

# Approach to Compliance

Regulatory Practice Guide



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Australian Government  
Australian Skills Quality Authority

ASQA

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## Glossary of terms and acronyms

**AAT** means the Administrative Appeals Tribunal (AAT). The AAT is an entity that conducts independent merits review of administrative decisions made under Commonwealth laws.

**ASQA** refers to the Australian Skills Quality Authority.

**Compliance management** is the term used by ASQA to describe processes related to management and monitoring of a provider following a finding of non-compliance.

**Commonwealth Register of Institutions and Courses for Overseas Students (CRICOS)** is the official Australian Government website that lists all Australian education providers offering courses to people studying in Australia on student visas as well as the courses offered. Refer to <https://cricos.education.gov.au/>

**Continuous improvement** refers to a systematic, ongoing effort by a provider to raise an organisation's performance to provide quality VET and improve outcomes for students under the applicable standards.

**Decision maker** means the CEO of ASQA or an employee of ASQA who is delegated to make decisions, and exercise regulatory functions and powers under the relevant legislation.

**Legislation** means the *National Vocational Education and Training Regulator Act 2011* (NVR Act) and the *Education Services for Overseas Students Act 2000* (ESOS Act).

**National Register** means the website found at [www.training.gov.au](http://www.training.gov.au) which details information on training packages, qualifications, accredited courses, units of competency and registered training organisations (RTO). It also includes information about a provider's scope of registration and history of regulatory decisions.

**Provider** is a broad term that includes providers offering VET courses (also known as Registered Training Organisations or RTOs) as well as those listed on CRICOS that deliver VET courses and English Language Intensive Courses to Overseas Students (ELICOS).

**Regulatory response** refers to the broad approach ASQA may take when responding to non-compliance and includes any combination of regulatory tools used by ASQA to address the non-compliance.

**Regulatory tools** refer to the specific actions available to ASQA to encourage and enforce compliance with the legislation. This includes information, education, administrative actions and enforceable actions.

**Review** means reconsideration as that term is used in the NVR Act. It also means internal review as that term is used in the ESOS Act.

**Standards** mean the *Standards for Registered Training Organisations (RTOs) 2015*, *English Language Intensive Courses for Overseas Students (ELICOS) Standards 2018*, *the National Code of Practice for Providers of Education and Training to Overseas Students 2018* and/or the *Standards for VET Accredited Course 2021*.

**Systemic risk** refers to risks that are identified as affecting a whole group of providers or the market as a whole.

# Introduction

## Purpose and context

The National Vocational Education and Training Regulator (the National VET Regulator) is established under the *National Vocational Education and Training Regulator Act 2011* (NVR Act) and may also be known as the Chief Executive Officer of the Australian Skills Quality Authority (ASQA). Our role is to provide assurance that VET is delivered to a quality standard so that students, employers, the community and governments can have confidence and trust in the VET sector.

We acknowledge that, through our regulatory functions, we cannot remove all risks or contributing factors impacting the quality of VET. We know we are part of a system with many influences on quality. We seek to actively engage with stakeholders and the regulated community to work collaboratively to enhance VET quality.

Our Compliance Regulatory Practice Guide focuses on the ways we monitor compliance with the relevant legislation and standards and take action in the event of non-compliance.

## A. Strategic and organisational context

We are committed to being a best practice regulator and aim to provide nationally consistent, risk-based regulation of VET that contributes to an informed, quality VET sector that meets Australia's needs.

Our regulatory approach is underpinned by our [Regulatory Operating Model](#) and [Regulatory Risk Framework](#).

This applies across our regulation of:

- providers that deliver VET qualifications and courses (i.e. Registered Training Organisations [RTOs])
- providers that deliver VET courses to overseas students
- accredited VET courses
- certain providers that deliver English Language Intensive Courses to Overseas Students (ELICOS).

## B. Our approach to compliance

The foundation of our approach to compliance is **promoting and supporting providers to self-assess their performance in delivering quality VET outcomes and to plan for continuous improvement**. We do this through our sector engagement and education, and in how we respond to non-compliance. We promote sector-wide learning by using the outcomes of compliance monitoring activities to communicate with providers about risks and areas of non-compliance.

