



Te Oranga me
Te Haumaru Ākonga

**Learner Wellbeing
and Safety**

Self-review Toolkit for Tertiary Education Providers

Tool E: self-review report template

The Education (Pastoral Care of
Tertiary and International Learners)
Code of Practice 2021

NZQA

NEW ZEALAND QUALIFICATIONS AUTHORITY
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Tool E: self-review report template

Use this optional template to shape your summary self-review report on your self-review of performance against the requirements of the Code.

If your organisation does not provide student accommodation and/or is not a Code signatory, **remove the parts** in this tool relating to **Student Accommodation (Outcomes 5-7)** and/or **International Tertiary Learners (Outcomes 8-12)**.

TEO information

| | | | | | |
|---------------------------|---------------------------------|-------------------------|-------------------|------------------------|--------------|
| TEO Name | Apprentice Training New Zealand | | MoE number | 7741 | |
| Code contact | Name | Mark Chavez | | Job title | PTE Manager |
| | Email | mark.chavez@atnz.org.nz | | Phone number | 027 236 1572 |
| Current enrolments | Domestic learners | Total # | 446 | 18 y/o or older | 418 |
| | | | | Under 18 y/o | 28 |
| | International learners | Total # | 0 | 18 y/o or older | 0 |
| | | | | Under 18 y/o | 0 |
| Current residents | Domestic learners | Total # | 0 | 18 y/o or older | 0 |
| | | | | Under 18 y/o | 0 |
| | International learners | Total # | 0 | 18 y/o or older | 0 |
| | | | | Under 18 y/o | 0 |
| Report author(s) | Mark Chavez | | | | |

Stage of implementation for each outcome

Indicate the stage of implementation that most reflects your organisation's current level of understanding and practice for each outcome, based on the continuum provided in Appendix 1.

Organisational structures to support a whole-of-provider approach to learner wellbeing and safety

| | Rating |
|--|---|
| Outcome 1: A learner wellbeing and safety system | Well implemented / Implemented / Developing / Early stages |
| Outcome 2: Learner voice | Well implemented / Implemented / Developing / Early stages |

Wellbeing and safety practices for all tertiary providers

| | Rating |
|---|---|
| Outcome 3: Safe, inclusive, supportive, and accessible physical and digital learning environments | Well implemented / Implemented / Developing / Early stages |
| Outcome 4: Learners are safe and well | Well implemented / Implemented / Developing / Early stages |

Summary of performance under each outcome

Organisational structures to support a whole-of-provider approach to learner wellbeing and safety

| | Summary of performance based on gathered information (i.e. how effectively is your organisation doing what it needs to be doing?) | How do you know? (i.e. note supporting evidence with analysis to make sense of what it means) |
|--|---|--|
| Outcome 1: A learner wellbeing and safety system | <p>Given that 2023 is our first year of operations, it is important to note that there are code clauses in this outcome for which we are not yet in the position to fulfil/evidence. As we enter year 2 of operations, we find ourselves in a position that allows us to review our strategic goals for learner wellbeing. Additionally, we are better poised to meet the publication requirement stipulated by this code.</p> <p>Our overall performance rating under this code outcome is “developing”. For 2023, we have developed strategic goals and plans aimed at supporting the wellbeing and safety of our learners, aligning well with the intended outcomes and processes stipulated by the code. This not only fulfils the code's requirements but also contributes to an education system that respects and adheres to the principles of Te Tiriti o Waitangi. We are committed to addressing these outstanding issues as we gain more experience and stability in our operations.</p> | Refer to gap analysis document |
| Outcome 2: Learner voice | <p>In summary, our rating under this outcome is “implemented”. We have implemented processes and procedures that effectively capture, understand, and address the diverse needs, voices, and well-being of our learners while respecting their autonomy and mana. Additionally, we maintain strong relationships with a wide range of learners, offering them timely and accessible resources and information. Furthermore, we have a well-established process for promptly and efficiently resolving any issues or complaints raised by our learners. For 2023, one learner complaint (block course accommodation) have been received and was promptly actioned and resolved.</p> | Refer to gap analysis document |

