

Quality Review Framework

Composite Report

DX2 Training Solutions Ltd

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1. Institution Details

Name	DX2 Training Solutions
Address	Unit 21 Seatown Business Campus Swords Co Dublin K67DC04
Type of Organisation	Private limited company
Profile	Approved Recognised Institution since 2010
PHECC Courses Delivered	Cardiac First Responder (CFR) Community, CFR Community Instructor, CFR Advanced, CFR Advanced Instructor, CFR & MLO, Epinephrine, CFR & MLO Naloxone, CFR & MLO Salbutamol, CFR & MLO Glucagon, First Aid Response (FAR), FAR Instructor, Emergency First Responder (EFR), Emergency Medical Technician (EMT)
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 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	24/07/2023
Date of Onsite Review	29/08/2023

3. Report Details

Draft report sent to Institution for feedback	29/09/2023
Final report sent to Institution	24/11/2023
Director Approval	
Date	22/11/2023
Report Compiled by	PHECC Quality Review Panel

4. Review Activities

4.1 Meetings

Opening Meeting	
Organisation	Role
PHECC	Quality Review Panel x 2
PHECC	Accreditation Manager, Observer
DX2 Training Solutions	Managing Director
DX2 Training Solutions	Director of Training & Quality Assurance
DX2 Training Solutions	Office Manager
DX2 Training Solutions	Programme Manager
DX2 Training Solutions	PHECC Facilitator
Closing Meeting	
Organisation	Role
PHECC	Quality Review Panel x 2
DX2 Training Solutions	Managing Director
DX2 Training Solutions	Director of Training & Quality Assurance
DX2 Training Solutions	Office Manager
DX2 Training Solutions	Programme Manager
DX2 Training Solutions	PHECC Facilitator
DX2 Training Solutions	Medical Advisor (Online)

4.2 Stakeholder Discussions

Title/Group	Role
DX2 Training Solutions Ltd	As above

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"> • Integrated Microsoft Teams Learning & Training Management System • Grievance & Disciplinary Code & Procedures • Sample of Mating Records- Academic Oversight Committee, Results Approval Panel • Health & Safety Policy & Procedures • QQI Reengagement Report • Learner Journey Process Map • Sample Assessment Records • Sample PHECC Certificate – FAR Course • Sample Faculty Monitoring Form • Sample Student Monitoring Form – EMT Course • Sample of Faculty Meeting Records • Learner Resource Review Calendar • Course Equipment Checklist Sample • Quality Assurance Manual • RPL Application – FAR • External Authentication Dashboard & Reports Sample • Results Approval Report Sample – Video • IT System Access – Tiered Levels 	<ul style="list-style-type: none"> • 2023 Self-Assessment Report • Named Faculty Forms x 3 • QRF Supporting Documents Checklist • Performance & Standards at DX2 Training Solutions • Administrative Checklist • Venue Suitability Dashboard & Sample Reports • Safety Statement • Organisational Chart • Complaints Form – Website Link • Sample Learner/Faculty Feedback Records • Sample Learner Records • Sample Annual Faculty PDRs • Tax Clearance Details • Insurance Details • Sample Asset Management Details • Employee Handbook • PHECC Certificate Activity Reports • EMT Learner Portfolio • EMT Faculty Educators Handbook • Course Feedback Samples • Course Equipment • Course Resources • EMT Course Macro Assessment Blueprint • Authorised Persons List • Course Material 	<ul style="list-style-type: none"> • Job Description & Advertisement • Statement of Employment Terms & Conditions • Use of the Company Network, Email, Voicemail & Internet Policy • Corrective & Preventative Action Dashboard & Sample Reports • Certificate of Incorporation • Learner Handbook • Sample Learner Registration Records • Sample of Faculty Folders, including course delivery reports, faculty meeting minutes, faculty induction record • Sample Quality Improvement Plan/Tasks • KPI Dashboard Sample • Placement Site Report Dashboard • Sample PDR – Video • Sample Learner Induction Material • Internal Verification Dashboard & Report Samples • Formative Assessment Feedback Sample • EMT Student – Exam Application Details
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4.4 Observation of Practice, Facilities and Resources

