### POLICY

<table>
<thead>
<tr>
<th>VET 2015 Standards:</th>
<th>Standard 2</th>
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<tbody>
<tr>
<td>MCC Ref:</td>
<td>MCC-2-C3</td>
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### Aim

To ensure that continuous improvement is practiced at all times by staff members to meet the Institute’s quality objectives.

This policy and procedure describes the processes by which the Institute manages risks concerned with compliance with the NVR Standards for Registered Training Organisations (RTO) and acts on opportunities to continuously improve its system.

### Scope

This policy and procedure applies to all persons employed by or contracted to the Institute.

### Responsibilities

The CEO is responsible for the control and issue of this policy and procedure.

### Definitions

**Continuous improvement** means a planned and ongoing process that enables the RTO to systematically review and improve its policies, procedures, products and services in order to generate better outcomes for clients and to meet changing needs. It allows the RTO to constantly review its performance against the VET Quality Framework and to plan ongoing improvements to its performance. Continuous improvement involves collecting, analysing and acting on relevant information collected from clients and other interested parties, including the RTO’s staff.

**Feedback** is information provided by a student, trainer or employer.

**Unsolicited feedback** may come from a variety of sources and because of its unstructured nature may raise issues beyond the Institute’s control.

**Objective** is an aim or goal toward which effort is directed - a strategic position to be attained or a purpose to be achieved by an organisation.

**Quality Objective** is something sought, or aimed for, related to quality. Quality objectives are generally based on the Institute’s Quality Framework and should be measurable.

### Responsibility

Management

Management will establish objectives, including quality objectives, and performance indicators, and will review performance, assess opportunities for improvement, and assign action items as required. Management will initiate continuous improvement...
activities based on company objectives, and will record continuous improvement summary information.

**Employees**

All staff members will participate in continuous improvement activities as required. Staff may also initiate other continuous improvement activities to improve service quality and/or process effectiveness/efficiency.

<table>
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<tr>
<th>Standard Processes for Improvement</th>
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<tr>
<td>Improvements are made on a routine basis through the use of the quality policy, quality objectives, audit results, client feedback and analysis of data, corrective and preventive actions, management review, validation and other continuous improvement activities.</td>
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<tr>
<td>The Institute’s policy is to continuously improve the quality of service and performance to students, and has established quality objectives to support this policy.</td>
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**PROCEDURE:** CONTINUOUS IMPROVEMENT

| SNR Ref : | Standard 2 |
| MCC Ref : | MCC-2-C3 |

**Action / Method** Internal Audits

One of the Institute's objectives is to continuously improve its processes in order to enhance its performance and to increase the quality of its services. Internal audits are used to evaluate compliance of processes with the quality system and other specific program/project or client requirements. Results of audits are documented in audit reports, with corrective/preventive actions initiated and tracked.

An appointed officer will conduct an internal audit of the Institute to check compliance with all regulatory requirements at least annually.

An appointed officer will analyse the internal audit outcomes and report all/any non-conformances with the National Vocational Education and Training Regulator Act 2011 and government funding agreements (Skills Victoria), to the CEO of the Institute, together with a strategy and timeframe to correct any/all non-conformances identified.

This is notwithstanding the fact that Standards for Registered Training Organisations (RTOs) 2015 no longer explicitly require continuous improvement of ‘client services’. However, Standard 2 Clause 2.2 now specify that information from quality indicator data, validation outcomes, client and trainer and assessor feedback and complaints and appeals is used to inform continuous improvement.

**Client & Stakeholder Feedback**

The appointed officer will collect and analyse stakeholder and client feedback and satisfaction data on the services provided by the Institute.

Clients and stakeholders will be asked to provide feedback as follows:

| Students | (i) Trainers will ask students in classroom workshops for feedback on their satisfaction, improvement opportunities and satisfaction with implemented actions. This feedback will be conveyed by trainers to the regular staff meetings for necessary action. |
| (ii) At the completion of training programs or periodically as required, students will be asked to complete the AQTF Quality indicator survey forms. |
| (iii) Students will be encouraged to write their feedback directly to a central email |
Trainers/Assessors | (iv) Feedback will be sought during periodic staff meetings and via a central email info@macquarieeducation.edu.au
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Employers | At the completion of the training program being undertaken by his/her employees, if applicable
MCC Employees | Feedback will be sought during periodic staff meetings and via a central email info@macquarieeducation.edu.au
Industry Representatives | Industry representatives will be consulted one-to-one and diary notes of meetings maintained.

### Analysis of Data

The feedback will be summarised by the appointed officer and reviewed at the staff meetings, and will identify:

- Corrective/preventive actions in relation to significant client complaints or any failure to provide quality services to a client
- How corrective/preventive actions will be implemented and tracked
- Less significant issues from clients that may be outside the formal Continuous Improvement System
- Unsolicited feedback received by any member of staff is to be referred to the appointed officer.
- The feedback will be analysed and reported in the staff meetings.

MCC will consider all recommendations and corrective actions identified from clients and stakeholders and review its policies and procedures in the light of the information received.

MCC will advise students, employees and/or contractors as required, of any/all changes to policy and procedures insofar as they affect them.

### Corrective & Preventive Actions

Corrective and preventive actions, by their nature, provide for improvements to the quality system and to our services.

### Management Review

The management review process is also used to effect continuous improvement. The Management Review process ensures the Institute’s quality system’s continuing suitability, adequacy and effectiveness, and assesses opportunities for improvement. Action items are assigned as necessary and reviewed at subsequent meetings.

### Validation

All staff will participate in activities to ensure the integrity of the training system through internal meetings, external networking with industry and professional development activities to keep abreast of changes within the industry.

### Other Continuous

Other continuous improvement efforts may take place through projects or
| Improvement Activities | small-step ongoing improvement activities. Teams are usually formed outside of routine operations to work on breakthrough improvement projects, while people or teams within an organisation are the best source of ideas for small-step or ongoing process improvement.

Any employee may submit recommendations for improvements by writing directly to info@macquarieeducation.edu.au An appointed officer will collate all suggestions, summarise, analyse and present them at periodic staff meetings. Actions will be assigned to appropriate personnel to implement improvements.

The CEO may initiate at any time improvement activities within the organisation that are in addition to those being implemented and monitored against the strategic plan. |
## VERSION CONTROL

### Review/ amendment history

**Policy Approved by:** Chief Executive Officer / RTO Manager  

**Responsible Officer:** Chief Executive Officer / RTO Manager  

**Next Policy Review Date:** July 2017

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<tr>
<th>Version</th>
<th>Date</th>
<th>Details</th>
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<tbody>
<tr>
<td>1.0</td>
<td>July 2014</td>
<td>Policy issued</td>
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<tr>
<td>2.0</td>
<td>Dec 2014</td>
<td>Updated to reflect Standards for Registered Training Organisations (RTOs) 2015</td>
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<tr>
<td>3.0</td>
<td>July 2015</td>
<td>No material change</td>
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<tr>
<td>4.0</td>
<td>July 2016</td>
<td>No material updates</td>
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