditure and activity is monitored against the business plan. Reports are presented to the Director for consideration and appropriate action.
- 6. A monthly financial position report for the Department of Health is prepared and submitted to the Department.
- 7. A Compliance and Audit Committee is in place and met on three occasions during the year.
- 8. A new Director was appointed in 2015 following the untimely death of Dr G.K. King (RIP) in 2014.
- 9. The monitoring and review of the effectiveness of the system of internal control is informed by the report of the Compliance and Audit Committee, the work of the Internal Auditor, the Executive Managers in our Council who have responsibility for the development and maintenance of the financial control framework, the recommendations made by the Comptroller and Auditor General in the course of audit or in his management letters and both the Risk Framework and the Risk Register.

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- 10. Council Members are kept apprised of financial control and general corporate governance matters via Council meetings which are conducted at regular intervals.
- 11. Council conducted a review of the effectiveness of the risk framework and risk register during 2015.
- 12. A formal review of the effectiveness of the system of internal control was carried out by an external firm of Accountants during 2015.
- 13. Council conducted a review of the effectiveness of the system of internal financial controls for 2015.

On behalf of the Council	
Mr T. Mooney	Mr P. Dennehy
Chairman	Director

STATEMENT OF INCOME AND EXPENDITURE AND RETAINED REVENUE RESERVES

For the year ended 31 December 2015

		2015	2014
	Note		Re-stated
		€	€
Income			
Department of Health Allocation	2	2,695,920	2,690,372
Own Resources	3	23,017	31,070
Other Income	4	316,547	354,625
Total Income		3,035,484	3,076,067
Expenditure			
Grants Payable	5	1,331,325	1,281,262
Administration, Operations and Promotion	6	1,642,086	1,725,983
Reduction in Value of Fixed Assets	8	19,844	23,504
Total Expenditure		2,993,255	3,030,749
Surplus / (Deficit) for the Year before Appropriations		42,229	45,318
Transfer from/(to) the Capital Account	9	(10,918)	(45,169)
		31,311	149
Balance Brought Forward at 1 January 2015		32,393	32,244
Balance Carried Forward at 31 December 2015	;	63,704	32,393

All income and expenditure for the year relates to continuing activities at the balance sheet date.

The Statement of Income and Expenditure and Retained Revenue Reserves includes all gains and losses recognised in the year.

The Statement of Cash Flows and notes form part of these financial statements.

