

Quality Review Framework  
Composite Report  
University of Limerick

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### 1. Institution Details

<b>Name</b>	Paramedic Studies, School of Medicine, University of Limerick
<b>Address</b>	Castletroy Limerick V94 T9PX
<b>Type of Organisation</b>	University
<b>Profile</b>	Recognised Institution since 2015
<b>PHECC Courses Delivered</b>	CFR- Community, CFR- Advanced, Paramedic
<b>Higher Education Affiliation</b>	Higher Education Authority

### 2. Review Details

<b>Purpose</b>	<ul style="list-style-type: none"> <li>To facilitate the enhancement of a successful learning experience for students</li> <li>To foster a culture of Continuous Quality Improvement in Institutions</li> <li>To generate public confidence in the standard of education and training in pre-hospital emergency care</li> </ul>
<b>Scope</b>	<ul style="list-style-type: none"> <li>The review covered all aspects of the institution's activities associated with meeting the quality standards as outlined in the PHECC quality review framework.</li> </ul>
<b>Date of the Desktop Review</b>	06/09/2023 - 08/09/2023
<b>Date of Onsite Review</b>	27/09/2023

### 3. Report Details

<b>Draft report sent to Institution for feedback</b>	27/10/2023
<b>Final report sent to Institution</b>	24/11/2023
<b>Director Approval</b>	
<b>Date</b>	22/11/2023
<b>Report Compiled by</b>	PHECC Quality Review Panel

## 4. Review Activities

### 4.1 Meetings

<b>Opening Meeting</b>	
<b>Organisation</b>	<b>Role</b>
PHECC	Quality Review Panel x 3
PHECC	Observer
University of Limerick	Head of School, School of Medicine
	Senior Clinical Teaching Fellow / Course Director BSc Paramedic Studies
	School Manager, School of Medicine
	Executive Administrator, Paramedic Studies
<b>Closing Meeting</b>	
<b>Organisation</b>	<b>Role</b>
PHECC	Quality Review Panel x 3
PHECC	Observer
University of Limerick	Head of School, School of Medicine
	Senior Clinical Teaching Fellow / Course Director BSc Paramedic Studies
	School Manager, School of Medicine
	Executive Administrator, Paramedic Studies
	Medical Director, Paramedic Studies Programme

### 4.2 Stakeholder Discussions

<b>Title/Group</b>	<b>Role</b>
Students	Year 1 - Paramedic Studies Programme
Faculty x 4	Paramedic Studies Programme

