



Pre-Hospital Emergency

Care Council

Quality Assurance Policies & Procedures

Contents

1.0	Quality Policy	5
1.1.1	Purpose	5
1.1.2	Scope	5
1.1.3	Policy	5
1.1.4	Associated Documents.....	6
2.0	Safety, Health & Welfare Policy.....	7
2.1.1	Purpose	7
2.1.2	Scope.....	7
2.1.3	Policy	7
2.1.4	Associated Documents.....	8
3.0	Data Protection Policy.....	9
3.1.1	Purpose	9
3.1.2	Scope.....	9
3.1.3	Policy	9
3.1.4	Associated Documents.....	12
4.0	Admissions Policy.....	13
4.1.1	Purpose	13
4.1.2	Scope.....	13
4.1.3	Policy	13
4.1.4	Associated Documents.....	14
5.0	Faculty Management Policy.....	15
5.1.1	Purpose	15
5.1.2	Scope.....	15
5.1.3	Policy	15
5.1.4	Associated Documents.....	16
6.0	Risk Management Policy.....	17
6.1.1	Purpose	17
6.1.2	Scope.....	17
6.1.3	Policy	17
6.1.4	Associated Documents.....	18
7.0	Information & Record Management Policy.....	18
7.1.1	Purpose	18
7.1.2	Scope.....	18
7.1.3	Policy	18
7.1.4	Associated Documents.....	19

8.0	Complaints Policy	20
8.1.1	Purpose	20
8.1.2	Scope	20
8.1.3	Policy	20
8.1.4	Associated Documents	21
9.0	Blended Learning Policy	21
9.1.1	Purpose	21
9.1.2	Scope	21
9.1.3	Policy	21
9.1.4	Associated Documents	22
10.0	Assessment & Award Policy	22
10.1	Purpose	22
10.2	Scope	22
10.3	Policy	22
10.4	Associated Documents	24
11.0	Recognition of Prior Learning Policy	24
11.1	Purpose	25
11.2	Scope	25
11.3	Policy	25
11.4	Associated Documents	25
12.0	Training Infrastructure Policy	26
12.1	Purpose	26
12.2	Scope	26
12.3	Policy	26
12.4	Associated Documents	27
13.0	Course Design, Development, Approval & Review Policy	27
13.1	Purpose	27
13.2	Scope	27
13.3	Policy	27
13.4	Associated Documents	30
14.0	Results Approval Policy	30
14.1	Purpose	30
14.2	Scope	31
14.3	Policy	31
14.4	Associated Documents	32
15.0	Internal Verification Policy	32
15.1	Purpose	32

15.2	Scope.....	32
15.3	Policy.....	32
15.4	Associated Documents.....	33
16.0	External Authentication	33
16.1	Purpose	33
16.2	Scope.....	34
16.3	Policy.....	34
16.4	Associated Documents.....	35
17.0	Safeguarding Policy.....	35
17.1	Purpose	35
17.2	Scope.....	35
17.3	Policy.....	35
17.4	Associated Documents.....	37
18.0	Equality, Diversity & Inclusion Policy	37
18.1	Purpose	38
18.2	Scope.....	38
18.3	Applicable Legislation	38
18.4	Policy.....	38
18.5	Associated Documents.....	39
19.0	Appeals Policy	40
19.1	Purpose	40
19.2	Scope.....	40
19.3	Policy.....	40
19.4	Associated Documents.....	41
20.0	Monitoring Policy.....	41
20.1	Purpose	41
20.2	Scope.....	41
20.3	Policy.....	41
20.4	Associated Documents.....	43
21.	Remediation Policy for First Aid Response Training Course Assessment	43
21.1	Purpose	43
21.2	Scope.....	43
21.3	Policy.....	44
22.	Reasonable Accommodation in Assessment Practice Policy	45
22.1	Purpose	45
22.2	Policy.....	45
22.3	Associated Documents.....	48

1.0 Quality Policy

1.1.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to embedding a quality culture in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

1.1.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

1.1.3 Policy

The following policy sets out a minimum entitlement for all students on courses with Holland Safety. We are committed to ensuring that the quality of education and training we deliver is of a high standard that meets the identified needs of individual students and associated stakeholders. We are committed to having in place quality improvement activities that underpin the delivery of learning, showing how the quality of the student experience is to be assured and improved.

We will:

- Produce a quality assurance system that clearly defines how education and training activities are to be carried out, provides for objective oversight, and meets all PHECC requirements for delivering quality education and training.
- Systematically collect, analyse and use student, personnel and other stakeholder feedback. Information gathered will be used to bring about improvements to the services we offer. The results of actions taken will be shared with students, personnel and other stakeholders.
- Provide sufficient, appropriate learning resources and employ suitably competent and experienced personnel to ensure that the quality of the student experience is consistently of a high standard.
- Systematically review key documents, processes and procedures to ensure they meet the needs of students, the organisation and, where relevant, legislative requirements.
- Maintain records associated with all education and training activities and make them available for internal and external review.
- Ensure that records meet the requirements of the organisation, awarding bodies and any other internal and external stakeholders.
- Systematically check that policies and procedures are up to date, reflect current practice, and are being adhered to by all personnel.
- Develop clearly defined performance measures associated with all education and training activities.
- Systematically collect, analyse and use information on student characteristics, retention, achievement and progression to identify areas for individual and organisational improvement.

- Conduct an annual self-assessment that will result in a quality improvement plan, which is used to guide quality improvement activity.
- Systematically monitor the performance of personnel and conduct regular appraisals, which lead to the setting of targets and identifying opportunities for continued professional development.

1.1.4 Associated Documents

2.0 Safety, Health & Welfare Policy

2.1.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to the highest standards of safety, health and welfare as part of our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training in the Cardiac First Response – Community and First Aid Response training standards.

2.1.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

2.1.3 Policy

The policy of Holland Safety is to comply with:

- the Safety, Health and Welfare at Work Act 2005.
- the *Safety, Health and Welfare at Work (General Application) Regulations 2007 - 2021*.
- the *Safety, Health and Welfare at Work (Reporting of Accidents and Dangerous Occurrences) Regulations 2016*.
- the *Safety, Health and Welfare at Work (Construction) Regulations 2013* (S.I. 294 of 2013);

together with any amendments or other relevant statutory or other requirements as a minimum standard, to ensure so far as is reasonably practicable the safety, health and welfare of all our employees and further to ensure that persons not in its employment, who may be affected by its work activities, are not thereby exposed to risk to their safety and health.

We are committed to securing the safety of all and undertake to provide all necessary resources, structures and procedures that are required to safeguard them against the risks arising from activities in the workplace. We further undertake to apply collective systems of protection when reasonably practicable, Personal Protective Equipment (PPE), as well as any information, training and supervision necessary for protection will be provided, as required under the 2005 Act and applicable Regulations. All company personnel shall responsibly represent the company, on sites, to ensure compliance with the employer's duty of care under statute and common law. That company personnel shall actively promote a "Health and Safety" ethos on site.

To achieve a healthy and safe workplace all employees must understand that they have a responsibility to co-operate with supervisors and managers and furthermore they must take reasonable care of themselves and others who may be affected by their acts or omissions.

It is policy of Holland Safety to consult with all employees and faculty on matters of safety and health, to encourage all such personnel to notify the company management of any and all identified hazards in the workplace and put forth comments on improvements to safe work systems that may be part of

the company health and safety management system. We will provide all relevant Health and Safety training to all staff. Holland Safety will make available any resources (financial, personnel, time or others) that might be reasonably required to comply with the legal duties.

This company safety policy and safety statement will be kept up to date with regular reviews by senior management particularly as the business changes in nature and size. To ensure this, the policy and the way in which it is communicated and operated will be reviewed annually paying particular attention to all changes and amendments to current health and safety legislation.

This Statement will be distributed to all employees and shall be available at company's head office. Employees are hereby notified of the Company policy and are requested:

- To comply with their duties under the 2005 Act to notify the Company management of any hazards they might identify in the workplace.
- To co-operate with supervisors and managers to achieve a safe and healthy workplace.
- To take reasonable care for themselves and others.

The allocation of duties in matters of Health and Safety, and the specific arrangements to implement this policy are set out in the Company Safety Statement. The success of this policy depends on the commitment, involvement and co-operation of all. You are encouraged to become familiar with the contents and aspirations of this document.