To identify risks to quality VET, we draw on data and intelligence from many sources to **understand risks to the performance of the sector** and use this to inform our compliance monitoring priorities.

Our Regulatory Risk Priorities inform our **range of monitoring activities**. These enable us to monitor provider performance, from an individual through to sector-wide basis, efficiently and effectively. Our Regulatory Risk Priorities allow us to identify and respond to issues

relating to the quality of VET, and ensure compliance with the legislation, the VET Quality Framework and the ESOS framework.

Where monitoring activities identify that a provider does not meet the requirements of the legislation and/or the standards, we will **respond to non-compliance in a proportionate way**. Our aim is to ensure the provider addresses the non-compliance and has systems to monitor and ensure ongoing compliance. Our response to non-compliance will be proportionate to the seriousness of the non-compliance and extent of the provider's commitment and capability and focus on ensuring sustained compliance.

We recognise that most providers are committed to and capable of delivering quality training and will be continuously reviewing their performance and taking action to ensure ongoing compliance. Where this is the case and non-compliance has been identified, we are likely to give the provider an **opportunity to rectify problems** through, for example, an agreement to rectify. This opportunity will depend on the nature and impact of the non-compliance, the conduct of the provider and their understanding of the problem, their commitment to continuous improvement, and willingness to take action to ensure the solution is effective and sustained.

In cases where a provider does not demonstrate a commitment or capability to delivering quality training, or to make necessary changes in response to identified non-compliance, our response will be to compel that provider to take action using an **escalating range of regulatory tools to enforce compliance**.

## 1. Determining the appropriate regulatory response

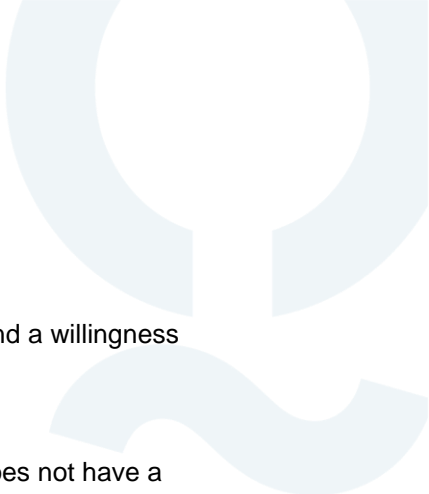
When we identify non-compliance, we respond with a range of regulatory tools to encourage, direct or enforce compliance with the legislation, including the standards. These tools and measures may be used individually or together to respond in a way that is risk-based and proportionate.

Our regulatory response aims to:

- promote continuous improvement and self-assessment to ensure future compliance is achievable and sustainable
- encourage ongoing compliance by raising awareness of the obligations under the legislation and consequences of non-compliance
- ensure that the provider promptly addresses non-compliance and rectifies any harm caused by the non-compliance, including to students
- address non-compliance in the most efficient way
- increase accountability and transparency of performance in the sector.

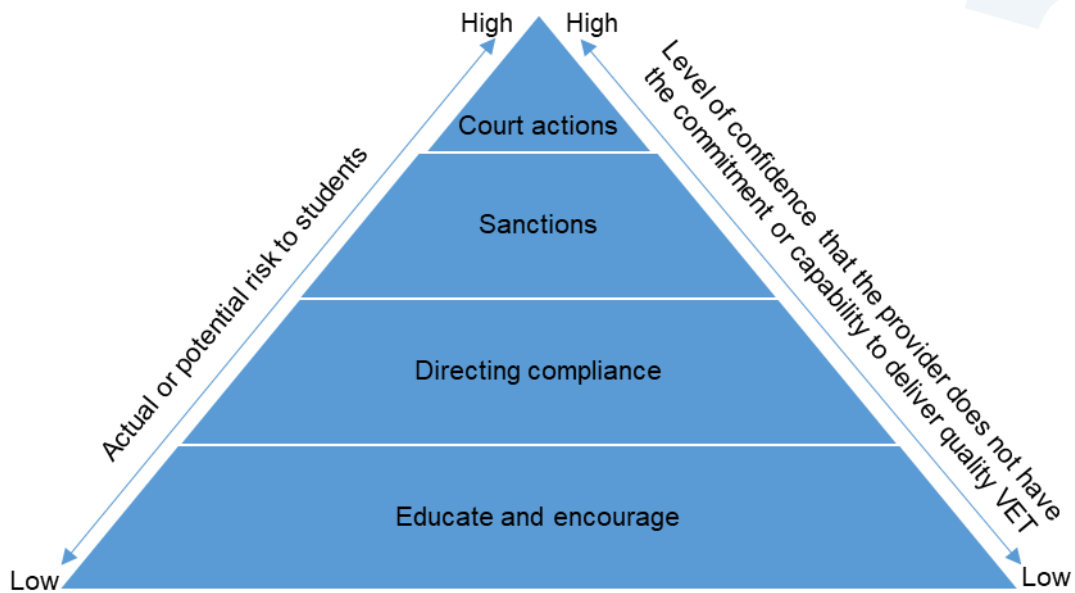
When we decide what action to take, our response will be based on the level of risk (as indicated by the nature and seriousness of the non-compliance), and the provider's commitment and capability to deliver quality VET (as indicated by the provider's profile and behaviour), and any other matters relevant to the decision. Considerations can include the:

- **nature and seriousness of the non-compliance, and whether:**
  - it is repeated and/or widespread across the provider's practice
  - potential harm is apparent (the impact on students and the community, the integrity of VET qualifications, and confidence in the VET sector).

- 
- **profile and behaviour of the provider, and whether:**
    - the non-compliance was intentional or an oversight
    - the provider demonstrates an understanding of the non-compliance and a willingness to rectify
    - the provider has systems in place to monitor its own compliance
    - there is a history of non-compliance that demonstrates the provider does not have a commitment to or capability of returning to compliance.
  - **other relevant matters, including whether:**
    - the response is likely to be effective in returning the provider to sustained compliance
    - there are any other circumstances that may mitigate or aggravate the matter
    - it is in the public interest to take the action in the circumstances
    - the matter is better addressed by another regulator or body
    - the most appropriate response is being taken to ensure an effective deterrent against non-compliance (for the non-compliant provider and more broadly).

Applying this approach means that we will adopt a graduated approach to the use of regulatory tools in response to non-compliance.

Figure 1. ASQA's graduated approach to its use of escalating regulatory tools to promote and ensure compliance.



## 2. Decision making

Before making a decision that adversely affects a provider, we ensure that a provider is given procedural fairness. In most cases this means that the provider is given an opportunity to respond to identified instances of non-compliance before we make a decision.

When making a decision, our decision makers consider relevant information and evidence, and where required by the legislation give written reasons for their decision. This enables providers to understand the reasons, evidence and facts that have resulted in the decision.

An affected party may request reconsideration or external review of certain decisions made by us. (see [Avenues of review](#)).

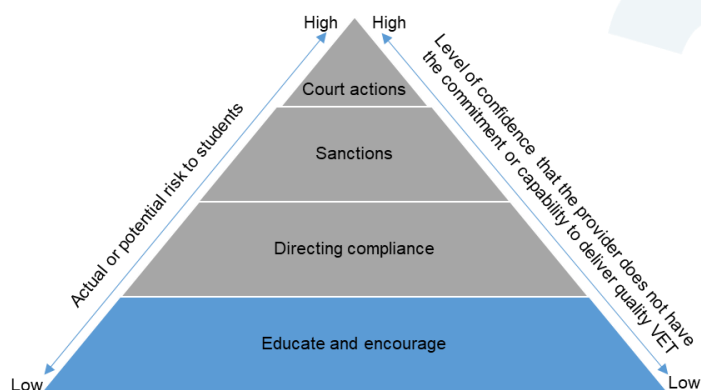
### 3. Our tools to promote and ensure compliance

#### a. Educate and encourage

We encourage compliance through information, education and advice made available to all providers.

Providers are responsible for meeting the requirements of the legislation and the Standards. Quality VET should result from the providers' efforts in

monitoring and continuously improving the quality of training and assessment, and outcomes for students. Students, industry, the community, governments and ASQA expect providers to comply with their obligations and to have mechanisms in place to ensure that they are meeting relevant standards at all times. This is a core part of a provider's best business practice and is central to maintaining and improving quality VET.



