Quality Review Framework
Composite Report

Medicall Ambulance Limited
T/A Medicall Emergency Medical Training

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1. Institution Details

Name	Medicall Ambulance Ltd T/A Medicall Emergency Medical Training
Address	Unit 25, Business & Technology Park Clonshaugh Dublin 17 D17 C651
Type of Organisation	Private Training Organisation
Profile	Recognised Institution since 2009
PHECC Courses Delivered	CFR-C, CFR-C Instructor CFR Advanced, CFR Advanced Instructor, CFR &MLO Epinephrine, CFR & MLO Glucagon, CFR & MLO Glyceryl trinitrate, CFR & MLO Naloxone, CFR & MLO Salbutamol, EFR, EFR Instructor, EFR-BTEC, FAR, FAR Instructor, EMT.
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 of the Desktop Review	May 2023
Date of On-site Review	16th June 2023

3. Report Details

Draft report sent to Institution for feedback	22nd August 2023
Final report sent to Institution	03rd October 2023
Director Approval **Date**	02nd October 2023
Report Compiled by	PHECC Quality Review Panel

4. Review Activities

4.1 Meetings

Opening Meeting	
Organisation	**Role**
Medicall Emergency Medical Training	Education & Practice Development Manager
Medicall Emergency Medical Training	Training Co Ordinator
Medicall Emergency Medical Training	Operations Director
PHECC	Panel Member
PHECC	Panel Member
Closing Meeting	
Organisation	**Role**
Medicall Emergency Medical Training	Education & Practice Development Manager
Medicall Emergency Medical Training	Training Co Ordinator
Medicall Emergency Medical Training	Operations Director
PHECC	Panel Member
PHECC	Panel Member

4.2 Stakeholder Discussions

Title/Group	Role
Medicall Emergency Medical Training	Education & Practice Development Manager
Medicall Emergency Medical Training	Training Co Ordinator
Medicall Emergency Medical Training	Operations Director

4.3 Document Review

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

- Tax Clearance Cert
- Premises Selection Criteria
- RPL Policy
- Role Descriptors
- Risk Management List
- Course registrations online

- Named Faculty List
- Equality & Diversity Policy
- Bullying Policy
- Health & Safety Policy
- Quality Policy
- Administration Policy

- Communications Policy
- Programme Development Policy Learner Information sheet.
- Moodle site
- Vetting Policy
- Maintenance Policy

• Website	• Insurance Documentation	• Equipment checklist
• Instructor contract	• Data protection Policy	• Moodle learner supports page
• Safeguarding Policy	• Complaints Policy	• Moodle learner induction page
• Faculty Records Online	• Appeals Policy	
• Organisational Chart	• Student Feedback Form	

4.4 Observation of Practice, Facilities and Resources

Practice – e.g., Course delivery, administration, clinical placement	
Location	**Comments**
Onsite	Practice was observed to be acceptable for the institution's activities.

Facilities	
Location	**Comments**
Onsite	Facilities were observed to be acceptable for the institution's activities.

Resources – e.g., equipment, ICT, course material, etc	
Location	**Comments**
Onsite	Resources were observed to be acceptable for the institution's activities.

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.

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.	**MDM**

QRP Findings

The organisational charts provided did not clearly reflect the institution's governance structure for educational practices and how that structure supports separation of education and training activities to those of operational.

During discussions it was indicated that the Managing Director has overall responsibility for education and training governance with responsibilities delegated to administration and faculty.

The evidence indicated that additional/updated documentation (terms of reference, role descriptions) is required. Job/role descriptions for individuals with oversight responsibilities need to be updated to reflect current practice.

Areas of Good Practice

- Overall responsibility for education and training governance at senior management level identified.
- Delegated responsibilities for education and training governance identified.

Areas for Improvement

- Updates to existing documents to clearly reflect practice in education and training governance.
- Develop a procedure to ensure that, when required, relevant sub-groups/individuals are in place to provide objective oversight and maintain records of education and governance activities.
- Document procedures for identifying, assessing, and managing risk associated with education and training activities and maintain records of these activities.

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 indicated that the institution:
- Is an established legal entity that provides PHECC education and training standards.
- Is in good financial standing with the Revenue Commissioner.

