West Moreton Hospital and Health Service
Registered Training Organisation - Provider 40745

Guidelines Manual

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West Moreton
Health

Queensland
Government

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Division	Queensland Centre for Mental Health Learning
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About us

West Moreton Hospital and Health Service (WMHHS) is a Registered Training Organisation (RTO). The Queensland Centre for Mental Health Learning (Learning Centre) is the unit based within WMHHS authorised to develop and deliver training to mental health, alcohol and other drugs health professionals to grow, develop, and nurture Queensland's skilled and sustainable mental health alcohol and other drugs workforce to provide a quality recovery focused approach to care.

Registered Training Organisation code

The WMHHS RTO code is 40745.

Contact us

(07) 3271 8837 **or** qcmhltraining@health.qld.gov.au

Business objective

The Learning Centre's mission statement is to continue to grow, develop, and nurture a skilled and sustainable mental health workforce to provide a quality recovery focused approach to mental health care.

There are four key areas under which the Learning Centre's strategic and operational plans are developed and all activities align to these areas:

1) **people:** ensure learning centre staff are valued, developed and empowered to deliver excellent public service

2) **profile:** maximise collaborative partnerships, research and marketing to ensure the learning centre is recognised as a leader in mental health education

3) **processes:** build efficient and effective processes, systems and business strategies to provide a sustainable service

4) **products:** deliver contemporary best practice mental health education that adheres to a quality assurance framework and improves clinical practice.

Scope of registration

There is one nationally accredited course on the WMHHS scope of registration. This course, 10881NAT Course in Observing and Documenting the Mental State Examination, is accredited by the Australian Skills Quality Authority (ASQA) and listed on the national register at https://training.gov.au/Organisation/Details/40745

Each five years the Learning Centre must apply to ASQA for renewal of the accredited course. The renewal application includes an in-depth review of the need for the course, content currency and that the outcomes of the course meet current industry standards.

Legislation

To achieve national consistency in registering and monitoring RTOs and the enforcement of standards in the vocational education and training (VET) sector, the VET Quality Framework, is adhered to. The framework consists of:

- *Standards for Registered Training Organisations (RTOs) 2015*—standards to ensure nationally consistent, high-quality training and assessment across Australia's VET system

- *Fit and Proper Person Requirement 2011*—which specify the suitability requirements of individuals involved in the operation of a RTO.
- *Financial Viability Risk Assessment Requirements 2011*—which relate to training organisations' ability to meet financial viability requirements
- *Data Provision Requirements 2012*—which sets out the requirement for providers to supply ASQA with data upon request, and to submit quality indicator data annually
- *Australian Qualifications Framework*—which is the national policy for regulated qualifications in Australian education and training.

Source: https://www.asqa.gov.au/about/asqa/key-legislation/vet-quality-framework

Standards

Other standards relevant to the work of the Learning Centre are the National Safety and Quality Health Service (NSQHS) Standards.
- Standard 1: Governance for Safety and Quality in Health Service Organisations
- Standard 2: Partnering with Consumers
- ACHS Standard 11: Service Delivery
- ACHS Standard 13: Workforce Planning and Management
- ACHS Standard 14: Information Management
- ACHS Standard 15: Corporate Systems and Safety.

Privacy and data

The Learning Centre's privacy and data management statement is detailed within the terms and conditions, available from the information link on our website.
https://www.qcmhl.qld.edu.au/ **Responsibility**

To ensure the continued high quality of accredited training and assessment, the Learning Centre strictly adheres to the *Standards for Registered Training Organisation (RTOs) 2015.*

Accredited course

Overview

The accredited course, 10881NAT Course in Observing and Documenting the Mental State Examination, consists of one unit of competency – NAT10881001 Observe and document the mental state examination. The course was developed to address an industry need and does not have the depth to provide a full qualification. A statement of attainment is provided upon full attendance at the one-day course, and successful completion of the assessment. (Refer recognition of prior learning (RPL) for alternative completion).

Benefit

This accredited course is an industry specific course, written to support the learning and development of mental health, alcohol and other drug, health professionals.

VET accredited courses are assessed by the ASQA as being compliant with the *Standards for VET Accredited Courses 2012* and the *Australian Qualifications Framework* (AQF). ASQA endorsement provides recognition of the quality and robustness of the course.

Purpose of the course

The 10881NAT Course in Observing and Documenting the Mental State Examination is intended to provide learners with the knowledge and skills needed to objectively report the mental state examination. The mental state examination is a core clinical tool used by mental health and alcohol and other drugs practitioners to:

- make clinical observations according to nine core components
- interpret clinical observations as well as describe observed mental state signs and symptoms
- record observational evidence of a person's mental state signs and symptoms
- record examples of mental state signs and symptoms as well as the person's own words to clarify the nature of observations.

Non-accredited training

The Learning Centre delivers a range of courses offering practical foundation knowledge for staff working with people experiencing mental health and alcohol and other drug problems, as well as specific skills focusing on consumer safety and mental health recovery.

The Learning Centre clearly identifies which training is accredited, and which are not, through the course descriptions on the service's website and associated marketing.

Target audience

Whilst Queensland Health mental health, alcohol and other drugs staff are the primary target audience, training is available, and highly appropriate to:

- clinicians, practitioners and mental health, alcohol and other drugs workers from other Queensland Health services who provide a service to, or support, people experiencing mental health issues
- mental health clinicians/practitioners from other Government services and departments
- mental health clinicians/practitioners of non-Government (private) services
- staff and support services who work with consumers of mental health services in other capacities, or who in their line of work assist people experiencing mental health problems
- university students on placement in mental health services.

1. Marketing and recruitment

1.1 *Standards for* Registered *Training Organisations (RTOs) 2015*

Clause 4.1 – Provide accurate and accessible information to prospective and current students.

1.2 Accurate and clear information

The Learning Centre clearly identifies accredited and non-accredited training in all marketing outlets. The code and title of an accredited product, as recorded on the national register, is duplicated in all marketing and recruitment products.

1.3 Nationally Recognised Training logo

The Nationally Recognised Training (NRT) logo may be used to promote training within the WMHHS scope of registration, that is recognised under the VET Quality Framework.

The logo is not associated with training excluded from the scope of registration (i.e. non-accredited training), and is not used on products such as stationery, business cards, building signage, mouse pads, or pens.

Only Australian Qualifications Framework (AQF) certification documentation depicts the NRT logo. The logo is not depicted on any other certificates.

The NRT logo is used in accordance with the conditions of use specified in appendix 4 of the *Standards for Registered Training Organisations (RTOs) 2015*, including:

- promoting training recognised under the VET Quality Framework, provided training is within the scope of registration
- impressions are not made that may lead an observer to conclude the NRT logo applies to all training provided, where this is not the case
- the logo is not used where training is accredited, but it is outside the scope of registration
- where training is promoted but does not meet the requirements stipulated in the *Standards for Registered Training Organisations (RTOs) 2015*, or is outside the scope of registration, it is made clear that the NRT logo is not associated with that training.

1.4 Australian Qualifications Framework

Nationally recognised training and assessment leading to the issuance of an AQF certification document, is clearly distinguished from any other training or assessment delivered.

All marketing and advertising materials contain, where applicable, confirmation that the Learning Centre recognises AQF qualifications and statements of attainment issued by another RTO.

Any statement about the duration of an accredited product is accurate and consistent with the amount of training identified in the course document/training package and complies with the AQF volume of learning requirements.

Any reference to NRT is made only to an AQF qualification, accredited course, skill set or unit of competency that is on the scope of registration.

Only AQF certification documentation depicts the NRT logo. The logo is not depicted on any other certificates.

1.5 Pre course information

The accredited course has a pre course information booklet that covers the following information:

- the code, title and currency of the training product as published on the national register
- terms and conditions, including fee information regarding payment, deposit and refund processes, and any statutory 'cooling off' period
- the training and assessment and related supported services the Learning Centre can provide
- process for issuance of AQF certification documentation
- the Learning Centre's obligations to the learner
- learner rights, including the complaints and appeals process
- learner obligations, including meeting requirements to enter and successfully complete accredited training, and materials or equipment they must provide.

1.6 Advertising

The code and title of any training product, as published on the national register, is included whenever referred to in marketing and advertising materials.

Only when a non-current training product remains on the scope of registration are those details used in marketing and advertising.

In accordance with the *National Vocational Education and Training Regulator Act 2011*, where all or part of a VET course is promoted, or an offer to provide all or part of a VET course is made, the name and provider code of the RTO awarding the qualification/statement of attainment is included.

Where a VET course is being promoted, that may be offered by multiple RTOs, the name and code of all RTOs that may issue certification are included in marketing outlets.

1.7 Opt-out

An 'opt out' option is included in all electronic marketing and advertising releases.

1.8 Consent

Written permission is obtained from any person or organisation featured in marketing or advertising materials, in name or image, through the completion of the Queensland Government consent form. This form is retained on the Learning Centre's network drive for a period of five years.

1.9 Guarantee of completion

The Learning Centre, or an approved third party, does not guarantee:

- a learner will successfully complete a training product
- a training product can be completed in a manner which does not meet the requirements of Clause 1.1 and 1.2 of the *Standards for Registered Training Organisations (RTOs) 2015*
- a learner will obtain an employment outcome, where this is outside the control of the Learning Centre.

A training product that enables a learner to obtain a licensed or regulated outcome, is undertaken only where this has been confirmed by the respective industry regulator in the jurisdiction in which it is being advertised.

1.10 Third party arrangements

All partnership arrangements are recorded on the official WMHHS Memorandum of Understanding (MoU) document. The MoU clearly details marketing and advertising responsibilities of the third party named in the agreement.

A third party may undertake local activities related to the recruitment of potential learners. However, all advertising and marketing must follow the Learning Centre's procedure. If a third party is recruiting prospective learners on behalf of the Learning Centre, this is made clear to a prospective learner in the marketing materials.

Marketing materials clearly distinguish when training and assessment is being delivered by a third party on behalf of the Learning Centre; or when the Learning Centre is delivering training and assessment on behalf of another RTO.

The Learning Centre ensures, through monitoring practices, any marketing undertaken by a third party meets requirements of Clause 4.1 of the *Standards for Registered Training Organisations (RTOs) 2015.*

Concise information disseminated by the Learning Centre, or on the Learning Centre's behalf by an agreed third party, is enforced by the Learning Centre checking, through the measures listed below.

- Information accurately represents services provided and training product/s on the scope of registration. A non-current training product is only referred to while it remains on the scope of registration.
- All branded materials display the RTO provider number.
- Other persons or organisations referred to/used in marketing are used only when written consent of that person or organisation is obtained.
    - Evidence of consent is retained in a secure location on the Learning Centre's network drive.
    - Should the Learning Centre include information about learners in social media (including any photos where a learner can be recognised), a release clause in the permission form giving the Learning Centre permission to use photos in public material is obtained. Evidence of consent is retained in a secure location on the Learning Centre's network drive.

