



Te Oranga me
Te Haumaru Ākonga

**Learner Wellbeing
and Safety**

Self-review Toolkit for Tertiary Education Providers

Tool A: gap analysis

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

NZQA

NEW ZEALAND QUALIFICATIONS AUTHORITY
MANA TOHU MĀTAURANGA O AOTEAROA

QUALIFY FOR THE FUTURE WORLD
KIA NOHO TAKATŪ KI TŌ ĀMUA AO!

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Tool A: gap analysis

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

You can use this tool to help you:

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

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

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

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

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

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

Outcome 1: A learner wellbeing and safety system

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

| Phase in the gap analysis process: | PREPARE | MAKE SENSE | | |
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| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <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> | <ul style="list-style-type: none"> • Health, Safety and Wellbeing Policy • Student Mental Health and Wellbeing Safety Policy • Process for students at risk • Disability Policy • Clinical psychologists employed/contracted as staff • Mentoring panel offered • FrontTier services offered • Profs course content includes wellbeing and stress management tools | Compliant | | |
| <p>(b) contribute to an education system that honours Te Tiriti o Waitangi and supports Māori-Crown relations.</p> | PLSC students are able to undertake their assessments in Te Reo Māori. | Compliant | | |

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| | <p>Including te reo Māori and Tikanga principles in course content, where such content is relevant to the legal profession and the purpose of this policy;</p> <p>Supporting the use of te reo Māori in the legal profession by delivering practical and professionally relevant content that demonstrates the use of te reo Māori in practice;</p> <p>Encompassing te ao Māori in the programme's approaches to learning and assessment.</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>Review of policies undertaken every 12 months</p> | Compliant | | |
| <p>(b) make amendments to their learner wellbeing and safety strategic goals and strategic plans within a reasonable timeframe following the review.</p> | <p>Amendments implemented as soon as practicable following review.</p> | Compliant | | |

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| <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>Psychotherapists as part of the College group are included in the development of systems and processes around student wellbeing. Anonymous survey and opportunity to provide feedback offered to those who have been offered support options whilst undertaking the course.</p> | Compliant | | |
| <p>(b) reviewing their learner wellbeing and safety strategic goals and strategic plans described in subclause (2).</p> | <p>The above mentioned stakeholders are included in the annual review.</p> | Compliant | | |
| <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>Procedures are included as part of the annual review, and – where required – are updated as soon as practicable following a review.</p> | Compliant | | |
| <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>Psychotherapists as part of the College group are included in the development of systems and processes around student wellbeing.</p> | Compliant | | |

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| <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>Anonymous survey and opportunity to provide feedback offered to those who have been offered support options whilst undertaking the course.</p> | <p>Compliant</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>Amendments implemented as soon as practicable following review.</p> | <p>Compliant</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>Health, Safety and Wellbeing Policy, Student Code of Conduct, Student Mental Health and Wellbeing Safety Plan, Critical Incidents Policy and Procedure available on the website.</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>(c) self-review reports on the quality of their learner wellbeing and safety practices described in clause 8.</p> | <p>Self Attestation results are made available publicly on our website.</p> | <p>Compliant</p> | <p>To be updated with the latest version of the</p> | |

| | | | self-review when complete. | |
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| <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>Training provided to all College staff.</p> <p>Student wellbeing escalation process in place.</p> <p>Monthly NSP meeting.</p> <p>Fortnightly instructor meeting.</p> <p>Weekly EST meeting.</p> <p>Regular stakeholder meetings to discuss macro wellbeing, safety and behaviour concerns, both with all Universities and with employers, including bringing together groups of stakeholders to discuss collectively.</p> <p>Fronttier team are actively working in the wellbeing space with stakeholders and implementing solutions.</p> | Compliant | | |
| <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>All teaching staff have undertaken Te Tiriti o Waitangi training as part of their professional qualifications.</p> <p>As part of the College's Te Tiriti o Waitangi policy, staff are encouraged to undertake training suitable to their role and</p> | | | Te Tiriti o Waitangi training to be provided to new staff that were not part of the Te Kaa Cultural |

