Pre-Hospital Emergency Care Council

Quality Review Framework
Composite Report
Hibernian Healthcare Ltd

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1. Institution Details

Name	Hibernian Healthcare Ltd.
Address	Unit 4, The Westway Centre, Ballymount Avenue, Dublin D12 HP66
Type of Organisation	Private Company
Profile	Approved Training Institution since 2018
PHECC Courses Delivered	FAR, CFR Community, CFR – Epinephrine, CFR – Glucagon, CFR – Glyceryl trinitrate, CFR – Naloxone, CFR – Salbutamol, CFR Advanced, EFR Instructor
Higher Education Affiliation	N/A

2. Review Details

Purpose	• To facilitate the enhancement of a successful learning experience for students • To foster a culture of Continuous Quality Improvement in Institutions • To generate public confidence in the standard of education and training in pre-hospital emergency care
Scope	• The review covered all aspects of the institution's activities associated with meeting the quality standards as outlined in the PHECC quality review framework.
Date(s) of the Desktop Review	14/11/2022 – 12/12/2022
Date of Online Review	13/12/2022

3. Report Details

Draft report sent to Institution for feedback	03/03/2023
Final report sent to Institution	25/04/2023
Director Approval	
Date	19/04/2023
Report Compiled by	Quality Review Panel

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4. Review Activities

4.1 Meetings

Opening Meeting	
Organisation	**Role**
PHECC	Quality Review Panel x 3
PHECC	Observer
Hibernian Healthcare	Managing Director
	Operations Manager
	Training Manager
	IT Director
Closing Meeting	
Organisation	**Role**
PHECC	Quality Review Panel x 3
PHECC	Observer
Hibernian Healthcare	Managing Director
	Operations Manager
	Training Manager
	IT Director

4.2 Stakeholder Discussions

Name/Group	Role
Senior Management	Managing Director
	Operations Manager
	Training Manager
	IT Director

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4.3 Observation of Practice, Facilities and Resources

Practice – e.g., Course delivery, administration, clinical placement (add rows as required)	
Location	**Comments**
N/A	N/A
Facilities (add rows as required)	
Location	**Comments**
N/A	N/A
Resources – e.g., equipment, ICT, course material, etc (add rows as required)	
Location	**Comments**
N/A	N/A

4.4 Document Review

The records and systems listed below were reviewed and discussed during the desktop and on-site reviews.

- 2022 Self-Assessment Report
- Organisation Structure and Governance V2
- Course Delivery Procedure VI – Sept/Oct Instructor Course
- Cert of Incorporation
- Record Management Policy
- Data Protection
- Access Level Control
- Incident and Complaint Reporting
- QA Review Meeting Record
- Training Infrastructure
- Responder Instructor Student Information Pack
- Attendance Form
- Named Faculty Form
- Faculty Contract – Draft
- Programme Development – Terms of Reference
- Course Development Plan for Instructor Courses
- Admission Policy
- Assessment & Awards Policy

- PHECC Business Case
- Mission Statement
- Course Delivery Procedure V1
- Role Descriptions
- Risk Rating Sept/Oct Instructor Course
- Data Breach Notification
- Subject Access Request
- Privacy Notice
- Safeguarding Policy
- Tax Details
- Tutor Feedback Form
- Premises Checklist x 2
- FAR Course Student Information Booklet
- Equality Discrimination & Racism Policy
- Instructor Review Form
- Responder Instructor Lesson Plans – Sessions 1-7
- FAR Lesson Plans
- Course Sign-In Sheets x 3
- Internal Verification Checklist
- Appeals Policy

- PHECC Organisational Details
- Organisational Structure – Training
- Risk Management Process – User Guide
- Accountant Tender Letter
- Data Retention
- Data Processing Agreement – Controller
- Insurance Details
- Quality Manual
- Health & Safety Policy
- Maintenance Checklist V2
- PHECC Instructor Course Student Information Booklet
- Instructor Database Sample
- Faculty Management Policy
- Faculty Communication – Sample
- Course Material Development
- Recognition of Prior Learning Policy

