Quality Review Framework (QRF)

Composite Report

Gorman Health and Safety

Table of Contents

Quality Review Framework Composite Report

1. Institution Details

Name	Gorman Health & Safety
Address	8 Rath Glas, Rehins Fort, Ballina, Co. Mayo
Type of Organisation	Private Company
Profile	Approved training institute (ATI) since 20/12/2017. Sole trader who delivers all courses for the institution in external premises. Administrative support in place.
PHECC Courses Delivered	CFR Community, First Aid Response
Higher Education Affiliation	N/A

2. Review Details

Purpose	• To facilitate the enhancement of a successful learning experience for students. • To foster a culture of continuous quality improvement in institutions. • To generate public confidence in the standard of education and training in pre-hospital emergency care.
Scope	• All activities associated with meeting the quality standards as outlined in the PHECC Quality Review Framework. • All documentation submitted in support of the continuous quality improvement of PHECC approved courses. • A sample of course, student and faculty records. • All personnel associated with the delivery and administration of PHECC approved courses.
Date of the Desktop Review	20/10/19
Date of On-site Review	01/11/19

3. Report Details

Draft report sent to Institution for feedback	03/12/19
Final report sent to Institution	21/04/20
Education and Standards Committee Approval	06/05/20
Council (For Noting)	11/06/20

Report Compiled by	Quality Review Panel

4. Review Activities

4.1 Meetings

Opening Meeting (add rows as required)	
Organisation	**Role**
Gorman Health & Safety	Managing Director
Gorman Health & Safety	Administration
PHECC	QRF Panel Lead
PHECC	QRF Panel Member
PHECC	QRF Panel Member
Closing Meeting (add rows as required)	
Organisation	**Role**
Gorman Health & Safety	Managing Director
Gorman Health & Safety	Administration
PHECC	QRF Panel Lead
PHECC	QRF Panel Member
PHECC	QRF Panel Member

.2 Stakeholder Discussions

Name/Group	Role (add rows as required)
N/A	N/A

4.3 Document Review

The records and systems listed below were reviewed and discussed during the desktop and onsite reviews.

Organisational Chart	Education and Training Mission	Appeals Policy
Complaints Policy	Statement	Equality and Access to Training
Health, Safety & Welfare Policy	Record Management Policy	Policy
Faculty Management Procedure	Quality Assurance Policy	Internal and External
Recognition of Prior Learning	Assessment & Awards Policy	Authentication
Named Faculty Form	Method of Theoretical and	Safeguarding Policy
Course Material	Clinical Instruction	Data Protection Policy &
Insurance Details	Tax Clearance Cert	Procedures

Communications Policy	Equality, Diversity and Access to	Equipment and Maintenance
Venue Suitability Checklist	Training Policy	Checklist
Results Approval Policy	Student Records	Faculty Records

4.4 Observation of Practice, Facilities and Resources

Practice – e.g. Course delivery, administration, clinical placement (add rows as required)	
Location	**Comments**
N/A	N/A
Facilities (add rows as required)	
Location	**Comments**
N/A	N/A
Resources – e.g. equipment, ICT, course material, etc (add rows as required)	
Location	**Comments**
N/A	N/A

5. Compliance Rating and Level

The Compliance Ratings (CRs) are designed to establish a baseline, measure ongoing progress and encourage CQI. Ratings are given on a five-point scale (0-4) against each component. To calculate the overall Compliance Level (CL) for the relevant quality standard:

1. Add the CR for each applicable component of the QS to get a total number.
2. Divide the total number by the number of applicable components to get the average.
3. Check for the compliance level on the matrix and record on the SAR.

Rating	Level	Descriptor
N/A	Not Applicable – N/A	The standard is not applicable.
0 – 0.99	Not Met – NM	No evidence of compliance in the organisation.
1 – 1.99	Minimally Met – MNM	Evidence of a low degree of organisation-wide compliance.
2 – 2.99	Moderately Met – MDM	Evidence of a moderate degree of organisation-wide compliance.
3 – 3.99	Substantively Met – SM	Substantive evidence of organisation-wide compliance.
4	Fully Met – FM	Evidence of full compliance across the organisation.

6. QRP Findings

6.1 Theme 1: Organisational Structure and Management

Quality Area	1.1 Governance	Level
Quality Standard	The institution has fit-for-purpose governance that ensures objective oversight, and clear lines of authority and accountability for all activities associated with PHECC-approved courses.	**MNM**

QRP Findings

It was clear from the evidence provided what constitutes governance in the organisation and that it is appropriate to needs, size and complexity of the institution. It is also clear that the Managing Director (MD) has overall responsibility for all education and training activities and that responsibility is delegated to administrative support as appropriate. This was confirmed by the administrator during discussions.

