



Pre-Hospital Emergency Care Council

Annual Report 2013

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Introduction

The Pre-Hospital Emergency Care Council (PHECC) is an independent statutory agency charged with responsibility for standards, education and training in pre-hospital emergency care in Ireland.

The Council was established as a body corporate by the Minister for Health by Statutory Instrument Number 109 of 2000 (Establishment Order) which was amended by Statutory Instrument Number 575 of 2004 (Amendment Order). These Orders were made under the Health (Corporate Bodies) Act, 1961 as amended and brought under primary legislation with the Health (Miscellaneous Provisions) Act 2007.

Under S.I. 109 Council members, excluding the chairperson, can hold office for three years or four years with lots drawn at the very first Council meeting as to which members should serve for three years and which for four years. Membership of Council is appointed by the Minister for Health.

The fourth Council is now serving since January of this year with a membership of 17 appointees, some of which are new members and some reappointed members. There are 6 Committees of Council, 2 Panels and 2 Working Groups.

Mission Statement

The Pre-Hospital Emergency Care Council protects the public by specifying, reviewing, maintaining and monitoring standards of excellence for the delivery of quality pre-hospital emergency care for people in Ireland.

Strategic Plan 2011-14

The strategic plan links the mission statement to Council functions, governance and administrative support objectives. The specific strategies associated with each individual objective are detailed. The strategic plan gives clear direction and focus and is available on our publications page on our website <http://www.phecit.ie/>.

Foreword from the Chairman and Director

On behalf of the Council, the Director and I are pleased to submit this annual report for the year ended 31st December 2013. The Pre-Hospital Emergency Care Council continues to function in the role of protecting the public by specifying, promoting and monitoring standards of excellence for the delivery of pre-hospital care for the public into the future.

The Pre-Hospital Emergency Care Council, despite uncertainties of previous years, continued to operate in its current form in 2013 and will continue to function in the role of protecting the public by specifying, promoting and monitoring standards of excellence for the delivery of pre-hospital care for the public into the future.

We had a busy year during which much was achieved such as Council adopting a new EMS regulatory terminology of Credentialing, Licensing and Privileging for all practitioners and service providers. We believed that it was important to clarify the regulatory terminology used, as some of the terms are used interchangeably depending on the healthcare location, situation, or profession involved. This terminology change resulted in the rules for CPG approved service providers being revised and approved by Council.

During the year Council also discussed the transition of the paramedic level training programme from the current vocational training model to the new higher education approach (BSc programmes). We approved an addendum to our Council rules in order to accommodate an application from a higher level institute to deliver a practitioner programme at some time in the future and in 2014 we will progress this matter further.

One of Council functions is to conduct examinations leading to the award of National Qualification in Emergency Medical Technology (NQEMT) at 3 levels and exam candidates who wish to sit the NQEMT examination must first complete the relevant course at a PHECC recognised institution. Every effort is made to ensure that the examination process is valid and reliable and to this end this year we received assurances of our process by way of correspondence from the Office of the Ombudsman upholding an examination related decision.

2013 also saw the first ever cycle of Continuous Professional Competency (CPC) being introduced for practitioners at the level of EMT. Regulated health professions, including nursing, medical and pharmaceutical, have already developed systems of Continuous Professional Development (CPD). We need to maintain this impetus and further enhance pre-hospital practitioner development if the profession is to develop in line with other healthcare professions. CPC commenced in November and CPC for Paramedic and Advanced Paramedic level will be announced in 2014 following a national consultation process.

Finally for 2013 Council are very happy to announce the collaborative work that has taken place with the National Transport Medicine Programme (NTMP). Through the work of the NTMP we have seen the development of the Neonatal Retrieval Service from a 7-day week, daytime service to a 24/7 service.

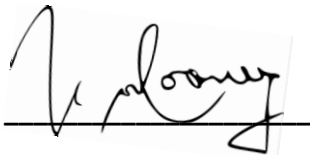
The Neonatal Retrieval Service has been delivered for the past 10 years by the Rotunda, the Coombe and the National Maternity Hospital. The extension of this service is a quantum leap and now brings

Ireland in line with international best practice in other jurisdictions such as the UK, North America and Australia.

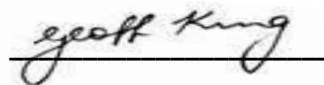
Council and the executive are extremely grateful for the expert committees covering the areas of clinical practice, standards, registration and examinations who gave so freely and graciously of their time and support to Council in our mission and our vision that people in Ireland receive the most appropriate safe pre-hospital emergency care.

We extend our appreciation to the dedicated core staff of the PHECC office who at all times bring a high degree of professionalism and efficiency to their work to facilitate the smooth operation of the Council and the various Committees.

As always we are extremely grateful for the interest shown in our work by the Minister and his Department and for their on-going support and time.

A handwritten signature in black ink, appearing to read 'Tom Mooney', written over a horizontal line.

Tom Mooney, Chair of Council

A handwritten signature in black ink, appearing to read 'Geoff King', written over a horizontal line.

Dr Geoff King, Director of PHECC

10th July 2014

Council Functions

Council met 9 times during 2013. Council members also serve on Council Committees. For attendances at Council see Appendix 1.

