

Code of Practice Self Review – October 2025

What is the Code?

The Code for learner wellbeing and safety sets out the roles and responsibilities of tertiary education organisations (TEOs) in promoting and supporting your wellbeing, development and educational achievement.

Under the Code, your TEO should be helping you to be:

- safe, physically, and mentally
- respected and accepted for who you are
- supported in your learning and wellbeing
- connected with your social and cultural networks and
- able to have your say in decisions about services.

The Code has twelve outcomes.

Outcomes 1 and 2 focus on education providers taking a whole of organisation approach to learner wellbeing and safety, and that learner voice is embedded into the organisation.

Outcomes 3 and 4 focus on wellbeing and safety practices for all tertiary providers and relate to physical and digital learning environments.

Outcomes 5 – 7 focus on student accommodation to ensure that it is safe and creating inclusive communities.

Outcomes 8 – 12 have the same requirements to the previous international Code for tertiary learners, and ensures international learners have access to the right information and support before and during their study.

As People Potential does not have student accommodation, or offer programmes for international learners, only Outcomes 1 to 4 apply to study in the organisation.

Who is the Code for?

The **Education (Pastoral Care of Tertiary and International Learners) Code of Practice 2021 – Learner Wellbeing and Safety** covers all domestic and international tertiary learners at universities, Te Pūkenga, private training establishments, and wānanga. The Code covers students who are studying online, offshore and/or in workplace-based settings.

The Code came into effect on 1 January 2022, replacing the previous International Code and Interim Domestic Code.

People Potential will ensure that all students have access to appropriate guidance and support systems during the hours that the organisation is open. People Potential will ensure that it meets its responsibilities under the Code of Practice 2021. The Code covers all students including those who are studying flexibly, full-time or in workplace-based settings.

People Potential is fully committed to achieving the outcomes that the Code sets out and this is supported by each section of the Quality Management System. In practice this means that:

- We have strategic goals and plans to support the wellbeing and safety of our students across the organisation.
- We work proactively with our learners and stakeholders, and use relevant data to develop and review these, with actions put into place where improvements or enhancements can be made.
- These plans and goals are available to our students, our team and the public.
- We will gather relevant information to identify trends so that we can connect our students to support in a timely manner.

Our approach to meeting our obligations under the Code is reviewed each year in October. If you wish to have access to this document in a format which is more easily understood, or readable for you, please contact us.

