



STANDARD FOR THE CERTIFICATION OF Expero4care Quality of the training in the Healthcare Sector

Ed. 1

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CHAPTER I

OBJECTIVES AND SCOPE

The scope of the present document or standard for the Certification of the Quality of training in the Healthcare Sector is to:

- Specify the characteristics and requirements that an organization must follow to ensure that Healthcare trainings are efficient through the definition of the following procedures:
 - Planning
 - Implementation
 - Evaluation
 - Review

These procedures must contribute to a continuous improvement in training of Healthcare organisations, it must also lead to a positive impact for better services and perceptions by all stakeholders involved. These goals also apply for those who may participate in the offered training services.

The scope of this document refers to all characteristics noted and discussed in Chapter IV, Characteristics of Quality of Training in the Healthcare Sector.

This scheme has been designed by the European Project Expero4care to be accessible and applicable to all organisations working in the Healthcare Sector.

It should be noted that, in addition to the characteristics which are specified in this document, the activities of a healthcare organization must also be in accordance with current legal requirements and regulations related to said activities.



CHAPTER II

GLOSSARY

1. SPECIFIC STANDARD GLOSSARY.

- **Characteristic of the service:** Each of the elements of the Expero4care model in which indicators will be implemented for further audit or certification.
- **Conformity certificate:** The issuance of a standard or normative document by a third-party certifying that a certain level of confidence has been obtained on an identified solution.
- **Certification Body:** An organization which has carried out conformity certification and which demonstrates that the audited centre has implemented an effective system in accordance with the reference standard (in this case Expero4care). A certification body must be independent and competent in accordance to standard EN-45011 for the Certification of Services.
- **Standard:** A document that provides rules, guidelines, commitments or characteristics for activities or processes.
- **Record/Evidence:** Any document or specific support that an organization must show to the auditor to demonstrate evidence of performance.
- **Requirement:** An attribute that an organization must meet when certifying a service under the criteria of this standard.



CHAPTER III

INTRODUCTION

1. INTRODUCTION TO EXPERO4CARE.

Expero4care was created for the improvement of Healthcare sector training outcomes funded by the Life Long Learning program of the European Commission, Transfer of Innovation. The model and its tools were created to focus primarily on the quality of learning outcomes. Expero4care bases its methodology on a results' evaluation system, which fosters coherence between the stakeholders involved in the healthcare training courses, and on the perception of those results. It is a multi stakeholder-oriented approach, both internally and externally, and allows for a wide vision of all the core aspects which may impact on the quality of Healthcare sector training.



2. MOTIVATIONS TOWARDS A QUALITY STRATEGY.

The main motivation which led Expero Aps to develop this Standard was to encourage organizations operating in the Healthcare sector to improve their training related structural and monitoring processes, with the purpose of optimizing final results, ensuring the quality of the learning outcome and to raise stakeholders' satisfaction levels, both internally and externally.

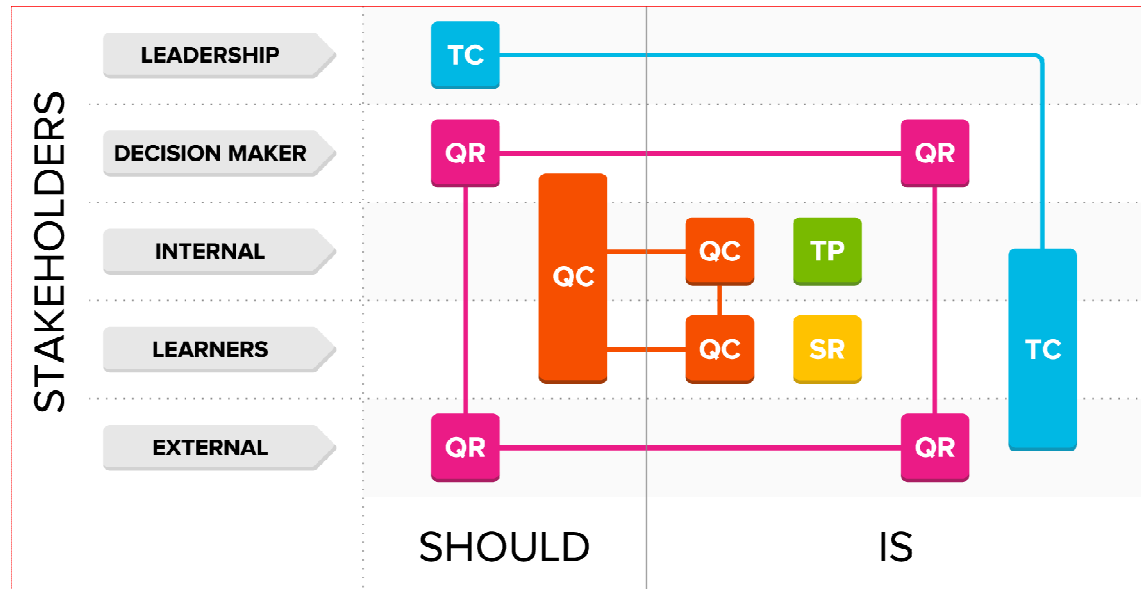
The certification of the Expero4care standard identifies the requirements of all the involved departments, those of the training and management staff which may participate, directly or indirectly, and any requirements which may influence stakeholders' expectations. Expero4care is based on the following Dimensions:

Training Culture	(TC),
Training Processes	(TP),
Quality of the Results	(QR),
Quality of Competencies	(QC),
Satisfaction with Results	(SR).

