



# Strategic Plan 2020-2023







## Statement from Chairperson

In 2020, the first full year of implementation of this strategy, PHECC will have been in existence for twenty years. Such landmarks prompt reflection on what has been achieved and lessons learned, as well as consideration of opportunities and challenges ahead. This Strategic Plan has, in some ways, advanced that review and in a timely fashion sets us on course for a new decade with a clear focus and renewed intent to protect the public and promote excellent pre-hospital emergency care.

Much has changed in Ireland since PHECC was established by Statutory Instrument 109 of 2000 - The Pre-Hospital Emergency Care Council (Establishment) Order, 2000. Certainly, we can look forward to more and perhaps greater change in the years ahead. Population growth, urbanisation, shifting demographics, technological advancement are all well signalled and are just some of the factors which prompted the Government's overarching policy initiative Project Ireland 2040, for 'building Ireland's future'.

At the heart of Project Ireland 2040 are the interdependent themes of wellbeing, equality and opportunity. Accordingly the initiative includes a 'major programme of investment in health infrastructure'. This seeks to reorient health services towards primary and community care where 'people's health needs can for the most part be met locally, with high quality acute and emergency care provided in the appropriate acute hospital settings'.

As the statutory regulator for the sector, protection of the public is at the heart of everything we do. Pre-hospital emergency care may be a nascent sector, but in this emerging context it is clear that it is a vital one and PHECC will have an important role to play in ensuring the best health outcomes for the people of Ireland in the future. This is both a challenge and opportunity for the sector, which must be equipped and empowered for this central role. Our new Strategic Plan addresses this head on by seeking to build understanding and affirm the positioning of pre-hospital emergency care within the health service, strengthen legislation and the Council's regulatory powers, ensure high quality education and training supported by industry leading research and develop the Council's capacity to deliver on our ambitions.

I would like to thank Council members, Richard Lodge and the PHECC executive and all those who participated in our consultation process, supported the development of this strategy and helped us prioritise what we need to do. Their honest appraisal, insight and ambition, for us as an organisation and for the sector as a whole, was invaluable.

It is a defining time for pre-hospital community care. This new Strategic Plan ensures our influence and impact.



Dr. Jacqueline Burke  
Chairperson

A handwritten signature in black ink that reads "Jacqueline Burke".

## Introduction by Director

I am very pleased to introduce our new Strategic Plan, which sets out where we will focus our efforts over the years 2020-2023.

PHECC was established in 2000 with a mandate to protect the public through enabling excellence in pre-hospital emergency care. We have achieved much since that time in fulfilment of our mandate: instituting Clinical Practice Guidelines (CPG) and approving licensed CPG providers, advancing professional development through education, examinations, training and research, maintaining and monitoring a professional register of practitioners and furthering clinical information standards. The significance of achieving the transition to a single standards body and the national acceptance of pre-hospital emergency care standards should also be acknowledged.

However, the standards we set and the regulation we uphold, remains largely voluntary. As we move into a new decade of operation, continuing to champion change, cohesion and development in our sector and to support the evolution of the health service, this must be a key consideration for us as an organisation charged with protecting the public.

Our new strategic plan thus builds on what we have achieved and progresses what is yet to be done. It determines six areas of strategic priority, which will enable us to achieve our vision 'that people in Ireland receive excellent pre-hospital emergency care'.

Over the next few years, through continued advocacy and strategic engagement, we will endeavour to further the position of pre-hospital emergency care within Irish healthcare services and to advance its potential to support the systemic developmental changes that are unfolding. We will seek to strengthen the legislative base, which underpins development in this important sector. To ensure the professionalism of pre-hospital emergency care we will develop an education and training masterplan that will account for existing and future needs in this area. We will undertake research to inform our thinking and to affirm and advance best practice. Finally, we will review and strengthen how we are as an organisation to ensure that we can deliver on the ambitions of this strategy. There is no doubt there is much to do. But we have a well-considered and well-defined plan to guide us, alongside the trust of the sector and their commitment to excellent pre-hospital emergency care. I look forward to what we in PHECC can further achieve for the protection of the public over the next few years.



Richard Lodge  
Director

A handwritten signature in blue ink, which appears to be 'R. Lodge', written in a cursive style.