#### i. Information, education and advice

Our broad-based education and engagement functions have a sector-wide reach and are available to all providers. Where we find patterns of non-compliance across multiple providers, we provide education and advice for the sector that assists providers to understand the requirements, assure themselves that they are delivering quality VET, manage the risks, and take action to address any areas identified as not compliant.

Irrespective of what regulatory tools we use when addressing provider non-compliance, we will clearly communicate this information in a way that supports the provider to understand what is required. While it is not our role to tell providers how to remedy non-compliance, we will explain the requirements of the relevant legislation and applicable standards, and why we consider the provider has fallen short. The provider also has the opportunity to ask questions about our findings.

In some cases, non-compliance will be relatively minor and easily fixed. Where the provider does not have a history of non-compliance and demonstrates an understanding of the concern and has a willingness to act, we may choose not to use enforcement powers but instead raise the matter with the provider with an expectation that they voluntarily address the issue. We may then follow this up with a subsequent monitoring activity to ensure the issue has been addressed.

#### ii. Provider self-assurance and continuous improvement

Self-assurance describes the measures a provider puts in place to ensure they meet their legislative obligations, improve their practice and deliver quality outcomes for students and industry. Self-assurance processes should also identify any risks to the quality of training and plan for mitigating or responding to these risks. Critically examining their practice allows providers to limit or prevent harm to students, or the sector, and ensure that they are



delivering quality VET. The types and frequency of the measures implemented will vary from provider to provider based on their characteristics and the risk of non-compliance.

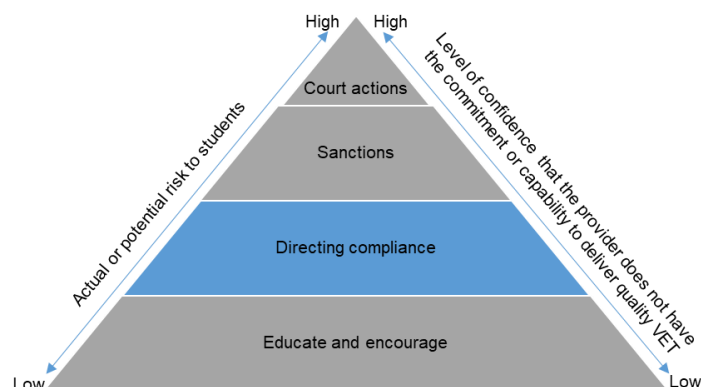
Under the Standards, providers are required to engage in continuous monitoring and evaluation of their training and assessment strategies and practices. Providers are expected to take action when an issue is detected to ensure that the quality of training delivery is maintained, any instances of non-compliance are rectified, and action is taken to prevent non-compliance from recurring. In our regulatory response to non-compliance, we will consider the provider's commitment to continuous improvement and capability to address the non-compliance.

We actively promote and support a provider's culture and systems for self-assurance and continuous improvement. We will provide information and education to support providers to understand the requirements of the legislation and the Standards, and critically examine their performance and outcomes (including their compliance with the Standards) on an ongoing basis. We engage with peak bodies representing providers, State and Territory Training Authorities and other VET stakeholders about key issues in the sector. This engagement informs a range of education and communication activities promoting self-assurance.

The Annual Declaration on Compliance is an opportunity for providers to share with ASQA areas of identified risks to quality. We can use this information, along with other data and intelligence, to identify common areas of non-compliance and emerging risks to provide advice and guidance, and support ongoing compliance through critical reflection.

## b. Directing compliance

Directing compliance is a regulatory tool to direct the actions of providers who, although committed to delivering quality training outcomes, are not understanding what is required, or are not capable of meeting these outcomes.



### i. Agreement to rectify

In certain circumstances where we identify non-compliance by a provider, we may offer the provider the opportunity to propose an agreement to rectify the non-compliance and a reasonable timeframe to do so (up to three months). If we are satisfied that the proposal is reasonable and that the provider will return to compliance within the agreed timeframe, we will enter into an agreement with the provider.

