

# Irish Underwater Council

Recognised Institution Quality Standards Review On-Site Report

# **Table of Contents**

1.0 Introduction	1
1.1 Institution Details	
1.2 Reports Details	
1.3 Scope of the Review	
2.0 Review Findings	
2.1 Meetings and Discussions	4
2.2 Observation of Facilities and Resources	
2.3 Evidence Reviewed – Documents/IT	5
2.4 Quality Standards – Review	6
3.0 Conclusions and Outcomes	

#### 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	Irish Underwater Council
Profile	A private company and a PHECC recognised institution since 2009.
PHECC courses being delivered	Cardiac First Response – Community Cardiac First Response – Instructor
Higher Education Affiliation	None
Address	78A Patrick Street, Dun Laoghaire, Dublin

## 1.2 Reports Details

Date of on-site visit	21-07-16
Quality Review Panel (QRP)	
P Collins	QRP Chair – Independent
J Donaghy	QRP Member – Independent
K Walsh	QRP Member – PHECC
RI Representatives	
Louise Gilligan	General Manager
Sarah Campbell	Course Administrator
Róisín McGuire	CFR Instructor
Date of Council Approval	15-12-2016

## 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) course was selected to provide context.

# 2.0 Review Findings

# 2.1 Meetings and Discussions

Туре	Comments
Entry Meeting	The QRP met with three representatives on arrival. Following introductions, the panel chairperson outlined the agenda for the visit and the process that would be followed.
Staff Discussions	Two members of staff present for the full review.
Learner Discussions	None
Exit Meeting	The QRP met with two representatives. 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 selected courses. External Instructors are responsible for providing and maintaining appropriate resources for each course they deliver.

### 2.3 Evidence Reviewed - Documents/IT

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

- Website
- Organisational Chart
- Activity Flowcharts
- Procedure Manual
- Data Protection Policy
- Refund Policy
- Quality Policy
- RPL Policy
- IT System
- Faculty Records
- Faculty Statement
- Student Records
- Course Checklists
- Courses Evaluation Form
- Course Booklet
- Codes of Conduct
- Garda Vetting Policy
- Office Procedure Manual
- Tax and Insurance Details
- Mission Statement
- Equality and Diversity Policy
- HR Procedures
- Complaints and Appeals Policy
- Equipment Maintenance Log
- Health and Safety Statement
- Member Survey
- Child and Vulnerable Persons Policy
- Records of Meetings
- Student and Instructor Declaration Form
- Sign in Sheets
- CFR Assessment Policy

# 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 was available for review and reflects the overall structure of the organisation. It clearly indicates those responsible for the quality assurance of PHECC approved courses. During discussions the RI representative outlined a process for internal course approval and results approval. Flowcharts were available for review and evidence was provided of these activities being carried out. Evidence was provided that self-assessment has been carried out, with the PHECC RISAR and quality improvement plan being utilised.
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 the RI has a designated data protection officer in place. The RI has a comprehensive IT system in place for the management of student and faculty records. Computers are password protected and access is limited to authorised personnel. Hard copy records 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.
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.	There National Diving Officer 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. There was documented evidence to support this. There was evidence provided that internal verification has taken place. The internal verifier was present during the review process.
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	The RI has a quality policy and procedures documented. Evidence was provided which showed that procedures are in place to monitor PHECC approved courses. Evidence was provided which showed that stakeholders were involved in the self-assessment process. There was also evidence that the RI is engaged in activities that support the continuous quality improvement of courses and services. The PHECC RISAR and quality improvement plan were utilised for the self-

includes external evaluation.	assessment and will be updated with agreed actions following the review process.
1.5 Transparency and Accountability - The institution conducts its activities in an open and transparent manner.	The RI website and promotional material provides relevant information to allow potential students to make an informed choice about course participation. Members are provided with a detailed course booklet which was available for review. At the time of review course reports are not completed by faculty.
1.6 Administration – Administration arrangements meet the needs of all stakeholder groups.	During discussions RI representatives 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. Administrative procedures are outlined in the office procedures manual which were reviewed. The RI IT system was reviewed and found to be effective in managing and maintaining relevant records and information.
1.7 Financial Management - The institution manages its' finances in a responsible manner that meets the needs of all stakeholders.	The RI is fully compliant with all relevant financial requirements and PHECC has verified this prior to the on-site review.