## Who we are

The Pre-Hospital Emergency Care Council (PHECC) is an independent statutory agency with responsibility for standards, education and training in the field of pre-hospital emergency care. Its core mission is to protect the public through the promotion of excellence in pre-hospital emergency care.

The Council was established under Statutory Instrument S.I. No. 109/2000, with amendments in 2004 (S.I. No. 575/2004) which granted the agency some regulatory powers including elements of fitness to practise and limited powers of sanction. The Council provides voluntary regulation of practitioners and service providers.

Over the years, PHECC's functions have been expanded by additional legislation, Statutory Instruments and EU Directives and now include: education and training, examinations and registration, fitness to practise, clinical practice, research and provision of advice to the Minister of Health.

The Council publishes clinical practice guidelines (CPGs) for practitioners and responders.

It licenses pre-hospital emergency care service providers to implement CPGs. PHECC also recognises institutions to provide pre-hospital emergency care training and education, delivers professional registration examinations and maintains a statutory register of practitioners in pre-hospital emergency care.

Members of the Council are appointed by the Minister for Health and serve on the basis of their involvement and expertise in pre-hospital emergency care.

The Council is advised and assisted by a number of committees and panels made up of Council members and health industry and community partners and is supported on a daily basis by the PHECC executive of 18 personnel.

### Council Members

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Dr Jacqueline Burke (Chairperson)

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Mr Hillery Collins (Vice-Chairperson)

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Mr Jimmy Jordan

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Mr Shane Mooney

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Dr Shane Knox

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Mr Stephen Brady

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Dr Conor Deasy

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Mr Martin Dunne

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Ms Tess O'Donovan

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Prof Patrick Plunkett

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Dr Mick Molloy

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Dr David Menzies

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Ms Fiona McDaid

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Mr Pat Hanafin

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Dr Jason van der Velde

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Mr Thomas Keane

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Mr Patrick Fleming

### Executive Management Team

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Mr Richard Lodge, Director

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Mr Barry O'Sullivan, Deputy Director & Registrar

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Ms Kathleen Walsh, Education Programme Officer

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Mr Brian Power, Clinical Practice Programme Officer

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Ms Jacqueline Egan, Clinical Information, Clinical Quality & Examinations Programme Officer

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Mr Ricky Ellis, Clinical Governance Programme Officer

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Mr Con Foley, Chair of Compliance & Audit Committee and Secretary to Council

## Our Mission

To protect the public by independently co-ordinating, developing, reviewing, regulating and governing standards of excellence for the safe provision of quality pre-hospital emergency care.



## Our Vision

People in Ireland receive excellent pre-hospital emergency care

## Our Values

1.

### Protection of the public

Protecting the public through promotion of excellence is our principal commitment and responsibility

2.

### Professionalism

We encourage and enable professionalism, setting high standards for our practitioners and ourselves

3.

### Leadership

We advocate for and seek to advance the emergency care agenda in Ireland

4.

### Integrity

We aim to be fair, transparent and consistent in all that we do as an organisation

5.

### Best practice

We promote best clinical practice in pre-hospital emergency care operations, education and research





# Key Strategic Challenges

The process of consultation and review, which informed the development of this strategy, identified four principal strategic challenges for the Council.

1. How to respond to the dynamic nature of healthcare in Ireland and ensure pre-hospital emergency care has a valued central role in its future.
2. How to anticipate and respond to the growing range and complexity of pre-hospital emergency care required.
3. How to better ensure patient safety.
4. How to ensure capacity to deliver.

