Pre-Hospital
Emergency Care
Council

CPL Learning and Development Ltd

Quality Standards Review
On-Site Report

Table of Contents

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	CPL Learning and Development Ltd.
Profile	A private training company and a PHECC recognised institution since 2016.
PHECC courses being delivered	Cardiac First Response – Community Cardiac First Response – Instructor Cardiac First Response – Advanced Emergency First Response Emergency First Response – Instructor First Aid Response First Aid Response - Instructor
Higher Education Affiliation	None
Address	5 St Fintans, North Street, Swords, Co. Dublin.

1.2 Reports Details

Date of on-site visit	26-04-17
Quality Review Panel (QRP)	
P Collins	QRP Chair – Independent
J Donaghy	QRP Member – Independent
K Walsh	QRP Member – PHECC
RI Representatives	
Pamela Skerritt	Head of Learning and Development
Monica McKeon	PHECC Coordinator
Date of Council Approval	08-11-2017

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 First Aid Response - Instructor (FAR-I) course was selected to provide context.

2.0 Review Findings

2.1 Meetings and Discussions

Type	Comments
Entry Meeting	The QRP met with two representatives on arrival. Following introductions, the panel chairperson outlined the agenda for the visit and the process that would be followed.
Staff Discussions	The QRP met with four staff members at various times throughout the review.
Learner Discussions	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	The RIs administrative offices are located in Naas. Training for PHECC courses takes place in rented premises or clients' premises.
Resources	Resources are faculty responsibility for course delivery.

2.3 Evidence Reviewed – Documents/IT

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

- Website
- Organisational Chart(s)
- Faculty Form
- Quality Policy and Procedures
- Control of Marketing Procedure
- Training Enquiries Bookings and Contracts
- Data Protection Policy
- Document Control – Version Control
- Register of Data Controllers
- Student Evaluation Records
- Client Evaluation Form
- Assessment Sheets
- Attendance Records
- Faculty Records
- Independent Contract for Services Agreement
- Quality Manual
- Assessment Processes – Trainer Responsibilities
- Recognition of Prior Learning – Learner Assessment Criteria

- Recognition of Prior Learning – Guidelines for Mentors
- Recognition of Prior Learning Enquiry Form
- First Aid Response Instructor RPL Assessor Report
- Equality and Diversity Policy
- Anti-Bullying, Harassment Policies
- Complaints policy
- Learner Appeals Process Model
- Learner Appeal Form
- Training Checklist
- CPL QA Agreement
- HR Policy
- Roles and Responsibilities
- A1 Course and A2 Course (Assessment sheets for FAR Instructor Assessment)
- Assessment and Awards Policy
- Appeals policy
- FAR Lesson Plans and Timetables
- Internal Verification Form
- Equipment Checklist

2.4 Quality Standards – Review

Section One: Organisational Structure and Management	
Standard	**QRP Findings**
1.1 Governance - The Institution has clear lines of authority and engages a system of accountability for PHECC approved courses.	The organisational chart was available for review and reflects the overall structure of the organisation. In addition a sub section of the organisational chart indicates some of those responsible for the quality assurance of PHECC approved courses. This needs to be updated to reflect current practice. During discussions RI representatives outlined a procedure for internal course approval prior to submission to PHECC. These procedures are to be documented. Course and results approval are carried out as per PHECC guidelines. Evidence was provided that self-assessment has been carried out, with the PHECC Recognised Institutions Self-Assessment Report (RISAR) and Quality Improvement Plan (QIP) being utilised.
1.2 Management Systems and Organisational Processes - The Institution can show that it has well documented organisational processes in place to meet the needs of all stakeholders.	There are policies and procedures for data protection and document control which need to be updated to reflect current practice and training activities. Student and faculty records were reviewed and found to be satisfactory. Computers are password protected and hard copy records are stored in a secure location in an administrative office, with access restricted to authorised personnel only. Hard copy student material is returned to the administrator via registered post. A limited number of performance measures are in place to capture training information. PHECC certification activity reports and additional information is submitted to PHECC on request.
1.3 Management Responsibility - There is a clearly defined system in place showing who is responsible for ensuring the quality assurance of PHECC approved courses.	The head of learning and development has overall responsibility for the quality assurance of PHECC approved courses, as evidenced on the organisational chart. During discussions and in their RISAR RI representatives outlined how faculty members are made aware of their responsibilities for the quality of PHECC approved courses i.e. induction, formal meetings. However there was no documented evidence to support this. RI representatives outlined the procedures for internal verification. There was evidence to support this and the internal verifiers were present throughout the review.
1.4 Self-Assessment, External Evaluation and Improvement Planning - The Institution carries out	The RI has a quality policy and procedures documented which need to be updated to reflect current practice and the provision of PHECC approved courses. Evidence was provided which showed that procedures are in place to monitor the