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• Organising Courses	• Role Descriptions V2	• Training Course Procedure
• Student Records – Instructor Courses 2022	• PHECC Course Reporting Audit V2	• Risk Rating for PHECC Courses
• Course Evaluation Samples	• Facilities Form	• Instructor Database Sample
• FAR Lesson Plans	• Sample IV Reports	• Equipment Lists

5. Compliance Rating and Level

The Compliance Ratings (CRs) are designed to establish a baseline, measure ongoing progress, and encourage CQI. Ratings are given on a five-point scale (0-4) against each component. To calculate the overall Compliance Level (CL) for the relevant quality standard:

1. Add the CR for each applicable component of the QS to get a total number.
2. Divide the total number by the number of applicable components to get the average.
3. Check for the compliance level on the matrix and record on the SAR (see 2.6.2.1 for example).

Rating	Level	Descriptor
N/A	Not Applicable – N/A	The standard is not applicable.
0 – 0.99	Not Met – NM	No evidence of compliance in the organisation.
1 – 1.99	Minimally Met – MNM	Evidence of a low degree of organisation-wide compliance.
2 – 2.99	Moderately Met – MDM	Evidence of a moderate degree of organisation-wide compliance.
3 – 3.99	Substantively Met – SM	Substantive evidence of organisation-wide compliance.
4	Fully Met – FM	Evidence of full compliance across the organisation.

6. QRP Findings

6.1 Theme 1: Organisational Structure and Management

Quality Area	1.1 Governance	Level
Quality Standard	The institution has fit-for-purpose governance that ensures objective oversight, and clear lines of authority and accountability for all activities associated with PHECC-approved courses.	MNM
	QRP Findings	

During discussions representatives described the education and training governance systems that support PHECC approved courses. The evidence provided during discussions indicated that these systems ensure objective oversight and a clear separation between those who design/develop courses and those who

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approve them. The evidence provided also indicated that the institution would benefit from new/updated documentation to fully reflect the governance practice and activities described during discussions.

The evidence provided indicated that the institution would benefit from additional and updated documentation to support risk management activities, including risks associated education and training.

Areas of Good Practice
• Systems in place to ensure oversight of education and training activities and a separation between those who design/develop courses and those who approve them. • Clearly indicated who has overall responsibility for education and training governance and delegated responsibilities. • Robust systems in place for course approval/amendment and results approval. • Self-assessment carried out. • Procedures in place for identifying, assessing, and managing risk.

Areas for Improvement
• Organisational Chart – To reflect education and training governance . • Procedures to ensure that when required relevant sub-groups and individuals are in place to carry out oversight activities. • Records of oversight activities. • Sub-group terms of reference and individual role/job descriptions. • Risk management documentation.

Quality Area	1.2 Management Systems and Organisational Processes	Level
Quality Standard	The institution complies with all relevant legislation and cooperates with PHECC to meet its requirements.	MDM

QRP Findings

The evidence provided indicated that the Institution:
- Is an established legal entity that provides PHECC education and training standards.
- Is in good financial standing with relevant stakeholders.
- Has adequate insurance cover in place to cover all education and training activities.

The evidence provided indicated that the institution would benefit from:
- Ensuring that all the tasks from student entry to exit outlined during discussions are accurately documented.
- Capturing and maintaining all student records.
- Updating and maintaining all faculty records.
- Updating existing and adding new documentation to support data protection activities.
- Additional support to ensure all quality assurance activities outlined in the documentation and during discussions are systematically and consistently carried out.
- Updating documentation to ensure obligations under the National Vetting Bureau (Child and Vulnerable Persons) Act 2012 are being fully met.

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-	Updating the complaints policy to reflect current practice and implementing systems to ensure that all stakeholders are made aware of it.