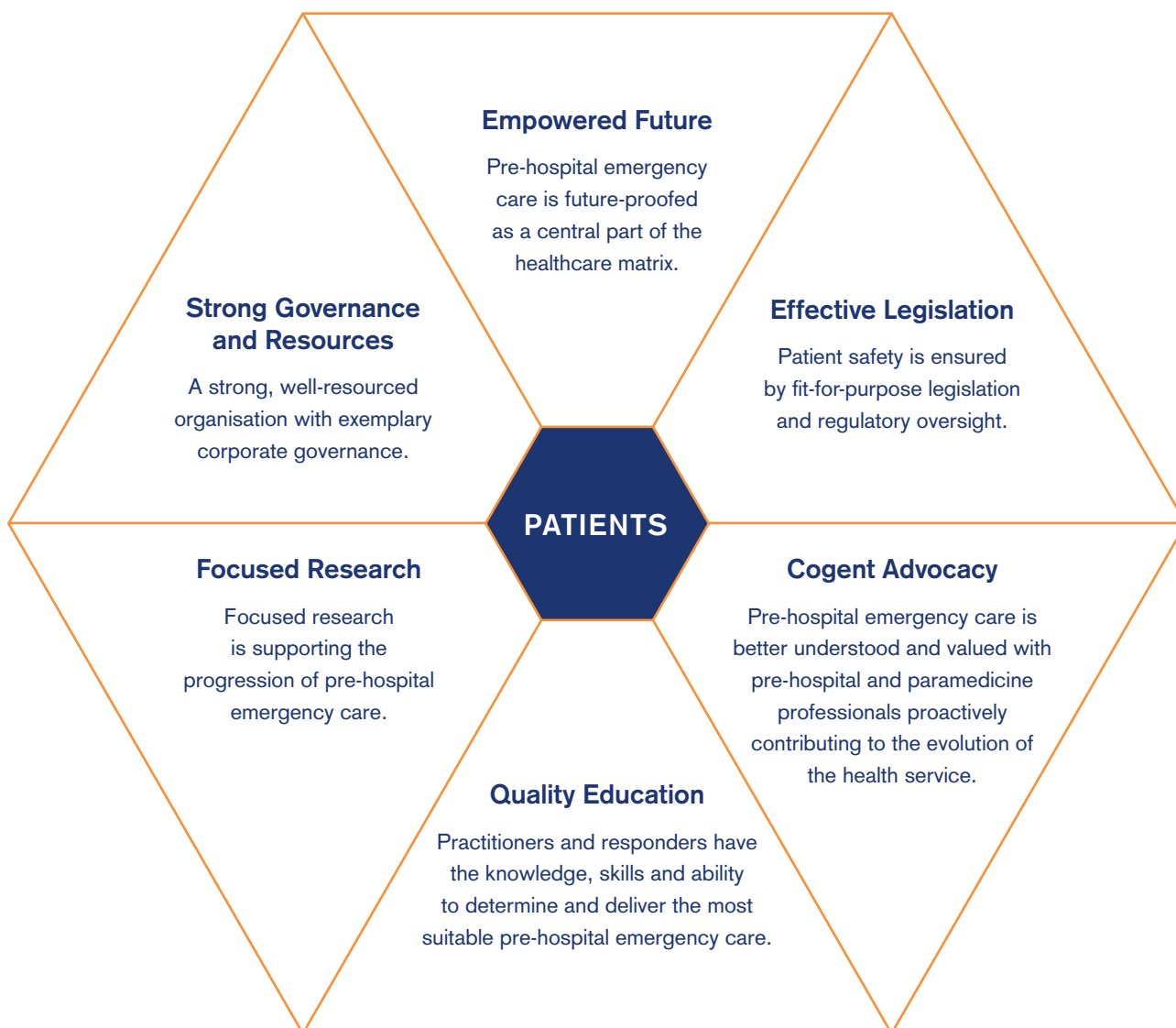




# Our Strategic Priorities

To address the challenges over the next four years we will focus our resources and efforts on six areas of strategic priority. By concentrating on these areas, we will deliver on our mission and work purposefully towards achieving our vision of excellent pre-hospital emergency care for everyone in Ireland.

This emphasis will also ensure that the pre-hospital emergency care profession is empowered and enabled to be at its best, resilient, relevant and responsive to the evolving healthcare environment in which it operates.





# 1 Empowered Future

## Goal

**Pre-hospital emergency care is future-proofed as a central part of the healthcare matrix**

With the on-going imperative of change and renewal within the health service in Ireland, it is contingent on us to enable and empower the pre-hospital emergency care sector to respond appropriately and effectively, clearly contributing to excellent outcomes for patients. We will lead on the delivery of education programmes that will equip the profession into the future and work strategically to ensure the centrality of pre-hospital care in the evolving unscheduled care matrix.

## Objectives

### 1.1

Create a long-term roadmap that provides a clear, cohesive way forward for pre-hospital emergency care, aligning sectoral ambitions with national priorities and informed by international best practice.

