

Quality Self-Assurance Review Summary



Chisholm Institute

RTO number: 0260
CRICOS number: 00881F
Date finalised: 17 June 2022



Australian Government
Australian Skills Quality Authority

ASQA

(Working together)

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Provider Details

| | |
|--------------------------------|--|
| Provider's legal name: | Chisholm Institute |
| Trading name: | CHISHOLM INSTITUTE OF TAFE CHISHOLM INSTITUTE |
| RTO number: | 0260 |
| CRICOS number: | 00881F |
| Provider's contact details: | Mr Stephen Varty Chief Executive Officer +61 3 9212 5331 0417 007 388 Stephen.varty@chisholm.edu.au |
| Nominated Contact of Provider: | <u>For formal response</u> Mr Stephen Varty (as above) <u>For operational questions concerning the upload, submission questions or clarifications</u> Dianne Hoskins Manager Academic Quality +61 3 9212 5246 0447 993 172 dianne.hoskins@chisholm.edu.au |
| Registration VET expiry date: | 29 October 2022 |
| Renewal Applications received: | RENCRI0001077 RENVET0005486 |
| Self-Assurance Review ID: | AUDREC0011678 |

Quality Self-Assurance Review Team

| | |
|----------------------------------|-----------------|
| Lead Quality Assessment Officer: | Monica McFayden |
| Assessment Officer: | Paige O'Riley |

Quality Self-Assurance Review Background

The Australian Skills Quality Authority (ASQA) is committed to best practice regulation – that is we take a risk-based approach to regulation focused on delivering quality outcomes, while minimising the regulatory burden on regulated entities wherever possible. ASQA recognises the valuable opportunity to engage with providers prior to their renewal of registration falling due. This early engagement, described as a Quality Self-Assurance Review, is intended to focus on the systems and controls providers have in place to self-identify and treat any risks relating to the delivery of quality student outcomes. The review supports a more streamlined, efficient and effective decision-making process for renewal of registration applications for both ASQA and providers, once received.

In July 2021 ASQA, in consultation with the Victorian TAFE Association, conducted a presentation to the 16 Victorian TAFE's Chief Executive Officers outlining ASQA's intent to conduct a Quality Self-Assurance Review on the providers' systems and practices. The scope of the review is underpinned by self-assurance Clauses 2.2, 6.5, 7.1 and 8.6 of the *Standards for Registered Training Organisations 2015* (Standards for RTOs).

ASQA sent each provider a formal request to conduct a self-assessment and submit a two-to-three-page response to four key operational areas which primarily focussed on quality student outcomes, self-assurance and continuous improvement. The four key questions were as follows:

- How has the provider embedded self-assurance practices and continuous improvement into its operating model? (Clauses 2.2 & 6.5)
- What systems does the provider have in place to ensure the provider's business objectives and risk management strategies align with RTO Standards? (Clauses 2.2 & 8.6)
- What process does the provider use for internally reporting any identified non-compliances, and how does the executive management and corporate board engage in the resolution process? (Clauses 2.2, 7.1 & 8.6)
- How does the provider determine when it is necessary to inform staff and clients of any changes to legislative and regulatory requirements that affect service delivery? (Clause 8.6)

In conducting the review, ASQA has taken into account provider responses to each of the key four questions, provider compliance history, as well as other information, including compliance reports provided by other regulatory bodies i.e. the Department of Education and the Training Victoria (DET Vic) and Tertiary Education Quality and Standards Agency (TEQSA).

ASQA also requested unique evidence relevant to each provider's operations, specifically relating to evidence of risks management.

This Quality Self-Assurance Review summary outlines the findings below and sets out ASQA's views, based on a risk assessment, on whether to approve the renewal of registration application, or if further engagement with the provider (such as a performance assessment) is necessary for ASQA to be satisfied that the requirements of registration continue to be met. The summary also makes recommendations on how providers can further strengthen their self-assurance practices.

Quality Self-Assurance Review Outcome Summary

This summary details findings and identifies any risks with the provider's self-assurance systems and controls in line with the *Standards for Registered Training Organisations (RTOs) 2015* (Standards for RTOs) and the *National Code of Practice for Providers of Education and Training to Overseas Students 2018* (National Code).

Based on the findings of this review, ASQA has confidence that you have suitable self-assurance systems and practices for delivering quality training and assessment in line with the requirements under the legislation and therefore, we do not need to conduct a further review and will grant your renewal of registration on receiving the application.

Quality Self-Assurance Risks Outcome levels of the provider

The provider's overall self-assurance systems and controls risk level is Low.

| Standards for RTOs | Risk level |
|---|------------|
| Clause 2.2 The RTO: a) systematically monitors the RTO's training and assessment strategies and practices to ensure ongoing compliance with Standard 1; and b) systematically evaluates and uses the outcomes of the evaluations to continually improve the RTO's training and assessment strategies and practices. Evaluation information includes but is not limited to quality/performance indicator data collected under Clause 7.5, validation outcomes, client, trainer and assessor feedback and complaints and appeals. | Low |
| Clause 6.5 The RTO: a) securely maintains records of all complaints and appeals and their outcomes; and b) identifies potential causes of complaints and appeals and takes appropriate corrective action to eliminate or mitigate the likelihood of reoccurrence. | Low |
| Clause 7.1 The RTO ensures that its executive officers or high managerial agent: a) are vested with sufficient authority to ensure the RTO complies with the RTO Standards at all times; and b) meet each of the relevant criteria specified in the Fit and Proper Person Requirements in Schedule 3. | Low |
| Clause 8.6 The RTO ensures its staff and clients are informed of any changes to legislative and regulatory requirements that affect the services delivered. | Low |

Self-Assurance Evidence Reviewed

2021-11-30 Chisholm - Self-Assessment Information

Question 1 Risk Management Framework

- Attachment 1.1 Overview of Chisholm Risk Management Framework and Governance Framework
- Attachment 1.1.1 Strategic Risk Profile – Education Quality & Governance – Strategic Risk 9

Example 1- Marketing Quality Review

- Attachment 1.2.1 Quality Review Report – Marketing
- Attachment 1.2.2 AUR20220 Marketing Checklist
- Attachment 1.2.3 Extract of Continuous Improvement Register
- Attachment 1.2.4 List of actions taken by marketing department
- Attachment 1.2.5 List of Audit requirements actions and tasks checked AQ confirming work completed.
- Attachment 1.2.6 Example of course page with NRT logo and AQF information in the footer (Dip Nursing)

