Quality Review Framework
Composite Report
Emergency Services Training Institute
(ESTI)

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1. Institution Details

Name	Emergency Services Training Institute (ESTI)
Address	C7 The Exchange, Calmount Park, Ballymount Dublin 12, Co Dublin D12 VW20
Type of Organisation	Private Provider
Profile	Recognised Institution since 2010
PHECC Courses Delivered	CFR Community, CFR Advanced, CFR Community Instructor, CFR Advanced Instructor, First Aid Response, Emergency First Response (EFR), EFR-BTEC, Emergency Medical Technician (EMT)
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	• The review covered all aspects of the institution's activities associated with meeting the quality standards as outlined in the PHECC quality review framework.
Date(s) of the Desktop Review	October 2022
Date of On-site Review	November 2022

3. Report Details

Draft report sent to Institution for feedback	22/12/2022
Final report sent to Institution	01/03/2023
Director Approval **Date**	*[signature]* 21/02/2023
Report Compiled by	Quality Review Panel

4. Review Activities

4.1 Meetings

Opening Meeting (add rows as required)	
Organisation	**Role**
PHECC	Quality Review Panel x 3
ESTI	Director
ESTI	Director
ESTI	Facilitator
Closing Meeting (add rows as required)	
Organisation	**Role**
PHECC	Quality Review Panel x 3
ESTI	Director
ESTI	Facilitator

4.2 Stakeholder Discussions

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

4.3 Observation of Practice, Facilities and Resources

Practice – e.g., Course delivery, administration, clinical placement (add rows as required)	
Location	**Comments**
Main Office	Found to be adequate
Facilities (add rows as required)	
Location	**Comments**
Main Office	Found to be adequate
Resources – e.g., equipment, ICT, course material, etc (add rows as required)	
Location	**Comments**
Main Office	Found to be adequate

4.4 Document Review

The records and systems listed below were reviewed and discussed during the desktop and on-site reviews.

- 2022 Self-Assessment Report
- Annual Declaration
- Quality Assurance Policy
- Quality Assurance Procedure
- Garda Vetting Policy & Procedures
- ESTI Meeting Agenda – CPG Training update
- Training Agreement
- Named Faculty Form – Practitioner
- Email – Faculty Meeting
- ESTI Meeting Agenda 16/02/2021
- EFR Course Kit
- Section 4 – Course Development, Delivery & Review Policies & Procedures
- RPL Procedures

- ESTI CPD Structure
- Records Management Policy
- Administration Policy
- Complaints – Appeals Policy & Procedures
- Course Approval Policy
- Training Room Risk Assessment
- Faculty Meeting 31/05/2018
- Named Faculty Form – Instructor Courses
- Role Profile – Instructor
- Facilitator Meeting 25/07/2017
- EMT Objectives
- ESTI CD Meeting Minutes 29/08/2019
- ESTI CD Meeting Minutes 20/12/2021

- GDPR & Data Protection Statement
- MOU ESTI & EMTS
- Child Safeguarding Policy & Procedures
- ESTI CPG 2021 Training Programme
- Section 2 – The Learning Environment
- ESTI Staff Induction
- Named Faculty Form – Responder Courses
- Role Profile – Tutor
- Section 3 – Human Resource Management
- ESTI CPG Training Programme 2021 – EMT Course Development Plan
- ESTI EMT Course Review Plans
- FAR Course Kit List

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 (see 2.6.2.1 for example).

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
During discussions representatives described the education and training governance systems that support PHECC approved courses. The evidence provided during discussions indicated that these systems ensure objective oversight and a clear separation between those who design/develop courses and those who approve them. The evidence provided also indicated that the institution would benefit from new/updated documentation to fully reflect the governance practice and activities described during discussions. The evidence provided indicated that the institution would benefit from additional and updated documentation to support risk management activities, including risks associated education and training.

