Pre-Hospital
Emergency Care
Council

Quality Review Framework

Composite Report

City of Dublin Education & Training Board

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Quality Review Framework Composite Report

1. Institution Details

Name	City of Dublin Education and Training Board (CDETB)
Address	Teachers Centre, Mountjoy Prison, North Circular Road, Dublin 7.
Type of Organisation	Educational Training Board (E.T.B)
Profile	Education & Training Authority
PHECC Courses Delivered	Cardiac First Response – Community Cardiac First Response – Community Instructor First Aid Response First Aid Response – Instructor
Higher Education Affiliation	N/A

2. Review Details

Purpose	• To facilitate the enhancement of a successful learning experience for students • To promote a culture of Continuous Quality Improvements 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	24th February 2023
Date of Online Review	13th March 2023

3. Report Details

Draft report sent to Institution for feedback	4th April 2023
Final report sent to Institution	24th May 2023
Director Approval **Date**	23/05/2023
Report Compiled by	Quality Review Panel

4.Review Activities

4.1 Meetings

Opening Meeting	
Organisation	**Role**
PHECC	QRF Manager
PHECC	Panel Member
PHECC	Panel Member
PHECC	Panel Member (observing)
CDETB	CDETB PHECC Coordinator
CDETB	CDETB Director of Operations and Quality (FET)
CDETB	CDETB organiser of Prison Education
CDETB	Teacher delivering FAR/CFR-c in a Dublin Prison
CDETB	Teacher delivering FAR in CDETB Inchicore College of Further Education, (ICFE)
CDETB	Teacher delivering FAR (ICFE)
Closing Meeting	
Organisation	**Role**
PHECC	QRF Manager
PHECC	Panel Member
PHECC	Panel Member
PHECC	Panel Member (observing)
CDETB	CDETB PHECC Coordinator
CDETB	CDETB Director of Operations and Quality (FET)
CDETB	CDETB organiser of Prison Education
CDETB	Teacher delivering FAR/CFR-c in a Dublin Prison

4.2 Stakeholder Discussions

Name/Group	Role
Student	FAR Student A CDETB student from a PHECC FAR course in ICFE

4.3 Document Review

The records and systems listed below were reviewed and discussed during the desktop and onsite reviews		
CDETB QIP Review meeting notes CDETB PHECC Internal Summary Report CDETB PHECC Certification Educational Service to Prisons CDETB Website CDETB Location evidence CDETB Equipment checklist CDETB Phots of equipment store with equipment. CDETB Faculty Records CDETB Policy links for student support CDETB QA Review of learner lifecycle CDETB Student-Tutor Ratio CDETB Disability and Learning Supports guidance. CDETB Student Evaluation First Aid Response CDETB Student Evaluation Blended Learning First Aid Response CDETB 3 DAY Blended Learning FAR Timetable CDETB COVID FAR First Aid Checklist (3 days) Practical's CDETB DAY 3 Practical in classroom FAR Learning skill objectives for Learning Outcome 1 Patient Assessment CDETB Selection of Learning Outcomes CDETB General Student Induction CDETB Named Faculty Form CDETB Instructor Course Evaluation form CDETB Quality Improvement Plan Template CDETB PHECC Management of Assessment Material process CDETB PHECC Management of Certification as per Responder Examination Handbook (2019)	CDETB FAR Learning Outcome 1 Patient Assessment CDETB First Aid Response (FAR) course Blended Learning PP Presentation CDETB First Aider Responder booklet CDETB Sample Videos Instructor may use in BL FAR Course CDETB Equal Opportunities and Dignity and Respect at Work Charter CDETB Policies/Procedures website CDETH Code of Conduct Remit CDETB Email trail CDETB Admissions Policy 2021/2022 College of Further Education CDETB Policy statement CDETB Conditions and Contracts website CDETB Named Faculty Form Instructor CDETB Checklist of requirements for Instructors to Join PHECC Faculty CDETB Faculty Role Descriptors CDETB RE: FAR Instructor Pack Version 6 CDETB Meetings Template CDETB Sample emails CDETB PHECC Course Review Form CDETB FAR Feedback – 2021-2022 CDETB CFR Community Instruction Assessment CDETB Circular Disciplinary procedures CDETB evidence of PHECC course requirements CDETB Sample Lesson Plans CDETB Approval Criteria to deliver course document. CDETB Instructor Pack Version 6	CDETB First Aid Response Instructure Rectification QA Update PP Presentation CDETB PHECC Internal Verification Report CDETB Instructors Certs CDETB Instructors Documentation CDETB Child Protection Policy for Staff documentation CDETB Policy and procedures in relation to Garda Vetting documentation. CDETB Garda Vetting policy. DETB Garda Vetting Disclosure CDETB Roles & Responsibilities CDETB PHECC Coordinator CDETB Faculty Descriptors CDETB Role Internal Verifier FAR/ CFR-c CDETB Director of Further Education & Training CDETB Identify training needs document. CDETB Training & Development plan 2022/23 CDETB Instructor Assessment Records CDETB Quality Assurance pp presentations Various documents, including. Course approval document Self-assessment document Results approval document Role of certification administration Sample of risk management QIP procedure Screen shots of Moodle site

