


POLICY		
Ref. to Legislative Frameworks: HESF2015: Standard 6 SRTO2015: Standard 2.1 / 2.2 / 7.1 / 8.4 / 8.5 National Code 2018: Standard 11	Internal Audit	
Version: 2.0	Policy Owner: Chief Executive Officer	Issued on: 06/04/2018 Review by: 06/04/2020

Revision History

Current Version	Description of Change	Policy Developer(s)	Effective Date
2.0	New	Compliance Manager	06/04/2018

PURPOSE

This policy underpins the internal audit planning process to maintain AAPoly's compliance with the relevant regulatory requirements.

POLICY STATEMENT

AAPoly's systems and practices are internally audited at least once a year, to maintain compliance with regulatory standards. Corrective actions and continuous improvement measures may result from the internal audit.

SCOPE

This policy applies to all systems and practices of AAPoly.

DEFINITIONS

Internal Audit	A systematic review against defined criteria, carried out by staff independent of the operations, to determine whether activities and related results comply with planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve compliance with relevant legislative requirements and the organisation's policies and procedures
Observation	Recommendations or suggestions for system improvement to confirm or enhance system requirements.
Non-Compliance (NC)	Non-fulfilment of specific requirement(s) or elements of relevant regulatory and legislative standards.
Objective Evidence	Qualitative or quantitative information or statements of fact based on observations, measurement or tests which can be verified.
Sample	A subset of a population

POLICY GUIDELINES AND PRINCIPLES

1. Internal Audits are conducted annually to:

1.1 Ensure that the processes comply with regulatory requirements and documented policies and procedures.

1.2 Ensure compliance with AAPoly's policies and the consistent practice of procedures and to initiate action to correct any problems identified.

1.3 Identify opportunities for improvement and gather evidence for an internal audit report for the management's perusal.

1.4 There are some regulatory requirements which require internal audits to be conducted before the CEO's undertaking a declaration of compliance. ASQA's annual compliance declaration is one example and Victorian Government funded Skills First program is another example where annual internal audits are mandatory.

2. Internal Audit reports have to be produced within two (2) weeks after the conclusion of internal audits and submitted to the CEO for management's attention.

RESPONSIBILITIES

The Compliance Manager (CM) is responsible for:

- a. Planning and determining the Internal Audit schedule and scope of the audits. The schedule and scope of internal audits will be based on regulatory requirements (e.g. Skills First, Fed Uni, SMIPA), identified deficiencies and results of previous audits.
- b. Informing the relevant departments of the dates for the Internal Audit
- c. Together with other stakeholders, conducting the Internal Audit according to the requirements of the Internal audit schedule, using all necessary tools and techniques to allow for the gathering of objective evidence against the reference being reviewed.
- d. Preparing and circulating final reports (as required) on the results of the Internal Audits for senior management.

Designated Heads (DH) or the relevant stakeholders are responsible for:

- a. co-operating with the Internal Auditor(s) and providing evidence of compliance as requested by the auditor(s)
- b. determining and implementing, within the agreed timeframes, corrective actions for any agreed non-compliances identified.

FEEDBACK

Queries or feedback about this policy should be directed to the CEO through suggestionstotheceo@aapoly.edu.au. The CEO will respond in writing to the feedback or enquiries within two (2) weeks unless an extenuating circumstance requires an immediate response or action. Any material changes to this policy because of the feedback will be documented in the version control register and utilised as part of continuous improvement and quality assurance of AAPoly.

REFERENCES

Source	Document Title	Version/Date
External	ASQA Standards for Registered Training Organisations	2015
	Higher Education Standards Framework (Threshold Standards)	2015
	National Code of Practice for Providers of Education and Training to Overseas Students	2018