



First Aid for Life

Quality Standards Review On-Site Report

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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 (QRF). 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 (QIP). 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	First Aid for Life
Profile	A private company and a PHECC recognised institution since 2011.
PHECC courses being delivered	Cardiac First Response – Community Cardiac First Response – Advanced Emergency First Response
Higher Education Affiliation	None
Address	15 Cleevaun, Naas, Co Kildare.

1.2 Reports Details

Date of on-site visit	18-07-16
Quality Review Panel (QRP)	
P Collins	QRP Chair – Independent
J Donaghy	QRP Member – Independent
K Walsh	QRP Member – PHECC
RI Representatives	
Pat Reid	Company Director/Instructor
Date of Council Approval	15-12-16

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 Cardiac First Response (CFR) and Emergency First Response (EFR) courses were selected to provide context.

2.0 Review Findings

2.1 Meetings and Discussions

Type	Comments
Entry Meeting	The QRP met with ONE representative on arrival. Following introductions, the panel chairperson outlined the agenda for the visit and the process that would be followed.
Staff Discussions	None
Learner Discussions	None
Exit Meeting	The QRP met with one representative. 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	All the RIs training activities take place in external venues.
Resources	Resources are stored at the RIs main office and allocated from here for each course. Adequate resources were viewed and are available for each course on offer.

2.3 Evidence Reviewed – Documents/IT

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

- Website
- Organisational Chart
- Record Management Policy
- Student Records
- Faculty Management Spreadsheet
- Faculty Certs
- Student Assessment Sheet
- Courses Evaluation Form
- Course Directors Report
- Risk Assessment Forms
- Premises Selection Criteria
- Course Directors Report
- Service Level Agreement
- Student Pre course Letter
- Resource Checklist
- Tax and Insurance Details
- Mission Statement
- Equality and Access Policy
- Letter – reference premises requirements
- RPL Policy
- Complaints and Appeals Policy
- Venue Checklist
- Health and Safety Statement
- Faculty Development Pathway Diagram
- Staff Recruitment and Development Policy
- Course Development Policy
- Lesson Plans
- Sign in Sheets
- Assessment Procedures

2.4 Quality Standards – Review

Section One: Organisational Structure and Management	
Standard	QRP Findings
<p>1.1 Governance - The Institution has clear lines of authority and engages a system of accountability for PHECC approved courses.</p>	<p>The organisational chart was available for review and reflects the overall structure of the organisation. It is being updated to reflect current practice. During discussions the RI representative outlined a process for internal course approval and results approval. Evidence was provided of results being checked. However these procedures were not documented at the time of review. Courses are submitted to PHECC for approval as per guidelines. Evidence was provided that self-assessment has been carried out, with the PHECC RISAR and quality improvement plan being utilised. A Policy and associated procedures need to be developed to formalise these processes and integrate stakeholder feedback.</p>
<p>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.</p>	<p>There is a documented policy and procedures for records management. These procedures are being updated to reflect current practices and relevant data protection legislation. Computers are password protected and access is limited to authorised personnel. Student records are kept in hard copy and are stored in a secure location in the main office. Student records were reviewed and were found to be satisfactory. The database for faculty was reviewed and was found to be effective in managing faculty records. Quantitative measures are in place to capture relevant information to inform practice. PHECC certification is carried out according to guidelines.</p>
<p>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.</p>	<p>The company director has overall responsibility for the quality assurance of PHECC approved courses as evidenced on the organisational chart. During discussions the RI representative outlined how faculty members are made aware of their responsibilities for the quality of PHECC approved courses. However there was no documented evidence to support this. There was evidence provided that internal verification has taken place. However there is no documented policy or procedures in place to support these activities.</p>
<p>1.4 Self-Assessment, External Evaluation and Improvement Planning - The Institution carries out internal assessment and</p>	<p>A quality policy and procedures are documented and are being updated to reflect current practice. Evidence was provided which showed that procedures are in place to monitor the PHECC approved course. While there was evidence of student and faculty feedback there was no</p>

<p>engages in a quality improvement planning process (annually) which includes external evaluation.</p>	<p>evidence to show that this was utilised during self-assessment. The PHECC RISAR and quality improvement plan were utilised for the self-assessment and will be updated with agreed actions following the review process.</p>
<p>1.5 Transparency and Accountability - The institution conducts its activities in an open and transparent manner.</p>	<p>The RI website and promotional material provides relevant information to allow potential students to make an informed choice about course participation. Course reports are completed by faculty after each course and are maintained by management. Examples of these reports were made available for review and were found to be satisfactory.</p>
<p>1.6 Administration – Administration arrangements meet the needs of all stakeholder groups.</p>	<p>During discussions the RI representative outlined the procedures for course administration pre, during and post course. Evidence was provided to show these activities had been carried out. Student documentation was reviewed to verify these activities. Plans are in place to document all relevant activities.</p>
<p>1.7 Financial Management - The institution manages its' finances in a responsible manner that meets the needs of all stakeholders.</p>	<p>The RI is fully compliant with all relevant financial requirements and PHECC has verified this prior to the on-site review.</p>