The evidence indicated that there were no procedures in place to ensure that when required relevant individuals were in place to provide oversight for course approval/amendment and results approval. The evidence indicated that the institution would benefit from additional support for these activities.

Role descriptions were available for review, which need to be updated to reflect practice outlined during discussions.

The evidence indicated that there were no documented procedures for identifying, assessing and managing risk and limited reference to risk throughout the documents. During discussions representatives outlined processes for risk management. The evidence indicated that the institution would benefit from additional documentation to support these activities and to ensure they are carried out in relation to all education and training activities.

Areas of Good Practice

- Clear accountability for all education and training activities.
- Understanding among personnel of their quality assurance responsibilities.

Areas for Improvement

- Documented procedures to ensure that when required relevant individuals are in place to provide support for course approval/amendment and results approval.
- Role descriptions to be updated to reflect practice.
- Documented policy, procedures and supporting documents for identifying, assessing and managing risk to be developed.
- Documented evidence that oversight activities have taken place.

Quality Area	1.2 Management Systems and Organisational Processes	Level
Quality Standard	The institution complies with all relevant legislation and cooperates with PHECC to meet its requirements.	**MDM**

QRP Findings

The evidence indicated that the organisation is an established legal entity with education and training as a principle function, appropriate insurance is in place for all education and training activities and that the institution is in good financial standing with the revenue commissioners.

The evidence indicated that not all tasks associated with education and training are documented and that the institution and students would benefit from additional documentation to support the activities outlined during discussions.

The evidence indicated that the institution maintains up to date records for all PHECC approved courses and associated faculty.

Data protection and record management policies were made available for review. The evidence indicated that these documents need to be updated to reflect current practice and the requirements under the General Data Protection Regulation 2016/679.

The evidence indicated that the organisation would benefit from additional support to carry out all quality assurance activities associated with PHECC approved courses.

A complaints policy was made available for review. The evidence indicated that the institution and all stakeholders would benefit from additional information to ensure they are aware of it.

Areas of Good Practice

- The institution is an established legal entity that provides education and training as a principal function.
- The institution maintains up to date student and faculty records.
- The institution is in good financial standing with the revenue commissioner.
- Adequate and appropriate insurance cover is in place for all education and training activities.

Areas for Improvement

- Document all tasks associated with education and training activities to ensure a robust systematic approach to the quality assurance of PHECC approved courses.
- Data protection policy and procedures needs to be updated to reflect current practice and legislative requirements.
- Ensure that all stakeholders are made aware of the complaints policy.

Quality Area	1.3 Continuous Quality Improvement	Level
Quality Standard	The institution has a proactive, systematic approach to monitoring, reviewing and enhancing education and training activities.	**MDM**

QRP Findings

It is clear from documentation and discussions that the MD has overall responsibility for the quality assurance of PHECC approved courses and that all those involved in education and training activities have been made aware of their responsibilities.

The evidence indicated that the quality policy needs to be updated to reflect current practice and provide an accurate reflection of a proactive, systematic approach to monitoring, reviewing and enhancing education and training activities.

The evidence indicated that appropriate performance indicators (KPIs) are not in place for monitoring all aspects of education and training. During discussions representatives outlined the systematic collection of student feedback. Documented evidence was provided to support these activities.

The evidence indicated that the institution would benefit from additional documented feedback from other stakeholders and the analysis of existing feedback to inform practice.

The evidence also indicated that the institution would benefit from the systematic review of learning resources and locations and the systematic review of policies and procedures to ensure they are effective, fit for purpose, reflect current practice and are consistent with the requirements of relevant legislation.

There was evidence provided of up to date quality improvement planning and implementation.

Areas of Good Practice

- It is clear who has overall responsibility for the quality assurance of PHECC approved courses and that those involved in education and training activities are aware of their responsibilities.
- 2019 PHECC self-assessment report completed and submitted.
- Areas for improvement have been identified and included in the quality improvement plan.

Areas for Improvement

- Document a robust, proactive systematic system to ensure continuous quality improvement.
- Develop KPIs for monitoring and ensure that they are linked to all aspects of education and training.
- Implement systems that ensure the systematic collection, analysis and use of student feedback, participation and progression, and other stakeholder feedback.
- Develop a procedure for the systematic review of learning resources and locations and evidence that these activities have taken place.
- Develop a procedure for the systematic review of policies and procedures to ensure they are effective, fit for purpose, reflect current practice and are consistent with the requirements of relevant legislation.