The selection criteria of these Dimensions were based on the experiences of experts in healthcare training and quality systems, and on studies carried out to indicate those factors relevant to ensuring stakeholders' satisfaction when sharing their perceptions with respect to the final results. The Standard contains requirements which affect stakeholders, both internally (training staff, trainers, decision makers, training office staff, scientific referent) and externally (workplace: organizational positions, managers' colleagues, employees through their professional networks, professional advisers and related services, and systems for monitoring significant outcomes).



3. THE EXPERO4CARE AND EXPERO4CARE MDBS MODELS.



The model introduces the following 5 levels of stakeholder classifications:

- **Leadership:** The team which leads the healthcare organization.
- **Decision maker:** Those who request the training (head of the structure, managers, NHS, external enterprise). They may be based either internally or externally to the organization.
- **Internal:** Internal stakeholders (trainers, tutors, staff in the training office, scientific referents),
- **Learner:** Learners training participants.
- **External:** External stakeholders (**Workplace:** belonging to the structure where the learners work; Organizational positions: middle- managers of, head of the office, supervisors, colleagues, employees; **Professional Network:** professional advisers, services/people with whom the learner is related; **System:** monitoring significant outcome for the purposes of the course).



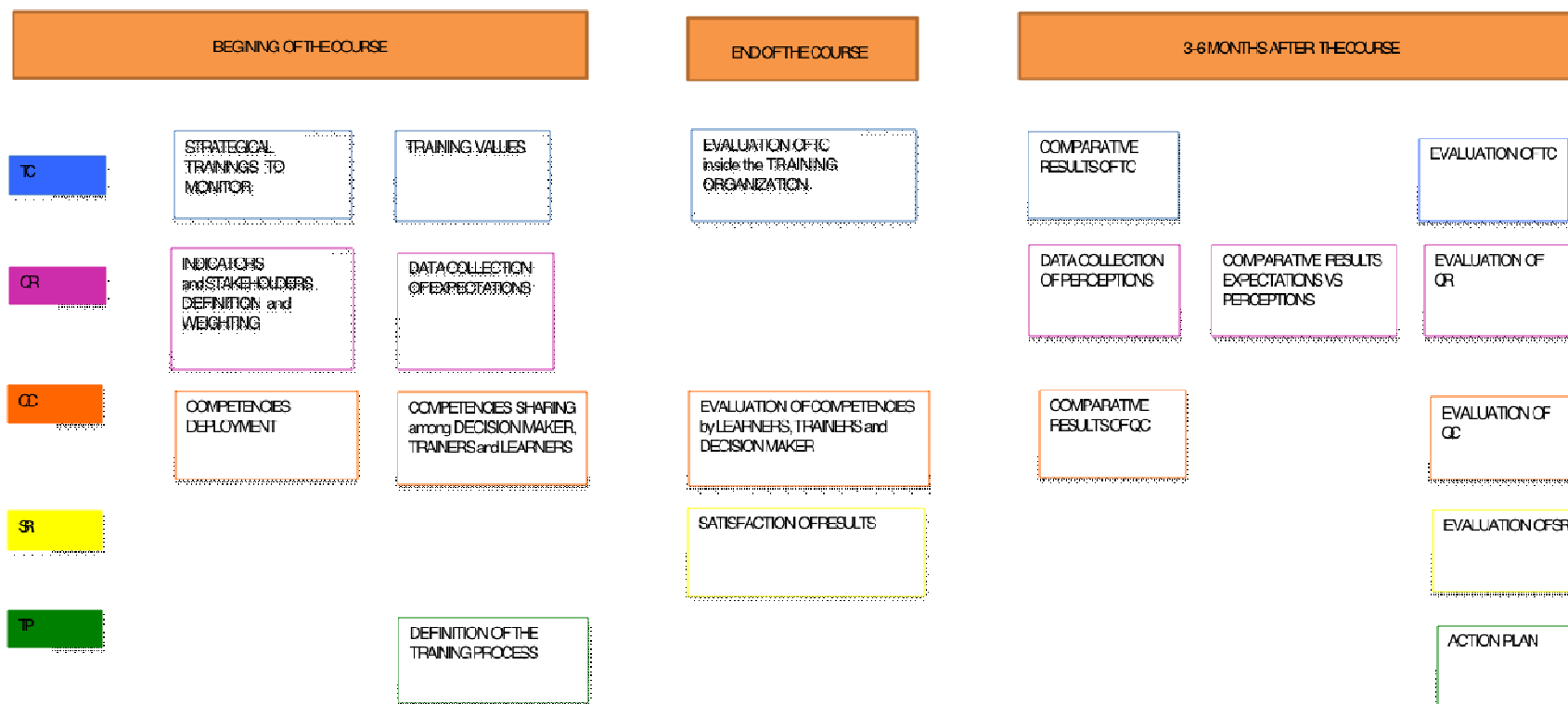
The Expero4care model uses two evaluation stages in order to evaluate the research on the quality of the learning outcome:

- **SHOULD (expectations) stage:** corresponds to the expectations that the stakeholders have from the learning outcome. This stage is carried out before the training course.
- **IS (perceptions) stage:** corresponds to the perceptions that the stakeholders have of the learning outcome once it has been completed. This stage is carried out at the end of the course.

