

Continuous Improvement Policy and Procedure

Last Updated:4th June 2025**Director Approval:***Lisa Materano*

Purpose

To ensure the organisation implements a systematic and strategic approach to continuous improvement that enhances service delivery, training and assessment outcomes, regulatory compliance, and stakeholder satisfaction in alignment with Standard 4.4 of the Outcome Standards. This policy supports the Outcome Standards by contributing to effective Governance and continuous development of the VET Workforce.

Scope

This policy applies to:

- RTO management and administrative staff
- Trainers and assessors
- Students and employers
- External stakeholders (e.g. industry bodies, regulators)

Policy Statement

The organisation is committed to continuous improvement across all operational areas by:

- Regularly monitoring performance and compliance
- Systematically collecting and analysing data
- Implementing improvements informed by evidence and stakeholder input
- Reviewing outcomes and adjusting practices accordingly
- Evaluating the impact of improvements on student outcomes, training and assessment quality, and stakeholder satisfaction.

Principles

- **Systematic Monitoring:** Performance and compliance are reviewed against relevant standards and instruments.
- **Stakeholder Engagement:** Input from students, staff, industry, and regulators is central to improvement.
- **Data-Driven Decisions:** Feedback and performance metrics guide meaningful changes.
- **Transparency & Accountability:** Improvement initiatives are documented, tracked, and evaluated.

Procedure

Data Collection

Data is gathered through multiple channels including:

- Student feedback forms and learner questionnaires
- Staff performance reviews, appraisals, and team meetings



- Employer and industry partner surveys
- Complaints, appeals, and informal feedback
- Internal and external audit findings
- Validation and moderation sessions
- Contractual and service delivery reviews

Monitoring and Evaluation

- Maintain a Compliance Calendar for regular review of obligations
- Conduct internal audits annually, including documented self-assurance processes in accordance with ASQA's expectations.
- Conduct internal audits annually, including self-assurance against Outcome Standards
- Evaluate third-party arrangements and subcontractor performance
- Perform post-implementation reviews of all major changes or improvements

Data Analysis

- Sort feedback into themes: strengths, compliant practices, areas requiring improvement
- Conduct root cause analysis for each issue
- Prioritise issues: urgent, short-, medium-, and long-term
- Document results in the Continuous Improvement Register

Improvement Planning

- Develop an Action Plan with clear:
 - Objectives
 - Responsibility allocation
 - Timelines
 - Measurable benchmarks for success
- Gain management approval and communicate actions to relevant stakeholders

Implementation and Review

- Actions are implemented by responsible staff
- Regular monitoring ensures completion
- Improvements are assessed for impact and effectiveness
- Changes to policy, procedure, or practice are updated accordingly
- Improvements are documented in the Continuous Improvement Register
- Improvements are also assessed against outcome indicators, including learner achievement, assessment quality, and stakeholder confidence.

Responsibilities

Role	Responsibilities
CEO/RTO Manager	Oversight, resource allocation, final review and approval of action plans
RTO Administrator	Manages the register, monitors completion of actions, supports data analysis
Trainers/Assessors	Provide feedback, implement changes, participate in validation
All Staff	Contribute to feedback, raise improvement ideas, support implementation
Students/Employers	Provide feedback via formal and informal mechanisms

Documentation and Records

All records will be maintained in accordance with regulatory and legislative requirements, with minimum retention periods as applicable to each record type.

Review and Continuous Cycle

The policy and procedure will be reviewed annually or:

- In response to identified risks
- Following significant regulatory changes
- Post internal or external audit findings

Review and Evaluation

- This policy is reviewed annually by the Compliance Manager and approved by executive management to ensure it remains current and effective. Reviews are conducted with reference to current ASQA guidance and the revised Standards for RTOs to maintain regulatory alignment.