Example 2 – CRICOS Quality Review

- Attachment 1.3.1 CRICOS Quality Review Report 2022 • Attachment 1.3.2 Agents performance review
- Attachment 1.3.3 Copy of Agent list with email
- Attachment 1.3.4 CRICOS Re Reg Action Plan
- Attachment 1.3.5 Agent Review notification 2022

Question 2 Self Assurance Process Application From Frameworks PART 1

Question 2 Self Assurance Process Application From Frameworks PART 2

Question 2 Self Assurance Process Application From Frameworks PART 3

Question 2 Self Assurance Process Application From Frameworks PART 4

- 2.1 Overview of Chisholm Quality Improvement Program
- 2.1a Teacher requirements QIP
- 2.2 FY21 Chisholm Internal Audit Student Experience Plan Review Report
- 2.2a Chisholm Institute 2022 Internal Audit Schedule
- 2.3 Extract from Student Survey Data for Diploma of Nursing
- 2.4 Extract from Student Survey Data for Certificate IV in Cyber Security
- 2.5 Complaint XXX
- 2.5a Root Cause Analysis – XXX complaint
- 2.6 QIP Priority Course list
- 2.7 2021 TAP Risk Analysis Main Tabs
- 2.8 Focus Plan 2022
- 2.9a - 2.9i Flyers for PEC PD programs sample
- 2.10a RPL for Education Managers workshop powerpoint – Focus Plan PD Feb 22
- 2.10b Navigating the world of RPL for Education Managers and Managers PowerPoint – Focus Plan PD Feb 22
- 2.11 Training program planning for teachers – Focus Plan PD March 22
- 2.12 PEC Programs by month 2022 to date
- 2.12a PEC Programs by month 2021
- 2.13 PEC Overview including Teacher Essentials Kit
- 2.14 PEC Overview 2015-2020 Final
- 2.15 PEC Framework for professional currency points 2021
- 2.16 PEC External Professional currency points allocation

Question 2A Self Assurance Process Application from Frameworks
Question 2B Self Assurance Process Application from Frameworks

- 2021 TAP Risk Analysis
- 2021 QIP Priority Courses
- HLT54115 Risk Analysis
- 22334VIC Risk Analysis
- HLT54115 QIP Action Plan
- 22334VIC QIP Action Plan
- HLT54115 QIP Planner Reports x 2
- 22334VIC QIP Planner Reports x 2
- HLT54115 QIP Monthly Meeting notes x 2
- 22334VIC QIP Monthly Meeting notes x 2
- Teacher Requirements QIP Business Process
- HLT54115_2021_VCM_J_M
- HLT54115_2021_VCM_M_
- 22334VIC_2021_VCM_Mc_P
- 22334VIC_2021_VCM_O_An
- HLT54115_M J PEC Points 2021
- HLT54115_S M Cherian PEC Points 2021
- 22334VIC_P McK PEC Points 2021
- 22334VIC_A O PEC Points 2021
- HLT54115_PD_Plan_J_M
- 22334VIC_PD_Plan_H_T
- HLTENN006 FAB4 Documents
- HLTENN006 Review Document
- HLTENN010 FAB4 Documents
- HLTENN010 Review Document
- ICTICT418 FAB4 Document
- ICTICT418 Review Document
- ICTNWK509_VU21991 FAB4 Documents
- ICTNWK509_VU21991 Review Document
- HLT54115 2021 TAS
- HLT54115 2021 TAS Review
- HLT54115 2022 TAS
- 22334VIC_TAS_2021
- 22334VIC 2021_TAS_Review Checklist
- 22334VIC_TAS_2022
- 22334VIC x 2 samples industry engagement
- HLT54115 x 2 samples. Course Advisory Committee Meetings

Question 3 Self Assurance reports

- Attachment 3.1 Three Year Cyclical Quality Review schedule 2021
- Attachment 3.2 Three Year Cyclical Quality Review schedule 2022
- Attachment 3.3 2021 Focus Plan v2
- Attachment 3.4 Focus Plan 2022 v1
- Attachment 3.5 2022 Focus Plan draft topics for training and review
- Attachment 3.6 AQ internal review report Marketing
- Attachment 3.7 Student Grievances and Complaints Review Report

- Attachment 3.8 AUR20220 Marketing audit checklist sample
- Attachment 3.9 2022 Self Assessment Report for CEO Declaration
- Attachment 3.10 2021 Self Assessment Report for CEO Declaration
- Attachment 3.11 Agreement Management Action Plan DET
- Attachment 3.12 2022 TAS 22334VIC BA47 FT Checklist (sample TAS checklist)

Question 4 Validation Register

- Attachment 4.1 QMS118_07 2021 - 2025 SOR Validation Schedule

Question 5 Post Validation

- 5.1 2021 SOR Validation Schedule Testing QCC Report
- 5.2 2021 SOR Validation Schedule Testing Report_CHC50113
- 5.3 CHC50113 CI Register
- 5.4a CHC50113_CHCLEG001_CHCPRT001_LAG
- 5.4b CHC50113_CHCLEG001_UM
- 5.4c CHC50113_CHCPRT001_UM
- 5.4d CHC50113_CHCLEG001_CHCPRT001_ASR
- 5.4e CHC50113_CHCLEG001_CHCPRT001_AG
- 5.5 2021 SOR Validation Schedule Testing Report_SHB50115
- 5.6 SHB50115_SHBBFAS002_2021 CI Register
- 5.7a SHB50115_SHBBFAS002_FT_LAG
- 5.7b SHB50115_SHBSHBBFAS002_FT_UM
- 5.7c SHB50115_SHBBFAS002_FT_ASR
- 5.7d SHB50115_SHBBFAS002_FT_AG
- 5.8a 22334VIC_ Validation Report ICTICT418_June 2021
- 5.8b 22334VIC ICTICT418_Student Sample
- 5.9a HLT54115_PD Validation Report_HLTENN006
- 5.9b HLT54115_HLTENN006_Student Sample

Question 6 Continuous Improvement Register

- Attachment 6.1_Institute_CI Register_2021
- Attachment 6.2_22334VIC_CI Register_2021
- Attachment 6.3_HLT54115_CI Register_2021