To support the implementation of the model, Expero4care uses Expero4care MDBS, a compulsory tool used to carry out the quantitative and qualitative evaluations of training in Healthcare sector learning outcomes that this Standard requires.

Expéro4care MDBS is a database of results acquired through the implementation of tools including questionnaires, interviews, surveys. This model performs an automatic data elaboration which shows the training's results in terms of learning outcomes and permits the comparison of expectations and perceptions in order to identify the strengths and weakness of the training and identify possible improvements.

The next graph shows the implementation stages of the Expero4care model and the Expero4care MDBS:





4. CERTIFICATION AIMS

The certification of a service is a recognition of its quality by an independent third party (the Certification Body). The certification allows the service's users to identify and differentiate those entities that offer certified activities and services.

In this sense, Expero4care's aim of certifying the training quality in the Healthcare sector's learning outcomes is an expression of confidence in the training profession.

Organisations in the healthcare sector, using Expero4care, and supervised by third parties, will be able to exploit the following aspects related to the offered services:

- The certificate is a quality label given by an independent body, it is an external control guaranteeing the services offered by a healthcare organisation, with respect to the standard requirements and based on continuous improvement.
- The certificate guides Expero4care stakeholders in their selection processes, by providing facts and evidence of the organisation's professionalism and responsibility. Expero4care allows a particular organization to be distinguished amongst the best trained organizations. In other words, certification is a recognition of professional competency.
- Any organization, by looking internally, will be able to control and monitor the requirements of the services it offers. It will be able to detect weaknesses and find areas for improvement which, in turn, may foster and ensure the quality of the learning outcome.

This process can be considered a tool for improving the quality of services offered by organizations. Complying with this Standard, meeting its goals and its required levels of professionalism, guarantees ongoing updating and improvements in the quality of the training offered. Therefore, the improved effectiveness and efficiency of the organization will increase stakeholders' satisfaction.



4. REFERENCE AND NORMATIVE DOCUMENTATION

- National laws on education and training of each EU partner country.
- Organic Law 15/1999, 13th December, on the protection of Personal Data.
- ISO 9001:2008: Quality management systems. Requirements (10/2008).
- December 2012 Council Recommendation on the validation of non-formal and informal learning 2012/C 398/01.
- March 2012 - EQAVET tool for vocational education and training providers.
- June 2011 - EQAVET tool at system level.
- December 2010 - The Bruges Communiqué on enhanced European Cooperation in Vocational Education and Training for the period 2011-2020.
- November 2009 Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions - Key competences for a changing world.
- June 2009 EQARF Recommendation: Adoption of the Recommendation of the European Parliament and of the Council on the Establishment of a European Quality Assurance Reference Framework for Vocational Education and Training.
- May 2009 ECVET Recommendation of the European Parliament and of the Council on the Establishment of a European Credit System for Vocational Education and Training (ECVET).
- May 2009 - Education and Training 2020.
- May 2009 – EQARF The European Parliament and Council adopted the Proposal of the Commission regarding a European Quality Assurance Reference Framework for Vocational Education and Training (EQARF).
- November 2008 - The Bordeaux Communiqué agreed by the Ministers of Education of the EU, EFTA/EEA, EU candidate countries, the EU Commission and the European social partners encompasses the following objectives.



- April 2008 – EQF The European Parliament and the Council adopted the Recommendation for the EQF (European Qualifications Framework).
- December 2006 - Helsinki Communiqué - The second follow-up conference to Copenhagen focused on reviewing strategy and setting priorities.
- RECOMMENDATION FROM THE EUROPEAN PARLIAMENT AND COUNCIL, 18th December 2006, regarding the key competencies of continuous training. 2006/962/CE
- December 2004 - Maastricht Communiqué 1st follow-up conference to Copenhagen, at which the Ministers of Education, the European social partners and the EU Commission agreed on the Maastricht Communiqué.
- February 2004 - Education and Training 2010 - The joint report produced by the Council and the Commission in February 2004 (Education & Training 2010 - The success of the Lisbon Strategy) giving its views on the implementation of the Lisbon Process.
- 2003/C 13/02 EUROPEAN COUNCIL 19th December 2002 related to the promotion of European cooperation in vocational education and training.
- November 2002 - The Copenhagen Declaration: the Ministers of Education of 31 European countries, the European social partners and the European Commission agreed on an implementation strategy for the Lisbon objectives.
- EUROPEAN PRESIDENCE CONCLUSIONS, Barcelona, 15th and 16th March 2002.
- May 2001 - European Forum on Quality in VET - The European Commission established the first structured platform to promote cooperation and the exchange of information between the member states, the social partners and the Commission.



