

VRQA Guidelines for VET Providers AUDIT REPORT

RTO: Mediquest Pty Ltd

Audit Date: 19th – 20th August 2013

RTO DETAILS					
RTO Name	Mediquest Pty Ltd	RTO Number	5982		
Address	1 Little David Street Yarraville VIC 3013				
	Website	www.mediquest.com.au			
Registration Contact	Denise Dawson				
Phone Number	03 – 9908 0190	Email	denise@mediquest.net.au		
Student Numbers	325 (2012) 259 (2013) as of 01/ 08/2013				
AUDIT TEAM					
Lead Auditor	Sandra Surguy	Auditor/s	N/A		
Technical Advisor/s	N/A	Observer/s	N/A		
REGISTERING BODY DETAILS					
Contact Person	Emma Hickingbotham				
Phone Number	9032 1562	Email	vet.audit@edumail.vic.gov.au		
AUDIT DETAILS					
Type of Audit	Renewal				
Guidelines audited	1.2.3, 1.3.3, 1.3.4, 1.4.1, 1.5	2.1, 2.2, 2.3	3.4	4.1, 4.2, 4.4	5.1
Audit Date/s	19 th – 20 th August 2013				
Other audit notes	Refer AQTF Audit Report				
ACCOMPANYING REPORTS				Yes	No
Continuing Registration – Standards & Conditions				✓	
VRQA Guidelines – Re-registration Checklist				✓	

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FOCUS OF AUDIT		
QUALIFICATION/UNIT OF COMPETENCE/ACCREDITED COURSE		
TGA Code	Qualification/Unit of Competence/Accredited Course (as per TGA)	Delivery Site
BSB20107	Certificate II in Business	Not currently offered
CHC40312	Certificate IV in Disability	Workplace Based
BSB51107	Diploma of Management	RTO Based
22128VIC	Certificate I in Work Education	RTO and Workplace Based

INTERVIEWEE/S: Staff name and position; employer name and position; students by program (do not list by name)	
Denise Dawson	Director/Program Manager
Erin Wilson	Compliance Manager
Rima Bavishi	Administration Manager
Vijay Dasam	BSB51107 Trainer and Assessor

PERMANENT DELIVERY SITES:
<p>Do the RTO's permanent delivery sites match the information provided by the VRQA?</p> <p><input type="checkbox"/> Yes, no further information required.</p> <p><input checked="" type="checkbox"/> No, please provide amended details below: Yarraville to be added as a delivery site (also RTO Head Office and administration centre)</p>

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AUDITOR DECLARATION

I have examined the application from the above named organisation against the *VRQA Guidelines for VET Providers* for the purpose of re-registration. It is my opinion that the organisation *does not meet* the requirements in the VRQA Guidelines for the training identified in their application.

Name of Auditor: Sandra Surguy

Signed

Date: 21st August 2013

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AUDIT SUMMARY

Guideline 1: Governance, Probity and Compliance with Statutory Requirements		
Audit conclusion	Result	
Guideline 1.2.3 – The RTO is compliant.	Compliant	✓
Guideline 1.3.3 – The RTO is compliant.	Non-compliant	✓
	Not audited	
<p>Guideline 1.3.4 – The RTO is not compliant.</p> <p>Across the sampled trainer and assessor files, and with respect to Guideline 1.3.4, a number of gaps and anomalies were noted including:</p> <ul style="list-style-type: none"> • trainer skills matrices were poorly prepared with a number of irrelevant inclusions. • verified/certified vocational qualifications commensurate with training and assessment roles not in place. • documentation pertaining to professional development activities unverified/unsigned by trainers/assessors, and in one instance unnamed. <p>Recommendations – It is recommended that:</p> <ul style="list-style-type: none"> • trainer matrices should be fully reviewed for relevancy and clearly demonstrate vocational competence and/or equivalence. • verified/certified vocational qualifications commensurate with training and assessment roles should be in place for all trainers and assessors. • documentation pertaining to professional development activities should be named, verified and/or signed by trainers/assessors. 		
Guideline 1.4.1 – The RTO is compliant.		
Guideline 1.5 – The RTO is compliant.		
Strengths		

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Opportunities for Improvement

(Note that some audit work for this Guideline will have been performed under AQTF Standard 1.4).

