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## Continuous Quality Improvement

### Policy Statement

HealthCo is committed to a cycle of Continuous Quality Improvement (CQI) of its programmes and services and to maintaining and continually improving its Quality Management System (QMS) in line with Pre-Hospital Emergency Care Council (PHECC) requirements, relevant legislation and ever changing service user needs and expectations. In order to continually improve its' QMS; management have set the following items as objectives and targets for achievement.

1. Ensuring a culture of CQI is promoted and embedded throughout the organisation.
2. Documented policies and procedures and supporting documentation are in place.
3. Monitoring of policies and procedures – Regular measurable checks on the effectiveness of policies and procedures.
4. Internal and External Self-Assessment Systems.
5. Governance structures & systems.
6. Objectives and targets in line with the above are set and reviewed at the annual management review meetings.
7. All staff understands the quality policy and its meaning in the organisation.
8. The quality policy is reviewed at 12-month intervals at the management review meeting for suitability, effectiveness and current relevance.
9. The QMS is an organic process where key issues are identified; Key Performance Indicators (KPIs) are developed, programmes are evaluated against set standards and outcomes and corrective and preventive action is carried out when required.

#### Scope

All activities associated with education and training. All staff, tutors and stakeholders involved in education and training for or on behalf of the organisation and all work areas.

#### Responsibility

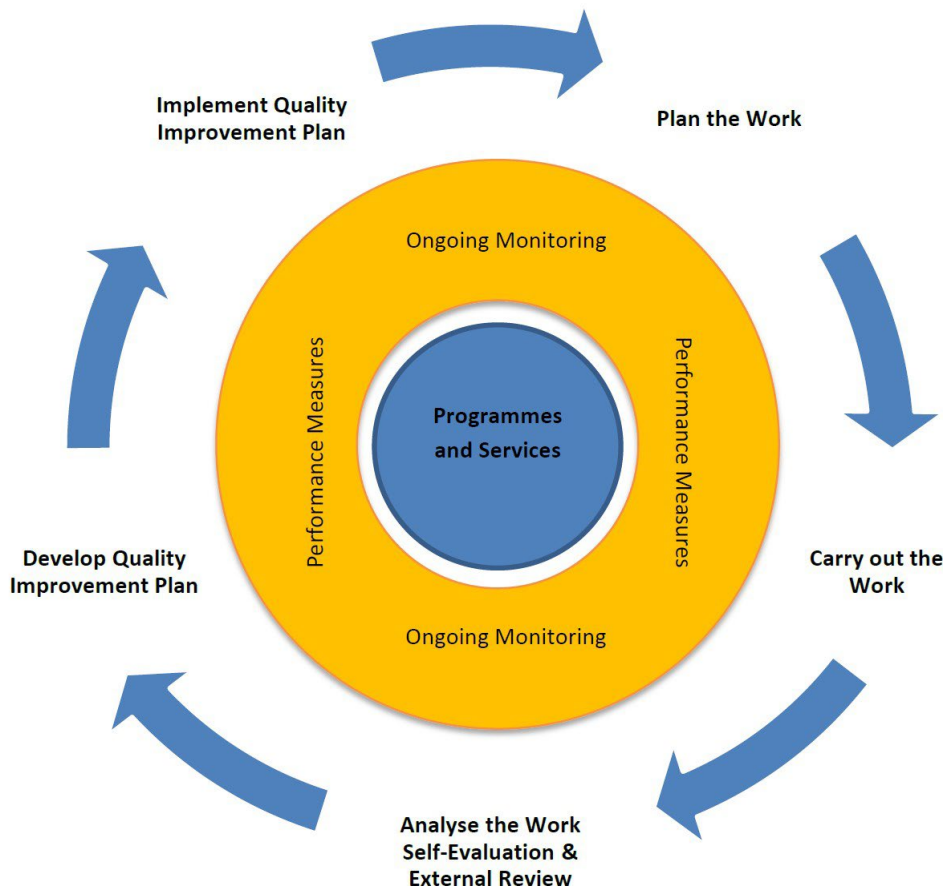
The directors are responsible for ensuring that all activities associated with this policy are carried out effectively and efficiently. All employees, tutors and associated stakeholders are expected to facilitate this.

## The Quality Improvement Cycle

The QIC is a series of interconnected activities ensuring a systematic approach to the ongoing improvement of programmes services. The QIC:

- Plan the Work
- Carry out the Work
- Analyse the Work – Self-Assessment & External Review
- Develop Quality Improvement Plan
- Implement Quality Improvement Plan
- Ongoing Monitoring – Performance Measures

**Figure 1: The QIC**



**Procedures**

Management Responsibility

<b>Purpose</b>	To describe how management will exercise its responsibility to ensure effective resourcing and implementation of the QMS.
<b>Responsibility</b>	Directors
<b>Key Steps</b>	<ol style="list-style-type: none"> <li>1. Development of QMS, including a system of document control.</li> <li>2. Establish performance measures for programmes and services.</li> <li>3. Ensure ongoing monitoring of performance measures.</li> <li>4. Regular management and staff meetings.</li> <li>5. Carry out regularly scheduled internal QMS audits.</li> <li>6. Establish a self-assessment/QMS review panel.</li> <li>7. Engage in regularly scheduled external evaluation of the QMS.</li> </ol>
<b>Records</b>	Internal Audit Report, External Audit Report, Record of Meetings, Document Control Checklist, Quality Improvement Plan, Performance Measures

