Tertiary and International Learners Code

Gap analysis toolkit



Te Oranga me Te Haumaru Ākonga

Learner Wellbeing and Safety



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How to use this toolkit

This toolkit has been developed by NZQA to support tertiary education providers' gap analysis of current practices against the requirements of the Education (Pastoral Care of Tertiary and International Learners) Code of Practice 2021 (the Code). These tools and approach are based on the Self-review toolkit developed for the implementation of the 2020 interim domestic Code.

As before, the tools and templates in this toolkit are optional. There is no requirement to use them.

NZQA expects that any gap analysis of current practices against the tertiary and international learners Code requirements will cover certain core components. By considering the processes and questions outlined in this toolkit, you are likely to undertake a gap analysis that addresses each of those components.

How to compare current practices against the requirements of the Code

This page outlines key steps education providers may follow to effectively measure their current practices against the requirements of the tertiary and international learners Code (the Code).

I. Prepare

Preparing for a gap analysis is about knowing what you are looking at and why. It includes:

- ensuring you understand the Code outcomes and requirements
- being clear about the questions you need to answer in your analysis
- identifying the information you need to source (to evidence your Code compliance)
- planning each stage of the analysis, ensuring learners and all other relevant people are involved, and determining what you will have at the end of it (i.e. a report, action plan, etc.)

2. Gather

Systematically gather information from a range of quantitative and qualitative sources to ensure that you have a sound evidence base from which to make judgements about your practice. Good quality evidence is information that is directly relevant to the questions you are trying to answer.

Refer to Tool A: gap analysis for the areas of practice you need to review.

For some parts of the Code, evidencing compliance may be as simple as pointing to a documented policy or wording in a student handbook. Use <u>Tool B: possible evidence examples</u>.

3. Make sense

Look closely at the information gathered via different lenses (i.e. from the perspective of learners and their whānau) to see what it tells you about your current practices in relation to the Code outcomes sought for your learners.

Use Tool A: gap analysis to identify any gaps in your compliance with required processes.

Identify which aspects of your practice are positively impacting on learners' pastoral care, which aspects need improving, and what evidence makes you think that this is so.

4. Decide

Consider what you should do as a result of what you have learned about your current practices. Use <u>Tool C: action plan template</u> to plan, implement, and monitor any changes you decide to make.

5. Document

Report on your gap analysis process, findings, and action plan in a format that works for you. Keep this on file, along with the supporting evidence, in case it is needed for external review.

Tool A: gap analysis (Outcomes 1-4)

This optional tool sets out the areas of practice you need to review to check your compliance with the Education (Pastoral Care of Tertiary and International Learners) Code of Practice (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	 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)	 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)	• We do not have the required practices in place

If you are a provider with student accommodation or signatory enrolling international learners you can **insert the additional pages into this toolkit** after outcome 4.

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

- <u>Providers with student accommodation</u>
- Tertiary signatories enrolling international learners

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

Outcome I: 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 SENS	E	
Key required processes	Information we can gather to use as evidence of our compliance with this clause	COMPLIANT	GAP (in evidence)	GAP (in practice)
 Process I: Strategic goals and strategic plans 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 – (a) give effect to the outcomes sought and processes required by this code; and 	Policies and procedures AQ has an organisation wide health and safety team. The Academy holds monthly Safety and Wellbeing meetings monthly and discusses the safety and wellbeing of learners in monthly team meetings and Trainer Forums. Records risks to the risk register.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices		
(b) contribute to an education system that honours Te Tiriti o Waitangi and supports Māori–Crown relations.	Partnership with Primary ITO to support all learners including Māori Learners and pacific learners, those learners who have identified or been identified by trainers and assessors as		We have the required practices in place but we could be doing more	

	requiring language and/or learning support		We have limited evidence on which to make judgements about the effectiveness of those practices	
Clause 7 (2). Providers must – (a) regularly review their learner wellbeing and safety strategic goals and strategic plans as described in subclause (1); and	Safety and Wellness Strategy across AsureQuality Limited annual review	We have the required practices in place We have sufficient evidence on which to make judgments about the effectiveness of our practices		
(b) make amendments to their learner wellbeing and safety strategic goals and strategic plans within a reasonable timeframe following the review.	As per the safety and wellbeing policies and procedures	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness		

		of our practices
 Clause 7 (3). Providers must work proactively with learners and stakeholders (and document this work) when – (a) developing their learner wellbeing and safety strategic goals and strategic plans described in subclause (1); and 	Safety and Wellbeing reviews and plan are conducted in consultation. Feedback is gathered the new risk management framework was created in consultation	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practicesImage: Comparison of the second
(b) reviewing their learner wellbeing and safety strategic goals and strategic plans described in subclause (2).	Annual review – in Feb 2022 a new approach was rolled out.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
Process 2: Self review of learner wellbeing and safety practices	Annual review - Academy has been completing an ongoing review since early 2022.	We have the required practices in
Clause 8 (1).		place