Wellbeing and safety practices for all tertiary providers

| | Summary of performance based on gathered information (i.e. how effectively is your organisation doing what it needs to be doing?) | How do you know? (i.e. note supporting evidence with analysis to make sense of what it means) |
|---|--|--|
| Outcome 3: Safe, inclusive, supportive, and accessible physical and digital learning environments | <p>ATNZ is dedicated to creating learning environments that are secure and purposefully designed to facilitate positive learning experiences for a diverse range of learner groups. Our policies and procedures are deeply rooted in equity principles, which in turn help nurture an inclusive learning setting. We offer a variety of support tools and activities for our learners, including free access to external mental health support services. Additionally, we have a dedicated Health and Safety Manager who actively supports learner well-being, both during the course and in the workplace. Our staff also undergo training on how to effectively support learner mental health and well-being, ensuring a comprehensive and supportive educational experience for all.</p> <p>For a comprehensive list of the support services provided, please refer to the Gap Analysis document.</p> | Refer to gap analysis document |
| Outcome 4: Learners are safe and well | <p>ATNZ's commitment to learner safety and well-being is evident through its well-structured and effective processes. We ensure the availability of relevant information to assist learners in meeting their basic needs, ensuring that no student is left unsupported in their learning journey. ATNZ actively promotes physical and mental health awareness among its learners, recognising that their overall well-being is vital for academic success. The institution's proactive monitoring practices are instrumental in maintaining a safe and supportive environment. By having trained learner facing staff, ATNZ can swiftly respond to any concerns or incidents, underscoring its dedication to safeguarding learners and ensuring their continued well-being throughout their educational journey.</p> | Refer to gap analysis document |

Findings from gap analysis of compliance with key required processes

Organisational structures to support a whole-of-provider approach to learner wellbeing and safety

| | Identified gaps in compliance with key required processes |
|--|---|
| Outcome 1: A learner wellbeing and safety system | <ul style="list-style-type: none">• Review of learner wellbeing and safety strategic goals (due 2024)• Publication of self-review reports (due 2024)• Some required staff training under clause 10 yet to be rolled out |
| Outcome 2: Learner voice | n/a |

Wellbeing and safety practices for all tertiary providers

| | Identified gaps in compliance with key required processes |
|---|---|
| Outcome 3: Safe, inclusive, supportive, and accessible physical and digital learning environments | n/a |
| Outcome 4: Learners are safe and well | n/a |

Summary of action plan

Organisational structures to support a whole-of-provider approach to learner wellbeing and safety

| | Action/s to be taken | Owner | Due date | Plan for monitoring implementation | Measures of success |
|---|---|----------------------------|------------------------------|------------------------------------|--|
| Outcome 1: A learner wellbeing and safety system | Review of Wellbeing and Safety strategic goals and strategic plans after completing first year of operation | Leadership Team | 1 st quarter 2024 | Monthly PTE Team Report | Self-review report |
| | Publish self-review report on ATNZ website and learner portal. | Leadership Team | 1 st quarter 2024 | Monthly PTE Team Report | Publication of report |
| | Publish 2024 Learner wellbeing strategic goals and plans | Leadership Team | 1 st quarter 2024 | Monthly PTE Team Report | Publication of 2024 goals and plans following review |
| | Rollout following staff training to satisfy Clause 10 <ul style="list-style-type: none"> • the provider’s obligations under this code • identifying and timely reporting of incidents of racism, discrimination, and bullying • physical and sexual violence prevention and response, including how to support a culture of disclosure and reporting • privacy and safe handling of personal information • behaviours • wellbeing and safety awareness and promotion topics including – | People and Culture Manager | December 2024 | Monthly HR Team Report | Staff training conducted |

| | | | | | |
|-------------------------------------|---|-------------|------------------------------|-------------------------|----------------------------------|
| | safe health and mental health literacy and support; and suicide and self-harm awareness; and promoting drug and alcohol awareness; and promoting healthy lifestyles for learners. | | | | |
| Outcome 2: Learner voice | Write a summary report of concerns and complaints lodged for 2023 | PTE Manager | 1 st quarter 2024 | Monthly PTE Team Report | Concerns and Complaints Report |
| | Publish concerns complaints report on ATNZ website and learner portal. | PTE Manager | 1 st quarter 2024 | Monthly PTE Team Report | Publication of complaints report |

Wellbeing and safety practices for all tertiary providers

| | Action/s to be taken | Owner | Due date | Plan for monitoring implementation | Measures of success |
|--|---|--------------|-----------------|---|--------------------------------|
| Outcome 3: Safe, inclusive, supportive, and | <p>Progress approved TEC strategic project to embed Te ao Māori and Pacific Culture and Values in the delivery of ATNZ programmes.</p> <p>The above will be part of a wider diversity initiative that includes support for women and learners with disability</p> | PTE Manager | December 2024 | Monthly PTE Team Report | As per approved TEC milestones |

| | | | | | |
|--|--|----------------------------|------------------------------|-------------------------|---|
| accessible physical and digital learning environments | Progress organisation-wide Māori and Pasifika Cultural Capability Training | People and Culture Manager | December 2024 | Monthly HR Team Report | Increased understanding of Te Tiriti and cultural capability as evidenced by employee engagement survey |
| | Progress provision of learner support activities (Study Groups, Tutorials, LLN Skills Boost) | PTE Manager | December 2024 | Monthly PTE Team Report | Delivery of training throughout 2024 |
| Outcome 4: Learners are safe and well | Progress review and implementation of IBJ procedures to satisfy Clause 22 of the code | People and Culture Manager | 1 st quarter 2024 | Monthly HR Team Report | New IBJ procedures implemented. |
| | | | | | |
| | | | | | |



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Tool A: gap analysis

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Tool A: gap analysis

This optional tool sets out the areas of practice you need to review to check your compliance with the Code.