Areas of Good Practice

- Financial Standing with relevant stakeholders
- Systems for maintaining student and faculty records
- Resources to support Quality Assurance activities

Areas for Improvement

- Documented tasks form student entry to exit
- Maintaining up to date student and faculty records
- Data Protection Policy, procedures and supporting documents
- Insurance
- Finance and Human Resources to support Quality Assurance activities
- Complaints Policy and procedures
- Safeguarding

Quality Area	1.3 Continuous Quality Improvement	Level
Quality Standard	The institution has a proactive, systematic approach to monitoring, reviewing, and enhancing education and training activities.	**MDM**
	QRP Findings	

During discussions representatives described a range of activities to support continuous quality improvement across the institution. The evidence provided indicated that the institution would benefit from new/updated documentation to support these activities.

It was clear from the evidence provided that the Managing Director has overall responsibility for the quality assurance of PHECC approved course, with decision-making and approval responsibilities delegated as appropriate.

During discussions representatives outlined and described their responsibilities for the quality assurance of PHECC approved courses. They also outlined activities to ensure all those involved in education and training have been made aware of their quality assurance responsibilities, e.g., induction etc. The evidence provided indicated that the institution and stakeholders would benefit from new/updated documentation (records) to support these activities.

During discussions representatives described how they collect, analyse, and use student, faculty, and other stakeholder feedback. The evidence provided indicated that the institution, students, and other stakeholders would benefit from new/updated documentation to support these activities.

During discussions representatives described and provided up to date evidence of the systematic review of learning resources and locations.

The evidence provided also indicated that the institution would benefit from:
- Developing/updating performance indicators and linking them to all aspects of education and training for monitoring purposes.

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- The systematic review of policies, procedures and supporting documents to ensure they are effective, fit for purpose and are consistent with the requirements of relevant legislation.
- Ensuring all action items identified during quality improvement activities are included in the quality improvement plan for implementation.

Areas of Good Practice

- Overall responsibility and delegated authority clearly allocated
- Awareness among personnel of their quality assurance responsibilities
- Systematic collection, analysis and use of student, faculty, and other stakeholder feedback
- Systematic review of learning resources and locations
- Documented evidence of up-to-date quality improvement planning and implementation

Areas for Improvement

- CQI/Quality policy, associated procedures and supporting documents
- Quality assurance responsibility awareness
- Performance indicators and links to education and training activities
- Systematic review of policies, procedures and supporting documents
- Quality improvement action implementation

Quality Area	1.4 Transparency and Accountability	Level
Quality Standard	The institution conducts its activities in an open and transparent manner, with appropriate feedback and feed-forward systems in place, with and between all relevant stakeholders.	MNM

QRP Findings

During discussions representatives outlined and described:
- A range of reporting activities at all levels in the institution.
- Education and training tasks from student entry to exit.
- How they ensure that certificate activity reports, the annual report (including a disclosure of all faculty) and any other targeted information requests are submitted to PHECC.
- Third party relationships i.e. contracted faculty.
- How they provide other stakeholders (employers, etc.) with information and obtain information from them.
- How they provide information about the institution's quality assurance system to the public.

Documentary evidence was provided to support some of these activities. The evidence provided also indicated that the institution would benefit from new/updated documentation to support the implementation of all these activities and provide up to date evidence of practice.

Areas of Good Practice

- Reporting throughout the institution
- Student information
- Responsibility for reporting to PHECC allocated

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<table>
<tr><th colspan="2">Areas for Improvement</th></tr>
</table>

Areas for Improvement
• Documenting all tasks from student entry to exit ensuring that they are clearly allocated and linked to relevant performance indicators • Procedure for PHECC communication • Stakeholder communication procedures • Public awareness of third-party relationships, the quality assurance system, and external reviews

6.2 Theme 2: The Learning Environment

Quality Area	2.1 Training Infrastructure	Level
Quality Standard	Courses are carried out in appropriate facilities and are sufficiently resourced to deliver training to the highest standards.	**SM**

QRP Findings
The evidence provided indicated: - That appropriate training premises are selected and used to deliver PHECC approved courses. - That a documented selection criteria and checklist for external premises to be used for course delivery is in place. - That appropriate equipment/resources are available and have been used for each course. - That a system is in place to regularly maintain and update equipment and that these activities have taken place. - That all resources used for courses are fit for purpose and accessible . The evidence indicated that the institution would benefit from documenting all the activities described during discussions. During discussions, and in the documentation provided for review, representatives outlined and described a range of activities to demonstrate compliance with their safety, health, and welfare at work legislative obligations. The evidence provided indicated that the institution would benefit from new/updated documentation to support the implementation of these activities and to provide evidence of practice.

