

Quality Review Framework

Composite Report

Dublin Fire Brigade RCSI

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1. Institution Details

Name	Dublin Fire Brigade/RCSI
Address	Dublin Fire Brigade Training Centre Malahide Road, Marino, Dublin 3, D03 WR02
Type of Organisation	Statutory Body
Profile	Recognised Institution since 2007
PHECC Courses Delivered	CFR-C, CFR-C Instructor CFR Advanced, CFR Advanced Instructor EFR, EFR Instructor FAR, FAR Instructor EMT Paramedic
Higher Education Affiliation	Royal College of Surgeons Ireland

2. Review Details

Purpose	<ul style="list-style-type: none"> 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	<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 of the Desktop Review	30/08/2003
Date of Onsite Review	12/09/2023

3. Report Details

Draft report sent to Institution for feedback	20/11/2023
Final report sent to Institution	11/01/2024
Director Approval Date	 09/01/2024
Report Compiled by	PHECC Quality Review Panel

4. Review Activities

4.1 Meetings

Opening Meeting	
Organisation	Role
PHECC	QRF Panel x 3
PHECC	Observer (Accreditation Manager)
DFB RCSI	Asst CFO
DFB RCSI	Partnership Board Member x 2
Closing Meeting	
Organisation	Role
PHECC	QRF Panel x 3
DFB RCSI	Partnership Board Member x 2

4.2 Stakeholder Discussions

Title/Group	Role
DFB RCSI	Partnership Board Member x 2

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"> Partnership MOU / Policy Role Descriptors EA Policy / SAR/ QIP IV Policy and procedure Training Administration policy Governance Policy Appeals Policy Complaints Policy Induction process & Policy QA Policy IV ACTIVITY / report sample 	<ul style="list-style-type: none"> Student portfolio sample IV policy Sample monitoring forms Course development policy and discussion samples Moodle documentation Faculty Handbook; Instructor handbook Internship site handbook H&S Policy Learning Environment Policy Learner Handbook 	<ul style="list-style-type: none"> Learner Accommodation policy E&D Policy Induction evidence Course timetables Sample lesson plans Course documentation Signed faculty paperwork Sample Instructor paperwork Information Management Policy Sample submitted paperwork
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4.4 Observation of Practice, Facilities and Resources

Practice – e.g., Course delivery, administration, clinical placement	
Location	Comments
Dublin Fire Brigade Training Centre	Location acceptable for the Institution’s activities.
Facilities (add rows as required)	
Location	Comments
Dublin Fire Brigade Training Centre	Facilities are acceptable for the Institution’s activities.
Resources – e.g., equipment, ICT, course material, etc	
Location	Comments
Dublin Fire Brigade Training Centre	Resources are acceptable for the Institution’s 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.	SM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has governance systems (organisation and academic) that are appropriate to their needs, size and complexity. The evidence provided demonstrated good practice and a clear separation between those who develop/update courses and those who approve at various stages in the process • Systems are in place to ensure that when required relevant subgroups/individuals are in place to provide objective oversight • Maintains records of course approval/amendment, results approval, and self-assessment • Has documented role description and terms of reference for all those carrying out oversight • Has documented role descriptions for all those involved in education and training activities • Has comprehensive systems and documentation in place to support risk management activities, including risks associated education and training 		
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 • Terms of reference and role descriptions • Records maintained of course approval/amendment, results approval and self-assessment • Risk Management 		
Areas for Improvement		
<ul style="list-style-type: none"> • Organisational organogram needs to reflect all elements of current activity related to the delivery of education • Ensure role descriptors accurately reflect all activities and roles 		
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 • Has documented all tasks associated with education and training (student entry to exit) 		