<p>Clause 8 (3).</p> <p>Providers must, in a timely manner, following a review described in subclauses (1) and (2) take appropriate action to address any deficiencies in learner wellbeing and safety practices.</p>	<ul style="list-style-type: none"> Following the review, where gaps are identified, a set of actions will be developed and given a timeframe for action. Where there is a serious deficiency, this will be acted upon within one month of the review. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>Process 3: Publication requirements</p> <p>Clause 9.</p> <p>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>	<ul style="list-style-type: none"> Information is available to all staff on the intranet, and to learners and the general public in the Student Handbook and in a separate document in the website. A separate tab has been added for information and documentation relating to the Code of Practice on the website. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>(b) revisions to strategic goals and strategic plans for supporting the wellbeing and safety of learners described in clause 7(2); and</p>	<ul style="list-style-type: none"> These are currently available to all staff on the intranet and learners and the public by request. The option to request is advertised in information on the website. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>(c) self-review reports on the quality of their learner wellbeing and safety practices described in clause 8.</p>	<ul style="list-style-type: none"> This report will be published on the website in November 2025. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>Process 4: Responsive wellbeing and safety systems</p> <p>Clause 10 (1).</p> <p>Providers must gather and communicate relevant information across their organisation (including student accommodation) and from relevant stakeholders to accurately identify emerging concerns about learners’ wellbeing and safety or behaviour and take all reasonable steps to connect learners quickly to culturally appropriate social, medical, and mental health services.</p>	<ul style="list-style-type: none"> There are robust processes in place for gathering information from learners and other stakeholders to identify concerns. Information about services is disseminated in a range of ways for learners to access independently and there is an open-door policy in place for learners to approach any member of staff they are comfortable to get support. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>Clause 10 (2).</p> <p>Providers must provide staff with ongoing training and resources tailored to their roles in the organisation, in relation to –</p> <ul style="list-style-type: none"> Te Tiriti o Waitangi; and 	<ul style="list-style-type: none"> Training is provided during the induction and coaching period for new staff, and then refreshed in the professional development schedule each year. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<ul style="list-style-type: none"> the provider’s obligations under this code; and 	<ul style="list-style-type: none"> Training is provided during the induction and coaching period for new staff, and then refreshed in the professional development schedule each year. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<ul style="list-style-type: none"> understanding the welfare issues of diverse learner groups and appropriate cultural competencies; and 	<ul style="list-style-type: none"> Training is provided during the induction and coaching period for new staff, and then refreshed in the professional development schedule each year. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<ul style="list-style-type: none"> identifying and timely reporting of incidents of racism, discrimination, and bullying; and 	<ul style="list-style-type: none"> Training is provided during the induction and coaching period for new staff, and then refreshed in the professional development schedule each year. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<ul style="list-style-type: none"> physical and sexual violence prevention and response, including how to support a culture of disclosure and reporting; and 	<ul style="list-style-type: none"> Training is provided during the induction and coaching period for new staff, and then refreshed in the professional development schedule each year. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<ul style="list-style-type: none"> privacy and safe handling of personal information; and 	<ul style="list-style-type: none"> Training is provided during the induction and coaching period for new staff, and then refreshed in the professional development schedule each year. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<ul style="list-style-type: none"> referral pathways (including to local service providers) and escalation procedures; and 	<ul style="list-style-type: none"> Training is provided during the induction and coaching period for new staff, and then refreshed in the professional development schedule each year. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)

<ul style="list-style-type: none"> identifying and timely reporting of incidents and concerning behaviours; and 	<ul style="list-style-type: none"> Training is provided during the induction and coaching period for new staff, and then refreshed in the professional development schedule each year. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<ul style="list-style-type: none"> wellbeing and safety awareness and promotion topics including – <ul style="list-style-type: none"> i. safe health and mental health literacy and support; and ii. suicide and self-harm awareness; and iii. promoting drug and alcohol awareness; and iv. promoting healthy lifestyles for learners. 	<ul style="list-style-type: none"> Training is provided during the induction and coaching period for new staff, and then refreshed in the professional development schedule each year. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>Clause 10 (3). Providers must have plans for assisting learners, and responding effectively, in emergency situations in the learning or residential community (whether localised or more widespread), including –</p> <p>(a) making these plans readily available to learners when they begin their study; and</p>	<ul style="list-style-type: none"> Fire and Emergency Evacuation plans are in place and these are published in every classroom and areas that are accessible to learners. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<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>	<ul style="list-style-type: none"> There are designated staff with leadership responsibility for providing guidance to learners and who can be contacted in case of emergency. Remaining staff members have training for the correct processes for giving appropriate advice to learners in case of emergency. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>(c) co-ordinating decision-making across the provider when responding to emergencies; and</p>	<ul style="list-style-type: none"> There is a clear chain of command in place during the day-to-day operation of the organisation and so all staff members are very familiar with this process which also applies in an emergency situation. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>(d) disseminating timely, accurate, consistent, and accessible information to learners and staff during emergencies; and</p>	<ul style="list-style-type: none"> Well established communication systems are in place and these are also implemented during an emergency situation. Investigation underway to add an app to our emergency response. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<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>	<ul style="list-style-type: none"> Key staff members are subscribed to relevant warning mechanisms to provide as much warning as possible in the case of danger, and there is a process in place and lines of authority for quick and effective communication. External conflict management training has begun to supplement internal PD with a programme to be completed before the end of 2025. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<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> <ul style="list-style-type: none"> i. engaging with relevant government agencies (e.g. the New Zealand Police, Ministry of Health, New Zealand Qualifications Authority, Tertiary Education Commission); and ii. the follow-up de-briefing processes to support all learners and relevant staff; and 	<ul style="list-style-type: none"> The Procedures Manual includes guidance for emergency situation including processes for escalating to the relevant government agencies and follow up processes to support learners and staff. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<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>	<ul style="list-style-type: none"> Incidents and emergencies are recorded throughout the year using the health and safety processes in place. Reporting annually is built into this review. In the 12 months between 1 October 2024 and 30 September 2025, there have been no critical incidents or emergencies. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)