4.4 Observation of Practice, Facilities and Resources

Practice – e.g. Course delivery, administration, clinical placement	
Location	**Comments**
N/A	Virtual

Facilities (add rows as required)	
Location	**Comments**
N/A	Virtual
Resources – e.g. equipment, ICT, course material, etc	
Location	**Comments**
N/A	Virtual

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.	**SM**
QRP Findings		
The institution has good governance, with structures and processes in place to support this. There is evidence provided within the documentation, which clearly reflects the institution's current structure and		

how that structure supports education and training activities and governance throughout the organisation. During discussions with the institution representatives, it was pointed out that the institution's sole purpose is education and training in various subject domains, hence the generic nature of the institution's organisational chart. However, there is some evidence in the documents to indicate who provides objective oversight of course approval/amendment, results approval, and self-assessment of PHECC approved courses.

Areas of Good Practice
• There are structures in place for the quality assurance of PHECC approved courses.

Areas for Improvement
• The institution would benefit from clearer reference/role descriptions in relation to sub-groups, terms of reference and oversight 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.	**SM**

QRP Findings

The evidence provided indicates that the institution is an established legal entity with education and training as a principal function. The evidence indicated that all tasks associated with education and training are documented. The evidence also indicated that the institution does maintain up to date records for all courses being delivered by faculty. The QRP reviewed the records of several courses and noted that there were consistencies throughout the records maintained.

The QRP noted that the institution kept good records of all members of faculty, such as recruitments, contracts, PHECC certification and other qualifications.

The QRP noted that the institution had a data protection policy in place, with clear indication of the documented process for data breach. The QRP also noted that some additional evidence to indicate how employees are made aware of their individual responsibilities would be helpful.

There is evidence provided that a complaints policy and procedures are in place.

The institution has a safeguarding policy to reflect current practice, along with their obligations under the National Vetting Bureau (Children and Vulnerable Persons) Act 2012.

Areas of Good Practice
• There is evidence that the institution is a legal entity with education and training as a core activity.
• There is evidence of the institution's learner lifecycle, that the student journey is mapped from the beginning to end of the learning cycle.
• There is evidence that the institution is in good financial standing.
• There is evidence provided that the institutions maintains up-to-date records of all faculty.
• The institution does have a Child Protection Policy for Staff.

Areas for Improvement
• The institution is in the process of recruiting an additional member of the wider team to assist in their quality assurance measures.
• The institution maintains student records. However, a review of this procedure would be helpful.

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.	SM

QRP Findings

A quality policy was made available for review. The evidence indicates that the institution is committed to continuous quality improvement. It was clear, from the evidence provided, who has overall responsibility for PHECC approved courses based on the documents provided.

From the evidence provided and from discussions with the institution's representatives, it was clear that there is evidence that all those involved in education and training activities have been made aware of their responsibilities for the quality assurance of PHECC-approved courses.

Some evidence provided that illustrates performance measure are in place, although limited performance matrix in relation to PHECC approved courses. Additional work in this area is required, whilst also developing their Key Performance Indicators (KPI) associated with all education and training activities to provide the institution with measurable targets to enhance the quality of PHECC approved courses being delivered by the institution.