Areas of Good Practice
• Systems in place to ensure oversight of education and training activities and a separation between those who design/develop courses and those who approve them • Robust systems in place for course approval/amendment and results approval • Self-assessment carried out • Procedures in place for identifying, assessing, and managing risk • Documented evidence of education and training oversight, i.e., records of meetings and reports

Areas for Improvement
• Organisational Chart – To reflect education and training governance • Procedures to ensure that when required relevant sub-groups and individuals are in place to carry out oversight activities • Records of oversight activities • Sub-group terms of reference and individual role/job descriptions • Risk management documentation

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 provided indicated that the Institution:
- Is an established legal entity that provides PHECC education and training standards
- Is in good financial standing with relevant stakeholders
- Has adequate insurance cover in place to cover all education and training activities

The evidence provided indicated that the institution would benefit from:
- Ensure that all the tasks from student entry to exit outlined during discussions are accurately documented
- Capturing and maintaining additional student records
- Updating and maintaining all faculty records
- Updating existing and adding new documentation to support data protection activities
- Additional support to ensure all quality assurance activities outlined in the documentation and during discussions are systematically and consistently carried out
- Updating the complaints policy and procedures to reflect current practice and to ensure that all stakeholders are made aware of it
- Enhancing the safeguarding policy, procedures and supporting documents

Areas of Good Practice

- Financial Standing with Relevant Stakeholders
- Insurance Cover
- Systems for Maintaining Student and Faculty Records
- Resources to Support Quality Assurance Activities

Areas for Improvement

- Documented tasks form student entry to exit
- Maintaining up to date student and faculty records
- Data Protection Policy, Procedures and Supporting Documents
- Finance and Human Resources to support Quality Assurance Activities
- Complaints Policy and Procedures
- Safeguarding Policy, Procedures & Supporting Documents

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

During discussions representatives described a range of activities to support continuous quality improvement across the institution. The evidence provided indicated that the institution would benefit from new/updated documentation to support these activities.

It was unclear from the evidence provided who has overall responsibility for the quality assurance of PHECC approved courses. However, during discussions representatives outlined and described their responsibilities for the quality assurance of PHECC approved courses. The evidence provided indicated that the institution and stakeholders would benefit from new/updated documentation (records) to support these activities.

During discussions representatives described how they collect, analyse, and use student, faculty, and other stakeholder feedback. The evidence provided indicated that the institution, students, and other stakeholders would benefit from new/updated documentation to support these activities.

During discussions representatives described and provided up to date evidence of the systematic review of learning resources and locations.

The evidence provided also indicated that the institution would benefit from:
- Developing/updating performance indicators and linking them to all aspects of education and training for monitoring purposes
- The systematic review of policies, procedures and supporting documents to ensure they are effective, fit for purpose and are consistent with the requirements of relevant legislation
- ensuring all action items identified during quality improvement activities are included in the quality improvement plan for implementation

Areas of Good Practice

- Awareness among personnel of their quality assurance responsibilities
- Collection of student, faculty, and other stakeholder feedback
- Review of learning resources and locations
- Documented evidence of up-to-date quality improvement planning and implementation

Areas for Improvement

- CQI/Quality policy, associated procedures and supporting documents
- Clear indication of overall quality assurance responsibility
- Maintain evidence that all those involved in education and training have been made aware of their quality assurance responsibilities
- Performance indicators and links to education and training activities
- Analysis and use of student, faculty, and other stakeholder feedback
- Systematic review of policies, procedures and supporting documents
- Quality improvement action implementation

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

During discussions representatives outlined and described:
- A range of reporting activities at all levels in the institution.
- Education and training tasks from student entry to exit
- How they ensure that certificate activity reports, the annual report (including a disclosure of all faculty) and any other targeted information requests are submitted to PHECC
- Third party relationships, i.e., contracted faculty
- How they provide other stakeholders (employer's, etc.) with information and obtain information from them.
- How they provide information about the institutions quality assurance system to the public.

Documentary evidence was provided to support some of these activities. The evidence provided also indicated that the institution would benefit from new/updated documentation to support the implementation of all these activities and provide up to date evidence of practice.

The evidence provided indicated that prospective students are provided with sufficient information to make an informed choice about course participation.

