

Quality Review Framework
Composite Report
EMS & Associates

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1. Institution Details

Name	EMS & Associates Ltd
Address	Unit 1, Block 2 Drogheda Industrial Park, Donore Rd, Drogheda, Co Louth, A92 THD0
Type of Organisation	Private Company
Profile	Approved Training Institution since 2017
PHECC Courses Delivered	FAR, CFR Community
Higher Education Affiliation	N/A

2. Review Details

Purpose	<ul style="list-style-type: none">To facilitate the enhancement of a successful learning experience for studentsTo foster a culture of Continuous Quality Improvement in InstitutionsTo generate public confidence in the standard of education and training in pre-hospital emergency care
Scope	<ul style="list-style-type: none">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	10/02/2023
Date of Online Review	09/03/2023

3. Report Details

Draft report sent to Institution for feedback	03/04/2023
Final report sent to Institution	23/05/2023
Director Approval	
Date	23/05/2023
Report Compiled by	PHECC Quality Review Panel

4. Review Activities

4.1 Meetings

Opening Meeting	
Organisation	Role
PHECC	Quality Review Panel x 2
PHECC	Observer
EMS & Associates	Managing Director
	Training Manager
	Administration & Quality Assistant
	Operations & Training Director
	FAR Instructor x2
Closing Meeting	
Organisation	Role
PHECC	Quality Review Panel x 2
PHECC	Observer
EMS & Associates	Managing Director
	Training Manager
	Administration & Quality Assistant
	Operations & Training Director
	FAR Instructor x2

4.2 Stakeholder Discussions

Name/Group	Role
Senior Management	Managing Director
	Training Manager
	Operations & Training Director
Faculty	FAR Instructors x 2
Staff	Administration & Quality Assistant

4.3 Document Review

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

<ul style="list-style-type: none"> • Named Faculty Form Responder Courses • Overview & Mission Statement • External Authentication Reports x 3 • Internal Verification Policy • Results Approval Panel Policy & Procedures • Complaints Policy • Directors Complaints Response Form • Types of Child Abuse and How they are Managed • Mandated Persons • Learner Evaluation Forms x 7 (1 course) • Cardiac First Responder Community – Course Details • FAR Course Details for Learners • PHECC Course Booking SOP • FAR Skills Assessment Sheets x 3 courses • CFR-C, Course Evaluation Forms x 1 • Office Procedure – CFR-C Course (complete) • Code of Practice for Instructors • Recruitment & Selection Policy • Tax Clearance Cert • Quality Assurance Policy • Instructor Induction • Health & Safety Policy Statement • Quality Assurance Policy & Procedures • Admissions Policy • Equality & Diversity Policy • Staff Handbook & Operations Manual • Course/Instructor Monitoring Forms x 2 (Blank & Complete) • Internal Training & Development Policy • Learner Needs Accommodation Policy • PHECC Cert Returns 	<ul style="list-style-type: none"> • 2022 Self-Assessment Report • Roles & Responsibilities <ul style="list-style-type: none"> - Operations & Training Director - Managing Director - Course Director - Contracted Trainers - Admin & Quality Assistant - Client Support & Training Manager • Blended Learning Policy • External Authentication Policy • Risk Register • Complaints Form - Learner • Faculty x 5, Training Certificates • Garda Vetting Details • Legal Obligation of Mandated Persons • Administration Policy & Procedures • First Aid Responder Blended Learning – Course Details • Learner Handbook • FAR Faculty Course Reports x 4 courses • FAR Course Secure Exam Statement x 3 • CFR-C, Course Report X 1 • FAR Course Evaluation Forms x 3 courses • Contracted Trainers Agreement x 9 (signed) • Data Protection Policy • Training Briefing Sign-in Sheets • Premises Checklist (Blank) • Premises Checklist – Complete x 4 • Training Course Equipment Checklist • Appeals Process Forms x 3 (Instructor, Director, Learner) • 2019 Equality & Diversity Presentation • Appeals Policy • Insurance Details • FAR Procedure V6 	<ul style="list-style-type: none"> • Organisational Chart 2023 • Staff Support & Development • Course Design, Development & Approval Policy • Internal Verification Report 2021-2022 • 2022 Results Approval Panel Report • Risk Management Policy • PHECC Statutory Declaration • Instructor Complaints Response Form • Safeguarding Policy • Reporting Mandated Concerns • Instructor Course Evaluation Forms x 4 courses • First Aid Responder – Course Details • Office Procedure – Compiling a FAR Training Pack • Office Procedure – FAR Course x 3 (Complete) • CFR-C, Course Assessment Sheets x 5 (1 course) • CFR-C, Instructor Evaluation Form x 1 • CVs x 3 • PHECC FAR & CFR-C Courses <ul style="list-style-type: none"> - July 2020 – June 2021 - July 2021 – May 2022 • Auditors Statement • Quality Team – Role & Responsibilities • Course Sign-In Sheet (Blank) • Quality Assurance – A Team Effort • Training Room & Equipment Sanitation Record x 2 (Blank & Complete) • Course Registration Form • Diversity Management Policy • Assessment & Awards Procedure • Quarterly Instructor Meeting Notes x 4 • RPL Policy • Quality Team Meeting x 5 • Learning Management System
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4.4 Observation of Practice, Facilities and Resources