On behalf of the Council

Mr T. Mooney	Mr P. Dennehy
Chairman	Director

STATEMENT OF FINANCIAL POSITION As at 31 December 2015

Fixed Assets Property, plant & equipment 9 22,858 36,267 Total Fixed Assets Current Assets Receivables 11 212,347 51,473 Cash and cash equivalents 11 25,839 57,111 Current Liabilities (amounts falling due within one year) Payables 10(a) 131,135 52,686 Net Current Assets Total Net Assets Representing Capital account 22,858 36,267			2015	2014 Re-
Fixed Assets 9 22,858 36,267 Total Fixed Assets 22,858 36,267 Current Assets 22,858 36,267 Receivables 11 212,347 51,473 Cash and cash equivalents 11 25,839 57,111 Current Liabilities (amounts falling due within one year) 238,186 108,584 Payables 10(a) 131,135 52,686 Net Current Assets 107,051 55,898 Total Net Assets 129,909 92,165 Representing 22,858 36,267		Note	_	
Property, plant & equipment 9 22,858 36,267 Total Fixed Assets 22,858 36,267 Current Assets 11 212,347 51,473 Cash and cash equivalents 11 25,839 57,111 Current Liabilities (amounts falling due within one year) 238,186 108,584 Payables 10(a) 131,135 52,686 Net Current Assets 107,051 55,898 Total Net Assets 129,909 92,165 Representing 22,858 36,267	Fired Assess		€	€
Current Assets 22,858 36,267 Receivables 11 212,347 51,473 Cash and cash equivalents 11 25,839 57,111 238,186 108,584 Current Liabilities (amounts falling due within one year) Payables 10(a) 131,135 52,686 Net Current Assets 107,051 55,898 Total Net Assets Representing 22,858 36,267		_		
Current Assets Receivables 11 212,347 51,473 Cash and cash equivalents 11 25,839 57,111 238,186 108,584 Current Liabilities (amounts falling due within one year) Payables 10(a) 131,135 52,686 Net Current Assets 107,051 55,898 Total Net Assets Representing Capital account 22,858 36,267	Property, plant & equipment	9	22,858	36,267
Receivables 11 212,347 51,473 Cash and cash equivalents 11 25,839 57,111 238,186 108,584 Current Liabilities (amounts falling due within one year) Payables 10(a) 131,135 52,686 Net Current Assets 107,051 55,898 Total Net Assets Representing Capital account 22,858 36,267	Total Fixed Assets		22,858	36,267
Receivables 11 212,347 51,473 Cash and cash equivalents 11 25,839 57,111 238,186 108,584 Current Liabilities (amounts falling due within one year) Payables 10(a) 131,135 52,686 Net Current Assets 107,051 55,898 Total Net Assets Representing Capital account 22,858 36,267	Constant			
Cash and cash equivalents 11 25,839 57,111 238,186 108,584 Current Liabilities (amounts falling due within one year) Payables 10(a) 131,135 52,686 Net Current Assets 107,051 55,898 Total Net Assets 129,909 92,165 Representing Capital account 22,858 36,267				
238,186 108,584				
Current Liabilities (amounts falling due within one year) Payables Net Current Assets Total Net Assets Representing Capital account 10(a) 131,135 52,686 107,051 55,898 129,909 92,165	Cash and cash equivalents	11	25,839	57,111
Current Liabilities (amounts falling due within one year) Payables Net Current Assets Total Net Assets Representing Capital account 10(a) 131,135 52,686 107,051 55,898 129,909 92,165				
Payables 10(a) 131,135 52,686 Net Current Assets 107,051 55,898 Total Net Assets 129,909 92,165 Representing Capital account 22,858 36,267			238,186	108,584
Net Current Assets 107,051 55,898 Total Net Assets 129,909 92,165 Representing Capital account 22,858 36,267				
Total Net Assets Representing Capital account 22,858 36,267	Payables	10(a)	131,135	52,686
Representing Capital account 22,858 36,267	Net Current Assets		107,051	55,898
Representing Capital account 22,858 36,267	Total Net Assets		129,909	92,165
Capital account 22,858 36,267	Total Net Assets			
Capital account 22,858 36,267	Representing			
Retained revenue reserves 107.052 55.898			22,858	36,267
107/032 33/030	Retained revenue reserves		107,052	55,898
129,910 92,165			129,910	92,165

The Statement of Cash Flows and notes form part of these financial statements.

On behalf of the Council	
Mr T. Mooney	Mr P. Dennehy
Chairman	Director

STATEMENT OF CASH FLOWS

For the year ended 31 December 2015

	2015	2014 Re-stated
	€	€
Net Cash Flows from Operating Activities		
Excess Income over Expenditure	51,155	23,654
Depreciation and Impairment of Fixed Assets	19,488	(61,257)
(Increase)/Decrease in Receivables	(160,874)	10,721
Increase/(Decrease) in Payables	78,449	18,709
Bank Interest received	2	3
Net Cash Inflow from Operating Activities	(11,780)	(8,170)
Cash Flows from Investing Activities		
Payments to acquire Property, Plant & Equipment	(6,079)	39,731
Net Cash Flows from Investing Activities	(6,079)	39,731
Cash Flows from Financing Activities	(13,408)	21,524
Net Cash Flows from Financing Activities	(13,408)	21,524
Net Increase/(Decrease) in Cash and Cash Equivalents	(31,267)	53,085

Notes to the Financial Statements

For the year ended 31 December 2015

1. Accounting Policies

The basis of accounting and significant accounting policies adopted by the Pre-Hospital Emergency Care Council are set out below. They have all been applied consistently throughout the year and for the preceding year.

a) General Information

The Pre-Hospital Emergency Care Council was established by the Minister for Health under Statutory Instrument No. 109 of 2000, the Pre-Hospital Emergency Care Council (Establishment) Order, 2000 and as amended by Statutory Instrument No. 575 of 2004 (Amendment) Order 2004. These Orders were made under the Health (Corporate Bodies) Act, 1961 as amended and confirmed by the Health (Miscellaneous Provisions) Act 2007.