Areas of Good Practice

- Reporting throughout the institution
- Student information
- Responsibility for reporting to PHECC allocated

Areas for Improvement

- Documenting all tasks from student entry to exit ensuring that they are clearly allocated and linked to relevant performance indicators
- Procedure for PHECC communication
- Stakeholder communication procedures
- Public awareness of third-party relationships, the quality assurance system, and external reviews
- Publication of information about the quality assurance system and associated activities
- Communication procedures

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.	**MDM**

QRP Findings

The evidence provided indicated:
- That appropriate training premises are selected and used to deliver PHECC approved courses
- That a documented selection criteria and checklist for external premises to be used for course delivery is in place
- That appropriate equipment/resources are available and have been used for each course
- That a system is in place to regularly maintain and update equipment and that these activities have taken place
- That all resources used for courses are fit for purpose and accessible

During discussions and in the documentation provided for review representatives outlined and described a range of activities to demonstrate compliance with their safety, health, and welfare at work legislative obligations. The evidence provided indicated that the institution would benefit from new/updated documentation to support the implementation of these activities and to provide evidence of practice.

Areas of Good Practice

- Safety, Health, and Welfare Practice
- Premises Selection
- Equipment and resource availability
- Equipment maintenance, updating and records

Areas for Improvement

- Safety, Health, and Welfare documentation
- Records of premises used to deliver PHECC approved courses
- Records of equipment 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 provided indicated:
- That the institution maintains appropriate tutor/student ratios, in keeping with PHECC's course approval criteria
- Sufficient up-to-date resources (appropriate to the level of the course) are made available to students in a variety of formats

During discussions and in the documentation provided for review representatives outlined and described:
- How students are supported by staff
- How they make students aware of the supports available to them before, during and after their course
- The opportunities provided for students to meet individually and collectively with faculty and/ or management
- How they obtain information from potential and existing students about any additional support needs they may have and the mechanisms to provide reasonable accommodation if required

The evidence provided indicated that the institution and students would benefit from new/updated documentation to support the implementation of these activities and to provide evidence of practice.

Areas of Good Practice

- Appropriately qualified and experienced personnel
- Student Support Practice
- Faculty/Student ratios
- Student Resources

Areas for Improvement

- Information provision about student supports
- Procedures for obtaining information about additional support needs
- Information about mechanisms for providing reasonable accommodation

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 provided indicated that the institution would benefit from new/updated documentation:
- To support equality and diversity practice
- To ensure that all relevant policies and procedures are legislatively compliant and promote equality

During discussions and in the documentation provided for review representatives outlined and described:
- How students, faculty and other stakeholders have been made aware of the policy and procedures
- How faculty are provided with up-to-date equality and diversity information and training
- How course delivery accommodates the cultural backgrounds and different learning styles of students

The evidence provided indicated that the institution and students would benefit from new/updated documentation to support the implementation of these activities and to provide evidence of practice.

The evidence provided indicated that the institution, students, faculty, and other stakeholders would benefit from new/updated codes of conduct.

Areas of Good Practice

- Equality and Diversity Policy in place
- Course Delivery

Areas for Improvement

- Equality and Diversity Documentation
- Policy and Procedure Review to ensure legislative compliance
- Raising Awareness of the E&Q Policy
- Code of Conduct for Students & other Stakeholders
- Information and Training Records on E&Q

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

QRP Findings

The evidence provided indicated that:
- Appropriate documentation is in place to record student activities during their placement
- The institution maintains up-to-date records of student activities during their placement

The evidence provided also indicated that the institution, students, and placement sites would benefit from the following:
- An updated MOU/agreement between the institution and their internship/clinical placement sites
- Documented evidence that placement sites have been assessed to ensure suitability as a quality learning environment in accordance with PHECC standards and guidelines for course approval
- Before using a new internship/clinical placement site verification of the completed assessment, endorsed by the institution, has been submitted to PHECC
- Only PHECC approved sites are used for placement
- Selection criteria for internship/clinical placement sites are in place
- Systems are in place for students to raise concerns about their placement
- A fair and transparent system is in place for student placement
- Learning outcomes to be achieved during placement are documented
- A schedule and procedure are in place for monitoring visits to internship/clinical placement sites
- Appropriate documentation is in place to record student activities during their placement

During discussions representatives described how students are supported on their placement by clinical supervisors. The evidence provided indicated that the institution, faculty, and students would benefit from additional trained clinical supervisors.

