PIONEER COLLEGE
RTO: 45763 CRICOS: 03956A

Quality Assurance

Policy and Associated Procedures

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Pioneer Education Institute Pty Ltd t/a Pioneer College

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1. Purpose and Scope

1.1 This policy and associated procedures outline Pioneer College's (hereafter referred to as 'Pioneer') approach to ensuring that all aspects of its operations are quality assured. It details the approach to continuous improvement in its business processes and practices in order to drive organisational excellence and provide stakeholder satisfaction.

1.1.1 This policy and associated procedures meet the requirements of Standard 4.4 of the Standards for RTOs, as well as standard P3.3, P4.3 and P5 of the ELICOS Standards 2018.

1.1.2 This policy applies in the first instance to all of Pioneer's Management, Trainers and Assessors and all training products offered under the scope of registration.

1.1.3 The CEO/ PEO is responsible for all aspects of quality assurance and continuous improvement as outlined in this policy and associated procedures.

2. Related Documents

Continuous Improvement Register

Continuous Improvement Form

Quality and Compliance Schedule

Validation Schedule

Validation Policy and Procedure

3. Related Legislation

3.1 *Education Services for Overseas Students (ESOS) Act 2000*, specifically the *National Code 2018*

3.2 *National Vocational Education and Training Regulator (NVR) Act 2011*, specifically the *2025 Standards for Registered Training Organisations (RTOs)*

This policy and associated procedures will contribute to Pioneer complying with other requirements such as included in the:

- *VET Quality Framework*
- *Data Provision Requirements 2020*
- *Australian Qualifications Framework*
- ASQA regulatory/ compliance updates and fact sheets
- *Privacy Act 1988*, and any relevant amendments
- *Public Records Act 2000*
- *Electronic Transactions Act 2011*
- Equal Opportunity, Anti-Discrimination, and Human Rights Acts
- *Fair Work Act 2009*

- *Tuition Protection Service (TPS) Framework* and Australian Consumer Law (ACL)
- *Work Health and Safety (WHS) Act 2020*
- *Student Identifiers Act 2014*
- National VET Data Policy

4. Definitions

Continuous improvement	The ongoing effort to improve services, systems, processes or products to enhance overall quality. A systematic approach is used by the organisation to adapt to changing needs of the community or people accessing services and identify opportunities that improve operations.
Quality Assurance	Systems and services to monitor, review, plan, control and ensure quality of services, supports or products. Sometimes referred to as quality management.

5. Policy Statements

5.1 Quality Approach

5.1.1 Pioneer is committed to continuous improvement to support the quality of services provided. Pioneer aims to put student's needs at the forefront of all its functions and have considered this in the design and implementation of policies and procedures.

5.1.2 Quality forms part of Pioneer's overall commitment and all services provided are delivered to the highest possible standards.

5.1.3 Pioneer has a range of mechanisms in place for collecting and analysing data and feedback from students, staff, industry, employers and regulators. Pioneer reviews each area of operations, identifies areas for improvement, and implements corrective actions, and monitors the effectiveness of actions taken to make necessary amendments.

5.1.4 Pioneer monitors and evaluates its performance against the Standards and uses the outcomes to inform continuous improvement. These quality and improvement activities are planned as required, with records being stored.

5.1.5 Appropriate internal and external stakeholders contribute to quality and improvement activities. This policy and associated procedures apply to all students enrolled in Pioneer, partnerships with other organisations, all areas of operations and staff.

5.2 Continuous Improvement Activities

5.2.1 Systematically identifying and scheduling all areas of operations to be reviewed.

5.2.2 Identifying criteria against which to measure performance.

5.2.3 Seeking feedback from stakeholders.

5.2.4 Analysing results including risk management considerations.

5.2.5 Identifying areas for improvement.

5.2.6 Identifying and implementing improvement actions.

5.2.7 Monitoring the effectiveness of improvement actions and making amendments where appropriate.

5.2.8 Communicating the outcomes to stakeholders.

5.2.9 Archiving evidence appropriately as per Records Management procedures.

6. Procedures

6.1 Quality Assurance Principles and Systems

6.1.1 Pioneer develops and implements a Quality and Compliance Schedule to ensure each aspect of Pioneer's operations is audited and reviewed, based off the processes identified in this policy document. Each area is systematically reviewed, with improvements documented.

6.1.2 Where the outcome of a review indicates that improvements are required, these findings are included on the Continuous Improvement Register with an action plan, associated responsibilities and timelines. These findings are communicated to the relevant stakeholders.