Director	Mr.	Ρ.	Dennehy
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Bankers	AIB
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Main Street Naas Co Kildare

Business Address Abbey Moat House

Abbey Street

Naas Co Kildare W91 NN9V

Auditor Comptroller and Auditor General

Dublin Castle
Dublin 2

The main functions of PHECC are:

- To ensure that training institutions, course content and examinations in emergency medical technology reflect contemporary best practice.
- To ensure that pre-hospital emergency care providers achieve and maintain competency at the appropriate performance standard.
- To prepare clinical practice guidelines for pre-hospital emergency care.
- To source and sponsor relevant research to guide Council directions and the development of pre-hospital care.
- To prepare standards of operation for pre-hospital emergency care providers to support best practice.

- To establish and maintain a register of pre-hospital emergency care practitioners.
- To recognise those pre-hospital emergency care providers which undertake to implement the clinical practice guidelines.

The Pre-Hospital Emergency Care Council is a Public Benefit Entity (PBE).

b) Statement of Compliance

The financial statements of the Pre-Hospital Emergency Care Council for the year ended 31 December 2015 have been prepared in accordance with FRS 102, the financial reporting standard applicable in the UK and Ireland, issued by the Financial Reporting Council (FRC), as promulgated by Chartered Accountants Ireland. These are the Pre-Hospital Emergency Care Council's first set of financial statements prepared in accordance with FRS 102. The date of transition to FRS 102 was 1 January 2014. The prior year financial statements were re-stated for material adjustments on adoption of FRS 102 in the current year. The transition to FRS 102 has not affected its reported financial position or financial performance.

c) Basis of Preparation

The financial statements have been prepared on the accruals basis under the historical cost convention, except for certain assets and liabilities that are measured at fair values as explained in the accounting policies below. The financial statements are in the form approved by the Minister for Health with the concurrence of the Minister for Finance. The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the Pre-Hospital Emergency Care Council's financial statements.

d) Revenue

Revenue is generally recognised on an accruals basis; one exception to this is in the case of the Department of Health allocation which is recognised on a cash receipts basis.

Interest income

Interest income is recognised on an accruals basis using the effective interest rate method.

Other Revenue

Other revenue is recognised on an accruals basis.

e) Property, Plant and Equipment

Property, plant and equipment are stated at cost less accumulated depreciation, adjusted for any provision for impairment. A full year's depreciation is charged in the year of purchase. Depreciation is provided on all property, plant and equipment, at rates estimated to write off the cost less the estimated residual value of each asset on a straight line basis over their estimated useful lives, as follows:

ICT Equipment: 33.3% straight line.

Other Equipment: 20.0% straight line.

If there is objective evidence of impairment of the value of an asset, an impairment loss is recognised in the Statement of Income and Expenditure and Retained Revenue Reserves in the year.

f) Employee Benefits

Short-term Benefits

Short term benefits such as holiday pay are recognised as an expense in the year, and benefits that are accrued at year-end are included in the Payables figure in the Statement of Financial Position.

Retirement Benefits

The Pre-Hospital Emergency Care Council has a defined benefit pension scheme as per Article 28 (4) of the SI 109/2000 in accordance with schemes and regulations made under the Local Government (Superannuation) Act, 1980 (No. 8 of 1980). This scheme is funded annually on a pay-as-you-go basis from monies provided by the Department of Health and from contributions deducted from staff and members' salaries. The Pre-Hospital Emergency Care Council also operates the Single Public Services Pension Scheme ("Single Scheme"), which is a defined benefit scheme for pensionable public servants appointed on or after 1 January 2013. Single Scheme members' contributions are paid over to the Department of Public Expenditure and Reform (DPER).

g) Critical Accounting Judgements and Estimates

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported for assets and liabilities as at the balance sheet date and the amounts reported for revenues and expenses during the year. However, the nature of estimation means that actual outcomes could differ from those estimates.

Depreciation and Residual Values

The Compliance and Audit Committee review, from time to time, the asset lives and associated residual values of all fixed asset classes, and in particular, the useful economic life and residual values of fixtures and fittings, and have concluded that asset lives and residual values are appropriate.