### 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"> <li>• Self-Assessment Report 2023</li> <li>• Named Faculty Form</li> <li>• Behaviour Competency Framework (by grade)</li> <li>• Event Management Plan Template</li> <li>• University Safety Statement</li> <li>• Insurance Details</li> <li>• Student Vetting Policy</li> <li>• Year 1 Handbook 2022/23</li> <li>• Student Privacy Notice</li> <li>• Tax Details</li> <li>• School of Medicine Quality Review Report 2015</li> <li>• Sample Student 1 to 1 meeting report</li> <li>• Paramedic Studies Clinical Placement 2023 – Attendance Confirmation</li> <li>• Undergraduate Placement LOs x 16</li> <li>• Sample Student Graphical Skills Log Report – March 2023</li> <li>• Job Description – Senior Admin</li> <li>• New Employee Checklist</li> <li>• Sample PBL Case</li> <li>• Sample Year 1 Student Progress Meeting Form</li> <li>• External Examiner Report x 2</li> <li>• Grade Checklist Form</li> <li>• Website – School of Medicine, resources &amp; information</li> </ul>	<ul style="list-style-type: none"> <li>• Academic Programme Review Policy</li> <li>• External Examiner Report</li> <li>• Job Description – Clinical Tutor Paramedics</li> <li>• General Health &amp; Safety Risk Assessment Sheet</li> <li>• Customer Feedback Form</li> <li>• UL Safeguarding Statement</li> <li>• Data Protection Policy</li> <li>• MOU for Placements x 3</li> <li>• UL Annual Financial Report</li> <li>• UL Quality Review Report 2023</li> <li>• Field Review Year 2 Template</li> <li>• UL Annual Report 2022</li> <li>• Student Handbook 2022/23</li> <li>• Sample Schedule Tutor Ratio</li> <li>• Clinical Skills Log Sample – Graphical Report Sept-June</li> <li>• UL &amp; NAS Post Graduate Internship – PHECC Approval</li> <li>• Vetting &amp; Foreign Police Clearance Procedure for Staff</li> <li>• PDRs Documentation</li> <li>• New Employee First Six Months Checklist</li> <li>• Sample Student Schedule Week 3</li> <li>• UL Undergraduate 2022 Prospectus</li> <li>• Sample Grading Matrix for Module 4041 – Paramedic &amp; Population Health</li> <li>• UL Records &amp; Retention Policy</li> </ul>	<ul style="list-style-type: none"> <li>• Paramedic Org. Structure</li> <li>• Academic Regulations &amp; Procedures Handbook</li> <li>• Job Description – Senior Teaching Fellow</li> <li>• School of Medicine Safety Statement</li> <li>• Student Complaints Policy &amp; Procedures</li> <li>• Records Management Policy</li> <li>• Signing Authority Policy</li> <li>• EHS ORG. Report</li> <li>• Paramedic Board Agenda 2022/23</li> <li>• Student Fitness to Practice Policy</li> <li>• Sample Year 2 Field Review</li> <li>• Equality &amp; Diversity Policy</li> <li>• Code of Conduct for Employees</li> <li>• Clinical Skills Log Sample – Textual Report Sept-June</li> <li>• Job Description – Exec Admin Paramedics</li> <li>• Performance &amp; Development Review System Form</li> <li>• Further Study Policy</li> <li>• Sample CFR 2022 Sign in Sheet</li> <li>• Annual Programme Review Report – BSc Paramedic Studies</li> <li>• Website – UL health &amp; safety</li> <li>• APRC terms of reference</li> <li>• External examiner policy</li> </ul>
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### 4.4 Observation of Practice, Facilities and Resources

Practice – e.g., Course delivery, administration, clinical placement

Location	Comments
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University of Limerick	Administration – The QRP reviewed the institution’s administrative records for students and faculty. The records were noted as substantial and provided the QRP with informative details of education and training activities.
<b>Facilities</b>	
<b>Location</b>	<b>Comments</b>
University of Limerick	The QRP reviewed the facilities, which were suitable for the courses being provided and number of attendees.
<b>Resources – e.g., equipment, ICT, course material, etc</b>	
<b>Location</b>	<b>Comments</b>
University of Limerick	<p>Equipment – The QRP reviewed a range of equipment utilised on courses, which was noted as being adequate and suitable for the courses being provided.</p> <p>ICT – The QRP were provided with access to the institution’s ICT systems, which maintain student, faculty, and course records.</p> <p>Course Material – The QRP reviewed course material onsite, which was noted as appropriate and suitable for the course being delivered.</p>