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Guideline 2: Quality Assurance, Review and Evaluation Processes		
Audit conclusion	Result	✓
<p>Guideline 2.1.1 – The RTO is not compliant.</p> <p>The RTO did not have documented policies and procedures in place that included mechanisms to collect regular, valid and reliable feedback from all stakeholders including students, staff and employers; or documented processes for the collation, analysis, recording and reporting of such feedback; or documented processes to ensure that feedback was acted upon to bring about improvements as required by Guideline 2.1.</p> <p>Recommendations – It is recommended that:</p> <ul style="list-style-type: none"> • 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 mechanisms to ensure feedback is acted upon to bring about improvements. 	Compliant	
	Non-compliant	✓
	Not audited	
<p>Guideline 2.1.2 – The RTO is compliant. Please refer Opportunities for Improvement section.</p> <p>Guideline 2.2 – The RTO is compliant. Please refer Opportunities for Improvement section.</p> <p>Guideline 2.3 – The RTO is compliant.</p>		
Strengths		
Opportunities for Improvement		
<p>Guideline 2.1.2</p> <ul style="list-style-type: none"> • Ensure validation processes are inclusive of external, preferably industry, representation. 		
Guideline 2.2		

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- Direction as to the management of documentation arising from an allegation of cheating and plagiarism should be included within the policy and procedure.
- Strategies to prevent cheating and plagiarism should be expanded within the Student Handbook.
- Students should be informed about how the RTO will manage any allegations of cheating and plagiarism.
- Cheating and plagiarism information provided to staff within the staff handbook should be reviewed and expanded.

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Guideline 3: Student Enrolment Records and Certification		
Audit conclusion	Result	✓
Guideline 3.4 – The RTO is compliant. The other aspects of Guideline 3 were not subject to audit.	Compliant	✓
	Non-compliant	
	Not audited	
Strengths		
Opportunities for Improvement		

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Guideline 4: Student Learning Outcomes and Welfare Services								
Audit conclusion	Result							
<p>Guideline 4.1 – The RTO is not compliant.</p> <p>There was no policy and procedure in place for ensuring the RTO does not permit or require students to attend scheduled classes for more than 8 hours in any one day (as required by Guideline 4.1).</p> <p>Recommendations – It is recommended that:</p> <ul style="list-style-type: none"> A policy and procedure for ensuring the RTO does not permit or require students to attend scheduled classes for more than 8 hours in any one day, as required by Guideline 4.1, be developed and disseminated. <p>Guideline 4.2 – The RTO is not compliant.</p> <p>The RTO did not have a policy and procedure, as required by Guideline 4.2, for ensuring the RTO does not permit or require students to attend scheduled classes outside of 0800 hours to 2200 hours on any one day.</p> <p>Recommendations – It is recommended that:</p> <ul style="list-style-type: none"> A policy and procedure, as required by Guideline 4.2, for ensuring the RTO does not permit or require students to attend scheduled classes outside of 0800 hours to 2200 hours on any one day be developed and disseminated. <p>Guideline 4.4 – The RTO is compliant.</p> <p>The other aspects of Guideline 4 were not subject to audit.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Compliant</td> <td style="text-align: center; padding: 2px;">✓</td> </tr> <tr> <td style="padding: 2px;">Non-compliant</td> <td style="text-align: center; padding: 2px;">✓</td> </tr> <tr> <td style="padding: 2px;">Not audited</td> <td style="padding: 2px;"></td> </tr> </table>	Compliant	✓	Non-compliant	✓	Not audited		
Compliant	✓							
Non-compliant	✓							
Not audited								
Strengths								

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Guideline 5: Teaching, Learning and Assessment		
Audit conclusion	Result	
<p>Guideline 5.1 – The RTO is not compliant.</p> <ul style="list-style-type: none"> Assessment methods at unit level did not consistently align with assessment methods identified within each Strategy. The RTO's approach to assessment did not consistently address performance criteria, required skills and knowledge and critical aspects of evidence as mapped. Additionally assessment mapping did not consistently capture or reflect assessment approach. Purchased assessment tools were not customised, as such assessment tools, assessor guides, assessment criteria/marketing guides were not aligned to the RTOs assessment approach. Verified evidence that all proposed training and assessing staff meet NSSC requirements was not in place. <p>Recommendations - It is recommended that:</p> <ul style="list-style-type: none"> assessment methods at unit level should align with those detailed within each Strategy. mapping documents should be reviewed to ensure articulation with unit requirements is consistent with assessment methods at unit level. where purchased assessment materials are to be used these should be customised to meet the RTO's assessment approach a full review of trainer and assessor's ability to meet NSSC requirements should be undertaken, and evidence of such retained by the RTO. 	Compliant	✓
	Non-compliant	✓
	Not audited	
Strengths		
Opportunities for Improvement		