Quality Review Framework

Composite Report

Platinum Safety Limited

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Quality Review Framework Composite Report

1. Institution Details

Name	Platinum Safety Limited
Address	Kirby-O'Sullivan Business Park, Kilmallock Road, Bruff, Co. Limerick
Type of Organisation	Private Company
Profile	Approved Training Institution since 2017
PHECC Courses Delivered	CFR Community, CFR Community Instructor, CFR Advanced, First Aid Response (FAR), FAR 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	07/03/2020 & 28/10/2020
Date of On-site Review	26/11/2020 – Carried out via Microsoft Teams
Quality Review Panel (QRP)	▮▮▮▮▮▮▮▮ Quality Review Panel Lead ▮▮▮▮▮▮▮▮ Quality Review Panel Member

3. Report Details

Draft report sent to Institution for feedback	14/01/2021
Final report sent to Institution	11/02/2021
Education and Standards Committee Approval	
Council Approval	
Report Compiled by	▮▮▮▮▮▮▮▮ Quality Review Panel Lead

	███████████ Quality Review Panel Member

4. Review Activities

4.1 Meetings

Opening Meeting (add rows as required)

Name	Organisation	Role
███████████	PHECC	Quality Review Panel Lead
███████████	PHECC	Quality Review Panel Member
███████████	Platinum Safety	Director
███████████	Platinum Safety	Administrator

Closing Meeting (add rows as required)

Name	Organisation	Role
███████████	PHECC	Quality Review Panel Lead
███████████	PHECC	Quality Review Panel Member
███████████	Platinum Safety	Director
███████████	Platinum Safety	Administrator

4.2 Stakeholder Discussions

Name/Group	Role (add rows as required)
███████████	Instructor
███████████	Instructor
███████████	Instructor

4.3 Document Review

The records and systems listed below were reviewed and discussed during the desktop and onsite reviews.

Organisational Chart	Financial Details	Complaints, Feedback & Compliments Policy
Complaints Form	Records Management & Data Protection Policy	Quality Assurance & Improvement Policy
GDPR Policy	Quality Assurance Agreement	Venue Suitability & Equipment Checklist
GDPR Subject Access Request Application Form	Trainer Course Evaluation Form	
Examination Agreement	Memorandum of Understanding	Garda Vetting Policy & Procedures
Training Evaluation Form	Child/Young Adult Protection & Welfare Policy	
Course Audit/Spot Check Form	Communications Policy	
Administrative Policy		

Course Approval Policy & Procedure Safety Statement Equipment Policy Resources Management & Maintenance Policy Methods of Theoretical & Clinical Instruction Internal Verification Policy & Procedures Venue Checklists Support for Learners Policy Induction Policy & Checklist PHECC Tutor Handbook Admissions Policy External Authentication Reports	Premises Selection Policy Equipment & Manikin Hygiene Policy Faculty Management Policy Admissions Policy External Authentication Policy Results Approval Policy Course Details (lesson plans) First Aid Report Form Incident Report Form PHECC Learner Handbook Reasonable Accommodation Request Form Contract of Employment for Faculty Instructors & Job Description	Equality & Access to Training Policy Assessment & Awards Policy FAR & CFR Course Entry Criteria Recognition of Prior Learning Appeals Policy Appeals Form Assessment & Awards Policy for Instructors Courses Internal Verification Form Results Approval Documents Dangerous Occurrence Form Code of Conduct Grievance & Disciplinary Policy Role Descriptors FAR Student Induction Results Approval Records

4.4 Observation of Practice, Facilities and Resources

Practice – e.g. Course delivery, administration, clinical placement (add rows as required)	
Location	**Comments**
N/A	• Not possible due to COVID-19 restrictions

Facilities (add rows as required)	
Location	**Comments**
N/A	• Not possible due to COVID-19 restrictions

Resources – e.g. equipment, ICT, course material, etc (add rows as required)	
Location	**Comments**
N/A	• Not possible due to COVID-19 restrictions

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.	**MDM**

QRP Findings

During discussions representatives described education and training governance in the institution. The documentation provided did not clearly reflect the institutions structure at the time of review and it was unclear from the documentation who has overall responsibility for PHECC approved courses. During discussions it was made clear that the company director has overall responsibility. The evidence indicated that the institution would benefit from updates to existing documentation to accurately reflect practice.

The evidence indicated that there were no procedures in place to ensure that, when required, relevant sub-groups/individuals were in place to provide oversight. The evidence also indicated that oversight activities had taken place by relevant individuals.