1.12 Printed materials

The RTO name and provider code are clearly visible on printed marketing and advertising products. The NRT logo is included only when advertising a training product on the scope of registration.

1.13 Website

The Learning Centre's website is consistently maintained, with content kept up to date. The website displays contact menu options.

The RTO name and provider code are prominently included in the footer (or header) of every page. On any page referencing an accredited training product, the code and title of the product as recorded on the national register, is used. The NRT logo is used only in association with a training product on the scope of registration. Only non-current training products are advertised while that product remains on the scope of registration.

1.14 Social media

All social media communications include the RTO name and provider number. Replies to comments made in response to communications do not require the RTO name or provider number. When advertising references a specific training product, the code and title of the training product is included and where relevant, duplicates details on the national register.

1.15 Online directories

Within any RTO directory listing, the WMHHS RTO name and provider number are included.

1.16 Online advertisements

When advertising online, the WMHHS RTO name and provider number are included. Any reference to an accredited training product accurately reflects product details as recorded in the national register.

1.17 Television/radio

When advertising thorough television or radio outlets, the WMHHS RTO name and provider number are included, for example, as a disclaimer at the end of the advertisement. If a learner is speaking in the Centre's advertising, in support of/on behalf of the Centre, their written consent is obtained prior to the advertisement and the consent form retained on the Centre's network drive.

1.18 Record keeping

Copies of marketing and advertising material are retained on the network drive for a period of five years. This allows evidence to be presented as part of a regulator audit or in the investigation of a complaint.

1.19 Access to information

All marketing material is reviewed and approved by the RTO High Managerial Agent (HMA)/Business Manager, Learning Centre, prior to final approval by the RTO CEO/Director, Learning Centre.

The Learning Centre provides clear, current, accurate and accessible information about the services provided, and training products on the scope of registration. Prospective learners, or third parties, are well-informed of services provided prior to, or upon confirmation of their enrolment or commencement.

Course information is developed internally and uploaded to the Learning Centre website and used in promotional material. Current and/or potential learners may access this information to identify suitable training options.

Learners, and potential learners may contact the Learning Centre directly to make training course enquiries. Learning Centre staff respond to enquiries with accurate and current responses, in a timely manner, ensuring the learner can make an informed decision.

Printed and electronic materials may be distributed on the Centre's behalf by an approved third-party. The Learning Centre accepts responsibility for marketing and advertising by an approved third party, by ensuring the requirements of the *Standards for Registered Training Organisations (RTOs) 2015* are met, and honours all commitments made in the marketing or advertising materials.

2. Enrolment

2.1 *Standards for* Registered *Training Organisations (RTOs) 2015*

Clause 5.1: Prior to enrolment or the commencement of training and assessment, whichever comes first, the RTO provides advice to the prospective learner about the training product appropriate to meeting the learner's needs, taking into account the individual's existing skills and competencies.

Clause 5.2: Prior to enrolment or the commencement of training and assessment, which comes first, the RTO provides, in print or through referral to an electronic copy, current and accurate information that enables the learner to make informed decisions about undertaking training with the RTO and must contain minimal content (as described in the standards).

Clause 5.3: Where the RTO collects fees from the individual learner, either directly or through a third party, the RTO provides or directs the learner to information prior to enrolment or at commencement of training and assessment, whichever comes first, and specific details must be advised.

2.2 Course information

Learners/potential learners may readily access information to assist them in selecting suitable training courses from the Learning Centre website. Alternatively, they may contact the centre directly to obtain advice about the most relevant course for their needs.

The **accredited course**, 10881NAT Course in Observing and Documenting the Mental State Examination*,* has a designated pre-course information booklet. This booklet is freely available at the website link to the course. After reading the booklet, prospective learners can decide if this training will meet their needs, based on their existing skills, knowledge competencies and support requirements.

This booklet is provided as a soft copy to each learner, upon confirmation of their enrolment in accredited training. Within the confirmation email, it is recommended to learners that they read the booklet prior to attending training as it contains detailed information relevant to VET accredited training.

Non-accredited courses do not have pre-course information booklets.

2.3 Quality assured training and assessment

Training and assessment practices meet requirements under the *Standards for Registered Training Organisations (RTOs) 2015*. In developing, and reviewing, the Centre's system for training and assessment formally consultation is undertaken with industry stakeholders. Feedback from these stakeholders is used to ensure course content meets current industry practice.

Enrolled learners are emailed pre- and post-training evaluations to complete online. A follow-up three-month evaluation, to record learning retention and transfer to the workplace, is emailed to each learner. Data from these evaluations are collated and reported to Learning Centre management team. Respective reports provide trends and key findings for management to act on and findings inform the Learning Centre's continuous improvement cycle.

To support a learner's education and their completion of the assessment, they are encouraged to seek assistance and support from the educator. The assessment component of this course consists of short answer questions and practical tasks. There is no 'on-the-job' component.

During the training session, information regarding the assessment is provided, and learners are provided with adequate training and resources to answer questions correctly and comprehensively. They are advised that they must work independently when recording responses to questions, in the online assessment, and reminded to answer all questions in full.

Assessment practices are validated through the following activities:

- Qualified educators/assessors meet monthly to discuss marking practices to ensure consistent assessment judgements are produced. During these meetings any differences in assessment judgements, and other concerns, are discussed through to resolution.

- Formal validation of the tool/s used to assess learners, is undertaken annually (more if the tool has undergone changes/modifications). Membership at these meetings will include qualified educators and assessors; and/or other industry stakeholders to ensure course materials are current, accurate and meet the need of industry.

2.4 Language, literacy and numeracy

As a government enterprise training organisation, and based on entry requirements, it is a reasonable expectation that learners enrolling in training offered through the Learning Centre, hold the required language, literacy and numeracy (LLN) skills, as they will have attained tertiary level qualifications prior to employment in their respective fields.

For accredited training, course entrants are expected to have existing knowledge and skills, as detailed in the course document and pre-course information booklet. The pre-course information booklet provides advice that the centre is unable to provide LLN support.

2.5 Change to agreed service

With respect to any change to terms and conditions, a minimum 30 day's notification of the change is widely disseminated to prospective and existing learners through, for example, the following outlets:

- website update
- e-newsletter
- e-alert
- email communications to educator contacts in each health service
- email communications to all contacts in the centre's database.

2.6 Training logistics

Where a change to training delivery details occurs, e.g. venue, time, third party arrangement or the unplanned cancellation of training due to extenuating circumstance, notification is immediately sent to all enrolled learners via short message service (SMS/text), by email to their nominated account/s and phone call to their nominated contact number. Course details on the website are immediately updated.

2.7 Fees

Clear and accurate information relating to fees and charges is available on the centre's webpage/learning management system portal, which is accessible prior to enrolment.

Full terms and conditions, including the fee structure, is readily available from the Learning Centre's website. The terms and conditions statement cover:

- fees that must be paid, including how and when to pay these
- terms and conditions of payment
- fee payment methods and records
- refunds; cooling off period; fee credit; and how to apply
- transfer of fees paid
- Tuition Assurance Scheme (currently not applicable)
- evidence of unconditional financial guarantee (currently not applicable).

2.8 Fee protection

Payment is made through the enrolment process on the learning management system. Payment conditions are as per the current advertised terms and conditions.

The Learning Centre will meet requirements set out in *Standards for Registered Training Organisations (RTOs) 2015,* Standard 7.3, Requirements for Fee Protection, Schedule 6 if at any time the Centre requires, either directly or through a third party, a prospective or current learner to pre-pay fees more than a total of $1500 (being the threshold prepaid fee amount),

The Learning Centre currently does not collect more than $1500 in pre-paid fees from any individual learner.

2.9 Fee complaints and queries

Any unresolved payment concerns are escalated as a priority to the Learning Centre's Business Manager, for timely resolution.

2.10 Fee refund

Refunds are processed in accordance with the current advertised terms and conditions.

2.11 Other fees and charges

There are currently no other fees or charges applicable, e.g. replacement certificate or statement fee, administration fees, materials fees.

2.12 Student loans and government funding

The Learning Centre does not offer student loans, or offer training associated with government funding arrangements.

In the event the Learning Centre plans to move to offer loans for learners enrolled under a loan or delayed payment arrangement (including a VET student loans arrangement). the Learning Centre will clearly state the terms of the arrangement including:

- any debt that may be incurred
- when repayment is required and the corresponding conditions
- any associated feed, indexation or interest.

In the event learners access any government funding entitlement that may reduce their ability to access such funding in the future (such as arrangements that limit funding to one qualification for a person), this information will be provided before enrolment.

2.13 Support to learners

At enrolment, prospective learners are requested to advise of any support requirements, by detailing these in the online enrolment form. Learners will be contacted by the centre's Business Support Assistant to clarify support required to successfully complete the course. The centre will make every attempt to meet additional supports but cannot guarantee to be able to do so on every occasion.

If after enrolment, a learner becomes concerned about their learning abilities they are to immediately contact the Business Support Assistant to discuss potential options.

2.14 Reasonable adjustment (assessment)

If a learner has a concern or query about their ability to complete the course assessment, it is preferred they request assistance through the online enrolment form. If no prior arrangements are made, the learner is to speak to the educator prior to commencement of the training session.

Assistance provided by an educator/assessor, will be under the rules of reasonable adjustment. Any assistance provided will not give an unfair advantage to any learner and will be offered in a discrete manner.

If a learner believes they have not received support appropriate to their needs, and within reasonable adjustment parameters, they are encouraged to contact the Learning Centre's Program Manager.

2.15 Complaint submission and management

The Learning Centre strives to provide a rewarding learning experience. If you are not satisfied with our service or a product you may lodge a complaint.

For full details on lodging a complaint, please refer to the Complaints and Appeals Process document on our website, at
https://www.qcmhl.qld.edu.au/course/process/Complaints_and_Appeals_Process.pdf

2.16 Appeal

If you are not satisfied with an assessment result, you have the right to appeal the decision.

For full details of the appeal process, please refer to the Complaints and Appeals Process document on our website, at
https://www.qcmhl.qld.edu.au/course/process/Complaints_and_Appeals_Process.pdf

2.17 Learner obligations

Through the on-line enrolment process, learners are to identify any support needs they have. The Learning Centre contacts these individuals to ascertain if the centre can meet their needs or whether external supports need to be followed up by the learner.

Detailed information on all training offered (accredited and non-accredited) is contained in the course catalogue, which is freely available from the centre's website.