Question 7 Two Improvements applied within six months PART 1

Question 7 Two Improvements applied within six months PART 2

- Attachment 7.1 Overview of Chisholm Education Quality Framework (EQF)
- Attachment 7.1 Overview of Chisholm Education Quality Framework (EQF) (powerpoint)
- Attachment 7.1.1 Chisholm Education Quality Framework
- Attachment 7.1.2 Chisholm Process Charts
- Attachment 7.1.3 Chisholm RASCIQ Accountability Matrix
- Attachment 7.1.4 EQF Communication Plan
- Attachment 7.1.5 EQF Change Plan
- Attachment 7.1.6 EQF Presentation to all staff July 2021
- Attachment 7.1.7 VEAB report – VET EQF report October 2021
- Attachment 7.1.8 VEAB Report – VET Quality Assurance Systems and Processes February 2022
- 7.2.1 Chisholm Practical Placement Funding Proposal_17-06-2020 (extract from)
- 7.2.2a. TAFE-Victoria_InPlace_Fact-sheet_Dec21 (1)
- 7.2.2b InPlace Agency Portal_Technical Overview_Dec21 (1)

- 7.2.2c InPlace User Group - Conference Agenda 2021
- 7.2.2d INPLACE project ASQA april 2022
- 7.2.2e InPlace Fact Booklet - pre placement tasks
- 7.2.2f InPlace Fact Booklet -self selected placements
- 7.2.3 Example of DET report_January 2022_Placements progress report
- 7.2.4a PREPARED FOR PLACEMENT GUIDEBOOK ECE 2022
- 7.2.4b EDS PRAC PREP
- 7.2.5 Placement Team 2021
- 7.2.6 Moodle EDS placement
- 7.2.7a 28MAR22- Agenda-Minutes CS Placement Meeting
- 7.2.7b 11-APR-22- Agenda-Minutes CS Placement Meeting
- 7.2.8 Agenda Actions Mangers Team Meeting –07022022

Question 8 Complaint Appeals Register

- Attachment 8.1 2021_Complaints Annual Report
- Attachment 8.2.1 20210531_Complaints Monthly Report_May_2021
- Attachment 8.2b.2 20210930_Complaints Monthly Report_Sept_2021
- Attachment 8.3 20211222_Complaints Register_ Quality Review_2021_CONFIDENTIAL

Question 9 Actions from two complaints appeals

- 9.1 Complaint No 1 - Dip of Nursing
- 9.2 Complaint No 2 - Dip of Justice

Question 10 Sample reports non-compliance submitted Chisholm Board

- 10.1 VET Academic Board Terms of Reference
- 10.2 CAC Terms of Reference
- 10.3 QCC Terms of Reference
- 10.4 Education Committee Minutes September 21
- 10.5 Education Committee Minutes November 21
- 10.6 Education Committee Minutes March 22
- 10.7 Minutes VEAB meeting October 21
- 10.8 Minutes VEAB Meeting February 2022
- 10.9a VEAB Paper Annual Academic Compliance Schedule
- 10.9b Annual Academic compliance schedule update October 21
- 10.10a VEAB Paper Education Policy Status October 2021
- 10.10B QMS document list October 21
- 10.11a VEAB Paper Professional Educator College April to June 2021
- 10.11b VEAB Paper Professional Educator College July – September 2021
- 10.11c VEAB Paper Professional Educator College Oct 21- Feb 22
- 10.12 2020-2021 Internal Review and Scope Reconciliation report
- 10.13 CAC Minutes 08.09.21
- 10.14 CAC Minutes 03.11.21
- 10.15 Folder Scope of Registration addition HLT35021
- 10.16 Folder Scope of Registration addition BSB30320
- 10.17 QCC Minutes 270921
- 10.18 QCC Minutes 261021
- 10.19 QCC Minutes 291121
- 10.20 QIP QCC Report Sept 2021
- 10.21 QIP QCC report Oct 2021
- 10.22 Extracts from EDG Minutes regarding policy approvals

- 10.23a Agenda EDG 3 August 2021
- 10.23b Agenda EDG 7 September 2021
- 10.23c Agenda EDG 8 February 2022
- 10.24 Quality Indicator Summary Report 0260_2020 not submitted
- 10.25a EDG Paper DET Performance Indicator report
- 10.25b VET Detailed report of Performance indicator data
- 10.26 QCC Quality Review update Nov 21
- 10.27 Extract from CEO Reports to the Board

Question 11 Communication Policies Procedures Plans Practices Part 1

Question 11 Communication Policies Procedures Plans Practices Part 2

Question 11 Communication Policies Procedures Plans Practices Part 3

Staff

- 1.1 Screenshot EQF News page
- 11.2 Education-quality-management-z4bTtgPi
- 11.2a the-vet-funding-contract-and-other-regulations-z6QoLGcW
- 11.3 People Talk CLG & EM 2022 - 31 March, issue 2
- 11.4 Induction - People Leader 2022 - Quality and Compliance_FINAL
- 11.5a EM Meeting - August 21_MinutesofMeeting
- 11.5b EM Minutes - September 2021
- 11.5c March EM meeting minutes March 22
- 11.5d CEO update_roadshow_Q4 2021

Students

- 11.6a 20220308_Reminder VaxStudent email updated 080322
- 11.6b MoodleCovidSafe2022
- 11.6c StudentNews20211008
- 11.6d StudentNews20211105
- Cover Sheet - 1 screenshot of student information pop up on the website - in body of cover sheet
- Link to website <https://www.chisholm.edu.au/students/current-students> - in body of cover sheet

Industry

- 11.7 Chisholm Employer Portal User Guide
- 11.8 Chisholm Employer and Industry Update March 2022
- 11.9 Student and Employer Digital Transformation – Final
- 11.10a 22334VIC Re-Accreditation
- 11.10b ASQA Cover Sheet TAFE Cyber minutes
- 11.10c Diploma of Nursing Course Advisory Committee - Minutes- 23.08.2021
- 11.10d Diploma of Nursing Course Advisory Committee - Minutes - 08.12.2021

Question 12 Supporting Polices Procedures for Self Assurance Practices PART 1

Question 12 Supporting Polices Procedures for Self Assurance Practices PART 2

- QMS002 Regulatory Funding and Legislative Requirements
- QMS003 QMS Documentation and CEO Operational Delegations
- QMS101 Scope of Registration
- QMS101 01 Scope of Registration Application
- QMS101 02 Process Diagram for Amending SOR
- QMS101 03 Process Diagram for Removing Course from SOR
- QMS101 04 Process Diagram for Amending CRICOS Registration
- QMS101 05 Process Diagram for Amending - Set Up Short Course

