

RTO: Complete Hospitality Training (Vic) Pty Ltd T/A Victorian Bar School

Audit Date: 21 – 22 March 2013

RTO DETAILS				
RTO Name	Complete Hospitality Training (Vic) Pty Ltd T/A Victorian Bar School	TOID	3722	
Address	3 rd Floor, 28 Elizabeth Street	Melbourne VIC 3000		
		Website	www.chtmelbourne.com.au	
Registration Contact	Warrick Steabben			
Phone Number	03 – 9654 1554	Email	warrick@chtmelbourne.com.au	
Student Numbers	1715 (As per Course Delivery Template)			
AUDIT TEAM				
Lead Auditor	Sandra Surguy	Auditor/s	N/A	
Technical Advisor/s	N/A	Observer/s	N/A	
REGISTERING BODY	REGISTERING BODY DETAILS			
Contact Person	Emma Hickingbotham			
Phone Number	9032 1562	Email	vet.audit@edumail.vic.gov.au	
AUDIT DETAILS				
Type of Audit	Renewal			
Conditions audited	1, 3, 4, 6, 7, 8, 9. (Conditions 2	& 5 are not required to be au	dited, see page 3 below)	
Standards audited	1.1, 1.2, 1.3, 1.4, 1.5.	2.1, 2.2, 2.3, 2.4, 2.5, 2 2.7	2.6, 3.1, 3.2, 3.3, 3.4	
Audit Date/s	21 st – 22 nd March 2013			
Other audit notes	within the hospitality industry fee for service arrangements <u>Post Audit</u> Post audit and in conjunction	. These services are pro with the completed accord a range of documents i	to individuals seeking employment ovided via government funding and eptance form, the RTO submitted in support of rectification. An ithin the summary report.	



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ACCOMPANYING REPORTS		No
VRQA Guidelines Audit Report	1	
VRQA Guidelines – Re-registration Checklist	1	

FOCUS OF AUDIT

QUALIFICATION/UNIT OF COMPETENCE/ACCREDITED COURSE				
TGA Code	Qualification/Unit of Competence/Accredited Course (as per TGA)	Delivery Site		
SIT20207	Certificate II in Hospitality	Melbourne CBD		
SIT20307	Certificate II in Hospitality (Kitchen Operations)	Melbourne CBD		
SIT30707	Certificate III in Hospitality	Melbourne CBD		
SIT40307	Certificate IV in Hospitality	Melbourne CBD		

INTERVIEWEE/S : Staff name and position; employer name and position; students by program (do not list by name)		
Warrick Steabben	Director	
Leanne Barnard	Quality Manager	
Linda Steabben	CFO	

PERMANENT DELIVERY SITES:

Do the RTO's permanent delivery sites match the information provided by the VRQA?

✓ Yes, no further information required.

 \Box No, please provided amended details below:



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AUDIT SUMMARY

	Conditions of Registration	Compliant	Non- compliant	Not audited
1	Governance	✓		
	1.1 CEO must ensure the RTO complies with relevant conditions, standards and guidelines			
	1.2 Fit & Proper Persons Tests			
	1.3 Input of Trainers and Assessors in senior management decision making			
2	Interactions with the Registering Body			✓
3	Compliance with Legislation		✓	
4	Insurance	✓		
5	Financial Management			✓
6	Certification & Issuing of Qualifications & Statements of Attainment	✓		
7	Recognition of Qualifications Issued by other RTOs		✓	
8	Accuracy and Integrity of Marketing	✓		
9	Transition to Training Packages/Expiry of Accredited Courses		✓	



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Summary of non-compliances – Conditions of Registration

Condition of Registration 1

The RTO is compliant; please note opportunities for improvement section.

Condition of Registration 2 Not Audited.

Condition of Registration 3

The RTO is not complaint.

The RTO had a Compliance with legislation policy and procedure however there was no specific reference to any legislation within the policy or procedure, or any associated policies and procedures.