You can use this tool to help you:

- **Prepare** for a gap analysis, by identifying the information you need to evidence your compliance with the Code at each clause
- **Make sense** of your gathered information, by noting any gaps in your current practice and/or evidence of current practice.

| KEY | |
|-------------------|---|
| COMPLIANT | <ul style="list-style-type: none">• We have the required practices in place• We have sufficient evidence on which to make judgements about the effectiveness of our practices |
| GAP (in evidence) | <ul style="list-style-type: none">• We have the required practices in place but...• ...we have limited evidence on which to make judgements about the effectiveness of those practices |
| GAP (in practice) | <ul style="list-style-type: none">• We do not have the required practices in place |

If you are a provider with student accommodation or Code signatory, you can **insert additional pages into this tool** relating to **Student Accommodation (Outcomes 5-7)** and/or **International Learners (Outcomes 8-12)** after Outcome 4.

Use the links below to download any additional pages as required:

- [Student Accommodation](#)
- [International Tertiary Learners](#)

Organisational structures to support a whole-of-provider approach to learner wellbeing and safety

Outcome 1: A learner wellbeing and safety system

Providers must take a whole-of-provider approach to maintain a strategic and transparent learner wellbeing and safety system that responds to the diverse needs of their learners.

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|--|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <p>Process 1: Strategic goals and strategic plans</p> <p>Clause 7 (1). Providers must have strategic goals and strategic plans for supporting the wellbeing and safety of their learners across their organisation, including student accommodation, describing how they will –</p> <p>(a) give effect to the outcomes sought and processes required by this code; and</p> | <p>2023 KPIS on:</p> <ul style="list-style-type: none"> A. EPIs and Support <ul style="list-style-type: none"> - Apprentice Visits B. Health and Safety <ul style="list-style-type: none"> - TRIFR - Compliance with QMS Requirements C. Learner Satisfaction <ul style="list-style-type: none"> - Satisfaction Rating - Learner NPS D. Health and Safety Strategic Plan | ✓ | | |
| <p>(b) contribute to an education system that honours Te Tiriti o Waitangi and supports Māori-Crown relations.</p> | <p>2023 KPIS on:</p> <ul style="list-style-type: none"> A. Equity and Participation <ul style="list-style-type: none"> - Māori, Pasifika, and Female Learners B. EPIs and Support <ul style="list-style-type: none"> - Credit Completion Gap for Māori - Credit Completion Gap for Pasifika | ✓ | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|--|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <p>Clause 7 (2). Providers must –</p> <p>(a) regularly review their learner wellbeing and safety strategic goals and strategic plans as described in subclause (1); and</p> | <ul style="list-style-type: none"> Review is underway following first year of operation | | In- Progress | |
| <p>(b) make amendments to their learner wellbeing and safety strategic goals and strategic plans within a reasonable timeframe following the review.</p> | <ul style="list-style-type: none"> N/A as PTE operations yet to complete 1 full year of delivery | | In- Progress | |
| <p>Clause 7 (3). Providers must work proactively with learners and stakeholders (and document this work) when –</p> <p>(a) developing their learner wellbeing and safety strategic goals and strategic plans described in subclause (1); and</p> | <ul style="list-style-type: none"> Learner representation in academic committee Learner representation in health and safety committee Learner Satisfaction Surveys Block Course Satisfaction Surveys | ✓ | | |
| <p>(b) reviewing their learner wellbeing and safety strategic goals and strategic plans described in subclause (2).</p> | <ul style="list-style-type: none"> Review is underway following first year of operation | | In- Progress | |
| <p>Process 2: Self review of learner wellbeing and safety practices</p> <p>Clause 8 (1). Providers must use strategic goals and strategic plans described in clause 7(1) to regularly review the quality of their learner wellbeing and safety practices to achieve the outcomes and practices of this code, at a frequency or by a date determined by the code administrator.</p> | <ul style="list-style-type: none"> Review is underway following first year of operation | | In- Progress | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|--|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <p>Clause 8 (2). Providers must review their learner wellbeing and safety practices using –</p> <p>(a) input from diverse learners and other stakeholders; and</p> | <ul style="list-style-type: none"> • Learner representation in academic committee • Learner representation in health and safety committee • Learner Satisfaction Surveys • Block Course Satisfaction Surveys | ✓ | | |
| <p>(b) relevant quantitative and qualitative data (including from learner complaints) that is, as far as practicable, and consistent with the provider’s obligations under current privacy legislation, disaggregated by diverse learner groups.</p> | <ul style="list-style-type: none"> • Learner representation in academic committee • Learner representation in health and safety committee • Learner Satisfaction Surveys • Block Course Satisfaction Surveys • Learner Concerns and Complaints • Focus Group Discussions | ✓ | | |
| <p>Clause 8 (3). Providers must, in a timely manner, following a review described in subclauses (1) and (2) take appropriate action to address any deficiencies in learner wellbeing and safety practices.</p> | <ul style="list-style-type: none"> • First action plan to be formulated following review of Year 1 delivery | ✓ | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|---|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <p>Process 3: Publication requirements</p> <p>Clause 9. Providers must make the following information readily available, in accessible formats, to learners, staff and the general public, including on their websites (where available) –</p> <p>(a) strategic goals and strategic plans for supporting the wellbeing and safety of learners described in clause 7(1); and</p> | | | ✓ | ✓ |