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. At the time of review the mission statement was scheduled for a review and update to reflect current activities. The RI communicates its mission statement to all stakeholders through its website and on relevant documentation.
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 comprehensive range of methods used to communicate with students and associated stakeholders, including evaluation forms, regularly scheduled meetings, ezine, magazine etc. Evidence was provided to show that 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.	The RI has clear entry criteria documented for entry to PHECC approved courses. The website and promotional material provides potential students with sufficient information to make an informed choice about participation in a course. There is a documented Recognition of prior Learning (RPL) policy in place which is made available to all stakeholders and was available for review. It was found to be in line with PHECC guidelines on RPL.
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 which was available to review. There was evidence that information and 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. At the time of review these activities were not recorded. Codes of practice are documented and made available to faculty and associated stakeholder.
2.5 Complaints and Appeals - Complaints and Appeals Processes are open, transparent and accessible to students and other stakeholders.	The RI has documented procedures for complaints and appeals which were available for review. During discussions and in their RISAR the RI outlined the processes for appeals and complaints which are made available to all stakeholders through relevant documentation.
2.6 Training Infrastructure - Courses are carried in an appropriate learning	During discussions the RI representative indicated that training is carried out externally in pre-approved premises.  There is evidence to show that the premises used for training

environment, sufficiently resourced in order to deliver training to the highest standards.	activities meet the requirements for the courses on offer. There is a premises selection criteria for each course. Sufficient resources are available for each course from head office. There is a resource checklist for each course. There is documented procedures for the maintenance and cleaning of equipment and a maintenance log is maintained.
2.7 Health and Safety - A safe and healthy environment exists in the institution.	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.
2.8 Social Environment - A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.	Evidence provided through the evaluation forms and survey results indicated that students have positive learning experiences. The RI is fully compliant with PHECC requirements on instructor/student ratios.

Section Three: Faculty Recruitment and Development	
Standards	QRP Findings
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.	There is a recruitment and development policy and associated procedures in place. RI representatives indicated during discussions that faculty are made aware of their quality responsibilities. Evidence was provided to support this. There are comprehensive records available for review of faculty activities associated with PHECC approved courses.  Documentation indicates that the RI meets the minimum faculty requirements for course approval.
3.2 Faculty Recruitment - Faculty, are recruited on the basis of personal suitability, appropriate experience and qualifications.	A role description and selection criteria for each position is documented and available for review. Documentation indicates that the RI meets the minimum faculty requirements for course approval. During discussions and in their RISAR the RI outlined their process for faculty recruitment. Evidence was available to demonstrate these activities taking place.
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.	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 and any updates are communicated via email. There is evidence to indicate that induction had taken place. Instructors are provided with opportunities to highlight upskilling requirements through formal and informal meetings. There are records of these meetings. Faculty are encouraged to maintain their CPD through membership and affiliation with external agencies. Evidence was provided of the RIs membership and affiliation to a range of external agencies Plans are in place to update the child and vulnerable adult's policy to reflect current changes in legislation.
3.4 Communication with Faculty - Two way communication systems are in place between management and faculty.	During discussions the RI representative described a range of formal and informal methods of communication between faculty and management. Evidence and discussion indicated that regular communication takes place between management and faculty before, during and after each course. Procedures are in place to ensure that formal meetings take place. Records of these meetings are maintained.
3.5 Work Placement and Internship - Host organisations (internship sites) are appropriate to the course content and learning outcomes to be	Not Applicable

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.	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 co-instruction takes place before instructors can carry out courses individually. RI representatives also indicated that instructors are monitored. These activities are documented. Faculty records are maintained and were available for review and were found to be accurate and up to date. Instructor details was evident on course documentation.
3.7 Collaborative Provision - Appropriate contractual arrangements are in place with affiliated instructors.	Not Applicable

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 procedure in place. Course material was reviewed which showed that appropriate activities were being carried out to allow students to meet the learning objectives. Timetables for courses are available for students. During discussions RI representatives outlined the procedures for implementing updates and changes to courses. Evidence was provided indicating these activities have taken place. 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. This process is documented and evidence was provided of these activities. 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 documented policy and 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. 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.
4.4 Course Review - Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	There is no documented procedure in place for carrying out course reviews. Student course evaluation forms were available for review. During discussions and in their RISAR RI representatives indicated that instructor feedback is obtained informally. However there is a range of regularly scheduled meetings that take place. Records of these meetings are available for review. At the time of review no course instructor reports were 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 by all tutors and instructors in line with PHECC assessment criteria.	There is a documented policy and procedures in place which needs to be updated to reflect current practice. 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 and during their course. RI representatives indicated that students are provided with reasonable accommodation on request. At the time of review there was no evidence of these activities taking place.  Assessment related material is stored centrally and only issued upon request by the instructor. 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 currently carried out by PHECC.
4.8 Results Approval - A results approval process operates in the institution.	During discussions the RI representative indicated that the instructor checks the results and they are checked again by the administrator. 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 which is communicated to students in relevant documentation.

#### 3.0 Conclusions and Outcomes

The findings from the review indicate that the recognised institution met or part met 100% of the applicable quality standards set out in the PHECC quality review framework. There are comprehensive, up to date and relevant policies and procedures in place that indicate commitment to internal quality assurance and continuous quality improvement (CQI). The evidence also indicated that the RIs systems provide a robust oversight of all activities and ensure that students have a comprehensive and rewarding learning experience. They also ensure 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.