Section Two: The Learning Environment

Standards	QRP Findings
<p>2.1 Education and Training Mission Statement - The Mission of the Institution is appropriately focused with education and training as a core activity.</p>	<p>The RI demonstrates its commitment to quality training in pre hospital emergency care through its mission statement. The RI communicates its mission statement to all stakeholders through its website, on relevant documentation and it is displayed in the main office.</p>
<p>2.2 Communication with Students and Other Stakeholders - Two way communication systems are in place between faculty, students and other stakeholders as appropriate.</p>	<p>During discussions and in their RISAR the RI outlined a range of methods used to communicate with students and associated stakeholders, including online feedback, evaluation forms and formal and informal meetings. Students have the opportunity throughout their course to meet with their instructor one to one to discuss any issues they may have. Documented evidence was provided for review to support these activities.</p>
<p>2.3 Course Access, Transfer and Progression - Course information in clear, access is fair and consistent, with recognition of prior learning, as appropriate.</p>	<p>The RI has an equality and access policy which was available to view. This policy and associated procedures are to be updated to reflect current practice. The website and promotional material provides potential students with sufficient information to make an informed choice about participation in a course. There is an RPL policy in place for relevant courses. This policy is to be updated.</p>
<p>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.</p>	<p>The RI has an equality and access policy which was available to view. This policy and associated procedures are to be updated to reflect current practice. There was no evidence that information or training on equality and diversity is provided to faculty. During discussions RI representative outlined and gave examples of how they accommodate individuals with additional support needs. These activities are not documented. It was also indicated that codes of practice were being developed and made available to faculty. However at time of review there are no codes of practice documented.</p>
<p>2.5 Complaints and Appeals - Complaints and Appeals Processes are open, transparent and accessible to students and other stakeholders.</p>	<p>The RI has documented policies on complaints and appeals which were available for review. A flowchart outlining the steps was also in evidence. During discussions the RI indicated that these policies are to be updated and made available to all stakeholders through its website and documentation.</p>

<p>2.6 Training Infrastructure - Courses are carried in an appropriate learning environment, sufficiently resourced in order to deliver training to the highest standards.</p>	<p>During discussions the RI representative indicated that training is carried out externally in rented premises. There is evidence to show that the premises used for training activities meet the requirements for the courses on offer. There is a premises selection criteria and a checklist is completed for each course. Sufficient resources are available for each course. There is a resource checklist completed for each course. There are documented procedures for the maintenance and cleaning of equipment.</p>
<p>2.7 Health and Safety - A safe and healthy environment exists in the institution.</p>	<p>The RI has a health and safety statement which is available to all stakeholders. Health and safety procedures are in place and in line with relevant legislation. Risk assessment is carried out on each venue used for course activities and records maintained.</p>
<p>2.8 Social Environment - A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.</p>	<p>Discussions indicated that faculty are encouraged to provide students with interesting and challenging learning opportunities. Evidence provided indicated that students have positive learning experiences. The RI is fully compliant with PHECC requirements on instructor/student ratios.</p>

Section Three: Faculty Recruitment and Development

Standards	QRP Findings
<p>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.</p>	<p>There is a recruitment and development policy and associated procedures in place. These need to be updated to reflect current practice. The RI representative indicated during discussions that faculty are made aware of their quality responsibilities. However there was no documented evidence to support this. There are faculty lists in evidence for each PHECC approved course. Documentation indicates that the RI meets the minimum faculty requirements for course approval.</p>
<p>3.2 Faculty Recruitment - Faculty, are recruited on the basis of personal suitability, appropriate experience and qualifications.</p>	<p>Role descriptions were available for review but need to be updated. The RI indicated that they have selection criteria for faculty which is in line with PHECC guidelines and that senior management are involved in recruitment. Evidence was available to support this. There are faculty lists in evidence for each PHECC approved course. Documentation indicates that the RI meets the minimum faculty requirements for course approval.</p>
<p>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.</p>	<p>There are no documented procedures in place for the continuous professional development of faculty. During discussions the RI representative indicated that faculty members do receive an induction and any updates are communicated via email. There is no evidence to indicate that induction had taken place. Faculty records are maintained and they are encouraged to maintain their CPD to remain on the RIs list of instructors. Instructors are provided with opportunities to highlight upskilling requirements through formal and informal meetings. There are no records of these meetings. Plans are in place to develop a child and vulnerable adult's policy to reflect current activities.</p>
<p>3.4 Communication with Faculty - Two way communication systems are in place between management and faculty.</p>	<p>During discussions the RI representative described a range of formal and informal methods of communication between faculty and management. A course report was provided as evidence. The evidence and discussion indicated that regular communication takes place between management and faculty before, during and after each course. However there are no procedures in place to ensure these activities will take place.</p>
<p>3.5 Work Placement and Internship - Host organisations (internship)</p>	<p>Not Applicable</p>