- QMS101 06 CRICOS Application
- QMS101 07 Business Case to Deliver Course Offshore
- QMS103 Course Design and Accreditation
- QMS104 Training and Assessment Strategy
- QMS105 Enrolment
- QMS106 Student Induction
- QMS107 RPL CT and RCC
- QMS108 Pre-Training Review
- QMS109 Practical Placements
- QMS109 01 Host Due Diligence Questionnaire
- QMS109 03 Internal Placement Implementation Plan
- QMS109 04 Practical Placement Guidelines
- QMS110 Excursions
- QMS111 Assessment of Learning (VET)
- QMS112 Attendance and Assessment Reporting
- QMS114 Change of Enrolment
- QMS115 Withdrawals, Refunds & Breaks in Study
- QMS116 Student Performance Review
- QMS117 Student Code of Conduct
- QMS118 VET Validation of Assessment
- QMS119 Completion of Studies
- QMS120 Evaluation of Teaching and Learning
- QMS121 International Students Transfers Between Providers
- QMS122 International Students - Suspension Deferment or Cancellation of Enrolment
- QMS124 International Student Scholarships
- QMS125 Course Monitoring Attendance and Course Duration (International)
- QMS126 Apprentices and Trainees
- QMS127 Fees and Charges
- QMS128 Duty of Care
- QMS129 Academic Misconduct
- QMS131 Training Plans
- QMS132 International Student Enrolment
- QMS132 01 International Application Form
- QMS136 Third Party Delivery of Accredited Training
- QMS137 Transitioning Expired and Discontinuance Arrangement
- QMS137 01 Transition and or Teach Out Plan
- QMS137 02 Transition Action Plan
- QMS137 03 Transition Letter Template
- QMS137 04 Expired Deleted Letter Template
- QMS137 05 Transition Letter Template A.1 Disengaged Students
- QMS137 06 Discontinuance Letter Template
- QMS137 07 Transition Employer Letter Template E
- QMS137 08 Transition Letter Template B
- QMS137 09 Transition Employer Letter Template F
- QMS137 10 Transition Letter Template C
- QMS137 11 Transition Employer Letter Template G
- QMS137 12 Transition Letter Template D

- QMS137 13 Transition Employer Letter Template H
- QMS137 14 Transition Communication Plan
- QMS137 15 Transition Unit Mapping Advice
- QMS143 Non-School Senior Secondary Provider
- QMS224 VET Trainer and Assessor
- QMS225 VET Teaching Supervision
- QMS225 01 Educator Supervision Plan and Monitoring Record
- QMS303 Communication
- QMS305 Records
- QMS306 Student Complaints and Appeals
- QMS311 Marketing and Advertising
- QMS401 Emergency Management Policy
- QMS401 20 International Student Critical Incident
- QMS401 21 Critical Incident Report Form
- QMS602 Risk Management Policy
- QMS602 01 - Risk Management Framework
- QMS60 01a Risk Criteria and Matrix
- QMS602 01b Risk Appetite Statement
- QMS602 02 Risk Profile Template
- QMS602 03 Risk Profile Instructions
- QMS602 04 - Risk Culture Strategy
- QMS602 05 Risk Management Principles
- QMS603 Audits
- QMS606 Stakeholder Surveys
- QMS607 International Education Agents
- QMS612 Audit Risk Committee Terms of Reference Approved 28 February 2022
- QMS613 Education Committee Terms of Reference Approved 28 February 2022
- QMS624 Child Safe Policy
- QMS625 Child Safe Reporting
- QMS628 Contracting Policy
- QMS628 400 Health Student Placement Agreement (clinical setting)
- QMS628 401 Health Student Placement Agreement (non-clinical setting)
- QMS628 402A Student Placement Letter Agreement
- QMS628 402B Student Placement Agreement (Non-Health)
- QMS630 Insurance

Question 13 Explanations of Data (Enrolment and Completion)

- Attachment 13.1 2020 Community Service final report Chisholm Institute – relevant sections highlighted
- Attachment 13.2 2021 Final Community Service Reporting Template with JobTrainer References - Chisholm Institute – relevant sections highlighted

Question 14 Chisholm Primary Contact

Summary of the Quality Self-Assurance Review Findings and Risk Assessment

Standards for RTOs 2015 – Standard 2

The operations of the RTO are quality assured.

Clause 2.2

Risk Level: Low Risk

The RTO:

- a) systematically monitors the RTO's training and assessment strategies and practices to ensure ongoing compliance with Standard 1; and
- b) systematically evaluates and uses the outcomes of the evaluations to continually improve the RTO's training and assessment strategies and practices. Evaluation information includes but is not limited to quality/performance indicator data collected under Clause 7.5, validation outcomes, client, trainer and assessor feedback and complaints and appeals.

Summary of Findings

The provider is ultimately responsible for ensuring quality training and assessment within their organisation and scope of registration, regardless of any third party arrangements where training and/or assessment is delivered on their behalf. This includes all third party arrangements where the AQF certification documentation will be issued by the provider.

The provider must have appropriate systems in place for developing, implementing, monitoring and evaluating quality training and assessment strategies and practices so that they meet training package and VET accredited course requirements.

The provider must use the outcomes of evaluation activities on their performance to quality assure and improve training and assessment practices. The information used to evaluate its performance must be relevant to its operating characteristics and business objectives.

The evidence demonstrated that Chisholm Institute has appropriate systems:

- to monitor training and assessment strategies and practices to ensure ongoing compliance with Standard 1
- that are followed to evaluate and use the outcomes of the evaluations to continually improve its training and assessment strategies and practices.

Chisholm Institute applies the three lines of defence model across all risk and quality frameworks. The three lines of defence model is outlined in **QMS602 Risk Management**. The three lines of defence are:

1. *First line of defence – Operational management and internal controls*
 - Day to day operation and quality activities
 - Responsible for the ongoing implementation and monitoring of Chisholm policies, procedures and quality controls.
2. *Second line of defence – Quality control, compliance, monitoring, and risk management*
 - Monitor, review, and test the effectiveness of the first line of defence
 - Compiling and analysing quality performance indicators
 - Includes operational committees and risk management activities such as internal quality reviews conducted by Academic Quality and Quality Improvement teams:

- Academic Quality audits – in accordance with a three-year plan focussing on compliance with Regulatory Standards across the organisation.
- Quality Improvement Program (QIP) – according to a risk analysis, focusing on individual courses across Regulatory Standards, business processes and funding contracts. Evidenced by **Attachment 2.1 Overview of Chisholm Quality Improvement Program (QIP)**, and documents included in folders **2A** (HLT54115 Diploma of Nursing) and **2B** (22334VIC Certificate IV in Cyber Security).