The evidence indicated that role/job descriptions for those with oversight responsibilities and others involved in education and training activities need to be updated to reflect current practice.

There were documented procedures for identifying, assessing and managing risk provided for review. The evidence indicated that these activities have taken place with regards to health and safety. The evidence also indicated that the institution would benefit from additional activity to address academic risk. The evidence indicated that the institution would benefit from additional documentation to support these activities.

Areas of Good Practice

- Structures in place to provide oversight of education and training activities.
- Overall responsibility for education and training governance clearly identified.
- Delegated responsibilities for education and training governance identified.
- Procedures in place for identifying, assessing and managing risk.

Areas for Improvement

- Update to existing documents to clearly reflect current practice in education and training governance.
- Update all role descriptions to reflect current practice.
- Update risk policy and procedures to address all areas associated with education and training 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

-         has adequate insurance cover in place for education and training activities.

The evidence indicated that not all tasks (from student entry to exit) associated with education and training are documented.

The evidence indicated that the institution maintains records for all students and faculty. During discussions representatives outlined a range of activities that faculty are required to undertake. The evidence indicated that the institution, students and faculty would benefit from records of all these activities being maintained.

The evidence indicated that there is a data protection policy and procedures in place that need to be updated to reflect current practice and the requirements of the General Data Protection Regulation (GDPR) 2016/679.

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

A complaints policy and procedures are in place. The evidence indicated that additional documentation and activities would ensure all stakeholders are made aware of it.

During discussions representatives indicated that the institution delivers courses to children and vulnerable adults. The evidence indicated that updates to documentation would ensure that the institution is fully compliant with their obligations under the Child and Vulnerable Persons Act 2012.

Areas of Good Practice

- An established legal entity that provides PHECC approved education and training.
- In good financial standing with the Revenue Commissioner.
- Has adequate insurance in place to cover all education and training activities.
- Complaints policy and procedures in place.
- Has a policy, procedures and supporting documents in place to meet its obligations under the Child and Vulnerable Persons Act 2012.

Areas for Improvement

- Ensure all tasks associated with education and training are documented.
- Maintain records of all student support and faculty upskilling and professional development.
- Data protection policy, procedures and supporting documents need to be updated to reflect current practice and GDPR requirements.
- Ensure additional support is in place to carry out quality assurance activities.
- Complaints policy and procedures needs to be updated to reflect current practice.
- Ensure full compliance with the Child and Vulnerable Persons Act 2012.

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

A quality policy and limited procedures were made available for review. During discussions representatives indicated that the company director has overall responsibility for the quality assurance of PHECC approved courses and described a range of quality improvement activities that take place. The evidence indicated that the organisation would benefit from additional and updated documentation to support the activities described during discussions.

The evidence indicated that all those involved in education and training activities have been made aware of their quality assurance responsibilities associated with PHECC approved courses. Updates to existing

documentation as a result of self-assessment and external review would provide further clarity to personnel about their quality assurance responsibilities.

The evidence indicated that additional Key Performance Indicators (KPIs) need to be developed and associated with all education and training activities to provide the institution with measurable targets to enhance the quality of PHECC approved courses. During discussions representatives described monitoring activities that take place. It was not clear from the documentation how all monitoring activities are carried out, by whom and what indicators it should be seeking.

The evidence indicated that the institution systematically collects feedback for all PHECC courses. During discussions representatives indicated that informal analysis of the feedback is carried out and used to inform practice. Additional documented evidence of the analysis and use of student, faculty and other stakeholder feedback would benefit the institution.

Documentation is in place for the review of training locations. There was limited evidence of the systematic review of learning resources and locations. During discussions representatives indicated that the company director inspects and approves all training locations and that faculty equipment is audited annually. The evidence indicated that the institution would benefit from additional support to carry out these activities.

The evidence indicated version and document control systems are in place. It also indicated inconsistencies in these documents and that not all policies and procedures are fit for purpose, reflect current practice and are consistent with the requirements of relevant legislation. There was documented evidence of up-to-date quality improvement planning and implementation.

Areas of Good Practice

- A documented quality policy and associated procedures.
- Clear who has overall responsibility for the quality assurance of PHECC approved courses.
- Systematic collection of student feedback.
- Documentation to support the systematic review of learning resources and locations.
- Version and document control.
- Documented evidence of up-to-date quality improvement planning and implementation.