Holland Safety commits to continuously improving this policy and our safety statement as the business changes in nature and size and in order to comply with new legislation. To ensure this, the operation and contents of this Safety will be regularly reviewed.

2.1.4 Associated Documents

- Holland Safety Statement (2022) Rev. 13.
- COVID Response Plan.
- Training Venue Suitability Checklist.
- Training Equipment Checklist.

3.0 Data Protection Policy

3.1.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to the highest standards of data protection in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

3.1.2 Scope

This policy is to set out Holland Safety's commitment to the highest standards of data protection in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

3.1.3 Policy

3.1.3.1 Definitions

- **Personal Data** is information that relates to or can identify a person, either by itself or together with other available information. It can include a person's name, address, PPS number, IP address, or CCTV footage, audio recordings, or location data of a person. This data can be held electronically or in manual files.
- **Data Subject** refers to the person where a company or organisation holds or uses their personal data.
- **Processing** is the term given to doing anything with personal data, including storing it.
- **Data Controller** refers to the company or organisation holding or using a person's personal data.
- **Data Processor** is the company, organisation or person who processes data on behalf of the Data Controller.
- **Data Protection Officer (DPO)** is an individual appointed by an organisation to ensure that it is compliant with applicable data protection rules. Only certain organisations are required to appoint a designated DPO.

3.1.3.1 Data Protection Principles

Holland Safety adheres the following seven data protection principles:

1. *Lawfulness, Fairness, and Transparency*

Personal data belonging to the data subject must be processed lawfully, fairly, and transparently concerning the data subject. Lawfulness means that any processing must have a legal basis under the GDPR and not involve any unlawful processing or use of personal data. Lawful processing conditions include:

- i. The Data Subject gives consent
- ii. Performance of a contract to which the Data Subject is party
- iii. Compliance with Legal obligation to which the Controller is subject
- iv. The protection of the vital interests of a Data Subject
- v. Performance of a task carried out in the public interest
- vi. Legitimate interests pursued by the Controller

Data controllers must meet one of the conditions above to comply with this principle. In addition, special categories of personal data such as sensitive personal data; union membership, religion, health or ethnic origin, invoke different rules and further deepen the conditions above which the Controller must meet to have a legal basis to process.

2. Purpose Limitation

This principle requires personal data must be collected for specified, explicit and legitimate purposes, determined at the time of the collection of the personal data, and not used for any other purposes.

3. Data Minimisation

This principle requires that controllers only collect and process adequate, relevant, and limited personal data. Essentially, data controllers collect the minimum amount of data they require for their intended processing operation. This principle complements the principle of purpose limitation.

4. Accuracy

The Data Controller must ensure personal data is accurate and kept up to date. Controllers must take reasonable steps to correct or erase inaccurate data, having clear procedures for this purpose as part of their data management activities.

5. Storage Limitations

Controllers must only hold personal data for as long as it is necessary to process it for the intended purpose. Time limits must be established for erasure, and data subjects should be aware of retention periods. Controllers may anonymise data or keep it longer if holding it for specified purposes.

6. Security & Confidentiality

Controllers must process personal data in a manner that ensures the level of security and confidentiality is appropriate to the personal data and ensure protection against unauthorised or unlawful processing, loss or damage. Controls can include technical or organisational measures, cybersecurity, and physical and organisational security.

7. Accountability

Controllers must be able to demonstrate compliance with the principles of data protection and have appropriate processes and records in place to demonstrate compliance. For example, the Controller must have appropriate policies and procedures in place, publish a privacy notice, maintain logs, implement contracts with data processors and conduct Data Protection Assessments (DPIA's) where necessary.

3.1.3.2 Data Subject Rights

The GDPR provides the following rights for individuals:

1. **The Right to be Informed:** Individuals have the right to be informed about the collection and use of their personal data.
2. **The Right of Access:** Individuals have the right to access their personal data and supplementary information.
3. **The Right to Rectification:** The GDPR includes a right for individuals to have inaccurate personal data rectified or completed if it is incomplete.
4. **The Right to Erasure:** the GDPR introduces a right for individuals to have personal data erased.
5. The right is not absolute and only applies in certain circumstances.
6. **The Right to Restriction:** Individuals have the right to request the restriction or suppression of their personal data. This is not an absolute right and only applies in certain circumstances.
7. **The Right to Data Portability:** The right to data portability allows individuals to obtain and reuse their personal data for their own purposes across different services. It allows them to move, copy or transfer personal data easily from one IT environment to another in a safe and secure way, without hindrance to usability.
8. **The Right to Object:** Individuals have the right to object to: processing based on legitimate interests or the performance of a task in the public interest/exercise of official authority (including profiling); direct marketing (including profiling); and processing for purposes of scientific/historical research and statistics.
9. **Rights in relation to automated decision making and profiling:** Individuals have rights in respect of automated decision making and profiling: to be informed and to request human intervention or review of automated decisions.

3.1.3.3 Obligations under Data Protection Legislation

A 'Data Controller' is a person, company, or other body that decides how and why a Data Subject's personal data is processed. Our organisation falls into this category. In some cases, two or more entities may act as Joint Controllers where they decide how and why personal data is processed. Controllers have several obligations under GDPR and these include the following:

- Prepare a privacy notice informing a data subject who is processing their data and why, who will be given their data, the data controllers contact details, and the right to access their own data
- Maintain data processing logs for themselves and any data processor and include the information listed above in addition to the envisaged time limits for erasure and details on technical and organisation security measures
- Disclose any incident where there is a data breach either inside or outside the organisations involving greater than one hundred personal records or sensitive personal data to the DPC within seventy two hours of discovering the breach.
- Ensure compliance with any Data Processor by having a formal written contract determining the parameters and scope of the processing being conducted by the Third Party.

- Understand Data Subject Rights and have processes in place to handle requests and understand the rules governing the overseas transfer of data
- Understand the rules in relation to direct marketing and how these differ depending on existing or new customers and the method of communication. In particular, the quality of consent obtained and the ability to demonstrate that the recipient actively agreed in advance of receiving any communication.

Data Processor:

- A 'data processor' refers to a person, company, or other body which processes personal data on behalf of a Data Controller.
- Our organisation falls into this category. They don't decide how or why processing takes place but instead carry out processing on the orders of a controller.
- Processors must maintain a data processing log containing information similar to the Controllers with additional details on their nominated representatives.

3.1.4 Associated Documents

- DF01 Subject Access Request Form.
- DF02 Data Breach Notification Form.
- DR01 Data Inventory.
- DPA01 Data Processing Agreement.
- DPIA01 Data Protection Impact Assessment.

4.0 Admissions Policy

4.1.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment ensuring the widest access for learners in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

4.1.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

4.1.3 Policy

4.1.3.1 Admission Information

Accurate information regarding admission to our Cardiac First Response – Community and First Aid Response training programmes will be provided to prospective learners through our website and through our Account Managers via telephone, including:

- The relevant award upon successful completion e.g., CFR or FAR.
- The expected duration of the training course.
- The maximum number of participants per course.
- The breakdown of blended course delivery.
- Minimum entry criteria i.e., >16 years of age.
- The outline of assessment methods used e.g., practical and MCQ.

4.1.3.2 Access, Transfer & Progression

Learners will be provided with accurate information regarding access, transfer and progression within the range of courses available e.g., progress from Cardiac First Response – Community to First Aid Response.

Information will be provided to learners who wish to progress to higher levels including Emergency First Responder, or beyond Responder level to Practitioner level through a PHECC approved Recognised Institution.

As part of our Recognition of Prior Learning Policy, details on exemptions from the Cardiac First Response – Community module will be made available to learners on First Aid Response training programme where requested in line with our RPL Procedure.

4.1.3.3 Admissions to Refresher Programmes

All learners who wish to complete a First Aid Response – Refresher programme will be required to produce evidence of their previous First Aid Response certification prior to being enrolled on the First Aid Response course.

4.1.4 Associated Documents

- Booking Form Template.
- Email Confirmation Template.
- eLearning Enrolment Credentials.
- Webinar Enrolment Instruction.

5.0 Faculty Management Policy

5.1.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to the management of our faculty in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

5.1.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

5.1.3 Policy

Holland Safety is committed to ensuring the highest standards of faculty management in our delivery of PHECC certified training at Cardiac First Response – Community and First Aid Response standards.

