

Practice guide 10 (PG10)

Governance of senior secondary programs

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TASC *Standards for Providers* alignment



Standard 6: Governance and compliance

Governance should provide assurance that accredited courses are delivered, assessed and quality assured (QA) in accordance with TASC requirements. Governance is demonstrated through the implementation, monitoring and review of the practices described in the *TASC Practice guides* (PG1-PG9). Together, these guides provide examples of the evidence providers may use to demonstrate compliance with the *TASC Standards for Providers*.

Providers should be able to demonstrate that governance responsibilities are clearly assigned, compliance obligations are monitored, records are maintained and quality assurance findings are used to inform continuous improvement.

Requirement

Providers must establish and maintain governance arrangements that support compliance with the *TASC Standards for Providers* and the effective delivery, assessment and quality assurance of accredited courses.

How this supports compliance

Governance provides the framework through which providers ensure that regulatory obligations, course requirements and quality assurance responsibilities are understood, assigned, monitored and completed.

Effective governance supports providers to:

- maintain compliance with TASC requirements
- allocate roles, responsibilities and accountability
- monitor critical operational activities

- meet regulatory deadlines and submission requirements
- ensure continuity of processes during staff changes
- maintain accurate records and evidence
- support decision-making and oversight
- promote continuous improvement.

Strong governance is not simply about maintaining documents. It is about ensuring that systems, responsibilities and quality assurance mechanisms operate consistently and effectively across the provider.

A key principle of quality assurance is that providers should be able to demonstrate that compliance activities are actively managed rather than relying on individual staff knowledge or historical practice.

Provider context

While governance structures may differ across providers, all providers should be able to demonstrate how compliance obligations are coordinated, monitored and assured.

Providers should ensure governance arrangements align with:

- *TASC Standards for Providers*
- accredited course requirements
- assessment requirements
- sector and governing authority policies
- provider governance frameworks
- local operational practices.

Documentation should clearly identify:

- responsibilities
- delegations
- decision-making processes
- monitoring arrangements
- reporting requirements
- review mechanisms.

Common QA findings and areas for improvement

In audits and check-ins with schools, common areas where there was a lack of supporting evidence included the following, which must be addressed for compliance:

✗ Governance responsibilities are unclear

Staff are unable to explain:

- who is responsible for key tasks
- who approves decisions
- who monitors compliance activities.

Accountability is difficult to demonstrate when responsibilities are not clearly assigned.

✗ Critical processes rely on one individual

Provider compliance knowledge is held by a single staff member. Examples include:

- TASC submissions
- course movement requests
- external assessment administration
- final ratings submission.

Staff absences, turnover or role changes create significant compliance risk.

✗ Compliance activities are not monitored

Providers complete activities but do not maintain systems to track:

- deadlines
- submission requirements
- review schedules
- quality assurance obligations.

Important regulatory activities may be missed or completed inconsistently.

✗ Folio archiving and record management are inconsistent

Providers cannot clearly demonstrate:

- what records are retained
- where records are stored
- retention responsibilities
- access arrangements.

Assessment and governance records may be required for verification, review or audit purposes.

✗ Delegations are undocumented

Key decisions are made without documented authority or escalation processes.

Providers should be able to demonstrate who is authorised to make significant compliance decisions.

✗ Governance information is dispersed across multiple documents

Important compliance information sits in separate locations and is difficult to access.

Governance arrangements should support consistency and continuity.

✗ Little evidence of monitoring effectiveness

Governance processes are documented but providers cannot demonstrate:

- review activities
- oversight arrangements
- evaluation of effectiveness.

Governance should support continuous improvement, not simply compliance.

✗ Governance reviews do not inform improvement

Providers review processes but cannot demonstrate resulting changes.

Quality assurance relies upon review leading to action.

What good practice looks like

During quality assurance activities, good practice is indicated when TASC can readily identify that:

- ✓ Governance responsibilities are documented.
- ✓ Critical activities are monitored.
- ✓ Compliance deadlines are tracked.
- ✓ Multiple staff understand key processes.
- ✓ Delegations are clearly established.
- ✓ Record management arrangements are operating effectively.
- ✓ Submission processes are consistently implemented.
- ✓ Governance reviews occur regularly.
- ✓ QA findings inform decision-making.
- ✓ Continuous improvement is evident.
- ✓ Governance processes remain effective despite staff changes.