| <p>(b) revisions to strategic goals and strategic plans for supporting the wellbeing and safety of learners described in clause 7(2); and</p> | <ul style="list-style-type: none"> revisions to strategic goals and strategic plans will be undertaken following end of first year of operations | | In- Progress | |
| <p>(c) self-review reports on the quality of their learner wellbeing and safety practices described in clause 8.</p> | <ul style="list-style-type: none"> First self-review report to be published once finalised | | In- Progress | |
| <p>Process 4: Responsive wellbeing and safety systems</p> <p>Clause 10 (1). Providers must gather and communicate relevant information across their organisation (including student accommodation) and from relevant stakeholders to accurately identify emerging concerns about learners' wellbeing and safety or behaviour and take all reasonable steps to connect learners quickly to culturally appropriate social, medical, and mental health services.</p> | <ul style="list-style-type: none"> Vault H&S Checks Toolbox Talks OCP ATNZ Learner Portal Learner representation in academic committee Learner representation in health and safety committee Learner Satisfaction Surveys Block Course Satisfaction Surveys Learner Concerns and Complaints Focus Group Discussions | ✓ | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|--|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <p>Clause 10 (2). Providers must provide staff with ongoing training and resources tailored to their roles in the organisation, in relation to –</p> <p>(a) Te Tiriti o Waitangi; and</p> | <ul style="list-style-type: none"> Cultural Capability Training (First Batch with CZ) One more to rollout with Education Perfect Further training to rollout as part of TEC strategic funding | ✓ | | |
| (b) the provider’s obligations under this code; and | <ul style="list-style-type: none"> Attendance to NZQA Code Workshop | ✓ | | |
| (c) understanding the welfare issues of diverse learner groups and appropriate cultural competencies; and | <ul style="list-style-type: none"> Mental Health First Aid Course Further training to rollout as part of TEC strategic funding | ✓ | | |
| (d) identifying and timely reporting of incidents of racism, discrimination, and bullying; and | <ul style="list-style-type: none"> Bullying, Harassment and Discrimination Policy Speak Up Policy Women in Trades Support Group Toolbox Talk edition on bullying. | ✓ | | |
| (e) physical and sexual violence prevention and response, including how to support a culture of disclosure and reporting; and | <ul style="list-style-type: none"> Speak Up Policy Concerns and Complaints Policy Learner Portal – links to lodge concerns and complaints | ✓ | | |
| (f) privacy and safe handling of personal information; and | <ul style="list-style-type: none"> Privacy Policy Cybersecurity Training (KnowBe4) Toolbox Talk on Online Safety Two factor authentication on apps containing learner personal information | ✓ | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|--|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| (g) referral pathways (including to local service providers) and escalation procedures; and | <ul style="list-style-type: none"> • Women in Trades Group • ATNZ Learner Portal Directory of Support Services • Mental Health First Aid Course | ✓ | | |
| (h) identifying and timely reporting of incidents and concerning behaviours; and | <ul style="list-style-type: none"> • Mental Health First Aid Course • Vault • Safety Culture App | ✓ | | |
| (i) wellbeing and safety awareness and promotion topics including – <ul style="list-style-type: none"> i. safe health and mental health literacy and support; and ii. suicide and self-harm awareness; and iii. promoting drug and alcohol awareness; and iv. promoting healthy lifestyles for learners. | <ul style="list-style-type: none"> • Mental Health First Aid Course • Toolbox Talk on Mental Health • OCP Access | ✓ | | |
| <p>Clause 10 (3). Providers must have plans for assisting learners, and responding effectively, in emergency situations in the learning or residential community (whether localised or more widespread), including –</p> <p>(a) making these plans readily available to learners when they begin their study; and</p> | <ul style="list-style-type: none"> • Health and Safety Policy • Critical Incident procedures • H&S Induction • Vault | ✓ | | |
| (b) ensuring that there are suitably prepared staff members available to be contacted by a learner, or learners, in the event of an emergency; and | <ul style="list-style-type: none"> • Health and Safety Policy • Critical Incident procedures • Vault • Learners' respective Account Managers • Learner Support Manager JD | ✓ | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|--|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| (c) co-ordinating decision-making across the provider when responding to emergencies; and | <ul style="list-style-type: none"> Health and Safety Policy Critical Incident procedures | ✓ | | |
| (d) disseminating timely, accurate, consistent, and accessible information to learners and staff during emergencies; and | <ul style="list-style-type: none"> Health and Safety Policy Critical Incident procedures | ✓ | | |
| (e) ensuring all relevant staff are aware of the indicators of imminent danger to a learner or others and what action they can reasonably provide to help make them safe; and | <ul style="list-style-type: none"> Health and Safety Policy Critical Incident procedures Mental Health First Aid Course | ✓ | | |
| (f) keeping a regularly updated critical incident and emergencies procedures manual which guides staff involved in emergency situations which contains the immediate and ongoing actions required including – <ul style="list-style-type: none"> i. engaging with relevant government agencies (e.g. the New Zealand Police, Ministry of Health, New Zealand Qualifications Authority, Tertiary Education Commission); and ii. the follow-up de-briefing processes to support all learners and relevant staff; and | <ul style="list-style-type: none"> Health and Safety Policy Critical Incident procedures | ✓ | | |
| (g) recording critical incidents and emergencies and reporting these back annually (at an aggregate level and, as far as practicable, disaggregated by diverse learner groups) to provider management, learners, other stakeholders, and the code administrator. | <ul style="list-style-type: none"> Health and Safety Policy Critical Incident procedures Vault H&S Monthly and Annual Report | ✓ | | |

