

QUALITY REVIEW FRAMEWORK Continuous Quality Improvement Toolkit



Published by:

Pre-Hospital Emergency Care Counci

2nd Floor, Beech House Millennium Park Osberstown Naas Co Kildare W91 TK7N Ireland

Phone: +353 (0)45 882042 Fax: + 353 (0)45 882089 Email: info@phecc.ie Web: www.phecc.ie

© Pre-Hospital Emergency Care Council 2019

TABLE OF CONTENTS

1. CONTINUOUS QUALITY IMPROVEMENT	2
1.1 Introduction	2
1.2 What is Continuous Quality Improvement? 2	2
1.3 Core Concepts of CQI	3
1.4 Commitment and Principles	3
1.5 The Quality Improvement Cycle	1
2. SAMPLE QUALITY ASSURANCE TOOLS	5
Tool 1: Sample Quality Assurance Policy	5
Tool 2: Sample Quality Improvement Framework	ŝ
Tool 3: Sample Key Performance Measures	3
Tool 4: Guide to Internal Verification 10)
Tool 5: Guide to External Authentication 11	1
Tool 6: Guide to the Self-Assessment Report 14	1
Tool 7: Guide to the Quality Improvement Plan 15	5
Tool 8: Sample Quality Assurance Calendar 16	ŝ

3. SUMMARY	1	8
------------	---	---

1.1 Introduction

Every Recognised Institution (RI) and Approved Training Institution (ATI) delivering courses on behalf of the Pre-Hospital Emergency Care Council (PHECC) has a responsibility for quality assuring and continuously improving the standard of the courses and associated services that it delivers. Each RI/ ATI should have arrangements in place to ensure that its provision is of a high standard and that student and other stakeholder needs are met.

This Continuous Quality Improvement (CQI) toolkit contains a range of tools that will assist you in improving the quality of your education and training. It supports a proactive, systematic approach to monitoring, reviewing and enhancing education and training activities. It is provided, with the PHECC Self-Assessment Toolkit, to support RIs/ATIs in meeting the standards outlined in the PHECC Quality Review Framework.

1.2 What is Continuous Quality Improvement?

CQI is an approach to quality management that builds on traditional quality assurance methods by emphasising the organisation and systems.

- It focuses on process rather than the individual.
- It acknowledges both internal and external stakeholders.
- It promotes the need for objective data to analyse and improve processes.
- It is a management approach that, rather than subscribing to the theory that "if it's not broke, don't fix it", holds that most things can be improved.

1.3 Core Concepts of CQI

- Quality is defined as meeting and/or exceeding the expectations of stakeholders.
- Success is achieved through meeting the needs of service users.
- Most problems are found in processes, not in people. CQI does not seek to blame, but rather to improve processes.
- Unintended variation in processes can lead to unwanted variation in outcomes, and therefore you should seek to reduce or eliminate unwanted variation.
- It is possible to achieve continual improvement through small, incremental changes.
- Continuous improvement is most effective when it becomes a natural part of the way everyday work is done.

1.4 Commitment and Principles

A commitment to continuously improve courses and associated services should be clearly stated. This commitment should be underpinned by the following principles:

- Compliance with all legal, statutory and quality standard requirements.
- Following a robust and comprehensive Quality Assurance System (QAS).
- Systematic monitoring and reviewing of the QAS to ensure its relevance and effectiveness.
- Setting performance measures and targets by which effectiveness can be measured and areas for improvement identified.
- Facilitating open communication and feedback to measure performance and identify areas for improvement.

CONTINUOUS QUALITY IMPROVEMENT

- Communicating the QAS throughout the organisation and, where relevant, to key stakeholders.
- Providing sufficient resources to ensure the organisation can operate according to the QAS policies and procedures.
- Recruiting and developing personnel so as they have the skills required to provide the highest-quality service to all stakeholders.
- Acknowledging innovation and success.

1.5 The Quality Improvement Cycle

The Quality Improvement Cycle (QIC) (Fig. 1) is a series of interconnected activities ensuring a systematic approach to continuously improving the quality of education and training activities and associated services.

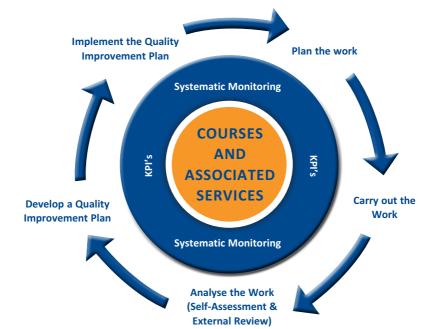


Figure 1: The QIC

Tool 1: Sample Quality Assurance Policy

How can we use this tool?

