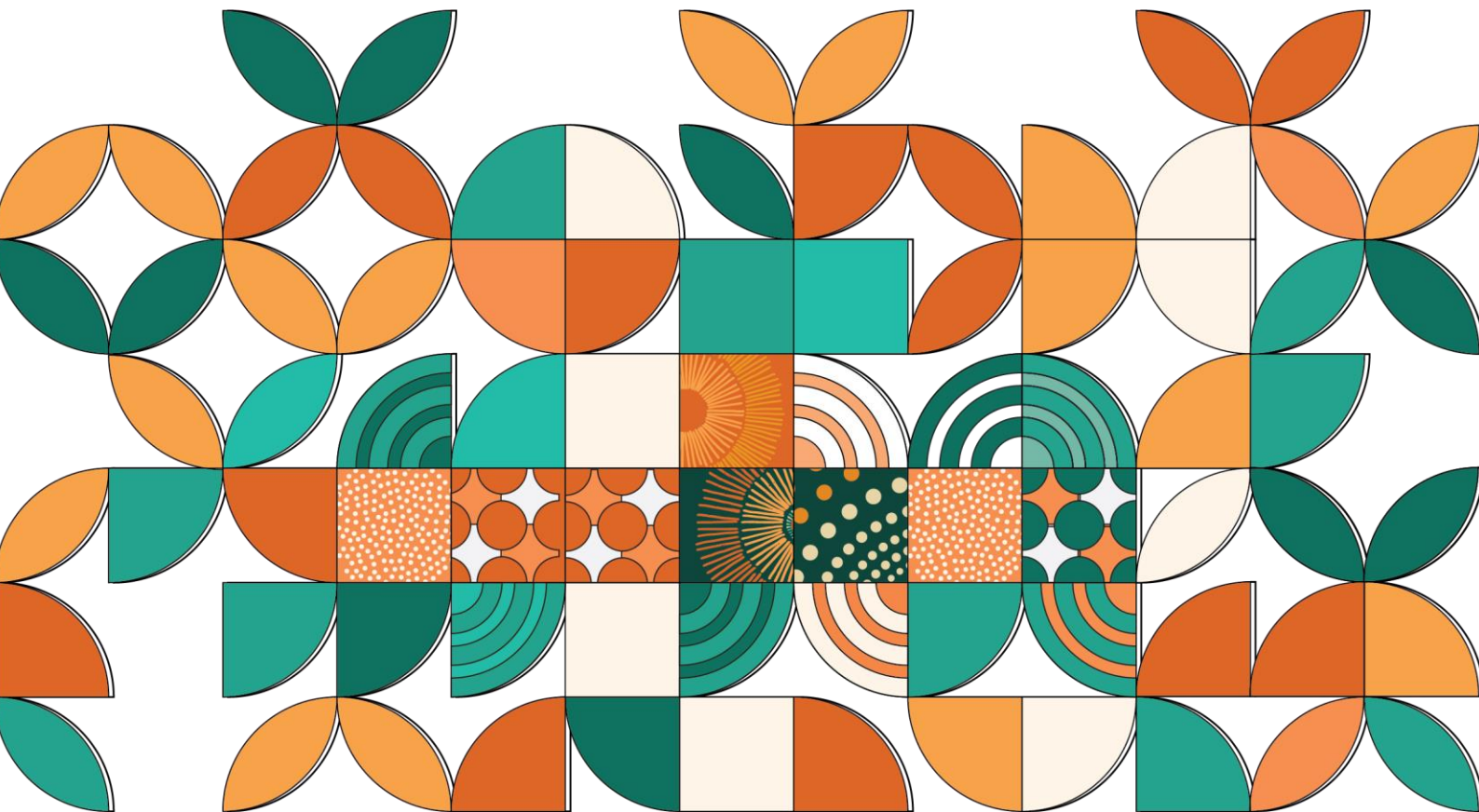


Quality Assurance and Continuous Improvement Policy



SECTION 1

1. Purpose

- 1.1 The purpose of this policy is to outline the commitment of the Institute of Health and Nursing Australia (IHNA) to maintain and enhance the quality of its educational programs and services through a systematic process of continuous improvement.
- 1.2 The Institute of Health and Nursing Australia (IHNA) is committed to operating efficiently and effectively. Continuous improvement in all activities is recognised as vital to the Institute's success.
- 1.3 The Institute undertakes ongoing quality control and evaluation of all its operations to ensure the maintenance of standards appropriate to the expectations of its clients and regulatory authorities.

2. Scope

- 2.1 This policy applies to all staff, students, and stakeholders involved in the delivery, administration, and support of IHNA's educational programs and services.

3. Definitions

- 3.1 Refer to Glossary of Terms.

SECTION 2

4. Policy Statement

4.1 Quality Assurance Principles

- a. **Commitment to Excellence:** IHNA is committed to maintaining high standards in all aspects of its operations, ensuring that educational programs and services are of the highest quality.
- b. **Stakeholder Engagement:** Engaging with students, staff, industry partners, and other stakeholders to gather feedback and inform quality assurance and improvement activities.
- c. **Evidence-Based Decision Making:** Using data and evidence to inform decision-making processes and drive improvements.
- d. **Transparency and Accountability:** Ensuring that quality assurance processes are transparent and that IHNA is accountable for the quality of its programs and services.
- e. **Continuous Improvement:** Fostering a culture of continuous improvement by regularly reviewing and enhancing programs, services, and processes to enhance efficiency, effectiveness and quality.