5.1.3.1 Recruitment & Selection of Faculty

Recruitment of Faculty will be conducted through a wide range of channels including personal endorsements, self-referral, advertising and through application via the Holland Safety website to ensure the broadest range of access to Instructors.

The minimum Instructor criteria is Cardiac First Response – Community and First Aid Response Instructor qualifications. All prospective faculty members must provide a full CV detailing their qualifications, previous relevant experience, and references.

Prospective faculty members will be invited to attend interview if successful during the initial screening of minimum qualifications and relevant CV-based experience.

5.1.3.2 Induction of Faculty

All faculty members are required to participate in an induction process with Holland Safety prior to their commencing delivery of the relevant education and training programme(s). This induction process outlines Holland Safety's "way of working" including our Code of Conduct, our commitment to embedding a quality culture, our expectations in relation to standards of behaviours, cherishing of equality, diversity and inclusion, and the core quality assurance requirements.

Upon completion of the induction process, Instructors are required to sign Holland Safety's Code of Conduct and Instructor Agreement.

5.1.3.3 Management of Faculty-provided Equipment

All Instructors are required to declare that they possess the minimum required equipment for the relevant PHECC education and training standard, and that:

- The equipment is maintained in good condition.
- The equipment is safe to use.
- The equipment is clean and sanitised.
- The equipment is sufficient for the number of learners on each course.
- The equipment is regularly checked, and defects reported.
- The equipment is stored correctly following completion of training.

5.1.3.4 Involvement of Faculty in Webinar-based Delivery

All Instructors involved in the delivery of PHECC approved live-online delivery (webinar) will undergo additional specific training relevant to our blended learning policy. This will include, inter alia:

- Set up of webinar and use of specific software (Zoom, Teams, WebEx).
- Interaction with learners in an online environment.
- Clear presentation of subject-matter.
- Managing interactivity and the use of chat, polls, and break-out rooms.
- Management of breaks and adaptation of the timetable.
- Accessing technical support or requesting assistance.
- Encouraging interactivity and learner engagement.

5.1.3.5 Monitoring of Faculty

All Instructors involved in the delivery of PHECC approved Cardiac First Response – Community and First Aid Response will be subject to regular monitoring to ensure they continue to meet our quality assurance standards. The Course Director and Internal Verifier are involved in carrying out specific monitoring activities with each having responsibility for on-site monitoring and desktop monitoring respectively. A range of monitoring techniques will be implemented, including:

- **Direct Observation:** this would include classroom and live online monitoring of interactions, processes, or behaviours as they occur. An example is observing an Instructor delivering a lesson from a lesson plan to determine if it is being delivered consistently.
- **Desktop Monitoring:** is when completed documentary evidence is observed and inspected for consistency. For example, checking marks on a completed assessment, reviewing submitted learner feedback, etc.

5.1.4 Associated Documents

- Course Director's Monitoring Checklist.
- Course Director's Report.

- Instructor CV.
- Instructor Certification.
- Instructor Interview Checklist.
- Training Equipment Checklist.
- Instructor Code of Conduct.
- Instructor Agreement.
- Instructor Course Report.
- Internal Verifier's Report.

6.0 Risk Management Policy

6.1.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to effective identifying of risk (financial, academic, operational, etc.) in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

6.1.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

6.1.3 Policy

Holland Safety is committed to fulfilling its obligations to eliminate or reduce all risk factors which could adversely impact upon its activities and undertakes to adhere to the highest standards of risk management applicable to the provision of education and training in line with PHECCs Education and Training Standards.

6.1.3.1 Approach to Risk Management

Our approach to risk management involves the following five steps:

1. Identify: we will identify any risk events which may prevent Holland Safety achieving its goals or objectives.
2. Analyse: we will analyse the cause and impact of a risk event to assess the likelihood and consequence of the risk.
3. Control: we will implement the most effective control measures that are reasonably practicable in the circumstances.
4. Monitor: we will continually monitor and review control measures to ensure their effectiveness against the risk events.

5. Report: we will ensure that risks are regularly reported upon and that stakeholders are aware of risks relevant to their work.

6.1.3.2 Responsibility for Risk Management

Overall responsibility for management of risk lies with the Managing Director of Holland Safety and they will maintain up-to-date the Risk Register, SWOT, PESTLE and Five Forces Analysis used by the company.

6.1.4 Associated Documents

- Risk Register.
- SWOT
- PESTLE
- Five Forces

7.0 Information & Record Management Policy

7.1.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to effective information and record management practices in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

7.1.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

7.1.3 Policy

It is the policy of Holland Safety to implement effective record management practices and systems for education and training records in accordance with best practice, PHECC Guidelines, and legislative requirements.

7.1.3.1 Communication / Availability of Information

Publicly available information is made available to the learner through the Holland Safety website and this is supplemented by direct email and telephone communication with our Accounts Management and Training Coordination Team.

7.1.3.2 Identification of Records

Training records are identified by both unique codes assigned to each course delivered, date, client name, learner details, and instructor details recorded in a electronic database. Hard-copy records are filed in secure storage at our head office.

7.1.3.3 Protection of Records

Records may exist in either hard copy or electronic formats. Hard copies may be stored where they are protected from physical deterioration, loss, and damage due to environmental conditions. Electronic back up data and contract documents are stored in a secure location. Our approach to electronic back up ensures that computer backups are made every four hours on an ongoing basis, that virus protection is in place, and that access to the network is via a secure portal.

7.1.3.4 Review and Disposal of Records

A review of records is carried out on a regular basis by the Internal Verifier to identify and flag records which are nearing the date of disposal. On or after the retention period stated, the relevant records will either remain in-situ, be archived, or destroyed.

If records are to be destroyed, they will be disposed of in a controlled manner; sensitive hard copies will be shredded and soft copies will be deleted from the system. If records are to be archived, they will be identified and stored appropriately.

In general, the following retention periods apply to PHECC records:

Assessment Records	1 Year
Appeal Records	3 Years
Complaint Records	3 Years

7.1.4 Associated Documents

- PHECC Learner Database.
- PHECC Certification Database.
- Post Log.

8.0 Complaints Policy

8.1.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to effective management of learner complaints in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

8.1.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

8.1.3 Policy

8.1.3.1 Grounds for Learner Complaints

Grounds for Learner complaint can be made in relation to:

- An honestly held belief that they have been treated unfairly at course entry or during participation or assessment stage of a programme.
- Dissatisfaction in relation to course facilities or training schedule or arrangements.
- Behaviour or attitude of Course Tutor staff or other learners.
- Specific issues or concerns in relation to learner supports or accommodation of particular individual needs.

It is Holland Safety policy to encourage learners to firstly seek informal and timely resolution of complaints through direct contact with the Account Manager or Instructor/ Faculty Member. Holland Safety believe that the majority of issues complained of can be resolved in a spirit of collaboration "locally" without a need for matters to be escalated.

8.1.3.2 Informal Procedure

1. In a situation where a learner wishes to make a complaint they should, in the first instance raise the relevant complaint or concern at local level and seek informal resolution. This may involve direct communication with a course instructor, if this is possible, so that the relevant matter can be addressed and satisfactorily resolved.
2. The informal process can also involve contact by the complainant with the Operations Manager of the company or Training Coordinator, who will make every effort to assist and mediate a satisfactory resolution to any complaint made, without the need for a formal process.
3. Resolution to a complaint that is kept at an informal level will normally be achieved within 5 working days of being raised. This will allow sufficient time for adequate mediation, necessary action to be implemented and review by all parties to the complaint.

8.1.3.3 Formal Procedure

1. Where the informal procedure does not satisfy the complainant, a formal complaint can be made in writing to the Operations Manager within 1 week of the conclusion of informal proceedings.
2. The Operations Manager, with assistance, as necessary, from the Training Coordinator will investigate the complaint.
3. The Operations Manager may seek external advice and expertise where the nature or gravity of the complaint merits such an intervention. Advice of the Quality Assurance Coordinator may also be sought as part of the complaint investigation process.
4. Where the complaint is not considered valid, the process will conclude, and the complainant will be informed in writing of the outcome of the investigation.
5. Where the complaint is fully or partly upheld and recommendations and actions required, these will be documented and implemented without delay.
6. All parties relevant to the complaint will be fully updated on the outcome of the complaint's investigation and a full written report of the complaint proceedings will be made available for review by the management review meeting members.

8.1.4 Associated Documents

- Complaints Register.

