



The Education (Pastoral Care of Tertiary and International Learners)

Code of Practice 2021

Self Review

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>	Development and implementation of the Achievement NZ, The Education (Pastoral Care of Tertiary and International Learners) Code of Practice Strategic and Action Plan 2023		Ongoing process	

<p>(b) contribute to an education system that honours Te Tiriti o Waitangi and supports Māori–Crown relations.</p>	<p>Further development of this area is underway, including staff professional development and developing connections to local iwi in conjunction with group initiatives.</p>		<p>Ongoing process</p>	
<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>	<p>Learner Wellbeing, Safety and DAP Team (AEG) Pastoral Care Advisory Group (ACNZ)</p>		<p>Ongoing process</p>	
<p>(b) make amendments to their learner wellbeing and safety strategic goals and strategic plans within a reasonable timeframe following the review.</p>	<p>Achievement NZ , The Education (Pastoral Care of Tertiary and International Learners) Code of Practice Strategic and Action Plan 2023</p>	<p>We have sufficient practices and evidence in place</p>		
<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>	<p>Further development of stakeholder engagement is ongoing and reviewing learner wellbeing and safety strategic goals and plans</p>		<p>Ongoing process</p>	
<p>(b) reviewing their learner wellbeing and safety strategic goals and strategic plans described in subclause (2).</p>	<p>Learner Wellbeing, Safety and DAP Team (AEG) Pastoral Care Advisory Group (ACNZ)</p>		<p>Ongoing process</p>	

<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>	<p>Achievement NZ , The Education (Pastoral Care of Tertiary and International Learners) Code of Practice Strategic and Action Plan 2023</p>	<p>We have sufficient practices and evidence in place</p>		
<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>	<p>Ongoing improvement of stakeholder engagement is underway</p>		<p>Ongoing process</p>	
<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>	<p>Ongoing improvement of stakeholder engagement is underway</p>		<p>Ongoing process</p>	
<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>	<p>Learner Wellbeing, Safety and DAP Team (AEG) Pastoral Care Advisory Group (ACNZ)</p>		<p>Ongoing process</p>	

<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>Greater disclosure can be made to learners and the general public through our new website. We are working to increase resources available on our Wellbeing and Pastoral Care portal for staff to access.</p>		<p>Ongoing process</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>	<p>Achievement NZ , The Education (Pastoral Care of Tertiary and International Learners) Code of Practice Strategic and Action Plan 2023</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(c) self-review reports on the quality of their learner wellbeing and safety practices described in clause 8.</p>	<p>Currently available on request, but we can improve by providing direct access via the new website</p>		<p>January 2025</p>	
<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>	<p>Opportunity to add this detail to our risk and management system through our Audit and Risk Committee Matric</p>		<p>Ongoing process</p>	

<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>	<p>Room for further and ongoing professional development in this area in conjunction with Group initiatives</p>		<p>Ongoing process</p>	
<p>(b) the provider’s obligations under this code; and</p>	<p>Professional Development Schedule for Code – My Voice Pastoral Care and Wellbeing Portal</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(c) understanding the welfare issues of diverse learner groups and appropriate cultural competencies; and</p>	<p>Professional Development Schedule for Code – My Voice Pastoral Care and Wellbeing Portal</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(d) identifying and timely reporting of incidents of racism, discrimination, and bullying; and</p>	<p>Professional Development Schedule for Code – My Voice Pastoral Care and Wellbeing Portal New Staff Induction</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(e) physical and sexual violence prevention and response, including how to support a culture of disclosure and reporting; and</p>	<p>Room for further and ongoing professional development in this area</p>		<p>Ongoing process</p>	
<p>(f) privacy and safe handling of personal information; and</p>	<p>Professional Development – Privacy Policy. New staff induction</p>	<p>We have sufficient practices and evidence in place</p>		

<p>(g) referral pathways (including to local service providers) and escalation procedures; and</p>	<p>Further training is required in this area. DCM role coordination of pastoral care planned</p>		<p>Ongoing process</p>	
<p>(h) identifying and timely reporting of incidents and concerning behaviours; and</p>	<p>Incident Reporting Processes New staff induction Incident Register</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(i) wellbeing and safety awareness and promotion topics including –</p> <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. 	<p>Stakeholder site visits and presentations. My Voice Pastoral Care and Wellbeing Portal – Staff.</p>	<p>We have sufficient practices and evidence in place</p>		
<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>	<p>Emergency response plans are provided at induction and signed for all learners. Disability Support personnel are in place with wardens to ensure learners with support needs are assisted to exit safety. Review learner handbook and website for additional information to be added.</p>		<p>Ongoing process</p>	
<p>(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</p>	<p>DCM role coordination of pastoral care and wellbeing. Professional development.</p>		<p>Ongoing process</p>	