An agreement to rectify will:

- describe ASQA's actions to compel the provider to address the non-compliance
- describe the actions the provider proposes to use to address the non-compliance and the way that they will provide evidence of the return to compliance
- set out the timeframes for completion of the agreed actions.

If a provider fails to comply with an agreement to rectify, we may consider escalating our regulatory response. Likewise, if circumstances change over the period of the agreement

(such that they may significantly heighten the risk of harm to students or demonstrate further or more significant non-compliance) we may take other regulatory action.

**We may use an agreement to rectify when:** *(non-exhaustive list)*

- the non-compliance does not pose significant risk to students or their vocational outcomes (i.e. the nature and type of non-compliance is not significant)
- providers are cooperative and willing to address the non-compliance
- providers have sufficient understanding and resources to address the non-compliance
- the non-compliance is likely to be addressed within the timeframe proposed (up to a maximum of 3 months).

## ii. Warning letters

We may issue a warning letter to a provider where alleged contraventions of civil penalty and/or criminal offence provisions in the NVR and ESOS Acts are identified. This letter may be issued as an alternative to issuing an infringement notice or taking court action.

Warning letters create a useful record of our concerns at a point in time and confirm that those concerns have been raised with the provider. This record can help inform our future approach to non-compliance with the NVR and ESOS Acts by a provider.

**We may use warning letters when:** *(non-exhaustive list)*

- it is mainly in relation to civil/criminal provisions of the NVR and ESOS Act
- it is a first instance of non-compliance (or depending on provider's history, the first instance of *this type* of non-compliance)
- the immediate risk posed by the conduct is not so great that it requires a stronger response.

### iii. Written directions to rectify

We may send written directions under the NVR Act, which require a provider to rectify a breach of a condition of registration and provide or retain evidence that this has occurred.

Providers are required to retain evidence of compliance with a written direction for a period of 12 months and evidence may be part of future compliance monitoring activities. If a direction to rectify a breach of condition is not actioned by the provider, we may consider taking other regulatory action as appropriate.

**We may use written directions to rectify where:** *(non-exhaustive list)*

- risk to future students is low
- non-compliance is not extensive
- a provider has demonstrated commitment to rectify the non-compliance. For example, updating relevant tools, undertaking reassessment of students and putting a plan into place to resolve remaining non-compliance
- remedial action is required
- matters reach the AAT and a provider remains non-compliant but has expressed willingness and capacity to return to compliance and address the non-compliances within a specified period.

### iv. Conditions on registration

We may impose conditions on a provider's registration and/or vary any existing conditions.

Conditions may broadly relate to four categories of action:

- Retention of information
  - Maintaining a register of trainers and assessors
  - Retaining completed student assessment tasks for a specified period
- Provide evidence or notification of specific events
  - notify us when commencing the delivery of training and assessment
  - submit specific information to us on a determined regular basis
  - provide us with specific data or information on a regular basis.
- Limiting risk exposure through restricting certain activities
  - not accept recognition of prior learning
  - not add to the registration scope
  - not accept enrolments beyond a set maximum cap
- Maintaining assurance
  - monitor student attendance
  - implement a plagiarism policy

Conditions are imposed for a specified period of time. However, providers can request a reassessment and remove conditions prior to their nominal expiration if they believe they have rectified the issues or a risk is no longer present.

Following a request for reassessment, we will review any available evidence, including that submitted by the provider, and decide whether it is appropriate to vary or revoke the condition(s). We may also reassess the appropriateness of any condition(s) as part of the provider's compliance management.

**We may use conditions on registration where:** *(non-exhaustive list)*

- non-compliance remains but the imposition of a condition will ensure the providers return to compliance
- specific risk is identified and can be addressed through limitations on, or specific actions carried out by the provider.

## v. Enforceable Undertakings

We may use an Enforceable Undertaking, which is a legally binding agreement between ASQA and a provider obliging them to meet their requirements. This is a means by which we and a provider can reach a settlement and they may satisfy our directions for future compliance with the legislation.

Enforceable Undertakings are valuable regulatory tools because they can provide, among other things:

- a tailored and flexible resolution for issues of concern
- an opportunity for providers to be involved in the resolution of the matter
- a more cost-effective and timely outcome compared to litigation
- opportunities for sector-wide learning and continuous improvement from undertakings where they can be published.