2.18 Discrimination and harassment

The Learning Centre provides environments free from discrimination and harassment. If during training, a leaner believes a discriminatory or harassment event has occurred, they are asked to report it immediately to the educator, and/or contact the Learning Centre's Program Manager on (07) 3271 8837.

2.19 Inappropriate behaviour

The Code of Conduct for the Queensland Public Service (QPS) outlines accepted behaviours of learners, regardless of whether they are Queensland Health employees or from the wider community. The Code of Conduct is available from:
http://www.premiers.qld.gov.au/publications/categories/policies-and-codes/code-of-conduct.aspx

Learning Centre educators have the right to ask a person displaying behaviour that a reasonable person would consider unwarranted, and which contravenes expected behaviours outlined in the QPS Code of Conduct, to leave the training venue. If a person is asked to leave, the educator will ensure, within reason, the safety and wellbeing of that person. A learner whose enrolment is terminated under these circumstances is not entitled to a refund of fees paid. The Learning Centre Program Manager has the final decision on a learner's right to partake in a future training session.

If a learner feels they have been unfairly dealt with, they are encouraged to lodge a grievance in writing via email to QCMHLTraining@health.qld.gov.au addressed to the Learning Centre's Program Manager.

2.20 Disciplinary procedures

Learners who are unruly, offensive, or conduct themselves in a disrespectful manner toward educators or fellow learners, will be offered one warning to cease their behaviour. If the behaviour continues it will result in their being asked to leave the training and their enrolment will be cancelled without avenue for reimbursement.

In the event of disciplinary action, the educator will respond in the first instance. If further action is required, the Learning Centre's Program Manager and the learner's line manager will be contacted. A record of interview may be held in the learner's training file.

2.21 Accredited course entry requirements

Entry requirements are stated in the pre-course information booklet and course catalogue which are freely available from the centre's website. Alternatively, learners/prospective learners may contact staff at the training support officer at the centre, to clarify entry requirement concerns or questions.

Entrants must be working in mental health, or currently studying towards a mental health qualification, and the mental state examination is within their current or anticipated scope of practice. Supplementary to this, due to the varying extent of mental health service provision, anyone who may benefit from understanding the core components of the mental state examination will not be excluded from enrolling. Learners are asked to refer to the scope of practice statement in this booklet.

It is desirable applicants seek advice about the relevance of this course to their professional development needs, from their supervisor/team leader.

As an **enterprise training organisation** providing training to mental health professionals, or those studying to work in the field on mental health, meeting pre-enrolment criteria for accredited training is based on the reasonable expectation that prospective learners have attained required knowledge and skill level through completing university studies.

2.22 Essential entry requirements

Entrants must be working in mental health or currently studying for a mental health qualification and the mental state examination is within their current or anticipated scope of practice.

2.23 Recommended entry requirements

Entrants should have:
- prior experience working in mental health, alcohol or other drugs services
- a good command of written and spoken English
- good clinical observation skills
- knowledge of cultural and other differences among persons accessing mental health, alcohol or other drugs services
- familiarity with the purpose of the mental state examination tool
- experience in conducting risk and capacity assessments in a clinical setting and knowledge of the domains of risk

- knowledge of the purpose of the comprehensive assessment.

2.24 Non-accredited course entry requirements

Some courses have pre-requisite requirements. These are noted on the Learning Centre's website. Enrolment in courses where a pre-requisite is required, is blocked for learners who have not completed the pre-requisite. Learners who believe they do not require pre-requisite training are encouraged to contact the Learning Centre to discuss their enrolment.

Pre-requisite requirements are detailed in the course catalogue. The catalogue is freely available from the centre's website.

2.25 Enrolment confirmation

Confirmation of enrolment is provided by email to account nominated by the learner. The confirmation email contains information on:

- the code and title of the course
- the duration of the training
- the location of training
- any third-party details, if training is delivered by a third party.

2.26 Recognition of prior learning

Applicants seeking to enrol in accredited training may have their current skills and knowledge recognised, through the RPL process, against the requirements of the accredited course.

Intending applicants who consider they may already have the competencies described in the course unit of competency NAT10881001 Observe and Document the Mental State Examination and wish to apply for RPL are asked to contact the Learning Centre Business Support Assistant, either by email or telephone, before enrolling in the course. The Business Support Assistant will provide a RPL kit that details evidence an applicant must provide with their application.

The RPL process involves the intended applicant collecting valid evidence, and a qualified assessor making judgements on whether competency already exists. The applicant must provide a verifiable unique student identifier (USI). Applicants with incomplete evidence to support RPL may be asked to undertake the assessment component of this course to provide missing evidence. If the applicant is required to complete assessment tasks they will be completed under the supervision of a qualified assessor.

2.27 Study credit transfer

Learners are not required to repeat any unit or module in which they have already been assessed as competent, unless a regulatory requirement or license condition (including industry licensing schemes) requires this. In some cases, licensing or regulatory requirements may prevent a unit or module being awarded through a credit process.

Where a learner provides suitable evidence that they have successfully completed a relevant unit or module with any RTO, the Learning Centre provides credit for that unit or module.

The Learning Centre provides study credit to learners, for units of competency and/or modules (unless licensing or regulatory requirements prevent this) where these are evidenced by:

- AQF certification documentation issued by another RTO or AQF authorised issuing organisation, and subsequently verified
- authenticated VET transcripts issued by the Registrar
- directly viewing a USI transcript via the USI transcript service for a learner who has activated permission in the USI registry system.

Before study credit is provided, based on a qualification, statement of attainment or record of results, the Learning Centre authenticates information in the document by contacting the issuing organisation and confirming the document is valid.

The unit/s for which you are applying for credit must not have been awarded by a previous registered training organisation or higher education provider through study credit.

Study credit is granted not only for studies completed at another RTO, but at any authorised issuing organisation. In such cases, an analysis as to the equivalence of the study completed with the relevant unit/s or module/s is undertaken before any credit is granted.

Credit for previous studies is not the same as recognised prior learning.

Application for study credit transfer must be made before enrolment into accredited training. Applications for study credit transfer are to be submitted in writing and signed by the learner/applicant. Copies of original qualifications, certificates or documents must be certified by a Justice of the Peace or Commissioner of Declarations, originals for sighting by a Learning Centre staff member.

After all the required documentation is received, the Learning Centre will advise you in writing, as soon as possible, of your study credit transfer decision.

The study credit transfer application form is available from the Learning Centre website under the 'information' tab, via https://www.qcmhl.qld.edu.au/index.html

3. Learner support and progression

3.1 *Standards for* Registered *Training Organisations (RTOs) 2015*

The respective clauses are:
- **Clause 1.7:** The RTO determines the support needs of individual learners and provides access to educational and support services necessary for the individual learner to meet the requirements of the training product as specified in the training packages or VET accredited course.
- **Clause 5.4:** Where there are any changes to agreed services, the RTO advises the learner as soon as practicable, including in relation to any new third-party arrangements or a change in ownership or changes to existing third-party arrangements.
- **Clause 6.1:** The RTO has a complaint policy to manage and respond to allegations.
- **Clause 6.2:** The RTO has an appeals policy to manage requests for a review of decisions, including assessment decisions, made by the RTO or a third-party providing services on the RTO's behalf.

- **Clause 6.3:** The RTO's complaints policy and appeals policy:
    a) ensure the principles of natural justice and procedural fairness are adopted at every stage of the complaint and appeal process
    b) are publicly available
    c) ensure complaints and requests for an appeal are acknowledged in writing and finalised as soon as practicable
    d) provide for review by an appropriate party independent of the RTO and the complainant or appellant, at the request of the individual making the complaint or appeal, if the processes fail to resolve the complaint or appeal.

- **Clause 6.4:** Where the RTO considers more than 60 calendar days are required to process and finalise the complaint or appeal, the RTO informs the complainant or appellant in writing, including the reasons why more than 60 calendar days are requires, and regularly updates the complainant or appellant on the progress of the matter.

- **Clause 6.5:** The RTO securely maintains records of all complaints and appeal and their outcomes and identifies potential causes of complaints and appeals and takes appropriate action to eliminate or mitigate the likelihood of reoccurrence.

- **Clause 6.6:** Where the RTO is an employer or a volunteer organisation whose learners solely consist of its employees or members, does not charge feed for the training or assessment, and does not have in place a specific complaints and appeals policy in accordance with clauses 6.2 and 6.2, the organisation has a complaints and appeals policy which is sufficiently broad to cover the services provided by the RTO.

The Learning Centre's Business Support Assistant is the initial contact person for learners/potential learners requesting support needs. Dependant on the type, and level of support needed, the Business Support Assistant liaises with relevant staff within the centre.

3.2 Determining learner needs

When completing the online enrolment process, potential learners are asked to indicate if they have any support requirements. The Learning Centre Business Support Assistant advises the centre's Logistics Officer and educator for the specific session so range of solutions for additional support are discussed, and where possible, provided.

Limitations to supports offered are detailed in the pre-course information booklet available from the centre's website, which is also provided as an attachment to the learner's enrolment confirmation email.

3.3 Disability

Learners are asked to identify their support needs via the online enrolment form.

If a learner requests disability support via the online enrolment process, where possible, support for these instances is provided. In these instances, the centre's Business Support Assistant advises the respective educator when disability support is requested. The educator contacts the learner to discuss their needs and the centre's ability to provide appropriate supports, to identify impacts on learning and coordinate reasonable adjustment/s, e.g. for a print disability, additional tutorial, or alternate formats.

If, on the day of training, a learner identifies as having a disability which may require support services, the appropriate support may not be able to be provided.

The centre provides, where possible, equitable environments for learners with disability or medical condition impacting their ability to achieve course completion. Learners advising of special needs may not be able to attend a training session if the disability could cause occupational health and safety risks to the person and/or other learners. In some circumstances, the learner may be requested to provide health practitioner documentation providing details of their disability and functional implications.

3.4 Personal circumstances

Where personal circumstances affect an individual's learning experience, the centre provides, where possible, the required support, whilst not affording an unfair advantage. Support may include the learner's self-referral to an external professional association qualified to manage the circumstance.

3.5 Access and equity

Equal opportunity for all learners to pursue training and assessment is offered. No enrolment is discriminated against. Training attendance is accepted based on meeting course pre-requisites, entry requirements and first-in, first-served basis. The centre provides equitable training and assessment services to all learners.

3.6 Complaints - continuous improvement

Complaints, including anonymous complaints, are monitored by the RTO CEO/Director, Learning Centre to identify any trend. This information is used in the continuous improvement of services and products.

