

HSS Management Ltd t/a Heartsafety Solutions

Recognised Institution Quality Standards Review On-Site Report



Table of Contents

1.0 Introduction	Error! Bookmark not defined.
1.1 Institution Details.....	2
1.2 Reports Details.....	2
1.3 Scope of the Review.....	3
2.0 Review Findings	3
2.1 Meetings and Discussions.....	3
2.2 Observation of Facilities and Resources.....	3
2.3 Evidence Reviewed – Documents/IT.....	4
2.4 Quality Standards – Review.....	5
3.0 Conclusions and Outcomes	133

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. 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. 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	HSS Management Ltd trading as Heartsafety Solutions
Profile	A private company, which is a PHECC recognised institution since 2009
PHECC courses being delivered	CFR Advanced CFR Community
Higher Education Affiliation	N/A
Address	17 Kilcarbery Business Park, Nangor Road, Dublin 22

1.2 Reports Details

Date of on-site visit	16/09/2015
Quality Review Panel (QRP)	
P Collins	QRP Chair
J Donaghy	QRP Member
P Dempsey	QRP Member
RI Representatives	
Dave Greville	Managing Director and Tutor
Rob Roe	Sales and Training
Adrian Cullen	Quality Manager
Date of Council Approval	10 th December 2015
Date of publication	

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. Cardiac First Response (CFR) courses were selected to provide context.

2.0 Review Findings

2.1 Meetings and Discussions

Type	Comments
Entry Meeting	The QRP met with two representatives on arrival. Following introductions, the panel chairperson outlined the agenda for the visit and the process that would be followed.
Staff Discussions	The quality manager joined the review discussions during the review and outlined their role and understanding of quality requirements.
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	The institution is located at the above address and has a large training room, offices and storage areas.
Resources	There are appropriate and sufficient resources stored on site and allocated as required

2.3 Evidence Reviewed – Documents/IT

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

- Quality Assurance Folder
- Organisational Chart
- Meeting Records
- Quality Improvement Plan
- Information Management Policy
- Faculty Records
- Student Records
- Sign-In Sheets
- Evaluation Forms
- Quality Assurance Policy
- Course Paperwork Toolkit
- Mission Statement
- Instructor Evaluation
- Equality and Diversity Policy
- English Language Policy
- Complaints Procedure
- Manikin Service Records
- Safety Statement
- Recruitment Policy
- Induction Checklist
- Quality Assurance Checklist
- Results Approval Policy and Procedures

2.4 Quality Standards – Review

Section One: Organisational Structure and Management

Standards

1.1 Governance - The Institution has clear lines of authority and engages a system of accountability for PHECC approved courses.

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.

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.

1.4 Self-Assessment, External Evaluation and Improvement Planning - The Institution carries out internal assessment and engages in a quality improvement planning process (annually) which includes external evaluation.

1.5 Transparency and Accountability - The institution conducts its activities in an open and transparent manner.

1.6 Administration – Administration arrangements meet the needs of all stakeholder groups.

1.7 Financial Management - The institution manages its finances in a responsible manner that meets the needs of all stakeholders.

QRP Findings

- The organisational chart reflects the overall structure of the organisation and the reporting lines for operational activities within the RI. It also includes responsibility for quality assurance. During discussions RI representatives outlined who in the organisation is responsible for the quality assurance of PHECC approved courses. This will be reflected in updated role descriptions. Representatives also gave a clear outline of how internal course approval takes place. This process is currently not documented. Documented evidence was provided which showed how results are approved and that self-assessment is an ongoing and regular process.
- There is an information management policy and associated procedures in place and was made available for review. These procedures are being updated. Student records are maintained electronically and in hard copy and were available to review. Daily sign-in sheets and evaluation forms were viewed and found to be comprehensive. Faculty records were also made available but were held in multiple locations. RI representatives agreed that one central database would provide a better system for managing faculty records. Quantitative measures are being introduced to capture relevant information to inform practice. PHECC certification is carried out according to guidelines.

- During discussions RI representatives stated that the quality manager has overall responsibility for the quality assurance of PHECC approved courses. This is shown on the organisational chart and documented. However this is not in evidence on the company website as there is no mention of the quality manager. Information regarding responsibility for QA is communicated at regularly scheduled faculty meetings which are documented. A course quality assurance checklist is used for each course and was provided for review.
- There is a quality assurance policy and associated procedures in place and were made available for review. RI representatives displayed a clear understanding and commitment to self-assessment and evaluation. Student and Instructor evaluation forms are analysed and feed into the self-assessment process. Quarterly meetings are scheduled and documented as part of the ongoing quality improvement and self-assessment process. Issues arising from these meetings are documented and any actions allocated. Further development is ongoing to make actions time bound. Representatives indicated that informal meetings and discussions form part of the process.
- During discussions and in their RISAR RI representatives described a range of ways which stakeholders receive information. The website provides comprehensive information on the company and its activities. Information is available via email or over the phone. During discussions RI representatives indicated their intention to publish quality assurance information and reports on their website. Evidence was provided to show that students are informed of their entitlements throughout their course i.e. induction. Course reports were available for review.
- The RI has a full time administrator and additional staff that carries out all administrative activities in support of PHECC approved courses. A course administration toolkit is in use and an IT system is utilised to ensure records are accurate and up to date for students and faculty. Course management software is being developed to automate some administrative tasks. Hard copies of relevant information are also maintained and securely stored. Procedures are documented and implemented for course administration tasks.
- 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