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.		We have sufficient evidence on which to make judgements about the effectiveness of our practices	
Clause 8 (2). Providers must review their learner wellbeing and safety practices using – (a) input from diverse learners and other stakeholders; and	Feedback and consultation from learners and employers, trainers across the organisation and the sector	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(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.	Centralised SMS generates surveys and reports. Learner data is summarised into quarterly reports, where any learner may be identified due to unique needs the data QL data is summarised into themes in order to inform wider teams.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness	

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	An annual review occurs as part of the policy and is addressed by the team during the monthly meetings with the	of our practices We have the required practices in place	
and safety practices.	S&W Rep	We have sufficient evidence on which to make judgements about the effectiveness of our practices	
Process 3: Publication requirements 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) –	Review of publications and the website annually. Publication requirements are reviewed as per Know How procedures. As per the 2022 review action plan a larger project has been rolled out	We have the required practices in place and this is currently under review We have sufficient	
 (a) strategic goals and strategic plans for supporting the wellbeing and safety of learners described in clause 7(1); and 		evidence on which to make judgements about the effectiveness of our practices	

(b) revisions to strategic goals and strategic plans for supporting the wellbeing and safety of learners described in clause 7(2); and	As per Action plan from 2022 review. The Code has been integrated with the Risk Register, safety and wellbeing meetings and Academy Team meetings. Along with the Risk reporting in MySafety system we have a Learner issues tracker in SharePoint.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
 (c) self-review reports on the quality of their learner wellbeing and safety practices described in clause 8. 	Reports are reviewed by the Academy Lead team prior to dissemination.	We have the required practices in place and this is under review. We have sufficient evidence on which to make judgements about the effectiveness of our practices
Process 4: Responsive wellbeing and safety systems Clause 10 (1). Providers must gather and communicate relevant	Bullying and Harassment Prevention Policy Diversity Bi-Culture & Inclusion Policy Family Violence Leave Policy	We have the required practices in place

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.	Health Safety and Wellbeing Commitment Code of Conduct Policy Learning and Development Policy Data is gathered in the trainee trackers and via feedback directly to trainers or via the <u>training@asurequality.com</u> email Emerging concerns are discussed in the safety and wellbeing meetings, Academy Lead meetings trainer and assessor forums.	We have sufficient evidence on which to make judgements about the effectiveness of our practices	
Clause 10 (2). Providers must provide staff with ongoing training and resources tailored to their roles in the organisation, in relation to – (a) Te Tiriti o Waitangi; and	Diversity Bi-Culture & Inclusion Policy Te Reo Assessment Procedure Our trainers are trained in how to identify and deal with different ways of learning, and cultural needs (unit standard 7091 – Establishing a culturally safe and inclusive work environment for adult learners). Trainers can access the LMS AKO that provides courses specifically related to Te Tiriti ō Waitangi, Te Reo Māori, cultural sensitivity and inclusiveness (See AKO courses): - Te Tiriti ō Waitangi - Introduction to Te Reo Māori - Te Reo Māori Pronunciation A newly established Bi-cultural committee	We have the required practices in place but we could be doing more in this space. We have sufficient evidence on which to make judgements about the effectiveness of our practices	

(b) the provider's obligations under this code; and	Through Safety and Wellbeing meetings. Monthly team meetings. Trainer and Assessor Forums and workshops via SharePoint. Train the Trainer, Train the Assessor and Moderator. TPE's trainer observation and evaluation.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
(c) understanding the welfare issues of diverse learner groups and appropriate cultural competencies; and	Diversity Bi-Culture & Inclusion Policy SharePoint pages Through Safety and Wellbeing meetings. Monthly team meetings. Trainer and Assessor Forums and workshops via SharePoint	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
(d) identifying and timely reporting of incidents of racism, discrimination, and bullying; and	Bullying and Harassment Prevention PolicyDiversity Bi-Culture & Inclusion Policy Family Violence Leave Policy Health Safety and Wellbeing Commitment Code of Conduct Policy	We have the required practices in place We have sufficient evidence onImage: Comparison of the second secon

