

## AQTF Essential Conditions and Standards for Continuing Registration & VRQA Guidelines for VET Providers - Audit Report

**Audit Date: 4/5 December 2014**

**Applicant: 4181 Community College Gippsland**

| Applicant Details  |  |                              |   |
|--|--|------------------------------|---|
| Applicant Name   | Community College Gippsland                                  | TOID                         | 4181  |
| Address  | CCG McMillan, 71 Warragul-Korumburra Road, Warragul VIC 3820 |                              |   |
|  |  | Website                      | www.ccg.asn.au  |
| Registration Contact   | Mrs Sue Geals, CEO   |                              |   |
| Phone Number   | 03 5175 0866   | Email                        | sueg@ccg.asn.au   |
| Audit Team   |  |                              |   |
| Audit Firm   | Moore Stephens   | Auditor/s                    | John Molenaar<br>Cheryl Richards  |
| Auditor/s  |  | Other Attendees              | Sue Geals, CEO<br>Kirsten Theile, Director of Quality and Services<br>Tracey Devereaux, Director of Learning Services |
| Registering Body Details   |  |                              |   |
| Contact Person   | Emma Hickingbotham   |                              |   |
| Phone Number   | 9032 1562  | Email                        | vet.audit@edumail.vic.gov.au  |
| Audit Details  |  |                              |   |
| Type of Audit  | <b>Re-registration Audit</b>                                 |                              |   |
| Conditions Audited   | 1, 2, 3, 6, 7, 8, 9  |                              |   |
| Standards Audited  | 1.1, 1.2, 1.3, 1.4, 1.5                                      | 2.1, 2.2, 2.3, 2.4, 2.6, 2.7 | 3.1, 3.2, 3.4   |
| VRQA Guidelines Audited  | 1, 2, 4, 5   |                              |   |
| Audit Date/s   | 4 & 5 December 2014  |                              |   |
| RTO Background   |  |                              |   |
| <p>Community College Gippsland (CCG) has been an RTO providing accredited training to its community for the past 20 years and has a large scope of delivery in the areas of business, agriculture/horticulture, aged care, children's services, community services, racing, hair and beauty, retail, hospitality, warehousing and foundation skills.</p> <p>CCG also operates as a school delivering VCAL qualifications to approximately 50 students a year.</p> <p>Courses at the centre are funded through a number of sources including Victorian Training Guarantee, ACFE and fee-for-service activities.</p> <p>Enrolments for 2014 have included 1,945 students in accredited courses, 76 students in VCAL courses and 145 students in pre-accredited courses.</p> <p>CCG had not entered into any partnership arrangements for delivery of training on its behalf by other RTOs or organisations.</p> <p>The CCG is governed by a Board of Management and is managed by a management team including the CEO, Director of Quality and Services and Director of Learning Services. .</p> |  |                              |   |

Audit Date: 4/5 December 2014

| Qualifications/Units Audited <sup>1</sup>          |   |                    |
|--|---|--------------------|
| QUALIFICATION/UNIT OF COMPETENCE/ACCREDITED COURSE |   |                    |
| TGA Code   | Qualification/Unit of Competence/Accredited Course<br>(as per TGA)  | Delivery Site      |
| AHC50410   | Diploma of Horticulture   | McMillan, Warragul |
| BSB30112   | Certificate III in Business   | McMillan, Warragul |
| CHC30212   | Certificate III in Aged Care  | McMillan, Warragul |
| CHC30812   | Certificate III in Education Support                                | McMillan, Warragul |
| CHC50908   | Diploma of Children's Services (Early childhood education and care) | McMillan, Warragul |
| RGR30208   | Certificate III in Racing (Advanced Stablehand)                     | McMillan, Warragul |
| TAE40110   | Certificate IV in Training and Assessment                           | McMillan, Warragul |
| 22128VIC   | Certificate I in Work Education                                     | McMillan, Warragul |

| AQTF Conditions |  | Compliant | Non - Compliant | Not audited |
|-----------------|--|-----------|-----------------|-------------|
| 1               | Governance   | X         |                 |             |
| 2               | Interactions with the Registering Body                               | X         |                 |             |
| 3               | Compliance with Legislation  | X         |                 |             |
| 4               | Insurance  |           |                 | X           |
| 5               | Financial Management   |           |                 | X           |
| 6               | Certification & Issuing of Qualifications & Statements of Attainment |           | X               |             |
| 7               | Recognition of Qualifications Issued by other RTOs                   | X         |                 |             |
| 8               | Accuracy and Integrity of Marketing                                  |           | X               |             |
| 9               | Transition to Training Packages/Expiry of Accredited Courses         | X         |                 |             |

