

## Policy

Ash Pty Ltd (trading as Ashley Institute of Training (ASH)) will implement and monitor a systematic approach to the management of both electronic and paper-based records in accordance with the regulator and state-based funding requirements, and in alignment with the Standards for RTOs 2025. ASH is committed to controlling all documentation created within the organisation to ensure consistency, security, and regulatory compliance.

## Objective

ASH defines all administrative record management processes and responsibilities, including document control practices, as determined by ASQA, state funding contracts, legislative, and operational requirements. This ensures integrity, accuracy, security, and currency of all records for their full life cycle.

## Staff Responsible

This applies to all staff:

- CEO
- Trainers and Assessors
- Administration Staff
- Operations Manager
- Compliance Team

## Compliance Standards

This policy relates to the Standards for RTOs 2025 and state-specific funding and regulatory requirements.

## Related Policies/Templates/Documents

- P-001.2 Enrolment Policy and Procedure
- P-006.2 Complaints and Appeals Policy and Procedure
- P-028.2 Advertising and Marketing Policy and Procedure
- P-033.2 Fees, Charges and Refunds Policy and Procedure
- P-039.2 Privacy & Personal Information Policy
- P-043.2 Issuing AQF Certification Documentation Policy
- P-051.2 Validation Policy and Procedure
- P-052.2 Cancellation, Withdrawal and Transfer Policy
- P-054.2 Governance Policy
- P-057.2 Training and Assessment Policy and Procedure

## Definitions

**Assessment** refers to the process of collecting 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 expressed by the relevant endorsed industry/enterprise competency standards of a training package or by the learning outcomes of an accredited course.

(Source: <https://www.asqa.gov.au/resources/general-directions/retention-requirements-completed-student-assessment-items>)

**Assessment tools** include the following components—context and conditions of assessment, tasks to be administered to the student, an outline of the evidence to be gathered from the candidate and evidence criteria used to judge the quality of performance (i.e. the assessment decision-making rules). This term also takes in the administration, recording and reporting requirements, and may address a cluster of competencies as applicable for holistic assessment.

(Source: <https://www.asqa.gov.au/resources/general-directions/retention-requirements-completed-student-assessment-items>)

**Completed student assessment items** refers to the actual piece(s) of work completed by a student or evidence of that work, including evidence collected for an RPL process. An assessor's completed marking guide, criteria, and observation checklist for each student may be sufficient where it is not possible to retain the student's actual work. However, the retained evidence must have enough detail to demonstrate the assessor's judgement of the student's performance against the standard required.

(Source: <https://www.asqa.gov.au/resources/general-directions/retention-requirements-completed-student-assessment-items>)

**Record** means a written, printed or electronic document providing evidence that activities have been performed.

(Source: <https://www.asqa.gov.au/standards/appendices/glossary>)

**Record** means a document, or an object, in any form (including any electronic form) that is or has been kept by reason of:

- Any information or matter that it contains or that can be obtained from it; or
- Its connection with any event, person, circumstance or thing.

(Source: The Archives Act 1983)

**RPL** refers to recognition of prior learning.

(Source: <https://www.asqa.gov.au/resources/general-directions/retention-requirements-completed-student-assessment-items>)

**RTO** refers to ASQA or TAC registered training organisation.

(Source: <https://www.asqa.gov.au/resources/general-directions/retention-requirements-completed-student-assessment-items>)

**Securely retained records** mean to retain records in a manner that safeguards them against unauthorised access, fire, flood, termites or any other pests, and which ensure that copies of records can be produced if the originals are destroyed or inaccessible. Records may be in hard copy or electronic format.

(Source: <https://www.asqa.gov.au/resources/general-directions/retention-requirements-completed-student-assessment-items>)

**Student Identifier** has the meaning given in the Student Identifiers Act 2014.

(Source: <https://www.asqa.gov.au/standards/appendices/glossary>)

## 1. Records Management

- ASH is responsible for the collect, storage, maintenance, disposal, and retention of all paper-based and electronic records.
- ASH only collects records that it is required to do as determined by the regulator and any state-based funding contract. ASH will consider the following when collecting and keeping records:
  - What should I keep?
  - How long should I keep it?
  - How will I keep it (paper-based or electronic)?
  - Who is responsible for the record?
  - Who can access the record?
  - How should I destroy or de-identify the record?
  - How will I monitor that the record management system is working?
- ASH will maintain records in accordance with the student life cycle which includes:
  - Pre-enrolment and informed decision-making
  - Enrolment and induction
  - Training and Assessment
  - Monitoring and support
  - Completion and continuous improvement
- From 1 July 2025, ASQA requires that ASH will ensure that it securely retains, and is able to produce at audit, all completed student assessment items for each student for a period of **TWO (2)** years from the date on which the judgement of competence for the student was made.