	Through trainee trackers	which to make
	Trainer reports	judgements
	Customer care portal	about the
	Through Safety and Wellbeing	effectiveness
	meetings. Monthly team meetings.	of our
	Trainer and Assessor Forums and	practices
	workshops via SharePoint.	
(e) physical and sexual violence prevention and	Bullying and Harassment Prevention	We have the
response, including how to support a culture of	Policy	required
disclosure and reporting; and	Diversity Bi-Culture & Inclusion Policy	practices in
	Family Violence Leave Policy	place
	Health Safety and Wellbeing	We have
	Commitment	sufficient
	Code of Conduct Policy	evidence on
	SharePoint pages	which to make
	Through Safety and well-being	judgements
	meetings.	about the
	Monthly team meetings. Trainer and	effectiveness
	Assessor Forums and workshops via	of our
	SharePoint.	practices
(f) privacy and safe handling of personal information;	Privacy Policy	We have the
and	Permissions in the LMS and SMS also	required
	in the customer care portal.	practices in
	Through Safety and well-being	place
	meetings. Monthly team meetings.	We have
	Trainer and Assessor Forums and	sufficient
	workshops via SharePoint.	evidence on
		which to make
		judgements
		about the
		effectiveness
		of our
		practices
		practices

(g) referral pathways (including to local service providers) and escalation procedures; and	SharePoint information. Important Information to Learners brochure via the website and enrolment information. Through Safety and Wellbeing meetings. Monthly team meetings. Trainer and Assessor Forums and workshops via SharePoint. Risk Register and reporting in the AQ MySafety	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
(h) identifying and timely reporting of incidents and concerning behaviours; and	Managed by the trainers and escalated where necessary. Reported in the Risk Register and MySafety, tracked in SharePoint. KnowHow processes. Discussed through Safety and Wellbeing meetings. Monthly team meetings. Trainer and Assessor Forums and workshops via SharePoint.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
 (i) wellbeing and safety awareness and promotion topics including – i. safe health and mental health literacy and support; and 	SharePoint information. Important information to Learner's brochure via the website and enrolment information. Through Safety and Wellbeing meetings. Monthly team meetings.	We have the required practices in place We have sufficient evidence onImage: Comparison of the second secon

	Trainer and Assessor Forums and workshops via SharePoint.	which to make judgements about the effectiveness of our practices
ii. suicide and self-harm awareness; and	SharePoint information. Important Information to Learners brochure via the website and enrolment information. Through Safety and Wellbeing meetings. Monthly team meetings. Trainer and Assessor Forums and workshops via SharePoint.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practicesImage: Comparison practice out out practices
iii. promoting drug and alcohol awareness; and	SharePoint information. Important information to Learner's brochure via the website and enrolment information. Drug and Alcohol Policy. Through Safety and Wellbeing meetings. Monthly team meetings. Trainer and Assessor Forums and workshops via SharePoint.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices

iv. promoting healthy lifestyles for learners.	SharePoint information. Important information to Learner's brochure via the website and enrolment information. Through Safety and Wellbeing meetings. Monthly team meetings. Trainer and Assessor Forums and workshops via SharePoint.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
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 – (a) making these plans readily available to learners when they begin their study; and	Health and safety is an important aspect across AsureQuality. Health and Safety Plan for learners with special needs (e.g. wheelchairs) on site. Learners can currently indicate the need for additional support in the enrolment form and are provided a number of opportunities prior to course delivery and during to indicate as to what additional support they require. Know How process - Managing a student critical incident Recording the incident in MySafety and to the Risk Register.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
(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	All staff are provided the site health and safety procedures prior to training. Course induction includes health and safety procedures.	We have the required practices in place

	Trainer forums provide updates along with regular comms. Trainers are provided specific information regarding learners with specific support requirements prior to start date. All staff attend the safety and wellbeing meetings.	We have sufficient evidence on which to make judgements about the effectiveness of our practices
(c) co-ordinating decision-making across the provider when responding to emergencies; and	As per the Safety and Wellbeing policy and risk register and Risk Management Policy and monthly meetings	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
(d) disseminating timely, accurate, consistent, and accessible information to learners and staff during emergencies; and	As per the Safety and Wellbeing policy and risk register and Risk Management Policy	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness

		of our practices
(e) ensuring all relevant staff are aware of th indicators of imminent danger to a learn others and what action they can reasona provide to help make them safe; and	er or risk register and Risk Management	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practicesImage: Comparison of the second
 (f) keeping a regularly updated critical incide emergencies procedures manual which g staff involved in emergency situations wh contains the immediate and ongoing acti- required including – i. engaging with relevant governme agencies (e.g. the New Zealand I Ministry of Health, New Zealand Qualifications Authority, Tertian Education Commission); and 	guides risk register and Risk Management hich Policy. As per the safety and wellbein ons manual. Monthly team meetings and Trainer Forums ent Police,	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practicesWe have practices
ii. the follow-up de-briefing proces support all learners and relevant	, , ,	We have the required g practices in place

	manual. Monthly team meetings and Trainer Forums and comms	We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(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.	As Safety and Wellbeing policy and risk register and Risk Management Policy. As per the safety and wellbeing manual and the policy and risk register. Recording of the incident goes to the My Safety risk register and is reported in the MySafety meetings.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	

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 SENS	3	
Key required processes	Information we can gather to use	COMPLIANT	GAP	GAP
	as evidence of our compliance		(in evidence)	(in practice)
	with this clause			

Process 1: Learner voice Clause 12. Providers must have practices for – (a) proactively building and maintaining effective relationships with diverse learner groups within their organisation; and	Within the timeframes that learners are in training with the Academy The needs and requirements of learners and companies to minimise barriers to learning are worked through on a case-by- case basis.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
(b) working with diverse learners and their communities to develop, review, and improve learner wellbeing and safety strategic goals, strategic plans and practices; and	The needs and requirements of learners and companies to minimise barriers to learning are worked through on a case-by- case basis. Trainers report back to managers regarding specific needs during learning. Employers supply feedback on training.	We have the required practices in place under review currently. We have sufficient evidence on which to make judgements about the effectiveness of our practices
 (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 	Via consultation and feedback from learners and employers. Trainers report back to managers regarding specific needs during	We have the required practices in place

	learning. Employers supply feedback on training.	We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(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	Feedback regarding training venues, sessions and learning materials is gathered after every course and utilised in the improvement process.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(e) providing timely and accessible information to learners to increase transparency of providers' decision-making processes.	Review in Feb 2022 to improve timely information to learners. While this happens, it could be improved – bulk email from VETtrak (SMS)	We have the required practices in place review in place.We have sufficient evidence on which to make judgements about the	

		effectiveness of our practices	
Process 2: Learner complaints Clause 13. Providers must – (a) work with learners to effectively respond to, and process complaints (including appropriate engagement with support people); and	As per KnowHow procedures: Manage Academy Feedback or Complaints Log customer complaint or feedback in customer care portal	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(b) inform learners on how the complaint will be handled and how it is progressing; and	As per the website, enrolment information and courseware	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(c) handle complaints in a timely and efficient way, including having practices that –	As per: KnowHow procedures:	We have the required	

i. are appropriate to the level of complexity or sensitivity of the complaint; and	Manage Academy Feedback or Complaints Log customer complaint or feedback in customer care portal Or via the <u>training@asurequality.com</u> email address Or directly to the QA Lead or Learning and Academy Manager	practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
ii. consider the issues from a cultural perspective; and	As per: Diversity Bi-Culture & Inclusion Policy KnowHow procedures: Manage Academy Feedback or Complaints Log customer complaint or feedback in customer care portal Or via the <u>training@asurequality.com</u> email address Or directly to the QA Lead or Learning and Academy Manager	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
iii. include the provision of culturally responsive approaches that consider traditional processes for raising and resolving issues (for example, restorative justice); and	As per: Diversity Bi-Culture & Inclusion Policy KnowHow procedures: Manage Academy Feedback or Complaints Log customer complaint or feedback in customer care portal	We have the required practices in place We have sufficient evidence on which to make judgements

iv. comply with the principles of natural justice; and	Or via the training@asurequality.com email address Or directly to the QA Lead or Learning and Academy Manager Manage Academy Feedback or Complaints	about the effectiveness of our practices We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness effectiveness
 (d) ensure that the complaints process is easily accessible to learners (and those supporting them), including having practices for – 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 	As per website, enrolment and course ware information. Log customer complaint or feedback in customer care portal Or via the <u>training@asurequality.com</u> email address Or directly to the QA Lead or Learning and Academy Manager	of our practices We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
ii. addressing barriers to accessing this information (for example, due to language, lack	As per:	We have the required