## 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
<b>Quality Standard</b>	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.	<b>SM</b>
<b>QRP Findings</b>		
<p>It was clear from the evidence provided what constitutes governance in the institution and that it is appropriate to its needs, size and complexity.</p> <p>The evidence provided also indicated that the institution would benefit from:</p> <ul style="list-style-type: none"> <li>• Systematically updating the organisational charts to accurately reflect current practice</li> <li>• Updating documentation to reflect the practice of convening groups/individuals to carry out oversight activities</li> <li>• Systematically reviewing and updating sub-group terms of reference and roles descriptions to accurately reflect current practice</li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>• 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</li> <li>• Delegated authority and responsibilities for education and training governance</li> <li>• Records maintained of course approval/amendment, results approval, and self-assessment</li> <li>• Risk management</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>• Organisational Chart – To reflect education and training governance</li> <li>• Procedure for convening sub-groups</li> <li>• Sub-group terms of reference and individual role/job descriptions</li> </ul>		
Quality Area	1.2 Management Systems and Organisational Processes	Level
<b>Quality Standard</b>	The institution complies with all relevant legislation and cooperates with PHECC to meet its requirements.	<b>SM</b>
<b>QRP Findings</b>		
<p>The evidence provided indicated that the Institution:</p> <ul style="list-style-type: none"> <li>• Is an established legal entity that provides PHECC education and training standards</li> <li>• Is in good financial standing with relevant stakeholders</li> <li>• Has adequate insurance cover in place to cover all education and training activities</li> <li>• Maintains comprehensive up to date student and faculty records</li> <li>• Has data protection systems, policies, procedures and supporting documents to ensure compliance with data protection obligations</li> <li>• Is sufficiently resourced to (financial and human) to carry out all its quality assurance activities</li> <li>• Has a complaints policy and procedures in place and ensures that all stakeholders are made aware of it</li> </ul>		

<p>The evidence provided also indicated that the institution would benefit from additional/updated documentation to support:</p> <ul style="list-style-type: none"> <li>• All tasks (from student entry to exit) associated with education and training</li> <li>• The affiliation/partnerships that are in place with other PHECC registered institutions</li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>• Financial standing with relevant stakeholders</li> <li>• Insurance</li> <li>• Systems for maintaining student and faculty records</li> <li>• Resources to support quality assurance activities</li> <li>• Data protection systems</li> <li>• Complaints policy</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>• Additional/updated documentation to support all tasks</li> <li>• Affiliation/partnership documentation</li> </ul>		
<b>Quality Area</b>	<b>1.3 Continuous Quality Improvement</b>	<b>Level</b>
<b>Quality Standard</b>	The institution has a proactive, systematic approach to monitoring, reviewing and enhancing education and training activities.	<b>FM</b>
<b>QRP Findings</b>		
<p>The evidence provided in the documentation and during discussions indicated that the institution:</p> <ul style="list-style-type: none"> <li>• Has quality assurance systems and documentation in place that clearly states the institution's commitment to systematic monitoring, annual self-assessment, and quality improvement</li> <li>• Maintains comprehensive records of quality assurance activities</li> <li>• Clearly states overall responsibility for quality assurance</li> <li>• Ensures that all those involved in education and training activities have been made aware of their responsibilities for quality assurance</li> <li>• Has appropriate performance indicators (KPI) in place for monitoring all aspects of education and training</li> <li>• Has clearly documented how monitoring is carried out, by whom and what indicators it should be seeking</li> <li>• Maintains up-to-date evidence of: <ul style="list-style-type: none"> <li>- The systematic collection, analysis and use of student, faculty and other stakeholder feedback and student participation, success, and progression</li> <li>- The systematic review of policies, procedures and supporting documents, learning resources and locations</li> <li>- Quality improvement planning and implementation</li> </ul> </li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>• Quality assurance systems</li> <li>• Overall responsibility and delegated authority for quality assurance clearly allocated</li> <li>• Awareness among personnel of their quality assurance responsibilities</li> <li>• Performance indicators (KPI) and links to education and training activities</li> <li>• Systematic collection, analysis and use of student, faculty, and other stakeholder feedback</li> <li>• Systematic review of learning resources and locations</li> </ul>		