The evidence indicated that the institution would benefit from additional support to ensure that all quality assurance activities are systematically carried out.

Areas of Good Practice

- An established legal entity that provides PHECC approved education and training.
- In good financial standing with the Revenue Commissioner.

Areas for Improvement

- Ensure all tasks associated with education and training activities are documented.
- Maintain up-to-date student and faculty records.
- Ensure that data protection policy, procedures and supporting documents reflect current practice and GDPR requirements.
- Maintain records of relevant insurance for all contracted trainers.

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 quality assurance activities, including ensuring all those involved in education and training activities have been made aware of their quality assurance responsibilities.

To support the activities described during discussions updates to existing documentation as a result of self-assessment and external review would provide further clarity to personnel about their quality assurance responsibilities.

Evidence indicated that the institution would benefit from a more systematic approach to reviewing policies and procedures to ensure they are effective, fit for purpose, reflect current practice and are consistent with the requirements of relevant legislation.

Areas of Good Practice

- A documented quality policy.
- It is clear who has overall responsibility for the quality assurance of PHECC approved courses.
- Discussion noted the onsite system and the monitoring/ reporting functions.

Areas for Improvement

- Quality policy and associated procedures.
- Ensure documents accurately reflect quality assurance responsibilities.
- Ensure relevant KPI associated with all education and training activities.
- Ensure a systematic approach to the collection, analysis and use of student, faculty, and other stakeholders, learning resources, and locations, and the review of policies and procedures.

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.	**MDM**

QRP Findings

During discussions representatives described internal reporting activities. The evidence indicated that additional documentation is required to support these activities and enhance current practice.

The evidence indicated that not all tasks associated with education and training are documented and responsibility for those tasks are not clearly allocated or linked to relevant KPI.

The evidence indicated that the institution engages contracted faculty to deliver PHECC approved courses. It also indicated that the general public are not made aware of these relationships and the responsibilities of those involved. Limited Information about the institution's quality assurance system and external reviews is made available to the public.

Areas of Good Practice

- Up-to-date reporting within the institution.
- Responsibility for reporting to PHECC allocated.

Areas for Improvement

- Ensure all tasks are clearly allocated and linked to relevant KPI.
- Documented procedure to ensure information is provided to PHECC as requested.
- Ensure all prospective students are provided with sufficient information to make an informed choice about course participation, and in particular, contracted trainers.

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.	**MDM**
QRP Findings		

A health and safety policy was available for review. During discussions representatives outlined how health and safety relates to courses delivered by external affiliated faculty. The evidence indicated that additional documentation is required to support these activities.

There was limited evidence to demonstrate that appropriate training premises are select and used for the delivery of all PHECC approved courses.

During discussions representatives described the equipment and resources that are available for each course.

The evidence indicated that additional and updated documentation is required to ensure that, appropriate equipment/resources are available and have been used on all courses, and that a system is in place for the regular maintenance and updating of equipment and resources.

Areas of Good Practice

- Documented health and safety policy.

Areas for Improvement

- Health and safety activities related to all PHECC approved courses.
- Records that demonstrate that appropriate training premises are selected and used for the delivery of all courses.
- Records that appropriate, fit for purpose equipment/resources are available and have been used on each course.

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

QRP Findings

There is reference in the documentation to student support, and during discussions representatives described the supports that are available for students.

The evidence indicated that the institution and students would benefit from additional/updated documentation and mechanisms for obtaining information from potential and existing students of any additional support needs they may have.

Areas of Good Practice

- Appropriately qualified and experienced personnel within the institution.
- Informal process for reasonable accommodation available for students.

Areas for Improvement

- Support for students from appropriately qualified and experienced personnel available on all PHECC approved courses.
- Student awareness of available supports before, during and after their course, including an opportunity to meet individually or collectively with faculty and/or management.
- Procedure for obtaining information on student supports needs.

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.	**MDM**

QRP Findings

The evidence indicates that supporting policies and procedures need to be updated to reflect current practice and ensure legislative compliance.

The evidence indicated that up-to-date information and training on equality and diversity needs to be made available to faculty and that all stakeholders need to be made aware of the policy and procedures.

The evidence indicates that course delivery accommodates the cultural backgrounds and different learning styles of students.