Areas of Good Practice
• Safety, Health and Welfare practice • Premises selection • Equipment and resource availability • Equipment maintenance, updating and records

Areas for Improvement
• Safety, Health, and Welfare supporting documentation • Training premises supporting documents • Equipment/resources supporting documents

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Quality Area	2.2 Student Support	Level
Quality Standard	A positive, encouraging, safe, supportive, and challenging environment is provided for students.	**MDM**

<table>
<tr><td colspan="3" align="center">**QRP Findings**</td></tr>
</table>

The evidence indicated that the institution and students would benefit from additional personnel to support the activities described in the documentation and during discussions.

The evidence provided indicated:
- That the institution maintains appropriate tutor/student ratios, in keeping with PHECC's course approval criteria.
- Sufficient up-to-date resources (appropriate to the level of the course) are made available to students in a variety of formats.

During discussions, and in the documentation provided for review, representatives outlined and described:
- How they make students aware of the supports available to them before, during and after their course.
- The opportunities provided for students to meet individually and collectively with faculty and/or management.
- How they obtain information from potential and existing students about any additional support needs they may have and the mechanisms to provide reasonable accommodation if required.

The evidence provided indicated that the institution and students would benefit from new/updated documentation to support the implementation of these activities and to provide evidence of practice.

Areas of Good Practice

- Appropriately qualified and experienced personnel
- Student support practice
- Faculty/student ratios
- Student resources

Areas for Improvement

- Student support personnel
- Information provision about student supports
- Procedures for obtaining information about additional support needs
- Information about mechanisms for providing reasonable accommodation

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Quality Area	2.3 Equality and Diversity	Level
Quality Standard	There is a commitment to provide equal opportunities for students and personnel, in compliance with relevant equality legislation.	**MNM**

QRP Findings

The evidence provided indicated that the institution would benefit from new/updated documentation:
- To support equality and diversity practice.
- To ensure that all relevant policies and procedures are legislatively compliant and promote equality.

During discussions, and in the documentation provided for review, representatives outlined and described:
- How students, faculty and other stakeholders have been made aware of the policy and procedures.
- How faculty are provided with up-to-date equality and diversity information and training.
- How course delivery accommodates the cultural backgrounds and different learning styles of students.

The evidence provided indicated that the institution and students would benefit from new/updated documentation to support the implementation of these activities and to provide evidence of practice.

The evidence provided indicated that the institution, students, faculty, and other stakeholders would benefit from new/updated codes of conduct.

Areas of Good Practice

- Equality and diversity practice
- Course delivery

Areas for Improvement

- Equality and diversity documentation
- Policy and procedure review
- Raising awareness of the policy
- Codes of Conduct
- Information and training records

Quality Area	2.4 Internship/Clinical Placement	Level
Quality Standard	*INQEMT courses only:* Internship/Clinical Placement sites are appropriate to course content and the learning outcomes to be achieved	**N/A**

QRP Findings

N/A

Areas of Good Practice

N/A

Areas for Improvement

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N/A

6.3 Theme 3: Human Resource Management

Quality Area	3.1 Organisational Staffing	Level
Quality Standard	The institution has sufficient, appropriately qualified, and experienced personnel to maintain high-quality education and training activities.	**MNM**

QRP Findings

The evidence provided indicated that the composition of the institution's personnel meets PHECC education and training standards for each course on offer.