<ul style="list-style-type: none"> <li>Documented evidence of up-to-date quality improvement planning and implementation</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>N/A</li> </ul>		
Quality Area	1.4 Transparency and Accountability	Level
<b>Quality Standard</b>	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.	<b>SM</b>
<b>QRP Findings</b>		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>Provides prospective students with sufficient information to make an informed choice about course participation</li> <li>Ensures that the public are made aware of any third-party relationships related to PHECC-approved courses and the responsibilities of those involved</li> <li>Provides information about the institution's quality assurance system and external reviews to the public in an easily accessible format</li> </ul> <p>The evidence provided also indicated that the institution would benefit from:</p> <ul style="list-style-type: none"> <li>Maintaining up-to-date records of internal reporting</li> <li>Additional/updated documentation to support: <ul style="list-style-type: none"> <li>The allocation of all tasks (from student entry to exit)</li> <li>Communication with PHECC and other stakeholders (internship/clinical placement sites etc.)</li> </ul> </li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>Reporting throughout the institution</li> <li>Task responsibility and links to performance measures</li> <li>Student information about courses</li> <li>Responsibility for reporting to PHECC allocated</li> <li>The provision of quality assurance information</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>Maintaining reporting records</li> <li>Documented allocation of tasks</li> <li>Communication documentation</li> </ul>		

## 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
<b>QRP Findings</b>		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>• Has a policy, associated procedures and supporting documents to demonstrate compliance with its safety, health, and welfare at work legislative obligations</li> <li>• Appropriate training premises are selected and used to deliver PHECC approved courses</li> <li>• Selection criterion and a checklist are in place and being used for external premises</li> <li>• Appropriate equipment/resources are available and have been used for each course</li> <li>• Has comprehensive systems in place to regularly maintain and update equipment, and evidence that this is completed</li> <li>• Ensures that all resources are fit for purpose and accessible</li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>• Safety, health, and welfare practice</li> <li>• Premises criteria and selection</li> <li>• Equipment and resource availability</li> <li>• Equipment maintenance</li> <li>• Fit for purpose resources and accessibility to and of resources</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>• N/A</li> </ul>		
Quality Area	2.2 Student Support	Level
Quality Standard	A positive, encouraging, safe, supportive and challenging environment is provided for students.	FM
<b>QRP Findings</b>		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>• Has adequate numbers of appropriately qualified and experienced faculty, administrative, technical, and clinical staff to support students</li> <li>• Ensures that students are made aware of the supports available to them before, during, and after their course</li> <li>• Maintains appropriate tutor/instructor-to-student ratios, in keeping with PHECC's course approval criteria</li> <li>• Provides opportunities for students to meet individually and collectively with faculty and/or management</li> <li>• Obtains information from potential and existing students of any additional support needs they may have</li> <li>• Has mechanisms in place to provide reasonable accommodation for students with additional support needs</li> </ul>		

<ul style="list-style-type: none"> <li>Has sufficient up-to-date resources (appropriate to the level of the course) for students in a variety of formats</li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>Appropriately qualified and experienced personnel to support students</li> <li>Student support information</li> <li>Faculty/student ratios</li> <li>Student access to management and faculty</li> <li>Student support practice</li> <li>Student resources</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>N/A</li> </ul>		
<b>Quality Area</b>	<b>2.3 Equality and Diversity</b>	<b>Level</b>
<b>Quality Standard</b>	There is a commitment to provide equal opportunities for students and personnel, in compliance with relevant equality legislation.	<b>FM</b>
<b>QRP Findings</b>		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>Has an equality and diversity policy and procedures in place</li> <li>That all relevant policies and procedures promote equality and diversity</li> <li>Ensures that students, faculty, and other stakeholders are made aware of the policy and procedures</li> <li>Has codes of conduct for staff, faculty, and other stakeholders</li> <li>Provides faculty with up-to-date information and training on equality and diversity</li> <li>Ensures that course delivery accommodates the cultural backgrounds and different learning styles of students</li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>Equality and diversity policy and procedures, practice and awareness</li> <li>Codes of conduct</li> <li>Equality and diversity information and training</li> <li>Course delivery</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>N/A</li> </ul>		
<b>Quality Area</b>	<b>2.4 Internship/Clinical Placement</b>	<b>Level</b>
<b>Quality Standard</b>	<i>NQEMT courses only:</i> Internship/Clinical Placement sites are appropriate to course content and the learning outcomes to be achieved.	<b>SM</b>
<b>QRP Findings</b>		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>Only uses PHECC-approved internship/clinical sites</li> <li>Has documented selection criteria for internship/clinical placement sites</li> </ul>		