#### Summary of Non-Compliance

##### CF.6.1.1

CCG had issued testamurs in accordance with the requirements of the Training Package that met the Australian Qualifications Framework (AQF) TGA. The testamurs included the Nationally Recognised Training (NRT) logo in accordance with the current conditions of service. However it was noted that students were issued with Statements of Attainment for the required units for a full Certificate. Students were also issued with Statements of Attainment attributed to that did not identify the qualification that these contributed to.

##### CF.8.1.1

CCG had ensured that its marketing and advertising of AQF qualifications to prospective clients was ethical, accurate and consistent with its scope of registration, however the NRT logo had been inappropriately used in the 2014 Course Brochure and not in accordance with its conditions of use.

**Audit Summary - AQTF Standards**

| AQTF Standards/Elements                                 | Compliant | Non - Compliant | Not audited |
|---|-----------|-----------------|-------------|
| <b>Standard 1</b>                                       |           | <b>X</b>        |             |
| 1.1 – Continuous Improvement Strategy                   |           | X               |             |
| 1.2 – Training and Assessment Strategies                |           | X               |             |
| 1.3 – Training and Assessment Resources                 |           | X               |             |
| 1.4 – Trainer and Assessor Competency                   | X         |                 |             |
| 1.5 – Assessment Strategies                             |           | X               |             |
| <b>Standard 2</b>                                       |           | <b>X</b>        |             |
| 2.1 – Meeting the Needs of Clients                      | X         |                 |             |
| 2.2 – Continuous Improvement of Client Services         |           | X               |             |
| 2.3 – Provision of Information to Clients               |           | X               |             |
| 2.4 – Third-Party Engagement in Training and Assessment |           | X               |             |
| 2.5 – Provision of Support Services to Clients          |           | X               |             |
| 2.6 – Learner Access to Records of Participation        |           | X               |             |
| 2.7 – Complaints and Appeals Strategy                   |           | X               |             |
| <b>Standard 3</b>                                       |           | <b>X</b>        |             |
| 3.1 – Operations Management                             |           | X               |             |
| 3.2 – Continuous Improvement of Operations              |           | X               |             |
| 3.3 – Third-Party Training and/ or Assessment Services  |           |                 | X           |
| 3.4 – Records Management                                | X         |                 |             |
| <b>Summary of Non-Compliance</b>                        |           |                 |             |

**SF.1.1.1**

CCG had not implemented a systematic approach to the collection of data to support continuous improvement of training and assessment.

**SF.1.2.1**

In the suite of documents that made up the learning and assessment strategies for the qualifications sampled at audit, the following items were non-compliant:

**SF.1.3.1**

There was no evidence of a process that ensured the training and assessment resources, equipment and facilities were available for the training programs conducted in workplaces. Where required, the RTO must have agreements in place with providers of equipment and facilities to ensure these are readily available for students to successfully complete their courses.

**SF.1.4.1**

Evidence that trainers/assessors continue to develop their Vocational Education and Training (VET) knowledge and skills as well as their industry currency and trainer/assessor competence was not maintained of trainer/assessor files or provided at audit.

**SF.1.5.1**

The summary of the findings across qualifications regarding the assessment documentation and tools was as follows

## AQTF Essential Conditions and Standards for Initial Registration & VRQA Guidelines for VET Providers - Audit Report

**Audit Date: 4/5 December 2014**

**Applicant: 4181 Community College Gippsland**

- The documentation describing assessments consisted of a Course Delivery Plan (CDP), Unit Delivery Plan (UDP), Assessor Guide (AG) and a Student Assessment Guide (SAG). In a number of cases this documentation did not have consistent assessment information. This being the case it was unclear if the assessment processes consistently met the unit requirements.
- The benchmark answers available were not in sufficient detail to show that they met the assessment tool requirement or the unit of competency requirements. For observation tools there were no details on what was to be observed within the assessment that could be deemed satisfactory.
- Alignments of performance criteria and skills and knowledge were available for all qualifications however sampling the actual assessment tools from these alignments indicated they were inaccurate or did not meet the unit requirements.
- In some cases the mappings sighted of the assessments had a tick, so the mapping was not specific to any of the assessment tools
- The assessment tools were considered not valid, reliable, flexible and fair:

### **SF.2.2.1**

CCG had not identified or implemented a strategy for the continuous improvement of client services by collecting, analysing and acting upon relevant data.