2. Department of Health Allocation

The Department of Health allocation to the Pre-Hospital Emergency Care Council as shown in the financial statements consist of:

	2015	2014
	€	€
Grants for current expenditure	2,695,920	2,690,372
	2,695,920	2,690,372

3. Own Resources

	2015 €	2014 €
Professional Registration Fee Income	23,017	31,070
	23,017	31,070

4. Other Revenue

	2015 €	2014 €
Transport Medicine/Retrieval Programme (Temple St Children's Hospital)*	165,000	197,000
Accreditation and Examination Fees	71,362	86,397
Certificate Income	48,433	34,503
Superannuation Contributions	30,166	35,530
Clinical Practice Guidelines sales	1,584	1,107
Other Income	0	85
Bank deposit interest	2	3
	316,547	354,625

^{*}Expenditure on Transport Medicine relates to the development of a Retrieval/Transfer system. This system is being developed to ensure that seriously ill patients can be moved to appropriate medical centres in a timely manner.

5. Grants Payable

Cuanta

The Pre-Hospital Emergency Care Council funds a number of research and awareness programmes undertaken by third parties. The Council funds third parties by way of grant or on foot of invoices for the provision of specific services. The amounts paid in 2015 are set out below.

The following is a brief description of the main schemes included under grant expenditure:

- University of Limerick Centre for Prehospital Research fosters and facilitates academic research in support of clinical activities.
- Advanced Paramedic Development Funding supports the national advanced paramedic training programme.
- Irish Heart Foundation as a partner provides basic life support training nationally to the PHECC standard.
- Transport Medicine/Retrieval Programme supports the development of the Adult, Paediatric and Neonatal Retrieval Services nationally.

2015

€

2014

€

Grants		Re-stated
University of Limerick Centre for Pre-hospital Research	133,744	133,744
Irish Heart Foundation	89,340	89,340
Conference Sponsorship	5,500	9,890
Out of Hospital Cardiac Arrest Register	25,000	25,000
Total Grants	253,584	257,974
	2015	2014
	€	€
Invoices		Re-stated
Advanced Paramedic Development Funding	533,026	687,375
Transport Medicine/Retrieval Programme	104,305	174,771
eLearning Project	38,765	46,365
Electronic Patient Care Report (ePCR) Initiative	79,039	800
Printing Clinical Care Reports	156,343	66,573
Special Projects Miscellaneous	4,944	27,258
Research – Key Performance Indicators Development	0	2,952
Training Standards Review	68,931	17,194
CFR ILCOR Updating Project*	92,388	0
Total Invoices	1,077,741	1,023,288
Total Grants Payable	1,331,325	1,281,262

^{*} CFR - Cardiac First Response, ILCOR - International Liaison Committee on Resuscitation

6. Administration, Operations & Promotion

		2015	2014
	Note	€	€
			Re-stated
Remuneration and other pay costs	6(a)	869,776	1,019,957
Rent, rates, service charges and insurance		119,133	119,133
Repairs, maintenance and leasing charges		8,089	12,274
Electricity, cleaning and utilities		20,494	22,387
Communications and IT		149,462	144,179
Office expenses		151,166	137,834
Professional fees		83,905	106,799
NQEMT Examinations		116,864	64,039
Recruitment and media		54,074	38,858
Register Expenses		37,361	35,056
Miscellaneous operating expenses	_	31,762	25,467
	=	1,642,086	1,725,983

(a) Remuneration and Other Pay Costs

	Note	2015 €	2014 €
			Re-stated
Staff salaries		658,610	713,288
Pension Costs		49,644	13,444
Employer's contribution to social welfare		48,415	51,365
Staff training and development		43,973	20,718
Staff travel and subsistence costs		42,272	35,837
Superannuation Benefits Payable		0	157,396
Temporary Staff		20,677	17,767
Council members' emoluments	6 (c)	6,185	9,719
		869,776	1,019,534

(b) Employee benefits breakdown

Range of tota	al employee benefits	Number of Employees		
From	То	2015	2014	
€70,000 -	€79,999	3	3	
€80,000 -	€89,999	1	1	
€110,000 -	€119,999	0	1	

(c) Council Members' Emoluments

Council Member	Approved Expenses	Meetings attended
	€	
Mr. T Mooney	301	6
Mr. S Brady	177	5
Mr. M Brennan	1,632	7
Mr. M Dineen	1,296	5
Mr. T Keane	81	2
Mr. D Maher	278	2
Dr. M Molloy	116	6
Mr. S Mooney	1,289	7
Mr. B O'Brien	288	1
Prof. P Plunkett	300	6
Ms. V Small	258	5
Ms. G Woods	168	3
Total	€6,185	

The Directors remuneration package for 2015 was as follows:

	2015	2014
	€	€
Director		
Director Salary	41,746	64,796
Director Medical Advisor Payment	0	16,878
Superannuation Payment (RIP)	0	126,797
Remuneration Package Director	41,746	202,487
Acting Director		
Acting Director Salary	42,353	35,294
		35,294
Total Director Remuneration	84,099	237,781

Notes

Neither the Director nor the Acting Director receive any pension benefits other than the standard entitlements under the Local Government Superannuation Schemes and/or Single Service Pension Scheme. No bonus is ever paid to the Director or Acting Director or any other staff member.

