ASSESSMENT QUALITY CONTROL POLICY

1. Purpose

1.1 This document applies to the Innovative Institute of Australia, its courses, its clients (students), and its controlled entities (collectively, "IIA", "Institute", "the Institute", "we", "us", "our").

1.2 The purpose of this policy is to

i. To ensure all assessments comply with the Standards for RTO's and any competency issued to the student is justified and can be verified before issuing a certificate.

ii. To ensure that the assessment evidence being used in support of competency decisions complies with the rules of evidence of validity, sufficiency, authenticity and currency.

iii. To ensure the RTO retains the completed student assessment items, including the actual piece(s) of work completed by a student or evidence of that work, and the retained evidence of completed assessment has enough detail to demonstrate the assessor's judgement of the student's performance against the standard required.

iv. To ensure the RTO issues AQF certification documentation only to a student whom it has assessed as meeting the requirements of the training product as specified in the relevant training package.

1.3 This policy is implemented in compliance with the requirements of the Education Services for Overseas Students Act 2000 (the ESOS Act), the Standards for Registered Training Organisations (2025), and the National Code of Practice for Providers of Education and Training to Overseas Students 2018 (the National Code 2018).

1.4 In this file, words that import gender include all other genders; the singular 'they' is gender-neutral and used to avoid specifying a person's gender; words in the singular number include the plural and vice versa.

1.5 This policy does not affect students' rights under the Australian Consumer Law.

1.6 The Institute reserves the right to amend these terms and conditions at any time.

1.7 This policy does not affect students' rights under the *Australian Consumer Law*.

2. Definitions

2.1 Assessment means the process of gathering evidence and making judgements on whether competency has been achieved to confirm that an individual can perform to the standard expected in the workplace, as specified in a training package or a vocational education and training accredited course.

2.2 Assessment tools are the media (electronic or hard copy) used to gather evidence about a student's competence. The following are examples of assessment forms and documents that may be incorporated into an assessment tool in support of each unit of competency:

i. Assessment instruction for the assessor and the student

ii. Assessment recording tools

iii. Assessment outcome reports

iv. Assessor Marking Guide

v. Assessment mapping

vi. Third-party reports or work placement records

2.3 Training package means the nationally endorsed document that records the competencies required by different occupations and industries and describes how these competencies may be packaged into nationally recognised and portable qualifications that comply with the Australian Qualifications Framework.

2.4 Training product means AQF qualification, skill set, unit of competency, accredited short course and module.

2.5 An education agent refers to an entity (in or outside Australia) that

vii. Engages in any of the following activities in relation to a provider:

A. The recruitment of overseas students, or intending overseas students;

B. providing information, advice or assistance to overseas students, or intending overseas students, in relation to enrolment;

C. otherwise dealing with overseas students, or intending overseas students; and

viii. is not a permanent full-time or part-time officer or employee of the Institute.

2.6 Agent Agreement refers to the agreement between the Institute and the agent, including the schedules.

2.7 CRICOS refers to the Commonwealth Register of Institutions and Courses for Overseas Students.

2.8 ESOS Act refers to the *Education Services for Overseas Students Act 2000 of the Commonwealth of Australia*.

2.9 National Code refers to the *National Code of Practice for Providers of Education and Training to Overseas Students 2018*.

2.10 Prospective student/applicant/client refers to a person who intends to become, or who has taken any steps towards becoming, an 'overseas student' or 'intending overseas student' as defined by the *ESOS Act*.

2.11 DHA refers to the Department of Home Affairs.

2.12 OSHC refers to the Overseas Student Health Cover.

2.13 eCoE refers to the electronic Confirmation of Enrolment.

2.14 2025 Standards for RTOs refers to the *National Vocational Education and Training Regulator (Outcome Standards for NVR Registered Training Organisations) Instrument 2025*.