3. *Third line of defence – Internal audit*

- o Independently evaluate and give opinions on the adequacy and effectiveness of the management and controls in the first and second lines of defence. For example, Chisholm conducts Internal Board contracted audits. These are those set by the Board appointed auditors to ensure the Institute is compliant with:
 - Education and Training Reform Act 2006
 - Chisholm Institute Constitution
 - Ministerial Directions and Guidelines
 - Regulatory Standards
 - Funding Contracts
 - Other key legislation applicable.
- o Evidenced by **2.2 Student Experience Plan – Student Enquiry and Acquisition Review (PwC) 2021 Final Report**. This review was conducted by Price Waterhouse Coopers, the Board appointed auditor. The report found two medium rated findings related to the monitoring processes and controls of marketing activities by third parties.

Chisholm Institute have a multifaceted approach to monitoring academic quality. Each month the Quality and Compliance Committee (a sub-committee of the Vocational Education Academic Board (VEAB)) review and report on the quality and continuous improvement activities that are occurring throughout the institute. Reports are provided to VEAB. The standing items of the Quality and Compliance Committee monthly meetings include:

- Monthly QIP reports
- Validation Schedule reports
- Quality Review updates and schedule
- Complaints and appeal reports
- Policy reviews
- Quality Indicator Summary reports
- Self-assessment reports
- ASQA Delegation and Scope Reconciliation Report
- Any internal and/or external audits.

Chisholm Institute provided evidence of meeting minutes from the monthly meetings, including:

- **10.17 QCC Minutes 270921**
- **10.18 QCC Minutes 261021**
- **10.19 QCC Minutes 291121.**

Further, the following documents were provided to demonstrate the reports reviewed as part of

the monthly Quality and Compliance Committee meetings, including:

- **10.20 QIP QCC Report Sept 2021 and 10.21 QIP QCC report Oct 2021**
- **10.22 Extracts from EDG Minutes regarding policy approvals**
- **10.23a Agenda EDG 3 August 2021, 10.23b Agenda EDG 7 September 2021 and 10.23c Agenda EDG 8 February 2022**
- **10.24 Quality Indicator Summary Report 0260_2020 not submitted**
- **10.25a EDG Paper DET Performance Indicator report**
- **10.25b VET Detailed report of Performance indicator data**
- **10.26 QCC Quality Review update Nov 21**
- **10.27 Extract from CEO Reports to the Board.**

Validation

Chisholm Institute outlines the validation of VET assessment practices and judgements under **QMS118 VET Validation of Assessment Policy and Procedure**. This policy and procedure assists with:

- planning for and conducting validation of assessment for all units of competency and short courses using accredited and/or training package units of competency
- documenting the validation schedule against the Standards for RTOs
- monitoring and reporting of VET validation.

The schedule is in **Attachment 4.1 QMS118_07 2021 – 2025 SOR Validation Schedule**.

As indicated, validation schedule reports are a standing agenda item in the Quality and Compliance Committee monthly meeting. This has been demonstrated by **5.1 2021 SOR Validation Schedule Testing QCC Report**.

Complaints and appeal reports

Chisholm Institute indicated that complaint and appeal reports are a standing agenda item in the Quality and Compliance Committee monthly meeting. This has been demonstrated by **Attachment 8.2.1 20210531_Complaints Monthly Report_May_2021** and **Attachment 8.2b.2 20210930_Complaints Monthly Report_Sept_2021**.

Continuous Improvement Register

Chisholm has Continuous Improvement Register (CIR) at an Institute and course level. Since the implementation of the Educational Quality Framework (EQF), the Educational Improvement (EI) team are responsible for the maintenance, monitoring and reporting of the Institute's Continuous Improvement Register. Items are derived from:

- Academic External audits
- Academic Internal Quality Reviews (Internal Audits)
- Global academic issues identified from a range of data sources such as actions arising from reporting at the VET Academic Board or its subcommittees.

All training products on Chisholm's scope of registration have their own course level CIR and are either Word or Excel documents. Information included on the course level CIR's include:

- Validation reports
- Teacher and student feedback
- Industry consultation and feedback

- Internal quality improvement project (QIP) reviews and other relevant sources.

Chisholm Institute provided one Institute CIR and two course level CIRs to demonstrate the continuous improvement process, being:

- **Attachment 6.1_Institute_CI Register_2021**
- **Attachment 6.2_22334VIC_CI Register_2021**
- **Attachment 6.3_HLT54115_CI Register_2021.**

The Continuous Improvement Registers provide very thorough detail, outlining any issues identified, actions or recommendations for improvement and ‘self assessment of urgency to address risk’ which ranges from low to high. The registers also indicate the person/role responsible and date due for the actions or recommendations for improvement, it also outlines the outcome/actions taken and when the item is closed. However, the Continuous Improvement Register or ‘Institute – Global Issue’ and ‘EQF Implementation’ does not outline the ‘outcome/action taken’. The register states ‘completed’, ‘not commenced’ or ‘in progress’. This issue is across ‘Teaching and Learning’ ‘BPA TCA Audit’ registers. Therefore, the register does not include all required and relevant information.

Chisholm Institute provided evidence of two improvements applied to demonstrate the identification and analysis of the risk, reports on the improvements, outcomes to be implemented, evidence of how the risk was managed and the monitoring of outcomes implemented to manage the risk. The documents provided are under ‘Attachment 7’.

Academic Internal Quality Reviews (Internal Audits)

Three Year Cyclical Quality Review Schedule –outlines areas to be reviewed during 2021 to 2023. Chisholm Institute provided two samples of the quality reviews conducted, including:

- Marketing Quality Review – review of the marketing and student enrolment practices was conducted in November 2021. The report is provided in **Attachment 1.2.1 Quality Review Report – Marketing.**
- CRICOS Quality Review – review of the CRICOS VET students evaluating its compliance with the ESOS Act 2022 and National Code 2018 in February 2022. The findings are outlined in **Attachment 1.3.1 CRICOS Quality Review Report 2022.**

Self-Assurance Findings Summary

No further actions required

The evidence demonstrated that Chisholm Institute has appropriate systems:

- to monitor training and assessment strategies and practices to ensure ongoing compliance with Standard 1.
- that are followed to evaluate and use the outcomes of the evaluations to continually improve its training and assessment strategies and practices.