9.0 Blended Learning Policy

9.1.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to effective delivery of blended learning in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

9.1.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

9.1.3 Policy

Innovation in educational technology has expanded options for flexible learning experiences. For example, online learning, mobile and digital technologies, social media, are harnessed to a greater or lesser extent by providers to offer a more flexible approach towards the delivery of learning. Blended

learning will always involve face-to-face learning. Blended learning will typically also deliver the face-to-face component.

As with all types of learning/delivery, providers will look for the most effective and efficient means to support learners in achieving intended learning outcomes. Often this will require a blend of different learning and teaching strategies.

It is commonplace that a programme described as blended learning will include a combination of, for example:

- Online learning resources developed for online delivery.
- Access to learning technologies such as virtual learning environment.
- Tools to support virtual learning and off campus learning– virtual learning spaces and discussion and other forums to support students.
- Online activities to support formative and summative assessment.
- Face-to-face tuition.

At the organisational level, the provision of blended learning occurs in a context where:

- Legal obligations including data protection and intellectual property rights are respected.
- Resources are provided including appropriate training for staff involved in blended learning.
- Appropriate online infrastructure is provided to support high quality blended learning.
- Continuous improvement must be at the heart of blended learning programme design.

9.1.4 Associated Documents

- Quality Assurance Policies for First Aid Response Blended Learning Provision.

10.0 Assessment & Award Policy

10.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to excellence in Assessment and Awarding in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

10.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

10.3 Policy

10.3.1 Assessment Principles

All assessment methodologies must be:

- Clear, concise and the method of assessment must be understood by both assessors and learners alike.
- Consistent with, where appropriate – national standards and best practice must apply.
- Designed to allow the learner to demonstrate achievement and individual achievement.
- Fair and set at the pertinent standard required.

10.3.2 Learner Involvement in Assessment

Learners undergoing assessment must be:

- Aware of the standard expected and the method of assessment be it theory, practical and/or written.
- Conscious of the marking system and the grades, which may be attained.
- Notified of how and when they will be informed of their results.
- Given clear, concise, and written details of the appeals process.
- Standardised – to make certain that the same standard and format of assessments apply.

The Instructors conducting the assessment must:

- be open to monitoring and random checking of assessments, which is undertaken by an independent assessor.
- have the necessary qualifications and training to undertake assessment.
- be aware of the Holland Safety Equality & Diversity policy and ensure where required special arrangements are in place for learners.

10.3.3 Planning of Assessments

- Each assessment must be matched to the required standard.
- If any of the learners have special requirements or disabilities, every effort is made to meet those needs.
- Learners are informed in writing of the method or methods of assessment when the initial details of the course are issued and again at regular intervals during the course.
- The appeals process is described and clarified to all learners prior to assessments.
- The assessment of each course is planned in advance and the requirements of learners are taken into consideration when the assessments are being scheduled.
- The methods of assessment must be fair and consistent.
- The range and marking system is explained to the learners and the specific ranges are made clear
- Where there is a policy of re-sits, the learners are informed of the policy and time limits.

10.3.4 Security of Assessment Materials

- The assessments and materials used are retained by the Internal Verifier until required by the assessors.
- Assessors are informed of their responsibility in relation to the security of assessments.
- Guidelines are given to assessors as to how they may determine that the learner evidence is reliable and genuine.

- The secure recording, storage and access of our learner's assessment records.
- All records are stored in accordance with the record management policy.

10.3.5 Reasonable Accommodation

- Facilities and accommodation, which reach suitable standard, must be made available to all learners.
- General accommodation for assessments must be of an acceptable standard and learners must be allocated the space and environment of a good standard.
- If any of the learners have special requirements or disabilities where possible or feasible, those needs are adhered to
- If required, the technique for assessments will be reviewed and amended in the occurrence of a learner with special requirements or disabilities to ensure the learner can participate in an assessment.
- In the event of a learner requiring additional help or support during training courses or assessments there is a facility to provide for such assistance.
- Where a practical assessment is necessary – the equipment or other facilities must be made available to the learners, in the unforeseen circumstances where unfamiliar equipment is being used for the assessment, the learner must be given adequate time to become familiar with the specific piece of equipment.

10.3.6 Feedback to Learners

- All Learners receive constructive feedback on their examinations and assessments, which informs their participation in the programme. This is usually carried out by the Course Director or an Instructor on the course.
- In the event of a learner requesting an appeal of their assessment the appeals process is put in place.
- In the event of a learner requesting a re-sit, if applicable the re-sit process is put in place.
- Students' complete evaluation sheets on completion of each course, which are reviewed by the Internal Verifier after each examination and appropriate action implemented.

10.3.7 Results Approval

- Following completion of a course, the results of each student are reviewed and agreed upon and the results sheet signed by all. Any issues arising are discussed in detail and a decision is recorded.

10.4 Associated Documents

11.0 Recognition of Prior Learning Policy

11.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to recognising the variety of learning experience in relation to RPL for our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

11.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

11.3 Policy

11.3.1 RPL Assessment Criteria

Dependent on the RPL application, the following criteria will be considered (in part or whole) by the Holland Safety when evaluating an application for RPL:

- The extent and scope of the prior learning acquired.
- The relevance of the evidence submitted.
- The ability of the individual to prove learning associated with achievements.
- The ability of the individual to prove they have the required competencies as specified by the particular education and training standard or award.
- The ability of the person to present the evidence in the required format.

11.3.2 Availability of RPL

At present, it is the policy of Holland Safety to consider Recognition of Prior Learning in relation to the following specific circumstances only:

- Existing First Aid Responders who apply to complete a First Aid Response Recertification/Refresher programme.

11.3.3 Validation of RPL

Individual learner's seeking RPL must inform the Account Management team at the time of placing a booking to enrol on the relevant course.

Those seeking to attend a First Aid Response Recertification/Refresher programme must provide details of their current First Aid Response Certificate. This must be in date or be no greater than 30 calendar days out of date at the point of booking.

11.4 Associated Documents

N/A

12.0 Training Infrastructure Policy

12.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to providing the highest quality of training infrastructure in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

12.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

12.3 Policy

12.3.1 *Selection of Training Venues*

- Training shall only be delivered in a location which is fit for the purpose intended. At a minimum, the venue must conform to health and safety standards including provision of toilets. It must incorporate a separate area for breaks and the taking of refreshments (where provided/available).
- There shall be suitable space for the number of learners and for the completion of practical training, along with suitable chairs and tables for the completion of theory instruction and for writing in the case of the MCQ test.
- Preference shall be given to purpose-built training rooms and publicly available venues which function rooms to let, such as hotels and community centres.

12.3.2 *Instructor-provided Equipment*

Instructors must have with them suitable instruction equipment for delivery in compliance with the relevant PHECC education and training standard. In relation to Cardiac First Response – Community and First Aid Response, this includes provision of training manikins (1:3 learners), an AED training unit (1 per course), and a selection of appropriate bandages and dressings in accordance with the skills envisaged by the education and training standard.

At a minimum, instructors must have a suitable laptop and portable or overhead projector for the delivery of PowerPoint presentations. This equipment must also be suitable for the use of the PHECC Cardiac First Response electronic video/presentation or other media required as part of the education and training standard, and be capable of providing audio in a manner which is audible to learners.

12.3.3 *Virtual Learning Environment*

We currently provide facilities for virtual learning. This incorporates a range of learning tools including:

- Live Online Delivery (Cisco WebEx, Zoom, Microsoft Teams).
- Asynchronous Delivery via Learning Management System (Moodle).

These platforms are supported by our in-house IT Technical Support team who can monitor these systems and can promptly respond to technical difficulties in coordination with the Instructors and Training Coordination team.

12.3.3 Disability Access

We can provide additional supports and infrastructure for learners who require additional assistance to access learning:

- Additional learning support either 1:1 or in small groups.
- A personal assistant to help in class or around the Institute.
- A reader for exams.

12.4 Associated Documents

- Training Venue Suitability Checklist (actually a Microsoft Form).

13.0 Course Design, Development, Approval & Review Policy

13.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to providing the highest quality of course design, development, and review in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

13.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

13.3 Policy

13.3.1 Principles applicable to Course Design

Drawing on the work of Gagné, Briggs, and Wager (1992)¹, we support the following principles as core to a systematic approach to instructional design and of value in producing a well-designed course of education and training:

1. Gain attention of the learner(s): Ensure the learners are ready to learn and participate in activities by presenting a stimulus to capture their attention.

