MODULE 10

QUALITY ASSURANCE OF TRAINING PROVIDERS

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1. Registering Training Providers (TP)

Most nations have a process for gate keeping the approval or registration of training organisations. However these processes vary in terms of level of scrutiny, parameters reviewed, for example program design, program materials, skills of practitioners, program facilities; and complaints processes and outcomes of graduates.

Terminology matters: it is not the same thing to go through a registration process, an approval process, an accreditation process or an affiliation process. The difference lies in the degree of scrutiny the TP submitted and in the range of services they are allowed to propose. An affiliation process might be limited to recognizing the existence of the TP, whereas an accreditation process might cover the right to develop official qualifications.

Approaches for quality assuring TPs.

The provider has a defined continuous improvement strategy that requires the collection and analysis of data. The strategy includes implementation of continuous improvement activities for training and assessment. An accredited training organisation collects, analyses, and acts on relevant data for continuous improvement of training and assessment.

An accredited training providers will develop quality standards and/or quality guidelines and will undergo regular assessment either through self-evaluation of through approval and inspection approaches or a combinations of those. The Information System is often viewed as supplementary but it is very expensive to develop and to maintain, especially for small training providers.

Quality standards for an accredited TP might look like this:

1. The provider has strategies in place to provide quality training and assessment across all of its operations as follows:

   1.1 Strategies for training and assessment meet the requirements of the relevant VET accredited course and have been developed through effective consultation with industry.

   1.2. Staff, facilities, equipment, and training and assessment materials to be used by the provider meet the requirements of the VET accredited course and the provider's own training and assessment strategies and are developed through effective consultation with industry.

   1.3 The provider has a defined strategy, procedures and measures to ensure training and assessment services are conducted by trainers and assessors who:

      (a) have the necessary training and assessment competencies as determined by the National Quality Body;

      (b) have the relevant vocational competencies at least to the level being delivered or assessed;

      (c) can demonstrate current industry skills directly relevant to the training/assessment being undertaken; and

      (d) continue to develop their vocational education and training (VET) knowledge and skills as well as their industry currency and trainer/assessor competence.

   1.4. The provider has a defined strategy and procedures in place to ensure that assessment, including Recognition of Prior Learning (RPL):

      (a) will meet the requirements of the relevant VET accredited course;

      (b) will be conducted in accordance with the principles of assessment and the rules of evidence;

      (c) will meet workplace and, where relevant, regulatory requirements; and

      (d) is systematically validated.

2. The provider has strategies in place to adhere to the principles of access and equity and to maximise outcomes for its students, as follows:

   2.1. The provider has a strategy in place detailing how it will establish and meet the needs of students. The organisation establishes the needs of clients, and delivers services to meet these needs.

   2.2. The provider has a strategy in place for the implementation of continuous improvement of client services informed by the analysis of relevant data.

   2.3. The provider has in place a process and mechanism to provide all students information about the training, assessment and support services to be provided, and about their rights and obligations, prior to enrolment or entering into an agreement.

   2.4. Where identified in the learning and assessment strategy, the provider has engaged or has a defined strategy in place to engage with employers or other parties who contribute to each learner's training and assessment on the development, delivery and monitoring of training and assessment.

   2.5. The provider has a defined process and mechanism in place to ensure learners receive training,

assessment and support services that meet their individual needs.

2.6. The provider has a defined process and mechanism in place to ensure learners have timely access to current and accurate records of their participation.

2.7. The provider has a defined complaints and appeals process that will ensure learners' complaints and appeals are addressed effectively and efficiently.

3. The provider has in place management systems that will be responsive to the needs of clients, staff and stakeholders, and the environment in which the accredited provider will operate, as follows:

   3.1. The provider has a strategy in place detailing how the management of its operations will ensure students receive the services detailed in their agreement with the provider.

   3.2. The provider has a defined strategy for the implementation of a systematic continuous improvement approach to the management of operations.

   3.3. Where applicable, the provider has a defined process and mechanism to monitor training and/or assessment services provided on its behalf to ensure that it complies with all aspects of the VET Quality Framework.

   3.4. The provider has a defined strategy and process to manage records to ensure their accuracy and integrity.

4. The provider has adequate governance arrangements, as follows:

   4.1 The provider must demonstrate to the National VET Regulator;

      (a) what its intended objectives as an accredited VET provider are;

      (b) that it has undertaken business planning, and

      (c) the continuing viability, including financial viability, of its proposed operations.

