



QUALITY ASSURANCE POLICY AND PROCEDURES

Policy Statement	This policy has been developed to comply with the Tertiary Education Quality and Standards Agency (TEQSA) Higher Education Standards Framework (Threshold Standards) 2015 Standards 5 and 6 and the Standards for Registered Training Organisations (RTOs) 2015, Standard 2 which state that a provider's operations are quality assured.
Responsibility for Implementation	Executive Dean , Head of Vocational Education, Manager Risk & Compliance/Governing Board Secretary, Audit & Risk Management Committee
Compliance and Monitoring	Chief Executive Officer (CEO), Manager Risk & Compliance/Governing Board Secretary, Academic Board, Governing Board

Purpose

Kent Institute Australia (Kent) has an overarching commitment to upholding standards, meeting relevant regulatory and compliance obligations, and ensuring quality improvement of its operations - in particular relating to academic and educational activities and through its partnerships. This policy and procedures set out Kent's approaches to assuring the quality of its activities.

Responsibility for the implementation and achievement of quality assurance is through the mechanisms of the Kent governance committees structure and adherence to the Kent policies and procedures generally and Kent Risk Register. Annual processes are also utilised for feedback and review in relation to all Kent management operations.

Scope

All Kent management operations implemented by Kent staff, governance committee members, contractors or visitors.

Aim

This policy is to ensure that all Kent management operations are monitored, assured and periodically subject to review and improvement through key legislative frameworks, external standards and reference points for assuring quality (eg. Higher Education Support Act, TEQSA Higher Education Standards Framework, ESOS Act, VET Quality Framework, Australian Quality Framework)

Procedure

Continuous quality improvement is supported through a cycle of “plan, implement, review and improve” that is embedded within Kent’s planning and management approach.

Kent has a three (3)-tier framework for formal planning:

1. **Strategic Plan** developed by the Governing Board in association with the Kent Senior Executive and wider Senior Management Group (SMG) through significant Governing Board planning meetings sets the broad goals, priorities and planned developments for Kent.
2. **Operation Plans** - detailed plans that address each of the major goals of the Strategic Plan. This tier will be managed by the Chief Executive Officer and Executive Managers.
3. **CEO and Executive/Unit Managers** constitute the third tier. The plans are implemented and will be reviewed annually by the CEO and Executive/Units Managers in consultation with the academic and general personnel as part of performance planning and review within the context of plans at tiers one to three.

Plans at each level are expected to include specific strategies, objectives, actions and measures for achieving each Key Result Area (KRA) and Key Performance Indicators (KPIs) for measuring outcomes.

Proposal for developing new courses and making changes to current unit offerings are progressed through Kent’s Course Development and Approval Policy & Procedures ([Kent Website MyKent Staff Link](#)> *Staff Policies and Forms > POLICY– Course Development and Approval Policy & Procedures – Staff Login Required*). Annual course monitoring and review mechanisms are managed through the Kent governance committees in compliance with the Kent Course Monitoring and Review Policy & Procedures ([Kent Website MyKent Staff Link](#)> *Staff Policies and Forms > POLICY– Course Monitoring and Review Policy & Procedures – Staff Login Required*).

Implementation

In addition to putting into practice various plans, policies, procedures, structures and new developments, the implementation phase of the quality management system involves regular monitoring and reporting on that implementation. Systematic monitoring and reporting is a major means by which Kent can assure that its own purposes and internal standards are being met and that there is equitable and consistent application of policy and procedure across all areas of Kent activity.

Monitoring of implementation may lead to revision, amendment or adjustment of a course, policy, procedure, strategy or a plan from time to time, complementing major evaluative and other reviews within the quality management system.

The quality management system is supported by the Kent Document Register which is maintained with the administrative oversight of the Manager Governance Systems/Academic Board Secretary and is the source of listed information of the version control details included in all Kent approved documentation. The Register records document title, version control status, approval authority and designated review dates for approved Policies and Procedures and facilitates and records updates implemented in the revision processes. Communication of amended documentation to all Kent stakeholders is facilitated by the Manager Governance Systems/Academic Board Secretary and implemented through processes managed by the Executive/Unit Managers in each Kent Operation Unit.

The Executive Dean (Higher Education) and Head of Vocational Education (VET) are responsible for each course, plan, policy or procedure and have overall responsibility and accountability for its implementation and for monitoring and reporting on progress.

The Kent Chief Executive Officer and Chair of the Academic Board will manage implementation of the academic components of the Strategic Plan while specified senior staff overview implementation of tier two and Operation Plans.