Information provided to students about legislation within the Student Handbook did not address the full range of legislation which may impact on s participation in vocational education and training. The Student Handbook refers students to a generic web site for information on legislation - it should be noted that it is the RTOs responsibility to inform students of legislation which may impact on their participation; the ways in which the RTO implements such legislation; the ways in which the student can implement such legislation; and strategies to avoid breaching such legislation.

Information provided to RTO staff was via the Trainer's Handbook, however this was limited to a listing of legislation which did not include the full range of legislation that underpins staff roles and responsibilities, furthermore there was no information provided to staff as to how legislation was to be implemented.

Responsibility for undertaking such monitoring was not included within the relevant position description(s).

Condition of Registration 4

The RTO is compliant; please note opportunities for improvement section.

Condition of Registration 5 Not Audited

Condition of Registration 6 The RTO is compliant; please note opportunities for improvement section.

Condition of Registration 7

The RTO is not compliant.

Whilst the RTO had a policy and procedure in place to recognise qualifications issued by other RTO's; there was no verification process in place to ensure certification provided by an applicant was bona fide. The procedure did not stipulate that no further assessments would be required or that there were no costs associated with national recognition. Furthermore, there was an inappropriate reference to RPL within the policy and procedure. It should be noted that national recognition and RPL are not synonymous and are two separate processes necessitating separate approaches.



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Responsibility for managing national recognition was not included within the relevant position description(s).

There was no communication strategy in place to inform staff of their roles and responsibilities regarding national recognition.

Condition of Registration 8

The RTO is compliant; please note opportunities for improvement section.

Condition of Registration 9

The RTO is not compliant.

Guidelines for transition as detailed in the policy and procedure lacked clarity, and did not address transition arrangements for students who have completed more than 50% of their course of study. Furthermore, responsibility for overseeing transition arrangements was not included within the relevant position description(s).

Recommendations

Condition of Registration 3

Recommendations – It is recommended that:

- policies and related documentation should be reviewed to ensure the full range of commonwealth and state legislation relevant to RTO operations is included and implemented.
- responsibility for undertaking monitoring currency of legislation should be included within relevant position description(s).
- a communication strategy which informs RTO staff of legislative requirements and their role and responsibilities in relation to such legislation should be developed and disseminated.
- a communication strategy which *fully* informs students of legislation which impacts on their participation in vocational education and training should be developed and disseminated.

Auditor Response to Provider Comments

Provider comments refer to a hyperlink within the policy to a list of relevant legislation; however this list of legislation was limited to Victorian legislation only and did not take account of Commonwealth legislation relevant to RTO operations. Furthermore, the RTO at the time of audit or subsequently did not demonstrate how this legislation underpinned RTO operations.

Provider comments agree that not all relevant legislation was covered within the Student Handbook. The Student Handbook identified <u>www.legislation.vic.gov.au</u>, a website which listed a variety of '*Victorian legislation and parliamentary documents*' which may or may not impact on students' participation in VET courses. As previously outlined in the findings section, it is the RTO's role to identify legislation which is pertinent to student participation in VET courses and fully inform students of such legislation. Furthermore, the website is Victorian specific, and does not take account of Commonwealth legislation which may impact on students' participation in VET courses.

Provider comments that information pertaining to legislation within the Trainer's Handbook will be expanded will require verification.

Provider comments that monitoring of legislation will be added to the relevant position description will require



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verification.

Audit findings and audit recommendations remain unchanged.

Condition of Registration 7

Recommendations – It is recommended that:

- a full review of the national recognition policy and procedure should be undertaken.
- responsibility for managing national recognition should be included within the relevant position description(s).
- a communication strategy which informs staff of their roles and responsibilities regarding national recognition should be developed and disseminated.

Auditor Response to Provider Comments

Provider comments indicate that the RTO intends to address audit recommendations in the relevant policy, however this will require verification.

Other audit recommendations were not addressed within Provider Comments.

Audit findings and audit recommendations remain unchanged.