Council Members at the year ended 31 December 2015.

Name	Membership rationale
Mr Tom Mooney	Chair, representative of special interest or expertise in pre-hospital care
Mr Michael Dineen	Vice Chair and paramedic representative of the majority of practitioners
Mr Shane Mooney	Advanced paramedic, trade union nominee and representative of practitioners
Mr David Maher	Paramedic, trade union nominee and representative of practitioners
Dr Shane Knox	Recognised institution nominee - NASC/UCD
Mr Stephen Brady	Recognised institution nominee - DFB/RCSI
Mr Barry O'Brien	Representative of management of the HSE
Mr Martin Dunne	Representative of management of the HSE
Dr Cathal O'Donnell	Representative of management of the HSE
Prof Patrick Plunkett	Representative of medical practitioners with expertise in pre-hospital emergency care
Dr Mick Molloy	Representative of medical practitioners with expertise in pre-hospital emergency care
Ms Valerie Small	Advanced nurse practitioner and representative of nursing with an interest in pre-hospital care
Mr Michael Brennan	Representative of the interests of the general public
Ms Glenna Woods	Nurse and resuscitation officer representative of persons with special interest or expertise in pre-hospital care
Mr Thomas Keane	Paramedic and representative of persons with special interest or expertise in pre-hospital care

Changes to membership

Dr Shane Knox was appointed in January 2015, replacing Mr Robert Kidd Dr Hugh Doran resigned in February 2015 Mr Tom Tinnelly resigned in November 2015 During 2015, seven Council meetings were held and the following was the attendance;

Name	12 th	9 th	14 th	9 th	10 th	12 th	10 th
	Feb	Apr	May	Jul	Sep	Nov	Dec
Tom Mooney (Chair)	٧	٧	٧	Х	٧	٧	٧
Stephen Brady	х	٧	Х	٧	٧	٧	٧
Michael Brennan	٧	٧	٧	٧	٧	٧	٧
Michael Dineen	Х	٧	٧	٧	٧	Х	٧
Hugh Doran	х						
Martin Dunne	х	٧	٧	٧	Х	٧	٧
Thomas Keane	٧	х	٧	Х	Х	Х	х
Shane Knox	٧	٧	٧	٧	٧	٧	٧
David Maher	Х	х	х	х	٧	х	٧
Shane Mooney	٧	٧	٧	٧	٧	٧	٧
Mick Molloy	٧	٧	٧	٧	Х	٧	٧
Barry O'Brien	х	Х	٧	Х	Х	х	Х
Cathal O'Donnell	٧	٧	х	٧	٧	٧	٧
Patrick Plunkett	٧	٧	٧	٧	٧	٧	Х
Valerie Small	Х	V	х	٧	٧	٧	٧
Tom Tinnelly	Х	Х	х	Х	Х	Х	
Glenna Woods	Х	х	٧	٧	Х	٧	Х

7. Retirement Benefit Costs

By direction of the Minister for Health, no provision has been made in respect of benefits payable under the Local Government Superannuation Schemes as the liability is underwritten by the Minister for Health. Contributions from employees who are members of the scheme are credited to the income and expenditure account when received. Pension payments under the scheme are charged to the income and expenditure account when paid. The pension levy is paid to the Department of Health.

Council also operate the Single Public Services Pension Scheme ("Single Scheme"), which is a defined benefit scheme for pensionable public servants appointed on or after 1 January 2013. Since the introduction of the Single State Pension scheme three new staff have commenced employment with the Council and members' contributions are paid over to the Department of Public Expenditure and Reform (DPER). Clarification is awaited on the liability associated with this single service Pension Scheme.