CHAPTER IV

QUALITY CHARACTERISTICS IN HEALTHCARE TRAINING

In this chapter the characteristics of the Expero4care standard will be defined, both with respect to the compulsory characteristics (must) and those that are considered as recommendations (should).

The aim is to obtain an adapted standard that allows the certifying body to evaluate, on the basis of objective quality criteria, the interested organisations.

These characteristics have been defined considering the following aspects:

- Recognizable by users and stakeholders.
- Objectives.
- Quantitative or qualitative verifiable.
- Controlled.



1. SUMMARY OF EXPERO4CARE QUALITY CHARACTERISTICS

This Standard contains seven families of characteristics:

A. PRELIMINARY ACTIONS

A.1- LEGAL REQUIREMENTS AND OTHER REFERENCE DOCUMENTS

A.2- TRAINING EVALUATION BOARD (TEB)

A.3- IDENTIFICATION OF THE STRATEGIC EVALUATION OBJECTIVES.

A.4- PRELIMINARY INFORMATION FOR EACH TRAINING COURSE

A.4.1 IDENTIFICATION OF THE WEIGHT OF THE INDICATORS BY THE
DECISION MAKER

A.4.2 IDENTIFICATION OF THE WEIGHT OF THE STAKEHOLDERS BY
THE DECISION MAKER

A.4.3. DEFINITION OF THE EXTERNAL STAKEHOLDERS SAMPLE FOR
ANALYSIS

B. TRAINING CULTURE/MEANING (TC)

B.1- LEADERSHIP'S VISION ABOUT THE TRAINING VALUES

B.2- SURVEY REGARDING STAKEHOLDER'S TRAINING VALUES (WITHIN THE
WORKPLACE)

C. TRAINING PROCESSES (TP)

C.1 TRAINING PROCEDURES

D. QUALITY OF THE RESULTS (QR)

D.1 IDENTIFICATION OF THE EXTERNAL STAKEHOLDERS' EXPECTATIONS

D.2 IDENTIFICATION OF THE EXTERNAL STAKEHOLDERS' PERCEPTIONS

D.3 COMPARISONS OF EXPECTATIONS AND PERCEPTIONS

E. QUALITY OF COMPETENCIES (QC)

E. 1 COMPETENCIES DEPLOYMENT

E. 2 COMPETENCIES EVALUATION BY THE LEARNERS

E.3 COMPETENCIES EVALUATION BY THE TRAINERS

E.4 DATA ANALYSIS AND QUALITY OF COMPETENCIES EVALUATION

F. SATISFACTION WITH RESULTS (SR)

F.1- SURVEY OF LEARNERS

F.2- EVALUATION OF SATISFACTION WITH RESULTS



G. IMPROVEMENT, CORRECTIVE, PREVENTIVE ACTIONS

G.1- FINAL EVALUATION OF THE TRAINING

G.2- IMPROVEMENT ACTIONS

G.3- CORRECTIVE AND PREVENTIVE ACTIONS



2. DETAILS OF EACH CERTIFIED CHARACTERISTIC AND MEANS OF IMPLEMENTATION:

In this chapter, the characteristics or quality commitments are defined. Also defined are the means the training organization must use to manage Expero4care.

Each family of characteristics, A, B, C, etc., is broken down into different categories, A1, A2, etc., and each characteristic meets the requirements of the Standard through definition of its details and relevant observations.

Nevertheless, meeting all compulsory requirements is not sufficient for obtaining certification. Besides the detailed description of each of the characteristics, records, documents and necessary evidence are identified in order to verify when the expressed requirements are met.

This chapter contains a detailed List of Records necessary for evidence demonstration according to the Expero4care standard's requirements.



A. PRELIMINARY ACTIONS:

QUALITY CHARACTERISTICS	DETAILS OF THE CHARACTERISTIC	RECORDS AND ASPECTS TO REVIEW
A.1. LEGAL REQUIREMENTS AND OTHER DOCUMENTS OF REFERENCE	<p>The training organization must identify the legal aspects and other requirements which must be covered by the training activity both at a national and at a regional level.</p> <p>A record of the legal and normative documentation must be maintained as well as any evidence that ensures the appropriate accomplishment of the requirements.</p>	<p>(1) List of legal requirements and other reference documents (Expero4care MDBS – Legal)</p>



