

Medicall Ambulance Ltd.

Recognised Institution

Quality Standards Review

On-Site Report



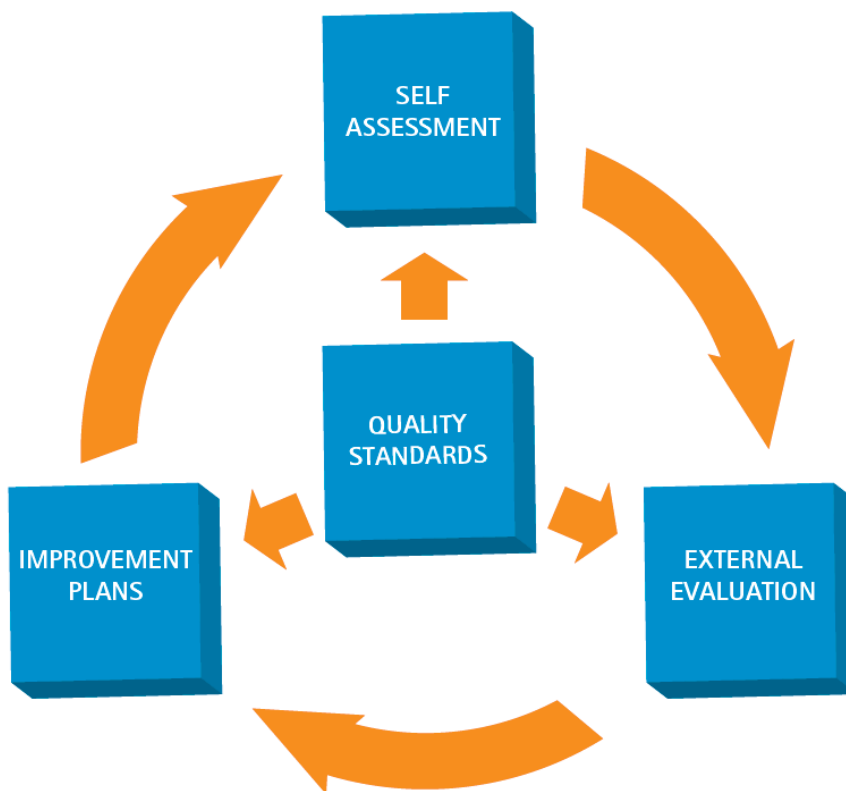
Table of Contents

1.0 Introduction	1
1.1 Institution Details.....	2
1.2 Report Details.....	2
1.3 Scope of the Review.....	3
2.0 Review Findings	3
2.1 Meetings and Discussions	3
2.2 Observation of Facilities and Resources	3
2.3 Evidence Reviewed – Documents/IT.....	4
2.4 Quality Standards – Review	5
3.0 Conclusions and Outcomes	13

1.0 Introduction

This report has been produced following the first review of the recognised institutions(RI) processes that support the design, deliver and review of the Pre-Hospital Emergency Care Council's (PHECC) approved courses. This is the first step in the quality improvement cycle as outlined in PHECC's Quality Review Framework. The result of this review provides both PHECC and the RI with baseline information which will inform continuous quality improvement, to be outlined in the institutions quality improvement plan. The review was carried out with the underlying principle of the RI "Saying what they do, doing what they say and proving it with verifiable documented evidence".

Figure 1: The QRF Building Blocks:



1.1 Institution Details

Name	Medicall Ambulance Ltd.
Profile	Medicall Ambulance Ltd. is a private limited company based in Co. Dublin. It is a recognised institution since March 2009.
PHECC courses being delivered	Cardiac First Responder Community Cardiac First Response Advanced Emergency First Response (EFR) Emergency Medical Technician (EMT)
Higher Education Affiliation	Not applicable
Address	Business and Technology Park Clonshaugh Dublin 17

1.2 Report Details

Date of on-site visit	27/05/2015
Quality Review Panel (QRP)	
P Collins	QRP Chair
J Beecher	QRP Member
P Dempsey	QRP Member
RI Representatives	
Chris O'Connor	Education and Practice Development Manager
Mick Garry	Facilitator
Martin Darcy	Compliance Manager
Andrew Lyle	Operations Director
Paul French-O'Carroll	Managing Director
Date of Council approval	10 th September 2015
Date of publication	

1.3 Scope of the Review

The review covered all aspects of the institution's activities associated with meeting the quality standards as outlined in the PHECC quality review framework. The Emergency Medical Technician (EMT) course was selected to provide context.