Condition of Registration 9

Recommendations – It is recommended that:

- a full review of the Transition to Training Packages policy and procedure should be undertaken to ensure transition arrangements are in place for all students.
- responsibility for managing transition processes should be included within the relevant position description(s).

Auditor Response to Provider Comments

Provider comments indicate that the RTO intends to address audit recommendations in the relevant policy and position description, however this will require verification.

Audit findings and audit recommendations remain unchanged.

Strengths

Opportunities for Improvement

Condition of Registration 1

 Ensure matters related to the fit and proper person test as detailed in the Governance Policy are consistently implemented.



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• The Governance Policy be expanded to include all RTO governance structures.

Condition of Registration 4

• Responsibility for ensuring currency and appropriateness of insurance arrangements should be included within the relevant position description(s).

Condition of Registration 6

- Review all policies, procedures, associated forms and documentation to ensure references to NQC are updated.
- Within the reissuance procedure include an identification verification process(es).

Condition of Registration 8

- Responsibility for final approval of marketing and advertising arrangements should be included within the relevant position description(s).
- Develop and disseminate processes for individuals/organisations to withdraw permission for the use of images or testimonials within RTO marketing and promotional materials.



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AUDIT REPORT

Standard 1: The RTO provides quality training and assessment across all of its operations	_	
Audit conclusion	Result	✓
The RTO is not compliant in the following elements of Standard 1.	Compliant	
Element 1.1 Continuous improvement of training and assessment – The RTO is not compliant.	Non-compliant	\checkmark
• Within the Continuous Improvement Policy and Procedure, stakeholder feedback did not take account of the full range of key stakeholders.	Not audited	
 Collation of student feedback was limited and did not take account of all feedback data. There were no documented processes or procedures in place to gain feedback from RTO staff. There were no documented processes or procedures to gain feedback from employers/industry. 		
 Recommendations – It is recommended that: a comprehensive stakeholder feedback policy and procedure should be developed and be inclusive of all stakeholders, provide specific details of feedback mechanisms, timeframes, data management, recording and reporting procedures; and be implemented. 		
Auditor Response to Provider Comments		
 Provider comments refer to Item 1 of the Continuous Improvement Policy, and it is acknowledge that whilst a statement in the policy referred to stakeholders as students, staff and employers this was the limit of information related to employer feedback mechanisms within the policy. 		
 Management of the AQTF Learner Engagement data was not an issue; the issue related to the internal Student Survey which was not fully collated. Furthermore, determining the significance of student responses to the internal survey was at the discretion of a Data Integrity Officer who had no direct involvement in training and assessment. 		
 Following review of the provider comment, the Audit finding that the RTO did not have a documented process in place to gain feedback from RTO staff is retracted. 		
 Provider comments agree that there was no documented process or procedure in place for the collection and data management of employer feedback, and this will require rectification. 		



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Audit recommendation remains unchanged.

Element 1.2 Strategies for training and assessment (TAS) – The RTO is not compliant, please also note opportunities for improvement section.

- Pre requisites and/or entry requirements not noted.
- Specific units/clusters that were delivered and/or assessed by on-line approaches were not identified in the relevant Strategies.
- The proportion of on-line approaches and work placement components were not identified in the relevant Strategies.
- Listing of trainers and assessors not current.
- Specific infrastructure requirements/equipment was not noted within the Strategies.
- The RTO could not demonstrate that each TAS had been developed in consultation with industry, and how such consultation had impacted on each TAS.
- Processes to monitor, review and improve the Strategies over time were not included and/or conducted.

Recommendations – It is recommended that:

- a full review of all Training and Assessment Strategies should be undertaken, ensuring details are current and comprehensive.
- industry stakeholders should be consulted in the development of training and assessment strategies and details of this consultation recorded, and where appropriate actioned.