Areas for Improvement

The following are areas of self-assurance practice improvements identified based on the review of the evidence submitted:

- Ensure the Continuous Improvement Registers are completed accurately, and include outcome/action taken, as required by the CIR template. ‘Completed’, ‘not commenced’ and ‘in progress’ is not sufficient to demonstrate the outcome of the issue and whether any actions were taken as a result of the identified issue.

Standards for RTOs 2015 – Standard 6

Complaints and appeals are recorded, acknowledged and dealt with fairly, efficiently and effectively.

Clause 6.5

Risk Level: Low Risk

The RTO:

- a) securely maintains records of all complaints and appeals and their outcomes; and
- b) identifies potential causes of complaints and appeals and takes appropriate corrective action to eliminate or mitigate the likelihood of reoccurrence.

Summary of Findings

The provider must have systems and/or processes in place to review records of complaints and to identify potential causes of complaints and appeals. The provider's systems and processes must link into the continuous improvement of training and assessment strategies and practices and allow the provider to take appropriate corrective action to eliminate or mitigate the likelihood of reoccurrence.

The evidence provided throughout the Quality Self Assurance Review demonstrated that Chisholm Institute securely maintains records of all complaints and appeals and their outcomes; and identifies potential causes of complaints and appeals and takes appropriate corrective action to eliminate or mitigate the likelihood of reoccurrence.

As per Chisholm Self Assurance model submitted 30 November 2021, Chisholm Institute stated that *"The Quality and Compliance Committee (QCC) is a sub-committee of the Vocational Education Academic Board established to provide a forum to discuss, collaborate and provide advice to VEAB on issues of academic quality. The primary function of the QCC is to review the quality and continuous improvement activities that are occurring throughout the institute, report on findings, monitor complaints and student satisfaction findings, evaluate the impact of external directives and requirements of regulators and funding bodies to make recommendations to VEAB. VEAB provides advice and updates to the Board on all of these activities through the Education Committee and the CEO. QCC advice in relation to policy and procedure updates are provided to the Executive Directors Group and the CEO as delegate for the board."*

Chisholm Institute demonstrated the systems and/or processes in place to review records of complaints and to identify potential causes of complaints and appeals. Specifically:

- **QMS306 – Student Complaints & Appeals:** The student complaints and appeals policy and procedure outlines:
 - informal concern resolution
 - formal complaint resolution
 - appeals (internal – student only)
 - Trades Recognition Australia (TRA) complaints resolution
 - International Complaints and Appeals.
- The key points from **Attachment 8.1 2021_Complaints Annual Report** are:
 - there was a 10.6% increase in complaints from 2020 (168) to 2021 (188); however, lower percentage of complaints based on the number of enrolments (0.51% complained in 2020, and 0.49% complained in 2021)

- there were 6 employer complaints in the 2021 year
- students enrolled online were more likely to complain
- Chisholm identified the top 5 complaints by theme, being:
 - Certificate not issued (15% of all complaints)
 - Lack of communication (14% of all complaints)
 - Enrolment (14% of all complaints)
 - Course delivery (12% of all complaints)
 - Teaching staff (12% of all complaints).

The report also includes graphs for the following:

- Number of formal complaints for 2019-2021 by month
- Number of formal complaints by campus for 2021
- Number of formal complaints by business area for 2020 and 2021
- Number of formal complaints by course for 2021
- Number of formal complaints by theme for 2021
- Formal complaint theme by campus for 2021
- Number of formal complaints by risk level for 2021
- Number of concerns and formal complaints by month for 2021
- Number of concerns and formal complaints by campus for 2021
- Number of concerns and formal complaints by business area for 2021

The report also includes a list of complaints that were ongoing at time of report submission and had exceeded the 20 working days.

- Chisholm Institute provided two monthly reports. The reports are for the Executive Directors Group (EDG), Chisholm Leadership Group (CLG) and Academic Quality (AQ) for inclusion with papers to the Quality and Compliance Committee (QCC) and Vocational Education Academic Board (VEAB). The reports identify the following trends:
 - **Attachment 8.2.1 20210531_Complaints Monthly Report_May_2021:**
 - Course Delivery 60% of total complaints:
 - Teaching Staff – 27%
 - Lack of communication – 20%
 - Course not meeting expectations – 13%
 - Moodle – 13%
 - Assessment – 13%
 - Lack of resources – 13%
 - Enrolment 8% of total complaints
 - Refund request 8% of total complaints
 - Bullying 8% of total complaints
 - Parking 8% of total complaints
 - Complaint against a staff member 4% of total complaints
 - Other 4% of total complaints.

- **Attachment 8.2b.2 20210903_Complaints Monthly Report_Sept_2021:**
 - Course Delivery 64% of total complaints:
 - Teaching Staff – 29%
 - Certificate not issued – 29%
 - Assessment – 14%
 - Lack of communication – 14%
 - Course not meeting expectations – 14%
 - COVID-19 18% of total complaints
 - Refund request 9% of total complaints
 - Bullying 9% of total complaints.
- Chisholm Institute provided the register of all complaints received in 2021 in the document **Attachment 8.3 20211222_Complaints Register_Quality Review_2021_CONFIDENTIAL**. Whilst information has been redacted for privacy reasons, the register demonstrates Chisholm Institute collates all complaints received, prior to reports being developed. Chisholm Institute advised that *“The Register fulfills several purposes including but not limited to:*
 - *tracking of the complaint/concern,*
 - *measurement against service levels*
 - *providing details of the course/department/campus*
 - *providing details of the issue*
 - *supporting commentary*
 - *the staff member assigned to investigate and provide a response*
 - *external appeal process”.*

Chisholm Institute provided evidence to demonstrate the actions taken from the outcomes of the review of two complaints, appeals or grievances. The examples included:

1. Diploma of Nursing – following the process through to appeal by the student
2. Diploma of Justice – resulting in a change and improvement to the delivery of a program.