- To produce a quality assurance policy for the organisation.
- To help personnel understand the range of activities used to help improve the quality of provision.
- To provide a checklist to map against current quality improvement activities and identify any gaps.

Sample Quality Assurance Policy

The following policy sets out a minimum entitlement for all students on courses with [INSERT NAME]. We are committed to ensuring that the quality of education and training we deliver is of a high standard that meets the identified needs of individual students and associated stakeholders. We are committed to having in place quality improvement activities that underpin the delivery of learning, showing how the quality of the student experience is to be assured and improved. We will:

- Produce a quality assurance system that clearly defines how education and training activities are to be carried out, provides for objective oversight, and meets all PHECC requirements for delivering quality education and training.
- Systematically collect, analyse and use student, personnel and other stakeholder feedback. Information gathered will be used to bring about improvements to the services we offer. The results of actions taken will be shared with students, personnel and other stakeholders.
- Provide sufficient, appropriate learning resources and employ suitably competent and experienced personnel to ensure that the quality of the student experience is consistently of a high standard.

- Systematically review key documents, processes and procedures to ensure they meet the needs of students, the organisation and, where relevant, statutory and legislative requirements.
- Maintain records associated with all education and training activities and make them available for internal and external review. Ensure that records meet the requirements of the organisation, awarding bodies and any other internal and external stakeholders.
- Systematically check that policies and procedures are up to date, reflect current practice, and are being adhered to by all personnel.
- Develop clearly defined performance measures associated with all education and training activities.
- Systematically collect, analyse and use information on student characteristics, retention, achievement and progression to identify areas for individual and organisational improvement.
- Conduct an annual self-assessment that will result in a quality improvement plan, which is used to guide quality improvement activity.
- Systematically monitor the performance of personnel and conduct regular appraisals, which lead to the setting of targets and identifying opportunities for continued professional development.

Tool 2: Sample Quality Improvement Framework

How can we use this tool?

- To identify the range of activities that the organisation needs to carry out, to quality-assure the education and training being delivered, and to ensure continuous quality improvement.
- To identify actions that the organisation should take in relation to each area of activity.
- To provide the organisation with a comprehensive quality improvement framework.

Sample Quality Improvement Framework

Activity	Actions	Responsibility	Frequency
Systematically collect, analyse and use feedback from students.			
Systematically collect, analyse and use feedback from staff.			
Systematically collect, analyse and use feedback from other stakeholders.			
Systematically collect and analyse information on student participation, achievement and progression.			
Systematically monitor and review personnel performance, including: analysis of feedback forms, observation and annual appraisal.			
Systematically review resources.			
Internally review key processes.			
Systematically review policies and procedures.			
Carry out internal verification and external authentication.			
Externally evaluate the Quality Assurance System (QAS).			
Audit learner and staff files.			
Carry out annual self-assessment and quality improvement planning.			
Participate in periodic external review of education and training activities.			

Tool 3: Sample Key Performance Measures

How can we use this tool?

- To set quality targets for each area associated with the organisation's education and training activities.
- To provide a benchmark for future performance of the organisation.
- To improve performance levels and the quality of services across the organisation.

		Mor	Monitoring			
Area						
	No. of quality-improvement tasks open.					
Managamont	No. of high-priority tasks open.					
Management of Quality	% of risk issues exceeding risk tolerance, with no mitigating actions.					
	% of processes not covered by risk analysis.					
Policies and Procedures	No. of policies and procedures that are up to date and reflect current practice.					
Education and Training	No. of registered students.					
	% of students completing courses.					
	No. of new courses offered.					
Recruitment, Management and Development	Trainer rating.					
	% of personnel who have gone through appropriate HR processes – e.g. induction, observation, performance review, etc.					
	% of personnel who have up-to-date and appropriate qualifications.					
	Personnel turnover rates.					