Auditor Response to Provider Comments

- The provider submitted amended Training and Assessment Strategies post audit with the following improvements noted:
 - Pre requisites and/or entry requirements updated and noted.
 - Specific units/clusters that were delivered and/or assessed by on-line approaches were identified in the relevant Strategies.
 - The proportion of on-line approaches and work placement components were identified in the relevant Strategies. NB AQTF Standards require RTOs to ensure delivery and assessment approaches are sufficient to achieve quality outcomes; hence the need to include details of hours delivered and assessed across all delivery modes within each Strategy. This requirement is also included within VRQA Guidelines for VET Providers 5.1.
 - Listing of trainers and assessors updated.
 - Strategies had been updated to include specific infrastructure requirements/equipment.



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- The RTO could not demonstrate at audit, or within post audit submissions that industry consultation had occurred in the development of the SIT20307 Training and Assessment Strategy.
- With reference to ongoing monitoring and review of Training and Assessment Strategies, mechanisms for such review and monitoring were not provided at audit for SIT20307, SIT30707 and SIT40307.

Revised Audit Recommendations – It is recommended that:

- industry stakeholders should be consulted in the development of all training and assessment strategies and details of this consultation recorded, and where appropriate actioned.
- documented processes for the ongoing monitoring and review of Training and Assessment Strategies should be consistently implemented across all course offerings.

Element 1.3 Staff, facilities, equipment, training and assessment materials are consistent with the requirements of the Training Package and the RTO's training and assessment strategies – The RTO is compliant.

Element 1.4 Competence and industry currency of trainers and assessors – The RTO is not compliant.

The process for ensuring all trainers and assessors have the necessary training and assessment competencies was detailed within the Competence of Trainers and Assessors policy and procedures; however the competencies listed for trainers were not correct.

Additionally a number of gaps and anomalies were noted within the sampled trainer and assessor files including:

- no confirmation that an induction process had taken place.
- training and/or assessment records to validate the conferment of testamurs to internal staff could not be produced at audit.
- documentation to demonstrate currency of trainer and assessor industry experience was not in place.
- documentation to demonstrate that trainer and assessor had appropriate vocational competence and experience was not in place.
- certification not certified or verified.
- signed documentation of professional development which meets NSSC requirements not in place.
- performance appraisals not conducted.

Recommendations – It is recommended that:

- the policy and procedure related to the competence of trainers and assessors should be reviewed to ensure accuracy of information.
- processes to ensure trainers and assessors have the required vocational competence and experience commensurate with specific delivery



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and assessment responsibilities should be reviewed.

- a full review of trainer/assessor professional documentation should be undertaken ensuring that such documentation meets regulatory requirements.
- where awards are conferred to internal RTO staff, records to support and validate such conferment should be retained onsite by the RTO.

Auditor Response to Provider Comments

- Within the post audit submission, the RTO provided updated documentation to support completion of trainer/assessor induction processes.
- With reference to validation of awards conferred to internal staff. The documentation to which the RTO refers within Provider Comments could not be obtained at the time of the audit. Furthermore, the documentation to validate conferment of the award to internal staff was not included within the post audit suite of documents, and as such remains outstanding.
- Updated information for the currency of industry experience for Ms Tavaiqua was included within the post audit submission.
- With reference to the appropriateness of trainer and assessor vocational competence and experience; it should be noted that matrices are not the issue here but the vocational competence (certification) and vocational experience (as per cv/resume). Stuart France SIT60307 certification not available at audit, statement of results only available at audit, submitted post audit Jeremy O'Connor SIT60307 certification not available at audit, statement of attainment only available at audit, submitted post audit. Daniel Trevenen verified documents submitted post audit. As indicated above updated information for the currency of industry experience for the Ms Tavaiqua trainer and assessor was included within the post audit submission. Sam Demelis no updated documentation provided post audit
 - Warrick Steabben did not provide evidence at audit or post audit that vocational competence was in place for units to be delivered and/or assessed.

The cvs/resumes of a number of trainers and assessors sighted at audit were such that vocational experience was either not current or not at the required AQF level i.e. Certificate IV.

- Post audit submission included updated trainer and assessor professional development logs which met NSSC requirements.
- Provider comments agree that a formal performance appraisal approach should be introduced; however this will require verification.