### 1.2

Position PHECC as a key force in relation to the development of the health sector, specifically in relation to the structure and delivery of pre-hospital emergency care in the context of the evolving unscheduled care strategy and roll out of Sláintecare.

### 1.3

Build and strengthen strategic relationships that support and amplify the impact of PHECC and advance the positioning of pre-hospital care.

### 1.4

Inform policy and decision makers, aligned professions and others charged with implementing Government strategy of the capabilities, skills and potential of PHECC to deliver added value in the future.

## Outcome

**Pre-hospital emergency care has an assured role within and is valuably contributing to a patient-focused, safe and efficient health service.**

## 2

## Effective Legislation

### Goal

#### Patient safety is ensured by fit-for-purpose legislation and regulatory oversight

Patient safety is being put at risk and professional standards are being undermined by legislation and regulatory powers that are out of step with the operating environment. To address this, there is a need to review and strengthen legislation and regulatory practice in general and in four specific areas namely: fitness to practise, protection of title, mandatory practitioner registration and licensing of organisations providing pre-hospital emergency care.

### Objectives

#### 2.1

Pursue fit-for-purpose legislation that requires the registration of pre-hospital emergency care practitioners and licensing of all pre-hospital emergency care service providers as mandatory and liable to sanction, that protects the title of all PHECC registered practitioners, making inappropriate use of these titles liable to sanction, and that enables Council to make fitness to practise determinations up to and including removal from the PHECC register in line with all other healthcare regulators.

#### 2.2

Design and deliver dynamic regulatory programmes that are grounded in our statutory purpose and powers, while also flexible and adaptive to protect the public in a changing world.

#### 2.3

Continue to develop PHECC's relationship with relevant Government departments to contribute to the development and implementation of legislation and policy.

### Outcome

Patient assurance of exemplary pre-hospital emergency care, with professional practice supported and affirmed by strengthened legislation, evidenced standards and enhanced regulatory oversight.







## 3 Cogent Advocacy

### Goal

**Pre-hospital emergency care is better understood and valued with pre-hospital and paramedicine professionals proactively contributing to the evolution of the health service**

As the health service evolves under the preferred model of primary and community care, there are significant opportunities for the pre-hospital emergency care sector. It is thus critical that the existing and potential contribution of pre-hospital emergency care is understood and that the sector's involvement in planning and implementation is secured. We must therefore act to raise awareness and enhance the status of pre-hospital emergency care and promote its value.

#### 3.1

Raise the profile of PHECC as a progressive voice with expertise in pre-hospital emergency care.

#### 3.2

Promote better understanding and appreciation of the role and contribution of pre-hospital emergency care amongst stakeholders.

#### 3.3

Encourage and enable co-operation and collaboration between the pre-hospital emergency care sector and allied healthcare and other relevant professionals to build knowledge and understanding of what we do.

### Outcome

**We are trusted to speak out and sought out to speak on behalf of the pre-hospital care sector, which is now better understood and valued and integrated within the healthcare community.**

## 4

## Quality Education

### Goal

**Practitioners and responders have the knowledge, skills and ability to determine and deliver the most suitable pre-hospital emergency care**

To be at the forefront of supporting a transformative health sector, it is vital that pre-hospital emergency care practitioners and responders maintain and develop relevant, exemplary skills. We must create an environment and put in place the opportunities that support quality education, training and life-long learning. To do so effectively, we must fulsomely address existing needs and ensure our agility to identify and respond to future requirements.

#### 4.1

Review and update masterplan for pre-hospital emergency care education. This should be based on a set of criteria aligned with PHECC and health service's strategic objectives, take account of existing and future resource and skill requirements in the health sector, integrate the latest and sector-appropriate learning modalities and identify education partners as appropriate to support its implementation.

#### 4.2

Promote and advance understanding of paramedicine qualifications as set out in the Quality and Qualifications Ireland's (QQI) National Framework of Qualifications (NFQ) amongst other healthcare professionals.

#### 4.3

Further develop a programme of Continuing Professional Competency (CPC) to ensure the on-going confidence and competence of practitioners in determining and delivering pre-hospital emergency care interventions.