The 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

- It is clear who has overall responsibility for PHECC approved courses based on the documents provided.
- Those involved in education and training activities have been made aware of their responsibilities for the quality assurance of PHECC-approved courses.
- The institution has several sites and dedicated staff whose responsibility it is to visit and review these sites for compliance. This is not just for PHECC approved courses.

Areas for Improvement

- Additional work required to introduce KPI to reflect the institution 's monitoring of education and training.
- The institution should review the formalisation of some of their 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.	SM

QRP Findings

There is some evidence of up-to-date internal and external reporting, although some additional work to illustrate this process clearly is required.

There is evidence that indicates all tasks from student entry to exit are documented, clearly allocated but not linked to relevant KPI. In discussion with the institution's representatives the QRP were made aware that work in this area is planned.

The evidence indicates that the institution ensures that certificate activity reports, the disclosure of all faculty members, and any other information requests are submitted to PHECC when requested. This process could be more formal.

There is evidence that prospective students for courses are provided with sufficient information to make an

informed choice about course participation.

There is evidence that information about the institution's quality assurance system is made available to the public in an easily accessible format.

Areas of Good Practice
• There is evidence that indicates that prospective students are provided with sufficient information to make an informed choice about course participation. • Information about the institution's quality assurance system and external reviews are made available to the public in an easily accessible format.
Areas for Improvement
• It is not so clear how information is disseminated to all levels of the institution. • Link all tasks from student entry to exit to relevant KPI.

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.	**FM**
QRP Findings		

A Health & Safety Policy/statement was available for review. There was evidence of associated procedures and supporting documents on how this policy relates to faculty.

The evidence indicated that the institution has a documented criterion for premises to be used for the delivery of PHECC approved courses. There was documented evidence that approved premises were used for all PHECC approved courses and that these procedures applied to all faculty. There was evidence that the institution has a documented selection criteria and a checklist for external premises used for PHECC course delivery.

The evidence indicated that appropriate equipment/resources were available for courses delivered by faculty.

An equipment maintenance sheet was made available for review, which is used for resources used for courses delivered by the institution.

Areas of Good Practice
• Health & Safety policy/statement in place for head office. • Evidence to demonstrate that appropriate training premises are selected and used to deliver PHECC approved courses. • Evidence that appropriate equipment/resources are available and have been used for each course. • An equipment maintenance sheet is maintained for courses delivered by the institution.
Areas for Improvement
• None identified.

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

QRP Findings

The QRP was shown examples of the institution's online learning platform, which does many of the administrative functions, although the QRP were unclear whether there were appropriate administrators to support the number of courses/student ratio, despite these systems.

There was some evidence that students were made aware of the support available to them prior to enrolling on a course. Student support was referenced in documents and during discussions the institution's representatives outlined the support that is available on courses delivered by faculty, although this needs to be updated and should reflect how resilience is built into the course for student support.

There was evidence provided that the institution maintains appropriate instructor/student ratios on courses delivered by faculty. It was unclear from the evidence provided how the opportunities for students to meet individually and collectively with faculty and/or management are provided.

The evidence indicates that the institution has mechanisms for obtaining information from potential and existing students of any additional support needs they may have.

The evidence indicates that sufficient up-to-date resources are made available to students in a variety of formats for courses delivered by faculty.

Areas of Good Practice

- The institution demonstrates that it maintains appropriate tutor/instructor-to-student ratios, in keeping with PHECC requirements.
- There are procedures to obtain information from potential and existing students of any additional support needs they may have.
- There are mechanisms in place to provide reasonable accommodation for students with additional support needs.
- There are sufficient up-to-date resources (appropriate to the level of the course) made available to students in a variety of formats.

Areas for Improvement

- Clearer identification or when and how students meet individually and collectively with faculty and/or management.

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.	SM

QRP Findings

The evidence indicates that the institution has a documented equality and diversity policy.

The evidence indicates that the institution has additional documentation to support policy implementation and ensure that all associated policies and procedures promote equality, and are legislatively compliant.

