

#### MAST Academy Self Review Summary

This summary considers how effectively MAST as an organisation is achieving the overarching outcomes, our current strengths, and any opportunities for development in the implementation of the Code of Practice. The Code of Practice sets up the key areas required for MAST (TEO's) to support their learners in terms of pastoral care. Sections of the Code that apply to us as domestic student/learner provider are outcomes 1-4.

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

Outcome 1: A learner wellbeing and safety system

Outcome 2: Learner voice

Outcome 3: Safe, inclusive, supportive, and accessible physical and digital learning environments 9

Outcome 4: Learners are safe and well

This summary is divided into parts based on the 4 applicable outcomes.

Outcome 1 Learner wellbeing and safety system

MAST is in the early stages of establishing the startegic goals and plans related to the CODE.

#### Strategy

MAST Academy strategy is to focus on wellbeing of the learner from a wholistic point of view to support a Te Whare Tapa Wha approach and aim to develop supportive learning environments for all learners. The four pillars of the Strategy are:

Review outcome: Learner voice groups established and consulted with learners on what they may require to support themselves. Ongoing scheduled learner voice groups and surveys of graduates and apprentices will feed into plans for 2025. 2023 survey results and training advisor feedback supports that MAST is giving good support.

#### **Mental Health**

Take a proactive approach to building resilience for learners

Build an inclusive environment free of bullying, harassment and discrimination that supports good mental wellbeing.

Review outcome: Learner voice groups established and consulted with learners on what they may require to support themselves. This will become more applicable as we move to a campus situation in 2025. Apprentices are employed and the primary duty of care rests with the employer for any workplace issues. Training advisers support learners/apprentices where appropriate. MAST Training advisors have had training on how to recognise issues in the workplace and how to ask the appropriate questions. Along with this MAST has a psychologist who can guide the training advisors on referral process and other appropriate support mechanisms for the work based learners. Continually review to ensure campus policies are appropriate for delivery in 2025.



#### **Family Health**

Provide a supportive environment to allow learners to achieve family goals though education, training and employment

Being a fair and equitable training organisation for all diverse learners, across all ethnicities while building our Te Tiriti and Te ao Māori policy and support.

Review outcome: Include in surveys to apprentices, graduates and employers questions about 'MAST's' supportive environment. This is done annually in November each year or as the learner graduates from their apprenticeships. Learner handbook has been reviewed but will again be updated for campus based learners in 2025.

**Goal 1 2023** To review and continue to gain data and responses to surveys of current learners and recently graduated learners to build on the base line of general wellbeing and to enable development of a learner information strategies to support wellbeing.

Review outcome: Apprentice survey for 2023 included wellbeing question. 90% of respondents are somewhat satisfied or extremely satisfied with the pastoral care, wellbeing, physical safety, support and information provided by MAST Training Advisers. The 2023 Māori and Pasifika survey showed that 96% of respondents feel extremely well supported or well supported. In 2024 revise questions in all surveys as necessary to ensure all voices are heard in this area. Review learner handbook for campus based learners as well to begin in 2025.

**Goal 2 2024** To review employer handbook. To complete in 2024 an employer/business owner survey to understand their needs in regard to learning and wellbeing and how MAST can consult and collaborate with employers to enable them to provide a safe and supportive learning environment for our learners/apprentices.

Review outcome: Develop business survey and analyse results to inform decision making. 25 business or senior managers have been interviewed in a detailed one on one interview. This is to be followed in Nov/Dec 2024 with an online survey of all employers. This data with the graduate and learner surveys will give MAST a full picture to inform our strategy for 2025.



**Goal 3 2024** To review and develop the policies and procedures for campus based delivery including more culturally appropriate approaches to wellbeing and complaints procedures if required.

Review outcome: Policy review under way and Cultural review underway for wellbeing. Complete for end 2024. Our Kaumatua Director is to inform policy around culturally appropriate approaches to build resilience and encourage increased uptake to enable a more informed approach.

Goal 4 2024 To build on the resilience of Training Advisors to support workbased learners.

Review outcome: Psychologist is available on request to Training Advisors for confidential advice to support workbased learners. Consideration is being given to Mental Health First aid for all learner facing staff in 2024/5. Wellbeing package for learners to be developed for campus separate to the learner handbook.

**Goal 5 2024** To understand our diverse communities to enable better access and support that is culturally appropriate.