Council has 6 Committee's:

- Education and Standards
- Quality and Safety
- Medical Advisory
- Priority Dispatch
- Fitness to Practice
- Audit

In addition Council has the following Working Groups and Panels:

- Examination Quality Group
- Test Item Writing Group
- Appeals panel
- Examiner panel

PHECC's main functions are:

- *To ensure training institutions and course content in First Response and Emergency Medical Technology reflect contemporary best practice*
- *To ensure pre-hospital emergency care Responders and Practitioners achieve and maintain competency at the appropriate performance standard*
- *To prepare and promote the implementation of clinical practice guidelines in pre-hospital emergency care*
- *To source, sponsor and promote relevant research to guide Council in the development of pre-hospital emergency care in Ireland*
- *To prepare standards of operation for pre-hospital emergency care providers to support best practice*
- *To establish and maintain a register of pre-hospital emergency care practitioners*
- *To recognise those pre-hospital emergency care providers which undertake to implement the clinical practice guidelines.*

Council Membership

Membership at 31st December 2013

The membership of Council consists of not more than seventeen members who are appointed by the minister:

Name	Membership rationale
Mr Tom Mooney	Chair, representative of special interest or expertise in pre-hospital care
Ms Michael Dineen	Vice Chair and paramedic representative of the majority of practitioners
Mr Shane Mooney	Advanced paramedic, trade union nomination and representative of pre-hospital practitioners
Mr Tom Tinnelly	Paramedic, trade union nomination and representative of practitioners
Mr David Maher	Paramedic, trade union nomination and representative of practitioners
Mr. Robert Kidd	Recognised institution nomination – NASC/UCD
Mr. Stephen Brady	Recognised institution nomination – DFB/RCSI
Mr. Barry O'Brien	Representative of management of the HSE
Mr. Robert Morton	Representative of management of the HSE
/Martin Dunne*	
Dr. Cathal O'Donnell	Representative of management of the HSE
Prof. Patrick Plunkett	Representative of medical practitioners with expertise in pre-hospital emergency care
Dr. Mick Molloy	Representative of medical practitioners with expertise in pre-hospital emergency care
Dr. Hugh Doran	Representative of medical practitioners with expertise in pre-hospital emergency care
Ms. Valerie Small	Advanced nurse practitioner and representative of nursing with an interest in pre-hospital care
Mr. Michael Brennan	Representative of the interests of the general public
Ms. Glenna Woods	Nurse and resuscitation officer representative of persons with special interest or expertise in pre-hospital care

Mr. Thomas Keane Paramedic and representative of persons with special interest or expertise in pre-hospital care

*Note: Robert Morton was replaced by Martin Dunne on 26th November 2013

Council Committees, Panels and Working Groups

Council is assisted and advised in fulfilling its statutory functions by its Committees, Panels and Working Groups.

Quality and Safety Committee

A standing committee of the previous Council, the Clinical Care Committee, was replaced by the Quality and Safety Committee and held its first meeting in October 2013. The terms of reference specify that the committee consider and make recommendations to Council on policy matters relating to, but not confined to, criteria for registration, practitioners maintenance of competency and practice framework, information standards and clinical audit framework and service provider approval to implement clinical practice guidelines(CPGs)

Membership at 31st December 2013

Name	Membership rational
Mr Shane Mooney	Chair, member of Council and advanced paramedic
Mr Tom Mooney	Chair of Council
Ms Valerie Small	Chair of Education and Standards Committee, member of Council and registered advanced nurse practitioner
Dr Michael Molloy	Chair of Medical Advisory Committee and member of Council
Mr Michael Dineen	Vice Chair of Council and paramedic
Mr Thomas Keane	Representative from Council and paramedic
Mr David Maher	Representative from Council and paramedic
Mr Thomas Tinnelly	Representative from Council and paramedic
Ms Katrina Mullally	Representative from the HSE National Ambulance Service (NAS)
Mr Derek Nolan	Representative from Civil Defence and advanced paramedic
Mr Martin O'Reilly	Representative from DFB/RCSI and advanced paramedic
Ms Brigid Sinnott	Representative from a non-government organisation (NGO) with community focus
Dr Anthony Corcoran	Representative from the Defence Forces
Mr Ricky Treacy	Representative from St John Ambulance
Ms Brigid Doherty	Representative for patients
Mr Gregory Lyons	A representative from Irish Red Cross and emergency medical technician
Mr Ian Brennan	Representative from Order of Malta and advanced paramedic

Observational representative from CPG approved Private Ambulance Service Providers on a rotational basis

Education and Standards Committee

A standing committee of the previous Council, the Accreditation Committee, was replaced by the Education and Standards Committee and held its first meeting in October 2013. The terms of reference specify that the committee consider and make recommendations to Council on policy matters relating to, but not confined to, education and standards, recognition of institutions, recognition of equivalence of professional qualifications obtained from institutions both within and outside the state and maintenance and monitoring of institutions.