internal assessment and engages in a quality improvement planning process (annually) which includes external evaluation.	implementation and effectiveness of PHECC approved courses and associated services. During discussions RI representatives indicated that stakeholders were involved in the self-assessment process, including students' faculty and course administrators. However there was no evidence to support this. RI representatives indicated that they will be carrying out an annual 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.
1.5 Transparency and Accountability - The institution conducts its activities in an open and transparent manner.	The documented evidence showed that potential students are provided with relevant information to make an informed choice about course participation. During discussions RI representatives stated that students are provided with information regarding educational supports by faculty and on request and are provided with a course handbook. There was no evidence to support this. At the time of review course reports are not completed by faculty.
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. At the time of review all of these procedures were not documented. However faculty administrative responsibilities were documented and reviewed and there was evidence to show these activities had been carried out. Student and faculty documentation was reviewed to verify these activities.
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 mission statement was included on some documentation and found to be adequate. At the time of review the mission statement was scheduled for a review and update. Plans are in place to include the updated mission statement on all relevant documents, promotional material and the website.
2.2 Communication with Students and Other Stakeholders - Two way communication systems are in place between faculty, students and other stakeholders as appropriate.	The evidence provided indicated that students are encouraged and have the opportunity to provide feedback on their course. Student feedback forms were reviewed to verify this. During discussions RI representatives indicated that students have regular and appropriate access to faculty. There was no evidence to support this. Evidence was available to show feedback form client organisations. RI representatives stated that this was an area in which they would be enhancing their current practices.
2.3 Course Access, Transfer and Progression - Course information in clear, access is fair and consistent, with recognition of prior learning, as appropriate.	There are no documented policy and procedures for admissions. While there are pre-requisites/entry requirements for some PHECC approved courses these need to be enhanced and included for all PHECC approved courses. During discussions RI representatives stated that potential students can request further information if needed. The evidence indicates that potential students are provided with sufficient information to make an informed choice about course participation. During discussions RI representatives outlined a range of sources of information available to students. Evidence was viewed to support this. There is a documented Recognition of Prior Learning (RPL) policy and procedures in place which was available for review. Additional RPL reports were reviewed and found to be adequate. Information regarding RPL is made available to all stakeholders and is in line with PHECC guidelines.
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 is available to stakeholders on request. There was no evidence that information and training on equality and diversity is provided to faculty. During discussions RI representatives outlined and gave examples of how they accommodate individuals with additional support needs. Administration collect this information and registration inform relevant faculty. There was no evidence of these activities taking place. The organisation has documented policies on bullying and harassment which need to be made available to faculty. At the time of review there was no documented code

	of practice for faculty.
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. These need to be updated to reflect current practice. During discussions RI representatives outlined the processes for appeals and complaints which are made available to all stakeholders through relevant documentation i.e. student handbook, induction presentation. They also indicated that faculty are encouraged to inform students of these policies verbally throughout their course. There was no documented evidence to indicate these activities had taken place.
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 all training is carried out externally and that a premises checklist is in place which is completed by faculty for each venue. At the time of review there was no documented evidence of external premises approval. There is a resource checklist for each course. RI representatives indicated that faculty are responsible for ensuring that they have all the required resources for course delivery. There are no documented procedures in place for the maintenance and cleaning of equipment or evidence that these activities take place.
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 on request for all stakeholders. Health and safety procedures are in place and in line with relevant legislation. There was no evidence that risk assessment is carried out on each venue used for course activities.
2.8 Social Environment - A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.	Student and stakeholder feedback was reviewed and provided evidence that students have positive learning experiences. Additional course documentation was reviewed and indicated the courses are delivered in an interesting and challenging environment which enhances the learning experience. It also indicates that the RI is fully compliant with PHECC requirements on faculty/student ratios.

Section Three: Faculty Recruitment and Development

Standards	QRP Findings
3.1 Organisational Staffing - All faculty are aware of their role and responsibilities when involved in the administration and/or delivery of a PHECC approved course and their conduct is professional at all times.	There is a documented recruitment and development policy and associated procedures in place. Additional human resource policies are also in place. Roles and responsibilities for faculty are documented as part of the training guidelines, which were reviewed and indicated that faculty are made aware of the responsibilities for the quality assurance of PHECC approved courses. Documentation indicates that the RI meets the minimum faculty requirements for operational needs and course approval.
3.2 Faculty Recruitment - Faculty, are recruited on the basis of personal suitability, appropriate experience and qualifications.	A role description and selection criteria for each position is documented and available for review. During discussions the RI representatives outlined their process for faculty recruitment and the involvement of senior management in faculty recruitment. Evidence was available to demonstrate these activities taking place. Documentation indicates that the RI meets the minimum faculty requirements for course approval.
3.3 Faculty Development and Training - Faculty are encouraged and supported to gain additional training/qualifications appropriate to their role in or with the institution.	At the time of review there were no documented procedures in place for the continuous professional development of faculty or for them to seek support for training and obtaining additional qualifications if required. However there was evidence that upskilling activities had taken place. During discussions the RI representatives indicated that faculty do receive an induction and any updates are communicated through staff meetings and email. There was evidence provided to indicate that induction and meetings had taken place. At the time of review there were no documented policy and procedures for child welfare/vulnerable persons or evidence that faculty are made aware of their obligations if dealing with children or vulnerable persons.
3.4 Communication with Faculty - Two way communication systems are in place between management and faculty.	During discussions the RI representatives stated that faculty are encouraged to provide feedback during and after each course. They described a range of methods of communication between faculty and management i.e. email, text, phone informal meetings and annual faculty meeting etc. procedures for ensuring a systematic approach to communication are not documented. However the evidence indicated that communication does take place between management and faculty before, during and after each course.
3.5 Work Placement and Internship - Host	Not Applicable