<ul style="list-style-type: none"> • Maintains comprehensive up to date student and faculty records • Has data protection systems, policies, procedures and supporting documents to ensure compliance with data protection obligations • Has a complaints policy and procedures in place and ensures that all stakeholders are made aware of it 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Provides PHECC education and training standards • Financial standing with relevant stakeholders • Insurance • Documented tasks • Systems for maintaining student and faculty records • Documented tasks that support education and training activities • Data protection systems • Complaints policy 		
Areas for Improvement		
<ul style="list-style-type: none"> • Ensure all activities and stages of the student journey are recorded • Ensure records and monitoring reports are recorded for all faculty including visiting experts • Evidence of working group meetings 		
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.	SM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has quality assurance systems and documentation in place that clearly states the institution’s commitment to systematic monitoring, annual self-assessment, and quality improvement • Maintains comprehensive records of quality assurance activities • Clearly states who has overall responsibility for quality assurance • Ensures that all those involved in education and training activities have been made aware of their responsibilities for the quality assurance • Maintains up-to-date evidence of: <ul style="list-style-type: none"> - The systematic collection, analysis and use of student, faculty and other stakeholder feedback and student participation, success, and progression - The systematic review of learning resources and locations - Quality improvement planning and implementation <p>The evidence provided also indicated that the institution would benefit from:</p> <ul style="list-style-type: none"> • Enhancing the processes that are in place for the systematic review of policies, procedures and supporting documents • Further development of appropriate performance measures (KPIs) for monitoring all aspects of education and training • Clearly documenting how all monitoring is carried out, by whom and what indicators it should be seeking 		

Areas of Good Practice		
<ul style="list-style-type: none"> • Quality assurance systems • Overall responsibility and delegated authority for quality assurance 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 • Systematic review of policies, procedures and supporting documents • Documented evidence of up-to-date quality improvement planning and implementation 		
Areas for Improvement		
<ul style="list-style-type: none"> • Formalisation of processes • Performance measures (KPIs) and links to education and training activities 		
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.	SM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Maintains up-to-date records of internal reporting at all levels in the institution • Has clearly allocated responsibility for all tasks (from student entry to exit) associated with education and training and linked those tasks to relevant performance measures (KPIs) • Has systems in place for providing information to PHECC as requested • Provides prospective students with sufficient information to make an informed choice about course participation • Provides other stakeholders (internship sites, employers, etc.) with information and obtains information from them as required <p>The evidence provided also indicated that the institution would benefit from:</p> <ul style="list-style-type: none"> • Further development of appropriate performance measures (KPIs) linked to all aspects of education and training • Further develop the links to quality assurance systems and external reviews, and ensure that they are signposted to the public and to relevant stakeholders 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Reporting throughout the institution • Task responsibility and links to performance measures • Student information about courses • Responsibility for reporting to PHECC allocated • The provision of quality assurance information 		
Areas for Improvement		
<ul style="list-style-type: none"> • Development of information for the public 		

- Performance measures (KPIs) and links to education and training activities

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		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has a policy, associated procedures and supporting documents to demonstrate compliance with its safety, health, and welfare at work legislative obligations • 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 • Has comprehensive systems in place to regularly maintain and update equipment, and evidence that this is done • Ensures that all resources are fit for purpose and accessible 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Safety, health, and welfare practice • Premises selection • Equipment and resource availability • Organisational process relating to equipment maintenance • Fit for purpose resources and accessibility to and of resources 		
Areas for Improvement		
<ul style="list-style-type: none"> • Ensure that a robust recording system is continued and documented for the maintenance and replacement of equipment as required. 		
Quality Area	2.2 Student Support	Level
Quality Standard	A positive, encouraging, safe, supportive and challenging environment is provided for students.	FM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has adequate numbers of appropriately qualified and experienced faculty, administrative, technical, and clinical staff to support students • Ensures that students are made aware of the supports available to them before, during and after their course • Maintains appropriate tutor/instructor-to-student ratios, in keeping with PHECC's course approval criteria • Provides opportunities for students to meet individually and collectively with faculty and/or management 		