Unlike agreements to rectify, where the term(s) of Enforceable Undertaking are breached, we may apply to Federal Court or Federal Circuit Court for an order relating to the breach, such as directing the person to comply with the term(s) of the undertaking.

**We may use Enforceable Undertakings where:** *(non-exhaustive list)*

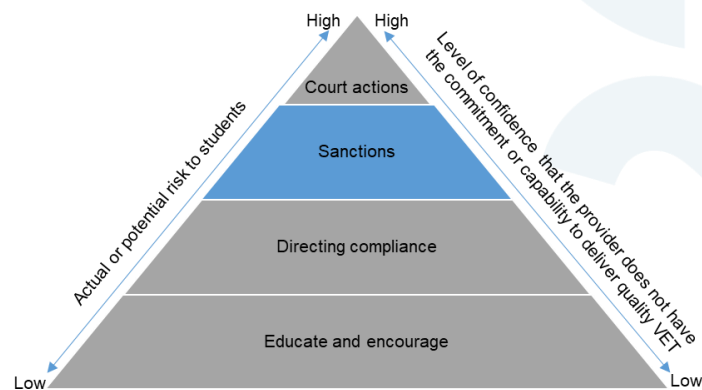
- a provider has breached its obligations and could incur a civil or criminal penalty. These breaches include misleading statements on the provider's website concerning guaranteed jobs upon completion of courses. However, if the provider's response has demonstrated restorative measures, for example in relation to affected students, this tool can be used.
- seriousness of the breach is not high
- misconduct or non-compliant behaviour has ceased / is ceasing
- the breach is not likely to recur
- a provider is co-operative or willing to address the non-compliance

If the conduct constitutes a criminal offence and it is more appropriate for the courts to determine the appropriate sanction, we will not use this tool.

### c. Sanctions

We have a broad range of regulatory tools to use when we are not confident in the provider's ability to address the non-compliance voluntarily, or following a direction from us, or where the nature of the non-compliance is moderate to significant. These tools:

- limit the provider's operations (to reduce the risk to students and others) until the non-compliance has been rectified, or
- may penalise a provider, commensurate with the non-compliance (fines).
- use a graduated approach in deciding to impose a sanction, and action taken will depend on the nature and circumstances of the non-compliance.



### i. Written directions to notify students

We may issue a written directions under the NVR Act requiring a provider to give written notification to its students of a particular matter set out in the direction. This is to ensure that students are fully informed of matters directly affecting them.

Note, the written direction to notify students is a separate legislative action to the written direction to rectify at 3.2.3 and activate different procedural fairness requirements.

**We may use written directions where there:** *(non-exhaustive list)*

- is a need to inform students of the non-compliance to reduce the impact
- is a need for the provider to correct information previously provided to students.

## ii. Infringement notice

We may issue an infringement notice, which recognises and penalises a breach of the legislation by imposing a fine. Infringement notices may be issued in a number of circumstances including in response to a provider's failure to lodge an annual declaration of compliance, or in circumstances where a provider is issuing qualifications for courses not on their scope of registration, or providers are not complying with marketing requirements.

The amount of the penalty attached to an infringement notice varies depending on the conduct and relevant legislative provision breached.

Infringement notices are required to be paid within 28 days. If a person pays an infringement notice penalty, their liability in respect of the offence or contravention is discharged and no further proceedings can be taken against the person for the alleged offence or contravention.

We may seek to commence civil or criminal proceedings to prosecute the breach if an infringement notice is not paid.

### **ASQA may use an infringement notice when:** *(non-exhaustive list)*

- issued as an alternative to prosecution on the basis the breach may not be serious enough to warrant prosecution
- the non-compliance is contained to a particular area of activity that has less impact on students
- the non-compliance was not intentional or reckless
- there is low risk of harm to students. For example, where a provider was delivering qualifications outside of its scope of registration, an infringement notice may be sufficient if student has received the correct training and the provider has similar qualifications on scope.

Further information about infringement notices is available on the [ASQA website](#).