	<p>Pastoral Care advisory group incorporated into Weekly Campus Planning Meetings.</p> <p>Health Safety and Wellbeing advisor group</p> <p>Further training to be arranged</p>			
<p>(c) co-ordinating decision-making across the provider when responding to emergencies; and</p>	<p>Emergency action plans in place outlining procedures for most emergency situations including areas of responsibility.</p> <p>Disaster Recovery plans in place.</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(d) disseminating timely, accurate, consistent, and accessible information to learners and staff during emergencies; and</p>	<p>Emergency action plans in place outlining procedures for most emergency situations including areas of responsibility</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(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</p>	<p>Emergency action plans in place outlining procedures for most emergency situations including areas of responsibility.</p> <p>Training for all staff in the implementation of plans outlined on the staff professional development schedule.</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(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 –</p> <p>i. engaging with relevant government agencies (e.g. the New Zealand Police, Ministry of</p>	<p>Procedures are in place at the My Voice Pastoral Care Wellbeing Portal, linked from, the Quality Management System</p>	<p>We have sufficient practices and evidence in place</p>		

<p>Health, New Zealand Qualifications Authority, Tertiary Education Commission); and</p> <p>ii. the follow-up de-briefing processes to support all learners and relevant staff; and</p>				
<p>(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.</p>	<p>Improve reporting at an aggregate level and disaggregated by diverse learner groups</p>		<p>Ongoing process</p>	

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>	<p>Student Voice meeting agenda, minutes, and procedures. One to one coaching and evaluation feedback. Documented work with disability services clients, Work with Iwi and cultural organisations.</p>	We have sufficient practices and evidence in place		
(b) working with diverse learners and their communities to develop, review, and improve learner wellbeing and safety strategic goals, strategic plans and practices; and	More work to be done at the strategy level and ensuring the voice of diverse learners and their communities are heard.		Ongoing process	
(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	Communication schedule copy Student Voice Advisory groups	We have sufficient practices and evidence in place		
(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	Work is underway however further work is required to spread the reach for participation in the decision making processes		Continuous process	

<p>(e) providing timely and accessible information to learners to increase transparency of providers' decision-making processes.</p>	<p>Student Voice Morning briefings</p>	<p>We have sufficient practices and evidence in place</p>		
<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>	<p>Complaints and resolution procedures Student Voice meetings</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(b) inform learners on how the complaint will be handled and how it is progressing; and</p>	<p>Complaints and resolution procedures. Part of the complaint meeting and communication process</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(c) handle complaints in a timely and efficient way, including having practices that –</p> <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>Quality Management Systems - Complaints and resolution procedures Include advisory group and/or committee advice as required eg. Cultural Committee. Include support contacts and/or whanau in the process where possible.</p>	<p>We have sufficient practices and evidence in place</p>		

<p>(d) ensure that the complaints process is easily accessible to learners (and those supporting them), including having practices for –</p> <p>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</p>	<p>Complaints and resolution procedures in Learner Guide (Student Handbook) and on website.</p>	<p>We have sufficient practices and evidence in place</p>		
<p>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</p>	<p>Quality Management Systems - Complaints and resolution procedures</p>	<p>We have sufficient practices and evidence in place</p>		
<p>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</p>	<p>Inclusion of support person in the complaints process.</p>	<p>We have sufficient practices and evidence in place</p>		
<p>iv. providing the opportunity for groups of learners to make joint complaints; and</p>	<p>As part of the complaints process. Student Voice</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(e) record complaints; and</p>	<p>Complaints procedure – QMS Complaints forms Complaints Register Complaints reporting - Website</p>	<p>We have sufficient practices and evidence in place</p>		

<p>(f) report annually to provider management, learners, other stakeholders, and the code administrator (including on provider websites where available) on –</p> <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 	<p>The reporting process could be improved</p>		<p>Continuous process</p>	
<p>(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</p>	<p>Process is in place and reporting has been revised. Ongoing review and development moving forward.</p>		<p>Ongoing process</p>	
<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, 	<p>Posters and information in Student Zone Website DCM role from the My Voice Pastoral Care and Wellbeing Portal.</p>	<p>We have sufficient practices and evidence in place</p>		