Quality Area	1.4 Transparency and Accountability	Level
Quality Standard	The institution conducts its activities in an open and transparent manner, with appropriate feedback and feed-forward systems in place, with and between all relevant stakeholders.	**MNM**

QRP Findings

The evidence indicated that the institution would benefit from additional course reports completed by faculty and the development of appropriate KPIs that are linked to all tasks associated with education and training activities.

During discussions representatives clearly outlined how certificate activity reports, faculty details and any other targeted information requests by PHECC are managed. Additions to existing documentation would support these activities and ensure continuity of practice.

The evidence indicated that prospective students are provided with sufficient information to make an informed choice about course participation. During discussions the MD indicated that additional information would be added to course details.

There was no evidence that information about the institutions quality assurance system is made available to the public in an easily accessible format. During discussions representatives indicated that the PHECC QRF report and relevant information about the institutions quality assurance system would be made available to the public in an easily accessible format.

The evidence indicated that the institution would benefit from documented procedures to provide and obtain information from other stakeholders (employers etc.).

Areas of Good Practice

- Prospective students are provided with sufficient information to make an informed choice about course participation.
- Procedures are in place to ensure information is provided to PHECC as requested.

Areas for Improvement

- Documented course reports to be completed by faculty for each course.
- Document all tasks from student entry to exit ensuring that they are linked to relevant KPIs.
- Update current documentation to ensure consistency in meeting PHECC requests for information.
- Ensure that the general public have access to information about the quality assurance system and external reviews in an easily accessible format.
- Document procedures for providing and obtaining information from other stakeholders.

6.2 Theme 2: The Learning Environment

Quality Area	2.1 Training Infrastructure	Level
Quality Standard	Courses are carried out in appropriate facilities and are sufficiently resourced to deliver training to the highest standards.	SM

QRP Findings

The evidence indicated that the institution would benefit from additional documentation to support health and safety activities and ensure that a documented record of risk assessments is available for each course.

The evidence indicated that the institution has a documented criterion for premises to be used for the delivery of PHECC approved courses. During discussions representatives indicated that the processes needed to be extended to be consistently applied. The evidence indicated that additional documentation would support the evidence that these activities have taken place.

The evidence indicated that appropriate equipment/resources are available, regularly maintained and updated, and that all resources are fit for purpose and accessible. The evidence indicated that the institution would benefit from additional documentation that shows that these activities have been carried out.

Areas of Good Practice

- Health and Safety processes in place.
- Criterion in place for premises to be used for courses.
- Appropriate equipment/resources available for all courses.

Areas for Improvement

- Develop additional documentation to support health and safety activities, premises selection and resource maintenance.

Quality Area	2.2 Student Support	Level
Quality Standard	A positive, encouraging, safe, supportive and challenging environment is provided for students.	MDM

QRP Findings

The evidence demonstrated that the institution maintains appropriate instructor-to-student ratios in keeping with PHECC course approval criteria. It also demonstrated that students are supported by adequate numbers of appropriately qualified and experienced faculty.

The evidence indicated that the institution would benefit from additional support to carry out quality assurance activities.

During discussions representatives outlined a range of supports available for students and the opportunities for students to make faculty aware of those supports. The evidence indicated that the institution would benefit from additional documentation to ensure that students are made aware of the supports available to them before, during and after their course.

The evidence indicated that there are sufficient up to date resources made available to students in a variety of formats. Additional documentation is required to support these activities.

Areas of Good Practice
• Appropriate instructor-to-student ratios are maintained.
• Appropriately qualified and experienced faculty available for each course.
• Up to date resources made available to students in a variety of formats.

Areas for Improvement
• Ensure additional support is in place to carry out all quality assurance activities.
• Ensure that students are made aware of the supports available to them before during and after their course.
• Develop/update documents to show that resources were made available for all courses.

Quality Area	**2.3 Equality and Diversity**	**Level**
Quality Standard	There is a commitment to provide equal opportunities for students and personnel, in compliance with relevant equality legislation.	**MNM**

QRP Findings

The evidence indicated that the institution has a documented equality and diversity policy that needs to be updated to reflect current practice.

The institution would benefit from additional documentation to support policy implementation and to ensure that all associated policies and procedures promote equality, are legislatively compliant and that all stakeholders are made aware of the policy and procedures.