Membership at 31st December 2013

Name	Membership rational
Ms Valerie Small	Chair, member of Council and registered advanced nurse practitioner
Mr Tom Mooney	Chair of Council
Dr Mick Molloy	Chair of Medical Advisory Committee and member of Council
Mr Michael Dineen	Vice Chair of Council and paramedic
Mr Shane Mooney	Chair of Quality and Safety Committee, member of Council and advanced paramedic
Mr Stephen McMahon	Representative for patients
Ms Sarah Cain	Representative from a non-government organisation with a community focus
Ms Glenna Woods	Member of Council and registered nurse
Martin McNamara	Invited expert in education training - nursing
Ms Maeve Donnelly	Invited expert in adult education
Mr Thomas Kean	Member of Council and paramedic
Mr Shane Knox	Representative at facilitator level from a recognised institution which provides advanced paramedic training and advanced paramedic
Ms Roisin McGuire	Representative at facilitator level from the joint voluntary ambulance service committee, Civil Defence College principal and paramedic
Mr Raymond Lacey	Representative at tutor level from the Irish College of Paramedics and advanced paramedic
Mr Paul Lambert	Representative of recognised institution which provides paramedic training and advanced paramedic
Mr David Maher	Member of Council and paramedic
Mr Brian Bruno	A representative at tutor level from a recognised institution that provides paramedic training

Observational representative from CPG approved Private Ambulance Service Providers on rotational basis

Medical Advisory Committee

A standing committee of the previous Council, the Medical Advisory Group (MAG) changed its title to Medical Advisory Committee (MAC) under the new Council to reflect the fact that it was a full standing committee of Council. MAC held its first meeting in June 2013. MAC is an expert committee who consider clinical matters as referred to it either by Council, the Quality and Safety Committee or Education and Standards Committee.

Membership at 31st December 2013

Name	Membership rationale
Dr Mick Molloy	Chair
Dr Niamh Collins	Vice Chair and nominee of the HSE Emergency Medicine Programme
Dr Seamus Clarke	Nominated by the Irish College of General Practitioners
Dr Neil Reddy	General practitioner with interest in pre-hospital care
Mr Seamus McAllister	Nominated by Northern Ireland Ambulance Service (NIAS)
Dr Conor Deasy	Deputy medical director of a statutory ambulance service
Mr Michael Dineen	Vice Chair of Council and paramedic
Mr Dave Hennelly	Advanced paramedic with interest in pre-hospital care
Mr Macartan Hughes	Representative, at tutor or facilitator level of recognised institutions which provide training at advanced paramedic level (NASC)
Mr David Irwin	Paramedic and representative of the Irish College of Paramedics
Mr Thomas Keane	Paramedic and member of Council
Mr Shane Knox	Advanced paramedic and representative of NASC
Mr Declan Lonergan	Advanced paramedic and representative at tutor or facilitator level of a recognised institution which provides training at paramedic level (NAS)
Mr Joseph Mooney	Representative of emergency medical technicians on the PHECC register
Mr Shane Mooney	Advanced paramedic and Chair of Quality and Safety Committee
Mr David O'Connor	Advanced paramedic representative from the PHECC register
Mr Kenneth O'Dwyer	Advanced paramedic representative from the PHECC register
Mr Martin O'Reilly	Advanced paramedic and representative at tutor or facilitator level of a recognised institution which provides training at paramedic level (DFB)
Mr Rory Prett	Paramedic representative from the PHECC register

Mr Derek Rooney	Paramedic representative from the PHECC register
Mr Jack Collins	Emergency medical technician representative from the PHECC register
Dr Cathal O'Donnell	Medical director of a statutory ambulance service
Ms Valerie Small	Advanced nurse practitioner, representative from Emergency Medicine Nurses and Chair of Education and Standards Committee
Mr Tom Mooney	Chair of Council
Prof Stephen Cusack	Academic consultant in Emergency Medicine
Dr Peter O'Connor	Medical director of a statutory ambulance service (DFB/RCSI)
Dr David Menzies	Consultant in Emergency Medicine nominated by the Irish Association in Emergency Medicine
Dr Gerald Kerr	Director of Army Medical Corps
Dr David McManus	Representative from Northern Ireland ambulance service
Prof Gerard Bury	Registered general practitioner with an interest in pre-hospital emergency care
Dr Sean Walsh	Consultant in paediatric emergency medicine

Priority Dispatch Committee

The Priority Dispatch Committee is a Standing Committee of Council. Membership of the Priority Dispatch Committee is approved to reflect its role as an expert group to consider and advise Council on priority dispatch matters.

Membership at 31st December 2013

Name	Membership rationale
Dr Geoff King	Director PHECC
Dr Cathal O'Donnell	Medical Director of HSE national ambulance service (NAS)
Dr Conor Deasy	Deputy Medical Director of HSE NAS
Mr Michael Delaney	HSE NAS control manager, special interest in AMPDS
Ms Dawn Stephenson	HSE NAS Training and competency assurance officer, special interest in AMPDS
Mr Patrick Mooney	HSE NAS control manager, special interest in AMPDS
Mr Brian O'Connor	Calltaker/dispatcher from HSE NAS
Dr Peter O'Connor	Medical Director of Dublin Fire Brigade (DFB)

Mr John Moody	DFB, special interest in AMPDS
Mr Niall Murray	Calltaker/dispatcher from DFB
Mr Martin O'Reilly	DFB officer, special interest in AMPDS
Dr Mark Doyle	Hospital based medical practitioner with an interest in priority dispatch
Dr Mick Molloy	Chair Medical Advisory Committee
Mr Brian Power	PHECC programme development officer

Audit Committee

The audit committee is a committee of Council and reports to it on such matters as, but not confined to, adequacy of the nature, extent and effectiveness of the accounting and internal control systems, review of corporate governance, risk management, financial oversight and whistle blowers provisions.

Membership at 31th December 2013

Name	Membership rational
Mr Con Foley	Chair, external member who is qualified in accounting and auditing
Mr Dermot Magan	Finance specialist with public health sector experience
Mr Stephen Brady	Member of Council
Mr Michael Brennan	Member of Council
Ms Brain Power	Member of PHECC staff

Appeals Panel

The appeals panel is appointed by Council and considers appeals of the decisions of the Director and to adjudicate on those appeals.