<ul style="list-style-type: none"> <li>• Ensures that the internship/clinical placement site(s) provide students with appropriate learning environments to support the development and achievement of their competencies</li> <li>• Has systems in place for students to raise concerns about their placement</li> <li>• Has a fair and transparent system in place for student placement</li> <li>• Has sufficient mentors and preceptors (clinical supervisor) in place with each internship site</li> <li>• Has documented learning outcomes to be achieved during the internship/clinical placement period</li> <li>• Has appropriate documentation in place to record student activities during their internship</li> <li>• 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)</li> </ul> <p>The evidence provided also indicated that the institution would benefit from:</p> <ul style="list-style-type: none"> <li>• Additional/updated MOU/agreements with all internship/clinical placement sites</li> <li>• Additional/updated documentation to support the assessment of all internship/clinical placement sites to ensure their suitability as a quality learning environment in accordance with PHECC standards and guidelines for course approval</li> </ul>
<b>Areas of Good Practice</b>
<ul style="list-style-type: none"> <li>• Placed sites approved by PHECC</li> <li>• Selection criteria for placement sites</li> <li>• Systems for students to raise concerns about placement</li> <li>• Fair and transparent system for student placement</li> <li>• Sufficient mentors and preceptors</li> <li>• Placement learning outcomes</li> <li>• Records of student placement activities</li> </ul>
<b>Areas for Improvement</b>
<ul style="list-style-type: none"> <li>• MOUs/Agreements and supporting documents</li> <li>• Internship/clinical placement site monitoring visit schedules and records</li> </ul>

### 6.3 Theme 3: Human Resource Management

Quality Area	3.1 Organisational Staffing	Level
<b>Quality Standard</b>	The institution has sufficient, appropriately qualified and experienced personnel to maintain high-quality education and training activities.	<b>FM</b>
<b>QRP Findings</b>		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>• Has a robust systematic approach to recruiting appropriately qualified and experienced personnel to carry out education and training activities</li> <li>• Has a minimum standard in place for the academic and subject matter experience of: <ul style="list-style-type: none"> <li>- Faculty (facilitators, tutors, assistant tutors, instructors, etc)</li> <li>- Visiting subject experts</li> <li>- Internship/clinical placement mentors and preceptors (clinical supervisors)</li> </ul> </li> <li>• Has adequate numbers of personnel in place to: <ul style="list-style-type: none"> <li>- Meet the current and projected demand for its service</li> <li>- Carry out the activities described in its policies and procedures</li> <li>- Maintain PHECC requirements for course approval</li> <li>- Systematically organise, deliver, and monitor the quality of courses and awards</li> </ul> </li> </ul>		

<ul style="list-style-type: none"> <li>- Ensure full compliance with the QRF</li> <li>• Ensures that the composition of the institution’s personnel meets PHECC education and training standards for each course on offer</li> <li>• Has made all personnel involved in administering and delivering PHECC-approved courses aware of their quality assurance responsibilities and are carrying them out consistently</li> <li>• All personnel have been issued with a job description and a statement of terms of employment/engagement</li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>• Recruitment</li> <li>• Minimum standards in place for faculty and other personnel</li> <li>• Adequate numbers of personnel</li> <li>• Quality assurance responsibility and activities</li> <li>• Job descriptions and terms of employment/engagement</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>• N/A</li> </ul>		
<b>Quality Area</b>	<b>3.2 Personnel Development</b>	<b>Level</b>
<b>Quality Standard</b>	The institution takes a systematic approach to supporting and developing all personnel, ensuring they have the competencies to deliver high-quality education and training.	<b>FM</b>
<b>QRP Findings</b>		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>• Has systems to identify training/upskilling requirements for personnel</li> <li>• Carries out comprehensive induction with all personnel</li> <li>• Has a training and development plan/programme, which details how the institution meets the support and development needs of relevant personnel</li> <li>• Maintains records of personnel upskilling</li> <li>• Has mechanisms in place for faculty to request support for training/upskilling and to achieve additional qualifications</li> <li>• Has a formalised support and supervision and annual appraisal system in place</li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>• Upskilling identification systems</li> <li>• Comprehensive induction</li> <li>• Training and development plans</li> <li>• Records of faculty training/upskilling</li> <li>• Support and supervision, annual appraisal</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>• N/A</li> </ul>		
<b>Quality Area</b>	<b>3.3 Personnel Management</b>	<b>Level</b>
<b>Quality Standard</b>	A systematic approach is taken to managing all individuals and groups engaged in education and training activities.	<b>SM</b>