Audit recommendations remain unchanged.



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Element 1.5 Assessment – The RTO is not compliant.

A number of gaps and anomalies were noted within RTO assessment processes including:

- assessment processes at unit level did not align with those identified in training and assessment strategies.
- recording instruments for each assessment activity were not individualised to each candidate
- the candidate signature was not included for each assessment task.
- assessment criteria did not consistently address key components of each unit of competency.
- the assessment approach did not consistently meet the critical requirements of each unit of competency.
- the assessment approach was not consistently sufficient to confer competence.
- mechanisms to address authenticity were not consistently applied across assessments.

Assessment Validation and Moderation:

The RTO validation and moderation schedule did not address all units of competency, and the RTO could not demonstrate that validation had occurred across all units within the last 12 months or at any previous time. Whilst the Director would coordinate and lead moderation there was no notation as to who within the organisation would guide and lead validation. There was no tool in place to guide moderation processes and record moderation outcomes.

Recommendations – It is recommended that:

- a full review of assessment approaches, methodology, tools, and documentation should be undertaken for all qualifications.
- mechanisms to address authenticity of assessment submissions should be consistently applied.
- a full review of assessment validation and moderation processes should be undertaken.
- an annual schedule of assessment validation and moderation activities, and associated tools should be developed and implemented.

Auditor Response to Provider Comments

- Provider comments agree that assessment processes at unit level did not align with those identified in training and assessment strategies and this issue had been rectified; and will require verification across all units.
- Individualised recording instruments for each assessment activity ensures confidentiality of the assessment process and outcome, and it remains a significant concern that the RTO does not view privacy/confidentiality matters as a priority.



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- Inclusion of a candidate signature for each assessment task records student acknowledgement of the assessment outcome. Primarily, this
 ensures candidates receive timely and transparent information about their progress in the unit/course; and as a secondary consideration
 can be utilised as evidence in the event of any future complaint or appeal.
- Documents submitted post audit demonstrated that improvements had been made to the assessment approach for SITXOHS004B and SITXHRM005A, specifically as this relates to assessment criteria which address key components of units and critical requirements of evidence; these improvements will require verification across all units.
- Documents submitted post audit demonstrated that improvements had been made to the assessment approach SITHCCC003B Receive and store kitchen supplies, specifically as this relates to sufficiency; these improvements will require verification across all units.
- Submitted post audit documentation demonstrated that mechanisms to address authenticity of assessment submissions had been implemented; this will require verification across all relevant assessment activities.
- Providers Comments assert that assessment validation and moderation of all units that the RTO had delivered prior to audit had occurred; however the RTO could not demonstrate that assessment validation had occurred within the previous 12 months or at any other previous time for SITHIND002A.

Furthermore, the RTO could not demonstrate that critical pre-implementation validation had occurred i.e. that the assessment approach and tools which had been developed, though yet to be implemented, had been checked for validity, reliability, flexibility and fairness and had the capacity to meet assessment rules of evidence.

- Following review of the provider comment, the audit finding that there was no notation as to who within the organisation would guide and lead validation is retracted.
- Provider Comments state that the RTO had a tool to guide and record moderation processes, however the RTO has not submitted the tool to support this claim.

Revised Audit Recommendations – It is recommended that:

- a full review of assessment approaches, methodology, tools, and documentation should be undertaken for all qualifications.
- mechanisms to address authenticity of assessment submissions should be consistently applied across all relevant assessment activities.
- a full review of assessment validation and moderation processes should be undertaken.
- tools to guide and support validation and moderation processes should be developed and implemented.

Strengths



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Opportunities for Improvement

Element 1.2

• Within the Training and Assessment Strategy, notation should be made of legislation specific to the qualification.

Element 1.4

• Expand the professional development section of the Competence of Trainers and Assessors policy and procedure; to provide greater direction and specificity regarding professional development activities as per NSSC guidelines.