Membership at 31st December, 2013

Name	Membership rational
Ms Valerie Small	Chair, Council member
Mr Stephen McMahon	Patient representative
Ms Brigid Sinnott	Representing a community group
Mr Michael Dineen	Council member
Mr Pat Sheridan	Representing a voluntary group

Examiner Panel

The terms of reference specify that the examiner panel assesses candidates at NQEMT examinations. The membership is nominated by a medical, nursing or training representative body; CPG approved pre-hospital emergency care service provider or recognised institution. Members must complete PHECC examiner training and refresher workshops as deemed necessary. The panel consists of 108 active members. Details available on <http://www.pecit.ie/>.

Examination Quality Group

In order to reflect that the examinations quality committee was not a full standing committee of Council the name was changed to Examination Quality Group under the new Council. Criteria for membership of the examination quality group is that members must be on the PHECC examiner panel. The terms of reference of the group dictates that it reviews examination components including content in addition to examiner criteria, training and performance.

Membership at 31st December, 2013

Name	Membership rational
Ms Jacqueline Egan	Chair, PHECC Programme Development Officer
Mr Brian Power	PHECC Programme Development Officer
Ms Julie Woods	PHECC Examiner
Mr Ray Carney	PHECC Examiner
Ricky Ellis	PHECC Examiner
Mr Michael Garry	PHECC Examiner
Mr Ben Heron	PHECC Examiner
Mr Lawrence Kenna	PHECC Examiner
Mr Shane Knox	PHECC Examiner
Mr Paul Lambert	PHECC Examiner
Mr David Sherwin	PHECC Examiner
Mr Rod Tobin	HECC Examiner
Mr Mark Wilson	PHECC Examiner

Council Activities in 2013

Statements of key activities:

Governance:

- Induct the members of the 4th Council to Council Functions, Governance, Committees and processes.
- Provision of appropriate smart technology to support council function
- Review membership and terms of reference of Council, Committees, Panels and Working Groups.

Education and Standards:

- Approve a first aid standard to facilitate emergency care in non-occupational settings.
- Approve a pre-hospital emergency care standard in austere and hospital settings.
- Assist in the development of regulations governing lights and sirens used by emergency ambulances.

PHECC Register

- Implemented the first cycle of Continuing Professional Competency for EMTs to support the Register.
- Adoption of new EMS regulatory terminology of Credentialing, Licensing and Privileging for all practitioners and service providers.

Examination and Certification

- Continue the devolvement of examinations to recognised institutions.
- Continue to develop and promote eLearning initiatives.
- Engage with universities to facilitate transfer of paramedic and advanced paramedic training to the tertiary sector.

Clinical Practice Guidelines

- Approve and commence implementation of 'Treat and Refer' CPGs to allow Paramedics the options for appropriate patients other than transfer to Emergency Departments.
- Incorporate CPG approval and renewal of practitioner registration into a licencing, credentialing and privileging framework.
- Develop an electronic smart solution for practitioners and responders to access CPGs and supporting materials.
- Develop an Interfacility Dispatch Standard to support the implementation of AMPDS Protocol 37.
Advanced paramedic deployment criteria for Priority Dispatch Standard.
- Criteria for deployment of Cardiac First Responders updated to reflect hazards, trauma and issues that they may encounter as responders.

First Responders and Co-Responders

- Implement an electronic smart solution for the deployment of and information collection by First and co-Responders.

Pre-Hospital Care Research

- Develop a set of evidence and consensus based clinical performance Indicators for Emergency Ambulance Care.

Cross-border

- Develop mechanisms in consultation with the Northern Ireland Ambulance Service (NIAS) and the Health Professional Council (UK) to facilitate appropriate cross-border practice in emergency and planned situations.

National Retrieval Service

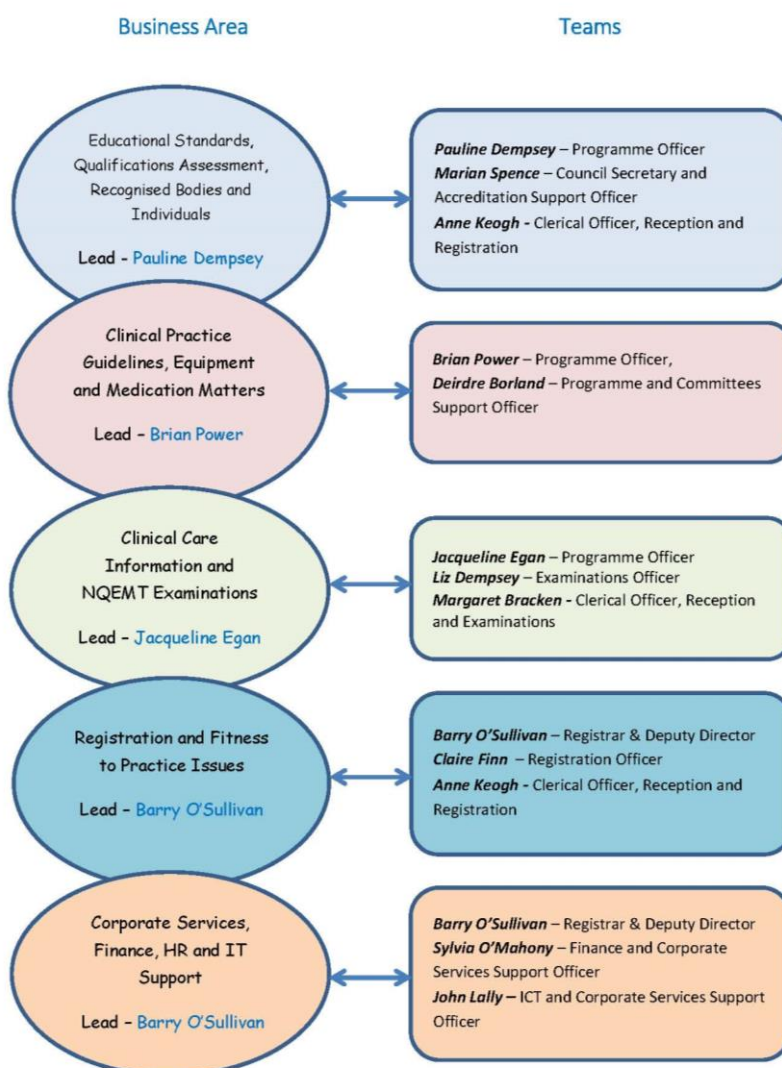
- Implement a National Retrieval Service incorporating Neonates, Paediatrics and adults.