### Outcome

**A clear education pathway and dynamic life-long learning opportunities are ensuring the professional competence and skills of pre-hospital emergency care professionals and their enhanced status within the healthcare community.**





## 5 Focused Research

### Goal

#### **Focused research is supporting the progression of pre-hospital emergency care**

Over the next four years, PHECC will continue to inform its work and that of others, as well as to advance the understanding and practice of pre-hospital care, with the knowledge and insights it gleans from targeted research. We will undertake research autonomously, with academic partners and with our service providers. In particular, the Council will focus on tailored research to inform our masterplan for education and to demonstrate the role and value of paramedicine within the Irish health system.

#### 5.1

Develop our research capability and capacity, both in-house and through collaboration with partners and research networks, to validate the value and outcomes from pre-hospital emergency care and explore how the sector can best contribute to patient outcomes within the health ecosystem.

#### 5.2

Establish a strategically aligned programme of research that gathers information and provides insight to support and inform best practice and relevant emerging legislation.

#### 5.3

Advance clinical practice and promote excellence in pre-hospital care through sharing research findings and insights with our peer community and relevant cohorts.

### Outcome

**The research evidence and insights we generate and share with others are supporting and strengthening pre-hospital care and enhancing patient safety.**



## 6 Strong Governance and Resources

### Goal

#### A strong, well-resourced organisation with exemplary corporate governance

This is an ambitious strategy. To ensure we deliver it expertly, efficiently and effectively with the highest standards of governance we must consider and put in place robust processes, practices and procedures, develop our human resource capacity and ensure financial strength and clear accountability. As an organisation we must be dynamic and adaptable, open to opportunity and ready to meet the challenges of change within the health service and within society at large.

#### 6.1

Maintain strategic focus through the development of timely, aligned implementation and operational plans and processes of review.

#### 6.2

Ensure adherence to the Code of Practice for the Governance of State Bodies and alignment with best practice standards.

#### 6.3

Build the structure, capacity, culture and competencies of the organisation, considering recruitment, retention and succession planning, to ensure the effective implementation of the strategy and maintenance of corporate knowledge and expertise.

#### 6.4

Ensure best practice standards of financial and other controls within the organisation in line with current DPER regulations of State bodies.

#### 6.5

Put in place the systems, processes and practices that optimise the organisation's performance.

### Outcome

**PHECC is a high performance organisation that is delivering on its strategic priorities supported by a strong Council, appropriate systems and processes and a progressive, enabling culture.**



## Implementation plan 2020-2023

Objective	Key Actions	Timeframe	Responsibility
<p><b>1.1.</b> Create a long-term roadmap that provides a clear, cohesive way forward for pre-hospital emergency care, aligning sectoral ambitions with national priorities and informed by international best practice</p>	<p><b>1.1.i.</b> Establish Steering Group with clear remit to lead the development of a roadmap and align other planning and development activities within PHECC</p> <p><b>1.1.ii.</b> Develop roadmap: tender for and appoint consultant to support process of review, consultation and engagement and delivery of plan</p> <p><b>1.1.iii.</b> Publish and promote pre-hospital emergency care roadmap</p>	<p>2020</p> <p>2020</p> <p>2020</p>	<p>Council (Chair) and Director</p> <p>Steering Group and Director</p> <p>Director</p>
<p><b>1.2.</b> Position PHECC as a key force in relation to the development of the health sector, specifically in relation to the structure and delivery of pre-hospital emergency care in the context of the evolving unscheduled care strategy and roll out of Sláintecare</p>	<p><b>1.2.i.</b> Interact with and seek representative participation / consultation involvement with relevant strategic initiatives and planning programmes in relation to health sector strategy and implementation e.g. Sláintecare Implementation Group</p> <p><b>1.2.ii.</b> Create opportunities to evidence thought-leadership regarding the health sector through writing or participation</p>	<p>Ongoing</p> <p>Ongoing</p>	<p>Council (Chair) and Director</p> <p>Director and Council</p>
<p><b>1.3.</b> Build and strengthen strategic relationships that support and amplify the impact of PHECC and advance the positioning of pre-hospital care</p>	<p><b>1.3.i.</b> Develop and action an engagement plan that identifies the stakeholder audience, opportunity, key messages, initiative owner</p> <p><b>1.3.ii.</b> Continues, expand and deepen relationships with sector stakeholders</p>	<p>2020</p> <p>Ongoing</p>	<p>Director</p> <p>Director</p>
<p><b>1.4.</b> Inform policy and decision makers, aligned professions and others charged with implementing Government strategy of the capabilities, skills and potential of PHECC to deliver added value in the future</p>	<p><b>1.4.i.</b> Develop and action a communications plan that identifies the stakeholder audience, key messages (including case-making evidence), owner and required result</p>	<p>Ongoing</p> <p>2020 and ongoing</p>	<p>Director</p> <p>Director</p>