<ul style="list-style-type: none"> i. are appropriate to the level of complexity or sensitivity of the complaint; and ii. consider the issues from a cultural perspective; and iii. include the provision of culturally responsive approaches that consider traditional processes for raising and resolving issues (for example, restorative justice); and iv. comply with the principles of natural justice; and 	<p>practices that are appropriate, consider issues from and respond in a culturally responsive way, and comply with the principles of natural justice.</p>	<p><input type="checkbox"/> Gap (in Practice)</p>
<p>d) ensure that the complaints process is easily accessible to learners (and those supporting them), including having practices for –</p> <ul style="list-style-type: none"> i. providing learners with clear information on how to use the internal complaints processes (including the relevant people to contact), and the scope and possible outcomes of the processes; and 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 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 iv. providing the opportunity for groups of learners to make joint complaints; and 	<ul style="list-style-type: none"> • The complaints process is published on the website, in the Student Handbook and on the Information Sheets which are displayed in each classroom. 	<p><input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)</p>
<p>e) record complaints; and</p>	<ul style="list-style-type: none"> • Complaints are recorded on the Complaint Action form by whichever member of the senior management team is handling the complaint and this process is followed through to conclusion. 	<p><input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)</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 	<ul style="list-style-type: none"> • The number and nature of complaints as described, including the learner experience and outcome of the complaint is tabled as an agenda item in the Board Meeting following the Code of Practice review. • This year's review has showed that in each instance, on the Complaint Action form, the learner (and any support people) experience has been recorded on the form, however it would be useful to add a prompt to the template to that it is guaranteed to be included in the record. • In the 12 months between 1 October 2024 and 30 September 2025, two complaints of a minor nature which have both been resolved. 	<p><input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)</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>	<ul style="list-style-type: none"> • The complaints process is well publicised and can be found in the Student Handbook, on information sheets in all classrooms and on the website. • This process includes our own process and also the options available to a learner outside of our organisation as described in the requirement. 	<p><input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)</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</p>	<ul style="list-style-type: none"> • These requirements are included in the complaints process and its availability is outlined in the section above. 	<p><input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)</p>

<p>internal complaints process or outcome, including –</p> <p>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</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.</p> <p>Providers must ensure they are familiar with the relevant Dispute Resolution Scheme rules for domestic and international learners and ensure compliance with those rules in a dispute to which it is party.</p>	<ul style="list-style-type: none"> Members of the governance and senior management of the organisation are very familiar with the Dispute Resolution Scheme rules for domestic learners which applies to our setting. Information about the Dispute Resolution Scheme rules is published in the Procedures Manual which is all staff confirm their understanding of each year. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
Action Required	Responsibility	Suggested Deadline
<ul style="list-style-type: none"> None required 	<ul style="list-style-type: none"> Not applicable 	<ul style="list-style-type: none"> Not applicable

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).</p> <p>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>	<ul style="list-style-type: none"> The Student Handbook includes policies which address discrimination, racism, bullying, harassment and abuse. These policies are also included in the Procedures Manual. Open door policies are in place so that any student or staff member may get support to address any concerns. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		
<p>b) working with learners and staff to recognise and respond effectively to discrimination racism (including systemic racism), bullying, harassment and abuse; and</p>	<ul style="list-style-type: none"> Policies are supported by the incident and complaints process in order to immediately act on any instances where discrimination, racism, bullying, harassment or abuse arise. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		
<p>c) promoting an inclusive culture across the learning environment; and</p>	<ul style="list-style-type: none"> An inclusive environment is promoted throughout documentation, signage and information both in the learning environment and on the website. This is enhanced by provider participation in events which allows the opportunity for raising awareness and providing education. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		
<p>d) upholding the cultural needs and aspirations of all groups throughout the learning environment; and</p>	<ul style="list-style-type: none"> Policies are included in the Quality Management System and the procedures which support these are included in the Student Handbook and Procedures Manual. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		
<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; and</p>	<ul style="list-style-type: none"> Learners are provided with this information in the Student Handbook which is readily accessible. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		