¹ Gagné, R. M., Briggs, L. J., & Wager, W. W. (1992). Principles of instructional design (4th ed.). Fort Worth, TX: Harcourt Brace Jovanovich College Publishers.

2. Inform learner(s) of the objective(s): inform students of the objectives or outcomes for the course and individual lessons to help them understand what they are expected to learn and do.
3. Stimulate recall and prior learning: Help students make sense of new information by relating it to something they already know or something they have already experienced.
4. Present the content: Use strategies to present and cue lesson content to provide more effective instruction. Organise and group content in meaningful ways and provide explanations after demonstrations.
5. Provide learning guidance: Advise students of strategies to aid them in learning content and of resources available. In other words, help students learn how to learn.
6. Elicit performance from the learner(s): have students apply what they have learned to reinforce new skills and knowledge and to confirm correct understanding of course concepts.
7. Provide feedback: Provide timely feedback of students' performance to assess and facilitate learning and to allow students to identify gaps in understanding before assessment.
8. Assess performance: Test whether the expected learning outcomes have been achieved on previously stated course objectives.
9. Enhance retention and transfer: Help learners retain more information by providing them opportunities to connect course concepts to potential real-world applications.

We adopt the ADDIE Instructional Design model for the design and development of all training programmes. ADDIE stands for Analysis, Design, Development, Implementation, and Evaluation, and is a systematic method for analysing, designing, developing, evaluating and managing the instructional process efficiently.

- Analysis
 - The Analysis phase can be considered as the “Goal-Setting Stage” (Kurt, 2018). This step involves the analysis of what students need to learn. What are their needs? What are the learning outcomes required to be achieved from the training.
- Design
 - This stage determines all goals, tools to be used to gauge performance, tests, subject matter analysis, planning, and resources (Kurt, 2018).
- Development
 - The Development stage starts the production and testing of the methodology being used in the project (Kurt, 2018). This stage is where the eLearning course content is created and presented in SCORM format.
- Implementation
 - The implementation stage reflects the continuous modification of the program to make sure maximum efficiency and positive results are obtained (Kurt, 2018). The course undergoes redesign, updating and editing to ensure it delivers the stated learning outcomes effectively.
- Evaluation
 - The last stage of the ADDIE method is Evaluation. This is the stage in which the project is subjected to meticulous final testing (Kurt, 2018).



The ADDIE Instructional Design Model (Kurt, 2018)

13.3.2 Approach to Course Development

Development of new courses follows a structured approach from an initial proposal to finished development. The initial stage of the process is an assessment by the Managing Director in conjunction with the Quality Assurance Coordinator, to examine the rationale for the proposed course in light of the following:

- Whether the course will add to the existing scope of delivery of Holland Safety.
- Provides value to prospective learners and results in a worthwhile qualification.
- Matches the current resource profile of Holland Safety and ability to deliver.
- Meets the requirements of the relevant awarding body (e.g., PHECC).

Following this initial stage, the course will move forward, and a Programme Development team will be assigned to oversee the development of the programme in line with the recommendations from both commercial and academic review. The Programme Development team will consist of at least a minimum of:

- An assigned “Course Director”.
- An assigned “Subject Matter Expert”.
- An assigned “Instructional Designer”.

This presentation includes development of, inter alia, the following:

- Presentation / eLearning SCORM Content.
- Course Timetable / Module Structure / Lesson Plan.
- Course Handouts / Notes.
- Learning Aids including audio-visual elements, equipment, etc.
- Assessment Materials including Assessment Brief, Assessment Paper (where required), and proposed Marking Scheme.
- Tutor Notes to support the effective delivery of the programme and the conduct of specific assessment activities.

13.3.3 Course Approval

The course approval process involves a review by the Quality Assurance Coordinator. Following this review, the course will either receive approval to be forwarded for external approval by PHECC or will be returned to the Programme Development team with comments for revision.

Following this internal course approval, the course is submitted to PHECC in accordance with their current course approval process and undergoes external review. Following successful completion of this external review, the course is released to the Faculty upon receipt of PHECC approval.

13.3.4 Course Review

Approved courses are subject to a period review by the Course Director to take account of changes in:

- Legislation, Codes of Practice, & Guidelines.
- PHECC Education & Training Standards.
- PHECC Clinical Practice Guidelines.
- PHECC Examination Guidelines.
- ERC Resuscitation Guidelines.

Sources of information for all such changes include the following information resources:

- PHECC website and email updates.
- HSA website and email updates.
- IRN Health & Safety Review Magazine.
- Irish Statute Book website.

13.4 Associated Documents

- Course Director's Report.
- Instructor's Report.
- Learner Evaluation Forms.

14.0 Results Approval Policy

14.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to maintaining the highest standards in assessment and results approval in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

14.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

14.3 Policy

14.3.1 The Role of the Results Approval Panel

The Results Approval Panel must ensure that all assessments submitted to it are comprehensively reviewed, and that the internal verification process has verified a percentage of the recent course results. In addition, the role of the Results Approval Panel is to ensure that:

- Results are quality assured and signed off by authorised personnel prior to submission.
- Appropriate decisions are made about the outcome of the assessment, verification and authentication processes.
- Assessment procedures are observed and there is evidence of consistency amongst tutors; especially in situations where modules are taught by multiple tutors.
- The Results Approval Panel must ensure that all assessments submitted to it are comprehensively reviewed.

The role of the Results Approval Panel is to ensure that:

- Results are quality assured and signed off by authorised personnel prior to submission.
- Appropriate decisions are made about the outcome of the assessment, verification and authentication processes.
- Assessment procedures are observed and there is evidence of consistency amongst tutors; especially in situations where modules are taught by multiple tutors.

14.3.2 The Results Approval Process

Each group presented for approval will have the following documents available for inspection:

- MCQ Results
- Practical Results.
- Learner Attendance Records.
- Instructor's Report.
- Learner Evaluation.
- Grade Summary Sheet.
- Course Director's Report (where applicable).
- Internal Verification Report (where applicable).
- External Authentication Report (where applicable).

The panel will discuss each set of results and will focus on areas of concerns and make suggestions for appropriate corrective measures if required. Other personnel may be invited to attend for a particular section of the results approval meeting as appropriate.

The panel will consider the reports and approve the final results. All panel decisions are recorded in the RAP Report Form and the chairperson will arrange for relevant parties to be notified in line with QA protocols.

14.4 Associated Documents

- Committees and panels terms of reference.
- RAP Report.
- MCQ Assessment Sheets.
- Skills Assessment Sheets
- Grade Summary Sheets.
- Attendance Records.
- Course Director Report (where applicable)
- Instructor Course Report.
- Learner Evaluation Forms.
- IV Reports.
- EA Reports.

15.0 Internal Verification Policy

15.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to excellence in internal verification practice in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

15.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

15.3 Policy

15.3.1 The Role of Internal Verification

The Internal Verifier's role includes verifying assessment procedures and checking and confirming assessment results. There are a number of aspects to the role of internal verifier and part of the role will require the internal verifier to look at a sample of portfolios and part of the role will require the internal verifier to look at all portfolios.

The role of the Internal Verifier is to:

- Verify that assessment procedures have been applied across all assessment activities.
- Confirm that the correct assessment techniques have been applied.
- Confirm that there is a portfolio of evidence for each student who is presented for assessment.
- Ensure that student evidence matches the assessment requirements of the relevant course.
- Confirm student results by checking there is evidence for each area identified in the assessment brief.
- Check that marks and grades have been recorded correctly.
- Verify that, where Recognition of Prior Learning has been applied, the correct documentation is submitted with the student's portfolio (where relevant).
- Check for and report on any errors or omissions.
- Liaise with management on any issue arising from the IV Process e.g., through IV Report.
- Safeguard all PHECC assessment materials.

15.3.2 The Internal Verification Process

The Internal Verifier will look at a sample of portfolios to confirm that:

- Marks are totaled and percentage marks calculated correctly.
- That marks are transferred correctly from learner evidence to learner marking sheet/record.
- That percentage marks and grades allocated are consistent with PHECC guidelines.
- Assessment procedures are adhered to.

Internal Verifier should be carried out every two months and include a sample (10%) from a randomly selected population of teaching personnel and all courses being delivered (e.g., CFR and FAR). New teaching personnel should have their first two courses fully internally verified and be highlighted for external authentication.