Review outcome: All MAST staff have attended a Te Tiriti o Waitangi workshop to build awareness and capability. Learner voice group schedule for 2025 to be developed with a chair person form the group to drive this group. There maybe opportunity for campus based learner groups to give their view and for a campus based support network to be implemented.

**Goal 6 2024** To develop a student incident/emergency response plan and team contextualised to industry based training and campus based training as appropriate.

*Review outcome: Incident response plan developed and in use during 2025 in particular for campus.* 

2025

**Goal 1** To set up learner feedback and support group to identify learner wellbeing needs for pre trade campus based learners

Review outcome: Learner Voice group to be set up for campus based learners.

**Goal 2** Review results of late 2024 surveys to graduates and apprentices and the employer business survey to inform decision making for 2025.

Review outcome: This document shows areas for improvement in summary and throughout the document. Main areas are to update learner information, set up learner voice group and review surveys.

**Goal 3** To include in communications to learners and employers' articles or information on supporting wellbeing.

*Review outcome: Communication plan being developed and in 2024 Navigator has been lifting in reader numbers. More emphasis in stories on wellbeing for 2025.* 

**Goal 4** Continue to build capability to enable the 4 pillars of the strategy to be implemented in full and for data to be measured.

Review outcome: To be discussed at full MAST staff meetings and data discussed as available. Any implementation issues can be raised and will be addressed as appropriate.



#### **Complaints received in 2024** – no complaints were received.

2 workbased learners have been supported through well being issues and connected with appropriate support services.

#### **Complaints and Critical Incident Data**

There have been no critical incidents at the time of writing from students or involving students while directly in the care of MAST i.e. at Block courses, workshops, or study groups.



### Appendix 1 2024 Self Review and Gap analysis

## Outcome 1: A learner wellbeing and safety system

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 – (a) give effect to the outcomes sought and processes required by this code; and	Board minutes, Learner Voice group notes, surveys and feedback form learners and training advisors	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
(b) contribute to an education system that honours Te Tiriti o Waitangi and supports Māori–Crown relations.	MAST Directors are preparing a regional approach for MAST to implement especially as we move to a campus in 2025 where this will be further socialised and implemented.		• We have the required practices in place but we are developing more specific and culturally aware policy and procedures. Currently	



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Clause 7 (2).	Reviewed annually in November for implementation in the	•	We have the required practices	due to low number of Māori and Pacific peoples we have limited evidence on which to make judgements about the effectiveness of those practices.
<ul> <li>Providers must –</li> <li>(a) regularly review their learner wellbeing and safety strategic goals and strategic plans as described in subclause (1); and</li> </ul>	following year. This includes learner voice, employer surveys, graduate and learner surveys	•	in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	
(b) make amendments to their learner wellbeing and safety strategic goals and strategic plans within a reasonable timeframe following the review.	Amendments and changes are made in an applicable time frame usually within a month – 6 months of the change being identified. Urgent changes are made immediately	•	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	



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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	Learner Voice Group, learner and graduate surveys	• We have the required practices in place	More learner voice groups once we move to campus.	
<ul> <li>(b) reviewing their learner wellbeing and safety strategic goals and strategic plans described in subclause (2).</li> </ul>	Learner Voice Group, learner and graduate surveys	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
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.	Annually usually in Nov each year. Typically there are also regular reviews as and when any issues arise. We take a continuous improvement approach.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		



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Clause 8 (2). Providers must review their learner wellbeing and safety practices using – (a) input from diverse learners and other stakeholders; and	Yes particularly from learner voice group and surveys. Training Advisors who go into the workplace also feedback on issues or where there is more support required.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>
(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.	Surveys provide the most quantitative data- learner and graduate. We keep a record of any complaints in a secure location with access by only senior manager.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>
<b>Clause 8 (3).</b> 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.	The review takes this into account	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>



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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	Published under the Self Review Summary on MAST Website.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
(b) revisions to strategic goals and strategic plans for supporting the wellbeing and safety of learners described in clause 7(2); and	In the Self Review Summary published on the MAST Website annually	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		



	In the Self Review Summary	Academy of New Zealan
(c) self-review reports on the quality of their learner wellbeing and safety practices described in clause 8.	published on the MAST Website annually	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>
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.	Apprentice surveys also collect some of this information. As we have until now only delivered workbased learning learner concerns are primarily gathered by the training Advisor as they visit a minimum of 6 times a year and are available outside of that to take calls etc. Training Advisors are trained to recognise or identify where there maybe a mental health issue. The training Advisors have access to a Psychologist to support them to point the learner in the right direction. We also have on our website a learner support services	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>