Designated Responsibility

<b>Purpose</b>	To describe the role of groups and individuals with responsibility for quality management implementation, review and monitoring.
<b>Responsibility</b>	Directors
<b>Key Steps</b>	<ol style="list-style-type: none"> <li>1. A member of management, irrespective of other responsibilities, will be appointed to have overall responsibility for the QMS. They will have responsibility and authority that includes: <ol style="list-style-type: none"> <li>a) Ensuring that processes needed for the QMS are established implemented and maintained.</li> <li>b) Scheduling internal and external audits.</li> <li>c) Engaging an external evaluator.</li> <li>d) Reporting to the directors on the performance of the QMS and any need for improvement.</li> <li>e) Liaising with external stakeholders on matters relating to the QMS.</li> </ol> </li> <li>2. Staff members will be given the necessary responsibility and authority to carry out duties relevant to the QMS as required. These responsibilities will be reviewed at meetings and updated as needs arise.</li> </ol>
<b>Records</b>	Role Descriptions, Audit Schedule, Internal Audit Reports, External Audit Reports, Record of Meetings, Records of Correspondence (emails etc.)

## Staff Feedback

<b>Purpose</b>	This procedure outlines how staff will be encouraged and facilitated to reflect constructively on their experience of programmes and to use such reflection to make improvements as required.
<b>Responsibility</b>	Directors, Administrator & Tutors
<b>Key Steps</b>	<ol style="list-style-type: none"> <li>1. Individual Staff goals will be aligned to organisational and programme goals.</li> <li>2. Regular scheduled staff meetings.</li> <li>3. Informal communication – phone, email, meetings.</li> <li>4. Mid-Programme tutor report form distributed and completed.</li> <li>5. Mid/End of Programme learner evaluation forms which will include tutor evaluation.</li> <li>6. End of programme tutor report.</li> <li>7. Programme review meetings will take place between the directors and each tutor following the completion of each programme.</li> <li>8. Annual staff development reviews.</li> </ol>
<b>Records</b>	Role Descriptions, Record of Meetings, Record of Correspondence, Learner Evaluation Forms, Tutor Mid-Course Reports, Tutor End of Course Reports, Staff Development Review Form.

## Learner Feedback

<b>Purpose</b>	To describe how regular feedback will be gathered from learners and how this information will be used for programme improvement. It will also outline how this information is analysed and acted upon.
<b>Responsibility</b>	Directors, Tutors & Administrator
<b>Key Steps</b>	<ol style="list-style-type: none"> <li>1. When appropriate the following methods will be considered: <ul style="list-style-type: none"> <li>– Programme representatives</li> <li>– Structured feedback sessions (group)</li> <li>– Informal Conversations (Individual and Group)</li> <li>– Questionnaires</li> <li>– Surveys</li> <li>– Evaluation Forms</li> <li>– Google Reviews</li> </ul> </li> <li>2. Learners will be encouraged to make contact pre-programme to discuss any concerns they may have.</li> <li>3. Learner Induction – At the beginning of each programme learners will be informed of the learning resources, delivery modes and assessment requirements. They will be introduced to the organisation and the details of their programme. They will be encouraged to ask any questions they may have.</li> <li>4. Mid-programme evaluation form – On each programme a learner evaluation form will be completed.</li> </ol>

	<ol style="list-style-type: none"> <li>5. End of programme evaluation form and feedback session with learner representative(s).</li> <li>6. An open door policy will be in place for learners to approach any member of staff to make recommendations or highlight areas of concern.</li> <li>7. Questions (formal and informal) and evaluation forms will be structured to allow for quantitative and qualitative analysis.             <ul style="list-style-type: none"> <li>– Short term feedback (daily and/or mid- programme) will be dealt with immediately and an action plan communicated to all learners via notice boards, emails or verbally.</li> </ul> </li> <li>8. Learner evaluation forms will be summarised following each programme.</li> <li>9. Programme reviews held to go through summary of evaluation forms and develop corrective action, if required.</li> </ol>
<b>Records</b>	Emails, Mid Programme Evaluation Form, End of Programme Evaluation Form, Record of Meetings, Programme Reports, Learner Evaluations

### Associated Stakeholder Feedback

<b>Purpose</b>	To ensure the views of external stakeholders will be collected and outline how we will communicate the information gathered from learners, staff and others.
<b>Responsibility</b>	CRM, Directors, Administrator
<b>Key Steps</b>	<p>Collecting Feedback:</p> <ul style="list-style-type: none"> <li>● Meetings with relevant clients, organisations and national bodies PHECC etc..</li> <li>● Scheduled emails to and from associated stakeholders.</li> <li>● Annual survey of client organisations and companies.</li> <li>● Attendance at local events (Networking Opportunities)</li> </ul> <p>Communication Methods</p> <ul style="list-style-type: none"> <li>● Website</li> <li>● Marketing and Promotional Activities (leaflets, brochures, local media etc.)</li> <li>● Attendance at national conferences and seminars</li> <li>● Annual Reports</li> </ul>
<b>Records</b>	Annual Survey, Diary Entries, Record of Meetings, Promotional Materials

## Monitoring and Review

The directors will provide ongoing monitoring of the QMS and KPIs'. Learner evaluation forms and tutor reports will be analysed after each programme. A schedule of audit activity, including programme and administrative reviews are devised for each calendar year. Scheduled internal audits help to provide management with confidence that the system is operating effectively. The internal audits will be reviewed at the next scheduled management meeting or sooner if any serious issues arise. Recommendations for changes to any procedures or associated activities that have come through the feedback process will be reviewed at the management meetings. External evaluation, of the QMS by an independent auditor will also be scheduled as part of the continuous improvement cycle.