ii. about the cultural, spiritual, and community supports available to them; and		
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.	<ul style="list-style-type: none"> Learners are provided with accessible environments and their level of satisfaction is checked in a number of ways including regular evaluations and the Student Hui process. Source of referral of learners is also measured and 'previous student' and 'friend or whānau' are the most significant categories, indicating high levels of satisfaction with the environment provided in that learners return, and encourage their whānau to also enrol. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>Process 2: Supporting learner participation and engagement 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>	<ul style="list-style-type: none"> A number of processes are in place for learners to participate and provide feedback including such systems as evaluations, Student Hui, advisory groups, GPO feedback etc Informally, an open-door policy is in place which means a learner can approach anyone they are comfortable to share their views safely. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
b) connect, build relationships and develop social, spiritual and cultural networks; and	<ul style="list-style-type: none"> Many formal and informal activities are in place to support learners to build connect, build relationships and networks. These are within classes, within teams, whole Campus events and participation in community events. Evidence of this can be found in a number of places including pastoral care notes and in Team Talk. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
c) use te reo and tikanga Māori to support Māori learners' connection to identity and culture.	<ul style="list-style-type: none"> Use of Te Reo and tikanga Māori is embedded throughout the organisation and is a deliberate focus when reviewing material and delivery approaches. Opportunities to enhance this approach are taken such as celebration in Matariki and Te Wiki o te Reo Māori. This is supported by regular PD for staff and growing numbers of the team who are learning Te Reo. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<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>	<ul style="list-style-type: none"> Policies are outlined in the Quality Management System and these are supported by processes outlined in the Student Handbook and Procedures Manual. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
b) maintaining appropriate oversight of learner achievement and engagement; and	<ul style="list-style-type: none"> Policies are outlined in the Quality Management System and these are supported by processes outlined in the Student Handbook and Procedures Manual. This is monitored by the management team and reported to the Board each month so that support can be put in place if required. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
c) providing the opportunity for learners to discuss, in confidence, any issues that are affecting their ability to study and providing learners with a response to their issues; and	<ul style="list-style-type: none"> Formally this takes place during the development of the ILP and Student Progress checks. This is supported by the open-door policy which has been discussed in previous sections. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
d) providing learners with advice on pathways for further study and career development, where appropriate.	<ul style="list-style-type: none"> Formally this takes place during the development of the ILP and Student Progress checks as a specific topic in the document. It is addressed throughout programme delivery and learners are encouraged to use career planning tools such as careers.govt.nz 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)

<p>Process 3: Physical and digital spaces and facilities Clause 18.</p> <p>Providers must have practices for–</p> <p>a) providing healthy and safe learning environments; and</p>	<ul style="list-style-type: none"> • Policies are outlined in the Quality Management System and these are supported by processes outlined in the Student Handbook and Procedures Manual. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>b) identifying and, where possible, removing access barriers to provider facilities and services; and</p>	<ul style="list-style-type: none"> • Policies are outlined in the Quality Management System and these are supported by processes outlined in the Student Handbook and Procedures Manual. • Access to physical spaces is also supported by the Disability Action Plan. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>c) involving learners in the design of physical and digital environments when making improvements; and</p>	<ul style="list-style-type: none"> • Learners have the opportunity to provide feedback and make suggestions about their learning environment in each of the feedback forums which ask specific questions about satisfaction with learning environments. • These suggestions collated and taken into account when improvements are being made as each feedback forum has an ‘actions required’ to follow it up. • Our website has been designed using the W3C best practice, which is also combined into Googles Accessibility recommendations and online learning is designed to be inclusive. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>d) engaging with Māori and involving Māori in the design of physical and digital environments where appropriate.</p>	<ul style="list-style-type: none"> • Māori learners have the opportunity to provide feedback and make suggestions about their learning environment in each of the feedback forums which ask specific questions about satisfaction with learning environments. • These suggestions collated and taken into account when improvements are being made as each feedback forum has an ‘actions required’ to follow it up. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>Action Required</p>	<p>Responsibility</p>	<p>Suggested Deadline</p>
<ul style="list-style-type: none"> • None required 	<ul style="list-style-type: none"> • Not applicable 	<ul style="list-style-type: none"> • Not applicable