15.4 Associated Documents

- Internal Verifier Report.
- Course Director Report.
- Results Approval Report.

16.0 External Authentication

16.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to excellence in external authentication in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

16.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

16.3 Policy

16.3.1 The Role of External Authenticator

External Authentication (EA) is a key component of the quality assurance system. It provides the opportunity for external independent oversight of education and training activities, particularly student assessment. The role of the External Verifier (EV) is determined by the type of organisation and the scope of courses being offered.

The External Authenticator should:

- Have broad subject-matter expertise in the appropriate field of learning.
- Have the required knowledge and expertise to confirm that policies and procedures in relation to assessment are being implemented.
- Have experience of carrying out assessment or work in the field of learning.
- Have administrative and IT skills (e.g., report writing).
- Be independent of your organisation, without any conflict of interest or loyalty.
- Carry out their role as EV with integrity and professionalism.
- Be available to liaise with external bodies as required (e.g., for external review).

16.3.2 Preparing for External Authentication

The location for EA should ensure that all required documentation and equipment is available. Relevant personnel and students should be available at the location to meet the EV, if required. The following documentation should be available:

- Course specifications and assessment methods.
- All relevant assessment instruments and supporting documentation, e.g., assessment briefs, examination papers, marking schemes and outline solutions.
- All student assessment evidence.
- All student assessment results recorded on appropriate results sheet(s).
- List of courses being delivered and relevant teaching personnel.
- Internal verification report.

An appropriate level of preparation should facilitate the EV in:

- Confirming the fair and consistent assessment of students.
- Confirming that assessment techniques and instruments are appropriate.
- Reviewing the internal verification report.
- Applying a sampling strategy.

- Moderating assessment results.
- Meeting with relevant personnel and students.
- Identifying any issues/irregularities in relation to the assessment process.
- Producing an external authentication report.

16.4 Associated Documents

- EV Report.
- Course Director Report.
- Learner Assessment Records
- Internal Verifier Report.
- Course Database.

17.0 Safeguarding Policy

17.1 Purpose

This policy outlines the Holland Group's commitment to safeguarding young adults (aged between 16 and 18 years) and vulnerable individuals who participate in or are part of the training services provided by Holland.

17.2 Scope

This policy applies to learners, trainers, and staff involved in Holland Group's delivery of certified training programmes.

17.3 Policy

17.3.1 Safeguarding Statement

Holland Safety believes that all individuals have an equal right to protection from abuse, regardless of their age, gender, race, religion, ability, language, background, membership of the travelling community, or sexual identity and consider the welfare of the individual as paramount.

17.3.2 Principles of Safeguarding Policy

The organisation will take every reasonable step to ensure that children, young people and adults are protected. We will safeguard individuals by:

- Valuing them, listening to and respecting them.
- Providing a safe environment for children, young people and adults to learn in.
- Identifying individuals who are suffering, or likely to suffer, significant harm, and report concerns swiftly to relevant agencies.
- Working in partnership with other relevant agencies to support multi-agency safeguarding work.
- Responding effectively to any circumstances giving grounds for concern, or where formal complaints or expressions of anxiety are relayed.
- Providing safeguarding training to all staff to ensure they are aware of their responsibilities and are knowledgeable of the types and signs of abuse.
- Recruiting all staff safely by ensuring that all the necessary checks are made.
- Regularly monitoring and evaluating how our policies, procedures and practices are working to safeguard children and adults.

17.3.3 Governing Legislation & Frameworks

The principles of legislation and inter-agency frameworks governing this policy:

- Child Care Act 1991.
- Children Act 2001.
- Health Act 2004.
- Criminal Justice Act 2006.
- Safety Health and Welfare at Work Act 2005.
- Criminal law – Sexual Offences Act 2017.
- National vetting Bureau Act 2012 – 2016.
- Protection for Persons Reporting Child Abuse Act 1998.
- Children First: National Guidance 2011.
- Child Protection and Welfare Practice Handbook 2011.
- Safeguarding Vulnerable Persons at Risk of Abuse 2014.
- National Consent Policy HSE 2014.
- The Equal Status Act 2004 – 2015.
- Data Protection (Amendment) Act 1988 – 2018.

17.3.4 Principles of Safeguarding Children

Holland Group provides a range of training services, including programs for young adults. Our company and staff strictly follow the core principles of child protection and welfare.

Holland Group:

- Recognise that the protection and welfare of young adults and vulnerable adults are paramount, regardless of all other considerations.
- Fully comply with its statutory obligations under the Children First Act 2015 and other relevant legislation relating to the protection and welfare of young adults and vulnerable adults.

- Recognise Parents and carers have a right to respect and should be consulted and involved in matters that concern their family.
- Fully co-operate with the relevant statutory authorities in relation to child protection and welfare matters and relating to the protection of sensitive and vulnerable risk group.
- Understands that criminal dimension of any action should never be ignored.
- Understand that the prevention, detection and treatment of child abuse or neglect requires a coordinated multi-disciplinary approach, effective management, clarity of responsibility and training of personnel in organisations working with young adults.
- Adopt safe practices to minimise the possibility of harm to young adults, vulnerable adults and staff.
- Fully respect confidentiality requirements in dealing with child protection matters.

Holland Group ensures the above by:

- Providing a safe environment for young adults and adults to learn in.
- Ensuring there is a procedure for safe recruitment, selection and training of staff, training partners and volunteers.
- Ensuring young adults are enrolled in a group environment, in a structured classroom or virtual setting, with no individual contact outside the classroom setting.
- Providing safeguarding training to all staff to ensure they are aware of their responsibilities and are knowledgeable of the types and signs of abuse.
- Establishing clear procedures for reporting child protection or welfare concerns.
- Risk assessing the potential hazards to Young Adults and/or Vulnerable adults, and implementing controls to reduce risks.
- Ensuring that trainers effectively communicate the hazards to students and monitor compliance with the control measures.
- Following Procedure for the management of allegations of abuse or misconduct against staff, training partners and volunteers.
- Ensuring there is a proper complaints procedure in place.

17.3.5 Procedure to ensure compliance with safeguarding policy

- All faculty to receive Holland Group's safeguarding policy on induction and onboarding
- All faculty to have access to Holland Group's safeguarding policy through their access to our learning platform
- Training coordinator to direct all faculty to complete HSeLanD Children First and/or Safeguarding Vulnerable Adults eLearning training courses.
- Training Coordinator to keep record of completed HSeLanD Children First and/or Safeguarding Vulnerable Adults eLearning training for all faculty.

17.4 Associated Documents

- Safeguarding Training material
- Issues log
- Complaints policy
- Appeals Policy

18.0 Equality, Diversity & Inclusion Policy

18.1 Purpose

The purpose of this policy is to outline Holland group's commitment to equality, diversity, and inclusion in delivering certified training programmes.

18.2 Scope

This policy applies to learners, trainers, and staff involved in Holland Safety's delivery of certified training programmes.

18.3 Applicable Legislation

- Safety Health and Welfare at Work Act 2005
- Irish Human Rights and Equality Commission Act, 2014.
- Employment equality act 1995 – 2015
- Disability act 2005
- Mental Health act 2001
- Maternity protection act 1994
- HSA Code of practice for Employers and Employees on Prevention and Resolution of Bullying at Work.

18.4 Policy

18.4.1 *Principles of Equality, Diversity & Inclusion*

Holland Group is committed to:

- Non-discrimination (direct or indirect) in access and participation in education in relation to any of the nine equality grounds: gender, family status, civil status, sexual orientation, age, disability, religion, ethnicity and membership of the Traveller community.
- Ensure that training programmes and the content delivered are free from discrimination and harassment.
- Ensure its enrolment process, assessment and other procedures do not discriminate directly or indirectly against any student in relation to any of the nine equality grounds.
- Support an inclusive learning environment of dignity and respect where all students can develop their full potential.
- Ensure that all our staff are trained in the principles of diversity and inclusion, and actively promote and embody these values in their conduct.
- Ensure that trainees with additional needs are given the opportunity to discuss their requirements before being accepted into the course.
- Ensure students are provided with reasonable accommodation for any additional learning needs.
- Seek to provide reasonable accommodation to students leading up to and during learning assessments.
- Ensure that the training environment is free from bullying and that the work environment is aimed at providing a high-quality product or service in an atmosphere of respect, collaboration, openness, safety and equality.
- Ensure the risks to equality, diversity, and inclusion are identified, assessed, documented, and controlled measures are implemented.