of internet access, fear of reprisal, desire for anonymity), such as providing alternative ways of raising a complaint; and	Manage Academy Feedback or Complaints Privacy Policy Diversity Bi-Culture & Inclusion Policy website, enrolment and course ware information. Log customer complaint or feedback in customer care portal Or via the <u>training@asurequality.com</u> email address Or directly to the QA Lead or Learning and Academy Manager	practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
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	As per KnowHow procedures: Manage Academy Feedback or Complaints	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
iv. providing the opportunity for groups of learners to make joint complaints; and	As per KnowHow procedures: Manage Academy Feedback or Complaints	We have the required practices in place We have sufficient evidence on

		which to make judgements about the effectiveness of our practices
(e) record complaints; and	Customer care portal Tracking sheet	We have the required practices in place We have sufficient evidence on which to make judgments about the effectiveness of our practices
 (f) report annually to provider management, learners, other stakeholders, and the code administrator (including on provider websites where available) on – 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 	Customer care portal and policy Currently under review	
ii. learner experience with the complaints process and the outcome of their complaint; and	Customer care portal and policy Currently under review	

(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	Via the website, enrolment information. Course Information at the front of all course workbooks	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
 (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 – 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 	Via the Course Information at the front of all course workbooks On a case by case basis, however, learners/employers are not invoiced until after delivery has taken place.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
ii. how to make a complaint to the code administrator if a learner believes that the	Via the Course Information at the front of all course workbooks	We have the required	

provider is failing to meet the outcomes or requirements of this code.		practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
 Process 3: Compliance with the Dispute Resolution Scheme 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. 	Changes to the code are provided in monthly meetings and trainer forums and via SharePoint and email comms	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	

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 SENS	Ξ	
Key required processes	Information we can gather to use as evidence of our compliance with this clause	COMPLIANT	GAP (in evidence)	GAP (in practice)
Process I: Safe and inclusive communities Clause 16 (1). Providers must have practices for – (a) reducing harm to learners resulting from discrimination, racism (including systemic racism), bullying, harassment and abuse; and	Bullying and Harassment Prevention Policy Diversity Bi-Culture & Inclusion Policy Family Violence Leave Policy Health Safety and Wellbeing Commitment Trainer and Assessor Forums, Trainer observations, monthly meetings, workshops. AKO courses and Train the Trainer, SharePoint	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices		
(b) working with learners and staff to recognise and respond effectively to discrimination racism (including systemic racism), bullying, harassment and abuse; and	Trainer and Assessor Forums, Trainer observations, monthly meetings, workshops, SharePoint	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices		

(c) promoting an inclusive culture across the learning environment; and	Diversity Bi-Culture & Inclusion Policy Bullying and Harassment Prevention Policy Trainer and Assessor Forums, Trainer observations, monthly meetings, workshops. AKO courses and Train the Trainer, SharePoint	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
(d) upholding the cultural needs and aspirations of all groups throughout the learning environment; and	Diversity Bi-Culture & Inclusion Policy Trainer and Assessor Forums, Trainer observations, monthly meetings, workshops. AKO courses, SharePoint	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
 (e) providing all learners with information – i. that supports understanding, acceptance, and connection with all learners, and collective responsibility for an inclusive learning environment; and 	Through pre-enrolment information and course information and induction - under review	We have the required practices in place We have sufficient evidence on

		which to make judgements about the effectiveness of our practices
ii. about the cultural, spiritual, and community supports available to them; and	Through pre-enrolment information and course information and induction – under review	We have the required practices in placeWe have sufficient evidence on which to make judgements about the effectiveness of our practices
(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.	For the time that learners are training with the Academy they have access to industry training, sector specialists through social groups and forums	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices

Process 2: Supporting learner participation and engagement Clause 17 (1). Providers must provide learners with opportunities to – (a) actively participate and share their views safely in their learning environment; and	Through learning activities learners are encouraged to provide their own perspectives during delivery and assessment. Learning and Development Policy This is starting to occur in assessments where possible.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	Gap in policy	
(b) connect, build relationships and develop social, spiritual and cultural networks; and	Courses, where there is a mix of participants from different companies or industries learners' network and, have the opportunity to establish wider working relationships. Some courses are booked for a company group where groups are encouraged to work with colleagues, they have not had the opportunity to work with before.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices		
(c) use te reo and tikanga Māori to support Māori learners' connection to identity and culture.	The company has a Tikanga Māori strategy. It is happening in the Academy in pockets. As a result of self-assessment, we have identified the need to further develop the engagement with iwi and Māori groups and		Gap	Gap