### **SF.2.3.1**

CCG had not provided sufficient information, before clients enrolled or entered into an agreement, about the training, assessment and support services to be provided and about their rights and obligations. Course durations were not clearly or accurately identified.

### **SF.2.4.1**

A systematic approach to engaging employers in the development, delivery and monitoring of training and assessment had not been implemented.

### **SF.2.6.1**

CCG had not developed and implemented procedures to ensure that learners had timely access to current and accurate records of their participation and progress.

### **SF.2.7.1**

The complaints and appeals procedures did not include procedures for students to have complaints resolved through an informal process or to appeal a complaints decision. The source for an independent external mediator was not identified.

### **SF.3.1.1**

CCG had implemented Novacore as the source of policies and procedures as part of its Quality Management System. Non-compliances identified at the re-registration audit confirmed that the Quality Management System had not been effectively implemented to ensure that clients received the services detailed in their agreement with CCG.

### **SF.3.2.1**

Non-compliances identified at re-registration audit confirmed that CCG had not implemented a systematic and continuous improvement approach to the management of operations.

**Audit Summary – VRQA Guidelines for VET Providers**

| VRQA Guidelines  | Compliant | Non - Compliant | Not audited |
|--|-----------|-----------------|-------------|
| <b>1. Governance, Probity and Compliance</b>                 | <b>X</b>  |                 |             |
| 1.1 – Strategic Plan and Business Plan                       |           |                 | X           |
| 1.2 – Financial Viability                                    |           |                 | X           |
| 1.3 – Management Systems                                     | X         |                 |             |
| 1.4 – Organisational Governance                              |           |                 | X           |
| 1.5 – Academic/Educational Governance                        | X         |                 |             |
| 1.6 – Change Reporting                                       |           |                 | X           |
| <b>2. Quality Assurance, Review and Evaluation Processes</b> |           | <b>X</b>        |             |
| 2.1 – Course Quality   |           | X               |             |
| 2.2 – Cheating and Plagiarism                                |           | X               |             |
| 2.3 – Quality Education and Training                         | X         |                 |             |
| <b>3. Student Enrolment Records and Certification</b>        | <b>X</b>  |                 |             |
| 3.4 – Provision of Courses to Domestic Students              | X         |                 |             |
| <b>4. Student Learning Outcomes and Welfare Services</b>     |           | <b>X</b>        |             |
| 4.1 – Maximum Daily Hours of Attendance                      | X         |                 |             |
| 4.2 – Out of Hours Attendance                                | X         |                 |             |
| 4.4 – Student Safety   |           | X               |             |
| <b>5. Teaching, Learning and Assessment</b>                  |           | <b>X</b>        |             |
| 5.1 – Capacity to Deliver Scope of Registration              |           | X               |             |

**Summary of Non-Compliance**

**GF.2.1.1**

CCG had demonstrated that it was able to monitor course quality, externally moderate student performance and drive continuous improvement in course delivery. The Re-registration Audit had identified that this had not been effectively implemented for the Children's Services qualifications.

**GF.2.2.1**

CCG had not demonstrated that it had effective measures in place to prevent and detect cheating and plagiarism amongst its students and to deal appropriately with any instances of these practices. Procedures did not identify minimisation and detection strategies. Consequences of plagiarism were not identified.

**GF.4.4.1**

CCG had not identified the measures they intended to take to address matters of student safety for students attending classes in the evening.

**GF.5.1.1**

Assessment materials included a matrix that aligned the unit content with the assessment tasks, however these were inadequate to ensure that assessments covered all unit requirements. (See Standard 1.5).

Industry involvement in the development of learning and assessment approaches was not adequate to inform the development of learning and assessment arrangements.  
See Standard 1.2 and 2.4).