Outcome 2: Learner voice

Providers understand and respond to diverse learner voices and wellbeing and safety needs in a way that upholds their mana and autonomy.

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|--|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <p>Process 1: Learner voice</p> <p>Clause 12. Providers must have practices for –</p> <p>(a) proactively building and maintaining effective relationships with diverse learner groups within their organisation; and</p> | <ul style="list-style-type: none"> • ATNZ Learner portal • Visit reports by Acct Managers during their 1-1 face to face visit. • Apprentice Handbook • Women in Trades Support Group | ✓ | | |
| <p>(b) working with diverse learners and their communities to develop, review, and improve learner wellbeing and safety strategic goals, strategic plans and practices; and</p> | <ul style="list-style-type: none"> • Collaboration and engagement continuously done through our Tertiary Partnership Manager with communities. • Engagement with Te Whanau o Waipereira • Visit reports by Acct Managers during their 1-1 face to face visit. | ✓ | | |
| <p>(c) providing formal and informal processes for actively hearing, engaging with, and developing the diverse range of learner voices and those of their communities; and</p> | <ul style="list-style-type: none"> • Collaboration and engagement continuously done through our Tertiary Partnership Manager with communities. • Informal engagement carried out by Learner Admin and documented through informal channels such as texts and phone calls. • Visit reports by Acct Managers during their 1-1 face to face visit. • Learner Satisfaction Surveys | ✓ | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|---|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| | <ul style="list-style-type: none"> Block Course Satisfaction Surveys Learner Regulations Complaints Process Concerns and Complaints lodgement link in learner portal | | | |
| (d) providing timely and accessible resources to learners to support them and their learner communities to develop the necessary skills to enable them to participate fully in decision-making processes; and | <ul style="list-style-type: none"> ATNZ LMS - Canvas ATNZ Learner Portal Email/Phone support Team. Apprentice Handbook | ✓ | | |
| (e) providing timely and accessible information to learners to increase transparency of providers' decision-making processes. | <ul style="list-style-type: none"> ATNZ LMS - Canvas ATNZ Learner Portal Phone support Team. Apprentice Handbook | ✓ | | |
| <p>Process 2: Learner complaints</p> <p>Clause 13. Providers must –</p> <p>(a) work with learners to effectively respond to, and process complaints (including appropriate engagement with support people); and</p> | <ul style="list-style-type: none"> Complaints Policy and the complaint process are available and can be accessed through the ATNZ Learner portal. Learner Regulations | ✓ | | |
| (b) inform learners on how the complaint will be handled and how it is progressing; and | <ul style="list-style-type: none"> Complaints Policy and the complaint process are available and can be accessed through the ATNZ Learner portal. Learner Regulations | ✓ | | |
| (c) handle complaints in a timely and efficient way, including having practices that – | <ul style="list-style-type: none"> Complaints Policy and the complaint process are available and can be accessed through the | ✓ | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|---|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <ul style="list-style-type: none"> i. are appropriate to the level of complexity or sensitivity of the complaint; and ii. consider the issues from a cultural perspective; and iii. include the provision of culturally responsive approaches that consider traditional processes for raising and resolving issues (for example, restorative justice); and iv. comply with the principles of natural justice; and | <p>ATNZ Learner portal stating how complaints are handled in a timely and efficient manner.</p> <ul style="list-style-type: none"> • Learner Regulations | | | |
| <p>(d) ensure that the complaints process is easily accessible to learners (and those supporting them), including having practices for –</p> <ul style="list-style-type: none"> i. providing learners with clear information on how to use the internal complaints processes (including the relevant people to contact), and the scope and possible outcomes of the processes; and | <ul style="list-style-type: none"> • Complaints Policy and the complaint process are available and can be accessed through the ATNZ Learner portal stating how complaints are handled in a timely and efficient manner. • Learner Regulations | ✓ | | |
| <ul style="list-style-type: none"> ii. addressing barriers to accessing this information (for example, due to language, lack of internet access, fear of reprisal, desire for anonymity), such as providing alternative ways of raising a complaint; and | <ul style="list-style-type: none"> • Complaints Policy and the complaint process are available and can be accessed through the ATNZ Learner portal. • Direct communication through respective account managers at any time or through their monthly 1-1 visit • Learner Regulations | ✓ | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|--|---|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| iii. providing an opportunity for a support person or people (who can be chosen by the learner) to guide and support the learner through the complaints process; and | <ul style="list-style-type: none"> Learner Regulations | ✓ | | |
| iv. providing the opportunity for groups of learners to make joint complaints; and | <ul style="list-style-type: none"> Learner Regulations | ✓ | | |
| (e) record complaints; and | <ul style="list-style-type: none"> Complaints Register | ✓ | | |
| (f) report annually to provider management, learners, other stakeholders, and the code administrator (including on provider websites where available) on – <ul style="list-style-type: none"> i. the number and nature of complaints made and their outcomes (at an aggregate level and, as far as practicable, disaggregated by diverse learner groups); and ii. learner experience with the complaints process and the outcome of their complaint; and | <ul style="list-style-type: none"> Report will be written following completion of first year of operations | ✓ | | |
| (g) promote and publicise complaint and dispute resolution processes available to learners including, but not limited to, the provider’s internal complaints process, the education quality assurance agency complaints process, the code administrator’s complaints process, and the Dispute Resolution Schemes; and | <ul style="list-style-type: none"> ATNZ Learner Portal Learner Regulations | ✓ | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|--|--|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <p>(h) advise learners, on the next steps available to them if the provider does not accept the complaint (or the learner or provider perceives that the provider does not have the cultural competency to deal with it), or the learner is not satisfied that the provider has made adequate progress towards resolving the complaint, or the learner is not satisfied with the provider's internal complaints process or outcome, including –</p> <ul style="list-style-type: none"> i. how to seek resolution of a contractual or financial dispute by way of a complaint or referral to an appropriate body or agency depending on the subject matter of the dispute, for example, the code administrator, the Dispute Resolution Scheme, the Disputes Tribunal, the Human Rights Commission or the Ombudsman; and ii. how to make a complaint to the code administrator if a learner believes that the provider is failing to meet the outcomes or requirements of this code. | <ul style="list-style-type: none"> • Complaints Policy and the complaint process are available and can be accessed through the ATNZ Learner portal that advise learners where to escalate any of their complaints. • Learner Regulations | ✓ | | |
| <p>Process 3: Compliance with the Dispute Resolution Scheme</p> <p>Clause 14. Providers must ensure they are familiar with the relevant Dispute Resolution Scheme rules for domestic and international learners and ensure compliance with those rules in a dispute to which it is party.</p> | <ul style="list-style-type: none"> • Complaints Policy and the complaint process are available and can be accessed through the ATNZ Learner portal making the learners aware their ability to escalate any complaint to NZQA, or any Dispute Resolution service. • Learner Regulations | ✓ | | |