QRP Findings		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>• Has systems in place for regular and appropriate communication between faculty and management</li> <li>• Provides opportunities for faculty feedback during and after their course</li> <li>• Has a system in place to ensure only faculty with valid certification deliver PHECC approved courses</li> <li>• Systematically monitors the activities of faculty and visiting subject experts through observation and the analysis of relevant documentation</li> <li>• Has appropriate HR policies and procedures in place</li> </ul> <p>The evidence provided also indicated that the institution would benefit from:</p> <ul style="list-style-type: none"> <li>• Additional/updated faculty course reports</li> <li>• Additional/updated documentation to support: <ul style="list-style-type: none"> <li>- Faculty observation and monitoring</li> <li>- Poor and unacceptable faculty performance</li> </ul> </li> </ul>		
Areas of Good Practice		
<ul style="list-style-type: none"> <li>• Communication practice between faculty and management</li> <li>• Faculty course reports</li> <li>• System for ensuring only personnel with valid certification deliver PHECC approved courses</li> <li>• Faculty monitoring</li> <li>• HR policies and procedures</li> </ul>		
Areas for Improvement		
<ul style="list-style-type: none"> <li>• Faculty observation and monitoring records</li> <li>• HR activities – poor and unacceptable faculty performance</li> </ul>		
Quality Area	3.4 Collaborative Provision	Level
<b>Quality Standard</b>	Appropriate contractual and quality assurance arrangements are in place with contracted staff.	<b>N/A</b>
QRP Findings		
<ul style="list-style-type: none"> <li>• N/A</li> </ul>		
Areas of Good Practice		
<ul style="list-style-type: none"> <li>• N/A</li> </ul>		
Areas for Improvement		
<ul style="list-style-type: none"> <li>• N/A</li> </ul>		

#### 6.4 Theme 4: Course Development, Delivery and Review

Quality Area	4.1 Course Development and Approval	Level
<b>Quality Standard</b>	A systematic approach is taken to course development and approval.	<b>FM</b>
QRP Findings		

The evidence provided indicated that the institution:

- 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

The evidence provided also indicated that course development:

- Reflects PHECC requirements
- Demonstrates an appropriate balance between theory and practice
- Provides a balance between presentations, group work, skills demonstrations, practical work, and blended learning, as appropriate
- Promotes a commitment to self-directed learning, as appropriate

The evidence provided also indicated that the development of course material included:

- Clearly outlined aims and objectives, detailing competencies to be achieved by students
- Detailed lesson plans that include all information as set out in PHECC guidelines for theoretical and practical lessons
- Detailed timetable, time on each topic, teaching method, and tutor/instructor name etc.