**QLD ONLY**

- Under the Skills Assure Supplier (SAS) Agreement, ASH Pty Ltd. will keep the following information and material for **SEVEN (7)** years from the end of the term:
  - a) Information and material necessary to provide a complete record of training and assessment including:
    - (i) records of each Student's participation in Training and Assessment for each Unit of Competency, including records of the commencement of educational content, attendance and progression;
    - (ii) evidence that the on-the-job training component (only if on-the-job training is applicable) has been achieved for each Unit of Competency for each Student before the Supplier claims payment of funding in relation to the Unit of Competency;
    - (iii) evidence supporting the accuracy and validity of data included in reports provided by the Supplier to the Department under clause 5, including evidence supporting the start and end dates for each Student for each Unit of Competency; and
    - (iv) copies of the Qualifications and Statements of Attainment issued to each Student.
  - b) For each Unit of Competency, for each Student:
    - (i) the assessor's completed marking guide, criteria and observation checklists for the Unit of Competency; and
    - (ii) the completed assessment items for the Unit of Competency retained in hard copy (paper-based) or electronic (digital/scanned) form.Any other information and material reasonably requested by the Department.
- The Supplier must give the Department copies of the information and material within 5 Business Days of the Department's request.

## 2. Storage & Retention of Records

- ASH will take all reasonable steps to protect and safely store all records in a central and secure location and ensure that:
  - Records are stored in conditions suitable for the length of time they must be held.
  - Electronic records are maintained using CAP (Central ASG Platform) – Online Enrolment System, ASH's student management system (SMS) and document management system (Novacore)
  - The any regulated/licencing record retention requirements are met.
  - Storage of government funded records must adhere to the requirements of the government funded contract/agreement.
  - All records are kept in a manner that ensures the privacy of any personal and sensitive information.
- ASH will ensure that all records are saved in the student management system (aXcelerate) which is a Cloud based program.

- ASH does not allow any records to be stored in any staff members email account and will schedule regular purging of all deleted emails.
- ASH will retain registers of AQF qualifications they are authorised to issue and of all AQF qualifications issued.
- ASH will retain records of AQF certification documentation issued for a period of **THIRTY (30)** years.
- ASH will provide reports of records of qualifications issued to its VET regulator on a regular basis as determined by the VET regulator.
- ASH will retain sufficient data to be able to reissue a qualification or statement of attainment during a **THIRTY (30)** year period.
- ASH will securely maintain records of all complaints and appeals and their outcomes.

### **3. Access to Records**

- ASH will ensure that students have access to their records that ASH has collected from them upon request.
- Any student or third-party requesting records held by ASH will be required to complete a **F-316.2 Student Information Release Form** that **MUST** be signed by the student to allow the information to be released.

### **4. Monitoring, Review & Version Control of Records**

- All record management and maintenance systems and practices are monitored by the Compliance Team as part of their quality assurance process.
- The Compliance Team will conduct an internal records audit to ensure compliance is being maintained and for continuous improvement opportunities.

### **5. Transfer of Records**

- If for any reason ASH ceases training and assessment operations the relevant regulator must be contacted and make arrangements to transfer all student records.