Wellbeing and safety practices for all tertiary providers

Outcome 3: Safe, inclusive, supportive, and accessible physical and digital learning environments

Providers must foster learning environments that are safe and designed to support positive learning experiences of diverse learner groups.

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|---|--|--|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <p>Process 1: Safe and inclusive communities</p> <p>Clause 16 (1). Providers must have practices for –</p> <p>(a) reducing harm to learners resulting from discrimination, racism (including systemic racism), bullying, harassment and abuse; and</p> <p>(b) working with learners and staff to recognise and respond effectively to discrimination racism (including systemic racism), bullying, harassment and abuse; and</p> <p>(c) promoting an inclusive culture across the learning environment; and</p> <p>(d) upholding the cultural needs and aspirations of all groups throughout the learning environment; and</p> <p>(e) providing all learners with information –</p> <ol style="list-style-type: none"> i. that supports understanding, acceptance, and connection with all learners, and collective responsibility for an inclusive learning environment; an ii. about the cultural, spiritual, and community supports available to them; and | <ul style="list-style-type: none"> • ATNZ has policy and processes addressing Bullying, Harassment, and Discrimination published on ATNZ portal. • Learner Regulations • Health and Safety Policy • Speak Up Policy • Concerns and Complaints Policy • Bullying, Harassment and Discrimination Policy • Mental Health First Aid Course • Women in Trades Support Group • ATNZ Portal – Directory of Support Services • Tutorial and Study Group • LLN Tutorials | <p style="text-align: center;">✓</p> <p style="text-align: center;">✓</p> <p style="text-align: center;">✓</p> <p style="text-align: center;">✓</p> <p style="text-align: center;">✓</p> | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
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| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| (f) providing learners with accessible learning environments where they can connect with others, build relationships, support each other, and welcome their friends, families, and whānau. | | ✓ | | |
| Process 2: Supporting learner participation and engagement Clause 17 (1). Providers must provide learners with opportunities to – | <ul style="list-style-type: none"> Learners are provided opportunities to share their views and feedback through the following: <ul style="list-style-type: none"> periodic surveys, 1-1 face to face visit by Account Managers, Direct and indirect approaches, such as email, text, or phone call. | ✓ | | |
| (a) actively participate and share their views safely in their learning environment; and | | ✓ | | |
| (b) connect, build relationships and develop social, spiritual and cultural networks; and | | ✓ | | |
| (c) use te reo and tikanga Māori to support Māori learners' connection to identity and culture. | | | | |
| Clause 17 (2). Providers must have practices for supporting learners through their studies, including – | <ul style="list-style-type: none"> Learners are provided support in their studies through the following: <ul style="list-style-type: none"> 1-1 face to face visit by Account Managers, Direct and indirect approaches, such as email, text, or phone call. Online & Face to Face Study groups | ✓ | | |
| (a) enabling learners to prepare and adjust for tertiary study, and | | ✓ | | |
| (b) maintaining appropriate oversight of learner achievement and engagement; and | | | | |

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
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| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| (c) providing the opportunity for learners to discuss, in confidence, any issues that are affecting their ability to study and providing learners with a response to their issues; and | <ul style="list-style-type: none"> ▪ Different learner support mechanisms provided in the ATNZ learner portal. ▪ LLN Support / tutorials ▪ ATNZ portal to book appointment with learner support ▪ OCP access for all learners | ✓ | | |
| (d) providing learners with advice on pathways for further study and career development, where appropriate. | | ✓ | | |