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		
		COMPLIANT	GAP (in evidence)	GAP (in practice)
Key required processes	Information we can gather to use as evidence of our compliance with this clause			
Process 1: Information for learners about assistance to meet their basic needs. 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 – <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. 	<ul style="list-style-type: none"> • A number of processes are in place to support learners with identifying and managing their basic needs. • This is addressed in the ILP and Student Progress interviews in the ‘non-unit content’ goals. • Information is available to learners about a range of wellbeing support available in the Student Handbook and there is an open-door policy to ask for support. • Content in foundation level programmes includes coverage of these matters. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		
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.	<ul style="list-style-type: none"> • Food is made available at each site in a number of ways. In most cases, this is at no cost to the learner and consideration is given to healthy food options in what is supplied. • At the Whangarei campus a cafeteria operates one day a week with a low-cost menu which includes healthy options. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		
Process 2: Promoting physical and mental health awareness Clause 21. Providers must have practices for – <ul style="list-style-type: none"> a) providing opportunities and experiences for learners that improve their physical and mental health and wellbeing and safety; and 	<ul style="list-style-type: none"> • A range of experiences and opportunities are built into programme design in the non-unit content of all programmes for learners to improve their physical and mental health, wellbeing and safety. • Additionally, there are campus wide activities such as Mental Health Awareness week where activities are run, guest speakers invited and strategies published on our social media platforms. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		
<ul style="list-style-type: none"> b) promoting awareness of practices that support good physical and mental health that are credible and relevant to learners; and 	<ul style="list-style-type: none"> • Activities to promote practices that support good physical and mental health are run throughout the year. • Credible and relevant support services are linked in the Student Handbook and students are supported to access services as needed. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		
<ul style="list-style-type: none"> c) supporting learners’ connection to their language, identity, and culture; and 	<ul style="list-style-type: none"> • Campuses participate in activities throughout the year to support and promote connection to language, culture and identity such as Māori Language week, Matariki celebrations, Pacific Language weeks, participation in festivals and events, guest speakers etc. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		
<ul style="list-style-type: none"> d) providing accurate, timely information and advice to learners about – <ul style="list-style-type: none"> i. how they can access medical and mental health services through the provider or through community and public services, including culturally responsive services; and 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 	<ul style="list-style-type: none"> • Information is provided to learners during induction and in the Student Handbook. • This is overarchingly supported by the open-door policy throughout the organisation which means that any learner can approach any member of the team that they are comfortable to and be given appropriate support and guidance. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)		