8. Reduction in Value of Fixed Assets

		2015	2014
	Note		Re-stated
		€	€
Depreciation of property, plant and equipment	9	19,844	23,504
		19,844	23,504

9. Property, Plant and Equipment

	ICT Equipment	Other Equipment	Totals
Cost	Lquipinent	Lquipinent	
	69.427	77 450	145 005
At 1 January	68,427	77,458	145,885
Additions	10,918	-	10,918
Disposals	4,838	-	4,838
At 31 December	74,507	77,458	151,965
Depreciation			
At 1 January	33,729	75,889	109,618
Charge for the year	19,096	392	19,488
At 31 December	52,825	76,281	129,106
Net Book Value			
At 1 January	34,698	1,569	36,267
Net movement for the year	13,016	392	13,408
At 31 December	21,682	1,177	22,859

10. Payables

a) Amounts falling due within one year

	2015	2014 Re-stated
	€	€
Trade Creditors	50,029	5,572
Accruals	53,339	42,386
Visa	7,941	1,034
Tax Due	19,827	3,694
	131,135	52,686

11. Receivables

	2015	2014
		Re-stated
	€	€
Debtors	3,021	800
Prepayments	209,327	50,673
	212,348	51,473
Cash and cash equivalents	25,839	316
	238,187	103,262

12. Lease Commitments

At 31 December 2015 the Pre-Hospital Emergency Care Council had the following future minimum lease payments under non-cancellable operating leases for each of the following periods:

Operating lease payments recognised as an expense were €15,701 (2014: €15,701).

	€
Payable within one year	103,432
Payable within two to five years	206,864
	310,296

13. Related Party Disclosures

Please refer to Note 6 for a breakdown of the remuneration and benefits paid to key management.

The Pre-Hospital Emergency Care Council adopts procedures in accordance with the guidelines issues by the Department of Public Expenditure and Reform covering the personal interests of Council members. In the normal course of business, the Pre-Hospital Emergency Care Council may approve grants or enter into other contractual arrangements with entities in which the Pre-Hospital Emergency Care Council members are employed or are otherwise interested.

14. Transition to FRS 102

Adjusting Items

(a) Holiday Pay Accrual

The Pre-Hospital Emergency Care Council had previously not accrued for holiday pay earned by employees but not availed of at the reporting date.

The impact of this change is an increase of €9,313 in creditors at the transition date.

Appendix 1 Schedule of attendance by Council Members 2015

Name	12 th	9 th	14 th	9 th	10 th	12 th	10 th
	Feb	Apr	May	Jul	Sep	Nov	Dec
Tom Mooney (Chair)	٧	٧	٧	Х	٧	٧	٧
Stephen Brady	Х	٧	Х	٧	٧	٧	٧
Michael Brennan	٧	٧	٧	٧	٧	٧	٧
Michael Dineen	Х	٧	٧	٧	٧	Х	٧
Hugh Doran	Х						
Martin Dunne	Х	٧	٧	٧	Х	٧	٧
Thomas Keane	٧	х	٧	Х	Х	Х	Х
Shane Knox	٧	٧	٧	٧	٧	٧	٧
David Maher	х	Х	Х	Х	٧	Х	٧
Shane Mooney	٧	٧	٧	٧	٧	٧	٧
Mick Molloy	٧	٧	٧	٧	Х	٧	٧
Barry O'Brien	Х	Х	٧	X	Х	Х	Х
Cathal O'Donnell	٧	٧	х	٧	٧	٧	٧
Patrick Plunkett	٧	٧	٧	٧	٧	٧	х
Valerie Small	Х	٧	Х	٧	٧	٧	٧
Tom Tinnelly	Х	Х	Х	Х	Х	Х	
Glenna Woods	Х	х	٧	٧	Х	٧	Х

Appendix 2 Schedule of attendance by Quality and Safety Committee Members 2015

Name	4 th March	16 th June	10 th Nov
Shane Mooney	٧	٧	٧
Katrina Mullally	Х	-	-
Derek Nolan	٧	٧	Х
Michael O'Reilly	٧	٧	٧
Tom Tinnelly	Х	Х	Х
Valerie Small	Х	Х	Х
Tom Mooney	Х	Х	Х
Brigid Sinnott	٧	Х	Х
Anthony Corcoran	Х	٧	٧
Mick Molloy	Х	Х	Х
Ricky Tracey	Х	Х	Х
Brigid Doherty	٧	٧	Х
Michael Dineen	Х	Х	Х
Thomas Keane	Х	Х	Х
Gregory Lyons	Х	Х	Х
David Maher	Х	Х	Х
lan Brennan	٧	٧	Х
David Willis	-	٧	٧
Rotational Members			
John Conroy	٧	٧	
James Connell	٧		
Chris O'Connor	٧		٧
David Rock	٧		
Paul Brothers	٧		
Ronan Denning	٧		
Andrew Lyle		٧	
John McShane		٧	
David Bradley		٧	٧
Michael Dougan		٧	
Anthony Lawlor		٧	
Anna Rock			٧
Bernie Stevenson			٧
Pamela Skerritt			٧
David Hall			٧
James Carroll			٧

