Heartbeat Safety

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	Heartbeat Safety
Profile	A private training company and a PHECC recognised institution since 2008.
PHECC courses being delivered	Cardiac First Response – Community Cardiac First Response – Community Instructor Cardiac First Response – Advanced Cardiac First Response – Advanced Instructor Emergency First Response Emergency First Response - Instructor
Higher Education Affiliation	None
Address	Unit 3, Crookstown Business Park, Crookstown, Co. Kildare

1.2 Reports Details

Date of on-site visit	15-09-16
Quality Review Panel (QRP)	
P Collins	QRP Chair – Independent
J Donaghy	QRP Member – Independent
K Walsh	QRP Member – PHECC
RI Representatives	
Pam Skerritt	Managing Director
Michelle Wyse	Administrator/Internal Verifier
Date of Council Approval	15-12-2016

1.3 Scope of the Review

The review covered all aspects of the institution's activities associated with meeting the quality standards as outlined in the PHECC quality review framework. The Cardiac First Response (CFR) and Emergency First Response (EFR) 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	Along with the managing director the administrator was present for the full review.
Learner Discussions	None
Exit Meeting	The QRP met with two representatives. The results of the review were summarised and agreed. The panel outlined the next steps in the process and the meeting was closed.

2.2 Observation of Facilities and Resources

Area	Comments
Facilities	The main training facilities take up the second floor of the building in which they are based. There are several large training rooms, storage areas, offices, a canteen and toilet facilities available for students. Training also takes place in external premises.
Resources	Resources and equipment are stored centrally 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

- Website
- Organisational Chart
- Affiliated Trainers Contract
- Data Protection Policy
- Induction Checklist
- Course Reports
- Course Pack for Instructors
- Examiner Pack
- Financial Records
- Mission Statement
- Communications Policy
- Complaints Policy
- Learner Information Pack
- Access Policy
- Recognition of Prior Learning (RPL) Policy
- Equality and Diversity Policy
- Grievance Policy
- Equipment Hygiene Policy
- Location Checklist
- Health and Safety Statement
- Risk Rating Checklist
- Student Feedback Forms
- Staff Recruitment Procedure
- Registration Form
- Role Descriptions
- Evaluation Forms
- Lesson Plans
- Internal Verification Report
- Results Approval Policy
- Student Appeals Policy

2.4 Quality Standards – Review

Section One: Organisational Structure and Management	
Standard	**QRP Findings**
1.1 Governance - The Institution has clear lines of authority and engages a system of accountability for PHECC approved courses.	The organisational chart was available for review and reflects the overall structure of the organisation. It clearly indicates those responsible for the quality assurance of PHECC approved courses. Roles and Responsibilities were reviewed and found to be adequate. During discussions the RI representative outlined a process for internal course approval and results approval. Course and results approval are being carried out according to PHECC guidelines. Evidence was provided that self-assessment has been carried out, with the PHECC Recognised Institution Self-Assessment Report (RISAR) and Quality Improvement Plan (QIP) being utilised.
1.2 Management Systems and Organisational Processes - The Institution can show that it has well documented organisational processes in place to meet the needs of all stakeholders.	There is a documented policy and procedures for data protection which need to be updated to reflect current practice. The RI has an IT system (NAS) in place for the management of student and faculty records. Databases are managed and maintained in this system. These databases were reviewed and found to be effective in managing records. Contracts are in place for affiliated instructors. These were reviewed and found to be comprehensive. Computers are password protected and access is limited to authorised personnel. Hard copy records are stored in a secure location in the main office. Student records were reviewed and were found to be satisfactory. Quantitative measures are in place to capture relevant information to inform practice. PHECC certification is carried out according to guidelines.
1.3 Management Responsibility - There is a clearly defined system in place showing who is responsible for ensuring the quality assurance of PHECC approved courses.	The managing director has overall responsibility for the quality assurance of PHECC approved courses as evidenced on the organisational chart. During discussions the RI representative outlined how faculty (staff and affiliates) are made aware of their responsibilities for the quality of PHECC approved courses. This happens during induction. An induction checklist was available for review. There was evidence provided that internal verification has taken place i.e. internal verification reports. The internal verifier was present during the review process.
1.4 Self-Assessment, External Evaluation and Improvement Planning -	The RI has a range of quality assurance policies and procedures documented. Evidence was provided which showed that procedures are in place to monitor PHECC