## iii. Suspensions

We may suspend a provider's registration in some situations. During a period of suspension, we can require a provider to either undertake or refrain from certain actions. In most cases, while a suspension remains in place, the provider cannot enrol a student or commence a student who has not yet begun their course. The provider can continue to deliver training products to students who commenced their course before the suspension took effect.

A provider can request reassessment and seek lifting of a suspension once they have rectified the identified issues. Following a request for reassessment, we will review any available evidence including that submitted by the provider, and decide whether it is appropriate to lift the suspension. We may also reassess the appropriateness of any suspension as part of the compliance management of a provider.

### **We may use suspensions where:** *(non-exhaustive list)*

- it is necessary to limit the risks created by non-compliance while giving the provider an opportunity to rectify the non-compliance effectively to ensure enduring changes are made to the way they operate and perform
- non-compliance may impact future students
- the provider has demonstrated that the non-compliance could be resolved in the future, but may not have demonstrated an immediate ability to do so.

#### iv. Varied periods of registration

We may vary the period for which the provider is registered as an RTO. The period of registration defines the period the provider is approved to deliver VET. This, in effect, will mean that the provider is subject to a higher level of regulatory monitoring by limiting the time before they must reapply for registration as a provider.

**We may vary a period of registration where:** *(non-exhaustive list)*

- non-compliance has been significant
- there is a history of non-compliance
- we do not have full confidence in the provider to remain compliant over an extended timeframe.

#### v. Cancellation of registration

We may cancel provider's registration in full or in part, also known as removing part of a provider's scope of registration.

The scope of registration defines the services, training package qualifications or units of competency that a provider is approved to deliver. We may amend the scope of registration (for example, by removing a training product from the scope) where non-compliance relates to specific training products. The provider can no longer deliver the training product that has been removed (cancelled) from its scope of registration.

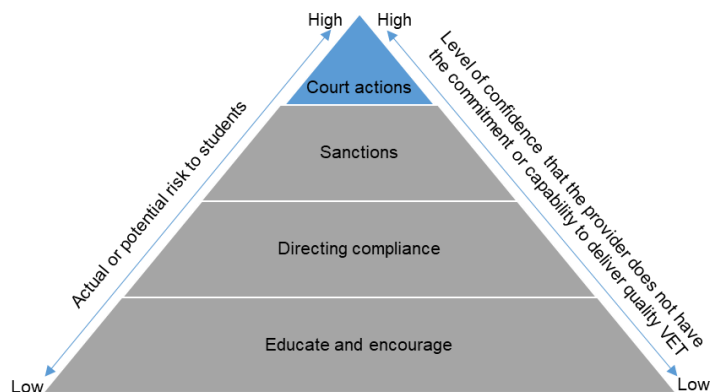
The effect of cancellation is that the provider can no longer offer or deliver the training products to students, and is removed from the register.

**We may use cancellation of registration where:** *(non-exhaustive list)*

- non-compliance is significant or ongoing
- we do not have confidence in the commitment or capability of the provider to rectify the non-compliance
- there is high risk to future students and the reputation of the sector
- the provider's response to a notice of intention to cancel is inadequate.

#### d. Court actions

We may decide to take court action where providers are not committed and/or not capable of delivering quality training outcomes, and the nature and seriousness of the non-compliance is significant.



## i. Injunctions

We may seek an injunction, or an order granted by a court, to prevent for example, a person from delivering training and assessment they are not authorised to deliver. The injunction can restrain a person from engaging in conduct of a particular kind (restraining injunction) or require a person to do an act or thing (performance injunction).

**We may use injunctions where:** *(non-exhaustive list)*

- a provider refuses to comply with its obligations
- past regulatory tools have not been sufficient to deter serious non-compliance
- a provider's conduct presents a serious and urgent risk to students or the public.

## ii. Civil penalties

We may use civil penalty provisions in the NVR Act where we have evidence an organisation has not complied with the provision. These may be enforced through infringement notices where possible and available. However, in some circumstances the civil penalty provisions may lead to proceedings in the Federal Court of Australia to seek a civil penalty order.

