



Sinnott Training and Certification Ltd

Quality Standards Review On-Site Report

Table of Contents

1.0 Introduction	1
1.1 Institution Details	2
1.2 Reports Details	3
1.3 Scope of the Review	3
2.0 Review Findings	4
2.1 Meetings and Discussions	4
2.2 Observation of Facilities and Resources	4
2.3 Evidence Reviewed – Documents/IT	5
2.4 Quality Standards – Review	6
3.0 Conclusions and Outcomes	14
Appendix 1: Comments and Feedback from Sinnott Training and Certification Ltd	15

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	Sinnott Training & Certification Ltd.
Profile	A private company and a PHECC recognised institution since 2009
PHECC courses being delivered	Cardiac First Response – Community Cardiac First Response – Advanced
Higher Education Affiliation	None
Address	Unit 8 Ballycummin Village Raheen, Limerick

1.2 Reports Details

Date of on-site visit	03-06-16
Quality Review Panel (QRP)	
P Collins	QRP Chair – Independent
J Beecher	QRP Member – Independent
K Walsh	QRP Member – PHECC
RI Representatives	
Seamus Sinnott	Managing Director
Date of Council Approval	03-06-2016

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) courses were selected to provide context.

2.0 Review Findings

2.1 Meetings and Discussions

Type	Comments
Entry Meeting	The QRP met with two representatives 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	The RIs facility contains several training rooms, a reception area, toilets and office space. Training also takes place in external venues.
Resources	Resources for onsite courses are stored in the main facility. Instructors are responsible for ensuring the necessary resources are in place for course run externally.

2.3 Evidence Reviewed – Documents/IT

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

- Website
- Organisational Chart
- Data Protection Policy
- Student Records
- Course Checklist
- Faculty Certs
- Assessment Sheet
- Trainer Evaluation Form
- IT System
- Equality and Diversity Policy
- Administrative Checklist
- Tax and Insurance Details
- Mission Statement
- Admissions Policy
- RPL Policy
- Complaints Policy
- Grievance Procedures
- Safety Statement
- Quality Policy
- Recruitment Policy
- Course Development Policy
- Lesson Plans

2.4 Quality Standards – Review

Section One: Organisational Structure and Management	
Standard	QRP Findings
1.1 Governance - The Institution has clear lines of authority and engages a system of accountability for PHECC approved courses.	The organisational chart reflects the overall structure of the organisation and the reporting lines for operational activities within the RI associated with PHECC approved courses. During discussions the RI representative outlined a comprehensive process for internal course approval. However this process is not documented at the time of review. Courses are submitted to PHECC for approval as per guidelines. Results approval is carried out as per PHECC guidelines. Self-assessment has been carried out with the PHECC RISAR and quality improvement plan being utilised. Evidence was provided to show the inclusion of students, faculty, clients and an independent individual with quality experience in the self-assessment process. Quality team being established.
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.	There is a documented policy and procedures for data protection and information management. Student and faculty records are stored in the main office in hard and soft copy. Computers are password protected and access is limited to authorised personnel. The database for faculty was reviewed and was found to be effective in managing faculty records. Student portfolios were also available for review and were found to be satisfactory. Quantitative measures are in place to capture relevant information to inform practice. A comprehensive IT system has been developed to capture information. Procedures are in place to ensure this information is analysed to inform daily practices. PHECC certification is carried out according to guidelines.
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.	The managing director has overall responsibility for the quality assurance of PHECC approved courses. This is evident from the organisational chart and this responsibility is documented. Evidence was provided of quality checks being carried out on documentation and follow up actions. Meetings are held with faculty making them aware of their responsibilities for quality assurance. There are records maintained of these meetings. Induction for new instructors is carried out. However there is no documented evidence of this taking place. There is a system in place for internal verification. However there is no documented policy or procedures.

<p>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.</p>	<p>There are a policies and procedures in place to support the quality assurance of PHECC approved courses. The RI is putting in place a quality team and the quality management system is being upgraded to reflect changes. Evidence was provided of stakeholder involvement in the self-assessment process. An IT system is in place with defined performance measures which trigger an internal evaluation if the results fall below the set targets. This system was reviewed and found to be a significant contributing factor in the quality assurance processes. These processes are not documented. 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. During discussions RI representatives indicated that course reports are not completed for each course. This has been identified by the QRP as an area for improvement and the RI indicated that a course report will be completed for each course.</p>
<p>1.6 Administration – Administration arrangements meet the needs of all stakeholder groups.</p>	<p>There are comprehensive documented procedures in place for course administration tasks. Evidence was provided of an administrative checklist for pre/during and post course tasks. Course folders were presented for review and were found to be complete as per documented procedures.</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
2.1 Education and Training Mission Statement - The Mission of the Institution is appropriately focused with education and training as a core activity.	The RI demonstrates its commitment to quality training 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 training facility.
2.2 Communication with Students and Other Stakeholders - Two way communication systems are in place between faculty, students and other stakeholders as appropriate.	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. These processes are documented. Students have the opportunity throughout their course to meet with their instructor one to one to discuss any issues they may have.
2.3 Course Access, Transfer and Progression - Course information in clear, access is fair and consistent, with recognition of prior learning, as appropriate.	There is a documented admissions policy and procedures which was reviewed. 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 information is provided to students on request.
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.	The RI has an equality and diversity policy in place which was available to view. During discussions RI representatives outlined how they accommodate individuals with additional support needs. These activities are documented. The RI representative indicated that instructors are in compliance with relevant legislation and provided with information on equality and diversity. There was no evidence provided that training and information regarding equality and diversity is provided to faculty. There are codes of practice documented which were available to view.
2.5 Complaints and Appeals - Complaints and Appeals Processes are open, transparent and accessible to students and other stakeholders.	The RI has documented policies on complaints and appeals. Stakeholders are directed to the website for information on the complaints policy and procedures. During discussions the RI indicated that these policies are to be updated.
2.6 Training Infrastructure - Courses are carried in an appropriate learning	The main training facilities provides a safe, clean, welcoming and comfortable learning environment. During discussions RI representatives indicated that training is carried out externally