Areas of Good Practice

- Letter of agreement to provide placement
- Appropriate documentation in place to record student activities during placement
- Records of student placement activities

Areas for Improvement

- MOU/Agreement with Placement Sites
- Placement Site Assessment, including selection criteria
- Systems for students to raise placement concerns
- Student placement
- Monitoring Visits to Placement sites
- Trained Clinical Supervisors

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.	**MNM**

QRP Findings

The evidence provided indicated that the composition of the institution's personnel meets PHECC education and training standards for each course on offer.

During discussions and in the documentation provided for review representatives outlined and described:
- How they recruit appropriately qualified and experienced personnel (staff and contracted) to carry out education and training activities
- The minimum standards for the academic and subject matter experience of faculty
- How personnel involved in the administration and delivery of courses have been made aware of their quality assurance responsibilities

During discussions representatives indicated informal processes and a need to formalise activities. The evidence provided indicated that the institution and students would benefit from new/updated documentation to support the implementation of these activities and to provide evidence of practice.

The evidence provided indicated that institution would benefit from additional administrative, quality management/assurance support. This would ensure that the institution would have the capacity to:
- Carry out all the activities described in the policies and procedures
- Systematically organise, deliver, and monitor the quality of courses and awards
- Ensure full compliance with the QRF

During discussions representatives outlined and described the education and training activities carried out by staff and contracted faculty. The evidence provided indicated that the institution and personnel would benefit from updated job descriptions and terms of employment/engagement to accurately reflect the activities described during discussions.

Areas of Good Practice

- The composition of faculty
- Minimum standards in place for faculty
- Quality assurance activities

Areas for Improvement

- Staff & Faculty Recruitment
- Support to:
    - Carry out all the activities described in the policies and procedures
    - Systematically organise, deliver, and monitor the quality of courses and awards
    - Ensure full compliance with the QRF
- Awareness among all personnel of their quality assurance responsibilities and evidence of practice
- Safeguarding Policy, Procedures & Supporting Documents
- Terms of Employment Engagement, e.g., contracted faculty agreement

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.	**MNM**

QRP Findings

The evidence provided indicated that:
- Upskilling had taken place within 18 months of new Clinical Practice Guidelines (CPG) publication

During discussions and in the documentation provided for review representatives outlined and described:
- How they identify training/upskilling requirements for personnel
- Staff and contracted faculty induction
- How they meet the support and development needs of relevant personnel, including CPG upskilling
- The mechanisms that are in place for faculty to request support for training/upskilling to achieve additional qualifications
- The formal support and supervision and annual appraisal systems that are in place
- Personnel have completed training/upskilling relevant to their role

During discussions representatives indicated that these were informal processes that needed to be formalised. The evidence provided indicated that the institution, staff, and contracted faculty would benefit from new/updated documentation to support the implementation of these activities and to provide evidence of practice and that personnel have completed the relevant training/upskilling.

Areas of Good Practice

- Induction is carried out
- Evidence of Faculty Upskilling

Areas for Improvement

- Training/upskilling Procedures
- Induction Content and Attendance
- Personnel Development Plans
- Formalised Support, Supervision, and Annual Appraisal

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.	**MNM**

QRP Findings

During discussions and in the documentation provided for review representatives outlined and described:

- The systems that are in place for regular and appropriate communication between faculty and management
- How faculty provide feedback during and after their course
- The system to ensure only personnel with valid certification deliver PHECC approved courses
- How the activities of faculty are systematically monitored through observation and the analysis of relevant documentation
- How they deal with poor and/or unsatisfactory faculty performance
- The HR policies and procedures in place to meet its legislative obligations

During discussions representatives indicated informal processes and a need to formalise activities. The evidence provided indicated that the institution, staff, and faculty (including contracted faculty) would benefit from new/updated documentation to support these activities and provide evidence of practice.