3.7 Academic misconduct

The Learning Centre is committed to upholding the Public Service Code of Conduct and to academic honesty and integrity. Assessors are vigilant in identifying possible academic misconduct. A candidate must be able to demonstrate they have presented their own assessment responses and demonstrate their valid understanding and application of subject matter.

Any instance of **plagiarism, collusion or cheating** is unacceptable and is taken seriously. Any action, or attempted action, that may result in creating an unfair academic advantage for a candidate will be investigated through discussion with the candidate, where the candidate will be asked by an assessor what they learned from scenarios and tasks. These discussions will be documented and included in the candidate's file.

Where any instance of plagiarism, collusion or cheating has been upheld, the case will be presented to the RTO CEO/Director, Learning Centre where disciplinary decision is decided. The candidate will be notified in writing of the decision and any penalty.

Penalties for academic misconduct may include, for example, a formal warning, request for re-submission of assessment work, a 'not competent' result, cancellation of course enrolment, recommendation that the candidate's line manager arrange academic counselling.

3.8 Plagiarism

Plagiarism is the act of copying and using another person's expressions or ideas, without acknowledging them. Plagiarism may be intentional or unintentional.

Unintentional plagiarism arises due to confusion over how to reference, poor literacy skills or confusion over the difference between copyright and common knowledge information.

Intentional plagiarism is when a candidate is aware, they are passing off someone else's work as their own. This includes the deliberate act of copying, pasting and presenting someone else's work/ideas/intellectual property.

3.9 Collusion

Collusion is unauthorised collaboration between learners/candidates and presenting this work as their own.

3.10 Cheating

Cheating is seeking an unfair advantage in the assessment of any piece of work. This could be copying another student's work or having another person complete assessment work on the person's behalf.

4. Training and assessment strategies and practices

4.1 *Standards for Registered Training Organisations (RTOs) 2015*

Clause 1.1: The RTO's training and assessment strategies and practices, including the amount of training they provide, are consistent with the requirements of training packages and VET accredited courses and enable each learner to meet the requirements for each unit of competency or module in which they are enrolled.

Clause 1.2: For the purposes of clause 1.1, the RTO determines the amount of training they provide to each learner with regard to:

- the existing skills, knowledge and experience of the learner
- the mode of delivery
- where a full qualification is not being delivered, the number of units and/or modules being delivered as a proportion of the full qualification.

Clause 1.3: The RTO has, for all of its scope of registration, and consistent with its training and assessment strategies, sufficient:

- trainers and assessors to deliver the training and assessment
- educational and support services to meet the needs of the learner cohort/s undertaking the training and assessment
- learning resources to enable learners to meet the requirements for each unit of competency, and which are accessible to the learner regardless of location or mode of delivery
- facilities, whether physical or virtual, and equipment to accommodate and support the number of learners undertaking the training and assessment.

Clause 1.4: The RTO meets all requirements specified in the relevant training package or VET accredited course.

Clause 2.2: The RTO systematically monitors the RTO's training and assessment strategies and practices to ensure ongoing compliance with Standard 1, and systematically evaluates and uses the outcomes of the evaluations to continually improve the RTO's training and assessment strategies and practices.

Evaluation information includes but is not limited to quality/performance indicator data collected under clause 7.5, validation outcomes, client trainer and assessor feedback and complaints and appeals.

4.2 Industry consultation

Industry stakeholders are formally consulted during the development and review of the accredited training product, assessment system and validation/moderation meetings. The accredited course undergoes a full review, one to two years after the first delivery, and approximately 12 months before the five-year accreditation period expires. Non-accredited training undergoes a full review in accordance with the management approved review schedule (approximately every 2-3 years or when required under legislative changes).

The Learning Centre aims to engage a stakeholder from each health profession discipline and a lived experience representative. Decisions on whether industry representative suggestions are implemented, or not, are recorded in the relevant meeting records.

Communications between, and feedback from, industry representatives are retained with the respective files for each product on scope. Industry representatives are given timely information regarding the outcomes from their suggestions.

Evidence to demonstrate industry consultation was completed is retained on the network, within the respective product files.

4.3 Industry engagement strategy

The Learning Centre uses a range of strategies to engage with industry stakeholders to ensure training has appropriate context, methods, resources and qualified trainers and assessors.

Industry stakeholders are invited to participate in the course review consultation process. As training reaches a broad range of health professionals, the Centre aims to engage a stakeholder from each professional discipline as well as those with lived experience. In this process, the Centre seeks industry advice on whether the training product meets the knowledge and skill needs of industry. Industry input is used to inform training delivery and assessment strategies, including the industry skill level of trainers and assessors.

4.4 How industry feedback is used

The purpose of industry engagement is for stakeholders to provide feedback relevant to the development and/or review of training and assessment strategy/ies; to gauge required educator and assessor skills and knowledge; identify appropriate resources and identify industry specific needs.

Evidence to demonstrate industry consultation has taken place is retained on the service's network.

4.5 What is a training and assessment strategy?

Each product on the RTO's scope of registration has a corresponding training and assessment strategy (TAS). Each TAS is consistent with the respective accredited product requirements and clearly identifies important aspects, including:
- the training product to which it relates

- compliance with product requirements
- the mode of delivery, for example, face-to-face, online, blended learning, workplace training
- target learner group
- capacity for reasonable adjustment
- capacity for RPL
- compliance with entry requirements, pre-requisites and licensing requirements applicable to the product being delivered, for example, language, literacy and numeracy requirements; technology literacy requirements
- mapping learning and assessment activities to each unit of competency
- duration, consistent with the AQF volume of learning
- how assessment resources are accessed
- assessment methods used
- when assessment is undertaken
- reasonable adjustment details
- all learning resources
- human resources required and available to deliver training and assessment
- any physical resources required
- consistency with advertising
- observation of course fidelity.

The TAS details the amount of training provided, consistent with the requirements of the product on scope. The amount of training provided is determined by considering:

- existing skills, knowledge and experience of a learner
- mode of delivery
- number of units and/or modules being delivered as a proportion of a full qualification, where a full qualification is not being delivered.

This enables each learner to meet the requirements for each unit of competency or module in which they are enrolled.

Each TAS details the amount of supervised and non-supervised hours that make up the amount of training and offers RPL.

4.6 Non-accredited training and assessment strategy

There is currently no TAS for any non-accredited, assessed training. However, the Learning Centre applies the same training and assessment principles of accredited training, to non-accredited training.

4.7 Assessment of learning

Accredited training assessment (including recognition of prior learning) ensures compliance with requirements of the relevant product on the RTO's scope of registration and is conducted in accordance with the principles of assessment and rules of evidence, as detailed below.

4.8 Principles of assessment

Fairness: Individual learner's needs are considered in the assessment process. Where appropriate, reasonable adjustments are applied to consider the individual learner's needs. Reasonable adjustment provides no unfair advantage to any candidate. Learners are provided with the opportunity to challenge the result of assessment and to be reassessed if necessary.

Flexibility: Assessment is flexible to the individual learner by reflecting the learner's needs, assessing competencies held by the learner, using assessment methods appropriate to the context, unit of competency, assessment requirements, and the individual.

Validity: Assessment tasks, and the respective evidence collected, align with tasks specified in the unit of competency. Tasks are industry informed to support valid assessment.

Any assessment decision is justified and based on the evidence of performance of the individual learner.

Validity requires:

- assessment against the unit(s) of competency and the associated assessment requirements covers the broad range of skills and knowledge that are essential to competent performance
- assessment of knowledge and skills is integrated with their practical application
- assessment to be based on evidence that demonstrates a learner could demonstrate the skills and knowledge in other similar situations
- judgement of competence is based on evidence of learner performance that is aligned to the unit(s) of competency and associated assessment requirements.

Reliability: Evidence presented for assessment is consistently interpreted and assessment results are comparable irrespective of the assessor conducting the assessment. To guarantee reliability, assessors use marking guides written against each assessment task.

4.9 Assessment rules of evidence

Validity: The assessor is assured the learner has the skills, knowledge and attributes as described in the module or unit of competency and associated assessment requirements.

Sufficiency: The assessor is assured that the quality, quantity and relevance of the assessment evidence enables a judgement to be made of a candidate's competency. Sufficient assessment evidence is collected to confirm the candidate's ability to undertake all tasks within the unit of competency.

Authenticity: Authenticity of assessment evidence is given through each candidate signing a declaration of authenticity. The assessor is assured that the evidence presented for assessment is the learner's own work. Assessment evidence is submitted through the candidate's access to the assessment on the learning management system.

Currency: The assessor is assured that the assessment evidence demonstrates current competency. This requires the assessment evidence to be from the present, or recent past.

4.10 Assessment competency

The candidate's competency is based on assessing current evidence of their skills and knowledge. In the case of RPL, evidence submitted is assessed and authenticated to ensure it meets current industry standards.

4.11 Not competent assessment result

If a candidate does not fully complete the assessment component within the recommended timeframe, it is at the assessor's discretion whether to offer an extension, based on the candidate's reason for requesting an extension. Each case is considered on its own merit.

4.12 Changing a not-yet competent assessment result

If a candidate receives a not competent assessment result due to not providing assessment evidence within the designated time frame they may contact the Learning Centre, via QCMHL_Assessment@health.qld.gov.au to explain their circumstance and ask for consideration of reopening their assessment.

If reopening an assessment is agreed, the assessor will advise the candidate of the terms. When the candidate submits assessment evidence within the negotiated time frame, and is marked as having successfully completed the assessment, a statement of attainment will be issued.

4.13 Assessment tool

A standard set of terms are used in developing training and assessment resources to create consistency and shared understanding. They are deliberately broad to allow maximum flexibility when it comes to developing assessment tools. Assessment tools are developed using the following components:

- context and condition of assessment
- tasks administered to the learner
- an outline of the evidence gathered from the candidate, and
- evidence criteria used to judge the quality of performance (i.e. the assessment decision-making rules/marking guide).

Learning Centre staff who develop training assessment tools ensure the tools:

- meet requirements of the unit of competency/ies
- are valid, reliable, sufficient, flexible and fair
- reflect current workplace practice
- reflect the appropriate performance standard for the level of competency
- can be adequately resourced in all locations
- can be adapted where there is a case for reasonable adjustment.

4.14 Recognition of prior learning

The RPL statement and application kit is freely available from the Learning Centre's website. Any learner wishing to apply for RPL must complete the RPL candidate kit and submit to the Learning Centre, for assessing.

A qualified educator/assessor is assigned to manage each RPL application. RPL assessment decisions are recorded in the learning management system with results documentation available to the applicant upon completion of the assessment process.

4.15 Recognition of prior learning - fees

RPL fees are charged at the one-day face-to-face training rate, to cover costs associated with securing an assessor to undertake the process. If an applicant is deemed to not achieve RPL they are offered a place at face-to-face training free of charge.