Examples of good practice include:

✓ Responsibilities are clearly defined

The provider maintains documentation identifying responsibility for critical activities.

Examples include:

Activity	Responsible Officer
TASC submissions	TASC Liaison Officer (TLO)
Final ratings verification	Curriculum Leader
Folio archiving	Learning Area Leader
QA participation	Senior Leadership Team

This is effective to ensure accountability is clear, continuity is supported and compliance risks are reduced.

✓ Governance activities are planned and monitored

Providers maintain a governance calendar identifying:

- key deadlines
- recurring compliance tasks
- quality assurance activities
- reporting cycles.

This is effective to ensure activities are visible, deadlines are monitored and compliance obligations are less likely to be missed.

✓ **Delegations and escalation processes are documented**

The provider identifies:

- decision-making authority
- approval requirements
- escalation processes
- contingency arrangements

This is effective to improve consistency, strengthen governance and supports continuity during staff absences.

✓ **Record management processes are established**

Providers maintain clear procedures regarding:

- folio archiving
- assessment records
- governance documentation
- retention requirements.

This is effective to support accountability; ensure records are available when required and reduce governance risk.

✓ **Governance supports Quality Assurance**

QA findings, moderation outcomes, external assessment information and TASC feedback are considered during governance reviews.

This is effective to support evidence-based decision making, promote continuous improvement and strengthen compliance capability.

✓ **Governance processes are reviewed annually**

- Providers regularly review
- governance responsibilities
- compliance calendars
- risk areas
- quality assurance findings
- operational effectiveness.

This is effective to support continuous improvement, maintain currency and improve organisational resilience.

Evidence TASC expects to see

TASC expects providers to maintain documentation and practices that are consistent with the *Standards for Providers*, accredited course requirements and relevant sector or governing authority policies. Evidence should demonstrate not only compliance with TASC requirements, but also how sector expectations and provider decisions have been incorporated into local operational practices and quality assurance processes.

During quality assurance activities, TASC may seek evidence that providers have governance systems which ensure requirements are not only documented, but implemented, monitored, reviewed and improved over time.

Documentation

Providers may maintain:

- Governance framework
- Senior secondary handbook
- Governance calendar
- Compliance and delegations register
- Risk register
- Submission schedule
- Records management procedure
- Folio archiving procedure
- QA review schedule
- Annual improvement plan

Implementation characteristics

TASC is not simply seeking evidence that a document exists. TASC expects to see evidence that documented processes are implemented, monitored, reviewed and used to support continuous improvement in provider practice. TASC may seek evidence such as:

- Governance meeting minutes
- Compliance tracking records
- Submission logs
- TASC correspondence
- Course movement records
- Final ratings verification records
- Folio archiving records
- Quality assurance participation records
- Annual review reports
- Continuous improvement actions
- Governance risk monitoring activities.

Table 1: Examples of documentation and implementation evidence against the Standards for Providers.

Standard	Documentation	Evidence of Implementation
Standard 1	Access policy	Student support actions
Standard 2	Scope and sequence	Teaching programs
Standard 3	Assessment matrix	Assessment records
Standard 4	Moderation procedures	Review documentation
Standard 5	External assessment communications	Student information sessions
Standard 6	Professional learning records	PL impact on practice
Standard 7	Governance framework	Compliance monitoring activities

Quick self-check questions

Accountability

- Are governance responsibilities clearly documented?
- Can staff explain their responsibilities?

Continuity

- If a key staff member was absent, would compliance obligations still be met?
- Are contingency arrangements documented?

Monitoring

- How are compliance activities monitored?
- How are deadlines tracked?

Records Management

- Are records retained appropriately?
- Can documentation be readily accessed?

Quality Assurance

- How are QA findings incorporated into governance reviews?
- How does governance support continuous improvement?

Provider Capability

- Can the provider demonstrate that governance systems are implemented in practice?
- Can evidence be produced to support key compliance activities?

Relevant resources

- [Quality Assurance Standards for Providers](#)
- [Quality Assurance Focus for the Year - TASC](#)
- [Quality Assurance Tools and Resources - TASC](#)