Practice – e.g., Course delivery, administration, clinical placement (add rows as required)	
Location	Comments
N/A	Virtual Review
Facilities (add rows as required)	
Location	Comments
N/A	Virtual Review
Resources – e.g., equipment, ICT, course material, etc (add rows as required)	
Location	Comments
Online	<ul style="list-style-type: none"> • Learning management system reviewed – being developed at the time of review. • Provides for up-to-date reporting against relevant key performance indicators (KPI) • Full implementation provides support for a wide range of administrative activities

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		
<p>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.</p> <p>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.</p>		
Areas of Good Practice		
<ul style="list-style-type: none"> • 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 • Delegated authority and responsibilities for education and training governance • Systems in place for course approval/amendment • Self-assessment carried out • Risk Register in place 		
Areas for Improvement		
<ul style="list-style-type: none"> • Organisational Chart – To reflect education and training governance • Procedures to ensure that 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.	SM
QRP Findings		
<p>The evidence provided indicated that the Institution:</p> <ul style="list-style-type: none"> - 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 also indicated that the institution would benefit from:

- Updating all the tasks associated with student entry to exit outlined during discussions
- Capturing and maintaining all student records
- Updating and maintaining 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 documentation to ensure obligations under the National Vetting Bureau (Children and Vulnerable Persons) Act 2012 are being fully met
- Updating the complaints policy to reflect current practice and implementing systems to ensure that all stakeholders are made aware of it

Areas of Good Practice

- Financial standing with relevant stakeholders
- Systems for maintaining student and faculty records
- Resources to support quality assurance activities
- Complaints Policy

Areas for Improvement

- Documented tasks from 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
- Raising awareness of the complaints policy and procedures
- Safeguarding policy and procedures

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 and indicated that the Operations and Training Director has overall responsibility for the quality assurance of PHECC approved course, with decision-making and approval responsibilities delegated as appropriate. The evidence indicated that the institution would benefit from updating the documentation to support these activities.

During discussions representatives outlined and described their responsibilities for the quality assurance of PHECC approved courses. They also outlined activities to ensure all those involved in education and training have been made aware of their quality assurance responsibilities, e.g., induction etc. 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. During the review the institution demonstrated a new IT being developed for maintaining education and training records and generating reports against relevant performance measures.

This system was found to be robust and supports the institution in continuing to embed a culture of continuous quality improvement.

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

- Overall responsibility and delegated authority clearly allocated
- Awareness among personnel of their quality assurance responsibilities
- Systematic collection, analysis and use of student, faculty, and other stakeholder feedback
- Systematic 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
- Quality assurance responsibility awareness
- Performance indicators and links to education and training activities
- 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.

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
- Procedures for obtaining and providing information to external stakeholder, including PHECC
- Public awareness of third-party relationships, the quality assurance system, and external reviews

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		
<p>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. The evidence provided indicated that:</p> <ul style="list-style-type: none"> - Appropriate training premises are selected and used to deliver PHECC approved courses - Selection criterion and a checklist are in place and being used for external premises - Appropriate equipment/resources are available and have been used for each course <p>During discussions representatives described the systems that are in place to regularly maintain and update equipment and for ensuring that all resources are fit for purpose and accessible. The evidence indicated that the institution would benefit from additional/updated documentation to support these activities.</p>		
Areas of Good Practice		
<ul style="list-style-type: none"> • Safety, Health, and Welfare practice • Premises selection • Equipment and resource availability • Equipment maintenance • Fit for purpose resources and accessibility 		
Areas for Improvement		
<ul style="list-style-type: none"> • Safety, Health, and Welfare supporting documentation • Equipment/resources supporting documents 		