5. Online assessment of non-accredited training

5.1 Educator/assessor access

Learning Centre educators will have access to all candidate assessment files. They will be able to view results and feedback provided to candidates. They will not be able to amend previously provided feedback; however, they will have scope to change an assessment result if the candidate provides further assessment evidence within an agreed timeframe. Further information on this is noted under the following 'assessment access' section.

Training partner educators (i.e. under a MoU) will be granted limited access to the learning management system. Access is limited to learners/candidates from their respective HHS. This access will be linked to the function identifying training deliveries by partners, as entered by the Infrastructure Team.

5.2 Learner access

The learner logs into the learning management system to access the respective course page. The learner selects the course assessment they are to complete. They then need to read and accept the terms and conditions of the assessment. These are:

- 14 calendar day access to the assessment
- statement of originality
- an additional check regarding line manager details.

5.3 Timeframes

Access to assessments will be available the next business day (Brisbane time) following training completion. Assessment access is automated against the confirmation of attendance in the learning management system (LMS).

From the date the assessment is made available, candidates will have 14 calendar days to complete the assessment.

A standard extension period of seven calendar days is available by approval from an assessor, and actionable within the LMS by the same assessor. There is maximum of two extensions an assessor can allow, without referral to the Learning Centre Program Manager. Where appropriate, candidate request for an extension will be accompanied with an offer of learning support.

5.4 Assessment access

From the course page, or relevant email, the learner selects the online assessment link. This link will take them to a page displaying all assessed courses they have enrolled in and the corresponding assessment result (i.e. completed, not completed and in progress).

For previous assessments the learner can view results and assessor feedback.

Once a learner selects to complete the assessment, they may exit and return to the assessment throughout the 14-day completion period. During the 14-day period, on each entry to the course assessment page, the learner will be able to access the current assessment from the list and will continue to have the option to opt out or continue. Every assessment linked to a workshop session will be retained in the learning management system for future reference.

After the clinical educator/assessor enters the assessment result into the LMS, the candidate will have full access to the assessment, their submission and feedback for 30 calendar days from the date of marking completion. After the 30-day period, the candidate may contact the Learning Centre to request access. This will be considered on a case by case basis, to ensure that support, and the level of support, can be provided to the candidate.

5.5 Assessment opt out

The learner has the choice to opt out of completing the assessment. If they choose to opt-out they will receive a certificate of attendance. If the assessment is not attempted within the 14-day timeframe the learner is automatically opted out of the assessment.

Unless otherwise determined, no data will be collected as to why the learner opts out of an assessment.

5.6 Start assessment

The online assessment is made up of two parts. The candidate needs to successfully complete part one, before they can progress to part two. At this stage, the candidate may choose to opt out of completing the assessment. If they choose to opt out, they will receive a certificate of attendance.

5.7 Assessment Part one

The candidate is to complete each question in part one, which has automated marking. Upon successful completion of questions in Part one, the candidate can commence Part two.

5.8 Assessment Part one - re-attempt

Where candidates have not successfully completed part one, they will be able to re-attempt three (3) times, prior to receiving an initial written and automated communication which outlines suggestions for the candidate to support their completion, including:

- review of learning resources provided at the workshop
- direction to the complementary online module
- option of a brief supportive contact with a Clinical Educator.

They also have the choice here to opt out of completing the assessment.

5.9 Assessment Part one - not successful

If after a further three (3) attempts, the candidate's responses are still deemed incorrect they will receive an automatically issued result of 'not yet successful'.

The automatic communication attached to the result will provide the candidate the option of contacting the Learning Centre to discuss their result and gain relevant support. At this stage they will also receive a certificate of attendance.

If a candidate contacts the Learning Centre or their local educator at this point, an assessor will discuss their concerns with them in the context of their assessment outcomes and options to successfully complete the assessment.

If appropriate, and within the initial 14-day completion period, the assessor may reset the assessment to enable the candidate to complete part one successfully. Options to support the candidate might include:

- directing the candidate to the complementary eLearning module(s) and resources prior to attempting the assessment again

- supportive discussion with the Clinical Educator regarding course content

- clinical educator consideration of an extension, if appropriate, or workshop re-attendance if required.

A Clinical Educator may refer to a training partner educator to discuss a candidate's needs.

5.10 Assessment Part two

Part two consists of free-text responses to questions which are manually marked by assessors, with the outcome result and feedback noted in the LMS.

5.11 Assessment Part two - further evidence

Candidates are given seven (7) calendar days to provide further assessment evidence. If a candidate misses the deadline for provision of further evidence and contacts the Learning Centre, an assessor may reopen the option to provide further evidence within a further seven-day timeframe (based on learner circumstances). This process should not delay reporting to the Executive Director of Mental Health in the Hospital/Health Service and the candidate should be so advised (see following section on 'Reporting').

5.12 Assessment Part two - unsuccessful completion

If, after attempts to gain further assessment evidence, the candidate does not successfully complete part two of the assessment they will receive a 'not successful' result and a certificate of attendance.

Reporting

Executive Directors Mental Health receive a report on all learner/candidate outcomes. This report will include a statement that assessment outcomes are correct at the time of publication. Unsuccessful assessment results or opt out indicators may change as the Learning Centre offers support to candidates to successfully complete assessments (e.g. if a candidate misses a further evidence deadline, the Learning Centre may extend the deadline in extenuating circumstances).

5.13 Assessment - standard responses

Consideration is given to the development of a bank of standard feedback responses to candidate answers for part two. This may be stored in a dynamic word document for assessor reference.

5.14 Certificate of attendance

The certificate of attendance will certify hours of active learning equivalent to the length of the workshop component of the course.

5.15 Certificate of completion

Certificate of completion (available after successful completion of assessment) will certify the hours of active learning equivalent to the length of the workshop component plus 1.5 hours attributed for assessment completion.

5.16 Validation of the assessment system

The Learning Centre adheres to a five-year validation plan that ensures ongoing systematic validation of assessment practices and judgements against each product on the RTO's scope of registration. The plan specifies:

- when the training and assessment strategy is validated
- when validation of the assessment tool occurs
- when validation of assessment evidence and judgements occur
- who will lead and participate in each validation activity
- where validation meeting reports detailing outcomes of validation are saved
- how validation meeting reports are used to improve the assessment system.

5.17 Monitor and validate the training and assessment strategy

Each product on the RTO's scope of registration has a TAS. The TAS is validated by a panel of industry stakeholders 12 months after it was first introduced, and then at a minimum of once every five years to ensure it remains relevant and effective.

5.18 Assessment validation panel

Panel members may not necessarily be employees of the Learning Centre, however, as a group, they hold:

- vocational competencies relevant to the level being validated
- current industry skills
- current knowledge and skills in vocational teaching and learning
- TAE40116 Certificate IV in Training and Assessment (or its successor).

Documentation provided to the panel, to assist with validation includes:

- results of satisfaction surveys/evaluation report(s)
- qualitative feedback
- educator and assessor feedback
- quality indicator summary report
- validation/moderation results
- complaints/appeals
- course fidelity checks
- continuous improvement recommendations.

A completed copy of the validation report is signed by each panel member. All assessment validation audit findings contributing to the annual review of the TAS are identified within the respective report, with an action plan developed to address findings.

All validation documentation is retained on the Learning Centre's shared network.

5.19 Validation of assessment tool

Validation of assessment tool(s) is undertaken whenever the tool has been modified. Validation determines if:

- procedures are clear, appropriate and reflect workplace practice
- instruments are valid, reliable, fair, sufficient and flexible
- marking guides assist with comparability of assessment across assessors
- exemplars are realistic examples of acceptable levels of competence
- the RPL kit is current and reflects the above points.

5.20 Validation and moderation of assessment practices and judgements

A systematic approach is undertaken to validate/moderate assessment practices and judgements. Moderation is undertaken on a random selection of learner assessments.

Validation/moderation meetings are scheduled to ensure meeting the ASQA requirement for a statistically valid sample of assessments to be validated/moderated each year.

5.21 Validation and moderation - qualified persons

The validation/moderation group consists of one or more persons not directly involved in the instance of delivery and assessment of the training product being validated, and who collectively have:

- vocational competencies and current industry skills relevant to the assessment being validated/moderated
- current knowledge and skills in vocational teaching and learning
- the required training and assessment qualification or assessor skill set.

An educator/assessor who delivered/assessed the sample being validated can participate in the validation process, but cannot conduct the validation on their own, cannot determine the validation outcome for any assessment judgements they made and cannot be the lead validator of the group.

5.22 Validation and moderation - industry experts

Persons with considerable industry experience may be involved in validation/moderation. meetings.

5.23 Moderation of assessments

The purpose of moderation is to ensure consistency and comparability of assessment judgements across assessors. When more than one person conducts assessment in a unit of competency/qualification, these assessors regularly meet to compare assessment methods. At these meetings, assessors exchange and compare their assessment methods, evidence and judgments, and confirm the principles of assessment and rules of evidence are being used.

The meeting process is as follows:

- assessments are marked by assessors who then compare and discuss their judgements
- the marking guide, and exemplars, are used
- any examples of assessment work that may be judged as a borderline case, or raises a question, are discussed through to an agreed resolution
- assessors are to recommend changes to strengthen the assessment instrument and/or moderation process through reporting on the meeting report form, these recommendations are recorded in a database, for monitoring purposes
- the meeting report is signed by group members, the lead assessor, program manager and RTO CEO/Director, Learning Centre before being saved on the network
- after the report is signed, any recommendations for change are recorded in the continuous improvement register.

5.24 Course fidelity

Observation of course delivery fidelity is undertaken by the Learning Centre Program Manager or Instructional Designer. This quality mechanism ensures any or all the following:

- training delivery modes, set out in the TAS, are the methods used
- suitability of training materials and other resources
- training is delivered appropriately and according to the course schedule and resources.

5.25 Recruitment of educators and assessors

Recruitment, selection and appointment of educators and assessors is compliant with relevant RTO legislation, regulations and guidelines, and with Queensland Health recruitment policies and procedures. Educator and assessor credentials are verified prior to commencement of employment to ensure staff with required skills and experience are employed. Staff recruited without the required skills are supported to attend relevant training to gain the required skills.

5.26 Educator and assessor competencies

Each educator/assessor is to provide original (or JP endorsed) copies of their qualification/s, including vocational competencies at least equivalent to the level at which they are assessing. Any staff member providing training and assessment services for/on behalf of the Learning Centre holds the required training qualifications which are verified by the Centre before training is delivered.