### 1. Empowered Future

Objective	Key Actions	Timeframe	Responsibility
<p><b>2.1.</b> Pursue fit-for-purpose legislation that requires the registration of all pre-hospital emergency care practitioners and licensing of pre-hospital emergency care service providers as mandatory and liable to sanction, that protects the title of all PHECC registered practitioners, and enables Council to make fitness to practise determinations up to and including removal from the PHECC register in line with all other healthcare regulators</p> <p><b>2.2.</b> Design and deliver dynamic regulatory programmes that are grounded in our statutory purpose and powers, while also flexible and adaptive to protect the public in a changing world</p>	<p><b>2.1.i.</b> Research and develop a legislative Advisory Paper, informed by national stakeholders and international best practice and aligned with national strategic priorities</p> <p><b>2.1.ii.</b> Publish, promote and share the Advisory Paper as appropriate</p>	<p>2020 and ongoing</p> <p>2020</p>	<p>Director and Executive</p> <p>Council (Chair) and Director</p>
	<p><b>2.2.i.</b> Continue to implement and develop Governance Validation Framework for licensed CPG providers</p> <p><b>2.2.ii.</b> Review and refine Quality Review Framework</p>	<p>2019 / 2020</p> <p>2020</p>	<p>Director and Executive</p> <p>Director and Executive</p>
	<p><b>2.2.iii.</b> Review and integrate Governance Validation Framework and Quality Review Framework to eliminate duplication</p>	2021	Director and Executive
	<p><b>2.2.iv.</b> Continue to develop CPC for EMTs</p>	2020 and ongoing	Director and Executive
	<p><b>2.2.v.</b> Develop and implement CPC for other registrants</p>	2020 and ongoing	Director and Executive
<p><b>2.3.</b> Continue to develop PHECC's relationship with relevant Government departments to contribute to the development and implementation of legislation and policy</p>	<p><b>2.3.i.</b> Continue to develop relationships with the appropriate Government departments</p>	Ongoing	Council (Chair) and Director
<p><b>3.1.</b> Raise the profile of PHECC as a progressive voice with expertise in pre-hospital emergency care</p> <p><b>3.2.</b> Promote better understanding and appreciation of the role and contribution of pre-hospital emergency care amongst stakeholders</p> <p><b>3.3.</b> Encourage and enable co-operation and collaboration between the pre-hospital emergency care sector and allied healthcare and other relevant professionals to build knowledge and understanding of what we do</p>	<p><b>3.1.i.</b> Refresh the PHECC brand visual identity and website to better reflect the Council's core positioning and proposition</p> <p><b>3.1.ii.</b> Utilise PR expertise support to assist in the achievement of PHECC strategic goals</p> <p><b>3.1.iii.</b> Develop and implement a social media strategy as part of communications plan</p>	<p>2020</p> <p>2020 and ongoing</p> <p>2020 and ongoing</p>	<p>Executive</p> <p>Director</p> <p>Director</p>
	<p><b>3.2.i.</b> Develop and action a communications and engagement plan that identifies the stakeholder audience, key messages, promotion channels, owner and required result</p>	2020 and ongoing	Director
	<p><b>3.3.i.</b> Actively participate in the Health, Social Care and Regulatory Forum (HSCRF) and engage with other regulators</p>	Ongoing	Director
	<p><b>3.3.ii.</b> Create networking and engagement opportunities for the pre-hospital emergency care sector</p>	Ongoing	Director



