



PARAMOUNT INTERNATIONAL COLLEGE

Paramount International College

RTO Code 45585, CRICOS Code 03832B

Quality Assurance Policy and Procedure

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Purpose

This policy and procedure ensure that Paramount International College has an effective quality assurance approach and systematically evaluates the services it provides to implement ongoing and continuous improvement.

This ensures compliance with Standard P8 of the English Language Intensive Course for Overseas Students (ELICOS) Standards 2018

Definitions

ASQA means Australian Skills Quality Authority, the national VET regulator and the provider's registering body

ELICOS Standards means the English Language Intensive Course for Overseas Students (ELICOS) Standards 2018

Services means teaching, assessment, related educational and support services and/or activities related to the recruitment of prospective learners.

Policy

1. Systematic Quality Approach

- Paramount International College:
 - Is committed to ensuring the quality of services provided across of all of its operations – this includes teaching and assessment services and processes, student support, customer service and effective management of the business and its staff.
 - Ensures that effective systems, policies, procedures and resources are in place to ensure the quality delivery of all services.
 - Has convened a management team, which oversees the quality of services provided.

2. Continuous Improvement

- Systematic continuous improvement is a fundamental component of the quality assurance approach used by Paramount International College.
- Opportunities for improvement will be identified through the following mechanisms:
 - Regular feedback is collected from students and staff on a regular basis and data gathered is collated and analysed. Regular feedback is collected through surveys completed at the end of a course by students and through teacher surveys which are administered twice a year.
 - Complaints and appeals will be reviewed to identify root causes of the incidents and identify areas that need improving to prevent recurrence.
 - Internal audits conducted on a regular basis will identify areas in which performance could be stronger.
 - Management meetings held will be used as an opportunity for managers to identify areas that require improvement from their knowledge and what they have learnt from staff.
 - Teacher meetings will identify areas where assessment and training systems and practices can be improved. Teacher meetings will also evaluate learning outcomes achieved.
- Improvements will be recorded and acted upon on a continual basis to ensure Paramount International College is responsive to areas that require improvement.

3. Internal Audits

- Paramount International College is required to comply with the requirements of the ESOS Act, National Code 2018 and the ELICOS Standards 2018. Regular internal audits are scheduled to monitor ongoing compliance with these requirements and ensure quality delivery.

Procedures

1. Feedback and Surveys

Procedure	Responsibility
<p>A. Collect Survey from students</p> <ul style="list-style-type: none"> A survey will be provided to students at the end of their course. Encourage all students to complete the survey. Students should hand in completed surveys at the class. Provide completed surveys to the office for collation and analysis. 	ELICOS Teachers
<p>B. Collect feedback from staff</p> <ul style="list-style-type: none"> Request for all ELICOS Teachers to complete a <i>Teacher Feedback Form</i> at least twice annually – this asks a range of questions on teaching and assessment practices. Other staff are asked to provide formal and informal feedback at any time by discussing feedback with their manager, or to make improvement suggestions, by filling in a <i>Suggestion for Improvement Form</i>. 	Director of Studies and ELICOS Teachers and other staff
<p>C. Feedback Register</p> <ul style="list-style-type: none"> The <i>Feedback Register</i> is used to record the feedback received by the provider where there is no other suitable place for it to be recorded. For example, information received during a complaint or appeal (which may be considered feedback) will go on the <i>Complaints and Appeals Register</i>. Feedback that prompts an improvement item will go on the <i>Continuous Improvement Register</i>. General feedback which may be positive or negative that doesn't require action can be recorded on the <i>Feedback Register</i>. The <i>Feedback Register</i> will be reviewed at each management meeting for discussion and reflection on how the organisation can learn from the feedback. 	Director of Studies