During discussions, and in the documentation provided for review, representatives outlined and described:
- How they recruit appropriately qualified and experienced personnel (staff and contracted) to carry out education and training activities.
- The minimum standards for the academic and subject matter experience of faculty.
- How personnel involved in the administration and delivery of courses have been made aware of their quality assurance responsibilities.

During discussions representatives indicated informal processes and a need to formalise activities. The evidence provided indicated that the institution and students would benefit from new/updated documentation to support the implementation of these activities and to provide evidence of practice.

The evidence provided indicated that institution would benefit from additional administrative, quality management/assurance support. This would ensure that the institution would have the capacity to:
- Carry out all the activities described in the policies and procedures.
- Systematically organise, deliver, and monitor the quality of courses and awards.
- Ensure full compliance with the QRF.

During discussions representatives outlined and described the education and training activities carried out by staff and contracted faculty. The evidence provided indicated that the institution and personnel would benefit from updated job descriptions and terms of employment/engagement to accurately reflect the activities described during discussions.

Areas of Good Practice

- The composition of faculty
- Minimum standards in place for faculty
- Quality assurance activities

Areas for Improvement

- Support to:
  - Carry out all the activities described in the policies and procedures
  - Systematically organise, deliver, and monitor the quality of courses and awards
  - Ensure full compliance with the QRF
- Job descriptions
- Terms of employment engagement, e.g., contracted faculty agreement

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Quality Area	3.2 Personnel Development	Level
Quality Standard	The institution takes a systematic approach to supporting and developing all personnel, ensuring they have the competencies to deliver high-quality education and training.	MNM

QRP Findings

During discussions, and in the documentation provided for review, representatives outlined and described:
- How they identify training/upskilling requirements for personnel.
- Staff and contracted faculty induction.
- How they meet the support and development needs of relevant personnel, including CPG upskilling.
- The mechanisms that are in place for faculty to request support for training/upskilling to achieve additional qualifications.
- The formal support and supervision and annual appraisal systems that are in place.
- Personnel have completed training/upskilling relevant to their role.

During discussions representatives indicated informal processes and a need to formalise activities. The evidence provided indicated that the institution, staff, and contracted faculty would benefit from new/updated documentation to support the implementation of these activities and to provide evidence of practice and that personnel have completed the relevant training/upskilling.

Areas of Good Practice

- Induction is carried out
- Evidence of faculty upskilling

Areas for Improvement

- Training/upskilling procedures
- Induction content and attendance
- Personnel development plans
- Formalised support, supervision, and annual appraisal

Quality Area	3.3 Personnel Management	Level
Quality Standard	A systematic approach is taken to managing all individuals and groups engaged in education and training activities.	MNM

QRP Findings

The evidence provided indicated that there is a system in place to ensure that only personnel with valid certification deliver PHECC approved courses.

During discussions, and in the documentation provided for review, representatives outlined and described:

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- The systems that are in place for regular and appropriate communication between faculty and management.
- How faculty provide feedback during and after their course.
- How the activities of faculty are systematically monitored through observation and the analysis of relevant documentation.
- The HR policies and procedures in place to meet its legislative obligations.

During discussions representatives indicated informal processes and a need to formalise activities. The evidence provided indicated that the institution, staff, and faculty (including contracted faculty) would benefit from new/updated documentation to support these activities and provide evidence of practice.

The evidence provided also indicated that the institution would benefit from the development of procedures for dealing with poor and unacceptable performance of faculty

Areas of Good Practice

- Communication practice between faculty and management, including feedback
- Faculty feedback
- System for ensuring only personnel with valid certification deliver PHECC approved courses
- Faculty monitoring

Areas for Improvement

- Documented communication systems
- Faculty course reports
- Faculty monitoring documentation
- Procedure for dealing with poor and unacceptable performance of faculty
- HR policies and procedures

Quality Area	3.4 Collaborative Provision	Level
Quality Standard	Appropriate contractual and quality assurance arrangements are in place with contracted staff.	**MNM**
QRP Findings		

During discussions representatives outlined and described the relationship with contracted faculty and the contractual and quality assurance arrangements that are in place. The evidence provided indicated that the institution and contracted faculty would benefit from a documented collaborative provision policy and associated procedures that:
- Clearly states that the Institution retains full control and responsibility for academic decisions and quality assurance.
- Clearly states that the Institution is responsible for activities carried out in its name.
- Outlines the due diligence of any individual or organisation contracted to deliver any activity associated with PHECC approved courses.
- Clearly details the responsibilities of each party for the quality assurance of PHECC approved courses.