The evidence indicated that the institution would benefit from up to date information and training on equality and diversity documenting a code of conduct for staff and students.

The evidence indicated that courses accommodate the cultural backgrounds and different learning styles of students.

Areas of Good Practice
• Documented equality and diversity policy.

Areas for Improvement
• Update equality and diversity policy to reflect current practice.
• Ensure all relevant policies and procedures are legislatively compliant.
• Ensure staff have up to date information and training on equality and diversity.

Quality Area	**2.4 Internship/Clinical Placement**	**Level**
Quality Standard	*NQEMT courses only:* Internship/Clinical Placement sites are appropriate to course content and the learning outcomes to be achieved.	**N/A**

QRP Findings
• N/A

Areas of Good Practice
• N/A

Areas for Improvement
• N/A

6.3 Theme 3: Human Resource Management

Quality Area	3.1 Organisational Staffing	Level
Quality Standard	The institution has sufficient, appropriately qualified and experienced personnel to maintain high-quality education and training activities.	**MDM**

QRP Findings

Staffing of the institution is one instructor who delivers all courses and one individual who provides administrative support. The evidence indicated that the composition of the institution's personnel does meet PHECC education and training standards.

The evidence indicated that the institution requires additional support to carry out all quality assurance activities (course approval/amendment, external authentication) and ensure full compliance with the PHECC Quality Review Framework and would benefit from a robust systematic approach to recruitment when additional personnel are required.

The evidence indicated that the institution would benefit from additional documentation and updates to current job descriptions to reflect current practice and the requirements for additional support for quality assurance activities.

Areas of Good Practice

- Composition of personnel meets PHECC education and training standards.
- Minimum standards for academic and subject matter experience maintained.

Areas for Improvement

- Document a robust systematic recruitment process.
- Update job descriptions to reflect current practice and additional support roles.
- Develop and issue a written statement of terms of employment/engagement for additional personnel that may be required to support quality assurance activities.

Quality Area	3.2 Personnel Development	Level
Quality Standard	The institution takes a systematic approach to supporting and developing all personnel, ensuring they have the competencies to deliver high-quality education and training.	**SM**

QRP Findings

The evidence indicated that the institution can demonstrate that personnel have completed training/upskilling relevant to their role.

During discussions personnel outlined a range of additional training/upskilling activities undertaken to enhance skills in support of the required certification. Additional documented records of these activities would be beneficial to the institution.

Areas of Good Practice

- Appropriate and relevant training/upskilling undertaken to ensure competencies to deliver high-quality education and training.

	Areas for Improvement
•	Maintain a documented record of all additional training/upskilling undertaken.

Quality Area	3.3 Personnel Management	Level
Quality Standard	A systematic approach is taken to managing all individuals and groups engaged in education and training activities.	**MDM**

QRP Findings
The evidence indicated that only personnel with valid certification deliver PHECC approved courses.
The evidence indicated that the institution would benefit from a documented record of course activities (course report) from faculty and from additional documentation to demonstrate that it has appropriate HR policies and procedures in place to meet its legislative requirements.

Areas of Good Practice
• Required certification for all personnel up to date.

Areas for Improvement
• Develop and maintain course reports for each course delivered.
• Ensure appropriate HR policies and procedures are in place to meet legislative requirements.

Quality Area	3.4 Collaborative Provision	Level
Quality Standard	Appropriate contractual and quality assurance arrangements are in place with contracted staff.	N/A

QRP Findings
• N/A

Areas of Good Practice
• N/A

Areas for Improvement
• N/A

6.4 Theme 4: Course Development, Delivery and Review

Quality Area	4.1 Course Development and Approval	Level
Quality Standard	A systematic approach is taken to course development and approval.	**MNM**

QRP Findings

During discussions representatives outlined a process for course development, delivery and review. The evidence indicated that the institution would benefit from a documented, systematic approach to course development/amendment, approval and review to ensure that courses reflect PHECC requirements.

The evidence indicated that the institution and students would benefit from updates to course material to accurately reflect activities associated with each course.

Areas of Good Practice

- Course material demonstrates a good balance between theory and practice.
- Course delivery provides a balance between presentations, group work, skills demonstrations and practical work.

Areas for Improvement

- Document a course development, delivery and review policy.
- Ensure updates are carried out to relevant course material when required.
- Document a systematic approach to internal course approval/amendment.