2. Improvements

Procedure	Responsibility
<p>A. Continuous Improvement Register</p> <ul style="list-style-type: none"> The <i>Continuous Improvement Register</i> is a master list of all the improvement suggestions identified and acted upon by the provider. Improvements identified through feedback and surveys, quality indicator data, management meetings, informal suggestions, assessment validation and complaints and appeals will be recorded on the register. The register should be updated regularly with any improvement suggestions made through formal and informal streams – such as <i>Suggestion for Improvement Forms</i>, surveys etc. At each management meeting the register will be reviewed. A plan will be put in place for implementing improvements during the meeting. Management meetings will also be used as an opportunity to identify improvements made that may not have been recorded on the register. The plan should be recorded on the register and items marked as complete once the improvement has been made. 	CEO and Head of Administration and Director of Studies
<p>B. Complaints and appeals</p> <ul style="list-style-type: none"> In line with the <i>Complaints and Appeals Policy and Procedure</i>, complaints and appeals incidents should be used as an opportunity to identify areas for improvement. Each complaint and/or appeal will be discussed at management meetings to identify root causes and identify areas in which the provider can improve and learn from the incident to 	CEO and Head of Administration

Procedure	Responsibility
prevent recurrence.	and Director of Studies
C. Delivery and assessment review – ELICOS <ul style="list-style-type: none"> ▪ The outcomes of the review sessions will be used as an opportunity to make improvements to teaching and assessment systems and practices. Actions identified during the review should be documented on the Continuous Improvement Register and discussed at the next management meeting. 	Compliance Officer

3. Management Meetings

Procedure	Responsibility
A. Schedule dates annually <ul style="list-style-type: none"> ▪ At the commencement of each year, set dates for the management meetings. ▪ Invite all members of the management team to attend. ▪ Managers who have conflicting appointments should notify the meeting organiser as soon as possible. 	CEO and Head of Administration and Director of Studies
B. Prepare agenda <ul style="list-style-type: none"> ▪ At least 1 week prior to each meeting, develop the agenda. ▪ Use the Management Meeting Agenda Template to prepare the agenda and it includes standing agenda items which are to be included at each meeting. ▪ Standing agenda items are: <ul style="list-style-type: none"> – Review of last meeting minutes – have all items been actioned? – Recent feedback received – collated surveys, feedback register. – Evaluation of appropriateness of delivery for student groups – Evaluation of evaluating learning outcomes achieved. – Complaints and appeals – discussion of any recent complaints or appeals – Continuous improvement – Recent or upcoming changes in legislation – Monitoring of changes to business or operations to inform ASQA about – Financial performance ▪ Agenda is to be approved by the CEO prior to circulation. ▪ Circulate the agenda to all managers along with any relevant attachments and reading material at least 2 days prior to the meeting. ▪ Keep a copy of the agenda. 	Administration team
C. Record the meeting minutes <ul style="list-style-type: none"> ▪ Record names of all people who attended the meeting and any apologies. ▪ Record a brief summary of key discussions, all decisions and any actions agreed upon during the meeting. ▪ The CEO is to approve the final copy of the minutes prior to circulation. ▪ The minutes with any attachments relevant to the meeting are to be circulated to all members of management team within 1 week of the meeting. ▪ Management meeting minutes must be saved. 	Administration team and Director of Studies

Procedure	Responsibility
<p>D. Follow up on actions from management meetings</p> <ul style="list-style-type: none"> ▪ Ensure items in minutes are followed up accordingly. Tasks that arise out of the management meeting should be communicated to relevant people by the relevant manager. ▪ Registers should be updated accordingly. 	<p>CEO and Head of Administration and Director of Studies</p>

Document control

Document Name	PP2.13 Quality Assurance Policy and Procedure
Version ID	<i>PIC-QA-V1.0</i>
Authored by	Compliance Officer
Reviewed and Approved by	Chief Executive Officer (CEO)
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Next Review Date	12 months after approval
ELICOS Standards	8

Summary of changes

Date	Change
01.01.2024	Full version of Quality Assurance Policy and Procedure Version ID: PIC-QA-V1.0
01.01.2024	Version ID: <i>PIC-QA-V1.0</i> Version naming convention updated to keep consistency across all policies and procedures as well as other PIC documents. Reviewed and updated against the current SRTOs and National Code Standards. Reviewed and updated according the current administrative and legal frameworks in practice. Reviewed and updated in alignment with the current administrative practice and documents in use.

Note

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