organisations (internship sites) are appropriate to 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 for course delivery. 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 required to assist on a course before they can deliver a course themselves. They are then observed delivering their first course and 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 was evident on course documentation.
3.7 Collaborative Provision - Appropriate contractual arrangements are in place with affiliated instructors.	During discussions and in their RISAR RI representatives stated that all affiliated faculty are provided with a contract agreement. This was made available for review and needs to be updated to include agreed quality assurance standards.

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Section Four: Course Development, Delivery and Review

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Standards	QRP Findings
4.1 Course Development - Courses are designed to meet the requirements for PHECC approval and certification and reflect a commitment to quality improvement.	There is a documented course development/design policy and associated procedures. During discussions RI representatives outlined a process for course development and implementing any changes in PHECC education and training standards or clinical practice guidelines. Evidence was available to indicate these activities take place. Course material (lesson plans) was reviewed which showed that appropriate activities were being carried out to allow students to meet the learning outcomes. Course information is clearly stated and outlined for students, including timetables and schedules. Documentation also indicated that appropriate student/tutor ratios are maintained.
4.2 Course Approval - There are clear guidelines for course approval.	During discussions RI representatives outlined an internal process for course approval prior to submission to PHECC for approval. At the time of review this process was not documented and no evidence was provided of these activities taking place. However all the information required for PHECC course approval has been supplied.
4.3 Course Delivery, methods of theoretical and clinical Instruction - Courses are delivered in a manner that meets students' needs and in accordance with PHECC guidelines.	A course delivery policy and procedures are documented. During discussions the RI representative indicated that student induction takes place There was evidence to support this. Student induction needs to be updated to reflect current practice. Attendance records are maintained for each course and were available for review. However changes are required to ensure an accurate record of student attendance is available. 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. RI representatives indicated that students have the opportunity to meet with faculty for feedback and remedial work if required. There was no evidence available of these activities taking place.
4.4 Course Review - Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	There are documented procedures in place for carrying out course reviews. During discussions RI representatives outlined a range of opportunities for students and faculty to provide feedback during and after their course. Evidence was provided of these activities taking place and of analysis of the feedback taking place. Student feedback forms and faculty course reports were made available for review. Areas for improvement are noted and actioned as required e.g. changes to course delivery schedule. The RI has submitted a quality improvement plan based on their self-assessment findings and

	will be updating this based on the findings from the external review.
4.5 Assessment and Awards - Assessment of student achievement for certification operates in a fair and consistent manner by all tutors and instructors in line with PHECC assessment criteria.	There is a documented policy and procedures in place for course assessment activities. The evidence provided indicates that appropriate methods are used on all courses and it is clearly stated when PHECC assessment material is being used. Students are provided with assessment information prior to and during their course. During discussions RI representatives indicated that students are provided with reasonable accommodation on request. Representatives described examples of these activities which are recorded on the student record. There is a documented procedure in place for the security of assessment related material. Assessment related material is stored centrally and only issued upon request. Responsibility for the PHECC certification system is allocated to a named member of staff.
4.6 Internal Verification - There is a consistent application of PHECC assessment procedures and the accuracy of results is verified.	There are documented procedures in place for internal verification and records are maintained. An internal verification report was made available for 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.	There are documented procedures in place for 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.	There is a documented student appeals procedure which needs to be updated to reflect current practice. 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 a

range of relevant policies and procedures in place that indicate a commitment to internal quality assurance and continuous quality improvement. However many of these need to be updated to reflect current practice and the delivery of PHECC approved courses. The evidence also indicated that the RI's systems, at the time of review, provide oversight of all activities and ensure that students have a comprehensive and rewarding learning experience. They also ensure that the quality assurance of PHECC approved courses is carried out in an effective and efficient manner and in line with PHECC education and training standards and clinical practice guidelines. The panel noted the RI's intention to increase their offering of PHECC approved courses and stressed the need to ensure the RI has the capacity to support these courses and to meet the activities outlined in their policies and procedures. The updates highlighted during discussions, when implemented, will enhance the student experience and ensure that the RI meets all the PHECC quality standards. The evidence supports the conclusion that the RI's activities meet the requirements to carry out PHECC approved courses.