## POLICY CORRECTIVE ACTION

### VET 2015 Standards:

**Standard 2**

### MCC Ref:

**MCC-3-C 5**

### Purpose

The purpose of this Procedure is to ensure continuous business improvement of the Institute by a systematic approach to planning and taking corrective and/or preventative action.

### Scope

This Procedure applies where actual or potential non-conformances have been detected, or where an opportunity for improvements has been highlighted.

Any action taken will be appropriate to the extent of the problem/opportunity, and the degree of risk encountered.

### Responsibilities

The CEO or designated officer will have responsibility for:

- Issuing and reviewing student questionnaires
- Determining, managing and confirming corrective/preventative actions

All personnel will have responsibility for:

- Performing corrective / preventative action where delegated to do so
- Referring any customer complaints to the CEO
## POLICY

<table>
<thead>
<tr>
<th>ACTION / METHOD</th>
<th>CORRECTIVE ACTION</th>
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<tbody>
<tr>
<td>NVR Ref:</td>
<td>Standard 2</td>
</tr>
<tr>
<td>MCC Ref:</td>
<td>MCC-3-C 5</td>
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### Corrective action

Where an actual non-conformance has been identified on a "CORRECTIVE ACTION RECORD", the designated officer will determine and initiate the corrective actions necessary to:

- Overcome the immediate problem
- Eliminate the cause/s

The person delegated with performing the action will record the action taken. Upon successful completion, the "CORRECTIVE ACTION RECORD" will be returned to the designated officer, who will place it on file and undertake a follow-up check to verify that the corrective action has been effective.

### Preventative Action

In addition to the corrective action procedure above, the Designated officer will consider appropriate sources of information to detect, analyse and eliminate potential cause/s of non-conformance. These sources of information may include, but are not restricted to:

- Internal audit results
- External (2nd or 3rd party) audit results
- Comments on a completed feedback questionnaire
- Personal observations

**An "OPPORTUNITY FOR IMPROVEMENT" submitted by an employee/student**

Where potential cause/s of non-conformance is/are detected, the designated officer will:

- Determine the preventative actions to be taken
- Initiate them
- Delegate the actions

The delegated person will record the action taken. On successful completion, the "Opportunity for Improvement" will be returned to the designated officer, who will file it, and make a follow-up check to verify that the preventative action has been effective.

### Client Complaints

All personnel will refer any client complaints received to the CEO.

Where a client has registered a complaint, the Designated officer will investigate the matter, and record it on an Opportunity for Improvement or Non-Conformance form. General procedures for corrective / preventative action will be applied.

The Designated officer will also contact the client concerned to advise the action taken.
### Changes to the Quality System

Where a customer complaint or any other non-conformance highlights the need for a change to the quality system, the Designated officer will ensure that they are promptly implemented.

Any changes to quality system documents will be controlled in accordance with the Records Management, Maintenance and Security Procedure.

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<tr>
<td>Complaints and Appeals Policy and Procedure</td>
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<td>Records Management, Maintenance and Security Policy and Procedure</td>
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<tr>
<td>Non-Conformance Report Form</td>
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<td>Corrective Action Record Form</td>
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<td>Corrective Action Register Form</td>
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<td>Course Monitoring Report (Forms)</td>
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**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>
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<tbody>
<tr>
<td>1.0</td>
<td>July 2014</td>
<td>Policy issued</td>
</tr>
<tr>
<td>2.0</td>
<td>Dec 2014</td>
<td>Updated to reflect Standards for Registered Training Organisations (RTOs) 2015</td>
</tr>
<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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