

Quality Review Panel Observations

Optimise Management Consultants t/a Qualtec

QS1.1: Governance – The institution has fit-for-purpose governance that ensures objective oversight, clear lines of authority and accountability for all activities associated with PHECC-approved courses.	
Component	QRP Observations
1.1.1	Current Org Chart does not sufficiently reflect all Quality Assurance processes or separation of decision making- clarification required
1.1.2	No clear procedures in place for oversight and approval processes- clarification required
1.1.3	SAR referenced TOR needs construction, submission of these for all relevant decision-making groups and subgroups required
1.1.4	Limited submission on all education roles and responsibilities, submission of all role descriptions required to include IV/EA/ RAP as examples
1.1.5	No evidence submitted for organisational risk management for educational purposes, or aligned KPI's
QS1.2: Management Systems and Organisational Processes – The institution complies with all relevant legislation and cooperates with PHECC to meet its requirements.	
1.2.2	Limited evidence on the learner journey submitted, clarification required for all elements of administration, assessment, certification and all QA functions involved
1.2.3	Limited evidence supplied; clarifications required for all aspects of this criterion
1.2.3	Limited evidence supplied on all elements of this criterion
1.2.5	Limited evidence of this in place for educational activities
1.2.6	Submission of affiliated contract, no evidence of MOU/ Second providers agreements
1.2.7	Submission of accounts for 2017, updated accounts required, Tax clearance submitted for Personal MD not company
1.2.8	Noted in SAR that Affiliated Instructors to submit insurance, current company policy does not cover contract trainers- clarification required
1.2.9	Noted in SAR quality monitoring is planned to commence, high volume of affiliated instructors, clarification required
1.2.10	Clarification on procedures required, limited policy submission
1.2.11	No evidence of these activities supplied, ATI has noted it is required to have these in place and have submitted limited policy information

QS1.3: Continuous Quality Improvement – The institution has a proactive, systematic approach to monitoring, reviewing and enhancing education and training activities.	
1.3.1	Clarification required on CQI within the organisation and submission of associated policy/ process
1.3.2	Clarification required on the separation of operational and educational activities and decision-making processes
1.3.3	Affiliated instructor contract in place, limited in scope of QA provision and support information- clarification required
1.3.4	Further clarifications required
1.3.5	Further clarifications required- it is not clear how monitoring is carried out, or what KPI are aligned to the activity
1.3.6	Limited evidence of systematic collection and analysis of data collected
1.3.7	Limited evidence on the action of analysis of student participation etc.
1.3.8	No evidence of these activities taking place submitted
1.3.9	No evidence submitted
1.3.10	No evidence of these activities taken place- mins of a meeting submitted noting some areas
QS1.4: Transparency and Accountability – 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.	
1.4.1	No evidence submitted
1.4.2	No evidence submitted
1.4.3	No evidence submitted
1.4.4	No evidence submitted
1.4.5	No evidence submitted, noted that the ATI does have Company and individual Affiliations in place
1.4.6	No evidence of these activities submitted
QS2.1: Training Infrastructure – Courses are carried out in appropriate facilities and are sufficiently resourced to deliver training to the highest standards.	
2.1.1	Limited H & S Policy document submitted
2.1.2	No evidence submitted

2.1.3	No evidence submitted
2.1.4	Equipment list submitted, no evidence of monitoring or remedial actions
2.1.5	No evidence submitted
2.1.6	No evidence submitted
QS2.2 Student Support – A positive, encouraging, safe, supportive and challenging environment is provided for students.	
2.2.1	Limited evidence submitted- it is unclear how this is supported/ monitored
2.2.2	No evidence submitted
2.2.3	Unclear submission on the ratios of instructor/ trainer across all programmes
2.2.4	No evidence submitted
2.2.5	Policy supplied, extremely limited in scope or procedures for learners
2.2.6	No evidence submitted
2.2.7	No evidence submitted
QS2.3: Equality and Diversity – There is a commitment to provide equal opportunities for students and personnel in compliance with relevant equality legislation.	
2.3.1	Limited policy submitted, no evidence or cross organisational training
2.3.2	Unclear if policies and procedures are legislatively compliant
2.3.3	No evidence submitted
2.3.4	Affiliated trainer contract- limited in scope and practice
2.3.5	MD completed a programme, no evidence supplied or organisational training
2.3.6	No evidence submitted
QS3.1: Organisational Staffing – The institution has sufficient, appropriately qualified and experienced personnel to maintain high-quality education and training activities.	
3.1.1	Limited evidence supplied- clarifications required
3.1.2	Limited evidence supplied
3.1.3	Unclear that the ATI has sufficient resources to carry out all PHECC required activities
3.1.4	Unclear if the ATI composition meets PHECC requirements