<ul style="list-style-type: none"> • Obtains information from potential and existing students of any additional support needs they may have • Has mechanisms in place to provide reasonable accommodation for students with additional support needs • Has sufficient up-to-date resources (appropriate to the level of the course) for students in a variety of formats 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Appropriately qualified and experienced personnel to support students • Student support information • Faculty/student ratios • Student access to management and faculty • Student support practice • Student Resources 		
Areas for Improvement		
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.	SM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has an equality and diversity policy and procedures in place • That all relevant policies and procedures promote equality and diversity • Ensures that students, faculty, and other stakeholders are made aware of the policy and procedures • Has codes of conduct for staff, faculty, and other stakeholders • Provides faculty with up-to-date information and training on equality and diversity • Ensures that course delivery accommodates the cultural backgrounds and different learning styles of students 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Equality and diversity policy and procedures, practice and awareness • Codes of conduct • Equality and diversity information and training • Course delivery 		
Areas for Improvement		
<ul style="list-style-type: none"> • Develop systems to capture data relating to the learning supports offered and adaptations made to assessments when utilised within the delivery of education 		
Quality Area	2.4 Internship/Clinical Placement	Level

Quality Standard	<i>NQEMT courses only:</i> Internship/Clinical Placement sites are appropriate to course content and the learning outcomes to be achieved	FM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has a documented MOU/agreement in place between the institution and internship/clinical placement site(s) • Outlines the commitment to ongoing monitoring, review, and support of a quality learning environment to ensure students can maximise their learning experience • Only utilises PHECC-approved internship sites for clinical and internship placements 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Documented selection criteria for internship/clinical placement sites • Students are provided with appropriate learning environments to support the development and achievement of their competencies • Fair and transparent systems in place for student placement • Schedule and procedure in place for monitoring visits to internship/clinical placement sites • Appropriate documentation is in place to record student activities during their internship 		
Areas for Improvement		

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.	FM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has a robust systematic approach to recruiting appropriately qualified and experienced personnel to carry out education and training activities • Has a minimum standard in place for the academic and subject matter experience of: <ul style="list-style-type: none"> - Faculty (facilitators, tutors, assistant tutors, instructors, etc) - Visiting subject experts - Internship/clinical placement mentors and preceptors (clinical supervisors) • Ensures that the composition of the institution's personnel meets PHECC education and training standards for each course on offer • Has made all personnel involved in administering and delivering PHECC-approved courses aware of their quality assurance responsibilities and are carrying them out consistently • All personnel have been issued with a job description and a statement of terms of employment/engagement • Carries out the activities described in its policies and procedures 		

<ul style="list-style-type: none"> • Maintains PHECC requirements for course approval • Systematically organises, delivers, and monitors the quality of courses and awards 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Recruitment • Minimum standards in place for faculty and other personnel • Quality assurance responsibility and activities • Job descriptions and terms of employment/engagement 		
Areas for Improvement		
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		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has systems to identify training/upskilling requirements for personnel • Carries out comprehensive induction with all personnel • Has a training and development plan/programme which details how the institution meets the support and development needs of relevant personnel • Maintains records of personnel upskilling • Has mechanisms in place for faculty to request support for training/upskilling and to achieve additional qualifications • Has a formalised support and supervision and annual appraisal system in place 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Upskilling identification systems • Comprehensive induction • Training and development plans • Records of faculty training/upskilling • Support and supervision, annual appraisal 		
Areas for Improvement		
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.	SM
QRP Findings		
<p>The evidence provided indicated that the institution:</p>		

<ul style="list-style-type: none"> • Has systems in place for regular and appropriate communication between faculty and management • Provides opportunities for faculty feedback during and after their course • Has a system in place to ensure only faculty with valid certification deliver PHECC approved courses • Systematically monitors the activities of faculty and visiting subject experts through observation and the analysis of relevant documentation • Has systems in place to deal with poor and unacceptable faculty performance • Has appropriate HR policies and procedures in place
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 • HR policies and procedures
Areas for Improvement
<ul style="list-style-type: none"> • Develop documented and consistent approach to monitoring visiting faculty relating to the delivery of course material and syllabus.

