



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

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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	
COMPLIANT	• We have the required practices in place • We have sufficient evidence on which to make judgements about the effectiveness of our practices
GAP (in evidence)	• We have the required practices in place but... • ...we have limited evidence on which to make judgements about the effectiveness of those practices
GAP (in practice)	• We do not have the required practices in place

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

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

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

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

Outcome 1: A learner wellbeing and safety system

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

Phase in the gap analysis process:	PREPARE	MAKE SENSE		
Key required processes	Information we can gather to use as evidence of our compliance with this clause	COMPLIANT	GAP (in evidence)	GAP (in practice)
Process 1: Strategic goals and strategic plans Clause 7 (1). Providers must have strategic goals and strategic plans for supporting the wellbeing and safety of their learners across their organisation, including student accommodation, describing how they will –	Policy in place EER comments Board Strategic goals	✓		
(a) give effect to the outcomes sought and processes required by this code; and				
(b) contribute to an education system that honours Te Tiriti o Waitangi and supports Māori–Crown relations.	Policy – practice is under development the College is on a journey with the implementation.	✓		✓

Clause 7 (2). Providers must – (a) regularly review their learner wellbeing and safety strategic goals and strategic plans as described in subclause (1); and	Review practice. Evidence captured in SMS	✓	✓	Gap has closed due to transparency of Neuro-inclusivity
(b) make amendments to their learner wellbeing and safety strategic goals and strategic plans within a reasonable timeframe following the review.	Yes – via AA. Code Meeting minutes – Extensions, deferments, CTE, LOA, LSA	✓		
Clause 7 (3). Providers must work proactively with learners and stakeholders (and document this work) when – (a) developing their learner wellbeing and safety strategic goals and strategic plans described in subclause (1); and	Student council as stakeholders. Student Rep on Academic Board	✓		
(b) reviewing their learner wellbeing and safety strategic goals and strategic plans described in subclause (2).	Presented the previous DAP and LSP to Students and SC	✓		
Process 2: Self review of learner wellbeing and safety practices 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.	Continuous implementation of the DAP Code meetings	✓		

Clause 8 (2). Providers must review their learner wellbeing and safety practices using – (a) input from diverse learners and other stakeholders; and	First Impressions Survey As of 2024 a Student Voice Survey in place on Moodle. Survey questions consistently reviewed. Ongoing consultation with the Student Council.	✓		
(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.	Now First Impressions Survey In 2025 now within Course Feedback Survey Newly reviewed Complaints system. Email and anecdotal feedback are now captured as part of the AD report to Academic Board.	✓		
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.	As part of this process	✓	✓	

Process 3: Publication requirements Clause 9. Providers must make the following information readily available, in accessible formats, to learners, staff and the general public, including on their websites (where available) – (a) strategic goals and strategic plans for supporting the wellbeing and safety of learners described in clause 7(1); and	To do Report on website Check – add international student info for all			
(b) revisions to strategic goals and strategic plans for supporting the wellbeing and safety of learners described in clause 7(2); and	N/A			
(c) self-review reports on the quality of their learner wellbeing and safety practices described in clause 8.	In progress – to go on website			
Process 4: Responsive wellbeing and safety systems 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.	Selma notes on individual students Student council Pastoral care processes			

Clause 10 (2). Providers must provide staff with ongoing training and resources tailored to their roles in the organisation, in relation to – (a) Te Tiriti o Waitangi; and	PD begun in 2024 - need follow up	✓		✓
(b) the provider's obligations under this code; and	Did PD some time ago – should revise. CE trying to identify further PD courses		✓	✓
(c) understanding the welfare issues of diverse learner groups and appropriate cultural competencies; and	Some PD previously on diverse learning; reschedule			
(d) identifying and timely reporting of incidents of racism, discrimination, and bullying; and	Complaints policy Has not arisen	✓	✓	
(e) physical and sexual violence prevention and response, including how to support a culture of disclosure and reporting; and	Policy Has not arisen	✓	✓	
(f) privacy and safe handling of personal information; and	Privacy policy Risk management Handling of client information	✓		
(g) referral pathways (including to local service providers) and escalation procedures; and	External counselling. Internal referral - student progress reports	✓		
(h) identifying and timely reporting of incidents and concerning behaviours; and	Communication via absence notifications Staff monitoring Paua clinic clients – processes in place to support students			