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The evidence indicated that the institution would benefit from the development new/updated documentation to support the monitoring of courses being delivered by contracted faculty. It would also benefit from maintaining up to date records of these activities.

During discussions representatives indicated that contracted faculty sign an instructor's agreement. This document was made available for review. The evidence provided indicated that the institution and faculty would benefit from written and signed contracts and agreed quality assurance standards between both parties.

The evidence provided indicated that the institution maintains records of contracted faculty and that details were of all contracted faculty were submitted to PHECC.

The evidence provided indicated that the institution would benefit from receiving regular reports of contracted faculty activities, the analysis of these reports and the implementation of any improvement actions identified from the analysis.

Areas of Good Practice

- Faculty records
- Faculty details submitted to PHECC
- Faculty reporting practice

Areas for Improvement

- Collaborative provision policy and associated procedures
- Procedures for monitoring contracted faculty
- Faculty contracts and agreements
- Faculty reporting procedures

6.4 Theme 4: Course Development, Delivery and Review

Quality Area	4.1 Course Development and Approval	Level
Quality Standard	A systematic approach is taken to course development and approval.	SM
QRP Findings		

The evidence provided indicated that the institution would benefit from new/updated documentation to:
- Support course development, delivery, and review.
- Ensure that any updates or changes in PHECC education and training standards, clinical practice guidelines or examinations standards are implemented.

The evidence provided indicated that course development:
- Reflects PHECC requirements.
- Demonstrates an appropriate balance between theory and practice.
- Provides a balance between presentations, group work, skills demonstrations, practical work, and blended learning, as appropriate.
- Promotes a commitment to self-directed learning, as appropriate.

The evidence provided also indicated that the development of course material included:

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- Clearly outlined aims and objectives, detailing competencies to be achieved by students.
- Detailed lesson plans that include all information as set out in PHECC guidelines for theoretical and practical lessons.
- Detailed timetable, time on each topic, teaching method, and tutor/instructor name etc.

During discussions representatives described a comprehensive system for the systematic approval of courses, which clearly indicated a separation between those who design/develop a course and those who approve it. The evidence provided indicated that the institution would benefit from new/updated documentation to support these activities and provide evidence of good practice in academic governance.

Areas of Good Practice

- Course development practice
- Course approval practice

Areas for Improvement

- Course development, delivery, and review documentation
- Course material

Quality Area	4.2 Course Delivery – Methods of Theoretical and Clinical Instruction	Level
Quality Standard	Courses are delivered in a manner that meets students' needs and in accordance with PHECC guidelines.	**MDM**
QRP Findings		

The evidence provided indicated that:
- Courses are delivered by appropriately qualified personnel.
- Instructor/tutor details are recorded on course documentation.
- Records of student attendance are maintained.

During discussions, and in the documentation provided for review, representatives outlined and described:
- How courses are delivered in keeping with PHECC education and training standards.
- Student induction.
- Faculty monitoring.
- Student remediation.

The evidence provided indicated that the institution, contracted faculty, and students would benefit from new/updated documentation to support these activities and provide evidence of practice.

Areas of Good Practice

- Course delivery
- Appropriately qualified faculty
- Course documentation
- Attendance records

Areas for Improvement

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- Student induction records
- Faculty monitoring documentation
- Student remediation documentation

Quality Area	4.3 Course Access, Transfer and Progression	Level
Quality Standard	Course information is clear, and access is fair and consistent, with recognition of prior learning, as appropriate.	MNM

QRP Findings

During discussions and in the documentation provided for review representatives outlined and described:
- The admissions policy/entry criteria for each course.
- The information that is available to prospective students to make an informed choice about course participation.