- Review and update the policy to reflect the company's experiences in implementation, relevant changes in legislation and the workplace, and any other relevant external factors.
- Ensure there is an effective system for reporting incidents of discrimination, and that all parties are informed of the procedure.
- Handle complaints from employees or trainees regarding inequality or discrimination on any of the nine grounds mentioned above with fairness, sensitivity, respect, and confidentiality for all parties involved.
- Inform students/staff who file a complaint of complaint status upon request.
- Seek to identify barriers to equality and full participation and imbalances within organisational practices where they exist and take action to address these.
- Provide integrated accessible services and information to people with and without disabilities. Will seek to ensure that information is produced in accessible format within the organisational resources.

18.4.2 Accommodation of Diversity and Differing Ability

Holland seek to achieve the above by:

- Ensuring all Holland staff are trained in the diversity and inclusion policy.
- Actively identifying and addressing student needs across the nine grounds. Different data, feedback and consultation methods will be used for this purpose.
- Providing reasonable accommodation for students with disabilities and providing access to services where practicable.
- Conducting risk assessments to identify potential risks of discrimination and implement control measures to prevent them.
- Exploring barriers to participation from students.
- Ensuring flexibility in the operation of training programmes to allow student diversity to be accommodated.
- Seeking to ensure that students with a disability have as complete and equitable an access to all services as can reasonably be provided.
- Providing learners with the opportunity to convey any additional needs before enrolling on a course, under our reasonable accommodation policy.
- Risk assessing any such need, and if deemed acceptable and reasonable, accommodate where possible.
- Implementing proper reporting systems and making the learners aware of how to report an issue.
- Committing to a programme of improving the physical access of facilities and providing accessible information in consultation with the National Disability Authority.

18.4.3 Equality Diversity & Inclusion

Holland Group will implement equality & diversity training thereby ensuring diversity retains a central role in our ethos. All staff and faculty members will be invited to participate in this training regularly.

18.5 Associated Documents

- Equality and Diversity training materials.
- Issues log
- Complaints Policy

- Appeals Policy

19.0 Appeals Policy

19.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to a robust appeals process in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

19.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

19.3 Policy

19.3.1 *Grounds for Appeal*

Only appeals based on one of the following circumstances will be considered by the Appeal's Committee:

1. That PHECC's examination procedures, available in the PHECC Responder Examination Handbook, were not properly employed in the conduct of the examinations and that this procedural irregularity disadvantaged the appellant. For example, equipment failure in an OSCE not immediately rectified, e.g., by provision of alternative equipment.
2. Extenuating circumstances, referring to a serious or unforeseen event in which the appellant suffered an illness or some personal or family trauma at the time of examination. The appellant must provide original medical certificates or other supporting information to support their case that extenuating circumstances apply. The illness or trauma must be shown to have affected them in the examination or in the period immediately leading up to it.

A successful appeal will not lead to an examination result being altered. When an appeal is upheld, the usual outcome is to allow an opportunity to retake that part of the examination that was in dispute without payment of any further fee.

19.3.2 *Procedure for Recheck of Marks*

1. A learner may request a re-check of an assessment result (Marks/Grade) awarded on the narrow grounds that is believed by the learner that an error in calculation may have occurred.
2. The learner will make the request in writing or electronically within 7 days of having received the grade result in question.

3. The re-check of marks and grade will be conducted by Course Director and the Quality Assurance Coordinator.
4. The Learner will be informed either in writing or electronically of the re-check findings within 7 days of the re-check being requested

19.3.3 Procedure for Appeal

1. The request for learner appeal will be in writing and will be submitted within 10 days of the conclusion of the course.
2. The request for appeal must state the grounds for appeal and supply evidence in support of the request.
3. An Appeals Committee will be convened to determine the outcome of the appeal and shall comprise of:
 - a. Quality Assurance Coordinator (Chair).
 - b. Course Director.
 - c. Independent CFR/FAR Instructor (if required).
4. The learner may address the appeal committee on the circumstances of the appeal and may be accompanied by an advocate of their choice.
5. The decision on the learner appeal will be made by the appeals review committee. A collective decision by majority vote will apply. In the event of a tie the Chair will have a casting vote.
6. The learner will be informed (in writing or electronically within 7 days) on the outcome of the appeal. The decision of the appeals committee will be final, subject to the accepted legal rights of the learner.

19.4 Associated Documents

- Appeals Form.

20.0 Monitoring Policy

20.1 Purpose

The purpose of this policy is to set out Holland Safety's commitment to a systematic approach to monitoring in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

20.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

20.3 Policy

20.3.1 Principles of Monitoring

The following principles apply to monitoring:

- Identifying in clear, measurable terms the results being sought and developing a conceptual framework for how the results will be achieved.
- Monitoring results: developing performance-monitoring systems that regularly collect data on the results achieved.
- Reviewing and reporting results: comparing actual results against the targets (or other criteria for judging performance).
- Integrating evaluations: conducting evaluations to gather information not available through performance monitoring systems.
- Using performance information: using information from monitoring and evaluation for organisational learning, decision-making and accountability.

20.3.2 The PHECC Quality Improvement Cycle



20.3.3 Approach to Monitoring

The Course Director is assigned to carry out systematic monitoring of all Faculty on the relevant courses (CFR-C and FAR). The focus of their monitoring process is upon:

- Ensuring consistent and reliable training delivery and assessments are being made across the range of courses being provided.
- Highlighting any problems, trends, or further development needs in relation to the overall or individual members of Faculty.
- Ensuring that all Holland Safety & PHECC policies and procedures are adhered to and are being maintained by Faculty members in every aspect of their training delivery and assessment.

- Ensuring that appropriate standards of safety, health & welfare are being maintained in course delivery, including the safety of venues and training equipment.
- Verifying that the minimum standards of training equipment required under the relevant PHECC education and training standards are in use, clean, and in good condition on the particular course.

20.3.4 *The Monitoring Process*

All Instructors involved in the delivery of PHECC approved Cardiac First Response – Community and First Aid Response will be subject to regular monitoring to ensure they continue to meet our quality assurance standards. The Course Director and Internal Verifier are involved in carrying out specific monitoring activities with each having responsibility for on-site monitoring and desktop monitoring respectively. A range of monitoring techniques will be implemented, including:

- **Direct Observation:** this would include classroom and live online monitoring of interactions, processes, or behaviours as they occur. An example is observing an Instructor delivering a lesson from a lesson plan to determine if it is being delivered consistently.
- **Desktop Monitoring:** is when completed documentary evidence is observed and inspected for consistency. For example, checking marks on a completed assessment, reviewing submitted learner feedback, etc.

20.3.5 *Schedule for Monitoring*

All new instructors to undergo monitoring on the first course and once within the following six months. At least 20% of established Faculty members to undergo monitoring at least once per calendar year.

20.4 Associated Documents

- Course Director Monitoring Checklist.
- Course Director Report.
- Internal Verifier’s Report.
- External Authenticator’s Report.
- Results Approval Report.
- PHECC QRF Self-Assessment 2022.

21. Remediation Policy for First Aid Response Training Course Assessment

21.1 Purpose

The purpose of this policy is to set out Holland Safety’s commitment to providing remediation in relation to our delivery of Pre-Hospital Emergency Care Council (PHECC) certified training under the Cardiac First Response – Community and First Aid Response standards.

21.2 Scope

This policy applies to Holland Safety's delivery of PHECC certified training under the Cardiac First Response – Community and First Aid Response standards.

21.3 Policy

21.3.1 Assessment Criteria:

- Learners are assessed on practical skills (e.g., CPR, wound care, choking response) and theoretical knowledge (e.g., first aid procedures, emergency protocols).
- Learners must achieve a minimum score of 80% in the theoretical exam and demonstrate competency in practical skills to pass the course.

21.3.2 Identification of Learners Needing Remediation:

- Learners who score below the approved pass mark on the theoretical exam or do not demonstrate competency during practical assessments are identified for remediation.
- Instructors will provide immediate feedback on areas of weakness.

21.3.3 Initial Remediation Plan:

- Learners who fail the theoretical or practical assessment will be given a remediation session.
- This session will focus on the specific areas where the learner performed inadequately (e.g., CPR techniques, bandaging, understanding of emergency protocols).
- Learners may be required to review instructional materials, practice specific skills, or participate in additional role-playing scenarios.