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	document that learners are				
	directed to seek support.				
	We have all completed the Te	•	We have the		
	Tiriti Course through Ako	-	required practices		
Clause 10 (2).	Aotearoa.		in place		
Providers must provide staff with	Training Advisors are trained to	•	We have sufficient		
ongoing training and resources tailored	recognise or identify where	•	evidence on which		
to their roles in the organisation, in	there maybe a mental health		to make judgements		
relation to –	issue. The training Advisors		about the		
	Ū.		effectiveness of our		
(a) Te Tiriti o Waitangi; and	have access to a Psychologist to				
	support them to point the		practices		
	learner in the right direction.				
	We do understand this and	•	We have the		
	have a continuous improvement		required practices		
	approach to reviewing and		in place		
(b) the provider's obligations under	updating our knowledge of	•	We have sufficient		
this code; and	obligations under the Code.		evidence on which		
	Given we are primarily work		to make judgements		
	based our obligations are also		about the		
	tied to the employer		effectiveness of our		
	obligations. In 2025 these will		practices		



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		change for MAST as we move to a campus for some courses. This forms part of the review to				
		take place in Nov 2024.				
(c)	understanding the welfare issues of diverse learner groups and appropriate cultural competencies; and	We understand the needs of our learners as they identify some of their needs through the learner and graduate surveys. Most state they do not need extra support to what MAST does as standard through the Training Advisor visits.	•	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices		
(d)	identifying and timely reporting of incidents of racism, discrimination, and bullying; and	Yes – none reported	•	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices		
(e)	physical and sexual violence prevention and response, including how to support a culture of disclosure and reporting; and	None reported and is more applicable to a campus based approach so will be noted for the Nov review	•	We have the required practices in place We have sufficient evidence on which		



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			to make judgements about the effectiveness of our practices
(f)	privacy and safe handling of personal information; and	All personal information is secured on our server. There are appropriate security measures in place form our IT provider. Personal information collected on learners is not distributed to anyone apart from Government agencies or as required. Permission is sort for images we may use of learners for social media and in marketing prior to shooting or use. Staff have been trained on the Privacy Act requirements and we have a privacy officer.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>
(g)	referral pathways (including to local service providers) and escalation procedures; and	We have adequate referral pathways through our Learner Support Services document, and via our close contact with learners through Training Advisors. Contact for MAST staff to a psychologist is also available.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>



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(h) identifying and timely reporting of incidents and concerning behaviours; and	None have been reported but we have policy on this.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>
<ul> <li>(i) wellbeing and safety awareness and promotion topics including         <ul> <li>i. safe health and mental health literacy and support; and</li> <li>ii. suicide and self-harm awareness; and</li> <li>iii. promoting drug and alcohol awareness; and</li> <li>iv. promoting healthy lifestyles for learners.</li> </ul> </li> </ul>	The learner handbook, the Learner support services document and our training advisors and our psychologist are available to support learners. Idenitfied issues have been reported and adequately dealt with in accordance with policy.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>



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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	This is not so applicable as work based learners will come under the procedures of their employer. However as part of the 2024 review it is identified as we go into a campus situation in 2025 more specific emergency procedures are required. Standard emergency procedures are implemented if and when a student is on a block course		• We have the required practices in place but we are developing more specific as we move to a campus based context in 2025. Nov 2024 the policy will be reviewed and appropriate procedures put in place.	Suenty of New Zealand
(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	Training Advisors and employers are first point of contact.	In place for workbased learners whose primarily fall under the duty of care for employers while at work.	We have the required practices in place but we are developing more specific practices for a campus we move to a campus based context in 2025. Nov 2024 the policy will be reviewed and appropriate procedures put in place.	
(c) co-ordinating decision-making across the provider when responding to emergencies; and	Notifier- Manager- CEO decision making lies with senior team if learners are on MAST site.	We have the required practices in place but we are developing more specific as we move to a campus based context in 2025. Nov 2024 the policy will be reviewed		



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		and appropriate procedures put in place.	
can pro	s applicable when we have a impus. Policy is that there is a cocess for information sharing an emergency.	We have the required practices in place but we are developing more specific as we move to a campus based context in 2025. Nov 2024 the policy will be reviewed and appropriate procedures put in place.	
(e) ensuring all relevant staff are aware of the indicators of on	raining advisors who have ontact with the learners on a egular basis have been trained in this. And how to get them o self refer.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
critical incident and emergencies procedures manual which guides	his is for the 2025 campus. /orkbased learners will ssentially follow employer eveloped process and rocedures while at work.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements</li> </ul>	