Areas of Good Practice

- Communication practice between faculty and management, including feedback
- Faculty Feedback
- System for ensuring only personnel with valid certification deliver PHECC approved courses
- Faculty monitoring
- Dealing with poor and unacceptable faculty performance (practice)

Areas for Improvement

- Documented Communication Systems
- Faculty Course Reports
- Faculty Monitoring
- Procedure for dealing with poor and unacceptable performance of faculty
- HR Policies and Procedures

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

QRP Findings

The evidence provided indicated that:
- The institution maintains up-to-date records of contracted faculty
- Contracted faculty details are submitted to PHECC

During discussions representatives outlined and described the relationship with contracted faculty and the contractual and quality assurance arrangements that are in place. The evidence provided indicated that the institution and contracted faculty would benefit from a documented collaborative provision policy and associated procedures that:
- Clearly states that the Institution retains full control and responsibility for academic decisions and quality assurance
- Clearly states that the Institution is responsible for activities carried out in its name
- Outlines the due diligence of any individual or organisation contracted to deliver any activity associated with PHECC approved courses
- Clearly details the responsibilities of each party for the quality assurance of PHECC approved courses

The evidence indicated that the institution would benefit from the development new/updated documentation to support the monitoring of courses being delivered by contracted faculty. It would also benefit from maintaining up to date records of these activities.

During discussions representatives indicated that contracted faculty sign an instructor's agreement. This document was made available for review. The evidence provided indicated that the institution and faculty would benefit from written and signed contracts and agreed quality assurance standards between both parties.

The evidence provided indicated that the institution maintains records of contracted faculty and that details were of all contracted faculty were submitted to PHECC.

The evidence provided indicated that the institution would benefit from receiving regular reports of contracted faculty activities, the analysis of these reports and the implementation of any improvement actions identified from the analysis.

Areas of Good Practice

- Faculty records
- Faculty details submitted to PHECC
- Faculty reporting practice

Areas for Improvement

- Collaborative provision policy and associated procedures
- Procedures for monitoring contracted faculty
- Faculty contracts and agreements
- Faculty reporting procedures

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.	**SM**

QRP Findings

The evidence provided indicated that the institution would benefit from new/updated documentation to:
- Support course development, delivery, and review
- Ensure that any updates or changes in PHECC education and training standards, clinical practice guidelines or examinations standards are implemented.

The evidence provided indicated that course development:
- Reflects PHECC requirements
- Demonstrates an appropriate balance between theory and practice
- Provides a balance between presentations, group work, skills demonstrations, practical work, and blended learning, as appropriate
- Promotes a commitment to self-directed learning, as appropriate

The evidence provided also indicated that the development of course material included:
- Clearly outlined aims and objectives, detailing competencies to be achieved by students
- Detailed lesson plans that include all information as set out in PHECC guidelines for theoretical and practical lessons
- Detailed timetable, time on each topic, teaching method, and tutor/instructor name etc

During discussions representatives described a comprehensive system for the systematic approval of courses which clearly indicated a separation between those who design/develop a course and those who approve it. The evidence provided indicated that the institution would benefit from new/updated documentation to support these activities and provide evidence of good practice in academic governance.

Areas of Good Practice

- Course Development Practice
- Course Material
- Course Approval Practice

Areas for Improvement

- Course development, delivery, and review documentation
- Procedure for course amendment
- Course approval documentation

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 provided indicated:
- That courses are delivered in keeping with PHECC education and training standards and clinical practice guidelines
- That all courses are delivered by appropriately qualified personnel
- That relevant instructor/tutor details are recorded on course documentation
- Records of student attendance
- Records of student activities maintained and available for review

During discussions and in the documentation provided for review representatives outlined and described:
- Student induction
- How contracted faculty are monitored
- The remediation that is available to students