PHECC Team and Organisation Chart

Anne Keogh	Registration & Reception Clerical Officer
Barry O’Sullivan	Deputy Director & Registrar
Brian Power	Programme Development Officer
Claire Finn	Registration Officer
Deirdre Borland	Programme Development Support Officer
Dr Geoff King	Director
Jacqueline Egan	Programme Development Officer
John Lally	ICT & Administration Support Officer
Liz Dempsey	Examinations Officer
Margaret Feeney	Examinations & Reception Clerical Officer
Marian Spence	Council Secretary & Accreditation Support Officer
Pauline Dempsey	Programme Development Officer
Sylvia O’Mahony	Finance & Corporate Services Support Officer

PHECC Organisational Chart

Director – Dr Geoff King





PRE-HOSPITAL EMERGENCY CARE COUNCIL

FINANCIAL STATEMENTS

for

YEAR ENDED 31 DECEMBER 2013

Financial Statements

YEAR ENDED 31 DECEMBER 2013

Statement of Council Members' Responsibilities

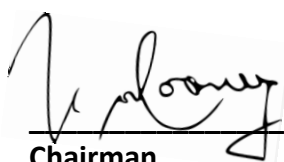
The Council is required by the Pre-Hospital Emergency Care Council (Establishment) Order, 2000 to prepare financial statements for each financial year which give a true and fair view of the state of the affairs of the Council and of its income and expenditure for that period.

In preparing those financial statements, the Council is required to:

- select suitable accounting policies and apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- comply with applicable Accounting Standards, subject to any material departures disclosed and explained in the Financial Statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Pre-Hospital Emergency Care Council will continue in operation.

The Council is responsible for maintaining proper accounting records, which disclose with reasonable accuracy at any time the financial position of the Pre-Hospital Emergency Care Council and enable it to ensure that the financial statements comply with the Order. It is also responsible for safeguarding the assets of the Pre-Hospital Emergency Care Council and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

On behalf of the Council



Chairman
10th July 2014



Council Member

PRE-HOSPITAL EMERGENCY CARE COUNCIL

Statement on Internal Financial Control

Year ended 31 December 2013

Responsibility for the System of Internal Financial Control

On behalf of the Pre-Hospital Emergency Care Council (PHECC), we acknowledge our responsibility for ensuring that an effective system of internal financial control is maintained and operated.

PHECC through the Director is responsible for monitoring the system of internal control and providing assurances to the Council.

A system of internal control is designed to reduce rather than eliminate risk. Such a system can provide only a reasonable and not an absolute assurance that assets are safeguarded, transactions authorised and properly recorded, and that material errors or irregularities are either prevented or would be detected in a timely manner.


Key Control Procedures

The following is a description of the key processes, which have been put in place by PHECC to provide effective internal financial control

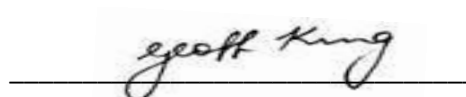
1. PHECC has an established organisational structure with clearly defined lines of accountability, responsibility and reporting;
2. The system of internal financial control in PHECC is documented in Quality Management System (QMS) process maps.
3. PHECC has established procedures around segregation of duties and the authorisation of expenditure;
4. TAS and SAGE Financial System are operated by PHECC to facilitate financial accounting practice and provide detailed audit trails on all transactions;
5. Monthly expenditure and activity is monitored against the business plan. Reports are presented to the Director for consideration and appropriate action;
6. A monthly financial position report for the Department of Health is prepared and submitted to the Department. An Audit Committee is in place and met on two occasions during the year.

7. The current Director was appointed in 2001. His remuneration comprises a basic salary of €97,194 and a Medical Director payment of €16,340. The Council approved the Medical Director payment but has not to date received sanction from the Minister as required under SI 109/2000. In March 2013 the Department of Health submitted a business case to the Department of Public Expenditure and Reform recommending that the allowance be maintained and a decision is awaited.
8. The monitoring and review of the effectiveness of the system of internal control is informed by the report of the Audit Committee, the work of the Internal Auditor, the Executive Managers in our Council who have responsibility for the development and maintenance of the financial control framework, the recommendations made by the Comptroller and Auditor General in the course of audit or in his management letters and both the Risk Framework and the Risk Register.
9. Council Members are kept apprised of financial, control and general corporate governance matters via Council meetings which are conducted at regular intervals.
10. A formal review of the effectiveness of the system of internal control was carried out by an external firm of Accountants during 2013.
11. Council conducted a review of the effectiveness of the system of internal financial controls for 2013.