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| | responsibilities within the organisation. | | | Competency course. |
| (b) the provider's obligations under this code; and | Staff attended the NZQA workshop on the Domestic Code in 2022, and Info Sessions in 2023. | Compliant | | |
| (c) understanding the welfare issues of diverse learner groups and appropriate cultural competencies; and | | | We are currently engaging an external agency to review our processes and support. Work to be completed in late 2024 and early 2025. | |
| (d) identifying and timely reporting of incidents of racism, discrimination, and bullying; and | Feedback review processes discussed earlier in this document ensure this. Formal complaints procedure and formal complaints register. All staff, including contractors, undertake mandatory training every year. 2024 training completed in October 2024. | Compliant | | |

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| (e) physical and sexual violence prevention and response, including how to support a culture of disclosure and reporting; and | All staff, including contractors, undertake mandatory training every year. 2024 training completed in October 2024. ES Manager completed training 2021. | Compliant | | |
| (f) privacy and safe handling of personal information; and | Privacy intranet page and resources available to all staff. All staff, including contractors, undertake mandatory training every year. 2024 training completed in October 2024. | Compliant | | |
| (g) referral pathways (including to local service providers) and escalation procedures; and | Student wellbeing escalation process in place. | Compliant | | |
| (h) identifying and timely reporting of incidents and concerning behaviours; and | Weekly SMT meeting reporting on concerns. Ad hoc meetings between instructors and ES Manager as required. Weekly EST meeting reporting on concerns. | Compliant | | |

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| <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>Training provided to all College staff. Weekly wellness tip emails provided to all students and staff. Mental Health First Aid completed by ES Manager 2021. Drug and Alcohol Awareness training completed by ES Manager 2021</p> | Compliant | | |
| <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> <ul style="list-style-type: none"> (a) making these plans readily available to learners when they begin their study; and | <p>Emergency Response plan in place. Critical Incidents policy available to learners via website.</p> | Compliant | | |
| <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>Emergency Response Plan at Group level, with appropriate local contacts. Students are provided with enquiries and extensions inbox. Orientation key contacts, all instructor details made available to students.</p> | Compliant | | |
| <p>(c) co-ordinating decision-making across the provider when responding to emergencies; and</p> | <p>Emergency Response plan at Group level.</p> | Compliant | | |

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| (d) disseminating timely, accurate, consistent, and accessible information to learners and staff during emergencies; and | Emergency Response plan at Group level. | Compliant | | |
| (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 | Training provided to all staff and available on our learning platform as video training to new staff. | | | This training could be repeated in 2024. |
| (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 – 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 | Emergency Response plan at Group level. Critical cases included in Student Mental Health and Wellbeing Safety Policy. | Compliant | | |
| (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. | WH&S registers, annual compliance registers, quarterly WH&S reporting | Compliant | | |

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 | | |
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| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <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> | Students are provided with a list of key contacts on the first day of the course, and encouraged to reach out to those key contacts. There are four opportunities across the 13/18 week course for students to provide feedback on the course and their experience. | Compliant | | |
| <p>(b) working with diverse learners and their communities to develop, review, and improve learner wellbeing and safety strategic goals, strategic plans and practices; and</p> | Partner with students and staff members to develop and implement plans, procedures, and guidelines, to operationalise the responsibilities described by the Te Tiriti o Waitangi Policy. Diversity and Inclusion Policy | Compliant | We are currently engaging an external agency to review our processes and support. Work to be completed in late 2024 and early 2025. | |