<b>2. Individual Responsibilities for Recording</b>		
<p>2.1. ASH CEO is responsible for ensuring all financial and business-related records are maintained which includes although not limited to:</p> <ul style="list-style-type: none"> <li>▪ Financials including forecasts, budgets, annual reports.</li> <li>▪ Strategic and business plans.</li> <li>▪ Business registration records</li> <li>▪ Information on Financial Viability Risk Assessment Requirements</li> <li>▪ Public liability insurance</li> <li>▪ Minutes of meetings and/or other forms of evidence relating to governance and business operations.</li> </ul>	RTO CEO	Ongoing
<p>2.1 The State and Operations Managers are responsible for ensuring all records which relate to training and assessment activities are stored, maintained, and archived including:</p> <ul style="list-style-type: none"> <li>▪ Student files</li> <li>▪ Training and assessment strategies, resources and other materials required to conduct training and assessment.</li> <li>▪ Staff records including professional development and credentials.</li> <li>▪ Evidence of ASH SMS</li> <li>▪ Client records</li> <li>▪ AVETMISS Data</li> <li>▪ Outcomes of training and assessment</li> <li>▪ Appeals</li> <li>▪ Complaints</li> <li>▪ Funding arrangements</li> <li>▪ Supplier information</li> <li>▪ Marketing materials</li> <li>▪ Financials</li> <li>▪ Payments and refund information</li> </ul>	State Manager Operations Manager	Ongoing
<p>2.2. The National Quality and Compliance Department are responsible for storage, maintaining and archiving all required records to ensure compliance against the Standards for RTOs 2025.</p>	NCQD	Ongoing



<b>RTO management records (all versions)</b>	ASQA	Seven (7) years
<b>Administration documents, form, policies, and procedures including Retired / Obsolete</b>	ASQA	Seven (7) years
<b>Assessment resources / templates</b>	ASQA	5 years
	QLD Funding	7 years
<b>AQF Certification</b>	ASQA	30 years
	QLD Funding	7 years
<b>Student files</b>	ASQA	Onsite in hard copy for a period of three (3) months in case the file needs to be retained.
<b>Student financials</b>	ASQA	7 years
<b>Evidence of contribution fees paid</b>	QLD Funding	7 years
<b>SRTO notices/ERA form/Training plans</b>	QLD Funding Apprenticeship/Traineeship	7 years
<b>Complaints and/or appeals</b>	ASQA	7 years
<b>Staff records</b>	ASQA	7 years from the time employment with ASH is ceased.

## 5. Monitoring, Review & Version Control of Records

<ul style="list-style-type: none"> <li>All records, including storage of retired and/or obsolete documents are maintained electronically through ASH Compliance Management System (CMS) – Novacore. The Compliance Team are responsible for the management of this system.</li> </ul>	CQD	Once approved by NCQM
<p><b>Identification of newly created documents</b></p> <ul style="list-style-type: none"> <li>The identification of new documentation required to assist in the operation of ASH must be consulted with senior management to determine the appropriateness from an operational perspective and necessary compliance requirements.</li> <li>Approval will be obtained prior to implementation by Compliance Team.</li> </ul> <p><b>Effective Date and Review Date of Controlled documents</b></p> <ul style="list-style-type: none"> <li>All controlled documents will specify an effective date and a scheduled review date. The Compliance Team will determine the applicable duration and review frequency at the time of creation, based on the document's purpose, relevance, and regulatory requirements. The Compliance Team may adjust review timelines as needed to ensure documents remain current and fit for purpose.</li> </ul>		