3. Policy

3.1 **The requirement for assessment quality control**

i. We take our obligations seriously to ensure that we only issue AQF certification documentation to a VET student who has been assessed as meeting the requirements of the training product. Assessment quality control is an important component of our overall self-assurance arrangements. Whilst we expect that trainers will complete assessments properly and record sufficient detail to demonstrate their judgement of the students' performance, it is not satisfactory to simply assume this will occur.

ii. This policy sets out the arrangements for the quality of assessment completeness, and documentation is checked at various stages upon its completion. The trainer does this after they have made their assessment decision and before submitting these assessment records to the administration area for processing. Once the administration team receives the assessment record, it will undergo a final review as part of the quality control process to ensure it is complete and accurate.

iii. Whilst it is not the role of the administrative team to undertake assessment or to make judgments about the assessment decision, this policy does empower the administrative team to review these records and determine whether they are accurate and complete. This includes confirming that records have been dated and signed by all parties, that assessment documentation and evidence submitted by the student are complete and adequate, and that the assessor has recorded sufficient evidence to demonstrate their judgement about the student's performance.

iv. This quality control process is really the final opportunity to identify inaccurate and incomplete assessment records and to prevent them from entering the record system and from assessment results being reported inappropriately, as satisfactory assessment records cannot substantiate them.

3.2 Entering assessment outcomes into the student management system: Trainers or those undertaking assessment are not authorised to enter assessment outcomes into the student management system at any time. Only authorised administrative team

personnel are to enter assessment outcomes into the student management system.

3.3 **Remediation of incomplete or inaccurate Assessments**

i. A critical component of this assessment quality control policy is the procedure to follow when assessments are received by administrative support and identified as incomplete or inaccurate. The timely remediation of these incomplete or inaccurate assessment records will safeguard the Institute's compliance and the integrity of our assessment system. Administrative team personnel are authorised to identify inaccuracies or incompleteness in assessment records and to return the record to the trainer who undertook the assessment, with notes on the areas the trainer must review and remediate.

ii. It is the responsibility of the relevant trainer to respond professionally to these opportunities to remediate incomplete assessments and to return the complete assessment to the administrative team within the required timeframe as specified in the procedure. It is also the trainer's responsibility to use this opportunity to identify areas for improvement in their own practices to prevent future assessments from requiring remediation.

3.4 **Feedback or concerns**: Trainers who are required to undertake assessment remediation are not to engage with the administrative team directly about these requirements and are to direct any feedback or concerns only to the Training Manager.

3.5 **Identifying trends and opportunities for professional development**

i. The administrative team are to monitor instances of assessment remediation to identify any trends in issues identified in submitted assessment documentation marked as inaccurate or incomplete. These observations of these trends present a valuable opportunity for management to implement arrangements that will systematically address these problems, preventing the need for assessment remediation. These arrangements may include working directly with trainers to improve their assessment practices and/or facilitating professional development for all those involved in the assessment process to better align with policy

requirements and support the integrity of our assessment system.

ii. The Office Manager is to prepare a Continuous Improvement Report **detailing these trends arising from identified assessment remediation,** to be referred to the management meeting for consideration as part of the continuous improvement process. This report should be submitted **as required and should include details of remediation** required over the period and any recommendations on how this could be improved.

4. Measures

Steps		Person/s responsible
i.	**Assessment completion and submission** The trainer is responsible for completing the assessment and submitting it for reporting. – The trainer is to review each assessment record before submission for reporting. The trainer is to use the Checklist - Assessment Quality Control – Assessor to consider the requirements for completeness and accuracy. – The complete assessment record and evidence must be submitted for each assessment that is undertaken. This must include all completed assessment records and all work that was submitted by the student for assessment. In addition to the assessment record itself, this will include items such as completed written knowledge assessments, project and portfolio submissions, case study responses, completed	Trainer/Assessor

	workplace documents, etc. It is critical that administrative support can access the student management system, or in hard copy, not only the completed assessment record, but all work completed by the student that contributed to the assessment decision. – All submitted assessment records must be complete and accurate, including: o The complete and accurate details of the student in all required spaces. o Complete and accurate details of the assessor in all required spaces. o Clearly recording the assessment result for each assessment activity and the overall decision of competency for the unit of competency. o The date on which the assessment was conducted. o Signatures by the assessor in all required spaces and the student where required. – The trainer must review the work to identify any unacceptable use of AI-sourced content, ensuring the assessment evidence is authentic and the student has not breached academic integrity. – The trainer must review and mark the assessment according to the assessor guide or marking guide to	