3.1.5	Unclear if all those involved in PHECC provision have been made aware of their responsibilities
3.1.6	Policy document limited in scope, unclear how these activities are completed in the organisation
3.1.7	Not all required roles have specific descriptors
3.1.8	Limited evidence supplied
QS3.2: Personnel Development – The institution has a systematic approach to supporting and developing all personnel, ensuring they have the competencies required to deliver high-quality education and training.	
3.2.1	No evidence submitted
3.2.2	No evidence submitted
3.2.3	No evidence submitted
3.2.3	No evidence submitted
3.2.4	No evidence submitted
3.2.5	No evidence submitted
3.2.6	No evidence submitted
3.2.7	No evidence submitted
3.2.8	No evidence submitted
QS3.3: Personnel Management – A systematic approach is taken to managing all individuals and groups engaged in education and training activities.	
3.3.1	Clarifications required on all internal communications for all personnel
3.3.2	No formal process in place, ATI mentions informal processes – clarification required
3.3.3	No evidence of tutor files submitted
3.3.4	No evidence submitted
3.3.5	Policy insufficient in procedures and documented process- clarification required
3.3.6	Limited evidence submitted
QS3.4: Collaborative Provision – Appropriate contractual and quality assurance arrangements are in place with contracted staff.	
3.4.1	No clear evidence submitted

3.4.2	No clear evidence submitted
3.4.3	No clear evidence submitted
3.4.4	No clear evidence submitted
3.4.5	No clear evidence submitted
3.4.6	No clear evidence submitted
3.4.7	No clear evidence submitted
QS4.1: Course Development and Approval – A systematic approach is taken to course development and approval.	
4.1.1	Limited policy submission, no active process / procedures outlined
4.1.2	No evidence submitted
4.1.3	No evidence submitted
4.1.4	No evidence submitted
4.1.5	No evidence submitted
4.1.6	No evidence submitted
QS4.2: Course Delivery, Methods of Theoretical and Clinical Instruction – Courses are delivered in a manner that meets students’ needs and in accordance with PHECC guidelines.	
4.2.1	Limited evidence submitted
4.2.2	No evidence submitted
4.2.3	Clarity on faculty required for contract and affiliated instructors
4.2.4	No evidence submitted
4.2.5	Sample blank attendance submitted; onsite review required of learner records
4.2.6	Clarity on practice required
4.2.7	No evidence submitted
QS4.3 Course Access, Transfer and Progression – Course information is clear, and access is fair and consistent, with recognition of prior learning, as appropriate.	
4.3.1	Policy is unclear and no effect procedures- clarity required
4.3.2	No evidence submitted

4.3.4	No effective policy or procedures submitted, clarity required on rpl practice and assessment methods
QS4.4: Course Review – Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.	
4.4.1	No evidence of practice submitted
4.4.2	No evidence of practice submitted
4.4.3	No evidence of practice submitted
4.4.5	No evidence of practice submitted
4.4.6	No evidence of practice submitted
QS4.5: Assessment and Awards – Assessment of student achievement is carried out in a fair and consistent manner in line with PHECC assessment criteria.	
4.5.1	Limited policy submitted, no procedures
4.5.3	No documented approach to assessment submitted
4.5.4	No evidence submitted
4.5.5	Limited reference to learner information submitted
4.5.6	No evidence submitted
4.5.7	Reference to instructor responsibility- No security of assessment procedures/processes in place
4.5.8	Reference to Administration- no processes identified
4.5.10	Limited scope of practice for IV, no processes/ procedures aligned
4.5.11	No evidence submitted
4.5.12	No evidence submitted
4.5.13	Limited policy submitted; no procedures evident