Areas for Improvement

- Update the quality policy and procedures to reflect current practice.
- Updates to existing documents to reflect quality assurance responsibilities.
- Develop/update KPIs associated with all education and training activities.
- Maintain records of the analysis and use of student, faculty and other stakeholder feedback.
- Maintain records of the systematic review of all learning resources and locations.
- Ensure all policies and procedures are fit for purpose, reflect current practice and are consistent with the requirements of relevant legislation.

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

The evidence indicated that there is up-to-date reporting throughout the institution.

The evidence indicated that not all tasks associated with education and training are documented and responsibility for those tasks is not clearly allocated or linked to relevant KPIs. Additional documentation and updates to existing documentation would benefit the institution.

During discussions representatives outlined who is responsible for communication with PHECC. The development of new documentation and updates to existing documentation would support these activities.

The evidence indicated that prospective students are provided with sufficient information to make an informed choice about course participation.

There is limited evidence that information about the institutions quality assurance system and external reviews is made available to the public.

During discussions representatives described a range of communication activities with other stakeholders. The evidence indicated that the institution would benefit from documented procedures to ensure these activities are carried out consistently.

Areas of Good Practice

- Up-to-date reporting within the institution.
- Responsibility for reporting to PHECC allocated.
- Prospective students are provided with sufficient information to make an informed choice about course participation.

Areas for Improvement

- Additional documentation to support reporting throughout the institution.
- Document all tasks from student entry to exit ensuring that they are clearly allocated and linked to relevant KPIs.
- Update existing documentation to ensure information is provided to PHECC as requested.
- Provide the general public with information about the quality assurance system and external reviews.
- Document procedures for providing and obtaining information from other stakeholders.

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 & safety policy and supporting documents were available for review. During discussions representatives outlined how this is applied to all education and training activities. Supporting documents were made available for review

Documentation is in place for the selection and approval of external training premises. The evidence indicated that the institution needs to maintain records for all approved premises.

Course resource checklists were made available for review. The evidence indicated the additional documentation needs to maintain records that appropriate equipment/resources were used on all courses.

The evidence indicated that systems and documentation are in place for the regular maintenance and updating of equipment to ensure that all resources used for courses are fit for purpose. It also indicates that the institution would benefit from making the return of completed documentation for each course mandatory to ensure compliance and consistency of practice.

Areas of Good Practice

- Health and safety policy and procedures in place.
- Documented premises selection criterion and checklist and evidence of activity.
- Policies and procedures in place to ensure that equipment is maintained, updated and fit for purpose.

Areas for Improvement

- Maintain records that appropriate premises are used for the delivery of all courses (nationally).
- Maintain records that appropriate equipment/resources are available, regularly. maintained/updated, are fit for purpose and accessible for all PHECC approved courses (nationally).

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

QRP Findings

The evidence indicated that additional information and documentation is required to demonstrate that all students are supported by adequate numbers of appropriately qualified and experienced faculty, administrative and technical personnel.

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 students would benefit from additional information and awareness before, during and after their course of the support available, including the opportunity to meet with faculty and/or management individually or collectively.

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

The evidence indicated that sufficient up to date resources are made available to students in a variety of formats for courses on specific courses.

Areas of Good Practice

- Appropriately qualified and experienced personnel.
- Appropriate resources are made available to students in a variety of formats.

Areas for Improvement

- Ensure appropriately qualified and experienced support is available to all students.
- Information to students before, during and after their course about available supports.
- Opportunity for students to meet individually or collectively with faculty and/or management.
- Procedures 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.	MNM

QRP Findings

The evidence indicated that the institution has a documented equality and diversity policy and no associated procedures. It also indicated that the equality and diversity policy and associated policies and procedures need to be updated to ensure they are legislatively compliant and promote equality.

The evidence indicated that the institution, faculty and students would benefit from additional documentation and information to support equality and diversity.

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 indicated that course delivery accommodates the cultural backgrounds and different learning styles of students. The evidence indicated that the institution would benefit from additional information to support this.

Areas of Good Practice

- Documented equality and diversity policy.
- Course delivery accommodates the cultural backgrounds and different learning styles of students.

Areas for Improvement

- Procedures to support the equality policy.
- Ensure all related policies and procedures (e.g. recruitment) are legislative compliant and promote equality.
- Provide up-to-date information and training for faculty.
- Ensure all stakeholders are made aware of the equality and diversity policy and procedures.
- Codes of conduct for staff, faculty and other stakeholders.

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		
• 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.	**MDM**

QRP Findings

The evidence indicated that the institution would benefit from additional documentation to support a robust systematic approach to recruitment.