Appendix 3 Schedule of attendance by Education and Standards Committee Members 2015

Name	27 th Jan	28 th April	24 th Nov
Valerie Small	٧	٧	٧
Stephen McMahon	Х	Х	X
Sarah Cain	٧	٧	٧
Mick Molloy	Х	Х	٧
Glenna Woods	Х	Х	X
Martin McNamara	X	X	X
Maeve Donnelly	٧	٧	٧
Michael Dineen	х	Х	Х
Thomas Keane	Х	Х	Х
Shane Knox	٧	٧	V
Raymond Lacey	٧	Х	х
Paul Lambert	٧	Х	Х
Tom Mooney	Х	Х	Х
David Maher	X	Х	X
Róisín McGuire	٧	٧	٧
Brian Bruno	Х	٧	٧
Shane Mooney	Х	Х	Х
David Menzies	Х	Х	٧
Sandra Fleming	X	Х	٧
Rotational Members			
Derek Fox	٧		
Conor McEvaddy			٧

Appendix 4 Schedule of attendance by Medical Advisory Committee Members 2015

Name	29 th Jan	26 th Mar	28 th May	25 th June	24 th Sept	25 th Nov	26 th Nov
Mick Molloy	٧	Х	Х	Х	Х	٧	٧
Seamus McAllister	Х	Х	٧	Х	٧	Х	Х
Neil Reddy	٧	Х	Х	Х	Х	Х	Х
Conor Deasy	٧	Х	٧	Х	٧	٧	٧
Michael Dineen	Х	Х	Х	Х	Х	٧	٧
David Hennelly	٧	Х	Х	Х	٧	٧	٧
Macartan Hughes	٧	٧	Х	٧	٧	٧	٧
David Irwin	Х	Х	٧	٧	Х	Х	Х
Thomas Keane	Х	Х	Х	Х	Х	Х	Х
Shane Knox	٧	٧	Х	٧	٧	Х	Х
Declan Lonergan	Х	٧	٧	٧	٧	٧	٧
Joseph Mooney	٧	٧	٧	Х	Х	٧	٧
Shane Mooney	٧	٧	Х	Х	Х	٧	٧
David O'Connor	٧	٧	Х	٧	٧	٧	٧
Kenneth O'Dwyer	٧	Х	Х	Х	Х	٧	٧
Martin O'Reilly	٧	٧	Х	٧	Х	٧	٧
Rory Prevett	Х	٧	٧	Х	Х	Х	Х
Derek Rooney	٧	Х	٧	٧	٧	٧	٧
Jack Collins	Х	Х	٧	٧	Х	٧	٧
Cathal O'Donnell	Х	Х	٧	Х	٧	Х	Х
Valerie Small	Х	Х	Х	Х	Х	Х	Х
Tom Mooney	Х	Х	Х	Х	Х	Х	Х
Stephen Cusack	Х	Х	٧	Х	Х	Х	Х
Peter O'Connor	Х	٧	Х	٧	Х	٧	Х
David Menzies	Х	٧	Х	Х	٧	٧	Х
Gerald Kerr	٧	Х	٧	Х	Х	Х	Х
David McManus	Х	Х	Х	Х	Х	Х	Х
Gerard Bury	٧	Х	Х	Х	Х	٧	Х
Sean Walsh	٧	Х	Х	Х	Х	Х	Х
Niamh Collins	٧	٧	Х	٧	٧	٧	٧

Appendix 6 Schedule of attendance by Compliance and Audit Committee Members 2015

Name	4 th March	6 th May	9 th Oct
Con Foley	٧	٧	٧
Dermot Magan	V	√	√
Stephen Brady	V	٧	٧
Michael Brennan	V	√	٧
Brian Power	√	٧	N/A
Pauline Dempsey	N/A	N/A	٧

Appendix 7 Sustainable Energy Authority of Ireland - PHECC Scorecard