Training and assessment of accredited training is undertaken by persons who have:

- TAE40116 Certificate IV in Training and Assessment, or
  - TAE40110 Certificate IV in Training and Assessment and one of the following: TAELLN411 or TAELLN401A and one of the following: TAEASS502 or TAEASS502A or (v) TAEASS502B.
- Vocational competencies at least to the level being delivered and assessed.
- Current industry skills directly relevant to the training and assessment being provided.

- Current knowledge and skills in vocational training and learning that informs their training and assessment.

Where a person conducts assessment only, that person has:

- TAE40116 Certificate IV in Training and Assessment or its successor; a diploma or a higher-level qualification in adult education; or
- TAESS00001 Assessor Skill Set or its successor.

5.27 Professional development of educators and assessors

Educators/assessors are encouraged to attend at least two skills-update sessions annually. They are to familiarise themselves with resources in the Learning Centre library and are required to keep themselves informed of current information relating to their subject material. They are encouraged to distribute information at staff meetings, to enable their research/feedback to be accessible by other educators/assessors.

Educators and assessors are supported to update their training and assessment qualification, as directed by the VET regulator. They are to undertake activities relevant to the VET sector; undertake an annual industry placement, relevant to the accredited training they deliver; and remain informed of changes to their subject material.

Educators/assessors maintain currency of their vocational education and training skills through, e.g. in-house sessions; subscription to newsletters; peer sessions. Educators and assessors must regularly and consistently record their VET and industry relevant professional development activities, in their individual portfolios. Educators and assessors must maintain current registration with their respective professional body, or eligibility for registration.

They are to participate in the 1:1 conversation (mandatory) with the Learning Centre Program Manager where the follow matters may be discussed:

- review of position description
- review of competencies
- monitoring of compliance to professional practice
- assessment of learning and development needs
- provision of adequate resources for learning and development
- management of identified performance needs.

5.28 Educators/assessors and industry placement

To maintain current industry skills and knowledge, educators and assessors undertake a mandatory one/two-week industry placement relevant to the respective accredited training product they deliver.

A formal placement agreement is completed between the educator/assessor and the host workplace. This agreement details obligations and expectations whilst on placement.

Post industry placement, educators/assessors are to:

- share with peers, the knowledge, ideas and skills gained from the placement experience
- complete the industry placement report detailing learning outcomes, and
- submit the report to the Learning Centre Program Manager for review/discussion and signing.

The completed/signed report is saved against the educator/assessor file on the service's shared network.

5.29 Educator/assessor and peer observation

It is at each educator's discretion if they undertake a peer coaching session. The peer coaching arrangement is a confidential process between two or more facilitators. As there are numerous approaches to peer observation, the intricacies of an arrangement are made between the facilitators involved.

5.31 Educators under supervision

To guarantee the efficacy of our training, the Learning Centre engages with industry stakeholders to ensure our training content aligns with current practices. To complement this, we also engage industry representatives (clinicians) as co-facilitators.

Co-facilitation is not a supervision arrangement. The Learning Centre educators lead the delivery of training, while co-facilitators provide input through their experience and knowledge of workplace practices.

If an individual, who is not a qualified educator or assessor is engaged, the individual works under the supervision of a qualified educator and does not determine assessment outcomes. An individual working under the supervision of an educator/assessor holds the required skill set and must demonstrate equivalence of vocational competencies at least to the level being delivered and assessed, and current industry skills directly relevant to the training and assessment being provided.

The RTO CEO/Director, Learning Centre determines and takes responsibility for:

- the level of the supervision required
- any requirements, conditions or restrictions considered necessary on the individual's involvement in the provision of training and collection of assessment evidence
- when educators/assessors providing supervision are accountable for training provision and collection of assessment evidence by the individual under their supervision.

5.32 Third party arrangement

A third party is any party providing a service on behalf of the Learning Centre but does not include a contract of employment between the Learning Centre and its employee.

A service is explained as providing training, assessment, educational and support services, and/or activities related to the recruitment of prospective learners. It does not include services such as learner counselling, mediation or information and communication technology support.

Services provided on the Centre's behalf by a third party are subject to a written agreement. All written agreement proposals are reviewed, and prepared by, the RTO HMA/Business Manager, Learning Centre and endorsed by the RTO CEO/Director, Learning Centre. All partnership arrangements are recorded using the approved WMHHS MoU.

Each MoU is signed by approved signatories from each party. After it is signed by all signatories, it is saved on the network and made available to ASQA upon their request.

In endorsing a third-party partnering agreement (a.k.a. sub-contract or memorandum of understanding) the RTO CEO/Director, Learning Centre ensures the agreement contains:

- the extent of mutually agreed conditions for training and assessment
- the provision of due diligence to support and monitor the third party's performance and progress, that is clearly documented and reviewed on a regular basis
- clear definition of each entity's responsibilities
- duration and conditions for termination of the MoU
- requirements for any advertising and marketing undertaken by the third party, including:
  - where the third party is recruiting prospective learners on behalf of the Learning Centre, this is made clear in the marketing material
  - marketing materials clearly distinguish where training and assessment is being delivered on the Learning Centre's behalf by a third party.
- requirements to cooperate with the VET regulator.

At commencement of each partnership arrangement involving accredited training, the RTO CEO/Director, Learning Centre advises the Quality and Compliance Coordinator to provide written notice of the arrangement to the VET regulator within 30 days of the partnership commencing.

At cessation of each partnership arrangement the RTO CEO/Director, Learning Centre advises the Quality and Compliance Coordinator to provide written notice of the cessation of the arrangement to the regulator within 30 days of the partnership ceasing.

All marketing clearly identifies if a third party is recruiting prospective learners on behalf of the Learning Centre. If a third party is delivering a service on behalf of the Learning Centre, this is clearly communicated/marketed to learners.

Services provided by a third party, on behalf of the Learning Centre, are monitored through a regular desk-top audit, and/or course fidelity observation and educator (peer) observation sessions.

6. Completion

6.1 *Standards for* Registered *Training Organisations (RTOs) 2015*

Clause 3.1: The RTO issues AQF certification documentation only to a learner whom it has assessed as meeting the requirements of the training product as specified in the relevant training package or VET accredited course.

Clause 3.2: All AQF certification documentation issued by an RTO meets the requirements of Schedule 5.

Clause 3.3: AQF certification documentation is issued to a learner within 30 calendar days of the learner being assessed as meeting the requirements of the training product if the training program in which the learner is enrolled is complete, and providing all agreed fees the learner owes to the RTO have been paid.

Clause 3.4: Records of learner AQF certification documentation are maintained by the RTO in accordance with the requirements of Schedule 5 and are accessible to current and past learners.

6.2 Learning Management System

The Learning Centre maintains and monitors an accurate and current learning management system. Learners are to create their own profile with the system and are to self-enrol in desired training courses.

This system manages the recording, and issuing, of learner and candidate assessment results. After a learner has been marked as attending the training session, the system issues, and notifies the learner of, a certificate of attendance.

6.3 Issuing accredited course assessment result

Assessors mark assessments using the approved marking. Candidate assessment results are noted within their online profile in the learning management system.

When a candidate has successfully completed all assessment requirements they are issued with a statement of attainment. The statement of attainment is only issued to candidates after they have fully demonstrated competence and where evidence of this is recorded in their file.

If a candidate does not successfully complete the assessment component they are issued with a transcript of results.

AQF certification documentation is available directly to the candidate, by the candidate accessing their profile on the Learning Centre's learning management system and downloading the document.

Note: As WMHHS is an enterprise RTO, upon enrolment each learner is advised that their results will be forwarded to their nominated line manager and stated in their health service two-monthly reports.

6.4 Unique student identifier – assessment result

Unique student identifier (USI) details are verified by the Learning Centre prior to issuing a statement of attainment. If a USI will not verify, the statement cannot be issued until verification is resolved.

6.5 Revoking an assessment result

In accordance with the AQF, the Learning Centre has controls in place to ensure statements of attainment and records of results are not issued unless the learner/candidate has completed all requirements. However, an error may occur, and the Centre may need to revoke a statement of attainment where a candidate has not completed all the requirements. For non-accredited training, the certificate of achievement may be revoked. If this occurs, the candidate will be offered opportunity to complete assessment requirements and will not be charged a fee beyond the original enrolment fee.

6.6 Issuing non-accredited course assessment result

Educators mark assessments using the approved marking guide. The assessment result is recorded in the learner's online profile in the learning management system. When a learner has successfully completed all assessment tasks for non-accredited training they are issued with a certificate of achievement. No assessment result is issued for an

unsuccessful completion.

The certificate of achievement is available directly to the learner, by the learner accessing their profile on the Learning Centre's learning management system and downloading the document.

Note: As WMHHS is an enterprise RTO, upon enrolment each learner is advised that their results will be forwarded to their nominated line manager.

6.7 Timeframe for issuing assessment result

Assessment completion certification for **accredited training** is issued within 30 calendar days of the candidate completing their final assessment work, or upon their exiting the course, providing all fees have been paid.

The Learning Centre aims to issue assessment completion certification for **non-accredited training** within 30 calendar days of the candidate completing their final assessment work.

Assessors are rostered to undertake marking and respond to questions emailed from learners/candidates. The status of marking is reported each week to the assessors and the Learning Centre Program Manager who are responsible for monitoring the 30-calendar day timeframe.

6.8 AQF qualifications issuance policy

The NRT logo is a distinguishable mark of quality for promoting and certifying national vocational education and training leading to AQF certification documentation. The NRT logo is a registered trademark and is only used in accordance with the terms of use. The Learning Centre meets all AQF terms when issuing AQF qualifications and statements of attainment, and in marketing of accredited training.

6.9 Certification format

All AQF certification meets requirements of Schedule 5 of the *Standards for Registered Training Organisations (RTOs) 2015*. A NRT logo check sheet is used when developing accredited training assessment result templates.

The NRT logo is not used for non-accredited assessed course certification.

6.10 Record retention

Accredited training learner and candidate files including respective AQF certification documents are retained for a period of 30 years.

Non-AQF certification and respective learner assessment files are saved for a period of five years.

6.11 Record reporting

Reports of the issue of AQF certification, are provided to the VET regulator, as determined by the regulator.

6.12 Transcript of results

The transcript of results lists assessment results against the respective unit/s of competency from the relevant training package, or accredited course.

6.13 Certificate of attendance

Each learner marked as being in full attendance at training has access to download a certificate of attendance from their profile on the learning management system.

If a learner has attended only part of the training session, a certificate of attendance is not available. In this instance, upon the learner's request, a written statement reflecting the hours of attendance can be provided as proof of attendance.

6.14 Unique student identifier

The Learning Centre adheres to USI legislative requirements. Learners attending accredited training must provide a USI in their enrolment form prior to attending the course. This USI is verified by the Learning Centre before the learner's enrolment is confirmed.