The evidence indicates that the institution would benefit from additional information to support this.

Areas of Good Practice

- Documented equality and access to training policy.
- Internal personnel are aware of the policy and procedures.

Areas for Improvement

- Ensure that all relevant policies and procedures are legislative compliant and promote equality.
- Ensure all students, faculty, and other stakeholders are made aware of the equality and diversity policy and procedures.
- The provision of up-to-date information and training for faculty.

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	SM

QRP Findings
The evidence indicates that clear access to internship is available to all students, and that resources available fully meet requirements for practice. Evidence shows that updated supporting policies and procedures to reflect current practice and ensure legislative compliance, need to be devised.

Areas of Good Practice
• The provision of up-to-date information and training for faculty to support students. • Excellent resources and access to equipment. • Clear identification of current standards.

Areas for Improvement
• Revision of all supporting documents to formalise all internal processes.

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.	SM

QRP Findings
During discussions representatives described the recruitment process and the minimum standards that are in place for faculty and associated personnel. The evidence indicated that the institution would benefit from documented processes to support a robust systematic approach for the recruitment of appropriately qualified and experienced personnel to carry out education and training activities. The was limited evidence to indicate that all personnel have been made aware of their quality assurance responsibilities and are carrying out those responsibilities consistently. The evidence indicated that the institution and personnel would benefit from updated job descriptions and written terms of employment/engagement.

Areas of Good Practice
• Standards are in place for all personnel involved in activities associated with PHECC approved courses. • Senior management and administration are aware of their quality assurance responsibilities.

Areas for Improvement
• Ensure all personnel meet PHECC education and training standards. • Awareness of quality assurance responsibilities and consistent application of those activities. • Job descriptions for each position in the institution.

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.	**MDM**

QRP Findings

During discussions representatives described personnel upskilling/training, induction, and support. The evidence indicated that the institution and personnel would benefit from a documented systematic approach that supports:

- The identification of the training/upskilling needs of all personnel.
- An induction programme appropriates to the role.
- A training and development plan/programme to support the development needs of personnel.
- Mechanisms that support requests for training/upskilling and additional qualifications.
- A formalised support, supervision, and annual appraisal.

There was limited evidence that personnel have completed training/upskilling relevant to their role.

Areas of Good Practice

- Some internal personnel have completed training/upskilling relevant to their role.
- Institution has informal processes in place, which support this function.

Areas for Improvement

- Training and development plans/programmes for all personnel.
- Mechanisms for faculty to request support for training/upskilling and to achieve additional qualifications.
- Formalised support and supervision and annual appraisal.
- Procedure to identify the training/upskilling needs of all personnel.

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.	**MDM**

QRP Findings

During discussions representatives described the processes in place for personnel management. The evidence indicated that the institution and personnel would benefit from a documented systematic approach that supports:

- Faculty feedback during and after their course.
- The systematic monitoring of faculty.
- Dealing with poor and unacceptable performance of faculty.
- Human resource legislative obligations.

Areas of Good Practice

- Documents in place to support observation of faculty.

Areas for Improvement

- Communication between faculty and management.

- Course feedback from faculty.
- System for ensuring only personnel with valid certification deliver PHECC approved courses.
- Systematic faculty monitoring.
- Dealing with poor and unacceptable faculty performance.
- Human resource legislative obligations.

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

QRP Findings

During discussions representatives outlined the relationship with contracted faculty and the contractual and quality assurance arrangements that are in place.

There was limited evidence that the institution maintains up-to-date records of all external affiliated faculty consistent with documented practice, PHECC requirements, and legislative obligations.

The was limited evidence of agreed quality assurance standards between both parties and no evidence that the institution receives regular reports of the education and training activities of external affiliated faculty.

Areas of Good Practice

- Documents in place to support monitoring activities.
- Faculty details submitted to PHECC.

Areas for Improvement

- Collaborative provision policy and associated procedures.
- Procedures for monitoring contracted faculty, evidence that these activities are taking place.
- Written and signed contract/agreement.
- Faculty records and submission of faculty details to PHECC.
- Quality assurance standards between both parties.