On behalf of the Council



Chairman



Director

10th July 2014

PRE-HOSPITAL EMERGENCY CARE COUNCIL

Financial Statements

YEAR ENDED 31 DECEMBER 2013

Introduction

The Pre-Hospital Emergency Care Council was established by the Minister for Health under Statutory Instrument No. 109 of 2000, the Pre-Hospital Emergency Care Council (Establishment) Order, 2000 and as amended by Statutory Instrument No. 575 of 2004 (Amendment) Order 2004. These Orders were made under the Health (Corporate Bodies) Act, 1961 as amended and confirmed by the Health (Miscellaneous Provisions) Act 2007.

Going Concern Basis of Accounting

The Government in the October 2008 Budget, announced its intention to subsume the Council into the Health and Social Care Professionals Council. Such a change will require legislative modification, in the meantime there is no intention to amend the functions of the Council and it is safe to assume that its existing activities will continue to be carried out. Council does not believe that any adjustment is needed to the financial statements to reflect the proposed subsuming and has prepared the financial statements on a going concern basis.

The main functions of the Council are:

1. To ensure that Training Institutions and course content in Emergency Medical Technology reflect contemporary best practice.
2. To ensure that pre-hospital emergency care providers achieve and maintain competency at the appropriate performance standard.
3. To prepare clinical practice guidelines for pre-hospital emergency care.
4. To source and sponsor relevant research to guide Council directions and the development of pre-hospital care.
5. To prepare standards of operation for pre-hospital emergency care providers to support best practice.
6. To establish and maintain a register of pre-hospital emergency care practitioners.
7. To recognise those pre-hospital emergency care providers which undertake to implement the clinical practice guidelines.

Statement of Accounting Policies

(1) Accounting Convention

The financial statements are prepared on the accruals basis under the historical cost convention in accordance with generally accepted accounting principles, except as indicated below.

(2) Income and Expenditure

The non-capital allocation from the Department of Health is dealt with through the Revenue Income and Expenditure Account. Any part of this allocation applied for capital purposes and resulting in fixed asset additions is transferred to the Capital Fund Account. Other income is accounted for on a receipts basis.

Where part of the non-capital allocation is used to fund projects, which also receive capital allocations, the non-capital funding part is taken to the Capital Income and Expenditure Account.

A Capital Income and Expenditure Account is not presented as there was no capital expenditure nor related allocations from the Department of Health in either this year nor in the preceding year.

With the exception of Fixed Asset Depreciation and Amortisation which is dealt with through the Capital Fund Account, all recognised gains or losses have been included in arriving at the surplus or deficit for the year.

(3) Tangible Fixed Assets

A full year's depreciation is charged in the year of purchase. All Fixed Assets acquired, regardless of the source of funds are stated at cost less depreciation. Depreciation, which is matched by an equivalent amortisation of the Capital Fund Account, is not charged against the Income and Expenditure account.

Depreciation is charged at the following annual rates:-

ICT Equipment: 33.3% straight line.

Other Equipment: 20.0% straight line.

(4) Capital Fund Account

Capital allocations from the Department of Health are dealt with in the Capital Income and Expenditure Account. The balance on this account represents the surplus/deficit on the funding of projects in respect of which capital funding is provided by the Department of Health.

(5) Superannuation

By direction of the Minister for Health, no provision has been made in respect of benefits payable under the Local Government Superannuation Schemes as the liability is underwritten by the Minister for Health. Contributions from employees who are members of the scheme are credited to the income and expenditure account when received. Pension payments under the scheme are charged to the income and expenditure account when paid. The pension levy is paid to the Department of Health.

PRE-HOSPITAL EMERGENCY CARE COUNCIL

Income and Expenditure Account Year Ended 31 December 2013

Income	Notes	2013 €	2012 €
Department of Health Allocation		2,766,245	2,848,779
Other Income	4	692,260	372,550
		<u>3,458,505</u>	<u>3,221,329</u>
Transfer to Capital Fund Account to fund Fixed Assets	18	(18,663)	(6,437)
		<u>3,439,842</u>	<u>3,214,892</u>
Expenditure			
Employee Costs	3	825,751	893,984
Staff Related Expenses	5	80,603	81,055
Accommodation and Establishment Expenses	6	156,811	152,900
Recruitment and Media	7	5,114	8,219
Consultancy and Other Professional Fees	8	83,354	109,722
Examination and Other Related Expenses	9	101,878	114,528
Printing and General Administration	10	183,047	197,817
Information, Communication and Technology	11	122,949	59,188
Council/ Committee Expenses	12	42,199	48,088
EMS R&D, Special Projects, Grants	13	1,774,546	1,444,950
Register Expenses	14	76,190	124,227
		<u>3,452,443</u>	<u>3,234,678</u>
Statement of Movement in Accumulated Surplus (Deficit)			
Surplus (Deficit) for the year		(12,601)	(19,786)
Surplus (Deficit) at 1 January 2012		29,814	49,600
Surplus (Deficit) at 31 December 2012		<u>17,213</u>	<u>29,814</u>

On behalf of the Council



Chairman
 10th July 2014



Council Member

The accounting policies and notes form part of these financial statements.