The evidence provided indicated that the institution, contracted faculty, and students would benefit from new/updated documentation to support these activities and evidence of practice

Areas of Good Practice

- Course Delivery
- Appropriately Qualified Faculty
- Course Documentation
- Attendance Records
- Student Support
- Student Records

Areas for Improvement

- Student Induction Records
- Faculty monitoring documentation
- Student remediation documentation

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

During discussions and in the documentation provided for review representatives outlined and described:
- The admissions policy/entry criteria for each course
- The information that is available to prospective students to make an informed choice about course participation
- How students are provided with information about Recognition of Prior Learning (RPL)
- The procedures for RPL

The evidence indicated that the institution and students would benefit from new/updated documentation and information to support these activities and provide evidence of practice.

Areas of Good Practice

- Documented admissions policy and/or course entry criteria
- Prospective Student Information

Areas for Improvement

- Admissions/entry criteria information
- Recognition of Prior Learning Procedures & Information

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

QRP Findings

The evidence provided indicated:
- Procedures are in place for course review
- Students have opportunities to provide feedback during and after their course

During discussions and in the documentation provided for review representatives outlined and described:
- The opportunities faculty have to provide feedback during and after a course
- How course evaluation involves key stakeholders
- How areas for improvement are identified, actions agreed and implemented

The evidence provided indicated that the institution would benefit from new/updated documentation to support these activities and provide evidence of practice

The evidence provided indicated that during self-assessment areas for improvement have been identified. It also indicated that not all areas for improvement were included in the Quality Improvement Plan (QIP).

Areas of Good Practice

- Students and faculty have an opportunity to provide feedback during and after their course
- Faculty contribute to course evaluation
- The institution has carried out a self-assessment
- The institution has a documented quality improvement plan

Areas for Improvement

- Course review documentation
- Faculty Feedback
- Course evaluation by all key stakeholders
- 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 provided indicated that the institution, faculty, and students would benefit from a new/updated assessment policy, procedures and supporting documents.

The evidence provided also indicated that:
- Appropriate assessment methodology is used on all courses
- The assessment schedule has been approved by PHECC
- It is clearly stated when PHECC assessment material is used
- Students have access to the information (e.g., course material) necessary for them to participate in assessment
- Students are authorised to apply for NQEMT examination at the appropriate time
- A student appeals policy and procedures are in place

During discussions and in the documentation provided for review representatives outlined and described:
- How they adapt assessment methodologies to cater for students with additional support needs
- The responsibility for assessment material and how it is securely stored
- Responsibility for the PHECC certification system
- The internal verification, external authentication, and results approval processes

The evidence provided indicated that the institution would benefit from new/updated documentation to support these activities and provide evidence of practice.

Areas of Good Practice

- Assessment Methodology
- Assessment Schedule
- Student Assessment Information
- Student Assessment Support
- Student Appeals

Areas for Improvement

- Assessment policy and procedures, including a procedure for adapting assessment methodology
- Job description relevant to management of the PHECC certification system
- Internal verification, external authentication and results approval policies and procedures and evidence of practice

7. Conclusion and Outcome

Rating	**2.14**
Level	**Moderately Met (MDM)** – Evidence of a moderate degree of organisation-wide compliance
Conclusion	The Quality Review Panel (QRP) had the opportunity to review a range of documentation provided for a desktop review and when requested during discussions. The review was carried out in-person and provided the QRP with the opportunity to discuss a range of topics with the institution's representatives. The QRP also had the opportunity to review evidence stored on the ICT systems. During discussions representatives demonstrated a significant understanding of their responsibilities for the quality assurance of PHECC approved courses. The evidence indicated and highlighted good quality management/assurance practice in the institution, particularly in the areas of course design and approval. The evidence also indicated that new and updates to existing documentation and practices would ensure that the quality assurance system remains effective, fit for purpose, and reflective of current practice. The updates would also ensure that the institution continues to meet PHECC education and training standards and quality review framework requirements. The QRP concludes from the evidence provided that the implementation of the improvement actions identified during self-assessment and external quality review will lead to an enhanced learning experience for students.