<p>the Dispute Resolution Scheme, the Disputes Tribunal, the Human Rights Commission or the Ombudsman; and</p> <p>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.</p>				
<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>	<p>Dispute Resolution process and advertising material added to the Pastoral Care and Wellbeing Portal providing direct access for distribution.</p>	<p>We have sufficient practices and evidence in place</p>		

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>Quality management system policies Pastoral care code folders in each campus Pastoral care and wellbeing advisory groups My Voice – Te Whare Tapa Whā Fonofale</p>	<p>We have sufficient practices and evidence in place</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>Quality management system policies Pastoral care code folders in each campus Pastoral care and wellbeing advisory groups My Voice – Te Whare Tapa Whā Fonofale</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(c) promoting an inclusive culture across the learning environment; and</p>	<p>Quality management system policies Pastoral care code folders in each campus</p>	<p>We have sufficient practices and evidence in place</p>		

	<p>Pastoral care and wellbeing advisory groups</p> <p>Evaluation indicator assessments every 2 months per programme per venue.</p> <p>Student evaluation feedback</p> <p>My Voice – Te Whare Tapa Whā Fonofale</p>			
<p>(d) upholding the cultural needs and aspirations of all groups throughout the learning environment; and</p>	<p>Cultural advisory group roles and responsibilities.</p> <p>Cultural committee input into setting environments</p> <p>Staff cultural competency assessments</p> <p>My Voice – Te Whare Tapa Whā Fonofale</p> <p>Student Voice documents</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(e) providing all learners with information –</p> <p>i. that supports understanding, acceptance, and connection with all learners, and collective responsibility for an inclusive learning environment; an</p> <p>ii. about the cultural, spiritual, and community supports available to them; and</p>	<p>Updating the Student Handbook in regard to these specific items would be of benefit to learners</p>		<p>Continuous process</p>	
<p>(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.</p>	<p>Friends and whanau are welcome but greater focus could be brought to this area.</p> <p>Implementation of Bring a Friend days and Whanau Days.</p>		<p>Ongoing process</p>	

<p>Process 2: Supporting learner participation and engagement</p> <p>Clause 17 (1). Providers must provide learners with opportunities to –</p> <p>(a) actively participate and share their views safely in their learning environment; and</p>	<p>Campus rules Student Voice Learner evaluation feedback Stakeholder feedback from learners My Voice – Te Whare Tapa Whā</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(b) connect, build relationships and develop social, spiritual and cultural networks; and</p>	<p>Student Voice Stakeholder presentations Support plans My Voice – Te Whare Tapa Whā Fonofale.</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(c) use te reo and tikanga Māori to support Māori learners' connection to identity and culture.</p>	<p>Cultural Committee Cultural advisors - stakeholders My Voice – Te Whare Tapa Whā Fonofale Marketing material Posters and information on campus</p>	<p>We have sufficient practices and evidence in place</p>		
<p>Clause 17 (2). Providers must have practices for supporting learners through their studies, including –</p> <p>(a) enabling learners to prepare and adjust for tertiary study, and</p>	<p>Student support services Including access to study skill development support and workshops.</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(b) maintaining appropriate oversight of learner achievement and engagement; and</p>	<p>Learner management system – access to learners, Whanau, support personnel and staff.</p>	<p>We have sufficient practices and evidence in place</p>		

(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	Monthly one to one coaching notes. Learner evaluation feedback Surveys Access to staff Student Voice	We have sufficient practices and evidence in place		
(d) providing learners with advice on pathways for further study and career development, where appropriate.	Pathway advisory group Careers advisor access Student services Collaboration with Polytechnic Careers Advisors	We have sufficient practices and evidence in place		
Process 3: Physical and digital spaces and facilities Clause 18. Providers must have practices for–	Quality Management System Te Whare Tapa Whā Disability Action Plan Pastoral Care Code resources Evaluation Indicators process	We have sufficient practices and evidence in place		
(a) providing healthy and safe learning environments; and				
(b) identifying and, where possible, removing access barriers to provider facilities and services; and	Disability Action Plan Pastoral Care Code resources	We have sufficient practices and evidence in place		
(c) involving learners in the design of physical and digital environments when making improvements; and	Update Student Voice guide with specific details about student involvement in the physical and digital design on environments		Ongoing process	
(d) engaging with Māori and involving Māori in the design of physical and digital environments where appropriate.	Update the Cultural Team strategy with specific details about Māori involvement in physical and digital design.		Ongoing work in this area	

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> <ul style="list-style-type: none"> (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 (b) access suitable accommodation and understand their rights and obligations as a tenant in New Zealand; and (c) maintain a healthy lifestyle. 	Further refinement of processes and practice is required to cover all point in this clause		Continuous process	