21.3.4 Retake Opportunity:

- After the remediation session, learners will be allowed to retake the assessment (either theoretical, practical, or both, depending on the area of weakness).
- Where time allows, the assessment will be scheduled to be retaken on the same day.
- If more extensive remediation is needed, the candidate will be advised to retake the course and resit all assessments.

21.3.5 Tracking Progress:

- The progress of learners undergoing remediation will be tracked by the instructor.
- Instructors will keep detailed records of remediation efforts, including the skills practiced and the results of any retakes.

21.3.6 Second Attempt Results:

- If the learner passes the retake assessment, they will be awarded certification.
- If the learner fails a second time, they may be required to undergo additional training or re-enroll in the course before being reassessed.

21.3.7 Additional Support:

- For learners who are struggling, additional one-on-one tutoring or supplementary materials may be provided, including online resources or follow-up sessions.

21.3.8 Completion of Remediation:

- Learners who successfully pass after remediation will receive feedback, and their training records will reflect the additional remediation effort.
- Learners who still fail after multiple remediation attempts may be encouraged to retake the full course at a later date.

21.3.9 Clear Communication:

- The policy and steps for remediation will be communicated to learners before the course begins, so they are aware of expectations and procedures.
- Learners will also be informed of the support available throughout the course and remediation process.

21.3.10 Final Outcome:

- Upon successful completion of the course, including any necessary remediation, learners will receive certification in First Aid Response.
- The certification may have an expiration date (e.g., 2 years), after which a refresher course may be required.

22. Reasonable Accommodation in Assessment Practice Policy

22.1 Purpose

The purpose of this policy is to outline Holland Group's approach to the provision of reasonable accommodation in the assessment of training courses.

22.2 Policy

Holland Group is fully committed to complying with relevant policies and legislation with respect to equality and disability. Registered and potential learners with verified disabilities or specific learning difficulties may be given compassionate consideration and reasonable accommodation to enable them to successfully complete their programme.

A reasonable accommodation is any action that helps to alleviate a substantial disadvantage due to an impairment or medical condition. Such accommodations are put in place to help reduce these barriers in order to provide equality of access and opportunity for all. Compassionate consideration may be approved in circumstances where a learner experiences an extenuating situation which duly impacts upon the capacity to participate in class and/or, complete assessment evidence by the scheduled submission date. The process applied in relation to reasonable accommodation is as follows:

1. The Learner informs Holland Group of any reasonable accommodation(s) or special requirement(s) with as much advance notice as possible e.g., at enrolment.

2. The Learner informs the Tutor or any member of Holland Group staff of their need for reasonable accommodation in relation to their assessment.
3. The Learner is directed to complete a reasonable accommodation form and return this to Holland Group along with relevant evidence from their doctor or consultant to confirm their needs in relation to reasonable accommodation.

The form is available via the Holland Group Learner Handbook provided to all QQI Learners at the commencement of their programme of education and training. Following submission of the form and supporting evidence, the Learner will be notified of the outcome. The following evidence is required to support an application for reasonable accommodation in the applicable case:

Type of Disability	Type of Documentation	Appropriate Professional
Attention Deficit Disorder (ADD)/Attention Deficit Hyperactivity Disorder (ADHD)	Evidence of Disability Form OR Existing report	Consultant Psychiatrist OR Psychologist OR Neurologist
Autistic Spectrum Disorder (including Asperger's Syndrome)	Evidence of Disability Form OR Existing report	Consultant Psychiatrist OR Psychologist OR Neurologist
Blind/Vision Impaired	Evidence of Disability Form OR Existing report N.B. Evidence from high street retailers not acceptable	Ophthalmologist OR Ophthalmic Surgeon OR Letter from the National Council for the Blind confirming registration with the council OR If a learner has attended a school for the Blind, a letter on headed notepaper signed by the principal which confirms attendance at the school
Deaf/Hard of Hearing	Evidence of Disability Form OR Existing report N.B. Evidence from high street retailers not acceptable	An audiogram from a professionally qualified Audiologist and/or ENT Consultant, with signature, clearly indicating moderate to profound bilateral hearing loss (i.e. above 40dB). OR If a learner has attended a school for the Deaf, a letter on headed notepaper signed by the principal which confirms attendance at the school

Developmental Coordination Disorder (DCD) - Dyspraxia/ Dysgraphia.	Full psychoeducational assessment AND Evidence of Disability Form OR Existing report	Psychologist AND Occupational Therapist OR Neurologist OR Chartered Physiotherapist
Mental Health Condition	Evidence of Disability Form completed no more than 5 years before point of Needs Assessment	Consultant Psychiatrist OR Specialist Registrar

Options for Reasonable Accommodation

Alternative Venues – Learners receiving reasonable accommodations normally sit their examinations in a different venue to their peer group and can, if necessary, sit an examination in a room of their own. Alternative venues should be fully accessible to learners with disabilities. The physical space available should be appropriate for the effective provision of the reasonable accommodation, for example:

- A large table to accommodate enlarged papers, Braille material, and/or technological aids.
- Adequate floor space for maneuvering wheelchairs, mobility aids, crutches, canes and any other physical aid.
- Access to power points for equipment and/or assistive technology.

Time Allowance – Learners whose examination performance is significantly impacted by a disability/significant medical condition/learning difficulty may require extra time in examinations. Extra time is set at 10 minutes per hour. In exceptional circumstances this extra time may be extended.

Rest Breaks – Learners who may require a rest break in examinations include learners whose ability to complete the examination within the required time is significantly impacted by a medical, sensory, psychological or physical disability. Rest breaks should be considered as pauses in the exam and the exam time should be stopped when a learner takes a rest break. Learners will have 10 minutes per hour. Learners should tell the invigilator when they wish to have a rest break. They may take as much or as little out of their allocation as they wish at any one time. Learners can choose to stay in the room for their rest break or may leave the room if supervised. This can include going to the bathroom, taking a drink or snack if recommended, or moving around to relieve physical discomfort. Learners may not talk about or work on the examination during their rest break. The learner’s examination paper(s) should also be turned over during rest breaks.

Reader – Learners whose ability to read is significantly impacted by a disability may require a reader in examinations. Most learners will be accommodated together in the same venue with a shared reader. In exceptional cases only an individual reader may be required. If the examination is assessing competence in reading and reading comprehension the provision of a reader may not be appropriate.

Both the learner and reader should have access to training and practice sessions before the examination. The reader should be an independent person and not known to the learner. In the case of a foreign language, scientific, mathematical, or technical subject, the reader should have a working knowledge of that subject/language. The reader should be able to read accurately and at a reasonable rate. The reader may also act as the invigilator for the examination. Sometimes a learner may require a reader and a scribe. In such instances the same person may act as both.

Sign Language Interpreter – A sign language interpreter translates oral-based language, text and speech, into Irish Sign Language (ISL) so a Deaf person can understand what is being communicated. The interpreter should arrive before the commencement of the examination, to make seating arrangements and to interpret interactions between invigilators and learners. This time should also be used as an opportunity for the learner and the interpreter to become familiar with each other's communication styles. The interpreter should translate all announcements and information given by the invigilator prior to and during the examination. The interpreter should translate all interaction between the examiner and the learner, including questions and clarifications.

Scribe – Scribes may only be granted for learners who cannot handwrite due to the nature of their disability/significant medical condition/learning difficulty. Additional time of ten minutes per hour and a separate venue will be provided when using a scribe. Both the learner and scribe should have access to training and practice sessions before the examination. The scribe should be an independent person and not known to the learner. The scribe may also act as the invigilator for the examination. Sometimes a learner may require a reader and a scribe. In such instances, the same person may act as both. A recording of the session is recommended as this will act as a secondary source of information for the examiner if required. Scribes should be capable of writing legibly at appropriate speed when writing a learner's dictated answers.

Flexible Examination Arrangements – Flexible examination arrangements refer to any alteration in the standard form of assessment in order to accommodate a learner's disability/significant medical condition/learning difficulty. This might include:

Provision of an oral examination instead of a written test

- Some flexibility around the scheduling of examinations, such as, allowing more time between examinations for a learner with a physical disability or medical condition who experiences fatigue.
- Examinations split into more than one session.

It should be noted that flexible examination arrangements are granted in exceptional circumstances only and additional charges may be applied.

22.3 Associated Documents

- Reasonable Accommodation Request Form