- 2.1 Education and Training Mission Statement** - The Mission of the Institution is appropriately focused with education and training as a core activity.
- 2.2 Communication with Students and Other Stakeholders** - Two way communication systems are in place between faculty, students and other stakeholders as appropriate.
- 2.3 Course Access, Transfer and Progression** - Course information is clear, access is fair and consistent, with recognition of prior learning, as appropriate.
- 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.
- 2.5 Complaints and Appeals** - Complaints and Appeals Processes are open, transparent and accessible to students and other stakeholders.
- 2.6 Training Infrastructure** - Courses are carried in an appropriate learning environment, sufficiently resourced in order to deliver training to the highest standards.
- 2.7 Health and Safety** - A safe and healthy environment exists in the institution.
- 2.8 Social Environment** - A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.

QRP Findings

- The RI demonstrates its commitment to quality training through its mission statement which is visible in the RI building and on relevant documentation. All stakeholders are made aware of the mission statement and its implications for training activities during induction.
- During discussions and in their RISAR the RI outlined and showed evidence of a range of methods utilised to communicate with students and associated stakeholders, including regular meetings, student evaluation forms, instructor evaluation forms etc. Faculty are available to students outside normal hours. The discussion indicated that along with the formal engagement regular informal communication takes place with all stakeholders.
- The RI indicated on their RISAR that the entry criteria, for PHECC approved courses, is clearly stated to students over the phone, via email and on the website. However while the website information is adequate, it is not fully clear what the entry criteria are for PHECC approved courses. The institution does not offer recognition of prior learning (RPL) for PHECC approved courses.
- The RI has an Equality and Diversity policy in place which was available to view. It also has an English language policy in place. RI representatives stated that all employees receive information and training on equality and diversity. This was

not documented. During discussions RI representatives outlined how they accommodate individuals with specific needs. This is currently managed in an informal manner. However, evidence was made available of this support taking place. There are codes of practice in place for dealing with sexual harassment, bullying and harassment.

- The RI stated in its RISAR that their complaints procedure was available on their website. However at the time of review this could not be located. During the review the complaints procedure was made available to review in hard copy.
- The facilities available for students at the college site provide a safe, clean, welcoming and comfortable learning environment. The evidence viewed shows a comprehensive range of resources and equipment available for all courses. Administration, check and document the resources needed for a course and ensure they are in place. Equipment is up to date well maintained and stored on site. A manikin hygiene policy is in place and was available for review.
- The health and safety statement is available to view. Procedures are in place to ensure the RI is compliant with all relevant health and safety legislation. Signage is in place onsite and stakeholders are made aware of procedures while onsite.
- Discussions indicated that faculty are encouraged to provide students with interesting and challenging learning opportunities and evidence was provided to show how this takes place i.e. lesson plans. The lesson plans viewed showed that the courses were designed to be learner centred, providing an interesting and challenging learning environment. RI representatives also indicated the faculty are recruited based on their personal attributes as well as their experience.

Section Three: Faculty Recruitment and Development

Standards

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.

3.2 Faculty Recruitment - Faculty, are recruited on the basis of personal suitability, appropriate experience and qualifications.

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.

3.4 Communication with Faculty - Two way communication systems are in place between management and faculty.

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).

3.6 Faculty and Stakeholder Management - A system is in place to ensure appropriately qualified and experienced individuals are engaged by the institution.

3.7 Collaborative Provision - Appropriate contractual arrangements are in place with affiliated instructors.

QRP Findings

- During discussions RI representatives outlined the process they undertake to recruit faculty. There is a recruitment policy and associated procedures in place and was available for review. Induction is carried out with all staff and faculty which include their responsibility for quality assurance. Documentation indicates that the RI meets the minimum faculty requirements for course approval.
- The RI indicated that they have selection criteria for faculty which is in line with PHECC guidelines and that senior management are involved in the recruitment of all faculty members. Role descriptions in evidence.
- There is a continuous learning policy and associated procedures in place. During discussions RI representatives indicated that faculty members have the opportunity to avail of activities that would support their continuing professional development. Annual CPD sessions are scheduled for faculty and evidence was provided to show these activities take place. A trainer log is in place which includes tutor/instructor certification details. Induction takes place and induction checklists were made available for review. There is a Child protection policy and associated procedures in place and faculty are made aware of their responsibilities towards children and vulnerable persons. There was evidence provided to show that faculty had been provided with the relevant information.