There is some evidence to illustrate how and when faculty, learners and tutors are made aware of any updated documentation. In addition, the evidence indicated that the institution has a code of conduct in place. The evidence indicated that the institution would benefit from providing faculty (internal and/or external) with up-to-date information and training on equality and diversity and maintaining evidence of these activities. The institution is currently working on this issue.

Areas of Good Practice
• Relevant policies and procedures are legislatively compliant and do promote equality. • Documented code of conduct.

Areas for Improvement
• There is work required to evidence how faculty are provided with up-to-date information and training on equality and diversity.

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

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
The evidence indicates that the institution has a documented recruitment policy, which provides a robust systematic approach to recruiting appropriately qualified and experienced personnel to carry out education and training activities. There is evidence that the institution requires tutor/instructor certification prior to employment and that a minimum standard is expected. However, there is limited evidence on how the institution would demonstrate that it has adequate numbers of personnel in place to meet tuition demand. The evidence indicates that the institution's faculty meets PHECC education and training standards. There was some evidence that all personnel involved in administering and delivering PHECC approved courses have been made aware of their quality assurance responsibilities and are carrying out those activities consistently. During discussions the institution's representatives indicated that the institution may on occasions work with vulnerable adults. The evidence indicates that a safeguarding policy is documented. The evidence indicated that the institution has role descriptions that are specific to their education and training activities.

Areas of Good Practice
• The institution has adequate numbers of personnel in place. • The composition of the institution's faculty meets PHECC education and training standards. • Course delivery accommodates the cultural backgrounds and different learning styles of students.

Areas for Improvement
• Unclear from the evidence provided how any projected demand can be met.

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.	SM

QRP Findings
There is documented material to identify the training/upskilling needs of personnel has been carried out. The institutions representatives explained how this process is undertaken centrally with dedicated staff member(s) whose role it is to facilitate these requests. There is some evidence provided that indicates induction takes place. The institution's representative described different delivery sites. It is unclear how this process is replicated across all sites. There is evidence that the institution has an induction programme for personnel, whilst there is limited evidence provided to illustrate how formalised support and supervision and annual appraisal systems are implemented to staff.

Areas of Good Practice

- There is a documented procedure to identify the training/upskilling needs of all personnel.
- There is evidence of a training and development plan/programme that details how the institution meets the support and development needs of relevant personnel.
- There are mechanisms in place for faculty to request support for training/upskilling and to achieve additional qualifications.

Areas for Improvement

- Limited evidence provided to illustrate how formalised support and supervision and annual appraisal systems are implemented.
- There is limited evidence provided that demonstrates personnel have completed training/upskilling relevant to their role.

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.	SM

QRP Findings
The evidence indicates that the institution does have systems in place for regular and appropriate communication between faculty and management. During discussions the institution's representatives indicated that a range of communication methods were used. The evidence indicates that the institution would benefit from additional documentation to support these activities and formalise the methods outlined. The evidence indicates that faculty provide feedback during and after their course and provide course reports, whilst the evidence indicates that there is a system in place to ensure that only personnel with valid certification deliver PHECC approved courses.
There was some evidence that the activities of faculty are systematically reviewed through observation and a review of documentation. During discussions the institution's representatives outlined a process for observation. The evidence indicated that the institution would benefit from systematic analysis of relevant documentation. In addition, the evidence indicates that there is documented procedures for dealing with poor and unacceptable performance of faculty. The evidence indicated that the institution has appropriate Human Resource (HR) policies and procedures in place.

Areas of Good Practice

- Faculty provide course feedback.

- There is evidence that only personnel with valid certification deliver PHECC-approved courses.
- HR policies and procedures in place.
- Procedures are in place for dealing with poor and unacceptable performance of faculty through the CDETB Circular Disciplinary Procedures.

Areas for Improvement

- Documented systematic communications between faculty and management.
- Evidence of a systematic system for monitoring faculty through observation and the analysis of relevant documentation.

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

QRP Findings

The evidence indicates that the institution does not have, or require, collaborative contractual agreements.

Areas of Good Practice

- N/A

Areas for Improvement

- N/A

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 indicates that the institution would benefit from additional documentation to ensure the course development, delivery and review policy and associated procedures are strengthened to ensure any updates or changes in PHECC education and training standards, clinical practice guidelines or examination standards are captured.