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Audit conclusion	Result	1
The RTO is not compliant in the following elements of Standard 2.	Compliant	
Element 2.1 Establishing client needs and delivering services to meet these needs – The RTO is compliant.	Non-compliant	✓
Element 2.2 Improvement of client services through the collection, analysis and actioning of relevant data – The RTO is compliant; please note opportunities for improvement section.	Not audited	
 Element 2.3 Pre-enrolment/Pre-contract Information – The RTO is not compliant. Fee information was inconsistent across web pages, and between the web pages and student handbook. Refund information was not consistent across communiqués. Furthermore, within these communiqués there was no refund information provided for students who withdraw following course commencement. RPL information contained on the web site stated that 'Charges may apply'; however there was no detail as to the circumstances in which such fees would apply or the fee amount(s). There was a lack of clear differentiation between RPL, Credit Transfer and National Recognition across information. Students were not informed of how to access their records of participation and progress. Complaints and appeals information provided via the RTO web site and Student Handbook was inadequate and inconsistent, also refer Element 2.7 		
 A full review of pre-enrolment/pre-contract information should be undertaken to ensure currency, consistency and comprehensiveness. 		
 Auditor Response to Provider Comments Provider comments agree that pre-enrolment/pre-contract information requires review and amendment; these amendments will require verification. 		



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Element 2.4 Employer or other party involvement in training and assessment development, delivery and monitoring – The RTO is compliant; please note opportunities for improvement section.

Element 2.5 Meeting the needs of individual learners – The RTO is compliant.

Element 2.6 Student access to records of participation and progress – The RTO is compliant. Note change in compliance status. Students were not informed of how to access to their records of participation and progress.

Recommendations – It is recommended that:

• A communication strategy which informs students of how to access their records of participation and progress be developed and disseminated.

Auditor Response to Provider Comments

• It should be noted that at audit RTO representatives could not locate student information pertaining to accessing records. Post audit the provider comments provide direction as to the location of information pertaining to students accessing their records; and this has been verified. For future reference, it should be noted that it is the provider's role to demonstrate compliance at audit; and to present all relevant evidence to the auditor.

The audit finding and recommendation related to Element 2.6 is retracted.

Element 2.7 Complaints and Appeals – The RTO is not compliant.

There were a number of gaps and anomalies within the complaints and appeals policy, procedure and processes including:

- Process for lodgment of a complaint was limited to an Internal Complaints Form sourced from CHT staff which given the sensitive nature and perceived high risk associated with the lodgment of a complaint/appeal was unsatisfactory.
- With reference to the lodgment of an appeal, there was no detailed process provided.
- The complainant or appellant was not informed of the right to consult or utilise the services of a person of their choice for support or advice during the complaint process.
- Internal complaint and appeal management processes as detailed within the procedure were inadequate and require expansion.
- The complaints and appeals procedure referred to the appointment of an external mediator by the RTO Director, it should be noted that



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any such appointment should be negotiated with the complainant/appellant prior to engagement.

- There was no timeframe for the resolution of an appeal included within the procedure.
- There was also a section within the procedure titled 'Assessment Appeals' suggesting that appeals related to assessment should be managed differently from other appeals, which is not the case. Furthermore, this section refers clients to complain if they are dissatisfied with the outcome of an assessment appeal which was inappropriate.
- There was reference to the National Training Hotline should complainants and appellants be unsatisfied with outcomes of internal complaint and appeals processes. The National Training Hotline is a 'funding hotline' and not intended for complaint and appeal matters.
- Record management processes were not in place for matters related to a complaint or an appeal.
- Information provided to students about complaints and appeals as noted on the RTO website and Student Handbook was both inconsistent and inadequate.
- Information provided to RTO staff about complaints and appeals as noted on the RTO website and Trainer Handbook was inconsistent
 with the policy and procedure.