The Institution carries out internal assessment and engages in a quality improvement planning process (annually) which includes external evaluation.	approved courses. Evidence was provided which showed that stakeholders (Students, Instructors, clients) were involved in the self-assessment process. During discussions and in their RISAR the RI outlined a range of activities that take place which inform self-assessment e.g. evaluation forms, client meetings etc. There was also evidence that the RI is engaged in activities that support the continuous quality improvement of courses and services. Areas for improvement have been identified and included in the QIP. The PHECC RISAR was utilised for the self-assessment and the QIP will be updated with agreed actions following the review process.
1.5 Transparency and Accountability - The institution conducts its activities in an open and transparent manner.	The RI website and promotional material provides relevant information to allow potential students to make an informed choice about course participation. Students are provided with a detailed handbook which was available for review. Evidence indicated that students are provided with information regarding their entitlements at the beginning of their course and throughout. Course reports are completed by faculty. These are maintained by management, analysed to inform practice and were made available for review.
1.6 Administration – Administration arrangements meet the needs of all stakeholder groups.	The RI has a full time administrator and support is provided when required. During discussions RI representatives outlined the procedures for course administration pre, during and post course. Administrative procedures were reviewed and found to be effective and efficient. Student documentation was reviewed to verify these activities. Administrative procedures are outlined in the office standard operating procedures. The IT system was reviewed and found to be effective in managing and maintaining relevant records and information.
1.7 Financial Management - The institution manages its' finances in a responsible manner that meets the needs of all stakeholders.	The RI is fully compliant with all relevant financial requirements and PHECC has verified this prior to the on-site review.

Section Two: The Learning Environment	
Standards	QRP Findings
2.1 Education and Training Mission Statement - The Mission of the Institution is appropriately focused with education and training as a core activity.	The RI demonstrates its commitment to quality training through its mission statement. The mission statement was visible within the main training centre. At the time of review the mission statement was scheduled for a review and update. The RI communicates its mission statement to all stakeholders through its website and on relevant documentation i.e. student handbook etc. Plans are in place to include the updated mission statement on all relevant documents and promotional material.
2.2 Communication with Students and Other Stakeholders - Two way communication systems are in place between faculty, students and other stakeholders as appropriate.	There is a documented communications policy and procedures which need to be updated to reflect current practice. During discussions and in their RISAR the RI outlined a comprehensive range of methods used to communicate with students and associated stakeholders, including; course information sheets, course confirmation, social media, evaluation forms, regularly scheduled meetings, emails etc. Evidence was available to support the fact that these activities have taken place. Evidence was also provided to show that students have the opportunity throughout their course to meet with their instructor – one to one – to discuss any issues they may have.
2.3 Course Access, Transfer and Progression - Course information in clear, access is fair and consistent, with recognition of prior learning, as appropriate.	The RI has clear criteria documented for entry to PHECC approved courses. There is an access and admissions policy in place. The website and promotional material provides potential students with sufficient information to make an informed choice about participation in a course. During discussions RI representatives outlined a range of sources of information available to students. Evidence was viewed to support this. There is a documented Recognition of Prior Learning (RPL) policy in place which is made available to all stakeholders and was available for review.
2.4 Equality and Diversity - There is a commitment to the provision of equal opportunities for students and faculty in compliance with relevant equality legislation.	The RI has an equality and diversity policy which was available to review and is displayed in all learning environments. During discussions the RI representatives stated that equality and diversity training is provided. However at the time of review there was no documented evidence of this taking place. During discussions RI representative outlined and gave examples of how they accommodate individuals with additional support needs. At the time of review these activities were not recorded. Codes of practice are in place