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

During discussions representatives described the processes for course development, delivery, and review. The evidence indicated that the institution would benefit from the development of course development, delivery and review policy, and associated procedures.

The evidence indicated that a documented systematic approach to internal course development and/or amendment and approval would ensure that any updates or changes in PHECC education and training standards, clinical practice guidelines, and examination standards are implemented.

Areas of Good Practice

- Course development reflects PHECC education and training standards.

Areas for Improvement		
• Course development, delivery and review policy, and procedures. • A systematic approach to internal course approval.		
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.	**SM**

QRP Findings

The evidence indicated that the institution would benefit from additional documentation/records to confirm that all courses are delivered in keeping with PHECC education and training standards, and clinical practice guidelines.

The evidence indicated that the institution would benefit from:
- Documented records that student induction has taken place on all courses.
- Records that all courses are delivered by appropriately qualified personnel.
- Records of regular monitoring, including site visits.

During discussions representatives indicated that one-to-one time (remediation, mentoring) is available to students as required. It also indicated that the institution and students would benefit from a formalised approach to these activities.

Areas of Good Practice

- Courses are delivered by appropriately qualified personnel.
- Relevant tutor/instructor details are recorded on course documentation.
- Records of student attendance are maintained.

Areas for Improvement

- Records from all courses of student induction.
- Course monitoring.
- Student remediation.

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.	**MDM**

QRP Findings

The evidence indicated that the admissions policy/entry criteria need to be updated to reflect current practice on all courses being delivered by the institution.

The evidence indicated that prospective students would benefit from additional information on course entry criteria and associated details.

Areas of Good Practice

- Informal course monitoring in place.
- Documented admissions policy/entry criterion.

Areas for Improvement

- Update the admissions policy/entry and procedures to reflect current practice for all courses.
- Provide prospective students with additional information on course entry and associated details to include RPL.

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

During discussions representatives described the process for course review. The evidence indicated that the institution would benefit from a documented procedure to support these activities.

There was limited evidence that students and faculty on all courses provide feedback during and after their course.

The evidence indicated that the institution would benefit from additional documentation to support course evaluation and to ensure that all stakeholders have an opportunity to contribute to the process.

Areas of Good Practice

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

Areas for Improvement

- Procedure for course review.
- Records of student and faculty feedback.
- Procedure for course evaluation to ensure that all stakeholders have an opportunity to contribute to the process.
- Ensure that all identified improvement actions are included in the QIP.

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.	SM

QRP Findings

The evidence indicated that the institution has a documented assessment policy and procedures. The evidence also indicated that the assessment policy and procedures need to be updated to reflect current and new practice, areas to be updated or added include:

- Supports available to adapt assessment methodologies for students with additional support needs and records of these activities.

The evidence indicated that the institution would benefit from updated documentation that clearly states who has responsibility for managing the PHECC certification system.

The evidence indicated that the institution would benefit from the development and implementation of procedures for:

- Internal verification.
- External authentication.
- Results approval.

There was no evidence that these activities have taken place.

The evidence indicates that the institution has a documented student appeals policy and procedures. It also indicated that the institution needs to ensure that it is applied to all courses.

Areas of Good Practice
• Documented assessment policy and procedures. • Appropriate assessment methodology in place. • It is clearly stated when PHECC assessment material is used. • Student support is available for assessment.
Areas for Improvement
• Assessment policy and procedures to reflect current practice. • Ensure that appropriate assessment methodology is used on all courses and its clearly stated when PHECC assessment material is used. • Maintain a documented record of student assessment feedback. • Internal verification, external authentication, and results approval.

7. Conclusion and Outcome

Rating	2.63
Level	**Moderately Met**
Conclusion	The evidence indicated that the institution provides excellent practice in all areas of delivery of responder and practitioner courses. The institution would benefit from fully documented quality assurance policies and procedures as aligned to day-to-day practice, which will assist the institution in: • Monitoring the quality of courses and standards. • Ensuring full compliance with the QRF. • Ensuring that the quality assurance systems in place are effective, fit for purpose and reflect current practice. • Meeting PHECC education and training standards, quality review framework requirements and are consistent with relevant legislation. Overall, the institution provides quality educational courses in emergency care that will benefit from its alignment of practice to policy and evidence-based practice.