Complaint number one – Diploma of Nursing (9.1 Complaint No 1 – Dip of Nursing):

- Unit of competency deemed not satisfactory due to plagiarism and was unable to receive AQF certification documentation
- Student appealed the decision which was considered by a panel
- It was determined that the student had sent her assignment to another student, who plagiarised the assessment word for word. Student’s involvement is in direct breach of the Student Code of Conduct.
- The Appeals Panel upheld the original decision. It was identified that the student had other incomplete units and had not satisfactorily completed the qualification in its entirety.
- The student was invited to complete the remaining units in the qualification and repeat failed units of competency.
- Chisholm provided ASQA with all documents relating to the complaint, including email correspondence, and a completed appeal form.

For the Diploma of Nursing complaint, Chisholm Institute did not provide a response to the complainant within 20 working days, as indicated in the email sent to the student on 30 June 2021 which states: 'You will be informed of the Institute's response within the next 20 days'. Whilst internal email correspondence was provided indicating there had been a delay with resolving the complaint, there is no correspondence informing the student there will be/is a delay with the finalisation of the complaint. This is not in accordance with QMS306 Student Complaints and Appeals Policy and Procedure, which states:

"Where possible, all complaints processes are to commence within 10 working days of receipt of the formal complaint and are to be finalised within 60 calendar days. If this is not possible, the student is to be informed in writing as to the reasons for the delay and weekly updates provided. Once the outcome has been decided complainants will be notified in writing of the decision".

Complaint number two – Diploma of Justice (9.2 Complaint No 2 – Dip of Justice):

- Formal complaint submitted regarding two units of competency delivered as part of the Diploma of Justice. The complainant questioned the content and delivery of elements within two units, particularly with respect to the currency of the information provided and possible impact on vulnerable students undertaking the units. The student received a letter of support from Australian BPD Foundation Limited to confirm the content of the units did not "reflect current thinking and attitudes".
- The Business Services and IT teaching business area, responsible for the delivery of that qualification, found the complaint was valid and was required to update the content of the units of competency. Chisholm Institute responded to the complainant, indicating that it has implemented:
 - complete removal of all content, material and PowerPoint in question
 - a complete review to the two units of competency, to ensure all elements and performance criteria are covered as required
 - a strategy to work with the student and industry to ensure current industry practices
 - an opportunity for the student to speak with prospective students at the Diploma of Justice information session.
- Chisholm provided ASQA with all documents relating to the complaint, including email correspondence, the completed complaint form and the learning materials in question.

Self-Assurance Findings Summary

No further actions required

Chisholm Institute's evidence demonstrates it has appropriate systems to investigate and identify potential causes of complaints and appeals, taking appropriate corrective action to eliminate or mitigate the likelihood of reoccurrence.

Areas for Improvement

The following are areas of self-assurance practice improvements identified based on the review of the evidence submitted:

- In accordance with **QMS306 Student Complaints and Appeals** Chisholm Institute should ensure timeline for resolving complaints and appeals is adhered to, and if not, ensure complainants are informed, in writing, as to the reasons for the delay and provided weekly updates.

Standards for RTOs 2015 – Standard 7

The RTO has effective governance and administration arrangements in place.

Clause 7.1

Risk Level: Low Risk

The RTO ensures that its executive officers or high managerial agent:

- a) are vested with sufficient authority to ensure the RTO complies with the RTO Standards at all times; and
- b) meet each of the relevant criteria specified in the Fit and Proper Person Requirements in Schedule 3.

Summary of findings

The provider must be viable, so its business and practices do not negatively impact on the quality of its training and assessment outcomes and on learners.

The provider must ensure it only appoints executive officers and high managerial agents that meet the Fit and Proper Person requirements.

The provider must assign executive officers and high managerial agents with sufficient authority to ensure its operations comply with the RTO Standards at all times.

The evidence provided throughout the Quality Self Assurance Review demonstrated that Chisholm Institute has appropriate systems to ensure that its executive officers and high managerial agents are vested with sufficient authority to ensure the provider complies with the RTO Standards at all times.

Chisholm Institute outlined in **1.0 Overview of Chisholm Risk Management Framework and Governance Framework** that the Board are committed to complying with relevant legislative and regulatory obligations. Chisholm Institute ensures the institute adheres to the Governance Framework through an online compliance-monitoring tool, Advent Manager (RelianSys). The tool contains relevant Ministerial Directions, Guidelines, Acts, and other instruments relevant to the governance of the Institute, such as the Chisholm Institute Constitution, the Financial Management Compliance Framework, and Ministerial Guidelines issued to TAFE Institutes. Designated staff are required to confirm compliance on a regular basis. Regular reports of the system are provided to the Audit and Risk Management Committee, under the Board.

As outlined in the *Chisholm Self Assurance model* provided on 30 November 2021, academic governance is overseen by the Chisholm Board through the Education Committee of the Board. The Education Committee is responsible for advising the Board on its education product and service strategy, through reporting of activities of both vocational and higher education. It is also responsible to oversee academic governance on behalf of the Board, including overseeing management of risks associated with management of academic governance working with the Audit and Risk Management Committee (ARMC) where appropriate. The Education Committee is advised by the Vocational Education Academic Board (VEAB) in relation to Chisholm Institute's VET academic quality. The terms of reference of the VEAB are outlined in **10.1 VEAB Terms of Reference**.

The VEAB has two subcommittees overseeing Chisholm's self-assurance functions:

1. *Course Advisory Committee* – established to provide a forum to discuss, collaborate and provide recommendations to VEAB in relation to the provider's course offerings and management of the scope of registration. The subcommittee has oversight of the scope of registration, including applications for course accreditations, additions to scope of

registration, CRICOS register and product offerings. The terms of reference are outlined in **10.2 CAC Terms of Reference**.

2. *Quality and Compliance Committee* – established to discuss, collaborate and provide advice to VEAB on issues of academic quality. The primary function is to review the quality and continuous improvement activities, report on findings, monitor complaints and student satisfaction findings, evaluate the impact of external directives and requirements of regulators and funding bodings, and make recommendations to VEAB. The terms of reference are outlined in **10.3 QCC Terms of Reference**.