4.2 Quality Assurance and Continuous Improvement Strategy

- a. IHNA is dedicated to providing high-quality education and training that meets the needs of students, industry, and the community. To achieve this, IHNA will implement effective quality assurance processes and foster a culture of continuous improvement.
- b. The Institute's approach to quality includes all its operations, including governance, academic services, student services, financial management, facilities, human resources, and occupational health and safety.
- c. The Institute's quality system is based on adherence to the following steps:
 - i. A commitment by all staff to continuous improvement of processes, course products, and services;
 - ii. Input and involvement of stakeholders in identifying and implementing quality improvements; and
 - iii. Systematic use of qualitative and quantitative feedback to identify and prioritise improvement opportunities;
 - iv. Systematic collection, analysis, actioning, monitoring, and recording of Continuous Improvement activities.
- d. IHNA is committed to the continuous improvement of its training and assessment system, strategies and practices, products, and resources to ensure ongoing quality delivery and compliance with the Standards for RTOs.
- e. IHNA is committed to providing high-quality training and assessment that is relevant to clients, employers, and industry and meets the requirements of the Standards for RTO. IHNA is required to systematically monitor, evaluate, and improve its training and assessment practices through continuous improvement practices.

4.3 Equivalence of course outcomes

- a. IHNA offers different courses in different modes of delivery at other campuses. The Course Development and Advisory Committee (CDAC) ensures equivalency of courses (in course philosophy/aims, course outcomes, processes, assessments, grade/competency achievement) offered by IHNA, regardless of the sites or modes of delivery.

4.4 Continuous Improvement

- a. Commitment to Systematic Improvement: Continuous improvement is a core aspect of the quality assurance approach at IHNA.

- b. Identifying Opportunities for Improvement: Improvement opportunities shall be identified through several key mechanisms:
- i. Regular Feedback Collection: Feedback is regularly collected from students, staff, industry partners, and employers. This data is collated and analysed to identify areas for enhancement. Feedback mechanisms include:
 - Surveys completed by students during classes;
 - End-of-course surveys completed by students;
 - Quality Indicator surveys provided to students;
 - Employer satisfaction surveys in the placement and employment facilities.
 - c. Complaints and Appeals Review: All complaints and appeals are reviewed to identify root causes and areas for improvement to prevent recurrence (refer to the Complaints and Appeals Policy and Procedure for details).
 - d. Internal Audits: Regular internal audits are conducted to identify performance gaps and areas needing enhancement.
 - e. Management Meetings: These meetings are used to leverage managers' insights and knowledge to identify areas for improvement based on their experiences and feedback from staff.
 - f. Assessment Validation Meetings: Outcomes from these meetings help identify ways to improve assessment and training systems and practices.
 - g. Action and Responsiveness: Improvements shall be documented in the Continuous Improvement Register and acted upon continually to ensure IHNA remains responsive and proactive in addressing areas needing enhancement.
 - h. To foster continuous improvement, the following strategies can be used:
 - i. Process Reviews: Regularly review and analyse processes to identify inefficiencies and areas for enhancement.
 - ii. Problem-Solving Tools: Utilize tools such as root cause analysis, Six Sigma, and Lean methodologies to address issues and improve processes.
 - iii. Benchmarking: Compare our performance with industry standards and best practices to identify improvement opportunities.
 - iv. Innovation: Promote a culture of innovation where new ideas and approaches are encouraged and evaluated for potential implementation.

5. Responsibility

- 5.1 The Compliance Manager and Quality Assurance team have the overall responsibility for this policy.

5.2 Training Managers/Course Coordinators/Course Managers are responsible for monitoring the quality of educational programs and implementing improvement plans. All Staff are responsible for participating in quality assurance activities and contributing to continuous improvement efforts. Students are responsible for providing feedback on the quality of programs and services and participating in quality assurance activities.

SECTION 3

6. Associated Information

Related Internal Documents	<ul style="list-style-type: none"> • Quality Assurance and Continuous Improvement Procedure • Complaints and Appeals Policy • Complaints and Appeals Procedure • Continuous Improvement Register • Validation and Moderation Plan • Performance Management Policy • Performance Management Policy • Professional Development Procedure • Industry Consultation Form • Professional Experience Placement Policy • Professional Experience Placement Procedure
Related Legislation, Standards, and Codes	<ul style="list-style-type: none"> • National Vocational Education and Training Regulator Act 2011 • Standards for Registered Training Organisations 2015 • Education Services for Overseas Students Act 2000 (ESOS Act) • National Code of Practice for Providers of Education and Training to Overseas Students 2018 (National Code) • Enrolled Nurse Accreditation Standards 2017 • Australian Core Skills Framework • Relevant State and Commonwealth contracts and eligibility documents (VET Student Loans, Skills First Program, Department of Training and Workforce Development (DTWD), Smart and Skilled) • Work Health and Safety Act 2011 • Data Provision Requirements 2012 • ISO 9001:2015–Quality management systems
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Department	Quality Assurance
SRTO2015 Stds and sub section	Standards for RTOs 2015 - Standard 8

7. Change History

Version Control		Version 4.0
Version No.	Date	Brief description of the change, incl version number, changes, whoconsidered, approved, etc.
V.2.0	10/03/2021	Separated Policy document from Procedure, revised and updated with pertinent sections
V.3.0	23/11/2023	Updated with pertinent sections, new template with logo change
V.4.0	03/06/2024	Updated in the new template and logo, made structural changes and modified, updated pertinent sections, replaced CADC by CDAC