6.1.3 The effectiveness of decisions/ actions is monitored, and amendments are made where necessary. Risk management considerations are factored into the subsequent decisions.

6.1.4 The completion of all actions and outcomes is documented on the Continuous Improvement Register.

6.1.5 Pioneer ensures all policies and procedures are accessible, understood and implemented consistently. This is done through utilising the following strategies:

6.1.5.1 Publication of policies and associated procedures, and other relevant documentation in an accessible file location to all relevant stakeholders

6.1.5.2 All relevant stakeholders are informed of the file location and responsibilities in relation to the policy and associated procedures

6.1.5.3 Student pre-enrolment and orientation resources

6.1.5.4 Staff induction, professional development and performance review activities

6.1.5.5 Systematic review of legislation and practice

6.1.5.6 Internal auditing

6.1.5.7 Email communication with relevant stakeholders

6.1.5.8 Student, management and staff meetings

6.1.6 External and internal consultants are used to complete internal audit procedures, annually.

6.1.7 Pioneer aims to operate proactively to eliminate non-compliances and continuously improve quality.

6.1.8 Improvement, preventative and/ or corrective action may include professional development opportunities for staff and/ or amendments to processes and/ or materials.

6.2 Training and Assessment

6.2.1 Pioneer seeks external review of the following once per year:

6.2.1.1 learning and assessment strategies including course content

6.2.1.2 learning and assessment materials

6.2.1.3 facilities and equipment

6.2.1.4 training and assessment staff

6.2.1.5 assessment validation processes

6.2.1.6 partnership monitoring arrangements (if appropriate)

6.2.1.7 student support services

6.2.1.8 learning outcomes

6.2.1.9 policies and procedures

6.2.2 Pioneer internally validates units of competency on the scope of registration that are currently being delivered, as required by the RTO Standards.

6.2.3 Pioneer validates all learning resources to ensure they meet training package requirements and facilitate learning and assessment.

6.2.4 Pioneer interacts with relevant external stakeholders to ensure training and assessment maintains pace with industry and training package requirements.

6.2.5 Pioneer staff provide students with the administrative, academic and personal/ welfare support necessary to achieve their individual goals and enhance their professionalism and course success.

6.2.6 Pioneer will systematically review partnership arrangements (if employed) along with administrative, academic, and personal/ welfare support services provided to students and implement improvement actions where appropriate.

6.3 Management of Operations

6.3.1 Pioneer schedules and conducts regular meetings. The following duties are performed:

6.3.1.1 Planning and co-ordination of activities

6.3.1.2 Receiving feedback from stakeholders

6.3.1.3 Communicating information to stakeholders

6.3.1.4 Reviewing activities and performance

6.3.1.5 Dealing with business of the day

6.3.1.6 Review compliance and quality assurance. Initiate action where required

6.3.1.7 Review effectiveness of previous actions implemented. Initiate change where appropriate

6.3.2 Pioneer meetings include, but are not limited to:

6.3.2.1 Weekly all staff and management meetings

6.3.2.2 Course advisory groups

6.3.2.3 Monthly interdepartmental staff, and trainer's meetings

6.3.2.4 Scheduled validation and moderation meetings

6.3.3 Policies and procedures are reviewed at least annually via scheduled reviews, and at audit times, or as required/ requested.

6.3.4 All relevant stakeholders are encouraged to recommend reviews and suggest areas of continuous improvement when they are identified.

6.3.5 The focus of reviews is the early identification of potential areas of non-compliance and quality improvement.

6.3.6 Any recommended changes are documented and discussed at meetings, where an action plan is agreed upon by management. The timeline for implementation is approved in this meeting.

6.3.7 Continuous improvement actions are communicated to all relevant stakeholders.

6.3.8 Pioneer reviews legislation, scope of registration, training packages, VET regulations at least every six months to ensure currency of materials, operations and practices.

6.3.9 Pioneer conducts internal audits on all operations as indicated in the Quality and Compliance Schedule

6.3.10 Pioneer undertakes an annual review of organisational effectiveness.

6.3.11 Documented evidence of meetings, agendas and minutes are maintained in the file system.

6.4 Collect, Analyse and Act Upon Data and Feedback from Students

6.4.1 Pioneer uses feedback mechanisms to collect data and feedback from students. This includes:

6.4.1.1 Providing an orientation survey to students at their orientation to assess their pre-enrolment and orientation experience.

6.4.1.2 Providing the learner questionnaire (quality indicator form) to students before they complete their course.

6.4.1.3 Informing students in the handbook and at orientation as to how they can provide feedback through completing the feedback form.