(i) wellbeing and safety awareness and promotion topics including – 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.	i. In course content - website ii. In course content - clinic iii. No iv. In course content from PPNM and via Paua Clinic	✓		
Clause 10 (3). Providers must have plans for assisting learners, and responding effectively, in emergency situations in the learning or residential community (whether localised or more widespread), including – (a) making these plans readily available to learners when they begin their study; and	Move to online is rapid e.g. weather event Not readily available because emergencies... Regular fire drills	To revise		
(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	Procedures in place for some. Good first aid coverage	Needs review		College mobile?
(c) co-ordinating decision-making across the provider when responding to emergencies; and	Case-by-case	✓		
(d) disseminating timely, accurate, consistent, and accessible information to learners and staff during emergencies; and	Examples of weather events and historically Covid	✓		

(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	Well covered- student progress: sufficient knowledge on mental health, abuse; Procedure in process for emergency situations			
(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	Needs update			
(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.	Process for incidents to be reported monthly to Board of Directors and Inc Soc			

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)
Process 1: Learner voice Clause 12. Providers must have practices for – (a) proactively building and maintaining effective relationships with diverse learner groups within their organisation; and	Student council Additional needs register Recruited Cultural Liaison person	✓		
(b) working with diverse learners and their communities to develop, review, and improve learner wellbeing and safety strategic goals, strategic plans and practices; and	Student council Additional needs register Individual meetings with students	✓		
(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	Development of Programme Management committees Individual meetings with students Surveys	✓		
(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	Academic Success programme Staff availability - Academic Director, Library Manager, Pastoral care staff, Student council Resources for neuro-diversity	✓		

(e) providing timely and accessible information to learners to increase transparency of providers' decision-making processes.	Student handbook Course guidelines Orientation Forum notices Robyn Report Student newsletter	✓		
Process 2: Learner complaints Clause 13. Providers must – (a) work with learners to effectively respond to, and process complaints (including appropriate engagement with support people); and	Policies and procedures are readily available on the LMS	✓		
(b) inform learners on how the complaint will be handled and how it is progressing; and	Policy and procedure	✓		
(c) handle complaints in a timely and efficient way, including having practices that – 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	Outlined clearly in procedure and tracked	✓		

(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	Policies and procedures are readily available on the LMS Discussed at orientation	✓		
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	Has not arisen Course survey feedback is a means to communicate Introduce anonymous feedback mechanism	✓		
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	Yes – part of policy – offered when formal meetings are set up	✓		
iv. providing the opportunity for groups of learners to make joint complaints; and	Yes	✓		
(e) record complaints; and	A complaints register is kept	✓		
(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	Yes – reported as required to Academic Board and/or Board of Directors No formal complaints received in 2025	✓		

ii. learner experience with the complaints process and the outcome of their complaint; and				
(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	Policies and procedures are readily available on the LMS Discussed at orientation	✓		
(h) advise learners, on the next steps available to them if the provider does not accept the complaint (or the learner or provider perceives that the provider does not have the cultural competency to deal with it), or the learner is not satisfied that the provider has made adequate progress towards resolving the complaint, or the learner is not satisfied with the provider's internal complaints process or outcome, including – i. how to seek resolution of a contractual or financial dispute by way of a complaint or referral to an appropriate body or agency depending on the subject matter of the dispute, for example, the code administrator, the Dispute Resolution Scheme, the Disputes Tribunal, the Human Rights Commission or the Ombudsman; and ii. how to make a complaint to the code administrator if a learner believes that the	As above	✓		

provider is failing to meet the outcomes or requirements of this code.				
Process 3: Compliance with the Dispute Resolution Scheme Clause 14. Providers must ensure they are familiar with the relevant Dispute Resolution Scheme rules for domestic and international learners and ensure compliance with those rules in a dispute to which it is party.	Yes – in documentation	✓		

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)
Process 1: Safe and inclusive communities Clause 16 (1). Providers must have practices for –	Policy and procedures Student reps	✓		
(a) reducing harm to learners resulting from discrimination, racism (including systemic racism), bullying, harassment and abuse; and				
(b) working with learners and staff to recognise and respond effectively to discrimination racism (including systemic racism), bullying, harassment and abuse; and	Policy and procedures Pastoral care posters	✓		
(c) promoting an inclusive culture across the learning environment; and	Events – welcoming morning teas, orientation with mihi whakatau facilitated by Ngati Whatua rep, immersion days	✓		
(d) upholding the cultural needs and aspirations of all groups throughout the learning environment; and	Policy and procedures	✓		

(e) providing all learners with information – i. that supports understanding, acceptance, and connection with all learners, and collective responsibility for an inclusive learning environment; and ii. about the cultural, spiritual, and community supports available to them; and	Policy and procedures are readily available on the LMS Course content through Te Ara o te Ao Māori and Mindbody Orientation	✓		
(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.	Access through Microsoft teams Forums on LMS Student council regional meetings Spaces on-campus for private meetings	✓		
Process 2: Supporting learner participation and engagement Clause 17 (1). Providers must provide learners with opportunities to – (a) actively participate and share their views safely in their learning environment; and	Class discussion Student council Student feedback - surveys	✓		
(b) connect, build relationships and develop social, spiritual and cultural networks; and	College events Community day/open day receiving guests from local community Social media posts; newsletters	✓	Room for improvement	
(c) use te reo and tikanga Māori to support Māori learners' connection to identity and culture.	Casual use in class Bilingual signs for job roles	Need for improvement		