### CCG Actions and Evidence

**CF.8.1.1 CCG Action:** CCG revised the Marketing Policy and Procedure in February 2014 to ensure the correct use of all logos is adhered to. CCG has also implemented a Marketing registers where all advertising and marketing materials are documented for quality control and approval for management purposes. CCG removed all NRT logo's from all marketing materials in February 2014 after the initial course guide brochure was developed and has not used the logo in any materials from that time on. **Rectified Yes Compliant Yes**

**SF.1.1.1 CCG Action:** CCG has developed an organisational CI Schedule that will encompass gathering Stakeholder feedback and actioning the outcomes. The CI Schedule is currently being populated with data and is a work in progress. All staff have access to the CI Schedule and key management staff will be involved in the continual development process. The Continuous Improvement policy and procedure has been updated to reflect the improvements and uploaded onto Sharepoint, CCG's intranet. The policies will also be uploaded into CCG's online induction and training portal (OTIS), All staff are informed of the updated policy and procedures and required to read each document. CCG will implement new internal and external feedback surveys on services offered to students and stakeholders separate to the QI feedback data. The data collected will be reviewed, analysed and actioned accordingly the regular key staff meetings. Actions from the feedback will be documented and implemented then reviewed by semester to gauge the effectiveness of changes where required. **Rectified Yes Compliant Yes**

**SF.1.2.1 CCG Action:** CCG has implemented new strategies to assist in improving and maintaining CCG's Training and Assessment documentation. CCG has selected a small group of experienced trainers/assessors and curriculum writers who will now form a curriculum QA team. The team will be responsible for monitoring all Training and Assessment documentation and validation/moderation processes in CCG for all courses on the scope of registration. The curriculum team will receive extensive internal and external professional development to remain current with AQTF, AQF, VRQA, STO Standards and HESG requirements. CCG has implemented 3 new E&T documents to assist in ensuring stringent QA measures are in place so all documentation remains consistent incorporating Industry Consultation (refer to CCG Action for SF.2.4..1 finding) CCG new documents: 1. An E&T QA checklist, 2. a Student Learner Guide, 3. a resource checklist for each qualification. E&T QA checklist provides a clear mapping guide against the each document in the E&T suite of documents starting with the LAS. The E&T documents for each course will be mapped against the E&T QA checklist by the QA team and signed off on completion by the Director of Quality and Services. The student learner guide is developed for each unit and provides the learner with a detailed guide of activities to work through in their own time in between CCG trainer visits. **Rectified Yes Compliant Yes**

**SF.1.3.1 CCG Action:** CCG has developed a Resource checklist for each unit of competence for each qualification that is delivered in a workplace environment. The checklist will be provided to the workplace upon enrolment with the student, employer and CCG representative to work through the checklist and determine what resources are available and what strategies will be implemented if the resources are not available. The Student Enrolment Fees and Refunds policy and procedures are being updated to reflect the inclusion of the new checklist. **Rectified Yes Compliant Yes**

**SF.1.4.1 CCG Action:** CCG is updating the current Workforce Development Plan to develop a specific Trainer/Assessor Professional development schedule that analyses each staff members industry currency, skills and knowledge and identifies areas for continual improvement. The IBSA Vet Practitioner Capability Framework Guide will be implemented by the Senior Management team and Program Leaders to provide a VET specific tool to analyse each staff members current skill set and identify areas of improvement where required. From the individual data obtained CCG will develop an individual schedule of Professional Development requirements for each staff member for the year. The Employee Qualification Matrix template has been updated to ensure that all Trainers and Assessors can clearly identify the Professional Development activities specific to maintaining currency in industry skills and knowledge. **Rectified Yes Compliant Yes**

**SF.1.5.1 CCG Action:** CCG has implemented new strategies to assist in improving and maintaining CCG's Training and Assessment documentation. CCG has selected a small group of experienced trainers/assessors and curriculum writers who will now form a curriculum QA team. The team will be responsible for monitoring all Training and Assessment documentation and validation/moderation processes in CCG for all courses on the scope of registration. The curriculum team will receive extensive internal and external professional development to remain current with AQTF, AQF, VRQA, STO Standards and HESG requirements focusing extensively on Validation of all assessment tools and processes. The Validation Tool Template is currently under revision to provide a stronger tool for the team to use to assist in addressing the non compliances highlighted. The team will be supported by new documents that will assist in ensuring stringent QA measures are in place so all documentation will map correctly. The QA team will focus specifically on the areas of non compliance listed under SF.1.5.5 are corrected and ensuring AQF levels are appropriate. The Director of Quality and Services will oversee QA Team and the processes.