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immediate and ongoing actions	MAST keeps a record of any	about the		
required including –	critical incidents as they occur.	effectiveness of our		
i. engaging with relevant		practices		
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				
(g) recording critical incidents and	Reported to Board at first	We have the		
emergencies and reporting these	Board meeting of the year for	required practices		
back annually (at an aggregate	previous year.	in place		
level and, as far as practicable,		We have sufficient		
disaggregated by diverse learner		evidence on which		
groups) to provider		to make judgements		
management, learners, other		about the		
stakeholders, and the code		effectiveness of our		
administrator.		practices		



## **Outcome 2: Learner voice**

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	Learner voice group, surveys, completion feedback and discussions with Training advisor.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
(b) working with diverse learners and their communities to develop, review, and improve learner wellbeing and safety strategic goals, strategic plans and practices; and	The Board is developing a regional approach to this. Will be tabled at Nov board meeting for implementation in 2025.		• We have the required practices in place but we are developing more specific and culturally aware policy and procedures. Currently due to low number of Māori and Pacific peoples we have limited evidence on which to make	



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(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	Learner voice group, surveys, completion feedback and discussions with Training advisor.	•	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	judgements about the effectiveness of those practices. We will also need to develop campus based policy and implement in 2025.
(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	They all get study guides and assessments. All workplaces have a workplace trainer who has completed a mentoring course through MAST applicable to workplace trainers and apprenticeships. This will be mandatory in 2025 for all employers who have apprentices.	•	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices	



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(e) providing timely and accessible information to learners to increase transparency of providers' decision-making processes.	Assessments have detailed information on assessment process for learner. The training advisor also discusses with learner. Surveys show high level of support for MAST approach and resources.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>
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	Survey feedback, training advisor records, learner records of the visit by training advisor is in their portal for them to access.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>
(b) inform learners on how the complaint will be handled and how it is progressing; and	QMS and learner handbook has process. Complaint form on website and in learner handbook.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>



(c) handle complaints in a timely		We have the	Academy of New Zea
<ul> <li>(c) handle complaints in a timely and efficient way, including having practices that – <ul> <li>i. are appropriate to the level of complexity or sensitivity of the complaint; and</li> <li>ii. consider the issues from a cultural perspective; and</li> <li>iii. include the provision of culturally responsive approaches that consider traditional processes for raising and resolving issues (for example, restorative justice); and</li> <li>iv. comply with the principles of natural justice; and</li> </ul></li></ul>	QMS and learner handbook has policy and process. Complaint form on website for learners.	• vve nave the required practices in place	<ul> <li>we are developing more specific and culturally aware policy and procedures. Currently due to low number of Māori and Pacific peoples we have limited evidence on which to make judgements about the effectiveness of those practices.</li> </ul>



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learners (and those supporting learners	n learner handbook given to all earners and is also available on he website.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
accessing this the	Alternative method is to talk to cheir training advisor who can cake the appropriate action.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	



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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 this is policy.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
iv. providing the opportunity for groups of learners to make joint complaints; and	Yes as appropriate given we are workbased and apprenticeship based. Will be more applicable once we deliver in a campus.	• We have the required practices in place	<ul> <li>we are developing more specific and culturally aware policy and procedures that enable group complaints in a more transparent way.</li> </ul>
(e) record complaints; and	Yes when received	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	



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<ul> <li>(f) report annually to provider management, learners, other stakeholders, and the code administrator (including on provider websites where available) on – <ol> <li>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</li> <li>learner experience with the complaints process and the outcome of their complaint; and</li> </ol></li></ul>	In self review summary on website by year.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
(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	In learner handbook on website and given to all learners.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	



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<ul> <li>(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 –         <ol> <li>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</li> </ol> </li> </ul>	In learner handbook which is given to all learners and is part of QMS.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		ademy of New Zealand
•				
Scheme, the Disputes				
Tribunal, the Human				
				I