2.0 Review Findings

2.1 Meetings and Discussions

Type	Comments
Entry Meeting	The QRP met with five Medcall representatives on arrival (as above). Following introductions, the panel chairperson outlined the agenda for the visit and the process that would be followed.
Staff Discussions	A member of the panel had a discussion with the training administrator and tracked the student journey from first contact through to certification.
Learner Discussions	None
Exit Meeting	The QRP met with five Medcall representatives (as above). The results of the review were summarised and agreed. The panel outlined the next steps in the process and the meeting was closed.

2.2 Observation of Facilities and Resources

Area	Comments
Facilities	Medcall's training facilities are part of their head office situated in Dublin 17. The facility has two training rooms, toilet facilities, canteen and storage areas for equipment. In addition, the RI uses several off-site facilities to deliver courses. There is parking available around the facility.
Resources	Several storage areas contain a well-stocked supply of resources and equipment for courses.

2.3 Evidence Reviewed – Documents/IT

The records and systems listed below were reviewed and discussed throughout the on-site visit

- Moodle – EMT & EFR MCQ's
- Computer System – Record Management (Student & Faculty)
- Course Development Policy
- Student Evaluation Forms
- Role Profile – Education Support Assistant
- Faculty Contact Sheet
- Application Form
- RPL Policy
- Equality and Diversity Policy
- Anti-Bullying and Harassment Policy
- Complaints Procedure
- Health and Safety Policy
- Student Feedback Forms
- Child/Vulnerable Person Policy
- Student Log Book
- Lesson Plans
- Exam Policy and Procedures

2.4 Quality Standards – Review

Section One: Organisational Structure and Management

Quality Standards

1.1 Governance - The Institution has clear lines of authority and engages a system of accountability for PHECC approved courses.

1.2 Management Systems and Organisational Processes - The Institution can show that it has well documented organisational processes in place to meet the needs of all stakeholders.

1.3 Management Responsibility - There is a clearly defined system in place showing who is responsible for ensuring the quality assurance of PHECC approved courses.

1.4 Self-Assessment, External Evaluation and Improvement Planning - The Institution carries out internal assessment and engages in a quality improvement planning process (annually) which includes external evaluation.

1.5 Transparency and Accountability - The institution conducts its activities in an open and transparent manner.

1.6 Administration – Administration arrangements meet the needs of all stakeholder groups.

1.7 Financial Management - The institution manages its' finances in a responsible manner that meets the needs of all stakeholders.

QRP Findings

- The organisational chart provides a visible representation of the reporting lines within the RI. The updating planned will enhance the visibility of the reporting lines within the training function. The discussion revealed a comprehensive process for internal course approval which is carried out informally. There is no documented evidence of this process taking place. Courses are submitted to PHECC as per guidelines. It is not evident from the governance structure all those involved in the quality assurance of PHECC approved courses.
- The RI has a computer based information management system. Student and Faculty records are stored and maintained within this system. Hard copy documents are scanned into the system which provides visibility of a wide range of documents and processes. Further development is planned to enhance the system.
- The education and practice development manager is identified on the organisational chart as having overall responsibility for the quality assurance of PHECC approved courses. The RI representatives indicated in discussion that faculty are made aware of their QA responsibilities during induction, however there is no documented evidence of this taking place.

- During discussions the RI representatives displayed a clear understanding and commitment to self-assessment and evaluation. An informal process was outlined which will benefit from being documented into a formal process.
- At time of review the RI website contains comprehensive information on PHECC approved courses. Students are directed to contact the RI for further information. Course information is also available to students in their student pack at the beginning of their course. Course information is available throughout the centre and additional documentation is available.
- There is a full time education support assistant employed by the RI. A course administration pack is in use and a comprehensive IT system is utilised. Procedures are documented and implemented for course administration tasks.
- The RI is fully compliant with all relevant financial requirements and PHECC has verification this pre on-site review.