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| <p>(c) providing formal and informal processes for actively hearing, engaging with, and developing the diverse range of learner voices and those of their communities; and</p> | <p>End of course student evaluations, feedback review meetings, Course Advisory Committees, subject specific student evaluations</p> | <p>Compliant</p> | <p>We are currently engaging an external agency to review our processes and support. Work to be completed in late 2024 and early 2025.</p> | |
| <p>(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</p> | <p>Course Regulations are made available to learners in the learning management system, as well as highlighted at Orientation and in our pre-course communications. Course manual and handbook available on website.</p> | <p>Compliant</p> | | |
| <p>(e) providing timely and accessible information to learners to increase transparency of providers' decision-making processes.</p> | <p>Learners are engaged in the PLSC course from between 13-18 weeks. The context of this is very relevant in that learner's engagement in decision-making. The four formal opportunities to provide feedback are a key time for us to address feedback specific to the current group of students. Due to the timing of the course being so short, learner</p> | <p>Compliant</p> | | |

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| | voice is typically a tool to progress and pursue improvements for students that come after. | | | |
| <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>We have a Customer Insights team available to receive complaints if such complaints do not want to come through the NZ team.</p> <p>We have processes in place to regularly review written feedback and respond as necessary.</p> <p>Formal complaints process in place and a formal complaints register is maintained.</p> | Compliant | | |
| <p>(b) inform learners on how the complaint will be handled and how it is progressing; and</p> | <p>As per the above. Course Manual outlines the process. Formal complaints process in place and a formal complaints register is maintained.</p> | Compliant | | |
| <p>(c) handle complaints in a timely and efficient way, including having practices that –</p> <ol 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 | <p>We have appeals processes, formal complaints process. These are outlined in the Course Manual.</p> <p>Complaints Student Complaints and Grievances Register used to document any formal complaints.</p> | Compliant | | |

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| iv. comply with the principles of natural justice; and | | | | |
| (d) ensure that the complaints process is easily accessible to learners (and those supporting them), including having practices for – 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 | We provide emails with the contact details of our Customer Insights team, as well as regular requests for written feedback. Course manual outlines complaints process. | Compliant | | |
| 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 | Complaints can be received by: email (customer insights or CAO), written anonymous feedback documents, directly to an instructor (email or phone). | Compliant | | |
| 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 | Offer of a support person is made. | Compliant | | |
| iv. providing the opportunity for groups of learners to make joint complaints; and | We do have, from time to time, groups of learners make joint complaints, and these are handled under the same guiding principles as an individual complaint. The guiding principles are outlined in our Formal Complaints Procedure. | | This could be made clear in the course manual. | |

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| (e) record complaints; and | Formal process to record complaints in one document introduced. | Compliant | | |
| (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 ii. learner experience with the complaints process and the outcome of their complaint; and | Weekly meeting of the Senior Management Team where any complaints are raised. | Compliant | | |
| (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 | Promoted and publicised in the Course Manual which is available on the website, as well as on the student learning portal. | Compliant | | |
| (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 | Reference to the appeals process available under the Regulations. | Compliant | | |

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| <p>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. 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>Details available in the Course Manual.</p> | <p>Compliant</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 | | |
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| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <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>Student code of conduct. Staff code of conduct. Document also available on the student wellbeing page. Anti Discrimination and Bullying Policy</p> | Compliant | | |
| <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>Feedback and complaints processes discussed elsewhere in this document All staff, including contractors, are provided with mandatory training on discrimination annually.</p> | Compliant | | |
| <p>(c) promoting an inclusive culture across the learning environment; and</p> | <p>College employees promote Māori and Pasifika student participation and success by championing an environment that is conducive to Māori and Pasifika student recruitment, retention</p> | Compliant | | |