Practice – e.g., Course delivery, administration, clinical placement	
Location	Comments
Dublin Training Centre and Administrative Offices	The QRP were provided with access to the administrative records for students and faculty. The records were noted to be substantial and provided the QRP with informative details of education and training activities.
Facilities	
Location	Comments
Dublin Training Centre and Administrative Offices	The QRP toured the facilities, which were noted as being suitable for the courses being provided.
Resources – e.g., equipment, ICT, course material, etc.	
Location	Comments
Dublin Training Centre and Administrative Offices	<p>The QRP viewed the IT system that supports all education and training activities. The system was noted to be excellent in mapping and training the learner journey and their experience while on the course.</p> <p>The institution has excellent systems in place for maintaining and managing course equipment and resources. The QRP were provided with a real time example of the application of QR in supporting the systems.</p> <p>Members of the QRP reviewed course material onsite – FAR and EMT courses, which were noted as being appropriate and suitable for the courses on offer.</p>

5. Compliance Rating and Level

The Compliance Ratings (CR) 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 in the documentation and during discussions clearly indicated what constitutes governance (corporate and academic) in the institution. The governance systems were found to be appropriate to the institution's 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.</p> <p>The updates to documentation highlighted during discussions will benefit the institution and fully reflect the good practice and activities described.</p> <p>The evidence provided indicated that the institution has comprehensive systems and documentation in place 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 • Records maintained of course approval/amendment, results approval, and self-assessment • Risk Management 		
Areas for Improvement		
<ul style="list-style-type: none"> • Organisational Chart – To reflect education and training governance • Sub-group terms of reference and individual role/job descriptions 		

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, and is tax compliant • 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) • 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 • Is sufficiently resourced (financial and human) to carry out all its quality assurance activities • Has a complaints policy and procedures in place and ensures that all stakeholders are made aware of it <p>The evidence provided also indicated that the Institution:</p> <ul style="list-style-type: none"> • Has good systems in place to meet their safeguarding obligations based on their activities • Would benefit from updating documentation to enhance these activities 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Good financial standing with relevant stakeholders, and is tax compliant • Systems for maintaining student and faculty records • Documented tasks that support education and training activities • Resources to support quality assurance activities • Data protection systems • Complaints policy 		
Areas for Improvement		
<ul style="list-style-type: none"> • Safeguarding policy, procedures and 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.	SM
QRP Findings		
<p>The evidence provided in the documentation and during discussions 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 that the academic oversight committee 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 • Has appropriate key performance indicators (KPI) in place for monitoring all aspects of education and training • Has clearly documented how monitoring is carried out, by whom and what indicators it should be seeking • 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 		
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 • Key performance indicators (KPI) and links to education and training activities • Systematic collection, analysis and use of student, faculty, and other stakeholder feedback • Systematic review of learning resource and locations • Documented evidence of up-to-date quality improvement planning and implementation 		
Areas for Improvement		
<ul style="list-style-type: none"> • Systematic review of policies, procedures and supporting documents 		

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.	FM
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 key performance measures (KPI) • 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 • Ensures that the public are made aware of any third-party relationships related to PHECC-approved courses and the responsibilities of those involved • Provides information about the institution's quality assurance system and external reviews to the public in an easily accessible format • Provides other stakeholders (internship sites, employers, etc) with information and obtains information from them as required 		
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"> • N/A 		

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.	FM
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 carried out systematically • 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 • Equipment maintenance • Fit for purpose resources and accessibility to and of resources 		
Areas for Improvement		
<ul style="list-style-type: none"> • N/A 		

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 • 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		
<ul style="list-style-type: none"> • N/A 		

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.	FM
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"> • N/A 		