Sample Performance Measures

	Trainer rating.	
Teaching and Learning	Course rating.	
	No. of complaints and areas for improvement highlighted.	
	Grade analysis against national averages.	
	No. of students certified.	
Student	% of learners completing courses.	
Assessment	No. of reviews, rechecks and appeals.	
	% withdrawing or not submitting for assessment.	
	% stating satisfaction with supports.	
Student Support	% with support needs achieving certification.	
	% of students stating that the information provided was sufficient for them to make an informed choice about course participation.	
Contracted	Appropriate arrangements are in place with all those subcontracted to act for or on behalf of the organisation.	
Personnel	% of records complete for all those subcontracted to act for or on behalf of the organisation.	
Self- Assessment,	% of monitoring and review activities carried out.	
Monitoring	Up-to-date QIP in place.	
and Review	No. of quality-improvement tasks open.	

Tool 4: Guide to Internal Verification

How can we use this tool?

- To support the development of a role description for an internal verifier.
- To provide guidance for those who are responsible for carrying out internal verification.
- To develop an internal verification procedure, including a sampling strategy.
- To ensure that assessment procedures have been carried out consistently, the accuracy of results are verified and fair, and all students are being marked in a consistent way.

Internal Verification

Internal verification is a key component of the quality assurance system. It provides an opportunity for internal oversight of education and training activities, in particular student assessment. The role of the Internal Verifier (IV) is determined by the type of organisation and the scope of courses being offered. The internal verification process involves:

- Verifying that assessment procedures have been applied across all assessment activities.
- Confirming that the correct assessment techniques have been applied.
- Confirming that there is a portfolio of evidence for each student who presented for assessment.
- Ensuring that student evidence matches the assessment requirements of the course.
- Confirming student results by checking that there is evidence for each area identified in the assessment brief.

- Checking that marks and grades have been recorded correctly.
- Checking that each student has verified in writing that the evidence presented is their own work.
- Verifying that, where Recognition of Prior Learning (RPL) has been applied, the correct documentation is in the student portfolio.
- Checking for and reporting on any errors or omissions.
- Liaising with management on any issues arising from the IV process.
- Creating and maintaining accurate records of the IV process e.g. IV Report.
- Liaising with the External Verifier.
- Liaising with external bodies as required.

IV should be carried out every two months and include a sample from all teaching personnel and all courses being delivered (e.g. CFR, FAR, EMT). New teaching personnel should have their first two courses fully internally verified and be highlighted for external authentication.

Tool 5: Guide to External Authentication

How can we use this tool?

- To provide guidance for those who are responsible for ensuring that external authentication takes place.
- To develop an external authentication procedure, including a sampling strategy.
- To ensure that assessment procedures have been carried out consistently, the accuracy of results is verified and fair, and all students are being marked in a consistent way.

External Authentication

External Authentication (EA) is a key component of the quality assurance system. It provides the opportunity for external independent oversight of education and training activities, particularly student assessment. The role of the External Verifier (EV) is determined by the type of organisation and the scope of courses being offered.

The sampling strategy should be completed by the manager at the beginning of the year (determined by the organisation), in line with the guidance or requirements of the awarding body.

- 1. The EV should be engaged by the organisation and meet the following criteria:
 - Have broad subject-matter expertise in the appropriate field of learning.
 - Have the required knowledge and expertise to confirm that policies and procedures in relation to assessment are being implemented.
 - Have experience of carrying out assessment or work in the field of learning.
 - Have administrative and IT skills (e.g. report writing).
 - Be independent of your organisation, without any conflict of interest or loyalty.
 - Carry out their role as EV with integrity and professionalism.
 - Be available to liaise with external bodies as required (e.g. for external review).

2. Scheduling

When scheduling EA, consideration should be given to other assessmentrelated activities, internal verification, results approval, appeals and requests for certification. EA should take place after internal verification and before the results approval process.

3. Preparing for External Authentication

The location for EA should ensure that all required documentation and equipment is available. Relevant personnel and students should be available at the location to meet the EV, if required. The following documentation should be available:

- Course specifications and assessment methods.
- All relevant assessment instruments and supporting documentation, e.g. assessment briefs, examination papers, marking schemes and outline solutions.
- The assessment plan(s).
- All student assessment evidence.
- All student assessment results recorded on appropriate results sheet(s).
- List of courses being delivered and relevant teaching personnel.
- Internal verification report.
- The sampling strategy.

Appropriate preparation should facilitate the EV in:

- Confirming the fair and consistent assessment of students.
- Confirming that assessment techniques and instruments are appropriate.
- Reviewing the internal verification report.
- Applying a sampling strategy.
- Moderating assessment results.
- Meeting with relevant personnel and students.
- Identifying any issues/irregularities in relation to the assessment process.
- Producing an external authentication report.