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Rights Commission or the Ombudsman; and       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. <ul> <li>Process 3: Compliance with the Dispute Resolution Scheme</li> <li>Clause 14.</li> <li>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.</li> <li>To be reviewed as part of review for 2024 and will socialise with Training advisors early in 2025.</li> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> <li>Guard Dispute</li> <li>Me have sufficient evidence on which to make judgements about the effectiveness of our practices</li> <li>Me have sufficient evidence on which</li> <li>Me have sufficient evid</li></ul>	<ul> <li>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.</li> <li><b>55 3: Compliance with the ce Resolution Scheme</b></li> <li><b>14.</b></li> <li>ers must ensure they are with the relevant Dispute tion Scheme rules for domestic ernational learners and ensure unce with those rules in a</li> </ul>	the Ombudsman; and how to make a complaint to the code administrator if a earner believes that the provider is failing to meet the outcomes or requirements of this code.          Impliance with the lution Scheme       To be reviewed as part of review for 2024 and will socialise with Training advisors early in 2025.         Impliance solution scheme       To be reviewed as part of review for 2024 and will socialise with Training advisors early in 2025.	<ul> <li>required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our</li> </ul>		



## Outcome 3: Safe, inclusive, supportive, and accessible physical and digital learning environments

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 – (a) reducing harm to learners resulting from discrimination, racism (including systemic racism), bullying, harassment and abuse; and	In QMS and in Learner and employer handbook. Employer handbook to be updated with revised material for 2025.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
<ul> <li>(b) working with learners and staff to recognise and respond effectively to discrimination racism (including systemic racism), bullying, harassment and abuse; and</li> </ul>	Training advisors where made aware of will be able to put in place appropriate support structures and can raise the issue with training manager.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		



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<ul> <li>(c) promoting an inclusive culture across the learning environment; and</li> </ul>	This is integrated into everything we do and is therefore implicit in the way we work with apprentices.		
(d) upholding the cultural needs and aspirations of all groups throughout the learning environment; and	Survey indications have been that MAST is doing what it can around this issue. As MAST has very low number so learners who are Māori or Pacifica we are at present developing more policy and procedures in this area as we move to a campus situation.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
<ul> <li>(e) providing all learners with information –         <ol> <li>that supports understanding, acceptance, and connection with all learners, and collective responsibility for an inclusive learning environment; an</li> <li>about the cultural, spiritual, and community supports available to them; and</li> </ol> </li> </ul>	Learner handbook is primary source of information.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	



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(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.	Until 2025 MAST learners are apprentices and will have connections in the workplace. Where MAST has implemented a study group in the workplace this will provide further support and connection to enable the learners to ask assessment questions and connect further with Training advisor or the study group facilitator to provide support where required. Surveys indicate that current learners do not require extra support but we are aware of the need to be vigilant and as we move to campus more policy and procedures will be implemented through the campus.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	lemy or New Zealand
<ul> <li>Process 2: Supporting learner participation and engagement</li> <li>Clause 17 (1).</li> <li>Providers must provide learners with opportunities to –</li> <li>(a) actively participate and share their views safely in their learning environment; and</li> </ul>	Training Advisor visits are one on one so this is an appropriate and safe environment for learner sot share.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	



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(b) connect, build relationships and develop social, spiritual and cultural networks; and	Workplaces are key to this for apprenticeships.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
(c) use te reo and tikanga Māori to support Māori learners' connection to identity and culture.	This is available to them if they prefer and if required, but currently we have low numbers of Māori and have never been asked for this and surveys support that currently this is not required on mass.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		



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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	<ul> <li>We have training in how to: <ul> <li>Access micro soft outlook</li> <li>Their Rudder2 learning portal</li> <li>FAQ available for online learner portal issues and a help line is available. (Rudder2)</li> <li>Training advisors have one on one session with learners prior to enrolling in apprenticeship to ensure they are able to do the required study</li> <li>We have school to work transition advisors who match school leaver and Gateway learners with appropriate employers for work experience with he possibility of an apprenticeship. They work closely with schools and learners and employers to support learners.</li> </ul> </li> </ul>	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	



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(b) maintaining appropriate oversight of learner achievement and engagement; and	Feedback on assessment is with a month of receipt of the assessment usually within a week. Only 5-6 assessments are given at one time to apprentices so as not to overwhelm them.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
(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	Training advisor visits are one on one and support the learner to build confidence and trust.	<ul> <li>practices</li> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
(d) providing learners with advice on pathways for further study and career development, where appropriate.	The MAST careers 3D web tool is on the website and available	We have the required practices in place		