The evidence indicated that the institution and students would benefit from new/updated documentation and information to support these activities and provide evidence of practice.

During discussions representatives indicated that recognition of prior learning is not applicable.

Areas of Good Practice

- Documented admissions policy and/or course entry criteria
- Prospective student information

Areas for Improvement

- Admissions/entry criteria information
- Recognition of prior learning information

Quality Area	4.4 Course Review	Level
Quality Standard	Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	MDM

QRP Findings

The evidence provided indicated:
- Students have opportunities to provide feedback during and after their course.

During discussions, and in the documentation provided for review, representatives outlined and described:
- Course review.
- Faculty feedback.
- Course evaluation by key stakeholders, including faculty.

The evidence provided indicated that the institution would benefit from new/updated documentation to support these activities and provide evidence of practice.

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The evidence provided indicated that during self-assessment areas for improvement have been identified. It also indicated that not all areas for improvement were included in the Quality Improvement Plan (QIP).

Areas of Good Practice

- Students and faculty have an opportunity to provide feedback during and after their course
- Faculty contribute to course evaluation
- The institution has carried out a self-assessment

Areas for Improvement

- Course review documentation
- Course evaluation by all key stakeholders
- Quality improvement planning and Implementation

Quality Area	4.5 Assessment and Awards	Level
Quality Standard	Assessment of student achievement is carried out in a fair and consistent manner, in line with PHECC assessment criteria.	MDM

QRP Findings

The evidence provided indicated that the institution, faculty, and students would benefit from a new/updated assessment policy, procedures and supporting documents.

The evidence provided also indicated that:
- Appropriate assessment methodology is used on all courses.
- It is clearly stated when PHECC assessment material is used.
- Students have access to the information (e.g. course material) necessary for them to participate in assessment.
- Students receive feedback on their assessment/results.
- Responsibility for assessment related material is designated.
- Assessment material is securely stored.

During discussions and in the documentation provided for review representatives outlined and described:
- How they adapt assessment methodologies to cater for students with additional support needs.
- Responsibility for the PHECC certification system.
- The internal verification, external authentication, and results approval processes.
- Student appeals.

The evidence provided indicated significant good practice in academic governance through the implementation of internal verification and external authentication. The evidence provided included external authentication reports with clearly identified improvement action. It also included evidence of improvement action implementation.

The evidence provided also indicated that the institution would benefit from new/updated documentation to support these activities and provide evidence of practice.

The evidence provided indicated that the student appeals policy and procedures need to be updated to reflect current practice and activities described during discussions.

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Areas of Good Practice
• Assessment methodology
• Student assessment information and feedback
• Student assessment support
• Assessment material security
• Designated responsibility for PHECC certification system

Areas for Improvement
• Assessment policy and procedures, including a procedure for adapting assessment methodology
• Job description relevant to management of the PHECC certification system
• Internal verification, external authentication and results approval policies and procedures
• Student appeals

7. Conclusion and Outcome

Rating	1.88
Level	MNM
Conclusion	The Quality Review Panel (QRP) had the opportunity to review a range of documentation provided for a desktop review and when requested during discussions. The review was carried out virtually and provided the QRP with the opportunity to discuss a range of topics with the institution's representatives. The QRP also had the opportunity to review evidence stored on the ICT systems.

During discussions representatives demonstrated a significant understanding of their responsibilities for the quality assurance of PHECC approved courses. The evidence indicated and highlighted good quality management/assurance practice in the institution, particularly in the areas of course design and approval. The evidence also clearly indicated the institution's commitment to quality assurance.

The evidence indicated that new and updates to existing documentation and practices would ensure that the quality assurance system remains effective, fit for purpose, and reflective of current practice. The updates would also ensure that the institution continues to meet PHECC education and training standards and quality review framework requirements.

The QRP concludes, from the evidence provided, that the implementation of the improvement actions identified during self-assessment and external quality review will lead to an enhanced learning experience for students and institution personnel. |

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