A.2. TRAINING EVALUATION BOARD	<p>The organisation must define a Training Evaluation Board (TEB) that will be responsible for the model's implementation and with the following responsibilities:</p> <ul style="list-style-type: none"> • Introduce the training courses' object of evaluation in the Expero4care MDBS, according to the strategic decision made by the relevant manager (A.3) • Implement the different model stages by introducing all required information into the Expero4care MDBS: Should and Is. • Support the people involved in the training course during the evaluation process. • Evaluate the results of the established indicators and share them with the relevant manager of the organisation in order to obtain feedback and obtain approval for any proposed improvements. • Identify the necessary actions to improve the results. <p>The TEB should consist of at least by three people, all experts in training processes.</p> <p>As the TEB is called to evaluate different kinds of training, the TEB can also be integrated by the Decision Maker of each training (or a delegate) or/and an expert in the training topics selected.</p> <p>A record of the Training Evaluation Board's creation must be maintained, identifying the people involved and their responsibilities.</p>	<p>(2) Expero4care MDBS – TEB Members</p> <p><i>Note: In case of identifying other people in the TEB a justification in the documents that constitutes the working group must be duly justified.</i></p>
A.3. IDENTIFICATION OF THE STRATEGIC COURSES OBJECT OF EVALUATION.	<p>The relevant manager of the organisation, must identify, annually, the trainings object of evaluation, according to the strategy of the organization, and communicate it to the TEB.</p> <p>The identification of the strategic trainings must be duly justified.</p>	<p>(3) Expero4care MDBS – Trainings</p>



A.4. PRELIMINARY INFORMATION OF EACH TRAINING	<p>For each strategic training, the following information must be stored in the appropriate fields of Expero4careMDBS</p> <ul style="list-style-type: none"> • <i>a brief overview of the training</i> • <i>the weights assigned to stakeholders and indicators</i> • <i>the indication of the names and role of stakeholders</i> <ul style="list-style-type: none"> o decision maker o trainers o learners (uploading the list of participants) o external 	<p>(4) Expero4care MDBS – Training - Overview</p>
A.4.1 IDENTIFICATION OF THE WEIGHT OF THE INDICATORS BY THE DECISION MAKER	<p>SHOULD</p> <p>The Decision maker supported by the TEB - following the six quality indicators defined in the Expero4care model - must weight them, according to the relevance/importance they have towards the training.</p> <p>The quality indicators of the training are:</p> <ul style="list-style-type: none"> • Competencies • Participation • Transferability • Applicability • Impact • Credits <p>In case that the indicators are not applicable in the training, the weight could be Null.</p> <p>The results must be recorded at the Expero4care MDBS – Weight-Indicators.</p>	<p>(5) Expero4care MDBS – Weights - Indicators</p>



<p>A.4.2 IDENTIFICATION OF THE WEIGHT OF THE STAKEHOLDERS BY THE DECISION MAKER</p>	<p>SHOULD</p> <p>The Decision maker supported by the TEB - following stakeholders categories defined in the Expero4care model - must weight each category according to the relevance/importance they have towards the training.</p> <p>The Stakeholders of the training are:</p> <ul style="list-style-type: none"> • Leadership • Decision Maker • Internal stakeholders • Learners • External stakeholders: Workplace, Professional Network and System <p>In case that the indicators are not relevant for the training, the weight could be null (0).</p> <p>The results must be recorded at the Expero4care MDBS -Weights_stakeholders.</p>	<p>(6) Expero4care MDBS – Weights - Stakeholders</p>
<p>A.4.3. DEFINITION OF THE EXTERNAL STAKEHOLDERS SAMPLE TO ANALYSE</p>	<p>SHOULD</p> <p>The TEB, eventually with the support of the Decision Maker, must identify the bodies and people related to the specific training and define a sample to carry out the survey:</p> <ul style="list-style-type: none"> • For Workplace and Professional network categories a sample of people to interview has to be indicated. The sample must be representative / must represent the category of stakeholders. • For System category, at least 2 outcomes must be chosen, in order to measure (in a quantitative way) any possible change in the offered service/in the organization before and after the training <p>The results must be recorded at the Expero4care MDBS -stakeholders sample</p>	<p>(7) Expero4care MDBS- stakeholder sample</p>



B. TRAINING CULTURE

QUALITY CHARACTERISTICS	DETAILS OF THE CHARACTERISTIC	RECORDS AND ASPECTS TO REVIEW
B.1. TRAINING VALUES DEFINITION	<p>SHOULD</p> <p>The Leadership (the management team/board leading the organization) must define and describe the organization's list of values towards the training that Human Resources must undertake.</p> <p>Records of the values of the organisation must be identified in the Training Culture Survey in Expero4care MDBS.</p>	<p>(8) Training culture values: Expero4care MDBS – TC_Survey</p>
B.2. TRAINING CULTURE SURVEY	<p>IS</p> <p>In order to analyse the training culture, the TEB must carry out a survey among the employees using the TC_questionnaire provided by Expero4care.</p> <p>The minimal sample must include members of:</p> <ul style="list-style-type: none"> • internal stakeholders • learners (internal to the organization) • external - workplace. <p>It should be extended to the whole organization to obtain a more significant profile.</p> <p>TEB must define a sample methodology and maintain a record of this definition.</p> <p>Expero Association elaborates collected data of TC_survey, giving as output the main gaps between:</p> <ul style="list-style-type: none"> • training values and training culture, • individual, team and organizational level • individual, and management perception. <p>TEB must analyze the results, assign a score (0-100) and summarize the critical points</p>	<p>(9) Survey (Expero4care MDBS - TC_Survey).</p> <p>(10) Results of the training culture survey: Expero4care MDBS – TC_Evaluation</p> <p>(11) TEB remarks</p>



QUALITY CHARACTERISTICS	DETAILS OF THE CHARACTERISTIC	RECORDS AND ASPECTS TO REVIEW
	(TEB remarks) to elaborate improvement actions for the most relevant gaps (section G).	