\* CCG does have RPL documents for all qualifications. The auditor did not request to see any RPL documents. Each RPL document can be over 200 pages in length depending on the amount of units in the course so the full qualification can be emailed in as evidence of printed if required. **Rectified Yes Compliant Yes**

**SF.2.2.1 CCG Action:** CCG has revised the Continuous Improvement Policy/Procedure and processes to provide internal and external stakeholders with the opportunity to provide feedback on client services utilising an online survey. The data collected will be analysed, reviewed and actioned accordingly as per the Continuous Improvement Schedule, Register and Policies. **Rectified Yes Compliant Yes**

**SF.2.3.1 CCG Action:** CCG provides all prospective students with a course information form developed for each individual course that provides general information about the course outline and delivery. Prospective students are also provided with an Accredited Course Enrolment Information form that provides the student with specific information that supports the course information sheet. Every student is interviewed before they are enrolled and all aspects of the course is discussed with the student. CCG's strategy for ensuring all course information sheets are consistent and contain the course duration in weeks is listed correctly is the course information sheet template has been updated and all course information sheets are developed by the Executive Assistant with information provided by the Program Leaders. Every course information sheet will be checked against the Training and Assessment Quality Assurance Checklist and reviewed and finalised by the Director of Quality and Services before being uploaded onto the intranet for distribution and publication. CCG provides every student with access to the Student Handbook that clearly outlines students rights and obligations before enrolment. The Student Handbook is available on the Website and available in hardcopy. **Rectified Yes Compliant Yes**

**SF.2.4.1 CCG Action:** The Course Consultation Policy underwent review and was updated in November 2014. The Industry Consultation form was developed and implemented for courses to be provided in 2015. The Program Leaders utilise the Industry Course Consultation Form against the Training and Assessment Strategies and Course Delivery plans when consulting with industry for the delivery of training. Feedback gathered from the consultations are brought to the Senior Management Meetings and changes approved if required and implemented into the revised training and assessment documentation. **Rectified Yes Compliant Yes**

**SF.2.5.1 CCG Action:** CCG has developed a Student Learner Guide for each unit of competence that provides the learner with a detailed plan of learning activities to follow outside the trainer visiting times. The learner is supported by the trainer via phone or email during visits if required. **Rectified Yes Compliant Yes**

**SF.2.7.1 CCG Action:** CCG has reviewed and revised the Complaints and Appeals Policy and Procedures, the Student Handbook and Trainer Handbook to provide more detailed information to staff and students on complaints and appeals in a formal and informal process and the mediation processes if required. CCG has a Complaints Register that is utilised when required outlining whether the complaint is formal or informal. The Complaints Register that was developed in 2006 and is monitored and maintained by key management staff. **Rectified Yes Compliant Yes**

**SF.3.1.1 CCG Action:** CCG is currently developing a Quality Management Systems Manual that will provide a detailed guide on all CCG's quality processes across the operational areas and systems used to manage the processes. The manual is still in development but will be completed and provided to all CCG Staff by February 2015. The Policy itself will be revised as new areas of improvement are identified. **Rectified Yes Compliant Yes**



**SF.3.2.1 CCG Action:** CCG has developed a Continuous Improvement Schedule that provides the operational schedule for the completion of continuous improvement processes within the organisation. The CI Schedule is currently being populated by the Senior Management Team and is a live document. The CI Schedule is monitored and reviewed fortnightly at the Senior Management Team/ Program Leader meeting and actions identified will be implemented as required. Findings from activities listed in the CI Schedule will be entered into the Continuous Improvement Register for continued monitoring by all staff. **Rectified Yes Compliant Yes**

**GF.2.1.1 CCG Action:** CCG has a network of external organisations and RTO's who engage in moderation in with CCG in specific program delivery areas. The CI Schedule will outline the moderation timeframes and Curriculum Team will implement validation and moderation procedures across all areas of delivery. Outcomes from the moderation processes will be documented and the Academic Committee with address any improvements as required. **Rectified Yes Compliant Yes**

**GF.2.2.1 CCG Action:** CCG has revised the Plagiarism Policy and Procedure, Student Handbook and Trainers Handbook to address the non-compliances identified. The Online Induction training centre will be updated to include an E-learning unit on Plagiarism. The internal Trainer/ Assessor staff training day will include a PD session on Plagiarism to assist trainers/assessors in detecting and managing Plagiarism. **Rectified Yes Compliant Yes**

**GF.5.1.1**  
See Standard 1.2 and 2.4). See CCG Actions for 1.2 and 2.4 **Rectified Yes Compliant Yes**