iv. how they can make positive choices that enhance their wellbeing.		
<p>Process 3: Proactive monitoring and responsive wellbeing and safety practices.</p> <p>Clause 22 (1).</p> <p>Providers must have practices for –</p> <p>a) requesting that domestic learners 18 years and over provide a name and up-to-date contact details of a nominated person; and</p>	<ul style="list-style-type: none"> • Up to date contact details for the nominated person are collected for all learners under the age of 18 years and these are stored on the SMS: <ul style="list-style-type: none"> ○ On the enrolment form ○ On the Parental Declaration form for U18 year olds ○ On permission slips for activities 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
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	<ul style="list-style-type: none"> • Processes are in place and recorded in the Procedures Manual about how and the nominated person should be contacted. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
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	<ul style="list-style-type: none"> • Processes are in place and recorded in the Procedures Manual about how and the nominated person should be contacted. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
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	<ul style="list-style-type: none"> • Open-door processes are in place to ensure learners can communicate needs to staff in confidence in a way that they are comfortable with. This supplements the formal check ins that are in place throughout enrolment, such as ILP, Student progress etc. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
e) providing opportunities for learners to raise concerns about themselves or others in confidence; and	<ul style="list-style-type: none"> • Open-door processes are in place to ensure learners can communicate needs to staff in confidence in a way that they are comfortable with. This supplements the formal check ins that are in place throughout enrolment, such as ILP, Student progress etc. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
f) identifying learners at risk and having clear and appropriate pathways for assisting them to access services when they need it; and	<ul style="list-style-type: none"> • Formal checkpoints are built into the enrolment pattern, processes are in place for follow up where expected progress is not being made and rigorous absence follow-up processes are in place. • We have received some feedback from learners that they were unaware that home visits were not expected. This will be added to the enrolment form and Student Handbook when updated for 2026. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
g) identifying learners who are at risk of harming others, and i. having clear and appropriate pathways for assisting them to access services when they need it; and	<ul style="list-style-type: none"> • Processes and staff training is in place to identify learners who are at risk of harming others. The policy outlines who to make aware of concerns and the action that will be taken to support the learner and keep other learners and the team safe. A senior staff member with the skills to deal with an emergency situation is on site at all times that the organisation is open. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
ii. protecting learners and staff who experience harm from other learners and/or staff, including sexual assault; and	<ul style="list-style-type: none"> • Processes and staff training is in place to identify learners who are at risk of harming others. The policy outlines who to make aware of concerns and the action that will be taken to support the learner and keep other learners and the team safe. A senior staff member with the skills to deal with an emergency situation is on site at all times that the organisation is open. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
h) making arrangements with disabled learners or those affected by health and wellbeing difficulties to accommodate learning needs, including for study off-campus; and	<ul style="list-style-type: none"> • All programmes have flexible version approved by NZQA which means that arrangements can be made for learners (including disabled learners) to have their learning needs accommodated where they cannot attend on-campus classes. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)

i) responding to disruptive and threatening behaviour in a way that is sensitive to a learner's situation; and	<ul style="list-style-type: none"> Processes and staff training is in place to identify and manage threatening and disruptive behaviour. This ensures that safety is paramount with consideration and sensitivity to the situation(s) of those involved. A senior staff member with the skills to deal with an emergency situation is on site at all times that the organisation is open. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
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.	<ul style="list-style-type: none"> A number of strategies are in place to support learners who have their study interrupted including: <ul style="list-style-type: none"> Extension request Transition to flexible learning pathways Independent Plan request – alternate study arrangements for a fixed period of time. None of these processes have any financial burden on the learner if they need to access them. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>Clause 22 (2).</p> <p>Providers must have up-to-date contact details and next of kin for domestic tertiary learners under 18 and international tertiary learners.</p>	<ul style="list-style-type: none"> Up to date contact details for the nominated person are collected for all learners under the age of 18 years and these are stored on the SMS: <ul style="list-style-type: none"> On the enrolment form On the Parental Declaration form for U18 year olds On permission slips for activities. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>Clause 22 (3).</p> <p>Providers must contact the next of kin for domestic tertiary learners under 18 years and international tertiary learners if there is concern regarding the wellbeing or safety of a learner.</p>	<ul style="list-style-type: none"> Processes are in place and recorded in the Procedures Manual about how and the nominated person should be contacted. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>Clause 22 (4).</p> <p>Providers must maintain a record of reported risks, including any concerns raised in relation to the effective administration of this code.</p>	<ul style="list-style-type: none"> All reported risks and concerns are recorded in the Incident, Accident and Complaints processes depending on the type of concern. These are managed by a senior manager at the time and analysed by a member of the Board of Directors each month to inform policy changes as required. 	<input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Gap (in Evidence) <input type="checkbox"/> Gap (in Practice)
<p>Action Required</p>	<p>Responsibility</p>	<p>Suggested Deadline</p>
<ul style="list-style-type: none"> Include home visit practice in the information provided in the enrolment form and Student Handbook for 2026. 	<ul style="list-style-type: none"> Bronwyn 	<ul style="list-style-type: none"> January 2026