C. TRAINING PROCESSES (TP)

NOTE 1: In the cases where the organization already has obtained the ISO9001:2008 certificate for the training processes within their Quality Management System, the Expero4care standard requires monitoring and analysing as to how these processes are improved.

QUALITY CHARACTERISTICS	DETAILS OF THE CHARACTERISTIC	RECORDS AND ASPECTS TO REVIEW
C.1. TRAINING PROCESSES	<p>IS</p> <p>The organization should have clearly defined and systematized the planning, training and follow-up of the training courses being offered.</p> <p>The organization must demonstrate evidence and improvement of the following processes:</p> <ul style="list-style-type: none"> • Training needs analysis: methodology, timing and expected results. • Training plan: definition of an annual training plan to meet the training needs. • Training action program, including at least: <ul style="list-style-type: none"> ○ Aims of the training ○ Competencies to be achieved ○ Content of the training ○ Methodology ○ System and Evaluation Criteria. • Trainers competencies required: selection process and competencies evaluation • Organization and communication: how the training is managed and informed. • Resources: identification of pedagogic materials resources and financial plan. 	<p>(12) Training needs analysis</p> <p>(13) Training plan</p> <p>(14) Training program</p> <p>(15) Trainers' competencies</p> <p>(16) Training resources.</p>



D. QUALITY OF THE RESULTS (QR)

QUALITY CHARACTERISTICS	DETAILS OF THE CHARACTERISTIC	RECORDS AND ASPECTS TO REVIEW
D.1. IDENTIFICATION OF THE EXTERNAL STAKEHOLDERS EXPECTATIONS	<p>SHOULD</p> <p>Once the sample is defined, the TEB must plan the interviews to be carried out before the beginning of the training, in order to collect expectations regarding the training.</p> <p>Depending on the stakeholders to interview (Decision Maker, Workplace or Professional Network), the TEB should use the template created under Expero4care model.</p> <p>For the System category, the TEB must indicate the starting values of the outcomes defined in A.4.3.</p>	(17) Expero4care MDBS – QR_Should_interview
D.2. PERCEPTION IDENTIFICATION OF THE EXTERNAL STAKEHOLDERS	<p>IS</p> <p>After three months/six months*, by the end of the training, the TEB must carry out the monitoring process. It consists of: for the following external stakeholders:</p> <ul style="list-style-type: none"> interviews to the following stakeholders: Decision maker, Workplace and Professional network following the template created under Expero4care monitoring indicators to evaluate the System category stakeholder, indicating the current values of the outcomes, defined in A.4.3. <p>Referring to the interview/s, in order to collect the perceptions, the TEB should maintain the same sample used in A.4.2, also if including/substituting interviewees, explaining the reason.</p> <p>* The definition of the monitoring timing may depend on several aspects: characteristics of the training, implementation requirements, aims of the decision maker, and others. The TEB must define the exact timing(s) of monitoring process.</p>	(18) Expero4care MDBS – QR_Stakeholder sample.



QUALITY CHARACTERISTICS	DETAILS OF THE CHARACTERISTIC	RECORDS AND ASPECTS TO REVIEW
D.3. COMPARATIVE RESULT BETWEEN EXPECTATIONS AND PERCEPTIONS	<p>IS</p> <p>For each stakeholder, Expero4care MDBS, automatically shows the qualitative and quantitative results of the expectations and perceptions, for each indicator.</p> <p>TEB must analyse the results for each of the indicators, in each stakeholders' categories, assigning each one a score (0-100) and summarizing the critical points (TEB remarks) to create corrective actions for the most relevant gaps (See section G).</p>	<p>(19) Expero4care MDBS – QR_ Evaluation</p>



E. QUALITY OF COMPETENCIES (QC)

QUALITY CHARACTERISTICS	DETAILS OF THE CHARACTERISTIC	RECORDS AND ASPECTS TO REVIEW
E.1. COMPETENCIES DEPLOYMENT	<p>SHOULD</p> <p>The training evaluation board (TEB, defined in A2) will define the training aims and will deploy them in units of competencies to be achieved by the learners at the end of the training.</p> <p>The deployment of competencies should be defined in the Expero4care MDBS according to the knowledge, skills, attitudes and values for each training aim.</p> <p>Before the training, the TEB must share the deployment of competencies with the following stakeholders:</p> <ul style="list-style-type: none">• Decision maker,• Trainers• Learners. <p>The date and modality of the agreement must be recorded in the Expero4care MDBS_QC-Sharing Training Aims.</p>	<p>(20) Expero4care MDBS – QC_ Training Aims</p> <p>(21) Expero4care MDBS – QC_Sharing Training Aims</p>
E.2. COMPETENCIES EVALUATION BY THE LEARNERS	<p>IS</p> <p>At the end of the course each learner must evaluate the acquired competencies. Each learner must fill in the Deployment of competencies with the level s/he had before the training course and the level s/he achieves after the training course. The learner evaluates also the level of applicability, transferability and credits.</p> <p>The learner can also indicate not foreseen competencies acquired during the training (informal and no-formal competencies).</p> <p>At least, 70% of the learners must fill in the questionnaire.</p>	<p>(22) Expero4care MDBS – QC_Learning Evaluation</p>