<p><b>Policies and procedures creation/review</b></p> <ul style="list-style-type: none"> <li>Each policy and procedure must be developed using the latest RTO template to maintain consistency in style, format, and document control properties.</li> <li>Policies and procedures are developed and approved by the Compliance Team. All new or reviewed policies and procedures, forms, manuals, TASs, brochures, curriculum materials, or other controlled documents will be communicated via email to all Training Staff. It is the responsibility of the receiver to communicate all changes to members of staff who will be impacted by the change.</li> </ul> <p><b>Controlled document identification</b></p> <p>Each controlled document created is required to display the following properties as a standard identifier control measure:</p> <ul style="list-style-type: none"> <li>All RTO documents will maintain their own version control identifier.</li> <li>In the footer as part of the version control process: version control date, approval date, review date and page number.</li> </ul> <p><b>Policies and procedures</b></p> <ul style="list-style-type: none"> <li>All RTO policies and procedures will be identified with a document name, and a unique prefix and number such as <b>P-XXX</b></li> <li>All existing policies and procedures will include a document revision history identifier outlining the changes made, by whom, when published including the version number.</li> <li>All policies and procedures will maintain a version control identifier in the footer of the document.</li> </ul> <p><b>Training and Assessment Strategies</b></p> <ul style="list-style-type: none"> <li>All approved TAS documents are allocated a TAS ID number and registered on the TAS Register maintained by Compliance.</li> <li>TAS documents are to be created by Compliance only.</li> </ul> <p><b>Course Brochures</b></p> <ul style="list-style-type: none"> <li>All course brochures are to be controlled by allocating a brochure code and registered on the Brochure Register maintained by Marketing Manager &amp; Compliance Team. At no time are brochures or other forms of marketing material to be developed by the individual RTO. Refer to <b>P-028.2 Advertising and Marketing Policy and Procedure.</b></li> </ul> <p><b>Assessment Tools</b></p> <ul style="list-style-type: none"> <li>All assessment tools are to include a version control number, date published and review date within the footer of the document. All current versions will be uploaded into Novacore and be made available to access in Sharepoint. At no time should assessment resources be developed and/or modified by ASHs.</li> <li>Refer to <b>P- 057.2 Training and Assessment Policy and Procedure.</b></li> </ul> <p><b>General RTO Forms</b></p> <ul style="list-style-type: none"> <li>All RTO forms will be identified with a document name, and a unique prefix</li> </ul>		
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and number such as **F-XXX**.

- All forms will contain a version control measure located in the document footer including the version control number, published date and review date.
- All current versions are uploaded into Novacore and be made available for access in Sharepoint. At no time should a form be produced for operational purposes without approval from Compliance.

**Documents and manuals**

- Templates, information sheets and manuals are identified with a unique prefix, number, and name for example: **M-XXX** for manual, **D-XXX** for documents
- All documents will contain a version control measure located in the document footer including the version control number, published date and review date.
- All current versions are uploaded into Novacore and are made available for access in Sharepoint.
- At no time should a form be produced for operational purposes without approval from Compliance Team.

**Testamurs, Records of Results and Statements of Attainment**

- All AQF documentation is provided with a certification number, date of award, and date of issuance.
- All Testamurs, Records of Results, and Statements of Attainment must be created using the templates built into the Student Management System (SMS).

**Maintaining Version Control**

- Novacore is used to store, manage, and review all versions of all controlled documents.
- When updating a controlled document, the version number of the document will automatically be updated.
  - If the changes made are a Major Change (i.e. a complete re-write of the document or a significant change to a process or document), the version will increase to the next whole number (e.g. from Version 1.2 to Version 2.0)
  - If the changes made are a Minor Change (i.e. correcting a typing error, adding new fields to a form, etc.) the version will increase by .1 (e.g. from Version 1.2 to Version 1.3)

Whenever updating a Controlled Document, revision notes are to be left indicating what changes are being made. Dates of changes made are automatically footprinted.

**Maintenance of Retired and/or Obsolete Documents**

- Storage of retired and/or obsolete documents is maintained electronically

<p>through ASH CMS – Novacore.</p> <ul style="list-style-type: none"> <li>Each document is archived under its relevant folder. Note that historical versions can be retrieved if required.</li> </ul>		
<b>6. Transfer of Records</b>		
<ul style="list-style-type: none"> <li>In the event ASH ceases operations for any reason the Regulator must be notified electronically providing the regulator: <ul style="list-style-type: none"> <li>Student records within 30 days of the day the withdrawal takes effect.</li> </ul> </li> </ul>	CEO and NCQM	During withdrawal

## Document Revision History

Version Number	Author	Date Published	Description
3.0	Pippa Price	5 August 2020	Policy created for specific RTO from original policy P-003 (V3.0)
3.1	Rebekah Faleafaga	02/12/2021	Remove reference to: F-006; Added reference to: F-523 & F-524
3.2	Fiona Dunkerton	12/01/2023	Scheduled review; minor updates to formatting
4.0	Rebekah Faleafaga	Oct 2025	Updated as per current requirements.
3.4	Fiona Dunkerton	Sept 2024	Scheduled review; cosmetic updates only.
4.0	Rebekah Faleafaga	Oct 2025	Rehauled. Superseded P-140.2 Controlled Docs P&P and merged into P-003 as a section. Removed other States as its irrelevant to QLD. Transition to NVR SRTO Standards 2025.