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	FM
QRP Findings		
<p>The evidence provided indicated that the Institution:</p> <ul style="list-style-type: none"> • Has an MOU/agreement in place with internship/clinical placement sites that: <ul style="list-style-type: none"> - Outlines the commitment to ongoing monitoring, review, and support of a quality learning environment to ensure students can maximise their learning experience - Provides details of the responsibilities of both in relation to quality assurance - Details academic liaison and engagement to support practice-based learning • Has assessed and audited all internship/clinical placement sites to ensure their suitability as a quality learning environment in accordance with PHECC standards and guidelines for course approval • Provided verification of the completed assessment/audit to PHECC • Only uses PHECC-approved internship sites for placement • Has documented selection criteria for internship/clinical placement sites • Ensures that the internship/clinical placement site(s) provide students with appropriate learning environments to support the development and achievement of their competencies • Has systems in place for students to raise concerns regarding their placement • Has a fair and transparent system in place for student placement • Has a sufficient mentors and preceptors (clinical supervisor) in place with each internship site • Has documented learning outcomes to be achieved during the internship/clinical placement period • Has a schedule and procedure in place for monitoring visits to internship/clinical placement sites • Has appropriate documentation in place to record student activities during their internship • Ensures that accurate and up-to-date records of student internship/clinical placement activities are maintained by students and made available for internal and external review (Learning Portfolio) 		
Areas of Good Practice		
<ul style="list-style-type: none"> • MOU/Agreements in place • Placed sites assessed and approved by PHECC • Selection criteria for placement sites • Systems for students to raise concerns about placement • Fair and transparent system for student placement • Sufficient quota of mentors and preceptors • Placement learning outcomes • Visits to placement sites by relevant personnel • Records of student placement activities 		
Areas for Improvement		
<ul style="list-style-type: none"> • 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.	SM
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) • Has adequate numbers of personnel in place to: <ul style="list-style-type: none"> - Meet the current and projected demand for its service - 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 awards - Ensure full compliance with the QRF • 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 <p>The evidence provided also indicated that the Institution:</p> <ul style="list-style-type: none"> • Has good systems in place to meet their safeguarding obligations based on their activities • Would benefit from updating documentation to enhance these activities 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Recruitment • Minimum standards in place for faculty and other personnel • Adequate numbers of personnel • Quality assurance responsibility and activities • Job descriptions and terms of employment/engagement 		
Areas for Improvement		
<ul style="list-style-type: none"> • Safeguarding policy, procedures and supporting documents 		

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.	FM
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		
<ul style="list-style-type: none"> • N/A 		

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.	FM
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"> • N/A 		

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.	FM
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 • 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"> • N/A 		

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.	FM
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 • Delivery of learning outcomes by third parties is documented and monitored on a regular basis, including site visits as appropriate • 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 • Student induction • Appropriately qualified faculty • Records of attendance • Third party monitoring • Remediation, mentoring • Student learning portfolios 		
Areas for Improvement		
<ul style="list-style-type: none"> • N/A 		

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 • Provides prospective students appropriate and sufficient course details including information on Recognition of Prior Learning (RPL) if applicable • Ensures that RPL adheres to the guidelines for each individual course, in keeping with PHECC guidelines 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Documented admissions policy and/or course entry criteria • Prospective student information, including RPL 		
Areas for Improvement		
<ul style="list-style-type: none"> • N/A 		

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 • Quality improvement activities 		
Areas for Improvement		
<ul style="list-style-type: none"> • N/A 		

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 • Ensures that students are authorised to apply for NQEMT examination at the appropriate time • Carries out and maintains records of <ul style="list-style-type: none"> - Internal Verification - External Authentication - Results approval - Has systems in place for student appeals 		
Areas of Good Practice		
<ul style="list-style-type: none"> • Assessment policy • Assessment methodology • Student assessment information and feedback • Student assessment information and support • Assessment material security • Internal Verification • External Authentication • Results Approval • Student appeals 		
Areas for Improvement		
<ul style="list-style-type: none"> • N/A 		

7. Conclusion and Outcome

Rating	3.93
Level	Substantively Met
Conclusion	<p>The evidence provided during the review process indicated that the student journey is at the centre of and drives the institution's desire to ensure that students and associated personnel have access to a high-quality teaching and learning environment. The evidence provided indicated that the effective and efficient use of technology by the institution adds significant value to the implementation of a culture of continuous quality improvement described during the review process.</p> <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 high-quality comprehensive 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 the culture of continuous quality evident in the institution will ensure that the quality assurance system remains effective, fit for purpose, and reflective of current practice.</p> <p>The QRP 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 high-quality teaching and learning environments for all stakeholders.</p>



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