QUALITY ASSURANCE POLICY AND ASSOCIATED PROCEDURES

PURPOSE OF THE POLICY

This policy and associated procedures outline AICC's approach to ensuring that all aspects of its operations are quality assured.

This policy and associated procedures meet the requirements of Standard 2 and associated clauses of the Standards for RTOs 2015.

POLICY STATEMENTS

QUALITY APPROACH

Quality forms part of AICC's commitment to students and all services provided are delivered to the highest possible standards.

Training, teaching assessment and support services are regularly reviewed and measured for quality and effectiveness.

Students and staff are encouraged to provide feedback on how to improve service delivery.

AICC is committed to innovation, high quality, continuous improvement, contemporary best practice and effectiveness in its provision of services.

PROCEDURES

1. SURVEYING OF STAKEHOLDERS

1.1 Provide Learner Surveys to students before they complete their course.

1.2 Identify the need for additional surveys of students and develop as required.

1.3 Provide Employer Satisfaction Surveys to employers prior to students they employ completing their course as relevant.

1.4 Analyse the findings of all quality indicators surveys/other surveys. The analysis should include a review of responses from strongly disagree to strongly agree to identify any areas where disagree or strongly disagree was a common response. These areas should be investigated further, for example by interviewing students and staff, and improvements identified.

1.5 Document findings on the Continuous Improvement Register and identify required actions and associated responsibilities and timelines.

1.6 Communicate findings and required actions, responsibilities and timelines to relevant stakeholders.

1.7 Monitor completion of actions and document outcomes on the Continuous Improvement Register.

1.8 Complete quality indicator annual summary report for calendar year and submit to ASQA by 30 June each year.

2. SURVEYING OF TRAINERS AND ASSESSORS

2.1 Develop a survey for trainers and assessors.

2.2 Provide surveys to trainers and assessors annually or at the end of a delivery period.

2.3 Analyse the findings of trainer and assessor survey and identify any improvements required.

2.4 Document findings on the Continuous Improvement Register and identify required actions and associated responsibilities and timelines.

2.5 Communicate findings and required actions, responsibilities and timelines to relevant stakeholders.

2.6 Monitor completion of actions and document outcomes on the Continuous Improvement Register.

3. TRAINING AND ASSESSMENT STRATEGY REVIEW

3.1 Review TAS annually or as required using the Training and Assessment Strategy Quality Review tool.

3.2 Document findings on the continuous improvement register and identify required actions and associated responsibilities and timelines.

3.3 Communicate findings and required actions, responsibilities and timelines to relevant stakeholders.

3.4 Monitor completion of actions and document outcomes on the Continuous Improvement Register.

4. VALIDATION OUTCOMES

4.1 Conduct validation as outlined in the Training and Assessment Policy and Associated Procedures.

4.2 Document findings on the Continuous Improvement Register and identify required actions and associated responsibilities and timelines.

4.3 Communicate findings and required actions, responsibilities and timelines to relevant stakeholders.

4.4 Monitor completion of actions and document outcomes on the Continuous Improvement Register.

5. COMPLAINTS AND APPEALS

5.1 Manage complaints and appeals as outlined in the Complaints and Appeals Policy and Associated Procedures.

5.2 Document overall findings on the Continuous Improvement Register and identify required actions and associated responsibilities and timelines.

5.3 Communicate findings and required actions, responsibilities and timelines to relevant stakeholders.

5.4 Monitor completion of actions and document outcomes on the Continuous Improvement Register.

6. COMPLIANCE SCHEDULE

6.1 Develop a compliance schedule to ensure that each aspect of AICC's operations is audited and reviewed.

6.2 Organise an external consultant at least annually to complete an internal audit.

6.3 Document findings on the Continuous Improvement Register and identify required actions and associated responsibilities and timelines.

6.4 Communicate findings and required actions, responsibilities and timelines to relevant stakeholders.

6.5 Monitor completion of actions and document outcomes on the Continuous Improvement Register.

RESPONSIBILITIES

The CEO and RTO Manager are collectively responsible for all aspects of quality assurance as outlined in this policy and associated procedures.

Document Control

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