Objective	Key Actions	Timeframe	Responsibility
<b>4.1.</b> Review and update masterplan for pre-hospital emergency care education. This should be based on a set of criteria aligned with PHECC and health service's strategic objectives, take account of existing and future resource and skill requirements in the health sector to include workforce planning, integrate the latest and sector-appropriate learning modalities and identify education partners as appropriate to support its implementation	<p><b>4.1.i.</b> Review and revise existing Education, Training and Examination Standards</p> <p><b>4.1.ii.</b> Develop education masterplan: tender for and appoint facilitator to support process of review, consultation and engagement and delivery of plan</p> <p><b>4.1.iii</b> Publish, share and implement masterplan</p>	<p>2020</p> <p>2020 / 2021</p> <p>2021 /2022</p>	<p>Director</p> <p>Director</p> <p>Director</p>
<b>4.2.</b> Promote and advance understanding of paramedicine qualifications as set out in QQI's National Framework of Qualifications (NFQ) amongst other healthcare professionals	<b>4.2.i.</b> Engage with QQI and other key stakeholders, the Department of Education and the Higher Education Authority (HEA), to marry PHECC's qualifications with NFQ	2020	Director
<b>4.3.</b> Further develop a programme of Continuing Professional Competence (CPC) to ensure the on-going confidence and competence of practitioners in determining and delivering pre-hospital emergency care interventions	<b>4.3.i.</b> Review and strengthen EMT CPC programme	2020	Director
	<b>4.3.ii.</b> Develop scope and content for CPC programme for other practitioners	2020	Director
<b>5.1.</b> Develop our research capability and capacity, both in-house and through collaboration with partners and research networks, to validate the value and outcomes from pre-hospital emergency care and explore how the sector can best contribute to patient outcomes within the health ecosystem	<b>5.1.i.</b> Establish a Research Committee with clear terms of reference and dedicated research budget	2020	Director
	<b>5.1.ii.</b> Commission a report reviewing research undertaken to date and advancing recommendations about future research looking at partnerships, subject matters, methodologies, governance and other elements as appropriate	2020	Director
<b>5.2.</b> Establish a strategically aligned programme of research that gathers information and provides insight to support and inform best practice and relevant emerging legislation	<b>5.2.i.</b> Establish and implement a formal PHECC Research Policy	2020 and ongoing	Research Committee
	<b>5.2.ii.</b> Invite and fund research applications across a range of targeted topics	2020 and ongoing	Research Committee
<b>5.3.</b> Advance clinical practice and promote excellence in pre-hospital care through sharing research findings and insights with our peer community and relevant cohorts	<b>5.3.i.</b> Create and seek out opportunities to share research	2020 and ongoing	Director
<b>4. Quality Education</b>			
<b>5. Focused Research</b>			

Objective	Key Actions	Timeframe	Responsibility
<b>6.1.</b> Maintain strategic focus through development of timely, aligned implementation/operational plans and processes of review	<b>6.1.i.</b> Develop annual implementation/operational plans, aligned with the Strategic Plan and any relevant subsequent developments, with clearly determined deliverables, resource allocations, responsibilities, timelines	2020 and ongoing	Director
<b>6.2.</b> Ensure adherence to the Code of Practice for the Governance of State Bodies and alignment with best practice standards	<b>6.1.ii.</b> Align performance management plans with strategic priorities and values <b>6.2.i.</b> Commission an external Governance Review to consider and strengthen the governance structures of the organisation	2020 and ongoing 2019	Director Director
<b>6.3.</b> Build the structure, capacity, culture and competencies of the organisation, considering recruitment, retention and succession planning, to ensure effective implementation of the strategy and maintenance of corporate knowledge and expertise	<b>6.2.ii.</b> Review and implement Governance Review recommendations <b>6.3.i.</b> Undertake a review of human resources (organisation structure, capacity, culture and competencies); develop a competency framework and workforce plan	2020 and ongoing 2019	Director Director
<b>6.4.</b> Ensure best practice standards of financial and other controls within the organisation in line with current DPER regulations of State bodies	<b>6.3.ii.</b> Implement recommendations and workforce plan as appropriate. Monitor, review and revise <b>6.4.i.</b> Implement recommendations of governance and human resources review	2020 and ongoing 2020	Director Director
<b>6.5.</b> Put in place the systems, processes and practices that optimise the organisation's performance	<b>6.4.ii.</b> Maintain ISO accreditation <b>6.5.i.</b> Implement recommendations of governance and human resources review <b>6.5.ii.</b> Develop strategic funding model for PHECC which enables it to realise its objectives in a sustainable manner	2019 and ongoing 2020 2020	Director Director Director

## 6. Strong Governance and Resources



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