Clause 17 (2). Providers must have practices for supporting learners through their studies, including – (a) enabling learners to prepare and adjust for tertiary study, and	NZ Cert Chemistry course Academic Success programme Learning support agreements for academic support CL and support from other staff – Library Manager	✓		
(b) maintaining appropriate oversight of learner achievement and engagement; and	Attendance procedures and follow-up; comprehensive monitoring and tracking Code team meetings and Programme Management committee	✓		
(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	Pastoral care meetings “Cookie and a chat” Student Council support Cultural liaison one-on-one meetings	✓		
(d) providing learners with advice on pathways for further study and career development, where appropriate.	Study pathways Availability of ESP and AD	✓		
Process 3: Physical and digital spaces and facilities Clause 18. Providers must have practices for– (a) providing healthy and safe learning environments; and	Fire surveys Building WoF	✓		
(b) identifying and, where possible, removing access barriers to provider facilities and services; and	Zoom recordings and classes; Building accessibility	Need a ramp for the garden		

		side of the building		
(c) involving learners in the design of physical and digital environments when making improvements; and	Done when library redeveloped Cheal	✓		
(d) engaging with Māori and involving Māori in the design of physical and digital environments where appropriate.	Māori consultation for development of new programmes; re-development of rongoa Māori healing concepts into Te Ara o te Ao Māori	✓		

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)
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 – (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.	(a) Financial support on occasions – limited Referral (b) Promote some places for casual accommodation (c) In course material; support through Paua Clinic	✓		

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.	N/A Healthy food options provided when catering events	✓		
Process 2: Promoting physical and mental health awareness Clause 21. Providers must have practices for – (a) providing opportunities and experiences for learners that improve their physical and mental health and wellbeing and safety; and	Invited to use physical space for exercise Garden In course material – assessment in PPNM and Mindbody Fostering client-practitioner between cohorts (where consented)	✓		
(b) promoting awareness of practices that support good physical and mental health that are credible and relevant to learners; and	In course material	✓		
(c) supporting learners' connection to their language, identity, and culture; and		Need to plan another culture day as in 2024		✓
(d) providing accurate, timely information and advice to learners about – i. how they can access medical and mental health services through the provider or through community and public services, including culturally responsive services; and ii. how they can report health and safety concerns they have for their peers; and iii. how to respond to an emergency and engage	On request and case-by-case Referrals to external counsellor Use of SSF	Room for improvement		Action: develop a list of Kaupapa Māori services for LMS

with relevant government agencies; and iv. how they can make positive choices that enhance their wellbeing.				
Process 3: Proactive monitoring and responsive wellbeing and safety practices. Clause 22 (1). Providers must have practices for – (a) requesting that domestic learners 18 years and over provide a name and up-to-date contact details of a nominated person; and	Yes – part of enrolment procedure (few students under 18)	✓		
(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	Yes - policy	✓		
(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	Arises only rarely. ESP has contacted next-of-kin	✓		
(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	Yes – pastoral care appointments, “cookie and a chat” casual meetings Follow up on attendance (emails with SSC)	✓		
(e) providing opportunities for learners to raise concerns about themselves or others in confidence; and	Yes	✓		

(f) identifying learners at risk and having clear and appropriate pathways for assisting them to access services when they need it; and	Student progress reports Concerns raised by staff and fellow students Code team meetings	✓		
(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	General procedures Not yet arisen	✓		
ii. protecting learners and staff who experience harm from other learners and/or staff, including sexual assault; and	Not yet arisen	✓		
(h) making arrangements with disabled learners or those affected by health and wellbeing difficulties to accommodate learning needs, including for study off-campus; and	Additional needs register Learning Support Agreement Special arrangements for assessments e.g. deferral Disabled carpark & toilet; ramp	✓		
(i) responding to disruptive and threatening behaviour in a way that is sensitive to a learner's situation; and	Not yet arisen	N/A		
(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.	LoA procedures Learning Support Agreement if possible (temporary disruption)	✓		
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.	Yes - in enrolment process	✓		

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.	Yes – as above	✓		
Clause 22 (4). Providers must maintain a record of reported risks, including any concerns raised in relation to the effective administration of this code.	Events recorded on Student Management system Captured Code team, PMC and/or management meetings minutes	✓		