Section Two: The Learning Environment

Quality Standards

- 2.1 Education and Training Mission Statement** - The Mission of the Institution is appropriately focused with education and training as a core activity.
- 2.2 Communication with Students and Other Stakeholders** - Two way communication systems are in place between faculty, students and other stakeholders as appropriate.
- 2.3 Course Access, Transfer and Progression** - Course information is clear, access is fair and consistent, with recognition of prior learning, as appropriate.
- 2.4 Equality and Diversity** - There is a commitment to the provision of equal opportunities for students and faculty in compliance with relevant equality legislation.
- 2.5 Complaints and Appeals** - Complaints and Appeals Processes are open, transparent and accessible to students and other stakeholders.
- 2.6 Training Infrastructure** - Courses are carried in an appropriate learning environment, sufficiently resourced in order to deliver training to the highest standards.
- 2.7 Health and Safety** - A safe and healthy environment exists in the institution.
- 2.8 Social Environment** - A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.

QRP Findings

- The RI demonstrates its commitment to quality training through its mission statement which is visible in the RI building and on relevant documentation. All stakeholders are made aware of the mission statement and its implications for training activities.
- The RI utilises a range of methods to communicate with stakeholders, including a student forum on moodle, feedback forms and faculty contact sheets. The discussion indicated that regular informal communication takes place with all stakeholders. The RI has indicated that they intend to formalise some of these informal contacts in the future. In particular the feedback from tutors/instructors was highlighted by the RI.
- Course information is available to students on the RI website. They are encouraged on the website to contact the RI for further information. There is a policy available regarding recognition of prior learning. The evidence indicates that students are provided with sufficient and appropriate information to make informed choices about course enrolment and progression.
- Equality and diversity and anti-bullying and harassment policies are visible on the RI's moodle platform. There is also a complaints policy and procedure in place that is being updated to reflect a clear procedure for students and stakeholders to follow.
- The facilities available for students provide a safe, clean, welcoming and comfortable learning environment. The evidence viewed shows a comprehensive range of resources and equipment available for all courses. Administration, check and document the resources needed for course and ensure they are in place. Equipment is

up to date well maintained and stored on site. Students have access to resources through moodle outside normal classroom and structured training time.

- The health and safety statement is available to view. Procedures are in place to ensure the RI is compliant with all relevant health and safety legislation. Signage is in place onsite and stakeholders are made aware of procedures while onsite.
- Discussions indicated that faculty are encouraged to provide students with interesting and challenging learning opportunities. The course material viewed provided an opportunity to verify this and would support this view. Material viewed was found to be consistent with best practice.

Section Three: Faculty Recruitment and Development

Quality Standards

3.1 Organisational Staffing - All faculty are aware of their role and responsibilities when involved in the administration and/or delivery of a PHECC approved course and their conduct is professional at all times.

3.2 Faculty Recruitment - Faculty, are recruited on the basis of personal suitability, appropriate experience and qualifications.

3.3 Faculty Development and Training - Faculty are encouraged and supported to gain additional training/qualifications appropriate to their role in or with the institution.

3.4 Communication with Faculty - Two way communication systems are in place between management and faculty.

3.5 Work Placement and Internship - Host organisations (internship sites) are appropriate to the course content and learning outcomes to be achieved (NQEMT courses only).

3.6 Faculty and Stakeholder Management - A system is in place to ensure appropriately qualified and experienced individuals are engaged by the institution.

3.7 Collaborative Provision - Appropriate contractual arrangements are in place with affiliated instructors.

QRP Findings

- During discussions RI representatives outlined the process they undertake to recruit faculty. They stated that many of their faculty are drawn from front-line emergency services and their own operational staff. However, there is no formal recruitment policy and procedures in place. There is no evidence that the role and responsibility of faculty members for the quality assurance of PHECC approved courses is documented.
- The RI indicated that they have selection criteria for faculty which is in line with PHECC guidelines and that senior management are involved – through the education and practice development manager – in the recruitment of all faculty. However there is not a documented job description or selection criteria in evidence. There is a policy statement on faculty recruitment.
- There is evidence to show the faculty are provided with opportunities to further their development. The education and practice manager has responsibility for developing these opportunities and encouraging faculty to undertake upskilling. Informal meetings currently take place to discuss upskilling and development opportunities and these will be formally documented in the future. RI representatives indicated that faculty induction and class observation takes place. These are not currently documented. Faculty are made aware of their responsibilities towards children and vulnerable persons through the associated policy which is available to view on moodle.