- During discussions RI representatives described a range of formal and informal methods of communication between faculty and management. Faculty meetings are scheduled every six months, evaluation forms are submitted after every course, there is a notice board, emails and quarterly quality meetings. There is evidence of meetings taking place which are documented. Informal meetings take place with faculty to discuss specific training issues. Course reports are mandatory for all courses as another method of feedback and communication.
- Information on faculty is maintained on the RI's computer system and in hard copy and was available to view. The system provides information regarding faculty meeting the minimum requirements set by PHECC to deliver courses. During discussions RI representatives indicated that new instructors get the opportunity to observe experience instructors in class. RI representatives agreed that new instructors would be observed delivering course by experienced faculty. RI representatives stated that additional analysis of course content and delivery will be carried out. Faculty performance and activities while involved in PHECC approved courses are currently documented by way of evaluation forms.
- During discussions and in their RISAR RI representatives indicated that they do sub-contract work to affiliated instructors. There are signed contracts in place which were available for review. However more information regarding their responsibilities for the quality assurance of PHECC approved courses needs to be documented and maintained for review.

Section Four: Course Development, Delivery and Review

Standards

4.1 Course Development - Courses are designed to meet the requirements for PHECC approval and certification and reflect a commitment to quality improvement.

4.2 Course Approval - There are clear guidelines for course approval.

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.

4.4 Course Review - Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.

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.

4.6 Internal Verification - There is a consistent application of PHECC assessment procedures and the accuracy of results is verified.

4.7 External Authentication - There is independent and authoritative confirmation of assessment and certification, where relevant, in accordance with PHECC guidelines.

4.8 Results Approval - A results approval process operates in the institution.

4.9 Student Appeals - A process is in place for students to appeal their approved result.

QRP Findings

- There is a course design and development policy in place and was available for review. During discussions RI representatives outlined a process for how course design and development takes place. While there is a policy there are no documented procedures to support this policy. 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.
- The discussion revealed a comprehensive process for internal course approval is carried out informally between management, course director and tutors. There is no documented evidence of this process taking place. However, all the information required for PHECC course approval has been supplied. The approval process for host organisations has been adhered to.
- There is no documented policy or associated procedures for course delivery. The evidence indicated that all courses are delivered by appropriately qualified and certified personnel using a variety of teaching methods. RI representatives stated that student induction takes place for each course but this is currently not documented. Attendance sheets were viewed and are maintained. Course

paperwork is inspected quarterly and courses being delivered off site are visited twice annually. There was no documented evidence of the visits taking place.

- There is a formal documented procedure in place for carrying out course reviews. A schedule is in place to carry out course review meetings twice a year and the course documentation is reviewed quarterly by the internal verifier. The training manager reviews all course evaluations – student and Instructor evaluations are reviewed. The course QA checklist is completed for each course and reviewed by administration. There was evidence to suggest that students and faculty have the opportunity to provide feedback on course activities i.e. evaluation forms. Students have to opportunity to make contact with management throughout their course.
- There is an assessment policy and associated procedures in place. There was evidence provided showing that faculty and associated stakeholders are made aware of the assessment process. There are procedures in place for the security of assessment related material in line with the data protection policy. There is a named person responsible for computer access (password controlled) to assessment material. Appropriate and verifiable methods are used to carry out assessment activities including any adaptations to accommodate individuals with special requirements. Responsibility for the PHECC certification system is allocated to a named member of staff.
- RI representatives indicated in discussion that internal verification (IV) takes place quarterly. There was no documented evidence provided to show IV had taken place. RI representatives stated that this was a new process under development.
- External Authentication is a new process and is currently carried out by PHECC.
- There is no formal results approval process documented or in place. The internal verifier checks the results and they are recorded on the IT system. Once checked the results are made available to the students immediately, certificates are then authorised and issued to students.
- There is an appeals policy and associated procedures in place and there is evidence to show that students are informed of their right and opportunity to formally appeal. The appeals procedure is appropriately time bound.

3.0 Conclusions and Outcomes

The findings from this review indicate that the recognised institution met or part met 97% of the applicable quality standards set out in the PHECC quality review framework. There are policies and procedures in place that indicate a commitment to internal quality assurance and continuous quality improvement. The systems in place provide an oversight at all levels in the organisation to ensure continuous quality improvement is embedded in the organisation. 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.