Chisholm Institute provided evidence to demonstrate that the Education Committee of the Board and the VEAB (including the two sub-committees) have oversight of their respective functions, ensuring they comply with the RTO Standards at all times. This can be demonstrated by:

- Minutes of Meetings of the Education Committee in:
 - September 2021 (**10.4 Education Committee Minutes September 21**)
 - November 2021 (**10.5 Education Committee Minutes November 21**)
 - March 2022 (**10.6 Education Committee Minutes March 22**).
- Minutes of Meetings of the VEAB in:
 - October 2021 (**10.7 Minutes VEAB meeting October 21**)
 - February 2022 (**10.8 Minutes VEAB Meeting February 2022**).
- Meeting minutes of CAC:
 - September 2021 (**10.13 CAC Minutes 08.09.21**)
 - November 2021 (**10.14 CAC Minutes 03.11.21**).
- Meeting minutes of QCC:
 - September 2021 (**10.17 QCC Minutes 270921**)
 - October 2021 (**10.18 QCC Minutes 261021**)
 - November 2021 (**10.19 QCC Minutes 291121**).

Chisholm Institute submitted various reports to demonstrate what was reviewed and analysed as part of the meetings listed above.

Chisholm Institute also has an Executive Directors Group (EDG) who are responsible for:

- reviewing and approving new policies
- reviewing and approving policy updates.

All approved policies, procedures and associated documents are available on the Quality Management System (QMS). The QMS provides a strategic framework on how the quality management documents are managed, reviewed, stored and implemented across the Institute. The QMS Framework provides a hierarchical structure of quality documents that define and govern Chisholm Institute's activities. The policy and process for managing quality documents is articulated in QMS003 QMS Documentation and CEO Operational Delegations.

As of time of submission, Chisholm Institute had 47 key policies and procedures in effect. These are outlined in **Question 12 Supporting Polices Procedures for Self Assurance Practices PART 1** and **Question 12 Supporting Polices Procedures for Self Assurance Practices PART 2**.

Self-Assurance Findings Summary

No further actions required

Chisholm Institute has demonstrated that its executive officers or high managerial agents are vested with sufficient authority to ensure it complies with the RTO Standards at all times.

Chisholm Institute demonstrated that the executive management and corporate board engage in the resolution process.

Standards for RTOs 2015 – Standard 8

The RTO cooperates with the VET Regulator and is legally compliant at all times.

Clause 8.6

Risk Level: Low Risk

The RTO ensures its staff and clients are informed of any changes to legislative and regulatory requirements that affect the services delivered.

Summary of Findings

The provider must ensure that there are two way communication protocols and process in place to ensure its staff and clients are informed of any changes to legislative and regulatory requirements that affect the services they deliver.

Chisholm Institute advised ASQA that there are multiple ways that staff and students receive information in relation to legislative and regulatory changes.

Chisholm Institute provided evidence to demonstrate that it ensures staff and clients are informed of any changes to legislative and regulatory requirements that affect the services delivered.

Chisholm Institute's **QMS – Communication Policy and Procedure** describes the policies and procedures for issuing:

- media releases, statements and comments
- internal communication to employees
- student communications
- external communications to industry, employers, community, schools and government.

Chisholm Institute has provided an outline of communication policies, procedures and practices for communicating legislative or other changes, within **ASQA Request for information Cover Sheet Chisholm**. This is outlined below.

Staff

- Staff intranet – the Education Quality Framework (EQF) news page includes VET sector information, such as ASQA updates, DET Fact Sheets, and changes to policies and procedures. A screenshot of the EQF staff intranet page has been provided and is titled, **11.1 Screenshot EQF News page**.
- People Talk, a staff newsletter distributed to all staff fortnightly or more frequently when issues arise (such as the pandemic). This is evidenced by **11.3 People Talk CLG & EM 2022 – 31 March, issue 2**.
- The Education Managers Network meets monthly and covers operational and compliance concerns. Meeting minutes are attached as examples – **11.5a EM – Meeting – August 21_MinutesofMeeting**, **11.5b EM Minutes – September 2021** and **11.5c March EM**

meeting minutes March 2022.

- Induction, including a quality component for teachers and education managers. Teachers are required to complete the Teacher Essentials Kit which covers regulatory and contractual compliance. Education Managers are required to complete the Education Managers Essential Kit. This is demonstrated through **11.4 Induction – People Leader 2022 – Quality and Compliance_FINAL**, **11.2 Education-quality-management-z4bTtgPi** and **11.2a the-vet-funding-contract-and-other-regulations-z6QoLGcW**.
- The CEO sends biannual updates to all staff, which includes changes to the sector and industries. **11.5d CEO update_roadshow_Q4 2021** is an example that Chisholm Institute have provided.

Students

- Weekly student newsletters are emailed to students of upcoming events, requirements and/or changes to processes. Chisholm Institute has provided two examples of Student News, being **11.6c StudentNews20211008** and **11.6d StudentNews20211105**.
- Chisholm public facing website contains a student page, located at <https://www.chisholm.edu.au/students/current-students>. Chisholm changes the banner on the website to maximise impact and availability of information to students. Chisholm Institute has provided **Cover Sheet – 1 screenshot of student information pop up on the website** to demonstrate the change of banner.
- Student emails are used for urgent updates and to inform students of information on single topics. This is evidenced by **11.6a 20220308_Reminder VaxStudent email updated 08032022**.
- Moodle Dashboard and Student News pages, which outline any news items, calendar events and course specific announcements. Chisholm Institute has demonstrated this through **11.6b MoodleCovidSafe2022**.

Industry

- The Apprenticeship Hub and the Employer Portal. As outlined in **11.9 Student and Employer Digital Transformation – Final**, Chisholm Institute identified an issue that employers were not receiving sufficient communication. Chisholm provided evidence of the Chisholm Employer Portal, **11.7 Chisholm Employer Portal User Guide** to demonstrate the portal it developed to address the concerns identified.
- The Employers and Industry Update, a biannual email to employers and industry partners, evidenced by **11.8 Chisholm Employer and Industry Update March 2022**.
- Chisholm teaching delivery areas are heavily involved with industry as part of the course planning and renewal. Chisholm Institute has provided evidence of the meeting minutes from industry review and renewal of accredited courses. This has been evidenced by **11.10a 22334VIC Re-Accreditation**, **11.10b ASQA Cover Sheet TAFE Cyber minutes**, **11.10c Diploma of Nursing Course Advisory Committee – Minutes -23.08.2021** and **11.10d Diploma of Nursing Course Advisory Committee – Minutes – 08.12.2021**.

Self-Assurance Findings Summary

No further actions required

Chisholm Institute demonstrated that it has systems in place to ensure its staff and clients are informed of any changes to legislative or regulatory requirements that affect the services delivered.