Recommendations – It is recommended that:

- a full review of complaints and appeals processes and documentation should be undertaken to ensure consistency and comprehensiveness of lodgment, investigation, resolution and record management processes.
- students should be fully informed of the complaints and appeals process and details of a current independent external body to whom they
 can seek advice and support during the complaints and appeals process. Furthermore, student information should be consistent with the
 RTOs policy and procedure.
- a review of information provided to RTO staff about their specific roles and responsibilities in relation to complaints and appeals should be expanded and be consistent with the RTOs policy and procedure.

Auditor Response to Provider Comments

- The provider comment does not address the issue of lodgement independent of RTO staff and is irrelevant.
- The provider reference to the ESOS National code part d standard 8 within the comments is irrelevant since the process for student lodgement of a complaint or appeal independent of RTO staff remains outstanding.
- If matters related to the record management of complaints and appeals are located elsewhere then this should be referenced within the Complains and Appeals Policy and Procedure.
- Provider comments agree that student information regarding complaints and appeals was inconsistent and this matter has been rectified; however this rectification will require verification.



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Audit findings and recommendations remain unchanged.

Strengths

Opportunities for Improvement

Element 2.2

• Systematic processes to formally collate survey data related to client services should be developed and implemented.

Element 2.4

• Develop an employer information booklet or similar, to be disseminated to relevant work sites prior to the work placement.



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Standard 3: Management systems are responsive to the needs of clients, staff and stakeholders, and the environment in which the RTO operates		
Audit conclusion	Result	✓
The RTO is not compliant in the following element of Standard 3.	Compliant	
Element 3.1 Client pre-engagement agreements – The RTO is not compliant. A documented financial agreement or similar was not in place for each student. RTO representatives presented an Invoice in lieu of a specific financial agreement which did not address all key elements of a financial agreement, nor was the 'invoice' agreed to by way of relevant signatories and dates.	Non-compliant Not audited	✓
Students were informed of the RTO Refund Policy via the RTO website, Student Handbook and Enrolment Form; however refund information was not consistent across these communiqués. Furthermore, within the 'Refund Policy' included on the RTO website and the Enrolment Form there was no refund information provided for students who withdraw following course commencement.		
 Recommendations – It is recommended that: a written agreement which fully details financial arrangements between the RTO and the student (parent/guardian where applicable) should be developed and implemented. a full review of the Refund Policy and associated communiqués should be undertaken to ensure accuracy, comprehensiveness and consistency. 		
 Auditor Response to Provider Comments Post audit the RTO had developed and submitted a written agreement which detailed financial arrangements between the RTO and the student, and this rectification has been verified. Whilst a Refund Policy was included within the written agreement; the RTO did not demonstrate that refund information was consistent across all student communiqués. Furthermore, information pertaining to withdrawal up to 4 weeks after commencement stated that the RTO will 'retain the fee paid on enrolment'. Two fees are noted within the agreement, a Tuition Fee and an Administration Fee, as such it is unclear from this statement as to which fee the RTO refers and will retain. There was also no reference within the Refund Policy regarding students who withdraw post the 4 weeks following commencement i.e. there will be no refund, and this should be clearly stated. 		



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Revised recommendations – It is recommended that:

• a full review of the Refund Policy and associated communiqués should be undertaken to ensure accuracy, comprehensiveness and consistency.

Element 3.2 Approach to Continuous Improvement – The RTO is compliant; please note opportunities for improvement section.

Element 3.3 Partnership/Auspicing Arrangements – Not Applicable.

Element 3.4 Record Management – The RTO is compliant; please note opportunities for improvement section.

Strengths



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Opportunities for Improvement

Element 3.2

- Ensure all internal audit reports and components thereof are signed and dated by relevant personnel/auditor(s).
- Develop and implement processes for reporting and disseminating outcomes of internal audits to RTO staff and relevant stakeholders.
- Develop and disseminate a communication strategy which informs RTO staff of their responsibilities in continuous improvement, and in implementing the operational management system.

Element 3.4

- Expand retention and archive information to include the location of student files at different points in time.
- Develop and disseminate a communication strategy which informs staff of their role sand responsibilities related to record retention.