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	to all learners. Training Advisors can also provide information on graduation. MAST has a number of new leadership programmes for 2025.	•	We have sufficient evidence on which to make judgements about the effectiveness of our practices		
<ul> <li>Process 3: Physical and digital spaces and facilities</li> <li>Clause 18.</li> <li>Providers must have practices for- <ul> <li>(a) providing healthy and safe learning environments; and</li> </ul> </li> </ul>	RUDDER2 is the learning platform being rolled out Oct 2024-Feb 2025. There is applicable training and communication to ensure learners can navigate their way around this. The system has appropriate security.	•	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices		
(b) identifying and, where possible, removing access barriers to provider facilities and services; and	RUDDER2 has additional learner support tools and learning disability access available.	•	We have the required practices in place We have sufficient evidence on which to make judgements about the effectiveness of our practices		



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(c) involving learners in the design of physical and digital environments when making improvements; and	Workbased learners primarily. Learner voice group was consulted and raised no issues.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
(d) engaging with Māori and involving Māori in the design of physical and digital environments where appropriate.	No applicable at this point as workbased learners. Will have Kaumatua input into campus.		• we are developing more specific and culturally aware policy and procedures. Currently due to low number of Māori and Pacific peoples we have limited evidence on which to make judgements about the effectiveness of those practices.



## Outcome 4: Learners are safe and well

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	compliance with this clause The learner Support Services document has some of these services available. As our apprentices are working there is a primary duty of care is the employer and MAST is available to support both employer and learners as appropriate. We do not have accommodation available for any domestic learner.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
and understand their rights and obligations as a tenant in New				



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Zealand; and (c) maintain a healthy lifestyle.		
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.	Not applicable at this stage.	Not Applicable
<ul> <li>Process 2: Promoting physical and mental health awareness</li> <li>Clause 21.</li> <li>Providers must have practices for – <ul> <li>(a) providing opportunities and experiences for learners that improve their physical and mental health and wellbeing and safety; and</li> </ul> </li> </ul>	Workbased learners have opportunities within their communities across the country. This is also in the learner handbook under several of the wellbeing frameworks outlined there.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>
(b) promoting awareness of practices that support good physical and mental health that are credible and relevant to learners; and	This is also in the learner handbook under several of the wellbeing frameworks outlined there.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>



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han	adbook under several of the Ilbeing frameworks outlined	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
i. how they can access medical and mental health services through the provider	s is in the Learner support vices document and at ployer level as appropriate. s is also in the learner adbook under several of the llbeing frameworks outlined	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	



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emergency and engage with relevant government agencies; and iv. how they can make positive choices that enhance their wellbeing.				
<ul> <li>Process 3: Proactive monitoring and responsive wellbeing and safety practices.</li> <li>Clause 22 (1).</li> <li>Providers must have practices for – <ul> <li>(a) requesting that domestic learners 18 years and over provide a name and up-to-date contact details of a nominated person; and</li> </ul> </li> </ul>	This is part of the enrolment process	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
<ul> <li>(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</li> </ul>	Employers of apprentices will have this information. We have contact information for enrolment purposes.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		



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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	Part of QMS policy which is being reviewed for 2025	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
(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	Workbased learner would primarily be able to do this with the employer. However if required and trusted the learner can contact their training advisor.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
(e) providing opportunities for learners to raise concerns about themselves or others in confidence; and	Training advisors and or employers are the first point of contact.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	



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(f) identifying learners at risk and having clear and appropriate pathways for assisting them to access services when they need it; and	
(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	
ii. protecting learners and staff who experience harm from other learners and/or staff, including sexual assault; and	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the</li> </ul>



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			effectiveness of our practices		
(h)	making arrangements with disabled learners or those affected by health and wellbeing difficulties to accommodate learning needs, including for study off-campus; and	Apprenticeship based and most courses are practical so we support learners as we can but some practical tasks and jobs may not be appropriate for all disabilities.		We have limited evidence on which to make judgements about the effectiveness of those practices	
(i)	responding to disruptive and threatening behaviour in a way that is sensitive to a learner's situation; and	Managers and training advisors and employers	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		
(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.	QMS has policy on this	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>		



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<b>Clause 22 (2).</b> Providers must have up-to-date contact details and next of kin for domestic tertiary learners under 18 and international tertiary learners.	Done at enrolment.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
<b>Clause 22 (3).</b> 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.	Policy is appropriate.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	
<b>Clause 22 (4).</b> Providers must maintain a record of reported risks, including any concerns raised in relation to the effective administration of this code.	No reported risks have been reported. Updated policy once we move to a campus setting will need to be developed for 2025.	<ul> <li>We have the required practices in place</li> <li>We have sufficient evidence on which to make judgements about the effectiveness of our practices</li> </ul>	