   4.2 The provider must also demonstrate how it will ensure the decision making of senior management is informed by the experiences of its trainers and assessors.

   4.3 The provider's Chief Executive must identify how he or she will ensure that it will comply with the VET Quality Framework and any national guidelines approved by the National Quality Body. This applies to all of the operations within the provider's intended scope of operation.

5. Interactions with the National VET Regulator (these standards depend on the structure for the national Quality Assurance system incorporating a Regulatory Body)

   5.1 The application for registration must be accompanied by a self-assessment report of the provider's compliance with the VET Quality Framework.

   5.2 The provider's Chief Executive must identify how it will ensure that the provider will co-operate with the National VET Regulator:

      (a) in the conduct of audits and the monitoring of its operations;

      (b) by providing accurate and timely data relevant to measures of its performance;

      (c) by providing information about significant changes to its operations;

      (d) by providing information about significant changes to its ownership; and

      (e) in the retention, archiving, retrieval and transfer of records consistent withthe National VET Regulator's requirements

6. Compliance with legislation

   6.1 The provider identifies how it will comply with relevant legislation and regulatory requirements relevant to its intended operations and its intended scope of registration.

   6.2 The provider identifies how it will inform staff and clients of the legislative and regulatory requirements that affect their duties or participation in vocational education and training.

7. Strategy for certification, issuing and recognition of qualifications & statements of attainment

   7.1 The provider identifies how it will issue to persons whom it has assessed as competent in accordance with the requirements of the VET accredited course, a VET qualification or VET statement of attainment (as appropriate) that:

      (a) meets the National Skills and Qualification Framework requirements;

      (b) identifies the accredited provider by its national provider number

      (c) includes any required national logo

   7.2 The provider confirms that it will recognise the NQF and VET qualifications and VET statements of attainment issued by any other accredited provider.

   7.3 The provider retains client records of attainment of units of competency and qualifications for a period of 30 years.

   7.4 The provider identifies how it will provide returns of its client records of attainment of units of competence and qualifications to the National VET Regulator on a regular basis, as determined by the National VET Regulator.

   7.5 The provider meets the requirements for implementation of a national unique student identifier (if one is identified).

8. Strategy for accuracy and integrity of marketing

   The provider demonstrates that its proposed marketing and advertising of NQF and VET qualifications to prospective clients is ethical, accurate and consistent with its scope of registration.

   N.B. Standards relating to finance and insurance etc. will need to be determined

Coverage	Austria	Sri Lanka	Singapore	New Zealand	South Africa
a. Learning resources	✓	✓	✓	✓	✓
b. Trainers and Managers	✓	✓	✓	✓	✓
c. Facilities	✓	✓	✓	✓	✓
d. Equipment	✓	✓	✓	✓	✓
e. Assessment		✓	✓	✓	✓
f. Financial/governance		✓	✓	✓	✓
g. Graduates outomes		✓	✓	✓	
h. Students services		✓		✓	✓
i. Employers and student satisfaction	✓	✓	✓	✓	

Box 16: Qualifications Framework of training providers in selected countries

AUSTRIA

- Quality seals (Qualitätssiegel) were introduced in Upper Austria as an initiative of the Adult Education Forum, the umbrella organisation of all non-profit providers in the region. Criteria related to:
  - the nature of training
  - the qualifications of management and instructors
  - the curriculum and physical facilities, and
  - feedback from students.
- Based on criteria, certified auditors examine different aspects of any organisation seeking a quality seal.
- This system of self-regulation is now linked to the provincial government scheme of individual learning vouchers whereby vouchers only be used for training by organisations with the seal.
- ARQA-VET, the Austrian Reference Point for Quality Assurance in Vocational Education and Training

SRI LANKA

Quality criteria identified by the Tertiary Vocational Education Council:

- Auditors, soon to include self-assessment
- Registration of training providers
- Accreditation of courses
- Registered assessors
- Linked to the NVQF
- In process of second review phase

SINGAPORE

- Approved Training Organisation (ATO) - recognized by the Workforce Development Agency (WDA) to deliver training and/or assessment services under Workforce Skills Qualifications (WSQ)
- Training Organisations wishing to offer WSQ programmes must satisfy the accreditation criteria two quality dimensions:
  - Pre-delivery Approval – accreditation ensures courses approved satisfies the competency requirements and is accessible through appropriate delivery modes and resources. Ensures that the course is delivered by quality training organisations using suitably qualified trainers and assessors.
  - Continuous Improvement Review –ATO is expected to pursue continual improvement to uplift the quality of design and delivery. WDA validates the internal quality assurance system and capability of the ATO on a regular basis.

