



CONTINUOUS IMPROVEMENT POLICY

Organisational Area

Registered Training Organisation

Authorisation

This policy was reviewed and adopted by the Manager at North Ringwood Community House Incorporated on 24th January 2019.

Review Date

This policy will be reviewed every three years or sooner if required.

Scope

This policy is for all staff who are engaged in delivery, assessment and management of accredited training.

Objective

The North Ringwood Community House Inc. shall through continuous improvement be an effective and efficient quality Registered Training Organisation.

Policy

The North Ringwood Community House Inc. is committed to continuously reviewing its systems and processes to improve practices and outcomes for students, retain RTO registration and receive government funding.

Core to that commitment is a requirement to be compliant with the Australian Quality Standards Framework (AQTF) 2010 and the Victorian Registration and Qualifications Authority (VRQA) Guidelines for VET Providers (2016) and meet contractual obligations of funding and service agreements with governments.

Implementation

Annual internal self-assessment and reviews will be a cornerstone of the North Ringwood Community House Inc operation as a RTO. More frequent internal self-assessment and reviews shall be initiated if investigations justify that need or regulatory and compliance obligations require.

Annual internal self-assessment will be implemented to:

1. Identify opportunities for improvement
2. Implement these improvements
3. Ensure compliance standards are maintained
4. Ensure new compliance standards are acted upon



Policy

Annual internal self-assessment and reviews include

1. Internal assessment against the AQTf and VRQA Guidelines
2. Internal audit of compliance with the *Skills First* VET Funding Contract
3. National Quality Indicators reports
4. Industry and employer surveys initiated by NRCH
5. Student Satisfaction surveys initiated by NRCH
6. Validation activities
7. Financial viability

These assessments shall be led by the Manager, and managed by the Accredited Training Coordinator, who shall:

- Develop a Continuous Improvement Plan
- Record the initiatives on the Continuous Improvement Register
- Implement and monitor the completion of the initiatives identified.

Within scope of every self-assessment shall be an assessment of whether the related policy and procedures, and supporting documentation, require modification to improve outcomes. Any new or major policy changes will be ratified by the Committee of Governance. Changes to operational and administrative procedures will be approved by the Manager.

The Manager, as the RTO Principal Executive Officer, shall be accountable for reporting to the Committee of Governance. Other staff and trainers may be involved in activities where necessary. Financial viability issues shall require engagement of the Finance Officer.

In addition, the continuous improvement processes shall be supported by regular and structured communication between the Manager, staff, trainers and local employers.

At a minimum the following initiatives are established:

1. Regular NRCH team meetings (4-6 weekly intervals) to include RTO regulatory and compliance matters where the meeting outcomes and agreed actions shall be documented. This shall be supported by a plan to progressively address regulatory and compliance matters within a risk management framework
2. Regular meetings between the Accredited Training Coordinator and Trainers to include RTO regulatory and compliance matters as well as student needs and emerging issues
3. Informal ad hoc meetings between the Manager, staff and trainers as required
4. Trainers' attendance at employers' work sites for assessment of students shall be supplemented by gathering of feedback on employers' training needs, the convergence of students' skills and that need, and emerging issues
5. Compliments and Complaints register and Complaints Appeals process

Related Documents

Assessment Validation Policy
Complaints Policy

Document Locations

Website
Electronic file folders accessible by NRCH Administration staff

Related Legislation

Australian Quality Standards Framework (AQTf) 2010
Victorian Registration and Qualifications Authority (VRQA) Guidelines for VET Providers (2016)



Area of Compliance

AQTF 1.1, 2.2



Policy

Date reviewed	Version	Details of changes (if any)	Date of next review
October 2018	V2	Clarify breadth of annual internal self-assessments, record internal communication reporting and processes	Oct 2021
January 2019	V3	4-6 week regular staff meetings to replace Manager, Trainer and Staff Quarterly reporting	Jan 2022

Master document is the Electronic File.

This document is uncontrolled when printed.