	ensure it is conducted reliably. – Sufficient evidence (comments) recorded by the assessor with enough detail to demonstrate the assessor's judgement of the student's performance against the standard required. Please note that tick and flick will not be accepted. The trainer will notify the administration team that a student has completed a unit of competency. All completed assessment records must be uploaded into the student management system or returned in hard copy to the office and received by administrative support no later than five (5) days after the date on which the assessment was conducted.	
ii.	**Assessment Review** The administrative team are responsible for conducting a quality check on the assessment record using the Checklist - Assessment Quality Control - Admin. To support the assessment quality control process, the administrative team are to: – Undertake a detailed quality check of each assessment record within five (5) days of the record being received at the office. – The quality check must verify that submitted assessment records are complete and accurate, including: o The assessment record includes all supporting evidence that the student has completed and submitted.	Administration staff

	○ The complete and accurate details of the student in all required spaces. ○ Complete and accurate details of the assessor in all required spaces. ○ Clearly recording the assessment result for each assessment activity and the overall decision of competency for the unit of competency. ○ The date on which the assessment was conducted. ○ Signatures by the assessor in all required spaces and the student where required. ○ Adequate evidence recorded by the assessor with enough detail to demonstrate the assessor's judgement of the student's performance against the standard required. Please note that tick and flick will not be accepted.	
iii.	**Reporting assessment results** i. ***Assessment record is complete and accurate***: Where the assessment record is determined to be complete and accurate by administrative support, the assessment outcome for the applicable unit of competency is to be recorded in the student management system with the applicable AVETMISS outcome code.	Administration staff, Training Manager, Trainers/Assessors

	The following are the AVETMISS outcomes that may be selected: ○ 20 Competency achieved/pass ○ 30 Competency not achieved/fail ○ 40 Withdrawn/discontinued ○ 41 Incomplete due to RTO closure ○ 51 Recognition of prior learning granted ○ 52 Recognition of prior learning not granted ○ 60 Credit transfer/national recognition ○ 61 Superseded subject ○ 70 Continuing activity ○ 81 Non-assessable activity – satisfactorily completed ○ 82 Non-assessable activity – withdrawn or not satisfactorily completed ○ 85 Not yet started **Note:** The date recorded for the assessment outcome in the student management system must match the final date recorded by the assessor on the assessment record. The assessment date and the outcome date must be the same.	

	ii. ***Assessment records are incomplete or inaccurate*** - Where assessment records are identified as incomplete or inaccurate, they must be remediated. The following steps will be taken: a. The assessment record is returned to the responsible assessor within two (2) working days. Administrative support personnel are to provide written advice on the specific areas within the assessment record that do not comply with the minimum requirements. Please note, it is not the role of the administrative support team to fix these inaccuracies, however minor. b. Administrative support personnel are to inform the Training Manager of instances where incomplete or inaccurate records have needed to be returned to the assessor. This enables the Training Manager to monitor compliance with procedures and provide additional training and professional development to assessors who are not submitting complete or accurate records. Where warranted, the Training Manager may also initiate performance management to ensure compliance. c. Once received by the responsible assessor, the assessment is to be remediated and returned to administrative support within two (2) working days. This means that the remediation of incomplete or inaccurate assessment must take	

	precedence over newly completed assessments. It is critical that the assessor apply attention to detail to ensure all records area complete and accurate. Failure to do so will only result in the assessment record being rejected again and further delaying the administrative process. d. Returned assessment records which have been remediated are to undergo an additional review process to ensure compliance. Under no circumstances is an assessment record to be accepted by administrative support personnel where it does not comply with the minimum specified requirements. Any pressure or coercion received by administrative support personnel is to be reported to the Training Manager immediately.	
iv.	**Issue certificate** When all units of competency have been issued as "Competency Achieved", administration staff are to initiate the AQF certificate issuance process. Refer to: *Issuing Certificates and Outcomes Policy and Procedure.*	
v.	**File records** Following the completion of the assessment review and reporting, the assessment record is to be marked "Quality Checked and Entered", ensuring that the date entered is recorded on the record and initialled by the reviewer. The assessment record is then to be filed and archived.	

VERSION HISTORY

Version Number	Date	Summary of changes
1.0	September 2021	New policy
2.0	July 2025	Revised and updated to include the changes according to the Standards for Registered Training Organisations (2025).
3.0	December 2025	Revised and updated to include the changes according to the ESOS 2000 Act.