6.4.2 Pioneer identifies the need for additional surveys of students and develops and implements as required.

6.4.3 Pioneer analyses and documents the findings of all data and feedback collected. Analysis may include:

6.4.3.1 Identifying key trends or patterns in responses

6.4.3.2 Using descriptive statistics such as percentages and averages to highlight findings

6.4.3.3 Comparing results across different cohorts

6.4.3.4 Identifying unexpected results or anomalies and their implications

6.4.4 Where the analysis indicates that improvements are required, these findings are included on the Continuous Improvement Register and identifies required actions and associated responsibilities and timelines.

6.4.5 Pioneer communicates findings and required actions, responsibilities and timelines to relevant stakeholders.

6.4.6 Pioneer monitors the completion of actions and document outcomes on the Continuous Improvement Register.

6.4.7 Pioneer completes a Quality Indicator Annual Summary Report for calendar year and submits to ASQA by 30 June each year.

6.5 Collect, Analyse and Act Upon Data and Feedback from Staff

6.5.1 Pioneer ensures that staff can provide feedback at all staff meetings by including an agenda item. Meetings may be whole of staff meetings or specific teams.

6.5.2 Pioneer ensures that all staff are aware that they can provide feedback outside of meetings by completing a feedback form or via email communication.

6.5.3 Pioneer identifies the need for additional ways to seek data and feedback from staff and develop and implement as required.

6.5.4 Pioneer analyses the findings of all data and feedback collected. Analysis may include:

6.5.4.1 Identifying key trends or pattens in responses.

6.5.4.2 Using descriptive statistics such as percentages and averages to highlight findings.

6.5.4.3 Identifying unexpected results or anomalies and their implications.

6.5.5 Where the analysis indicates that improvements are required, Pioneer includes these findings on the Continuous Improvement Register and identifies required actions and associated responsibilities and timelines.

6.5.6 Pioneer communicates findings and required actions, responsibilities and timelines to relevant stakeholders.

6.5.7 Pioneer monitors completion of actions and document outcomes on the Continuous Improvement Register.

6.6 Collect, Analyse and Act Upon Data and Feedback from Other Stakeholders

6.6.1 Pioneer identifies relevant stakeholders to collect data and feedback from. This may include employers, industry stakeholders and regulators as relevant.

6.6.2 Pioneer uses surveys and feedback mechanism to collect data and feedback from stakeholders. This will include:

6.6.2.1 Providing the Employer Questionnaire (quality indicator form) to employers prior to students they employ completing their course

6.6.2.2 Completing industry consultation as outlined in the Training and Assessment Policy and Associated Procedures.

6.6.3 Pioneer identifies the need for additional ways to seek data and feedback from other stakeholders and develop and implement as required.

6.6.4 Pioneer analyses and documents the findings of all data and feedback collected. Analysis may include:

6.6.4.1 Identifying key trends or pattens in responses.

6.6.4.2 Using descriptive statistics such as percentages and averages to highlight findings.

6.6.4.3 Comparing results across different cohorts.

6.6.4.4 Identifying unexpected results or anomalies and their implications.

6.6.5 Where the analysis indicates that improvements are required, Pioneer includes these findings on the Continuous Improvement Register and identifies required actions and associated responsibilities and timelines.

6.6.6 Pioneer communicates findings and required actions, responsibilities and timelines to relevant stakeholders.

6.6.7 Pioneer monitors completion of actions and document outcomes on the Continuous Improvement Register.

6.6.8 Where the analysis indicates that improvements are required, Pioneer includes these findings on the Continuous Improvement Register and identifies required actions and associated responsibilities and timelines.

6.6.9 Pioneer completes a Quality Indicator Annual Summary Report for calendar year and submits to ASQA by 30 June each year.

6.7 Additional Feedback Mechanisms

6.7.1 Feedback is sought from students and employers for all courses on the scope of registration throughout the year. Each term questionnaires are issued to samples of students and employers from each course delivered.

6.7.2 Pioneer reports student and employer satisfaction data on or before 15 January each year, to indicate the results of the previous year.

6.7.3 Pioneer calculates the competency completion data for all courses delivered in any one year.

6.7.4 Pioneer reports on the competency completion data according to policy and procedures.

6.7.5 Stakeholder feedback received informally is also used for continuous improvement purposes.

6.7.6 A collaborative working and learning environment is to be maintained by adopting an effective, interactive and open consultation process for all relevant stakeholders.

6.7.7 Marketing materials, procedures, selection criteria, admission processes and enrolment procedures are continuously improved in response to review and stakeholder feedback.

6.7.8 Administration materials, equipment and procedures are continuously improved in response to review and stakeholder feedback.