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| | <p>and achievement. This may include:</p> <ul style="list-style-type: none"> Creating appropriate options and opportunities to enable successful academic achievement; Creating pastoral care processes that enable students' access, participation and success; Identifying barriers within the business, or regulatory environment and championing the dismantling of such barriers | | | |
| <p>(d) upholding the cultural needs and aspirations of all groups throughout the learning environment; and</p> | <p>Te Reo Māori assessment options.</p> <p>Dedicated instructor to support students with diverse learning needs, whether that is cultural, disability or other.</p> <p>Other cultural needs observed and upheld as required or requested by students</p> | Compliant | | |
| <p>(e) providing all learners with information –</p> <ul style="list-style-type: none"> i. that supports understanding, acceptance, and connection with all learners, and collective responsibility for an inclusive learning environment; an ii. about the cultural, spiritual, and community supports available to them; and | <p>Student code of conduct and Course Manual</p> | Compliant | | |

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| <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>Opportunities offered throughout the course to engage with peers through classroom interaction, Meet Your Supervisor meetings (virtual and accessible to all), and Padlet and online forum engagement, (online, onsite),. This is a 13 or 18 week course, which is important to the context. Opportunities are offered to engage, as detailed above, as is relevant and contextual to a relatively short professional course.</p> | <p>Compliant</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>Four formal opportunities to do this throughout the 13/18 week course. Informal opportunities presented by instructors.</p> | <p>Compliant</p> | | |
| <p>(b) connect, build relationships and develop social, spiritual and cultural networks; and</p> | <p>Opportunities offered throughout the course to engage with peers through classroom interaction, Meet Your Supervisor meetings, and Padlet and online forum engagement, (online, onsite),</p> | | | |

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| <p>(c) use te reo and tikanga Māori to support Māori learners' connection to identity and culture.</p> | <p>Students who choose to do so can do their assessments in Te Reo Māori, with Tikanga practices. Other Te Reo Māori activities incorporated for all students throughout the course.</p> | <p>Compliant</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>Our learners have already been through tertiary study. This is a professional qualification. Dedicated instructor to support students with diverse learning needs, whether that is cultural, disability or other.</p> | <p>Compliant</p> | | |
| <p>(b) maintaining appropriate oversight of learner achievement and engagement; and</p> | <p>Low grades process, NSP, missed/late skills modules notification.</p> | <p>Compliant</p> | | |
| <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</p> | <p>Extensions inbox. Education Support Team Customer Insights Team.</p> | <p>Compliant</p> | | |
| <p>(d) providing learners with advice on pathways for further study and career development, where appropriate.</p> | <p>Admission information provided. Mentoring Panel offered. Career portal and jobs board offered.</p> | <p>Compliant</p> | | |
| <p>Process 3: Physical and digital spaces and facilities</p> <p>Clause 18. Providers must have practices for–</p> <p>(a) providing healthy and safe learning environments; and</p> | <p>Health, safety and wellbeing policy Anti Discrimination and Bullying policy Student Code of Conduct Staff Code of Conduct</p> | <p>Compliant</p> | | |

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| (b) identifying and, where possible, removing access barriers to provider facilities and services; and | <p>Online information presented in an accessible format.</p> <p>Responsive to needs of learner with access or disability concerns as required.</p> <p>Wrap around services provided for no cost to the student – mentoring panel, dedicated learning support where required, wellness tips, psychotherapist support, etc.</p> | Compliant | | |
| (c) involving learners in the design of physical and digital environments when making improvements; and | <p>Learners involved in research and focus groups regarding the online learning platform and ongoing improvements.</p> <p>Online learning environment feedback is obtained and responded to as part of the feedback process.</p> | Compliant | | |
| (d) engaging with Māori and involving Māori in the design of physical and digital environments where appropriate. | <p>Māori cultural advisor engaged by the College and involved in the lefthand mentioned items, in addition to various other initiatives</p> | Compliant | | |

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 | | |
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| Key required processes | Information we can gather to use as evidence of our compliance with this clause | COMPLIANT | GAP (in evidence) | GAP (in practice) |
| <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. | <p>Process of identifying at risk students and escalation process mentioned elsewhere in this document.</p> <p>Education Support team available to provide assistance to students with the left-hand mentioned items.</p> | Compliant | | |