| <p>Process 3: Physical and digital spaces and facilities</p> <p>Clause 18. Providers must have practices for–</p> <p>(a) providing healthy and safe learning environments; and</p> | <ul style="list-style-type: none"> • Learners are provided healthy and safe learning environment through the following: <ul style="list-style-type: none"> ▪ ATNZ Learning Management System (LMS) Canvas ▪ Asking learners about their feedback on ATNZ Canvas through formal and informal surveys (focus group, face to face Q&A, online survey) | ✓ | | |
| (b) identifying and, where possible, removing access barriers to provider facilities and services; and | | ✓ | | |
| (c) involving learners in the design of physical and digital environments when making improvements; and | | ✓ | | |
| (d) engaging with Māori and involving Māori in the design of physical and digital environments where appropriate. | | ✓ | | |

Outcome 4: Learners are safe and well

Providers must support learners to manage their physical and mental health through information and advice, and identify and respond to learners who need additional support.

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
|---|---|------------|-------------------|-------------------|
| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <p>Process 1: Information for learners about assistance to meet their basic needs.</p> <p>Clause 20 (1). Providers must have practices for enabling all learners and prospective learners to identify and manage their basic needs (the essential material requirements to support wellbeing and safety including housing, food and clothing), including providing accurate, timely and tailored information on how they can –</p> <p>(a) access services through the provider or through community and public services that will help them maintain reasonable standards of material wellbeing and safety; and</p> <p>(b) access suitable accommodation and understand their rights and obligations as a tenant in New Zealand; and</p> <p>(c) maintain a healthy lifestyle.</p> | <ul style="list-style-type: none"> • ATNZ provides information for learners on assistance to meet their basic needs through the ff: <ul style="list-style-type: none"> ▪ Apprentice Handbook ▪ ATNZ Learner Portal which provides information on a range of external support agencies that learners can access. | ✓ | | |

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| <p>Clause 20 (2). If food is made available by the provider on campus or in student accommodation, the provider must ensure that the food available includes a range of healthy food options that is obtainable at a reasonable cost.</p> | <ul style="list-style-type: none"> • N/A | | | |
| <p>Process 2: Promoting physical and mental health awareness</p> <p>Clause 21. Providers must have practices for –</p> <p>(a) providing opportunities and experiences for learners that improve their physical and mental health and wellbeing and safety; and</p> | <ul style="list-style-type: none"> • ATNZ provides information for learners on assistance to meet their basic needs through the ff: <ul style="list-style-type: none"> ▪ Apprentice Handbook ▪ ATNZ Learner Portal which provides information on a range of external support agencies that learners can access. ▪ Toolbox Talk on mental Health ▪ ATNZ Staff undergoing Mental Health First Aid | ✓ | | |
| <p>(b) promoting awareness of practices that support good physical and mental health that are credible and relevant to learners; and</p> | <ul style="list-style-type: none"> • Mental Health First Aid Course | ✓ | | |
| <p>(c) supporting learners' connection to their language, identity, and culture; and</p> | <ul style="list-style-type: none"> • ATNZ has an Initiative funded by TEC on embedding te ao Māori and Pacific culture and values to enhance the learning experience of ākonga mahi enrolled in Mechanical Engineering and related programme. | ✓ | | |
| <p>(d) providing accurate, timely information and advice to learners about –</p> <p>i. how they can access medical and mental health services through the provider or through community and public services, including culturally responsive services; and</p> | <ul style="list-style-type: none"> • ATNZ Portal Directory of Support Services • Access to OCP • Critical Incident Policy • H&S Policy • H&S Induction • Vault | ✓ | | |