The evidence indicates that course development does:
- Demonstrate an appropriate balance between theory and practice.
- Provide a balance between presentations, group work, skills demonstrations, practical work, and blended learning, as appropriate.
- Promote a commitment to self-directed learning, as appropriate.

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

Areas of Good Practice

- Course development demonstrate an appropriate balance between theory and practice.
- Course material meets PHECC requirements.

Areas for Improvement		
• Review course development, delivery and review policy and procedures.		
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 indicates that courses delivered are in keeping with PHECC education and training standards and clinical practice guidelines. The evidence also indicates that student induction takes place. The evidence indicates that all courses are delivered by appropriately qualified personnel and that relevant instructor details were recorded on course documentation, whilst evidence indicated that records of student attendance are maintained.

The evidence indicated that there is no third-party delivery of learning outcomes. Limited evidence provided of regular systematic monitoring and site visits. The institution would benefit from recording site visits.

Areas of Good Practice		
• Courses delivered are delivered in keeping with PHECC education and training standards and clinical practice guidelines. • There is an indication that student induction takes place. • Courses are delivered by appropriately qualified personnel. • Student attendance records are maintained.		
Areas for Improvement		
• Regular systematic monitoring of site visits.		
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 indicates that the institution has clear admission and entry criteria and information provided to students about the structure, duration, fees, etc.

The institution does recognise RPL for the PHECC approved programmes that they currently deliver.

Areas of Good Practice		
• Information is provided to students so they can make an informed choice about course participation.		
Areas for Improvement		
• None identified.		
Quality Area	**4.4 Course Review**	**Level**
Quality Standard	Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	**SM**
QRP Findings		

The evidence indicates that the institution has documented procedures for course review, whilst students and faculty have the opportunity to provide feedback. Areas for improvement are identified and actions agreed and implemented as outlined in the course improvement plan and/or QIP as evidenced by the institution's Quality Improvement Plan. The course evaluation process does involve key stakeholders, although some additional documentation of these processes would be helpful.

Areas of Good Practice

- Students have an opportunity to provide feedback during and after their course.
- Faculty have an opportunity to provide feedback during and after their course.

Areas for Improvement

- Course evaluations documented.

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 indicates that the institution has an assessment policy and procedure. The evidence also indicates that appropriate assessment methodology is used, it is clear when PHECC assessment material is used, students have access to information necessary for them to participate in assessment and receive feedback on their assessment. There is some evidence to indicate that the institution and students benefit from documentation and information about the adaptation of assessment methodologies that caters for students with additional support needs. It is clear from the evidence provided who has responsibility for managing the PHECC certification systems.

The institution has a procedure for external authentication, although this is carried out at a central location and not necessarily unique to PHECC approved courses. Some additional work required to identify which PHECC approved courses/students have been externally authenticated.

Areas of Good Practice

- PHECC assessment methodology and material is used for courses.
- The institution has an assessment policy and associated procedures.
- Students have access to the information necessary for them to participate in assessment and receive feedback.
- The institution has a student appeals policy and associated procedures.

Areas for Improvement

- The institution has a procedure for results approval (external authentication), although some additional work in this area is required to reflect current practice.

7. Conclusion and Outcome

Rating	3.5
Level	**Substantively Met –** SM Substantive evidence of organisation wide compliance
Conclusion	The evidence indicates that the quality assurance systems in place - at the time of review - generally reflects current practice and is effective, fit for purpose, meets PHECC education and training standards, meets PHECC quality review framework requirements and are consistent with relevant legislation.

The evidence indicates that the institution has several robust policies and procedures already in use throughout the institution's work. There are a small number of occasions where these need to better reflect the PHECC standards of education and training, although several policies are already imbedded within the PHECC standards.

The evidence also indicates that the organisation is aware of some of the points raised at the review and have already identified these workstreams.

The evidence indicates that a small range of areas require some additional work by the institute in meeting its obligations under the PHECC Quality Improvement Framework and associated documents. The completion of the identified improvement actions should be communicated to PHECC on request, in a timely manner. |