Quality Area	4.2 Course Delivery – Methods of Theoretical and Clinical Instruction	Level
Quality Standard	Courses are delivered in a manner that meets students' needs and in accordance with PHECC guidelines.	**SM**

QRP Findings

The evidence indicated that courses are delivered in keeping with PHECC education and training standards by appropriately qualified personnel.

The evidence indicated that the institution and students would benefit from additional documentation to support student induction and records that it consistently takes place.

The evidence also indicated that records of student attendance are maintained and that instructor details are recorded on relevant documentation.

During discussions representatives described how and when structured one-to-one time is available for students with the instructor. The evidence indicated that the institution and students would benefit from a documented record of these activities taking place.

Areas of Good Practice

- All PHECC approved course are delivered in keeping with PHECC education and training standards by appropriately qualified personnel.
- Records of student attendance are maintained for all courses.
- Instructor details are recorded on all relevant documents.

Areas for Improvement
- Develop documentation to record student induction.   - Documented records of student remediation to be developed and maintained.

Quality Area	4.3 Course Access, Transfer and Progression	Level
Quality Standard	Course information is clear, and access is fair and consistent, with recognition of prior learning, as appropriate.	**MDM**

QRP Findings
The evidence indicated that the institution and students would benefit from additional information on - admissions/entry criterion - course details - recognition of prior learning (RPL). The evidence indicated that the RPL procedure needs to be updated to reflect current practice.

Areas of Good Practice
Documented RPL procedure.

Areas for Improvement
- Provide additional information to students on admissions/entry criterion, course details and RPL.   - Update RPL procedure to reflect practice.

Quality Area	4.4 Course Review	Level
Quality Standard	Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	**MNM**

QRP Findings
During discussions representatives outlined the processes for course review. The evidence indicted that the institution and students would benefit from a documented procedure to support this activity. The evidence indicated that students do have the opportunity to provide feedback during and after their course. Feedback forms were available for review and during discussions representatives described the opportunities for students to provide verbal feedback. The evidence also indicated that the institution and students would benefit from additional documentation to support these activities. The evidence indicated that the institution and students would benefit from the development and maintenance of documented course reports from faculty which support overall course evaluation. The evidence indicated that the institution, students and other stakeholders would benefit from additional documentation to support overall course evaluation. This would also facilitate the identification of areas for improvement and agreed actions for inclusion in the quality improvement plan.

Areas of Good Practice
- Students feedback obtained for all courses.   - Quality improvement plan documented.

- Develop a documented procedure for course review to include all methods.
- Develop and maintain faculty course reports for all courses.
- Develop a procedure for course evaluation that includes all stakeholders.
- Maintain an up to date quality improvement plan.

Quality Area	4.5 Assessment and Awards	Level
Quality Standard	Assessment of student achievement is carried out in a fair and consistent manner, in line with PHECC assessment criteria.	**MDM**

QRP Findings

The evidence indicated that appropriate assessment methodology is used for all PHECC approved courses.

The evidence indicated that the assessment policy and procedures need to be updated to reflect current and new practice, including:
- providing students with information on when PHECC assessment material is used and feedback on their assessment
- the security of assessment related material
- supports available to adapt assessment methodologies for students with additional support needs
- internal Verification
- external Authentication
- results approval
- student appeals.

The evidence also indicated that the institution would benefit from additional documentation to support the activities associated with the PHECC certification system.

Areas of Good Practice

- Appropriate assessment methodology is used for all courses.
- Internal verification is carried out on all courses.
- Student support is available for assessment.

Areas for Improvement

- Update assessment policy and procedures to reflect current practice.
- Update documentation to support activities associated with the PHECC certification system.

7. Conclusion and Outcome

Rating	**2.35**
Level	**Moderately Met (MDM)** – Evidence of a moderate degree of organisation-wide compliance
Conclusion	The institution has two personnel, one that delivers all PHECC approved courses and another who provides administrative support. The evidence indicated that the institution is carrying out a broad range of quality assurance activities consistent with a culture of continuous quality improvement. The evidence also indicated that processes currently in place support a quality learning environment. The evidence indicated that the institution would benefit from additional documentation and updates to existing documentation to ensure that the quality assurance systems in place are effective, fit for purpose, reflect current practice, meet PHECC education and training standards, Quality Review Framework requirements and are consistent with relevant legislation. The evidence indicated that the implementation of the improvement actions identified during self-assessment and external quality review will lead to an enhanced learning experience for students and institution personnel. The completion date for all improvement actions is 20/03/20.