PRE-HOSPITAL EMERGENCY CARE COUNCIL

Balance Sheet As at 31 December 2013

	Notes	2013 €	2012 €
Fixed Assets	17	14,742	9,458
Current Assets			
Cash in Bank		3,956	(4,153)
Debtors and Prepayments	16	47,237	63,567
		51,193	59,414
Current Liabilities			
Creditors and Accruals	15	33,977	29,600
Net Current Assets			
Total Assets less Current Liabilities		31,957	39,272
Financed By			
Capital Fund Account	18	14,742	9,458
Surplus(Deficit) on Income and Expenditure Account		(12,600)	(19,786)
Reserves brought forward		29,815	49,600
		31,957	39,272

On behalf of the Council



Chairman
10th July 2014



Council Member

The accounting policies and notes form part of these financial statements.

PRE-HOSPITAL EMERGENCY CARE COUNCIL

Notes to the Financial Statements Year Ended 31 December 2013

1. Period of Account

These Financial Statements cover the year from 1 January 2013 to 31 December 2013.

2. Administration

The Department of Health provided direct funding to the Pre-Hospital Emergency Care Council (PHECC).

3. Particulars of Employees and Remuneration

The total staff complement as approved by the Minister for Health at 31 December 2013 was fourteen. The actual complement was 13 permanent. The aggregate employee costs were

	2013	2012
	€	€
Staff Salaries (Gross)	748,027	773,970
Employers PRSI	55,505	57,714
Superannuation Lump Sum	0	44,636
Temporary Staff	22,219	17,663
	825,751	893,984

4 Other Income

	2013	2012
	€	€
Registration Fees	56,714	58,340
Interest Income	177	919
Accreditation and Examination Fees	100,289	129,979
Superannuation Contributions	38,713	40,079
Training Manuals and DVD sales	0	3,028
Certificate Income	46,132	21,682
Post and packaging fees	32	1,717
Clinical Practice Guidelines sales	221	16,263
Other Income	283	0
Cardiac First Response Material	1,290	65,543
Transport Medicine Programme (Temple St Children's Hospital)	448,409	35,000
	692,260	372,550

5 Staff Related Expenses

	2013	2012
	€	€
Staff Travel and Subsistence	55,394	58,018
Staff Training and Development	24,764	22,765
Staff Other Expenses	446	272

	80,603	81,055
6 Accommodation & Establishment Expenses	2013	2012
	€	€
Office Rent and Charges	120,268	119,133
Electricity (Light and Heat)	12,079	11,535
General Maintenance	11,146	8,032
Cleaning	4,953	4,561
Catering / Kitchen Supplies	8,365	9,639
	156,811	152,900
7 Recruitment & Media Expenses	2013	2012
	€	€
Media and Recruitment	5,114	8,219
	5,114	8,219
8 Consultancy and Other Professional Fees	2013	2012
	€	€
Legal Fees	28,846	15,226
Consulting and Professional Fees- Miscellaneous	33,047	75,757
Consulting Fees - Finance	9,415	6,733
Internal Audit	4,526	4,526
Audit Fees	7,520	7,480
	83,354	109,722
9 Examinations & Other Related Expenses	2013	2012
	€	€
Examination Board Venues	13,708	13,356
Exam Analysis and Secondment	8,835	12,107
External Examiners	79,335	89,065
	101,878	114,528
10 Printing and General Administration	2013	2012
	€	€
Stationery	13,115	19,665
Telephone & Mobiles	26,839	28,414
Postage & Couriers	15,531	39,891
Office Equipment	3,034	2313
Printing / Annual Reports / Certificates	65,886	60,394
Insurance	3,971	3,918
Copiers/ Service Contracts etc	17,263	12,022
Library/ Information Services	34,051	22,325
Bank Interest and Charges	1,293	1,411
Membership of Bodies	2,064	7,464
	183,047	197,817

11 Information, Communications & Technology

	2013	2012
	€	€
Software and Peripherals.	26,341	11,865
ICT Licences and Support	96,608	47,323
	122,949	59,188

12 Council/Committee Expenses

	2013	2012
	€	€
Council Members	13,117	6,119
Council Matters	4,880	10,021
Accreditation Committee	0	680
Clinical Care Committee	0	899
Medical Advisory Group	11,569	10,081
Other Working/ Advisory Groups	12,632	20,288
	42,199	48,088

13 EMS R&D, Special Projects & Grants

The Council funds a number of research and awareness programmes undertaken by 3rd parties. The Council funds 3rd parties by way of grant or on foot of invoices for the provision of specific services. The amounts paid in 2013 are set out below:

Grants	2013	2012
	€	€
Irish Heart Foundation	89,340	91,163
Conference Sponsorship	26,600	6,003
University of Limerick CPR Project	140,718	170,000
National College of Ireland Maynooth CISM	0	78,108
Out of Hospital Cardiac Arrest Register	25,000	25,000
Total Grants	281,658	370,274

Invoices

	2013	2012
	€	€
E PCR Initiative	81,021	181,758
Advanced Paramedic Development Funding	757,000	656,028
eLearning Project	96,759	72,754
Citizen CPR Project	0	1,107
Printing Clinical Care Reports	67,013	29,864
Retrieval Programme	460,305	101,619
Research - KPI Development	5,325	17,441
Special Projects Miscellaneous	25,465	14,105
Total payments on foot of Invoices	1,492,888	1,074,676