In the past, we have rarely needed to pursue civil penalty orders in respect of providers. Rather we sought civil penalties in the case of non-regulated parties who:

- made false claims about holding registration and offer to provide or providing VET courses
- issued documents that purport to be genuine VET statements of attainment or genuine VET qualifications
- used and display bogus VET qualifications
- made false representations relating to VET courses.

We do not commence court proceedings unless there are reasonable grounds for doing so, in line with our [model litigant obligations](#).

If a court determines that a person has contravened a civil penalty provision, the court can order the person pay a fine up to the maximum civil penalty amount specified in the legislation. The court may also order a person to pay our costs for the court proceedings.

**We may use civil penalties where:** *(non-exhaustive list)*

- there has been a breach of a civil penalty provision in the NVR Act
- the non-compliance is serious
- it is in the public interest to take such action
- a provider has not complied with its obligations under an Enforceable Undertaking.



### iii. Criminal proceedings

We may refer criminal prosecutions to the Commonwealth Director of Public Prosecutions (CDPP) if we have evidence an offence provision has been breached. Examples of when criminal prosecutions have been referred by us in relation to misleading marketing and issuing false statements of attainment.

If criminal proceedings are brought and a person is found guilty, a court can impose a penalty up to the maximum penalty specified in the legislation and/or record a criminal conviction.

**We may use criminal proceedings where:** (*non-exhaustive list*)

- providers or others are involved in producing and providing fraudulent information to ASQA in an attempt to demonstrate compliance with the Standards
- people have falsely held themselves out as being registered providers
- it is in the public interest to take such action
- a provider has not complied with its obligations under an Enforceable Undertaking.

## 4. Avenues of review

In most cases, when we make a decision, a person affected by that decision can apply to us for a review of that decision (see our [Review of Decisions Regulatory Practice Guide](#) for further information).

Other avenues of review include:

- merits review by the AAT
- judicial review by the Federal Court of Australia
- review by the Commonwealth Ombudsman who can make decisions about how processes can be enhanced.

## 5. Continuous improvement of regulatory practices

We carry out a range of activities to ensure we continuously improve our regulatory practices.

We welcome all feedback, positive or negative and this can be provided to ASQA by email at [feedback@asqa.gov.au](mailto:feedback@asqa.gov.au).

Where a provider is dissatisfied, or feels they have been treated unfairly, they can lodge a complaint by submitting the [Complaint about ASQA](#) form available on our website. Complaints about ASQA are dealt with in accordance with the requirements of the Standards by a dedicated team that is independent of the Quality Assessment Team and Compliance Team.

We review all feedback and complaints as part of our commitment to continuous improvement of the sector and being a best practice regulator.

## Appendix

Table A: Legislative provisions relevant to our regulatory tools

Power	Act	Section
Written Directions	NVR Act	35A 36(2)(b)
Power to issue infringement notices	NVR Act	148, 149
	ESOS Act	106
Sections infringement notices can be issued in relation to	NVR Act	61A, 94, 96, 98, 100, 111(1), 111(2), 112, 115, 117, 119, 121, 123, 123B, 125, 127, 129
	ESOS Act	19(5), 20(6), 21(5), 21A(1A), 46E, 47F, 47G
Conditions on registration	NVR Act	29(1)
	ESOS Act	10B, 83(3)(a)
Suspensions	NVR Act	36(2)(e), 38
	ESOS Act	83(3)(b)
Enforceable Undertakings	NVR Act	146, 147
	ESOS Act	110A
Reassessment	NVR Act	41
Shorten period of registration	NVR Act	36(2)(c)
Amendment scope of registration	NVR Act	36(2)(d)
Cancellation of registration	NVR Act	36(2)(f), 39
	ESOS Act	83(3)(c)
Injunctions	NVR Act	150, 151
Power to impose civil penalties	NVR Act	137
Civil penalty provisions	NVR Act	60, 61, 61A, 94, 96, 98, 100, 102, 104, 106, 108, 110, 111, 112, 115, 117, 119, 121, 123, 123B, 125, 127, 129, 130, 131, 211(4)
Criminal offence provisions	NVR Act	64, 71(3), 79(2), 93, 95, 97, 99, 101, 103, 105, 107, 109, 114, 116, 118, 120, 122, 123A, 124, 126, 128, 140(5), 211(3)
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