In complying with the USI initiative, learner USI's are collected and verified before a qualification or statement of attainment is issued for any nationally recognised training completed.

Privacy and security of USIs and related documentation is ensured by restricting access to this information to only those staff requiring it as part of their work. All staff comply with the Code of Conduct for the Queensland Public Service, which covers maintaining information privacy.

The Learning Centre does not apply for a USI on behalf of any learner.

If a learner has exemption from providing a USI they are informed, upon confirmation of their enrolment, that their result is not accessible through the Commonwealth, and will not appear on any authenticated VET transcript prepared by the Registrar. Any USI that does not verify, negates the issue of AQF certification documentation until the number is verified.

Should a learner attend accredited training without providing their USI, assessment results are not issued until such time a verified USI is received. If no verified USI is received, no assessment result is issued.

Note: Assessment includes collection and analysis of evidence for recognition of prior learning. Provision of a verified USI applies to the RPL process**.**

7. Governance framework

7.1 *Standards for* Registered *Training Organisations (RTOs) 2015*

Clause 7.1: The RTO ensures that its executive officer or high managerial agent(s) are vested with sufficient authority to ensure the RTO complies with the RTO standards at all times and meet each of the relevant criteria specified in *the Fit and Proper Person Requirements 2011* in Schedule 3.

7.2 Underpinning principles

The Learning Centre's governance framework consists of a combination of systems and processes that lead quality performance. The framework ensures the continuous improvement to the quality of products and services through:

- tracking overall performance
- meeting delivery of outcomes

- accountable and open practices in meeting the requirements of law, regulations, published standards; and by
- engaging stakeholder feedback.

Accountability: Learning Centre staff are answerable to decisions made and have appropriate mechanisms in place to ensure adherence to all applicable standards.

Transparency: The Learning Centre has clear procedures, roles and responsibilities for making decisions and exercising power.

Integrity: Learning Centre staff are expected to act impartially, ethically and in the interests of the Learning Centre and its customers.

Efficiency: Learning Centre staff make the best use of resources to further service goals.

Leadership: The Learning Centre holds a commitment to good governance which is achieved through effective leadership.

Direction: The Learning Centre's purpose and direction are developed through consensus, with goals achieved through planning and resource allocation.

Alignment: The Learning Centre's functions, structures and culture align with organisational goals, as detailed in the Learning Centre's operational plan.

Expectations: The Learning Centre has a whole-of-team understanding of performance and behavioural expectations which are achieved through effective communication and the implementation of best practice.

Delivery: The Learning Centre's quality service delivery is achieved through effective resource management, systems monitoring, product review and reporting processes.

Improvement: The Learning Centre's organisational and individual performance are improved through review, intervention, planning for capacity building and internal control mechanisms.

Risk management: The Learning Centre takes a risk management approach which is adopted as an integral part of daily activities.

Working to the governance framework ensures compliance with set standards; identifies sub-performance and products (then investigates, improves and monitors change); records, plans and drives continuous improvement; ensures delivery of best practice through thorough research and evaluation and identifies and manages risks to the quality of services.

7.3 Governance framework - strategic, business and financial planning

The Operational Management Committee (OMC) provides strategic planning through the development of periodic operational plans. This team provides leadership through reflecting the Learning Centre's mission, direction and performance expectations. Their responsibilities include the provision of strategic guidance through ratification of the Learning Centre's:

- strategic, operational, business and financial plans
- memorandum of understanding (partnership agreements)
- external reporting (Quality Indicator Summary; *Australian Vocational Education and Training Management Information Statistical Standard* (AVETMISS) data; ASQA reporting; and Statewide Health Service reports)
- risk management planning
- workforce planning
- workplace safety and wellbeing
- RTO guidelines manual
- continuous improvement register/system

- self-assessment reporting and monitoring.

7.4 Governance meetings

Within the Learning Centre the following governance meetings are held:
- Operational Management Committee
- Whole of team
- Training Delivery and Development Group
- Quality Advisory Group.

Meeting records are retained in line with the WMHHS, Legal and Corporate Governance Division, committee guidelines. These records are retained on the Learning Centre's network drive.

7.5 Operational Management Committee

The Operational Management Committee (OMC) is the single decision-making group in the Learning Centre. These meetings are held monthly. OMC membership consists of:
- RTO CEO/Director, Learning Centre (Chairperson)
- RTO HMA/Program Manager, Learning Centre
- RTO HMA/Research Manager, Learning Centre
- RTO HMA/Business Manager, Learning Centre
- Secretariat.

Scope and functions of this committee are to:
- ensure the provision of high-quality training programs (online and face-to-face), training resources and associated activities which support the increased capacity of the workforce to provide quality clinical and non-clinical services
- develop, review, measure and evaluate progress against the Learning Centre's Operational Plan
- define, develop and support other strategic directions of the Learning Centre in relation to new business
- consider and define resources (human, material and financial).

Terms of reference for this committee are disseminated to all staff. Currency and accuracy of the document is maintained, with a copy retained on the Learning Centre's network drive.

7.6 Whole of team meeting

These meetings are held monthly. Membership consists of:
- RTO CEO/Director, Learning Centre (Chairperson)
- all permanent, temporary and contracted employees of the Learning Centre
- secretariat.

Scope and functions of this committee are:
- develop and review actions identified for implementing the operational plan and improvement against key performance indicators
- identify and collaboratively problem-solve procedural barriers and systemic constraints impacting performance (inter-team)
- share information and improve communication in relation to training and development, research, information systems and infrastructure

- provide a conduit where strategic objectives are communicated into operational actions and embedded into team systems/action register.

7.7 Training Delivery and Development Group meeting

The purpose of this group is to discuss operations specific to the delivery and development of training. This group has no decision-making capacity. Membership consists of:

- RTO HMA/Program Manager (Chairperson)
- RTO HMA/Research Manager
- RTO HMA/Business Manager
- Web Developer
- Clinical Educators
- Instructional Designer
- Program Delivery Coordinator
- Project Development Coordinator
- Projects and Contracts Coordinator
- Quality and Compliance Coordinator (Secretariat)
- Logistics Officer
- Resource Officer
- Business Support Assistant.

7.8 Quality Advisory Group

The purpose of this group is to progress the Learning Centre's operational plan; review status and progress of continuous improvement register requests; monitor RTO compliance; review/approve RTO resources and reports; and progress actions resulting from qualitative feedback reports.

Terms of reference for this committee are disseminated to all staff. Currency and accuracy of the document is maintained, with a copy retained on the Learning Centre's network. This group has no decision-making capacity. Membership consists of:

- Quality and Compliance Coordinator (Chairperson and secretariat)
- RTO HMA/Program Manager, Learning Centre
- RTO HMA/Business Manager, Learning Centre
- RTO HMA/Research Manager, Learning Centre.

7.9 *VET Quality* Framework *- Fit and Proper Persons Requirements 2011*

Under the *Fit and Proper Persons Requirements 2011* (FPPR) the ASQA assesses whether a person meets requirements by reviewing and considering their application against eleven criteria. Staff undertaking the role of RTO CEO or RTO HMA must complete the corresponding FPPR declaration and statutory declaration upon commencement in their role.

The Learning Centre RTO CEO ensures authorised officers are in place and meet the FPPR. In accepting a RTO CEO or a RTO HMA position, the incumbents of the positions listed below have stated they meet the suitability criteria through the completion of an appropriately signed statutory declaration:

- RTO CEO - Director
- RTO HMA - Program Manager

- RTO HMA - Business Manager
- RTO HMA - Research Manager.

The RTO CEO/Director, Learning Centre is responsible for:
- ensuring nominated staff meet, and abide by, the requirements of the FPPR
- ensuring RTO HMAs have sufficient authority to ensure the RTO complies with the *Standards for Registered Training Organisation (RTOs) 2015*
- advising the Quality and Compliance Coordinator of any new or ceasing FPPRs.

FPPR declarations are reviewed annually through the Learning Centre's self-assessment/monitoring system to confirm currency or, if required, enable re-submission of an updated declaration.

7.10 *VET Quality* **Framework** *- Financial Viability Risk Assessment Requirements 2011*

By adhering to the *Financial Viability Risk Assessment Requirements 2011* the Learning Centre demonstrates financial viability to deliver high-quality training to VET learners.

The Learning Centre OMC ensures the Learning Centre remains financially viable and is covered by public liability insurance. Delegation documentation is in place to demonstrate a manager has sufficient authority to assess financial viability. Financial viability risk, directed at evaluating the likelihood of business continuity, and capacity to achieve quality outcomes, is monitored through the Learning Centre's OMC.

Evidence of financial viability is provided to ASQA through the application for initial, or renewal of, registration as a RTO. However, ASQA may request evidence of financial viability if the RTO is considered an unacceptable level of risk.

The RTO CEO/Director, Learning Centre and RTO HMA/Business Manager hold responsibility for assessing the ongoing financial viability risk of the Learning Centre. They meet regularly to discuss the status of the Learning Centre's budget; and to review and address anomalies and other concerns. Record of proceedings shall be documented in the OMC meeting minutes.

The RTO CEO/Director, Learning Centre ensures the following securities are in place:
- where prepayment of fees, and more than a total $1500.00 per learner are required, the Learning Centre, and any third party under a MoU, meets requirements set out in the Requirements for Fee Protection in Schedule 6 of the *Standards for Registered Training Organisations (RTOs) 2015*
- requisite assets and physical resources are acquired to deliver all qualifications/courses on the RTO's scope of registration
- sufficient and appropriately qualified staff are employed to cover the delivery of courses/units of competency on the RTO's scope of registration
- appropriate levels of services are provided to learners
- remaining in business, to ensure each learner can achieve completion
- the above requirements are met, even in an uncertain environment.

7.11 Public liability insurance

The Learning Centre remains covered by Public Liability Insurance under the Queensland Government Insurance Fund (QGIF). Coverage extends to both legal costs and compensation payable, if the Learning Centre is found legally liable.

Certificates of currency are held on the Queensland Health Intranet (QHEPS) site. For further information on the cover provided under the general liability insurance section of the QGIF insurance policy and guidance on the claims process, refer to information on the following webpage http://qheps.health.qld.gov.au/finance/insurance/liability.htm

7.12 *VET Quality* Framework *- Data Provision Requirements 2012*

The Learning Centre collects and reports on a range of accurate and complete business and operations data, including quality indicator data, and total VET activity data.

The Learning Centre provides timely responses to all ASQA data requests. AVETMISS data is collected and submitted through the NCVER validation tool by the end of February each year. Quality indicator data is collected, analysed, and reported to ASQA in the quality indicator summary report before the end of June each year.