#### Areas of Good Practice

- Course development practice
- Course material development
- Course approval practice

#### Areas for Improvement

- N/A

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

#### QRP Findings

The evidence provided indicated that:

- 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)

The evidence provided also indicated that the institution would benefit from:

- Additional/updated documentation to support the monitoring of the delivery of learning outcomes by third parties, including site visits

#### Areas of Good Practice

<ul style="list-style-type: none"> <li>• Course delivery</li> <li>• Student induction</li> <li>• Appropriately qualified faculty</li> <li>• Records of attendance</li> <li>• Remediation, mentoring</li> <li>• Student learning portfolios</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>• N/A</li> </ul>		
<b>Quality Area</b>	<b>4.3 Course Access, Transfer and Progression</b>	<b>Level</b>
<b>Quality Standard</b>	Course information is clear, and access is fair and consistent, with recognition of prior learning, as appropriate.	<b>FM</b>
<b>QRP Findings</b>		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>• Has an admissions policy and procedures and/or clear entry criteria for each course on offer</li> <li>• Provides prospective students with appropriate and sufficient course details</li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>• Documented admissions policy and/or course entry criteria</li> <li>• Prospective student information</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>• N/A</li> </ul>		
<b>Quality Area</b>	<b>4.4 Course Review</b>	<b>Level</b>
<b>Quality Standard</b>	Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	<b>FM</b>
<b>QRP Findings</b>		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>• Has systems in place for course review</li> <li>• Provides students and faculty with the opportunity to provide feedback during and after their course</li> <li>• Ensures that course evaluation involves key stakeholders, including mentors, as appropriate</li> <li>• Ensures that the tutor/instructor or course director participates in course evaluation</li> <li>• Identifies and implements areas for improvement as outlined in the course improvement plan and/or QIP</li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>• Course review and evaluation</li> <li>• Student and faculty feedback opportunities</li> <li>• Quality improvement activities</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>• N/A</li> </ul>		



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
<b>QRP Findings</b>		
<p>The evidence provided indicated that the institution:</p> <ul style="list-style-type: none"> <li>• Has an assessment policy and procedures</li> <li>• Uses appropriate assessment methodology on all courses</li> <li>• Clearly states when PHECC assessment material is used</li> <li>• Ensures that students have access to the information (e.g., course material) necessary for them to participate in assessment</li> <li>• Ensures students receive feedback on their assessment/results</li> <li>• Adapts assessment methodologies to cater for students with additional support needs, if required</li> <li>• Has designated responsibility for assessment related material</li> <li>• Securely stores assessment material</li> <li>• Ensures that students are authorised to apply for NQEMT examination at the appropriate time</li> <li>• Has a student appeals policy and associated procedures in place</li> </ul> <p>The evidence provided also indicated that the institution would benefit from additional/updated documentation to support:</p> <ul style="list-style-type: none"> <li>• Internal verification</li> <li>• External authentication</li> <li>• Results approval</li> </ul>		
<b>Areas of Good Practice</b>		
<ul style="list-style-type: none"> <li>• Assessment policy</li> <li>• Assessment methodology</li> <li>• Student assessment information and feedback</li> <li>• Student assessment information and support</li> <li>• Assessment material security</li> <li>• Student appeals</li> </ul>		
<b>Areas for Improvement</b>		
<ul style="list-style-type: none"> <li>• Internal verification</li> <li>• External authentication</li> <li>• Results approval</li> </ul>		

## 7. Conclusion and Outcome

Rating	3.83
Level	Substantively Met
Conclusion	The PHECC Quality Review Panel had the opportunity to gather evidence through a comprehensive review of a range of documentation, engaging in discussions with institution representatives during the onsite visit and observing facilities and equipment.

The evidence provided indicated that the student is at the centre of and drives the institution's desire to ensure that all stakeholders have access to a high-quality teaching and learning environment. It also indicated that there is a culture of continuous quality improvement of all PHECC courses and associated activities ensuring that they remain effective, fit for purpose, and reflective of current practice.

The QRP concludes from the evidence provided, that the institution has effective and efficient quality management/assurance systems in place to ensure the quality of PHECC approved courses.

The implementation of the improvement actions identified during self-assessment and external quality review will ensure the maintenance of a high-quality teaching and learning environment for students, faculty, and associated personnel.



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