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| <p>Clause 20 (2). If food is made available by the provider on campus or in student accommodation, the provider must ensure that the food available includes a range of healthy food options that is obtainable at a reasonable cost.</p> | NA | | | |
| <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>This is a 13- or 18-week professional course that students typically undertake while being in employment, and is largely undertaken online. As such, the applicability of this clause is limited by the scope of involvement with the whole of a student’s life/activities. However as an organisation we see our responsibility as promoting the overall wellbeing of the legal profession. As a group we engage in multiple activities in this space. For our students specifically, they obtain wellbeing tips emails weekly and access to a mentoring panel.</p> | Compliant | | |
| <p>(b) promoting awareness of practices that support good physical and mental health that are credible and relevant to learners; and</p> | <p>Weekly wellness emails. Wellbeing and stress tools are provided as part of course materials.</p> | Compliant | | |
| <p>(c) supporting learners’ connection to their language, identity, and culture; and</p> | <p>Te Reo Māori assessment offered. Financial and other</p> | | | |

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| | support to a range of cultural law societies. | | | |
| <p>(d) providing accurate, timely information and advice to learners about –</p> <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 iv. how they can make positive choices that enhance their wellbeing. | <p>This is a 13- or 18-week professional course that students typically undertake while being in employment, and is largely undertaken online. As such, the applicability of this clause is limited by the scope of involvement with the whole of a student's life/activities. However, our Education Support team do support individual learners with these matters where required.</p> | Compliant | | |
| <p>Process 3: Proactive monitoring and responsive wellbeing and safety practices.</p> <p>Clause 22 (1). Providers must have practices for –</p> <p>(a) requesting that domestic learners 18 years and over provide a name and up-to-date contact details of a nominated person; and</p> | Mandatory field on enrolment. | Compliant | | |
| <p>(b) describing the circumstances in which the nominated person referred to in paragraph (a) should be contacted in relation to their wellbeing and safety; and</p> | | Compliant | | |

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| (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 | Reasons for contacting with nominated emergency contacts are outlined in Education Support team manuals. | Compliant | | |
| (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 | Various methods of communicating these issues – multiple communication channels made available to students | Compliant | | |
| (e) providing opportunities for learners to raise concerns about themselves or others in confidence; and | As above | Compliant | | |
| (f) identifying learners at risk and having clear and appropriate pathways for assisting them to access services when they need it; and | Processes discussed elsewhere in this report | Compliant | | |
| (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 | Processes discussed elsewhere in this report | Compliant | | |
| ii. protecting learners and staff who experience harm from other learners and/or staff, including sexual assault; and | Processes discussed elsewhere in this report | Compliant | | |
| (h) making arrangements with disabled learners or those affected by health and wellbeing difficulties to accommodate learning needs, including for study off-campus; and | Disability Policy - Process for supporting disabled learners in place. Each person is individually communicated with and relevant individual adjustment | Compliant | | |

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| | plans in place | | | |
| (i) responding to disruptive and threatening behaviour in a way that is sensitive to a learner's situation; and | Student Code of Conduct Formal complaints process and guiding principles | | Student code of contact procedural document to be developed to support staff actions when disruptive or threatening behaviour takes place. | |
| (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. | PLSC Regulations are governed by the NZ Council of Legal Education and have specific regulations in regard to these matters. However our Education Support team work within the regulations to achieve a fair and equitable result for all students that are interrupted by life circumstances. | Compliant | | |
| 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. | | NA | | |

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| <p>Clause 22 (3). Providers must contact the next of kin for domestic tertiary learners under 18 years and international tertiary learners if there is concern regarding the wellbeing or safety of a learner.</p> | | NA | | |
| <p>Clause 22 (4). Providers must maintain a record of reported risks, including any concerns raised in relation to the effective administration of this code.</p> | WHS Registers, Quarterly reporting, and biannual compliance checks | Compliant | | |