14 Register

	2013	2012
	€	€
Administration - ID Cards, Licences etc	15,449	16,086
Fitness to Practice Hearing	60,741	108,141
	76,190	124,227

15 Creditors

Amounts falling due within one year

	2013	2012
	€	€
Trade Creditors	10,202	4,573
Visa	2,132	673
Accruals	21,643	24,354
	33,977	29,600

16 Debtors & Prepayments

	2013	2012
	€	€
Prepayments	2,508	54,299
Debtors	44,729	9,268
	47,237	63,567

17 Fixed Assets

	ICT Equipment	Other Equipment	Totals
Cost			
At 1 January 2013	856,476	190,758	1,047,234
Additions in year	18,663	0	18,663
Assets disposed	(770,934)	(109,346)	(880,280)
At 31 December 2013	104,205	81,412	185,617
Accumulated Depreciation			
At 1 January 2013	847,697	190,079	1,037,776
Charges for the year	12,604	339	12,943
Assets disposed	(770,934)	(109,346)	(880,280)
At 31 December 2013	89,367	81,072	170,439
Net Book Value			
At 31 December 2013	14,838	340	15,178
At 31 December 2012	8,779	3,474	12,253

18 Capital Fund Account

	2013
	€
Opening Balance 1st January	9,458
Transfer from Income and Expenditure Account	18,663
Less	
Amortisation in line with depreciation - Note 17	(12,943)
Loss on disposal of fixed asset	(436)
Closing Balance at 31st December	14,742

19 Council Members Fees and Expenses

	2013	2012
	€	€
Stephen Brady	590	-
Brennan Michael	1,934	719
Dineen Michael	1,742	1,057
Doran Hugh	582	-
Fitzpatrick Patricia	-	149
Gaffney Zelie	-	306
Garry Michael	-	304
Keane Thomas	753	-
Maher David	807	-
McCelland Mary	-	34
Molloy Michael	172	-
Mooney Shane	1,477	-
Mooney Tom	827	440
O'Brien Barry	447	308
O'Donnell Cathal	917	457
O'Malley Frank	-	1,200
Plunkett Professor Patrick	114	-
Small Valerie	719	86
Tinnelly Tom	1,243	205
Touhy Gerry	-	854
Woods Glenna	794	-
	13,117	6,119

20 Directors Remuneration Package for the year ending 31 December 2013

	2013	2012
	€	€
Annual Basic Salary - PO Civil Service Rate	97,194	103,472
Medical Director Payment	16,340	17,416
Total Remuneration Package	113,534	120,888

The Director is not in receipt of any pension benefits other than the standard entitlements under the Local Government Superannuation Schemes and no bonus was paid to the Director in 2013. The Council has sought and is awaiting formal sanction from the Minister to the above terms as required under SI 109/2000.

21 Superannuation Deductions

for the year ending 31 December 2013

On the 2nd of Sept 2011, the Department of Health instructed that Superannuation deductions from staff be treated as income thereby reducing the level of Exchequer funding required. Council adjusted and reduced the cash drawdown by €55,505 in order to make provision to comply with this instruction relating to Superannuation income.

22 Council Members – Disclosure of Transactions

Council adopted procedures in accordance with guidelines issued by the Department of Finance in relation to the disclosure of interests by Council members and these procedures have been adhered to in the year. There were no transactions in the year in relation to the Council's activities in which Council members had any beneficial interest.

23 Lease Obligations

for the year ending 31 December 2013

Council's office premises are held under an operating lease and the annual rent is charged to the income and expenditure account. The address is

Abbey Moat House,

Abbey Street,

Naas,

Co. Kildare

The annual rent is €103,432

24 Annual Energy Efficiency Report - *for the year ending 31 December 2013*

The energy usage at the Council's office premises for the year ending 31 December 2013 was 72,850 M.Watts.

25 Approval of Financial Statements

The Financial Statements were approved by the Council on 10 July 2014.

Appendix 1

Schedule of attendance by Council Members

Attendance Council Meeting 2013

Name	31 st Jan	14 th Mar	26 th Apr	11 th Jun	13 th Jul	12 th Sep	10 th Oct	14 th Nov	12 th Dec
Tom Mooney (Chair)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Stephen Brady	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
Michael Brennan	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Michael Dineen	Yes	Yes	Yes	Yes	No	Yes	Yes	No	Yes
Hugh Doran	NA	Yes	No	No	Yes	No	No	No	Yes
Martin Dunne*	NA	NA	NA	NA	NA	NA	NA	NA	No
Thomas Keane	NA	Yes	No	No	Yes	Yes	No	Yes	Yes
Robert Kidd	Yes	Yes	Yes	Yes	Yes	No	No	No	No
David Maher	Yes	Yes	No	Yes	No	No	No	No	Yes
Shane Mooney	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Mick Molloy	Yes	Yes	No	Yes	Yes	No	No	Yes	No
Robert Morton*	No	Yes	Yes	No	No	No	No	No	No
Barry O' Brien	No	No	Yes	No	No	No	No	Yes	No
Cathal O' Donnell	Yes	Yes	Yes	Yes	No	Yes	No	No	No
Patrick Plunkett	Yes	Yes	No	Yes	No	No	No	No	Yes
Valerie Small	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Tom Tinnelly	Yes	Yes	Yes	No	Yes	No	Yes	No	Yes
Glenna Woods	NA	Yes	Yes	Yes	No	Yes	Yes	No	Yes

*Note: Robert Morton was replaced by Martin Dunne on 26th November 2013