<p>sites) are appropriate to the course content and learning outcomes to be achieved (NQEMT courses only).</p>	
<p>3.6 Faculty and Stakeholder Management - A system is in place to ensure appropriately qualified and experienced individuals are engaged by the institution.</p>	<p>The evidence provided indicates that faculty meet the minimum requirements set by PHECC to deliver courses. The system in place ensures that only instructors will valid certification all allocated to carry out courses. During discussions the RI representative stated that all new instructors are required to co present before carrying out courses individually. Faculty records are maintained and were available for review and were found to be adequate. Course documentation was reviewed and contained the information of the relevant instructor and co instructor.</p>
<p>3.7 Collaborative Provision - Appropriate contractual arrangements are in place with affiliated instructors.</p>	<p>During discussions the RI representative indicated that sub-contracting takes place and a service level agreement is in place. This was available for review. However there was no evidence of agreed quality assurance standards and procedures. The RI representative indicated that this area would be strengthened. There was no evidence that students are made aware of the role of each party.</p>

Section Four: Course Development, Delivery and Review

Standards	QRP Findings
<p>4.1 Course Development - Courses are designed to meet the requirements for PHECC approval and certification and reflect a commitment to quality improvement.</p>	<p>There is a course development policy in place which needs to be updated to reflect current practice. 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. Course information is clearly stated and outlined on the website and promotional material. Documentation also indicated that appropriate student/tutor ratios are maintained.</p>
<p>4.2 Course Approval - There are clear guidelines for course approval.</p>	<p>During discussions RI representatives outlined a process for internal course approval. However this process is not documented at the time of review. All the information required for PHECC course approval has been supplied.</p>
<p>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.</p>	<p>There is no documented policy or associated procedures for course delivery. During discussions the RI representative indicated the student induction takes place. However there was no evidence to support this. Attendance records are maintained for each course and were available for review. The evidence indicated that all courses are delivered by appropriately qualified and certified instructors. Faculty criteria checks are in place. The lesson plans viewed indicate that course content encourages students to take responsibility for their own learning and meets PHECC education and training guidelines. Students have the opportunity to meet with their instructor for feedback and remedial work. There is no documented record of these activities.</p>
<p>4.4 Course Review - Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.</p>	<p>There is no documented procedure in place for carrying out course reviews. Student course evaluation forms were available for review. During discussions RI representatives indicated that informal meetings take place to discuss training activities and student feedback. However there was no evidence to indicate these activities had taken place. There are course director's reports being completed and were available for review. The RI has submitted a quality improvement plan based on their self-assessment findings and will be updating this based on the findings from the external review.</p>
<p>4.5 Assessment and Awards - Assessment of student achievement for</p>	<p>There are documented procedures in place for PHECC approved courses. These need to be updated to reflect current practice. The evidence provided indicates that</p>

certification operates in a fair and consistent manner by all tutors and instructors in line with PHECC assessment criteria.	appropriate methods are used on all courses and it is clearly stated when PHECC assessment material is being used. Students are provided with assessment information prior to and during their course. RI representatives indicated that students are provided with reasonable accommodation on request. These requests are not documented. Assessment related material is stored centrally and only issued upon request by the instructor. There is no documented procedure for the security of assessment related material. Responsibility for the PHECC certification system is allocated to a named member of staff.
4.6 Internal Verification - There is a consistent application of PHECC assessment procedures and the accuracy of results is verified.	The RI representative indicated in discussion that internal verification takes place on all courses and there was evidence to support this. There are no documented procedures in place.
4.7 External Authentication - There is independent and authoritative confirmation of assessment and certification, where relevant, in accordance with PHECC guidelines.	External Authentication is a new process and is currently carried out by PHECC.
4.8 Results Approval - A results approval process operates in the institution.	There is no formal results approval process documented. During discussions the RI representative indicated that the instructor checks the results and they are checked again by the company director. There was evidence to support this. Once checked the results are made available and the certificates are issued to students.
4.9 Student Appeals - A process is in place for students to appeal their approved result.	There is an appeals policy in place, however this needs to be updated to reflect current practice and made available to students.

3.0 Conclusions and Outcomes

The findings from the review indicates that the recognised institution met or part met 100% of the applicable quality standards set out in the PHECC quality review framework. The evidence provided during discussions and documented evidence indicate that the RI is committed to ensuring the quality of PHECC approved courses and the continuous quality improvement of associated activities. There are systems in place supported by policies and procedures. However the policies and associated procedures need to be updated to reflect current practices. The evidence also indicated that the controls around external instructors need to be strengthened to ensure the quality of PHECC approved courses is consistent across all courses and associated activities. When complete this will provide evidence of a commitment to the ongoing quality assurance of PHECC approved courses. The updates and revisions highlighted during discussions, when implemented as part of the quality improvement plan, will ensure that the RI meets all the PHECC quality standards. The evidence provided would support the conclusion that the RI's activities when supported by updated policies and procedures meet the requirements to carry out PHECC approved courses.