<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>	<p>Student café menus Breakfast, lunch and break food and beverage availability and pricing.</p>	<p>We have sufficient practices and evidence in place</p>		
<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>	<p>Active Careers initiative Gym access and memberships Wellbeing newsletter Support plans Care plans One to one coaching Student Voice Trips and outings Guest speakers Student zone Sensory kits</p>		<p>Ongoing process</p>	
<p>(b) promoting awareness of practices that support good physical and mental health that are credible and relevant to learners; and</p>	<p>Further promotional opportunities are available through publishing information on the website and internally on our wellbeing portal.</p>		<p>Ongoing process</p>	
<p>(c) supporting learners’ connection to their language, identity, and culture; and</p>	<p>My Voice – Te Whare Tapa Whā, Cultural advisors - stakeholders Access to externals cultural support initiatives</p>	<p>Ongoing process</p>		
<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</p>	<p>Induction lists and process using My Voice. Student Zone – support services information hub.</p>		<p>Ongoing process</p>	

<p>through community and public services, including culturally responsive services; and</p> <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. 	<p>One to one coaching Direct access to guest speakers Collaboration with Youth Services providers. Support plans Care plans Stakeholder Presentations Further development of process is required to completely cover off this area including further development of our Wellbeing Newsletter and resources on the Pastoral Care and Wellbeing portal.</p>			
<p>Process 3: Proactive monitoring and responsive wellbeing and safety practices.</p> <p>Clause 22 (1). Providers must have practices for –</p> <ul style="list-style-type: none"> (a) requesting that domestic learners 18 years and over provide a name and up-to-date contact details of a nominated person; and 	<p>Enrolment process Collaboration with Youth Services</p>	<p>We have sufficient practices and evidence in place</p>		
<ul style="list-style-type: none"> (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>Induction Care Plans Support Plans Welcome to Achievement NZ document</p>	<p>We have sufficient practices and evidence in place</p>		

<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>	<p>Support Plans Care Plans</p>			
<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>	<p>Collaboration with Youth Services Health checklist Support plan process Care plan process</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(e) providing opportunities for learners to raise concerns about themselves or others in confidence; and</p>	<p>Collaboration with Youth Services Health checklist Support plan process Care plan process Whanau days One to One Coaching - Monthly</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(f) identifying learners at risk and having clear and appropriate pathways for assisting them to access services when they need it; and</p>	<p>Collaboration with Youth Services Health checklist Support plan process Care plan process One to one monthly coaching sessions.</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(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</p>	<p>Quality Management System. Emergency procedures document and professional development of implementation.</p>	<p>We have sufficient practices and evidence in place</p>		

	<p>Collaboration with Youth services and other service providers.</p> <p>Review processes so staff are clear on identifying student support pathways using the support plan and care plan resources.</p>			
<p>ii. protecting learners and staff who experience harm from other learners and/or staff, including sexual assault; and</p>	<p>Emergency procedures document and professional development of implementation.</p> <p>Collaboration with Youth services and other service providers.</p> <p>Care and Support Plans</p> <p>Safe room/lock down procedures</p> <p>Support processes including external counselling as required.</p>	<p>We have sufficient practices and evidence in place</p>		
<p>(h) making arrangements with disabled learners or those affected by health and wellbeing difficulties to accommodate learning needs, including for study off-campus; and</p>	<p>Greater clarity needs to be developed on how to effectively support learners for off-campus study.</p>		<p>Ongoing process</p>	
<p>(i) responding to disruptive and threatening behaviour in a way that is sensitive to a learner's situation; and</p>	<p>Emergency procedures document and professional development of implementation.</p> <p>Professional development in working with challenging behaviours completed by all staff.</p>	<p>We have sufficient practices and evidence in place</p>		

	Safe room and lock down procedures			
(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.	Flexible study environments Additional IT support and infrastructure Study packs used for off-site study options. Online tutor access to support off site study options. Study return procedures including stepped returns as appropriate for some conditions.	We have sufficient practices and evidence in place		
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.	Welcome to Achievement NZ document. Learner file Care plans Support plans	We have sufficient practices and evidence in place		
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.	Care plans Support plans.	We have sufficient practices and evidence in place		
Clause 22 (4). Providers must maintain a record of reported risks, including any concerns raised in relation to the effective administration of this code.	Health safety and wellbeing advisory team reports Pastoral care advisory team reports	We have sufficient practices and evidence in place		