Quality Area	2.2 Student Support	Level
Quality Standard	A positive, encouraging, safe, supportive, and challenging environment is provided for students.	MDM
QRP Findings		
<p>The evidence indicated that the institution has in place and engages appropriately qualified and experienced personnel to support students. The evidence also indicated that the institution and students would benefit from additional personnel to support the activities described in the documentation and during discussions</p> <p>The evidence provided indicated:</p> <ul style="list-style-type: none"> - 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 <p>During discussions and in the documentation provided for review representatives outlined and described:</p> <ul style="list-style-type: none"> - 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. <p>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.</p>		
Areas of Good Practice		
<ul style="list-style-type: none"> • Appropriately qualified and experienced personnel • Student support practice • Faculty/student ratios • Student resources 		
Areas for Improvement		
<ul style="list-style-type: none"> • Student support personnel • 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.	MDM
QRP Findings		
<p>The evidence indicated that the institution has an equality and diversity policy and procedures in place and that the practice reflects what the institution says it will do.</p> <p>The evidence provided also indicated that the institution would benefit from new/updated documentation:</p> <ul style="list-style-type: none"> - to ensure that all relevant policies and procedures are legislatively compliant and promote equality <p>During discussions and in the documentation provided for review representatives outlined and described:</p> <ul style="list-style-type: none"> - 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 <p>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 additional evidence of practice.</p> <p>The evidence provided indicated that the institution, students, faculty, and other stakeholders would benefit from new/updated codes of conduct.</p>		
Areas of Good Practice		
<ul style="list-style-type: none"> • Equality and Diversity Policy and procedures • Equality and diversity practice • Course delivery 		
Areas for Improvement		
<ul style="list-style-type: none"> • Raising awareness of the policy and procedures • Information and training records • Codes of Conduct 		

Quality Area	2.4 Internship/Clinical Placement	Level
Quality Standard	<i>INQEMT courses only:</i> 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		
<p>The evidence indicated that:</p> <ul style="list-style-type: none"> - The composition of the institution’s personnel meets PHECC education and training standards for each course on offer - All personnel involved in administering and delivering PHECC-approved courses have been made aware of their quality assurance responsibilities and are carrying them out consistently - All personnel have been issued with a written statement of terms of employment/engagement <p>During discussions and in the documentation provided for review representatives outlined and described:</p> <ul style="list-style-type: none"> - 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 <p>The evidence provided indicated that the institution would benefit from new/updated documentation to support the activities described during discussions</p> <p>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:</p> <ul style="list-style-type: none"> - 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 <p>During discussions representatives provided a detailed description of their role and responsibilities. The evidence indicated that the institution and all personnel would benefit from a systematic approach to reviewing and updating job descriptions</p>		
Areas of Good Practice		
<ul style="list-style-type: none"> • The composition of faculty • Minimum standards in place for faculty • Quality assurance responsibility and activities • Terms of employment/engagement 		
Areas for Improvement		
<ul style="list-style-type: none"> • Support to: <ul style="list-style-type: none"> - 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 • Job descriptions 		

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.	MDM
QRP Findings		
<p>During discussions and in the documentation provided for review representatives outlined and described:</p> <ul style="list-style-type: none"> - 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 <p>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.</p> <p>The evidence indicated that the institution maintains records of training/upskilling that personnel have completed relevant to their role. It also indicated that the institution would benefit from ensuring that they maintain records of all the training/upskilling activities that all personnel have undertaken.</p>		
Areas of Good Practice		
<ul style="list-style-type: none"> • Induction is carried out • Evidence of faculty training/upskilling 		
Areas for Improvement		
<ul style="list-style-type: none"> • 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		
<p>During discussions and in the documentation provided for review representatives outlined and described:</p> <ul style="list-style-type: none"> - 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 in place to ensure only faculty with valid certification deliver PHECC approved courses - How the activities of faculty are systematically monitored through observation and the analysis of relevant documentation 		

<ul style="list-style-type: none"> - How they deal with poor and unacceptable faculty performance - The HR policies and procedures in place to meet its legislative obligations <p>The evidence provided indicated that the institution, staff, and faculty (including contracted faculty) would benefit from new/updated documentation to support these activities</p>
Areas of Good Practice
<ul style="list-style-type: none"> • Communication practice between faculty and management • Faculty course reports • System for ensuring only personnel with valid certification deliver PHECC approved courses • Faculty monitoring
Areas for Improvement
<ul style="list-style-type: none"> • Documented communication systems • Updated faculty course report to reflect new developments and performance measures • Faculty monitoring documentation • 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.	MDM
QRP Findings		
<p>The evidence indicated that:</p> <ul style="list-style-type: none"> - There is a written agreement in place with contracted faculty - Details of contracted faculty are submitted to PHECC <p>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:</p> <ul style="list-style-type: none"> - 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 <p>During discussions and in the documentation provided for review representatives outlined and described:</p> <ul style="list-style-type: none"> - The monitoring procedures in place for courses being delivered by contracted faculty - The agreed quality assurance with contracted faculty - Faculty reports, the analysis and how any actions arising are managed <p>The evidence indicated the institution would benefit from new/updated documentation to support these activities</p>		