7.13 Partnership agreement – memorandum of understanding

Memorandum of Understanding (MoU) are established for any service provided on behalf of the Learning Centre. All MoU are recorded using the approved WMHHS MoU template. A MoU may include a third party providing any, or all, of the following services on behalf of the Learning Centre:

- facilitation of training courses
- assessment
- local activities related to the recruitment of potential learners.

Each MoU is reviewed by the RTO HMA/Business Manager, Learning Centre before being endorsed by the RTO CEO/Director, Learning Centre. Each MoU must be signed by approved dignitaries from each party. After the MoU is signed by all dignitaries, it is saved on the Learning Centre's network drive and made available to ASQA upon request.

In endorsing a MoU, the RTO CEO/Director, Learning Centre ensures the agreement contains:

- the extent of mutually agreed conditions for training and assessment, and provision of due diligence to monitor the third party's performance and progress, that is clearly documented and reviewed on a regular basis
- clear definition of each entity's responsibilities
- the duration and conditions for the termination of the MoU
- requirements for any advertising and marketing undertaken by the third party, including:
  - where the third party is recruiting prospective learners on behalf of the Learning Centre, this is made clear in the marketing material
  - marketing materials clearly distinguish where training and assessment is being delivered on the Learning Centre's behalf by a third party
  - where the Learning Centre is delivering training and assessment on behalf of another RTO.

7.14 Legislation

The RTO CEO/Director, Learning Centre is responsible for ensuring compliance with all Commonwealth, State and Territory legislation and regulatory requirements relevant to the Learning Centre's operations, and for ensuring staff and learners are informed of any change to legislative and regulatory requirements that affect products and services.

7.15 *Standards* for *Registered Training Organisations (RTOs) 2015*

The RTO CEO/Director, Learning Centre ensures any third party under a MoU arrangement, and the Learning Centre consistently comply with the *Standards for Registered Training Organisations (RTOs) 2015.*

7.16 Declaration of compliance to ASQA

The RTO CEO/Director, Learning Centre (referred to in Section 1 of the declaration) is responsible for accurately completing the ASQA annual declaration by providing a response to each question and to each part of each question. The declaration is completed and submitted by the RTO CEO/Director, Learning Centre by 31 March each year.

Statements and commitments made in Section 2 of the declaration cover the entire scope of operations of the RTO, including any services provided on the Learning Centre's behalf by an external organisation, either within Australia or abroad.

The annual declaration states if the Learning Centre is, or is not, meeting the requirements of the *Standards for Registered Training Organisations (RTOs) 2015*; and if the Learning Centre has, or does not have, training and assessment strategies and practices in place that ensure all current and prospective learners are trained and assessed in accordance with the requirements of *Standards for Registered Training Organisations (RTOs) 2015.*

7.17 External reporting – third party agreement

For delivery of services on behalf of the Learning Centre, the RTO CEO/Director, Learning Centre is responsible for ensuring ASQA is advised.

Advice of any MoU must be made within 30 calendar days of the agreement being entered and prior to the obligations taking effect (whichever occurs first).

The RTO CEO/Director, Learning Centre is responsible for ensuring ASQA is advised of the cancellation of any MoU, within 30 calendar days of the agreement coming to an end.

The RTO CEO/Director, Learning Centre ensures provision of all required and requested MoU data is submitted to ASQA in a timely and systematic manner and such data is accurate, current and truthful.

7.18 ASQA reporting

The Learning Centre complies with the RTO conditions of registration throughout the period of registration. These conditions can include those described within the National Vocational Education and Training Regulator Act 2011 and those imposed by the VET Regulator (ASQA).

The RTO CEO/Director, Learning Centre ensures all RTO reporting obligations are met, through:

- Providing accurate and correct responses to information requests from ASQA.
- Providing quality/performance indicator data within the designated timeframe.

- Providing information about substantial changes to operations or any event that would significantly affect the Centre's ability to comply with the *Standards for Registered Training Organisations (RTOs) 2015*, within 90 calendar days of the change occurring, including another party delivering services on the Learning Centre's behalf.
- Ensuring that any third-party delivering services on the Learning Centre's behalf is under a written agreement to cooperate with the VET regulator.
- Providing information about significant changes to the Learning Centre's ownership within 90 calendar days of the change occurring.
- Providing ASQA with information that is lawfully requested.

7.19 Quality indicator summary

Quality indicator data is collected via learner satisfaction surveys, and line manager (employer) satisfaction surveys containing Australian Quality Training Framework (AQTF) survey questions. This evaluation data informs quality assurance of training and is used to improve training and assessment practices. In compliance with the *Data Provisions Requirements 2012* the Learning Centre submits an annual quality indicator summary by the 30 June due date. Learner and employer satisfaction data and associated outcome actions is reported through this summary.

Nominated staff work together to complete and submit the summary to ASQA. The RTO CEO/Director, Learning Centre is responsible for ensuring the annual ASQA Quality Indicator Summary report is submitted by the due date.

7.20 Learner satisfaction surveys

Each learner receives a pre, post and three-month post training evaluation survey containing AQTF survey questions. These surveys are issued via a SurveyMonkey link and remains anonymous. At the beginning of each year, the SurveyMonkey evaluation form is designed by the research team. This ensures data is collected for each respective year.

Data received is managed by the Learning Centre's research team. This data focuses on the extent to which learners are engaging in activities likely to promote high-quality skill outcomes, transferability of knowledge, and skills learned, as well as their perceptions of the quality of their competency development, and the support they receive from Learning Centre staff. Qualitative feedback is provided to respective educators/trainers and the RTO HMA/Program Manager, Learning Centre.

7.21 Line manager (employer) satisfaction surveys

Each learner is requested to provide contact details for their nominated line manager in their course enrolment data. The nominated line manager is provided with the AQTF 'employer' survey seeking their voluntary assistance in completing the survey. This survey is issued via a SurveyMonkey link and remains anonymous. At the beginning of each year, the SurveyMonkey evaluation form is designed by the research team. This ensures data is collected for each respective year.

Data collection is managed by the Learning Centre's research team. This data provides information on their learner/candidate's competency development, and the overall quality of the training and assessment. Qualitative feedback is provided to respective educators/trainers and the RTO HMA/Program Manager, Learning Centre.

7.22 Clinical educator/trainer qualitative feedback

After every training delivery session, the educator provides qualitative feedback. This data is collected and recorded by the Learning Centre's research team and reviewed by the RTO HMA/Program Manager, Learning Centre who approves educator suggestions for improvement to be recorded in the continuous improvement register.

7.23 *Australian* Vocational *Education and Training Management Information Statistical Standard* data

The Quality and Compliance Coordinator runs regular data validation reports using the NCVER validation calculator, reporting necessary corrections to the Business Support Assistant and/or the Web Developer who maintain data parameters within the learning management system.

The Learning Centre submits annual AVETMISS data to the NCVER using the NCVER online data validation tool. The Quality and Compliance Coordinator prepares the NCVER submission report and submits it by the 28 February due date.

7.24 Compliance self-assessment strategy

Compliance with the *Standards for Registered Training Organisations (RTOs) 2015*, including where services are being delivered on the Centre's behalf, through a MoU, is managed through annual self-assessment and regular monitoring of internal systems and practices. The person carrying out the self-assessment is conversant with the process for conducting a self-assessment across the Learning Centre's RTO operations. Non-compliances are reported to the OMC for assigning of corrective actions. Self-assessment and monitoring activities include:

- annual quality indicator data review
- outcomes of validation/moderation meetings
- review of stakeholder feedback
- review of educator feedback
- complaints and appeals management
- systems check
- assessment of adherence to the VET quality framework through annual internal (or contracted) audit.

7.25 Internal evaluation data reviews

Review of stakeholder feedback is undertaken by specific team members, as listed below, with requests to respond to urgent matters sent to the relevant RTO HMA.

- Venue feedback form responses - Logistics Officer
- Pre training survey responses - Research Team
- Post training survey responses - Research Team
- Three-month post training survey responses - Research Team
- Multipurpose facilitation review responses - Research Team
- Learner survey responses - Research Team; and Quality and Compliance Coordinator
- Employer survey responses - Research Team; and Quality and Compliance Coordinator

- Clinical educator/trainer feedback - Research Team; and Quality and Compliance Coordinator.

All feedback representing a continuous improvement measure is recorded in the continuous improvement register. The respective line manager ensures each item is progressed through to completion.

7.26 Record keeping - retention

The Learning Centre retains records of qualifications and statements of attainment issued for a period of 30 years. During this period, sufficient data is retained to enable re-issuance of a qualification or statement of attainment.

Learner files from, and post, 2013 are securely saved as pdf documents on the Learning Centre's network drive.

Completed learner records for years 2011 and 2012 are in printed/hard copy, archived off-site in accordance with the Queensland Health standing offer arrangement with the organisation providing secure document storage and destroy services.

The following documents are retained for a period of at least five years:
- attendance rolls detailing names of learners; the unit of competency identifier and/or name; date of attendance; and signature or initial of educator
- training delivery and assessment policies and strategies for all qualifications/courses
- assessment tools and instruments
- RPL assessment records
- all NVR – RTO Policies and Procedures
- complaints, appeals, and the complaints resolution records.

7.27 Access to records

Current and past learners can access their course records. Upon written request and sufficient notice, Learning Centre administrative staff shall provide a learner with a copy of their personal learner record.

Upon receipt and confirmation of written consent by a learner, Learning Centre staff may provide a third party with a learner's personal details.

7.28 Cessation of business

In the event the Learning Centre ceases services and discontinues business, the RTO CEO/Director, Learning Centre shall ensure arrangements are in place for all learner records to be made available to ASQA.

Acronyms

AQF	Australian Qualifications Framework
AQTF	Australian Quality Training Framework
ASQA	Australian Skills Quality Authority
AVETMISS	Australian Vocational Education and Training Management Information Statistical Standard
Candidate	Learner undertaking the assessment component of the accredited course
CEO	Chief Executive Officer
FPPR	*Fit and Proper Persons Requirements 2011*
HMA	High managerial agent
LLN	Language, literacy and numeracy
MoU	Memorandum of understanding
NCVER	Nation Centre for Vocational Education and Research
NVR	National vocational education and training regulator
NRT	Nationally recognised training
OMC	Operational management committee
RPL	Recognition of prior learning
RTO	Registered Training Organisation
TAS	Training and assessment strategy
VET	Vocational education and training
WMHHS	West Moreton Hospital and Health Service

Document history

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Current version	3.3
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	3.2 June 2021 update to complaints and appeals statement.
	3.1 November 2020 internal audit rectification report; privacy statement update; co-facilitation caveat; updated complaints and appeals.
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Printed copy is uncontrolled	