6.7.9 Student support services materials, equipment and procedures are continuously improved in response to review and stakeholder feedback.

6.7.10 All informal and formal complaints are logged and the information used for continuous improvement purposes.

6.7.11 Pioneer staff interacts with industry on a regular basis to receive formal and informal feedback. This is employed for quality assurance and continuous improvement purposes via the meetings identified in this policy and associated procedures.

6.8 Complaints and Appeals

6.8.1 Pioneer complaints and appeals handling process is responsive and acknowledges actions to be completed within set timeframes.

6.8.2 Pioneer undertakes the following quality assurance and continuous improvement actions in relation to complaints and appeals:

6.8.2.1 Pioneer conducts regular monitoring, review and reporting of complaints received, actions taken and the operation of the complaints and appeals handling process.

6.8.2.2 Pioneer uses the findings to inform its policy and associated procedures development.

6.8.2.3 Pioneer takes preventative and corrective action to eliminate the causes of complaints and appeals, as far as possible, to improve the quality of student-focused service.

7. Policy Review

7.1 Policy Review is undertaken by the CEO with input from relevant staff.

7.2 Policy reviews are identified by an annual review cycle, or through audit and continuous improvement activities.

7.3 The CEO actions the changes and updates the policies and associated procedures manual accordingly.

7.4 The CEO communicates amendments to policies and associated procedures to all relevant staff via email and/ or staff meetings.

7.5 Changes will be recorded in the updated version control and Document History.

8. Responsibilities

8.1 The CEO/PEO is responsible for, but not limited to:

8.1.1 Reviewing the continuous improvement form outlining changes/ recommendations.

8.1.2 Developing an agenda to incorporate the continuous improvement changes/ recommendations.

8.1.3 Undertake a monthly meeting to discuss the continuous improvement changes/ recommendations.

8.1.4 Approve or decline the request for continuous improvement.

8.1.5 Advise the Compliance Team of decisions made.

8.2 The Compliance Team is responsible for reviewing the received continuous improvement forms. This includes, but is not limited to:

8.2.1 Allocating a continuous improvement number.

8.2.2 Entering the received form into the Continuous Improvement Register.

8.2.3 Consider and note all implications or benefits relating to the changes/ recommendations.

8.2.4 Advise the CEO/PEO on the continuous improvement changes/ recommendations.

8.2.5 Enter the CEO/PEO's approval for changes/ recommendations on the Continuous Improvement Register.

8.2.6 Implement the approved changes/ recommendations accordingly.

8.2.7 Advise the relevant stakeholders that changes have come into effect and receive confirmation that they have understood the changes made and what is required.

8.2.8 Close off the entry in the Continuous Improvement Register.

8.2.9 Make annual reviews of items based off the Quality and Compliance Schedule.

8.3 The Administration and Student Services Staff are responsible for, but not limited to:

8.3.1 Providing students, stakeholders and staff with a copy of the continuous improvement form if requested.

8.3.2 Advising relevant staff members and stakeholders via email regarding the monthly meetings.

8.3.3 Prepare meeting agenda.

8.3.4 Distribute meeting minutes to all relevant staff and stakeholders.

8.3.5 File all meeting requests and agendas against the relevant continuous improvement entry on the Continuous Improvement Register.

8.3.6 File all confirmations from relevant staff members and stakeholders that they have read and understood the changes coming into effect against the continuous improvement entry on the Continuous Improvement Register.

8.3.7 Provide relevant and appropriate support and assistance to students when applicable, or to refer the student to the most appropriate person.

8.4 The Trainers and Assessors are responsible for, but not limited to:

8.4.1 Contribute to continuous improvement activities as required.

8.4.2 Have planned professional development activities for the year relating to training and assessment duties. These activities are recorded with supporting documentation and placed in staff member's files.

8.4.3 Participate in annual performance reviews, with results documented.

8.4.4 Participate in and complete staff development activities as a result of performance reviews.

Any complaints or breaches in relation to this document should be reported to the Chief Executive Officer in person or by email to: ceo@pioneercollege.edu.au

Document History:

Version No.	Issue date	Nature of Amendment	Approved By
1.0	1 Jul 2025	*As per implementation of the Revised 2025 Standards for RTOs, all related documentation is reset to version 1.0 to reflect alignment with the updated regulatory framework.* Creation of Document.	CEO
1.1	24 Jul 2025	Document edited.	CEO
1.2	16 Sep 2025	Document review from feedback.	CEO
1.3	16 Jul 2026	Review made. Minor updates to cover page and formatting.	CEO

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