Alpha Aid Training

Recognised Institution
Quality Standards Review
On-Site Report

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1.0 Introduction

This report has been produced following the first review of the recognised institutions(RI) processes that support the design, deliver and review of the Pre-Hospital Emergency Care Council's (PHECC) approved courses. This is the first step in the quality improvement cycle as outlined in PHECC's Quality Review Framework (QRF). The result of this review provides both PHECC and the RI with baseline information which will inform continuous quality improvement to be outlined in the institutions Quality Improvement Plan (QIP). The review was carried out with the underlying principle of the RI "Saying what they do, doing what they say and proving it with verifiable documented evidence".

Figure 1: The QRF Building Blocks:

1.1 Institution Details

Name	Alpha Aid Training
Profile	A private training company which is a PHECC recognised institution since 2012.
PHECC courses being delivered	Cardiac First Response – Community
Higher Education Affiliation	None
Address	Alpha Aid Training Lynston House, Acres. Kinsale, Co. Cork

1.2 Reports Details

Date of on-site visit	02-06-16
Quality Review Panel (QRP)	
P Collins	QRP Chair – Independent
J Beecher	QRP Member – Independent
K Walsh	QRP Member – PHECC
RI Representatives	
Helen Johnston	Owner and Lead Instructor
Myles Johnston	Director
Date of Council Approval	15 December 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 – Community (CFR-C) course was 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 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 RI's training activities take place in external venues.
Resources	Adequate resources are made available for each course.

2.3 Evidence Reviewed – Documents/IT

The records and systems listed below were reviewed and discussed throughout the on-site visit
- Website - Insurance Documents - Mission Statement - Evaluation Form - Lesson Plans - QA Policy - Equal Opportunities Policy - QA Manual - Equality and Diversity Policy - Administration Checklist - Sign-in Sheets - Staff recruitment and Development Policy - Communication Policy - Complaints Policy - Appeals Policy - Health and Safety 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.	There is no organisational chart that reflects the overall structure of the organisation and the reporting lines for operational activities within the RI. During discussions RI representatives indicated the individual responsible for the quality assurance of PHECC approved courses. RI representatives outlined a process for internal course approval. However this process is not documented at the time of review. Courses are submitted to PHECC as per guidelines. There are no documented procedures for results approval. 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 no documented policy and procedures for how information is managed and maintained. There is a mix of computer and paper based information on students and faculty. RI representatives stated that information is centrally controlled and access is limited to authorised personnel. This process was verified through observation. The records for faculty were reviewed and found to be satisfactory. Quantitative measures are being introduced 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.	During discussions the RI representatives identified an individual who has overall responsibility for the quality assurance of PHECC approved courses. This is not documented. A process for making faculty aware of their responsibilities for quality assurance was discussed and outlined. However this process is not documented and there is no evidence to show that faculty are made aware of their quality assurance responsibilities.
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	The RI has quality assurance policies and procedures in place to support the delivery of PHECC approved courses. However the RI has identified that these need to be updated and indicated that plans are in place to update their quality management system. During discussions RI representatives indicated that student feedback informed self-assessment. The RI utilised the RISAR for self-assessment and submitted its quality improvement plan which will be updated with additional information required to include specific timeframes

evaluation.	for additional actions identified during the review process.
1.5 Transparency and Accountability - The institution conducts its activities in an open and transparent manner.	During discussions RI representatives outlined a number of interactions when students are informed of their entitlements while attending their course. However there is no evidence to show that these activities have taken place. The RI website and promotional material provides relevant information to allow potential students to make an informed choice about course participation. Course reports are not completed.
1.6 Administration – Administration arrangements meet the needs of all stakeholder groups.	During discussions RI representatives stated that the lead instructor carries out all the administration of courses. There are no documented procedures for course administration tasks. However a checklist for pre-course administrative tasks is in place. The RI has indicated that this will be developed to include during and post course activities.
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. The RI has identified the need to communicate 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.	The RI outlined of a range of communication methods utilised to inform and receive feedback from students and associated stakeholders, including evaluation forms and meetings etc. Student course evaluation forms were available for review. During discussions RI representatives indicated that formal and informal communication takes place. Students have the opportunity throughout their course to meet with their instructor one to one to discuss any issues they may have. These meetings are not recorded.
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 policy and procedures for access, transfer and progression. The RIs website and promotional material contains sufficient information for potential students to make an informed choice.
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 specific needs. These activities are not documented. RI representatives indicated that instructors are in compliance with relevant legislation and are provided with information and training on equality and diversity. There was no evidence provided that training and information is provided to faculty.
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. During discussions the RI indicated that these policies are to be updated and appropriate procedures documented, including timelines. Supporting documents have also been drafted.
2.6 Training Infrastructure - Courses are carried in an appropriate learning environment, sufficiently	During discussions RI representatives indicated that training is carried out externally in rented premises. There is currently no documented evidence to show that the premises used for training activities meet the requirements for the courses on