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| <ul style="list-style-type: none"> ii. how they can report health and safety concerns they have for their peers; and iii. how to respond to an emergency and engage with relevant government agencies; and iv. how they can make positive choices that enhance their wellbeing. | <ul style="list-style-type: none"> • SafetyCulture App | | | |
| <p>Process 3: Proactive monitoring and responsive wellbeing and safety practices.</p> | | | | |
| <p>Clause 22 (1). Providers must have practices for –</p> | | | | |
| <p>(a) requesting that domestic learners 18 years and over provide a name and up-to-date contact details of a nominated person; and</p> | <ul style="list-style-type: none"> • Training Agreement • STMS (Elvis) | ✓ | | |
| <p>(b) describing the circumstances in which the nominated person referred to in paragraph (a) should be contacted in relation to their wellbeing and safety; and</p> | <ul style="list-style-type: none"> • Training Agreement (under learner obligations) | ✓ | | |
| <p>(c) contacting the person nominated by domestic learners 18 years and over, in the circumstances described in accordance with paragraph (b), or where the provider has reasonable grounds for believing that the disclosure is necessary to prevent or lessen a serious threat to the student’s life or health; and</p> | <ul style="list-style-type: none"> • Training Agreement | ✓ | | |
| <p>(d) enabling learners to communicate health and mental health needs with staff in confidence, including accommodation staff, so that the provider can proactively offer them support; and</p> | <ul style="list-style-type: none"> • Monthly Visit by Account Managers • Online Support • Access to OCP • Mental Health First Aid Training | ✓ | | |
| <p>(e) providing opportunities for learners to raise concerns about themselves or others in confidence; and</p> | <ul style="list-style-type: none"> • Learner Portal – links to escalate concerns and complaints. • Learner Portal – concerns and complaints link lodgement | ✓ | | |

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| | <ul style="list-style-type: none"> • Learner Regulations • Learner Portal – relevant policies uploaded. | | | |
| (f) identifying learners at risk and having clear and appropriate pathways for assisting them to access services when they need it; and | <ul style="list-style-type: none"> • Critical Incident Policy • Mental Health First Aid Training • OCP Access • Learner Portal – relevant policies and documents and support services | ✓ | | |
| (g) identifying learners who are at risk of harming others, and i. having clear and appropriate pathways for assisting them to access services when they need it; and | <ul style="list-style-type: none"> • Critical Incident Policy • Mental Health First Aid Training • OCP Access • Learner Portal – relevant policies and documents | ✓ | | |
| ii. protecting learners and staff who experience harm from other learners and/or staff, including sexual assault; and | <ul style="list-style-type: none"> • Critical Incident Policy • Mental Health First Aid Training • OCP Access • Learner Portal – relevant policies and documents • Speak Up Policy • Learner Regulations | ✓ | | |
| (h) making arrangements with disabled learners or those affected by health and wellbeing difficulties to accommodate learning needs, including for study off-campus; and | <ul style="list-style-type: none"> • Learner Portal – assistive technology tools for learners with learning disabilities | ✓ | | |
| (i) responding to disruptive and threatening behaviour in a way that is sensitive to a learner’s situation; and | <ul style="list-style-type: none"> • Learner regulations – misbehaviour and misconduct • Critical Incident Policy | ✓ | | |

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| <p>(j) supporting learners whose study is interrupted due to circumstances outside their control, and providing inclusive, accessible re-entry processes for their transition back into tertiary study.</p> | <ul style="list-style-type: none"> • IBJ Procedures | <p>✓</p> | | |
| <p>Clause 22 (2). Providers must have up-to-date contact details and next of kin for domestic tertiary learners under 18 and international tertiary learners.</p> | <ul style="list-style-type: none"> • Training Agreement | <p>✓</p> | | |
| <p>Clause 22 (3). Providers must contact the next of kin for domestic tertiary learners under 18 years and international tertiary learners if there is concern regarding the wellbeing or safety of a learner.</p> | <ul style="list-style-type: none"> • Learner Regulations – Learner Support | <p>✓</p> | | |
| <p>Clause 22 (4). Providers must maintain a record of reported risks, including any concerns raised in relation to the effective administration of this code.</p> | <ul style="list-style-type: none"> • Risk Register | <p>✓</p> | | |