- Participating in the results approval process, if agreed.
- Recommending results for approval.

4. Outputs from External Authentication

- An external authentication report.
- Quality-improvement actions.

Tool 6: Guide to the Self-Assessment Report

How can we use this tool?

- To provide an opportunity to identify areas of strength.
- To provide an opportunity to identify areas for improvement.
- To support quality-improvement planning and provide a record for internal and external review.

The Self-Assessment Report (SAR)

The SAR has four parts to be completed:

- **Evidence Examples:** List the evidence you can provide to demonstrate compliance with each component.
- **Comments:** Provide a brief summary of findings that describe why your organisation meets the Quality Standard (QS), or describe the identified gap.
- **Compliance Ratings:** Rate your performance against each component and the overall rating against each QS.
- **Compliance Level:** Highlight the appropriate compliance level against each QS.

Refer to the PHECC Self-Assessment Toolkit for more detailed information.

Tool 7: Guide to the Quality Improvement Plan

How can we use this tool?

- To support the development of the Quality Improvement Plan (QIP).
- To assign responsibility for quality-improvement actions and ensure accountability.

Quality Improvement Plan

The purpose of the QIP is to provide a summary of the improvement actions you plan to carry out to build on areas of strength and to resolve areas for improvement. Areas of strength and areas for improvement can be identified through:

- Internal Monitoring
- Self-Assessment
- External Review

Tips

When working through the self-assessment, it is not unusual to find that there is a need to strengthen quality-monitoring systems.

The QIP is an important part of the self-assessment report. It is another way to show that you have the capacity to make improvements.

The QIP should be considered as a live working document and be included as an ongoing item at regularly scheduled meetings.

Actions documented in the QIP should be clearly linked to the areas for improvement that you are seeking to address. The most useful QIP identifies

the issue or problem, responsibilities for actions, and time-frames for completion. The QIP should be used to track the progress you make against the actions you have identified. It should include the following details:

- The QS component the improvement action is relevant to.
- The issue to be dealt with.
- The planned activity to address the issue.
- The individual responsible for completing the action.
- The date the action is to be completed.
- The status of the activity (i.e. open or closed).

For more detail, refer to the QIP Template in the PHECC Self-Assessment Toolkit.

Tool 8: Sample Quality Assurance Calendar

How can we use this tool?

- To provide a model to adopt, or to adapt to the needs of the organisation.
- To plan quality-improvement activities over a 12-month period.
- To ensure that information is gathered for analysis at key points during the year, feeding into the self-assessment, the development of the quality-improvement plan and the personnel performance review.
- To support other planning documents and schedules (e.g. external authentication and review).

Sample Quality Improvement Calendar

Process	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec
Data Review and Analysis (Participation, achievement and progression)												
Student, personnel and other stakeholder feedback gathered	Fe	Feedback gathered at identified times for every course										
Observations – first course of instruction of all new personnel and random thereafter												
Internal review of student and personnel records												
Annual self- assessment & QIP development and review		QIP Review			QIP Review			QIP Review			SA & QIP update	
Internal verification (IV) and external authentication (EA)	IV & EA		IV		IV		IV & EA		IV		IV	
Review of policies and procedures												
Personnel performance reviews												
Personnel meetings												

3. Summary

This toolkit is not intended to be prescriptive. It provides guidance and a framework that RIs/ATIs can adopt as the basis of their own quality-assurance system, to ensure that PHECC quality standards are consistently met. It also provides a benchmark against which to compare internal processes, as part of a process of continuous quality improvement.

The responsibility rests with all RIs/ATIs to have systems in place to ensure that standards are being met. RIs/ATIs should extend the approaches suggested in this toolkit to meet the needs of their own organisation.

It is important to recognise that any approach to continuous quality improvement should become part of everyday practice and not be viewed as an extra requirement. To embed a culture of continuous quality improvement in the organisation requires collective effort and a willingness from all personnel to highlight areas for improvement in education and training activities.

Notes:

Notes:





Pre-Hospital Emergency Care Council

2nd Floor, Beech House Millennium Park Osberstown Naas Co Kildare W91 TK7N Ireland

Phone: +353 (0)45 882042 Fax: + 353 (0)45 882089 Email: info@phecc.ie Web: www.phecc.ie