NEW ZEALAND

- Administered by the New Zealand Qualifications Authority
- Responsible for the quality assurance of all education and training delivered outside universities
- Key features: - Registration is a separate process to approval and accreditation
  - registration of providers, approval to deliver unit & assess standards & qualifications from the National Qualifications Framework
  - A letter of support Industry Training Organisation (ITO) or other standard-setting body
  - Evidence of compliance with ITO Accreditation and Moderation Actions Plans (AMAPs)
  - accreditation of other courses
  - Industry Training Organisations (ITO) register workplace assessors.

SOUTH AFRICA

- Administered by the South African Qualifications Authority
- Legislation but a phasing-in approach
  - accommodate historically & statutorily separate stakeholders and processes in the TVET system
  - build on the strengths & benefits of different structures and systems to ensure short and long term implementation of the National Qualifications Framework are met; and
  - requirements ensure that there are continual and incremental quality improvements in the learning system.
- registration of providers
  - approval to deliver unit & assess standards from the National Qualifications Framework
  - accreditation of courses

2. Self Assessment:
Key component of a Quality Management System to determine achievement of objectives on effectiveness/ efficiency

Self assessment is a major tool to identify opportunities for improvement on a continuous basis. It builds a reflective practitioner approach (a culture of assessment). It is based on the selection of a site visit team who designs and prepares site visit based on the self-evaluation report. As showed in the table, the result is either Accredited or Agreed Implementation Plan. Under no circumstances should self-assessment become an end in itself. Self-assessment becomes all the more powerful when results are transformed into a development plan. It aims at measurement, whereas AQIP are aimed at quality improvement. The agreed timelines must allow for realistic implementation.

The risk assessment strategy determines the risk of non-compliance through regular monitoring and attention through audit, with the aim of improving performance outcomes. It reduces the burden of administration and rewards training providers who are serious about quality. Specific operating context may also affect risk - qualifications leading to licensed outcomes (such as welding) may be assessed as high risk. Managing the risk requires data collection and retrieval/ analysis. Risk relates to the potential impact on the delivery of quality training and assessment services.

The risk assessment process includes four key steps:

1. **Identification** of indicators of risk to be used in the risk assessment process

2. **Risk assessment,** involves consideration of the potential impact if quality training and assessment services and outcomes are not delivered & likelihood of this occurring – risk rating

3. **Response:** assessment of applications, audits and monitoring of training providers are sources of risk information. The risk rating is used to determine the scheduling and scope of audits and other monitoring mechanisms

4. **Ongoing review:** QA body will review any information that may change the outcome of a risk assessment.
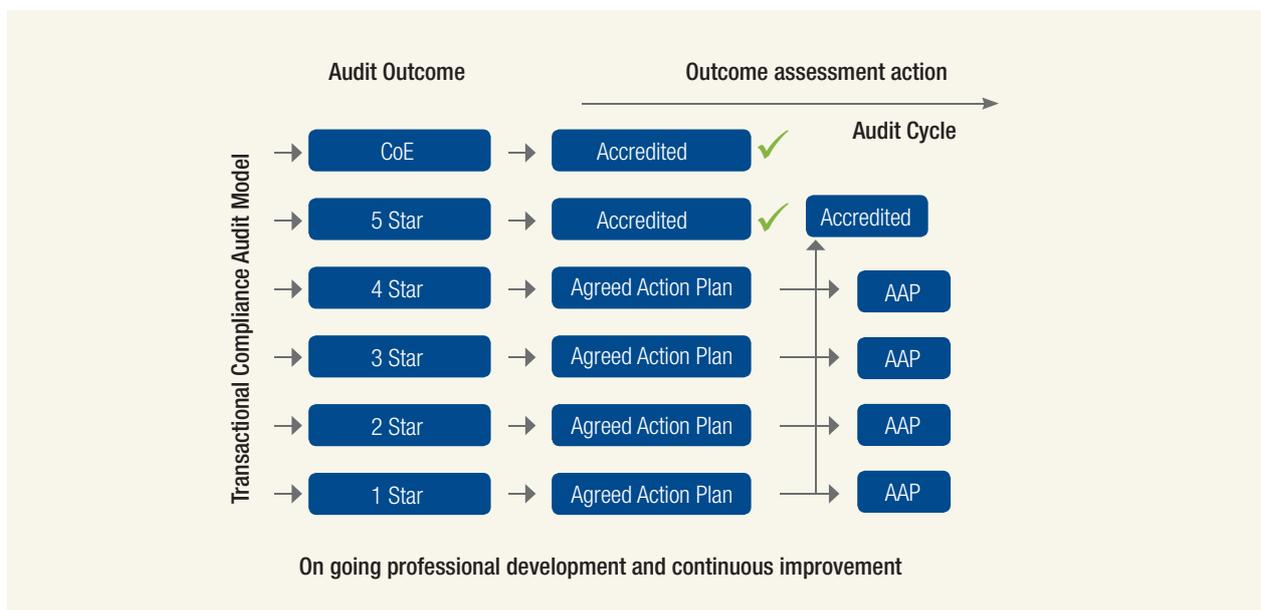
RISK ASSESSMENT RESPONSE:

Rating	Possible responses
Extreme	Immediate action required by the QA body of a type determined appropriate by the QA body
High	Intolerable risk. Applicant / training provider to be audited and monitored. Other mitigation strategies may also be applied (conditions placed on the training provider's accreditation, etc) as deemed appropriate by the QA body
Medium	Risk mitigation through a program of audit and/or monitoring activity
Low	Tolerable risk. No specific audit activity required and may include a no audit option

3. Audits

Audits serve a compliance approach – they measure whether quality standards are met or not met and allow

Figure 24: Audit of Training Providers

On going professional development and continuous improvement

monitoring of quality improvement. They are performed either by the regulating body or through a third party. Auditors have to be trained and the process need to be moderated. Many countries apply some form of risk assessment rating to minimise the audit burden but there are variations in methodologies.

Managing non compliance: how each nation addresses issues arising with non-compliant providers varies, as does the level of information provided to the consumer in this regard. In New Zealand it is possible to view provider summary audit reports within the NZQA website at the profile of each provider but these are summaries and are included only if the private provider approves. The Ontario College Quality Assurance Service provides access to very brief executive summary reports of public providers that include a conclusion of the findings, determination of compliance against their five criterion.

4. SKYPE Session
The VET Regulatory Journey in Australia (Stephen Auburn)

How training provider audits are undertaken and what is involved

Standards for Registered Training Organisations (RTOs) 2015

1. The RTO's training and assessment strategies and practices are responsive to industry and learner needs and meet the requirements of training packages and VET accredited courses

2. The operations of the RTO are quality assured.

3. The RTO issues, maintains and accepts AQF certification documentation in accordance with these Standards and provides access to learner records.

4. Accurate and accessible information about an RTO, its services and performance is available to inform prospective and current learners and clients

5. Each learner is properly informed and protected.

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

7. The RTO has effective governance and administration arrangements in place.

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

See *Users' Guide* for more information

Trainers and Assessors

The Standards establish the requirements for:

- Specified training and assessment qualifications
- Vocational competency at least to the level being delivered and assessed
- current industry skills directly relevant to delivery
- current knowledge and skills in vocational training and learning

Special requirements to those RTOs delivering training and assessment qualifications

Auditors

Based on *ISO 19011 Guidelines for auditing management systems*

Standards for VET Regulators 2015 specify qualifications for auditors:

- Certificate IV in Training and Assessment (or its successor) and MUST include:
  - Design and develop assessment tools (or its successor);
  - Design and develop learning strategies (or its successor); and
  - Lead assessment validation processes (or its successor).

- Diploma of Quality Auditing (or its successor) and MUST include:
  - Participate in a quality audit (or its successor);
  - Initiate a quality audit (or its successor);
  - Lead a quality audit (or its successor); and
  - Report on a quality audit (or its successor).

Types of audits

1. **Registration audit:**
   - Initial registration as an RTO
   - Renewal of registration as an RTO
   - Change of scope of registration of an RTO

2. **Compliance audit:**
   - Compliance Monitoring
   - Compliance Monitoring – Complaint
   - Post initial

3. **Strategic industry review audits**

Scope audit and allocate audit team

ASQA management:

- Reviews risk management tool that led to decision to conduct audit

- Uses Business rules for scoping an audit to inform size and scope of audit (which standards and which training products on scope of registration to be sampled) and which auditor/s might be best suited

- Determine desk audit or site audit

- Allocate auditor or audit team (Note: auditors may be staff auditors or panel auditors)

The audit process

1. Plan the audit

2. Conduct the audit

3. Report on the audit

PLAN THE AUDIT

Auditor:

- Reviews audit scope

- Contacts RTO to set date for site audit and the sends formal Notification of Audit by email confirming the Standards to be audited and the training products to be sampled (10 to 20 days' notice)

- Request the following evidence be provided before the site audit (at least 10 days in advance):

  - Strategies for training and assessment for sampled training products

  - A copy of any agreements for third party to delivery or assessment

  - Details of each trainer and assessor's qualifications, training/assessment & vocational competence and industry currency - as relevant to the sampled training products

  - A copy of the organisation's marketing materials relevant to the sampled training products

  - Student Handbook

- Sample assessment tools and instruments are not requested before site audit

CONDUCT THE AUDIT

- An audit samples part of an RTO's business and the audit findings are considered to represent its broader operations

- It is the RTO's responsibility to provide evidence of compliance - it is not the responsibility of the audit team to locate evidence

Auditor:

- Develops audit plan and timetable:

  - Different audit approaches may be used e.g. continuous improvement, student journey

- Undertakes desk audit of evidence requested (any non-compliances identified are used to guide further inquiry at the site audit – not an opportunity for the RTO to rectify non-compliances

Site audit

- Conduct opening meeting using *Audit verification form – opening and exit meeting* which the RTO CEO signs (*see handout*)

- Auditor:

- Conducts audit using audit plan and schedule

- Gather and review evidence:

- documents

- Interviews with management, trainers, assessors

- May interview past or current students, employers

- Student files and records especially of completed assessment instruments and tools

- May take photographs

- Uses triangulation approaches ("not just words on paper")

- Provides verbal feedback as the audit progresses (no surprises at the end)

- Uses the Standards, evidence guidance in audit report template and ASQA Users' Guide

- Auditor conducts exit meeting using *Audit verification form –opening and exit meeting:*

- *the purpose and scope of the audit*

- *an overview of the audit process that has occurred*

- *the main areas of non-compliance*

- *that the audit findings will be reviewed within ASQA prior to the audit report being provided to the RTO*

- *the audit report process and timeframes*

- *the proposed rectification process (if non-compliances have been identified) and timeframes*

- *obligations of the RTO to implement any required rectifications across all operations, not only in the areas audited*

- Note: This is not the opportunity for the provider to provide rectification evidence.

REPORT THE AUDIT

- ASQA report template used
- Exception reporting – only non-compliance detailed (changed over time – previous Standards had a continuous improvement focus and auditors could make recommendations for improvement)
- Overall audit findings: Compliant / Not Compliant
- Include recommendation of overall level of non-compliance:
    - Minor non-compliance - minimal or no serious adverse impact on learners
    - Significant non-compliance - indications of a serious or potentially serious adverse impact on learners
    - Critical non-compliance - actual or potential critical adverse impact on learners

WHAT NEXT

If compliant, auditor drafts recommendation to Regional Manager Compliance

If non-compliant

- RTOs given 20 working days to submit rectification evidence
- Rectification evidence usually analysed and reported by original auditor
- If still non- compliant, auditor drafts recommendation to Commissioner:
    - To refuse application (initial registration, renewal or change of scope)
    - To impose a sanction:
        - Impose/ vary conditions of registration (e.g.

must keep assessment records for X period)
- Give notice of an intention to impose an administrative sanction (e.g. The RTO is not to enrol any new students in any qualifications on its scope of registration)
- Impose an administrative sanction
- Allow withdrawal of registration

FURTHER OPTIONS

- RTO may submit Request for Reassessment (fee payable) with additional evidence
- New auditor allocated and Regional Compliance Manager who was not involved in first decision (fresh eyes)
- Auditor analyses documents relating to the first decision and undertakes a compliance assessment of the new evidence submitted.
- Completes *Evidence analysis template* and makes recommendation to Commissioner
- Commissioner makes decision
- If still non-compliant RTO given notice of an intention to impose a sanction
- RTO may appeal the decision to impose a sanction and provide more evidence
- New auditor allocated – similar process (fresh eyes)
- If still non-compliant, the RTO's only recourse is to the Administrative Appeals Tribunal

ASQA requirements of Auditors

- Participate in 4 days of moderation per annum
- Ongoing professional development as auditors
- Maintain currency in VET