E.3. COMPETENCIES EVALUATION BY THE TRAINERS	<p>IS</p> <p>At the end of the course, all the trainers involved in the training must evaluate which competencies have been achieved or not, by the class. The trainer can also indicate those not foreseen competencies acquired by the learners (informal and no-formal competencies)</p>	<p>(23) Expero4care MDBS – QC_Trainer Evaluation</p>
E.4. DATA ANALYSIS AND COMPETENCIES EVALUATION	<p>The Expero4careMDBS details the data collected about each unit of competences in QC trainer and QC learners evaluation and gives as output some diagrams to compare</p> <ul style="list-style-type: none"> • learners perception of the achieved competencies with their own beginning level • trainers perception of the achieved competencies with learners perception of it <p>The analysis must evaluate each diagram (one for each unit of competencies), also reading the comments by learners and trainers and summarize the results in Expero4care MDBS_TEB remarks</p> <p>The Expero4care MDBS shows, for each of the indicators (applicability, transferability, credits) a summary of the data collected (frequencies). For each indicators the TEB, reading also the comments by learners, must assign a score (0-100) and summarize the results in (TEB remarks), to elaborate improvement actions for the most relevant gaps (See section G).</p>	<p>(24) Expero4care MDBS – QC_Evaluation</p> <p>(11) TEB remarks</p>



F. SATISFACTION WITH RESULTS (SR)

QUALITY CHARACTERISTICS	DETAILS OF THE CHARACTERISTIC	RECORDS AND ASPECTS TO REVIEW
F.1. LEARNERS SURVEY	<p>IS</p> <p>At the end of the Training, the Learners must fill in a questionnaire evaluating the level of satisfaction with the Training. This questionnaire can be one created by the training organization (for the purposes of ISO 9001:2008 for instance or other quality model).</p> <p>The survey must cover, at a minimum, the following:</p> <ul style="list-style-type: none"> • Trainer • Resources • Training materials • Training process: Methodology, timing, others. <p>The sample must represent at least the 70% of the Learners.</p> <p>A summary of the results of the survey must be recorded in Expero4care MDBS-SR_Evaluation and a blank questionnaire must be uploaded.</p>	<p>(25) Satisfaction Survey (upload in pdf)</p> <p>(26) Expero4care MDBS – SR_Evaluation</p>
F.2. EVALUATION THE SATISFACTION OF THE RESULTS	<p>IS</p> <p>The Expero4care MDBS details the data collected in a single item included in QC questionnaire about students' satisfaction and provides a summary regarding the data (i.e media, standard deviation, etc.)</p> <p>Considering these results and the summary of their own questionnaire about process (F.1) the TEB must indicate a single score (0 to 100) that represents the whole level of satisfaction expressed by the learners and summarize the critical points (TEB remarks) to clarify improvement actions for the most relevant gaps (See section G).</p>	<p>(27) Expero4careMDB – SR_Evaluation via QC</p> <p>Corrective Actions (section G)</p>



G. IMPROVEMENT, CORRECTIVE AND PREVENTIVE ACTIONS.

QUALITY CHARACTERISTICS	DETAILS OF THE CHARACTERISTIC	RECORDS AND ASPECTS TO REVIEW
G.1. FINAL EVALUATION OF THE TRAINING	<p>Expero4care MDBS, automatically generates the list of TEB remarks with the assigned scores and also presents an evaluation, applying the Pareto principle, highlighting:</p> <ul style="list-style-type: none"> the first 20% priority of weak points where improvement actions are needed (G.2) weak point where improvement actions are not a priority strengths 	(28) Results of the Model evaluation: Expero4care MDBS – TEB Report
G.2. IMPROVEMENT ACTIONS	<p>The training processes, from the implementation of the Expero4care standard, must continuously improve its effectiveness in order to meet the expectations and perceptions of internal and external stakeholders.</p> <p>Improvement actions must be identified in order to foster training organization effectiveness for the first 20 % arising in G.1, also indicating the name of the referent and the planning of the action.</p> <p>A record of the improvement actions must be kept in Expero4care MDBS.</p>	(29) Improvement actions record or Expero4care MDBS – actions
G.3. CORRECTIVE and PREVENTIVE ACTIONS	<p>For all those non conformities identified during the implementation of the Expero4care MDBS, the TEB must carry out the following actions:</p> <ul style="list-style-type: none"> Analyse of the non-conformity to identify causes. To determine the necessary Corrective Actions to undertake to avoid re-occurrences. Determine the people responsible for implementing the Corrective Actions and adherence to deadlines. Implement a follow-up to verify if the undertaken actions have been effective and proceed to close them when issue has been resolved. 	<p>(30) Corrective actions record</p> <p>(31) Preventive actions record</p>



	<p>The above detailed actions must be recorded.</p> <p>For all those potential non conformities detected during the implementation of the Expero4care MDBS, the TEB must carry out the following actions:</p> <ul style="list-style-type: none">• Analyse of the potential non-conformity to identify the causes.• Determine the necessary Preventive Actions to be undertaken to avoid its reoccurrence.• Determine the people responsible to carry out the Corrective Actions and the adherence to deadlines.• Implement a follow-up to verify if the undertaken actions in order to avoid real non-conformity and proceed to close them when the possible issue has been resolved. <p>The above detailed actions must be recorded.</p>	
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CHAPTER V

DOCUMENT MANAGEMENT SYSTEM

The document system is established with the purpose of demonstrating the requirements of this Standard for the certification of the quality of the training in Healthcare organisations.