- During discussions RI representatives described a range of formal and informal methods of communication between faculty and management. There is evidence of regularly scheduled meetings. Collective informal meetings take place with all faculty to discuss specific training issues. A more formal methodology for meetings and communication is being developed. Records of these meetings and communications will be maintained.
- Students have the opportunity to carry out their placement on one of Medicall's own ambulances. Students maintain a log book of their activities which is available for inspection. Student progress is monitored and learning outcomes are in place for the placement period.
- Information on faculty is maintained on the RI's computer system and was available to view. The system shows if faculty meet the minimum requirements set by PHECC to deliver courses. Observation is carried out but not documented. Faculty performance currently not documented.
- During discussions RI representatives indicated that external tutors and assistant tutors are used by the RI. There was no evidence to show that there was a written contract in place and that there was agreement and understanding between both parties as to their responsibilities for quality assurance.

Section Four: Course Development, Delivery and Review

Standards

4.1 Course Development - Courses are designed to meet the requirements for PHECC approval and certification and reflect a commitment to quality improvement.

4.2 Course Approval - There are clear guidelines for course approval.

4.3 Course Delivery, methods of theoretical and clinical Instruction - Courses are delivered in a manner that meets students' needs and in accordance with PHECC guidelines.

4.4 Course Review - Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.

4.5 Assessment and Awards - Assessment of student achievement for certification operates in a fair and consistent manner by all tutors and instructors in line with PHECC assessment criteria.

4.6 Internal Verification - There is a consistent application of PHECC assessment procedures and the accuracy of results is verified.

4.7 External Authentication - There is independent and authoritative confirmation of assessment and certification, where relevant, in accordance with PHECC guidelines.

4.8 Results Approval - A results approval process operates in the institution.

4.9 Student Appeals - A process is in place for students to appeal their approved result.

QRP Findings

- There is a course development policy but no associated procedures. Lesson plans were available to view which showed that appropriate activities were being carried out to allow students to meet the learning objectives. Timetables for courses are available for students.
- The discussion revealed a comprehensive process for internal course approval is carried out informally between management, the facilitator, course director and tutors. There is no documented evidence of this process taking place.
- The evidence indicated that all courses are delivered by appropriately qualified and certified personnel using a variety of teaching methods. There is no documented policy or associated procedures for course delivery. RI representatives stated that student induction takes place for each course but this is currently not documented. Attendance sheets were viewed and are maintained. Students have the opportunity to meet with their tutor – one to one - for feedback on their progress on a weekly basis and this is documented (Tutorials). The student portfolio is available for review
- There is no formal documented procedure in place for carrying out course reviews. However evidence was provided in discussions that regular formal and informal meetings take place to discuss training activities and student feedback. Student course evaluations were in evidence and it was indicated in discussion that these

were analysed after each course, there was no documented evidence to support this available. There was evidence to suggest that students and faculty have the opportunity to provide feedback on course activities. Students have to opportunity to make contact with management throughout their course.

- Assessment activities are carried out by PHECC on some courses and they have responsibility for these activities. Responsibility for responder exams is with the RI. There is an exam policy and associated procedures in place for carrying out these exams and for the security or assessment related material. Appropriate and verifiable methods are used to carry out assessment activities. An assessment schedule is in place and students are made aware of this. Responsibility for the PHECC certification system is allocated to a named member of staff.
- RI representatives indicated in discussion that internal verification had commenced. However, there was no evidence to support this.
- External Authentication is a new process and is currently carried out by PHECC.
- There is no formal results approval process documented or in place. The course director verifies the course results recorded on the IT system. Reference is made to the assessment and awards policy
- There is a formal procedure in place to deal with complaints, which includes assessment activities. There is no evidence that students have an opportunity to appeal their results or that they are informed of the right to appeal at any stage.

3.0 Conclusions and Outcomes

The findings from this review indicate that the recognised institution met or part met 97% of the quality standards set out in the PHECC quality review framework. There are policies and procedures in place that indicate a commitment to internal quality assurance. The evidence presented during discussions indicated that processes were in place to support the work. These affirmations would be supported by the development of documented verifiable evidence. The systems in place provide an oversight at all levels in the organisation to ensure continuous quality improvement is embedded in the organisation. The updates and revisions highlighted during discussions, when implemented as part of the quality improvement plan, will enhance the RI's continued commitment to meet the PHECC quality standards and best practice for a centre of education and training.

The RI is advised to review the content of this report and identify areas for improvement; including optional actions to support continuous quality improvement. These actions will form the basis of the quality improvement plan, the next step in PHECC's quality review process.

PHECC and the Quality Review Panel would like to thank the institution for their cooperation and courtesy during the visit and look forward to their continuing support throughout the process.