Figure 25: The national Regulatory journey so far

Compliance with standards by existing RTOs - Audits of Existing RTOs 1 October 2013- 31 March 2014
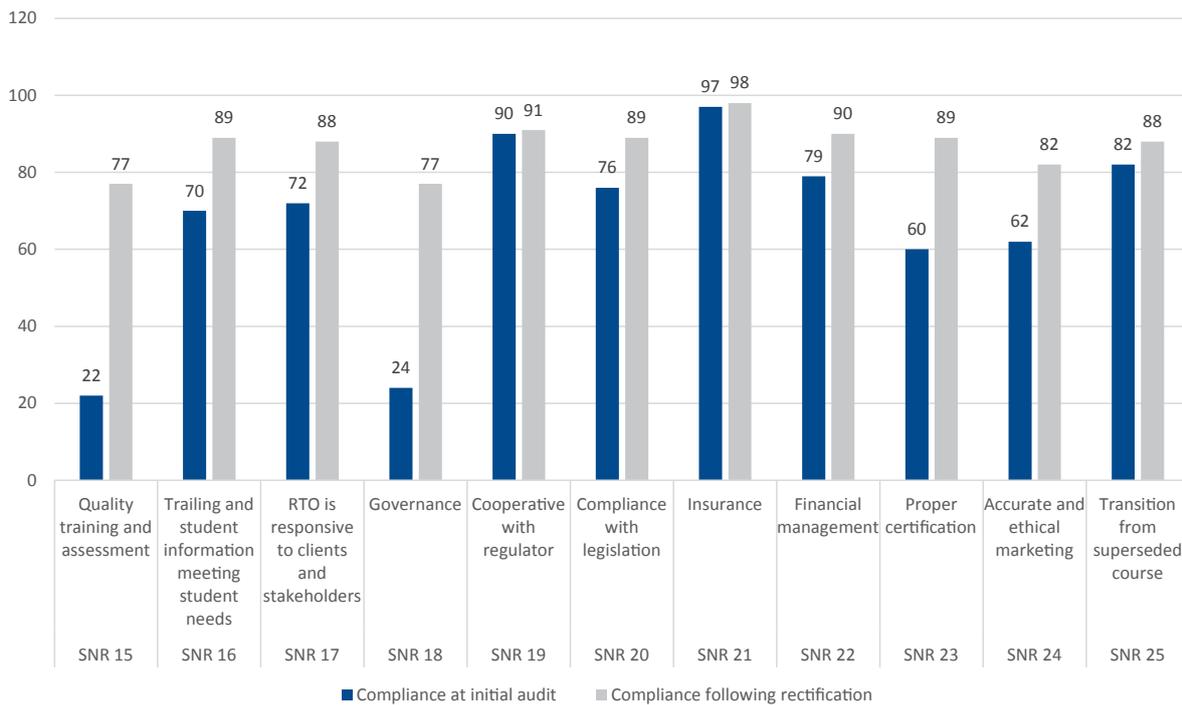
Conclusions from the first three years of vet regulations.

Three groups have emerged in the Australian VET sector.

- High quality providers who fully comply with the required National Standards (around 20% providers)

- Providers who want to comply with the National Standards but who experience some difficulty at least at initial audits (around 60% providers)

- Providers who do not provide quality training and are unwilling or unable to comply with the National Standards (around 20% providers)

- Most providers –some 80%- are experiencing some difficulties with doing assessment properly

- About one-third of providers appear to be offering courses that are too short to unable sufficient quality delivery to ensure quality skills are obtained

- The transactions-based regulatory approach is too slow a way to focus adequately on poor quality providers.

FURTHER READINGS

- ISO 19011 Guidelines for auditing management systems

    Standards for VET Regulators 2015

- European Parliament; Council of the European Union (2009a). Recommendation of the European Parliament and of the Council of 18 June 2009 on the establishment of a European quality assurance reference framework for vocational education and training. *Official Journal of the European Union*, C 155, 8.7.2009, pp. 1-9. http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:C:2 009:155:0001:0010:EN:PDF

- HANDBOOK FOR VET PROVIDERS-Supporting internal quality management and quality culture, CEDEFOP 2015

- Ishikawa, K. (1985). *What is total quality control? The Japanese way*. New Jersey: Prentice-Hall.

- Krueger, R. A. (1994). *Focus groups: a practical guide for applied research*. Los Angeles: Sage Publications.

- Nonaka, I., Toyama, R., Byosiére, P. (1994). A theory of organisational knowledge creation: understanding the dynamic process of creating knowledge. In: Dierkes, M. et al. (eds) (2001). *Handbook of organisational learning and knowledge*. New York: Oxford University Press, pp. 491-517.