The evidence indicated that appropriate standards are in place for all personnel involved in activities associated with PHECC approved courses. The institution would benefit from additional information and documentation ensure compliance with all activities outlined in the documentation and PHECC education and training standards.

The evidence indicates that additional support is required to:

- carry out all the activities described in the policies and procedures
- maintain PHECC requirements for course approval
- systematically organise, deliver and monitor the quality of courses and awards
- ensure full compliance with the QRF.

During discussions representatives described how they are made aware of their quality assurance responsibilities and the activities they carry out. The institution would benefit from additional documentation that supports these activities.

During discussions representatives indicated that the institution delivers courses to children and vulnerable adults. The evidence indicated that updates to documentation would ensure that the institution is fully compliant with their obligations under the Child and Vulnerable Persons Act 2012.

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.
- Personnel meet the requirements of PHECC education and training standards.

Areas for Improvement

- Recruitment of appropriately qualified and experienced personnel.
- Additional support to:
    - carry out all the activities described in the policies and procedures
    - maintain PHECC requirements for course approval
    - systematically organise, deliver and monitor the quality of courses and awards
    - ensure full compliance with the QRF.
- Ensure all personnel have been made aware of their quality assurance responsibilities and are carrying them out consistently.
- Additional/updated documentation to support adherence with the Child and Vulnerable Persons Act 2012.
- Job descriptions and terms of employment/engagement.

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 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
- a training and development plan/programme to support the development needs of personnel
- mechanisms for requests for training/upskilling and additional qualifications
- aformalised support, supervision and annual appraisal.

The evidence indicated that the institution has a documented policy and supporting documents for induction. It also indicates that the institution would benefit from additional documentation to indicate that all personnel have attended induction.

The evidence indicated that personnel have completed training/upskilling relevant to their role. Additional documentation to indicate that all personnel have completed relevant training/upskilling would be benficial to the institution.

Areas of Good Practice

- Induction policy and supporting documents in place.
- Personnel have completed training/upskilling relevant to their role.
- Documentation in place to support systematic support and appraisal.

Areas for Improvement

- Procedure to identify the training/upskilling needs of all personnel.
- Maintain records of attendance at induction.
- Maintain records of a training and development plan/programme that supports the development needs of personnel.
- Mechanisms for personnel to request training/upskilling.
- System for 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.	**MDM**

QRP Findings

The evidence indicated that:

- there is regular and appropriate communication between faculty and management
- only personnel with valid certification deliver PHECC approved courses.

During discussions faculty indicated that they provide feedback during and after their course. The evidence indicated that the institution would benefit from additional documentation for all these activities.

During discussions representatives described monitored activities through observation and the analysis of documents. They also described providing feedback to relevant faculty. Additional documented evidence would support these activities.

The evidence indicated that the institution would benefit from the development of procedures for dealing with poor and unacceptable performance of faculty. It also indicated that documentation needs to be developed/updated to ensure the institution meets its human resource legislative obligations.

Areas of Good Practice
• Regular and appropriate communication between faculty and management.   • Only personnel with valid certification deliver PHECC approved courses.   • Documentation in place to support observation (monitoring) of faculty.

Areas for Improvement
• Course reports to be completed by faculty for all courses.   • Maintain records of faculty observations.   • Procedure for dealing with poor and unacceptable performance of faculty.   • Human resource policies and procedures.

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 external affiliated faculty and the contractual and quality assurance arrangements that are in place. Supporting documents were made available for review. The evidence indicated that the institution and external affiliated 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.

There is reference in the documents to site visits/audits and documents to support these activities. The evidence indicated that the institution would benefit from a documented procedure to support these activities and additional documented records that these activities have taken place.

The evidence indicated that the institution maintains records of all external affiliated faculty. Additional records are required to ensure consistency with activities described in the documents. The evidence also indicated that external affiliated faculty details were submitted to PHECC. The institution would benefit from a systematic approach to submitting details to ensure up to date details are available to PHECC.

The evidence indicated that there are agreed quality assurance standards between both parties and that the institution receives regular reports of the education and training activities of external affiliated faculty. It also indicated that the institution would benefit from additional/updated documentation to support these activities.

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 external affiliated faculty and evidence that these activities take place.   - Written and signed contract/agreement.   - Faculty records and submission of faculty details to PHECC.   - Quality assurance standards between both parties.   - Reports from external affiliated faculty and analysis of these reports.