resourced in order to deliver training to the highest standards.	offer. There is a checklist to ensure that resources and equipment are made available for courses. There are no documented systems in place for the maintenance and upgrading of equipment.
2.7 Health and Safety - A safe and healthy environment exists in the institution.	During discussions RI representatives stated that venues are checked prior to courses commencing. There is no evidence to support this statement. Procedures are being developed to ensure compliance for courses being carried out externally and that also reflect relevant legislation. Plans are in place to carry out risk assessments in external locations.
2.8 Social Environment - A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.	During discussions RI representatives 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.

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.	During discussions RI representatives outlined the process they undertake to recruit faculty and support staff. There is a policy in place for recruitment. There is no evidence that the role and responsibility of faculty members for the quality assurance of PHECC approved courses is documented. 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.	The RI indicated that they have selection criteria for faculty which is in line with PHECC guidelines and that senior members of the organisation are involved in the recruitment of faculty members. However there are no documented role descriptions in evidence.
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 no documented procedures in place the continuous professional development of faculty. During discussions RI representatives indicated that faculty members do receive an induction. There is no evidence to support this. It was indicated that informal procedures are in place for faculty to request upskilling. Staff members also attend relevant conferences and seminars.
3.4 Communication with Faculty - Two way communication systems are in place between management and faculty.	During discussions RI representatives described a range of informal methods of communication between faculty and management. There is no documented evidence of communication taking place.
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).	Not Applicable
3.6 Faculty and Stakeholder Management - A system is in place to ensure appropriately qualified and	Evidence provided indicates that faculty meet the minimum requirements set by PHECC to deliver courses. The system in place ensures that only faculty with valid certification deliver PHECC approved courses. Planned improvements will facilitate

experienced individuals are engaged by the institution.	the recording of continuous professional development activities.
3.7 Collaborative Provision - Appropriate contractual arrangements are in place with affiliated instructors.	During discussions RI representatives indicated that arrangements are in place with affiliated instructors. There are no contracts in place. There was no evidence available to verify that students are made aware of these arrangements or that the role and responsibility for the quality assurance of courses is outlined.

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. However this needs to be updated to reflect practices. 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. 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 documented policy for course delivery. The evidence indicated that all courses are delivered by appropriately qualified and certified personnel. There is no evidence that an induction takes place prior to each course. Attendance sheets were viewed and are maintained for each course. Students have the opportunity to meet with their instructor for feedback. This is an informal process and is not documented.
4.4 Course Review - Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	There are documented procedures in place for carrying out course reviews. However there is no evidence that these have been implemented. There was no evidence available of tutor/instructor feedback or a course director's report. 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. 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.	During discussions RI representatives outlined how assessment activities are carried out. 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. These requests are not documented. Assessment related material is stored centrally and only issued on request. 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.	There is a documented policy and procedures in place. RI representatives indicated in discussion that internal verification of training on all courses is carried out by the lead instructor. Evidence of this procedure to be included on course documentation.
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.	The internal verifier checks the results and they are recorded. Once checked the results are made available to relevant faculty 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. RI representatives have indicated during discussions that the appeals procedures will be updated to include timeframes.

3.0 Conclusions and Outcomes

The findings from this 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 policies and procedures in place that indicate a commitment to internal quality assurance and continuous quality improvement (CQI). The current systems need upgrading to reflect current practices. When complete this will provide evidence of a commitment to the ongoing quality assurance of PHECC approved courses and full engagement with the process. 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 provided would support the conclusion that the RI's activities when supported by appropriately focused policies and procedures meet the requirements to carry out PHECC approved courses.