Areas of Good Practice
<ul style="list-style-type: none"> • Faculty records • Faculty agreement in place • Faculty monitoring • Faculty details submitted to PHECC • Faculty reporting practice
Areas for Improvement
<ul style="list-style-type: none"> • Collaborative provision policy and associated procedures • Procedures for monitoring contracted faculty • Faculty agreement updates

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.	MDM
QRP Findings		
<p>The evidence provided indicated that course development:</p> <ul style="list-style-type: none"> - 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 <p>The evidence provided also indicated that the development of course material included:</p> <ul style="list-style-type: none"> - 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. <p>The evidence provided indicated that the institution would benefit from new/updated documentation to:</p> <ul style="list-style-type: none"> - Support course development, delivery, and review - Ensure that any updates or changes in PHECC education and training standards, clinical practice guidelines or examination standards are implemented. - Support a systematic approach is taken to course approval 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Course development practice • Course material development • Course approval practice 		
Areas for Improvement		
<ul style="list-style-type: none"> • Course development, delivery, and review documentation • Course approval documentation, i.e., procedures and evidence of practice 		

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		
<p>The evidence provided indicated that:</p> <ul style="list-style-type: none"> - Courses are delivered in keeping with PHECC education and training standards and clinical practice guidelines - Student induction takes place - Courses are delivered by appropriately qualified personnel - Records of student attendance are maintained <p>During discussions and in the documentation provided for review representatives outlined and described:</p> <ul style="list-style-type: none"> - Faculty monitoring - Student remediation <p>The evidence provided indicated that the institution, contracted faculty, and students would benefit from new/updated documentation to support these activities and provide evidence of practice</p>		
Areas of Good Practice		
<ul style="list-style-type: none"> • Course delivery • Student induction • Appropriately qualified faculty • Course documentation • Attendance records 		
Areas for Improvement		
<ul style="list-style-type: none"> • 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		
<p>During discussions and in the documentation provided for review representatives outlined and described:</p> <ul style="list-style-type: none"> - The admissions policy/entry criteria for each course - The information that is available to prospective students to make an informed choice about course participation <p>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</p> <p>During discussions representatives indicated that recognition of prior learning is not applicable. The evidence indicated that the institution and students would benefit from updated information on this.</p>		

Areas of Good Practice
<ul style="list-style-type: none"> • Documented admissions policy and/or course entry criteria • Prospective student information
Areas for Improvement
<ul style="list-style-type: none"> • Admissions policy and procedures • Course entry criteria information • Recognition of prior learning 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		
<p>The evidence provided indicated:</p> <ul style="list-style-type: none"> - Students have opportunities to provide feedback during and after their course - Faculty have opportunities to provide feedback during and after the course - Course evaluations are documented by faculty <p>During discussions and in the documentation provided for review representatives outlined and described:</p> <ul style="list-style-type: none"> - Course review - Course evaluation by key stakeholders, including clients <p>The evidence provided indicated that the institution would benefit from new/updated documentation to support these activities and provide evidence of practice.</p> <p>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).</p>		
Areas of Good Practice		
<ul style="list-style-type: none"> • 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 		
Areas for Improvement		
<ul style="list-style-type: none"> • Course review documentation • Course evaluation by all key stakeholders • Quality improvement planning and Implementation 		

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.	SM

QRP Findings

The evidence provided indicated that:

- Appropriate assessment methodology is used on all courses
- 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 receive feedback on their assessment/results
- Responsibility for assessment related material is designated
- Assessment material is securely stored
- Internal Verification (IV) takes place
- External Authentication (EA) takes place
- Results approval takes 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
- Responsibility for the PHECC certification system
- The internal verification, external authentication, and results approval processes
- Student appeals

The evidence provided indicated that the institution, faculty, and students would benefit from a new/updated assessment policy, procedures and supporting documents, including IV, EA, results approval and student appeals

Areas of Good Practice

- Assessment methodology
- Student assessment information and feedback
- Student assessment information and support
- Assessment material security
- Internal Verification
- External Authentication
- Results Approval

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
- Student appeals

7. Conclusion and Outcome

Rating	2.47
Level	MDM
Conclusion	<p>During discussions representatives demonstrated a significant understanding of their responsibilities for the quality assurance of PHECC approved courses.</p> <p>The evidence provided indicated and highlighted a significant amount of good quality management/assurance practice across all activities associated with education and training, particularly in the areas of internal verification, external authentication, and results approval.</p> <p>The evidence provided during discussions and in the documentation also clearly indicated the institution's commitment to quality assurance and robust continuous quality improvement across all activities associated with education and training.</p> <p>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, Quality Review Framework requirements and the high standards that they have set for themselves.</p> <p>The Quality Review Panel concludes from the evidence provided, that the implementation of the improvement actions identified during self-assessment and external quality review will ensure that the institution maintains and enhances a high-quality learning environment for all stakeholders.</p>



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