<p>environment, sufficiently resourced in order to deliver training to the highest standards.</p>	<p>in rented premises. There is currently no documented evidence to show that the premises used for training activities outside the main facility meet the requirements for the courses on offer. Sufficient resources are available for each course. There is no documented evidence of the resources for each course. There is documented procedures for the maintenance and cleaning of equipment. Plans are in place to update these procedures in line with current practice on course delivery.</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.</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 robust recruitment policy and procedures in place. Evidence was provided of the recruitment process and associated activities. There are faculty lists in evidence for each PHECC approved course. There is evidence that the role and responsibility of faculty members for the quality assurance of PHECC approved courses is communicated. 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>The RI indicated that they have selection criteria for faculty which is in line with PHECC guidelines and that senior management are involved in the recruitment of faculty members. There are documented role descriptions in evidence.</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 documented procedures in place for the continuous professional development of faculty. During discussions the RI representative indicated that faculty members do receive an induction. There is no evidence to support this. 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.</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. The RI stated in their RISAR that faculty have the opportunity to provide feedback during and after their course. However these procedures are not documented.</p>
<p>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).</p>	<p>Not Applicable</p>
<p>3.6 Faculty and Stakeholder Management - A system is</p>	<p>Information on faculty is maintained in hard copy and on the RI's computer system and was available to view. Evidence</p>

<p>in place to ensure appropriately qualified and experienced individuals are engaged by the institution.</p>	<p>provided indicates that faculty meet the minimum requirements set by PHECC to deliver courses. The system in place notify management when instructors are due for recertification. During discussions the RI stated that observation of faculty is carried out before course approval. Course documentation was reviewed and contained the information of the relevant 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 arrangements and contracts are in place. Evidence was provided to indicate that the responsibility for the quality assurance of PHECC approved courses is consistently applied by all instructors. Students are made aware of the role of each party.</p>

Section Four: Course Development, Delivery and Review

Standards	QRP Findings
4.1 Course Development - Courses are designed to meet the requirements for PHECC approval and certification and reflect a commitment to quality improvement.	There is a course development policy in place. There is a need to document the procedures for course development outlined in discussions. 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.
4.2 Course Approval - There are clear guidelines for course approval.	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.
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.	There is a course delivery policy. The evidence indicated that all courses are delivered by appropriately qualified and certified instructors. Faculty criteria checks are in place. The RI representative stated that an induction takes place prior to each course but this is currently not documented. Attendance sheets are maintained for each course and were available for review. 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.
4.4 Course Review - Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	The course review policy was noted with evidence to show that these activities have taken place for PHECC approved courses. 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 currently no course director's reports being completed. 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.
4.5 Assessment and Awards - Assessment of student achievement for certification operates in a fair and consistent manner	There are documented procedures in place for PHECC approved courses. The evidence provided indicates that 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

by all tutors and instructors in line with PHECC assessment criteria.	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 a 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. There are no documented procedures in place. There is evidence of course documentation being checked by way of the administrative checklist. Modifications to this checklist are planned to record evidence of internal verification.
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. The instructor checks the results and they are recorded on the IT system. 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 no appeals policy in place at the time of review.

3.0 Conclusions and Outcomes

The findings from the review indicate that the recognised institution met or part met 97% of the applicable quality standards set out in the PHECC quality review framework. There are policies and procedures in place and a robust quality management system that indicate a commitment to internal quality assurance and continuous quality improvement. The systems in place provide oversight at all levels in the organisation which ensures that the quality assurance of PHECC approved courses is carried out in an effective and efficient manner. 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 and best practice for a centre of education and training. The evidence would support the conclusion that the RI's current activities meet the requirements to carry out PHECC approved courses.

Appendix 1: Comments and Feedback from Sinnott Training and Certification Ltd



Sinnott Training & Certification
Ltd. Unit I IA Ballycummin
Village Raheen
Limerick
September 1,
2016

Dear Kathleen,

Firstly, let me thank you and your team for the time and effort you **put** into our quality improvement review. We found the visit to be very beneficial to our improvement process and upon review of your report will continue to drive forward with this project.

We have found two minor points within your report.

4.3 Course delivery, you stated 'no document policy or associated procedure for course delivery' Our course delivery policy was available and reviewed by the team on the day. We accept it is in need of review and associated procedures will be developed.

4.4 Course Review, you stated 'no documented procedure in place for course reviews' Our course evaluation policy was reviewed on the day and discussed in detail. We accept that course director reports need to be included into this process.

I have attached the two policy stated above for your information.

Thank you again for all of your feedback, we hope to make good process on our quality management trough out 2016 & 2017

Sincerely,

A handwritten signature in blue ink, appearing to read 'S. Sinnott', is written over a light blue horizontal line.

Seamus Sinnott,
Managing Director
061 595290