1. DOCUMENT MANAGEMENT SYSTEM

The document system that the healthcare organization must maintain is composed of:

- The Expero4care Standard as well as the associated documentation in the framework of healthcare organizations.
- The normative documents applicable to the professional education and training field, as required in Chapter III, section 5 of this document, and others.
- The documents which might be of reference for the measure and verification of quality characteristics and commitments established in this Standard.
- Other documents developed by the Healthcare organization which may affect to the training service.
- The records generated through the implementation of the Standard.
- The External Control Plan of the Certification Body.

The **Summary List of Records** identifies all the documents included in the Document System, depending on the characteristics (necessary evidences to demonstrate the implementation of the quality characteristics). The Summary mentioned documents can be replaced by other equivalent documents as long as these documents respect the quality characteristics and the minimum required contents. (Chapter IV).



The **Summary List of Records** to be provided as evidence of implementation are:

<i>Id</i>	<i>Records and aspects to review</i>	<i>Retention period (years)</i>
(1)	List of legal requirements and other reference documents (Expero4care MDBS -Legal)	> 2 year
(2)	Expero4care MDBS – TEB Members	> 2 year
(3)	Expero4care MDBS - Trainings	> 2 year
(4)	Expero4care MDBS – Training X - Overview	> 2 year
(5)	Expero4care MDBS – Weights - Indicators	> 2 year
(6)	Expero4care MDBS – Weights - Stakeholders	> 2 year
(7)	Expero4care MDBS – Stakeholder sample	> 2 year
(8)	Training culture values: Expero4care MDBS – TC_Survey	> 2 year
(9)	Survey: Expero4care MDBS – TC_Survey.	> 2 year
(10)	Results of the training culture survey: Expero4care MDBS – TC_Evaluation	> 2 year
(11)	TEB remarks	> 2 year
(12)	Training needs analysis	> 2 year
(13)	Training plan	> 2 year
(14)	Training program	> 2 year
(15)	Trainers' competencies	> 2 year
(16)	Training resources.	> 2 year
(17)	Expero4care MDBS – QR_Should_interview	> 2 year
(18)	Expero4care MDBS – QR_stakeholder sample.	> 2 year



(19)	Expero4care MDBS – QR_Evaluation	> 2 year
(20)	Expero4care MDBS – QC_Training Aims	> 2 year
(21)	Expero4care MDBS – QC_Sharing Training Aims	> 2 year
(22)	Expero4care MDBS – QC_Learning Evaluation	> 2 year
(23)	Expero4care MDBS – QC_Trainer Evaluation	> 2 year
(24)	Expero4care MDBS – QC_Evaluation	> 2 year
(25)	Satisfaction Survey	> 2 year
(26)	Expero4care MDBS – SR_Evaluation	> 2 year
(27)	Expero4careMDB – SR_Evaluation via QC	> 2 year
(28)	Results of the Model evaluation: Expero4care MDBS – TEB Report	> 2 year
(29)	Improvement actions record Expero4care MDBS – actions	> 2 year
(30)	Corrective actions record	> 2 year
(31)	Preventive actions record	> 2 year



2. **ARCHIVE.**

In order to control the history of the application of the Standard, the organization has to maintain an archive containing:

- Previous versions of the applicable documents (part 1 of this section).
- Other records historically generated.

The documents' obsolete versions and the records will be maintained at least 3 years, except for those legal documents which are required to be maintained for longer.



CHAPTER VI

INTERNAL CONTROL PLAN

The Internal Control Plan represents the systematic verifications carried out by the organizations for the effective implementation of the Expero4care Standard with the purpose of controlling compliance with each quality characteristic.

The Internal Control Plan presents the following attributes:

- It provides objective results from the point of view of the training quality parameters.
- It is a fundamental element to improve the quality of healthcare training as well as to optimize its resources.
- It has implicit in the commitment of the healthcare training to analyse the recommendations towards an improvement of the training quality.
- It supports the identification of problems to solve or avoid and the reasons that have or may not have caused them.

The Internal Control Plan consists of an annual verification of the certified quality characteristics which will be carried out by internal audit experts.

The records listed in the summary (Chapter. IV section 2) will be checked along with others which might be specified in the quality characteristics of this Standard (Chapter IV).

With the obtained results from the stakeholders' surveys, failure to comply with the quality characteristics will be checked and corrective actions will be implemented, if necessary.

Once a year, improvement actions will be proposed taking into consideration the verifications carried out, the evolution of the indicators and surveys to stakeholders.