Clause 17 (2). Providers must have practices for supporting learners through their studies, including – (a) enabling learners to prepare and adjust for tertiary study, and	contribute to education through Māori language, Tikanga Māori and Matauranga Māori. A new Bi-cultural Committee has been formed organisation wide, the Academy will align with the strategy of the Committee The Academy works with employers and managers to establish the learning needs of the group. Learners connect via the training@asurequality.com through the enrolment form and during training. In some courses, pre-training materials are sent to prepare the learners for up-and-coming training.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(b) maintaining appropriate oversight of learner achievement and engagement; and	Trainers track learner progress and identify those that require additional support	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	

(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	Due to the nature of the industries learners approach the Academy or trainers in confidence. There are multiple ways for learners to inform the Academy of their need for support: via the <u>training@asurequality.com</u> through the enrolment form and during training.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(d) providing learners with advice on pathways for further study and career development, where appropriate.	AsureQuality Key Account Managers and Commercial Services Manager regularly visit key stakeholders to ensure their needs are being met and to identify any knowledge or skills gaps that are preventing them from achieving their goals or meeting industry requirements. There is a collaborative approach in the review and development of current and new programmes. Via the website and the Commercial Business Manager	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
Process 3: Physical and digital spaces and facilities	Health and Safety Team, risk management, venue H&S	We have the required	
Clause 18.	protocols.	practices in	
Providers must have practices for-	Venues are reviewed twice	place	
	yearly. Incidents are reported to	We have	
(a) providing healthy and safe learning environments; and	venues immediately.	sufficient	
(*** F ******* ************************		evidence on	

		which to make judgements about the effectiveness of our practices
(b) identifying and, where possible, removing access barriers to provider facilities and services; and	KnowHow Process: Support trainees at risk or with special needs I.0 Determine the need for additional support. 2.0 Arrange required support. Achieved through Venue Review	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
(c) involving learners in the design of physical and digital environments when making improvements; and	Through learner feedback and consultation	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices

(d) engaging with Māori and involving Māori in the design of physical and digital environments where appropriate.	Through learner feedback and consultation. UDL principles are being implemented as courses go through the review process. The team has a Māori digital learning designers,	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	We need to go out wider than learners with consultation
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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 SENSI		
Key required processes	Information we can gather to use	COMPLIANT	GAP	GAP
	as evidence of our compliance		(in evidence)	(in practice)
	with this clause			
Process I: Information for learners about assistance	Learners who train with the	We have the		
to meet their basic needs.	Academy are in employment. The	required		
	Academy work with supervisors,	practices in		
Clause 20 (1).	managers, and employers to	place		
Providers must have practices for enabling all learners and	establish learner needs.	We have		
prospective learners to identify and manage their basic needs	KnowHow Process: Support	sufficient		
(the essential material requirements to support well-being	trainees at risk or require	evidence on		
and safety including housing, food and clothing), including	additional support.	which to make		

 providing accurate, timely and tailored information on how they can – (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 	Information is provided via the website and on SharePoint to specific agencies and is available through the PITO website.	judgements about the effectiveness of our practices	
(b) access suitable accommodation and understand their rights and obligations as a tenant in New Zealand; and	NA		
(c) maintain a healthy lifestyle.	Learners who train with the Academy are in employment. The Academy work with supervisors, managers, and employers to establish learner needs. Information is provided via the website and on SharePoint to specific agencies and is available through the PITO website.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
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.	Training is catered for by the event venue and reviewed annually or where learner or trainer feedback has been provided this feedback goes to the venue. Venues are reviewed annually. Incidents are reported to the venues immediately.	We have the required practices in place We have sufficient evidence on which to make judgements	

		about the effectiveness of our practices
Process 2: Promoting physical and mental health awareness Clause 21. Providers must have practices for – (a) providing opportunities and experiences for learners that improve their physical and mental health and wellbeing and safety; and 	KnowHow Process: Support trainees at risk or with special needs 1.0 Determine the need for additional support. 2.0 Arrange required support. Information is provided via the website and on SharePoint to specific agencies and is available through the PITO website.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
(b) promoting awareness of practices that support good physical and mental health that are credible and relevant to learners; and	Information is provided via the website and on SharePoint to specific agencies and is available through the PITO website.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
 (c) supporting learners' connection to their language, identity, and culture; and 	Information is provided via the website and on SharePoint to	We have the required