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		
<ul style="list-style-type: none"> • N/A 		
Areas of Good Practice		
<ul style="list-style-type: none"> • N/A 		
Areas for Improvement		
<ul style="list-style-type: none"> • 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.	SM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has a course development, delivery, and review policy 		

<ul style="list-style-type: none"> • Systems in place for course development/amendment to reflect any updates or changes in PHECC education and training standards, clinical practice guidelines or examination standards • Has a systematic approach to course approval <p>The evidence provided also 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.
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"> • Ensure that organisational charts and / or organograms are clear in relation to sub groups and roles relating to course development and approval.

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 • Relevant instructor/tutor details are recorded on course documentation • Records of student attendance are maintained • Structured one-to-one time (remediation, mentoring) available for students, and appropriate to their needs • A documented record of student activities (from the student) is maintained and available for inspection by PHECC and relevant stakeholders (e.g., Learning Portfolio) 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Course delivery 		

<ul style="list-style-type: none"> • Student induction • Appropriately qualified faculty • Records of attendance • Remediation, mentoring • Student learning portfolios
Areas for Improvement
<ul style="list-style-type: none"> • Develop a robust process to record monitoring of delivery by faculty and visiting tutors

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.	FM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has an admissions policy and procedures and/or clear entry criteria for each course on offer • Prospective students are provided with detailed course information 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Documented admissions policy and/or course entry criteria • Course information 		
Areas for Improvement		
Quality Area	4.4 Course Review	Level
Quality Standard	Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	FM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> • Has systems in place for course review • Provides students and faculty with the opportunity to provide feedback during and after their course • Ensures that course evaluation involves key stakeholders, including mentors, as appropriate • Ensures that the tutor/instructor or course director participates in course evaluation • Identifies and implements areas for improvement as outlined in the course improvement plan and/or QIP 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Course review and evaluation • Student and faculty feedback opportunities 		

<ul style="list-style-type: none"> Quality improvement activities 		
Areas for Improvement		
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.	FM
QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> Has an assessment policy and procedures Uses appropriate assessment methodology on all courses Clearly states when PHECC assessment material is used Ensures that students have access to the information (e.g., course material) necessary for them to participate in assessment Ensures students receive feedback on their assessment/results Adapts assessment methodologies to cater for students with additional support needs, if required Has designated responsibility for assessment related material Securely stores assessment material Carries out and maintains records of results approval Has systems in place for student appeals <p>The evidence provided indicated that the institution would benefit from additional/updated documentation to support and enhance</p> <ul style="list-style-type: none"> Internal verification External authentication 		
Areas of Good Practice		
<ul style="list-style-type: none"> Assessment policy Assessment methodology Student assessment information and feedback Student assessment information & support Assessment material security Results Approval Student appeals 		
Areas for Improvement		
<p>The following may be of benefit to the institution:</p> <ul style="list-style-type: none"> Develop and record activity relating to Internal Verification processes Develop External Authentication processes in line with SAR /QIP 		

7. Conclusion and Outcome

Rating	3.85
Level	Substantially Met
Conclusion	<p>The evidence submitted, and the information/evidence gained during the site visit, indicated that the institution maintains a robust approach to the delivery of learning relating to PHECC regulated courses.</p> <p>The institution has processes and the appropriate numbers of personnel in place to:</p> <ul style="list-style-type: none"> - Carry out the activities described in its policies and procedures - Maintain PHECC requirements for course approval - Systematically organise, deliver, and monitor the quality of courses and standards - Ensure substantial compliance with the QRF <p>The evidence also indicated that the institution benefits from robust documentation that ensures that the quality assurance systems in place are effective, fit for purpose, reflect current practice, meet PHECC education and training standards, meet quality review framework requirements and are consistent with relevant legislation.</p> <p>The evidence indicated that the institution would benefit from developing further processes relating to external authentication and to further develop a robust approach to the monitoring of delivery and the recording of such activities.</p> <p>The evidence indicated that the institution has appropriate systems in place to ensure compliance with the PHECC quality review framework.</p>



Published by:

**Pre-Hospital Emergency Care Council,
2nd Floor,
Beech House,
Millennium Park,
Naas Co Kildare, W91 TK7N,
Ireland.**

Phone: +353 (0)45 882042

Email: info@phecc.ie