	and implemented.
2.5 Complaints and Appeals - Complaints and Appeals Processes are open, transparent and accessible to students and other stakeholders.	The RI has a documented policy and associated procedures for complaints and appeals which were available for review. These need to be updated to reflect current practice. During discussions RI representatives outlined the processes and provided evidence of a robust system.
2.6 Training Infrastructure - Courses are carried in an appropriate learning environment, sufficiently resourced in order to deliver training to the highest standards.	The main training facilities offer students a well-resourced safe, clean and welcoming learning environment including a wide variety of reference books onsite. Students also have access to additional learning material online. During discussions the RI representative indicated that training is carried out externally. At the time of review there were no documented selection criteria in place for external premises. Sufficient resources are available for each course from head office. There is a resource checklist for each course. There are no documented procedures in place for the maintenance and cleaning of equipment. However there was evidence that this takes place. A maintenance checklist is being put in place for all faculty and affiliates.
2.7 Health and Safety - A safe and healthy environment exists in the institution.	The RI has a health and safety statement which is available to all stakeholders. Health and safety procedures are in place and in line with relevant legislation. Risk assessment is carried out on each venue used for course activities and records maintained.
2.8 Social Environment - A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.	Student feedback was reviewed and provided evidence that students have positive learning experiences. The facilities provide students with a study area where they can work alone or in groups. Evidence was provided to show that faculty are encouraged to use a variety of instructional methods during training. The RI is fully compliant with PHECC requirements on instructor/student ratios.

Section Three: Faculty Recruitment and Development	
Standards	**QRP Findings**
3.1 Organisational Staffing - All faculty are aware of their role and responsibilities when involved in the administration and/or delivery of a PHECC approved course and their conduct is professional at all times.	There is a recruitment and development policy and associated procedures in place. RI representatives indicated during discussions that faculty are made aware of their quality responsibilities. Evidence was provided to support this i.e. induction, affiliate contract etc. There are comprehensive records available for review of faculty activities associated with PHECC approved courses. Documentation indicates that the RI meets the minimum faculty requirements for course approval.
3.2 Faculty Recruitment - Faculty, are recruited on the basis of personal suitability, appropriate experience and qualifications.	A role description and selection criteria for each position is documented and available for review. During discussions and in their RISAR the RI outlined their process for faculty recruitment. Evidence was available to demonstrate these activities taking place. Documentation indicates that the RI meets the minimum faculty requirements for course approval.
3.3 Faculty Development and Training - Faculty are encouraged and supported to gain additional training/qualifications appropriate to their role in or with the institution.	There are documented procedures in place for the continuous professional development of faculty. During discussions the RI representative indicated that faculty members do receive an induction and any updates are communicated via regularly scheduled CPD workshops (bi-annually). There was evidence to indicate that induction and the workshops had taken place. Instructors are provided with opportunities to highlight upskilling requirements through formal and informal meetings. There are records of these meetings. Faculty are encouraged to maintain their CPD through membership and affiliation with external agencies e.g. voluntary groups. Evidence was provided of the RIs membership and affiliation to a range of external agencies.
3.4 Communication with Faculty - Two way communication systems are in place between management and faculty.	The RI has a documented policy and associated procedures which need to be updated to reflect current practice. During discussions the RI representative described a range of formal and informal methods of communication between faculty and management. Evidence and discussion indicated that regular communication takes place between management and faculty before, during and after each course and that faculty are encouraged to provide feedback during and after each course. Procedures are in place to ensure that formal meetings take place. Records of these meetings are maintained.

3.5 Work Placement and Internship - Host organisations (internship sites) are appropriate to the course content and learning outcomes to be achieved (NQEMT courses only).	Not Applicable
3.6 Faculty and Stakeholder Management - A system is in place to ensure appropriately qualified and experienced individuals are engaged by the institution.	The evidence provided indicates that faculty meet the minimum requirements set by PHECC to deliver courses. The system in place ensures that only instructors with valid certification are allocated to carry out courses. The IT system was reviewed and course documentation reviewed indicated appropriately qualified faculty on each course. Faculty records are maintained and were available for review and were found to be accurate and up to date. During discussions the RI representative stated that regular monitoring of faculty takes place. These activities are documented. Evidence was provided of the analysis of evaluation forms by senior management.
3.7 Collaborative Provision - Appropriate contractual arrangements are in place with affiliated instructors.	The RI has comprehensive contractual arrangements in place with affiliated faculty. Documents were made available for review. Evidence was also provided that the responsibility for the quality of PHECC approved course is clearly communicated and understood. Students are made aware at the beginning of each course of the role of each party in course provision i.e. induction.