	specific agencies and is available through the PITO website.	practices in place We have sufficient evidence on which to make judgements about the effectiveness
(d) providing accurate, timely information and advice to	Information is provided via the	of our practices We have the
learners about – i. how they can access medical and mental health services through the provider or through community and public services, including culturally responsive services; and	website and on SharePoint to specific agencies and is available through the PITO website.	required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
ii. how they can report health and safety concerns they have for their peers; and	Information is provided via the website and on SharePoint to specific agencies and is available through the PITO website.	We have the required practices in place We have sufficient evidence on which to make judgements

		about the effectiveness of our practices
iii. how to respond to an emergency and engage with relevant government agencies; and	Information is provided via the website and on SharePoint to specific agencies and is available through the PITO website.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
iv. how they can make positive choices that enhance their wellbeing.	Information is provided via the website and on SharePoint to specific agencies and is available through the PITO website.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
Process 3: Proactive monitoring and responsive well- being and safety practices.	Emergency Contact, in some non- urgent cases it would be their	We have the required

 Clause 22 (1). Providers must have practices for – (a) requesting that domestic learners 18 years and over provide a name and up-to-date contact details of a nominated person; and 	manager who has enrolled the learner	practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(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	Emergency Contact, in some non- urgent cases it would be the employer/manager who has enrolled the learner	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(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	Emergency Contact, in some non- urgent cases it would be the employer/manager who has enrolled the learner	We have the required practices in place We have sufficient evidence on which to make judgements	

		about the effectiveness of our practices
(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	KnowHow Process: Support trainees at risk or with special needs Pre-enrolment via the application form or via the training@asurequality.com email. During learning directly to trainer and or via the training@asurequality.com email	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
(e) providing opportunities for learners to raise concerns about themselves or others in confidence; and	KnowHow Process: Support trainees at risk or with special needs. Pre-enrolment via the application form or via the training@asurequality.com email. During learning directly to trainer and or via the training@asurequality.com email	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices

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(f) identifying learners at risk and having clear and appropriate pathways for assisting them to access services when they need it; and	KnowHow Process: Support trainees at risk or with special needs Pre-enrolment via the application form or via the training@asurequality.com email. During learning directly to trainer and or via the training@asurequality.com email	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
 (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 	KnowHow Process: Support trainees at risk or with special needs – 4.0 Report if the trainee(s) is at risk There is a process however, this is under review based on trainer feedback	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
ii. protecting learners and staff who experience harm from other learners and/or staff, including sexual assault; and	Bullying and Harassment Prevention Policy Diversity Bi-Culture & Inclusion Policy Family Violence Leave Policy Health Safety and Wellbeing Commitment	We have the required practices in place We have sufficient evidence on

	Code of Conduct Policy	which to make judgements about the effectiveness of our practices
(h) making arrangements with disabled learners or those affected by health and wellbeing difficulties to accommodate learning needs, including for study off- campus; and	KnowHow Process: Support trainees at risk or with special needs Venue Review All venues are reviewed with a visit to the venue, wheelchair access, health and safety protocols, room sizes for social distancing.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practicesImage: Comparison of the second
(i) responding to disruptive and threatening behaviour in a way that is sensitive to a learner's situation; and	KnowHow Process: Support trainees at risk or with special needs – 4.0 Report if the trainee(s) is at risk Bullying and Harassment Prevention Policy Diversity Bi-Culture & Inclusion Policy Health Safety and Wellbeing Commitment Code of Conduct Policy	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices

(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.	KnowHow Process: Support trainees at risk or with special needs – 4.0 Report if the trainee(s) is at risk The Academy does not invoice until after training learners or their employers/managers can cancel at any time and rebook when the timing suits.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
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.	Emergency contact details and contact of the manager who booked the training are recorded in the SMS. As per our policy AsureQuality does not engage with international agents.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices
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.	Emergency contact details and contact of the manager who booked the training are recorded in the SMS.	We have the required practices in place We have sufficient evidence onImage: Comparison of the second secon

		which to make judgements about the effectiveness of our practices
Clause 22 (4). Providers must maintain a record of reported risks, including any concerns raised in relation to the effective administration of this code.	Risk Register and regular ongoing reviews of the Code in monthly meetings, safety and wellbeing meetings.	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices

Tool B: possible evidence examples

You can use this optional tool to help you:

- prepare for a gap analysis, by identifying information that could be used to evidence compliance
- gather information to inform your analysis, to ensure that you collect relevant information

Good quality evidence is:

- quantitative and qualitative information gathered systematically from multiple, diverse sources within and connected to your organisation
- directly relevant to the questions your organisation is trying to answer
- vital for evaluating your current practices against the requirements of the Code
- information that enables you to support your rationale for improvement action plans to stakeholders, including Government and learners

Examples of possible evidence are, but not limited to:

- Policies and/or procedures for relevant outcomes, which are regularly reviewed
- Targeted surveys for each outcome from learners and all other relevant stakeholders (e.g. survey outcomes)
- Records of anecdotal feedback gathered from learners and all other relevant stakeholders (e.g. feedback log)
- Plans and records of meetings with learners and/or student leaders (e.g. student union meeting) and all other relevant stakeholders
- Records showing that gathered data and/or feedback are analysed and utilised to improve the implementation of the tertiary and international learners Code (e.g. annual programme evaluation report)
- Usage log or statistical analysis of services, training, or workshops such as a medical centre, counselling service, and sports facilities (e.g. attendance log, counselling service report)
- Records of staff participation of staff training (e.g. schedule of staff training and attendance)
- Incident register and records of learner/parent complaints with result
- Information provided to learners for relevant outcomes (e.g. learner handbook, house rules, promotional materials and available services (internal and external))
- Emergency procedures / Critical incident plan
- Processes to manage your 24/7 contact and live-in accommodation staff for learners
- Records of monitoring and review of learners' academic achievement and graduates' pathways (e.g. end of term course report)
- Relevant contracts (e.g. student accommodation contracts)
- Role descriptions and CVs of relevant staff
- Official documents or certificates issued by government agencies (e.g. building warrant of fitness (BWoF) and code compliance certificates (CCC)

Tool C: action plan template (the Code)

For the period: DD/MM/YYYY to DD/MM/YYYY

- Based on our analysis, what do we need to do differently in the coming year?
- Who is responsible for implementing the planned next steps, and by when?
- How will we monitor our plan to ensure that it is implemented?
- How will we know that the actions we took were successful?

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	Diversity Bi-Culture & Inclusion Policy there is a Manu Kōkiri project starting to strengthen and broaden internal and external relationships	МН	Ongoing	Q3 2023	Learner feedback EPI Data Bi-Cultural Committee
Outcome 2: Learner voice	Through the Manu Kōkiri project	МН	Ongoing	Q3 2023	Learner engagement and feedback. The Bi-cultural Committee

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 accessible physical	Through the Manu Kōkiri project	MH	Ongoing	Q3 2023	Learner engagement and feedback. Outcomes agreed with the Bi-cultural Committee.
and digital learning environments					
Outcome 4: Learners are safe and well	Review of the Safety & Wellbeing and policy and procedures	Collaboration S&W Team Academy	Annually	Feb 2023	Risk Register. Learner Feedback

Additional wellbeing and safety practices in tertiary student accommodation (in relation to domestic and international tertiary learners)

	Action/s to be taken	Owner	Due date	Plan for monitoring implementation	Measures of success
Outcome 5: A positive, supportive and inclusive environment in student	N/A				
accommodation					
Outcome 6: Accommodation administrative	N/A				
practices and contracts					
Outcome 7: Student accommodation facilities and services	N/A				

Additional wellbeing and safety practices for tertiary providers (signatories) enrolling international learners

	Action/s to be taken	Owner	Due date	Plan for monitoring implementation	Measures of success
Outcome 8: Responding to the distinct wellbeing and	Ongoing review with the S&W Team, a current piece within the Risk Register.	QA Lead	Oct 2022	Nov 2022	Learner feedback. Data collection and analysis. Trainer feedback
safety needs of international tertiary learners					
Outcome 9: Prospective international tertiary learners are well	Review Feb 2022 – Data informed a change to learner information. Currently under review with SMS team	QA Lead and Commercial Business Manager Academy Team	Annually	Feb 2023	Learner feedback Data and reporting accuracy
informed					

Outcome 10: Offer, enrolment, contracts, insurance and visa	Current Review	Collaboration; Learning Analyst, Course co- ordinator QA Lead	Annually	March 2023	Learner feedback Data and reporting accuracy
Outcome 11: International learners receive appropriate	Feb 2022 Review	QA Lead and Commercial Business Manager Academy Team	Annually	Feb 2023	Learner feedback
orientations, information and advice					
Outcome 12: Safety and appropriate supervision of international tertiary learners	Review of the Safety & Wellbeing and policy and procedures	Collaboration S&W Team Academy	Annually	Feb 2023	Risk Register. Learner Feedback