The Governing Board, Academic Board and various committees also monitor progress in implementation of plans at tiers one and two. Responsibility is assigned to specific senior staff for implementation, monitoring and reporting in relation to individual strategies and actions within each plan at tiers one to three.

Management of any third party arrangements is achieved by a designated Joint Management Committee established as a component of the Delivery Partner Agreement. All Joint Management Committee meeting reports are submitted to the Academic Board and Governing Board where monitoring and review of management strategies and actions will occur. Kent auditing processes will also ensue as a requirement of the Delivery Partner Agreement.

Review

Within the quality management system, evaluative reviews are systemised and evidence-based formal reviews of the quality, standards and effectiveness of Kent's performance in a specified area or range of areas. Usually, these reviews are initiated within Kent on a regular basis, but an established mechanism has been implemented for at least an annual review of policies and procedures at governance level .

A range of other reviews such as ad hoc reviews, governance committee self-reviews and ongoing-reviews are also undertaken, including Kent's approved external referencing activities. Reviews differ from monitoring and reporting processes and revisions of plans or policies or procedures in that they are intended to include summary assessments of performance or suitability at a given time or over a particular time span and identify areas for improvement. Reviews are a major means by which Kent assesses and reflects on its own performance, policy, plans and processes (based on evidence), demonstrates accountability, and identifies its strengths and any needed or desirable improvements.

Review reports, with recommendations, form the basis for improvement plans and actions designed to address findings from the reviews. Regular reports on progress with implementing these plans are provided to relevant senior staff and referred to Governing Board, Academic Board or appropriate committees.

Feedback

Regular and frequent feedback on Kent's services and activities is systematically sought and obtained from stakeholder groups as part of Kent's quality processes. For example, feedback is sought from students, staff, graduates, partners in Kent undertakings, and external members of Kent's committees. Feedback is usually subject to systematic analysis, not only to assist in evaluating quality and satisfaction levels, but also to identify needed or desirable improvements.

The quality management system is robust in providing information to students and other stakeholders concerning the use of their feedback in contributing to changes and improvements.

Opportunities for Improvement

The quality system encompasses the need for regular and frequent discussion and analysis of findings from feedback, monitoring reports and reviews in order to identify desirable or necessary improvements in Kent operations or performance.

Staff and students have access to the Kent Opportunities for Improvement Policy & Procedures (Kent Website [MyKent Public Link](#)> POLICY – Opportunities for Improvement Policy & Procedures - Public Login 'public@kent.edu.au' and enter Password 'AccessKent!'). Submissions will be recorded on the Opportunities for Improvement Register by the Manager Risk & Compliance/Governing Board Secretary and will be regularly reported to the Kent Audit & Risk Management Committee.

The implementation of planned improvements is monitored and reported in order to gauge whether those improvements are meeting the intended aims and objectives..

Responsibility of Governance Committees

All Kent governance committees play a role in quality improvement, but the following committees have a significant role in overseeing implementation of the quality management system:

- **Governing Board**
The primary responsibility is to govern and oversee the responsibilities as a non-self accrediting Higher Education institution and as a Registered Training Organisation to ensure the profitable operation of the company on a sustainable basis.
- **Academic Board**
The principal academic advisory, academic leadership and academic decision making body for Kent. Academic Board is assisted by Sub-Committees that provide advice on teaching and learning procedures, external referencing activities, scholarship, new course proposals, report on applications for accreditation of new courses and reaccreditation of existing courses and to review existing courses. The contributions of nominated external academic, industry representatives and professional members on these committees provide an additional measure to assist with assuring the quality, industry relevance and value to stakeholders of Kent.

Kent will use internal assessment validation, external referencing activities or invite external reviewers to:

- form part of an effective quality assurance system;
 - cover both Higher Education and Vocational Education & Training;
 - assist with addressing the challenges of internal consistency and moderation of assessment outcomes across different Units
 - address the need for external validation of Higher Education with regards to the knowledge and AQF standards of the Kent Award to meet requirements for accreditation and external professional regulations.
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- **Audit & Risk Management Committee**
Appointed by the Governing Board to monitor, investigate and make recommendations to the Governing Board with respect to financial reporting, external reporting, financial management, external audit, risk management and internal control, ethics and compliance.

This Committee has an annual responsibility to report on its business and outcome of its performance evaluation for the previous year, including a review and assessment of the adequacy of the Committee's Charter.

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