Section Four: Course Development, Delivery and Review	
Standards	QRP Findings
4.1 Course Development - Courses are designed to meet the requirements for PHECC approval and certification and reflect a commitment to quality improvement.	There is a course development procedure in place. Course material was reviewed which showed that appropriate activities were being carried out to allow students to meet the learning objectives. A broad range of teaching methods are used and documented. Courses are developed in line with PHECC guidelines. During discussions RI representatives outlined the procedures for implementing updates and changes to courses. Evidence was provided indicating these activities have taken place. Course information is clearly stated and outlined on the website and promotional material. Detailed timetables are available for each course on offer. Documentation also indicated that appropriate student/tutor ratios are maintained.
4.2 Course Approval - There are clear guidelines for course approval.	During discussions RI representatives outlined a process for internal course approval. This process is documented and evidence was provided of these activities. All the information required for PHECC course approval has been supplied.
4.3 Course Delivery, methods of theoretical and clinical Instruction - Courses are delivered in a manner that meets students' needs and in accordance with PHECC guidelines.	There is a documented policy and procedures for course, development and delivery which needs updated to reflect current practice. During discussions the RI representative indicated the student induction takes place. Evidence was available to support this. Attendance records are maintained for each course and were available for review. The evidence indicated that all courses are delivered by appropriately qualified and certified instructors. Course content and delivery meets PHECC education and training guidelines. Students have the opportunity to meet with their instructor for feedback and remedial work, if required.
4.4 Course Review - Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	There are no documented procedures for course review. However during discussions and in their RISAR RI representatives highlighted a range of activities that take place to review each course i.e. student and faculty feedback forms, standards group meetings, client feedback. Student course evaluation forms were available for review. There is a range of regularly scheduled meetings that take place. Records of these meetings are available for review. At the time of review course reports were being completed. The RI has submitted a quality improvement plan based on their self-assessment findings and will be updating this based on the

	findings from the external review.
4.5 Assessment and Awards - Assessment of student achievement for certification operates in a fair and consistent manner by all tutors and instructors in line with PHECC assessment criteria.	There is a documented policy and procedures in place which needs to be updated to reflect current practice. The evidence provided indicates that appropriate methods are used on all courses and it is clearly stated when PHECC assessment material is being used. Students are provided with assessment information prior to and during their course. RI representatives indicated that students are provided with reasonable accommodation on request. At the time of review there was no evidence of these activities taking place. Procedures are in place for the security of assessment related material which is stored centrally and only issued upon 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 are documented procedures in place which need to be updated to reflect current practice. The RI representative indicated in discussion that internal verification takes place on all courses and there was evidence to support this. The internal verifier was present throughout the review.
4.7 External Authentication - There is independent and authoritative confirmation of assessment and certification, where relevant, in accordance with PHECC guidelines.	External Authentication is currently carried out by PHECC.
4.8 Results Approval - A results approval process operates in the institution.	There is a documented results approval procedure and a results approval panel, if required. During discussions the RI representative indicated that the instructor checks the results and they are checked again by the administrator/internal verifier. There was evidence to support this. Once checked the results are made available to students and the certificates are issued.
4.9 Student Appeals - A process is in place for students to appeal their approved result.	There is an appeals policy in place which is communicated to students in relevant documentation.

3.0 Conclusions and Outcomes

The findings from the review indicate that the recognised institution met or part met 100% of the applicable quality standards set out in the PHECC quality review framework. There are relevant policies and procedures in place that indicate a commitment to internal quality assurance and continuous quality improvement (CQI). They also ensure that the quality assurance of PHECC approved courses is carried out in an effective and efficient manner. The evidence indicated that the RI's systems provide a robust oversight of all activities and ensure that students have a comprehensive and rewarding learning experience. The updates and revisions highlighted during discussions – when implemented – 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