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 indicated that the course development, delivery and review policy and associated procedures need to be updated to reflect current practice and ensure that any updates or changes in PHECC education and training standards, clinical practice guidelines and examination standards are implemented through a documented systematic approach to internal course approval.

The evidence indicated that course development and material:
- demonstrates an appropriate balance between theory and practice
- provides a balance between presentations, group work, skills demonstrations and practical work
- promotes a commitment to self-directed learning
- has clearly outlined aims and objectives and detailed competencies to be achieved by students
- has detailed lesson plans that include all information as set out in PHECC guidelines for theoretical and practical lessons
- has detailed timetables, time on each topic, teaching method, tutor/instructor name, etc.

Areas of Good Practice

The evidence indicated that course development and material:
- demonstrates an appropriate balance between theory and practice
- provides a balance between presentations, group work, skills demonstrations and practical work
- promotes a commitment to self-directed learning
- has clearly outlined aims and objectives and detailed competencies to be achieved by students
- has detailed lesson plans that include all information as set out in PHECC guidelines for theoretical and practical lessons
- has detailed timetables, time on each topic, teaching method, tutor/instructor name, etc.

Areas for Improvement

- Course development, delivery and review policy and procedures.
- 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.	MNM

QRP Findings

The evidence indicated that courses are delivered in keeping with PHECC education and training standards and clinical practice guidelines.

During discussions representatives indicated that induction information had been added to course material. These induction details were made available for review. The evidence indicated that the institution would benefit from additional documentation to indicate that induction had taken place on all courses.

The evidence indicated that the institution would benefit from:
- records that all courses are delivered by appropriately qualified personnel
- records of student attendance on all days for all courses

- 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 in keeping with PHECC education and training standards and clinical practice guidelines.
- Course are delivered by appropriately qualified personnel.
- Relevant tutor/instructor details are recorded on course documentation.

Areas for Improvement

- Student attendance at induction.
- Faculty details on course records.
- Course attendance records.
- Faculty monitoring, including site visits.
- 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.	SM

QRP Findings

The evidence indicated that the admissions policy/entry criteria needs 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.

The evidence indicated that prospective students would benefit from additional information on Recognition of Prior Learning (RPL).

Areas of Good Practice

- Documented admissions policy and course entry criteria.

Areas for Improvement

- Additional information on course entry criteria and 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

The evidence indicated that the procedure for courses needs to be updated to reflect current practice.

The evidence indicated that students and faculty have an opportunity to provide feedback during and after their course. It also indicated that faculty course reports need to be completed for all courses and these records maintained to inform course evaluation.

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

The evidence indicated that areas for improvement have been identified. It also indicated that all identified improvement actions need to be 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.
- The institution has carried out a self-assessment.
- The institution has a documented quality improvement plan.

Areas for Improvement

- Procedure for course review.
- Faculty course reports.
- Course evaluation.
- Quality improvement plan.

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 indicated that:
- an admissions policy and procedures are in place
- appropriate assessment methodology is used on all courses
- it is clearly stated when PHECC assessment material is used
- a student appeals policy and procedures are in place.

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:
- ensuring students have access to information necessary for them to participate in assessment
- providing students with feedback on their assessment and a documented record of this activity
- supports available to adapt assessment methodologies for students with additional support needs and records of these activities
- updates to existing documentation about the security of assessment related material.

During discussions representatives described the process for results authentication, including internal verification, external authentication and results approval. Evidence was provided that these activities had

taken place. The evidence also indicated that the institution would benefit from additional information in the internal verification, external authentication and results approval policies and procedures.

Areas of Good Practice
- Documented assessment policy and procedures.   - Appropriate assessment methodology is used for all courses.   - It's clearly stated when PHECC assessment material is used.   - Internal verification, external authentication and results approval.   - Student appeals.
Areas for Improvement
- Assessment policy and procedures.   - Student assessment feedback.   - Procedure for adapting assessment methodology.   - Security of assessment material.   - Management of the PHECC certification system.   - Internal verification, external authentication and results approval policies and procedures.

7. Conclusion and Outcome

Rating	**2.31**
Level	**Moderately Met (MNM)** – Evidence of a moderate degree of organisation-wide compliance
Conclusion	The evidence indicated that the institution would benefit from additional documentation and updates to existing documentation to ensure that the quality assurance systems in place are effective, fit for purpose, reflect current practice, meet PHECC education and training standards, meet Quality Review Framework requirements and are consistent with relevant legislation. The evidence also indicated 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.