

Ako Mātātupu Teach First NZ

Quality Management System (QMS)

| Version | 4 | Review Period | 3 years |
|---------------|-------------------|------------------|----------------|
| Approved by | Board of Trustees | Last Review Date | September 2019 |
| Approval Date | May 2019 | Next Review Date | May 2022 |



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1. Policy review and development

| Version | 1 | Review Period | |
|------------------|--|------------------|--|
| Approved by | Board of Trustees | Last Review Date | |
| Approval Date | Next Review Date | | |
| Relevant | - Private Training Establishment Registration Rules 2018 | | |
| legislation etc. | - Education Act (1989), Part 18 | | |
| Purpose | The purpose of this policy is to set out how policies and procedures for quality | | |
| | management across the organisation are developed, documented, approved, | | |
| | implemented and reviewed to ensure they remain current. | | |

- 1.1. The Board of Trustees are accountable for the approval, review and development of all policies covered within this Quality Management System (QMS)
- 1.2. The Board of Trustees will delegate responsibility for approval, review and development of all academic policies to the Academic Board
- 1.3. The relevant senior leaders of the organisation will be responsible for the development and documentation of new or amended policies, subject to approval by the Board of Trustees or Academic Board, as relevant
- 1.4. Where, for any reason, the Academic Board is unable to fulfil its responsibilities in relation to policy approval, review of development, including where the Board has not been appointed or does not have a quorum, the delegation shall fall back to the Board of Trustees
- 1.5. All elements of this QMS are subject to a minimum three-year review, or shorter if required or recommended because of changes such as new or revised legislation or changes in circumstance. Such a review will include assessing the standards set by each policy or procedure and how well existing systems help to achieve this standard, including full compliance with relevant legislation and regulations



2. Organisational Self-Assessment

| Version | 2 | Review Period | |
|------------------|--|------------------------------------|--|
| Approved by | Board of Trustees | Board of Trustees Last Review Date | |
| Approval Date | | | |
| Relevant | - Quality Assurance (including External Evaluation and Review (EER)) Rules 2016 | | |
| legislation etc. | - Private Training Establishment Registration Rules 2018, s5.1.9 (a) and (b) | | |
| Purpose | To set out how the organisation will develop and show capability in using self- | | |
| | assessment information to understand our educational performance and bring about | | |
| | improvements, with the aim of providing quality educational outcomes and value for | | |
| | students and others. | | |

External Evaluation and Review

- 2.1. The organisation's goal is to achieve and maintain an External Evaluation and Review (EER) statement of confidence of 'Highly Confident' from NZQA
- 2.2. Where, as a result of an EER undertaken by NZQA, the organisation receives a statement of confidence below 'Confident', the PTE will immediately prepare an improvement plan and implement that plan

Self-assessment

- 2.3. The organisation will undertake ongoing self-assessment to meet the requirements of its continued registration as a Private Training Establishment (PTE) by NZQA, to help meet and exceed the requirements of the EER, and ensure that the organisation is providing quality education and value for money for all our stakeholders
- 2.4. Organisational self-assessment will be implemented using the key features of effective self-assessment set out by NZQA in the Appendix to Quality Assurance Rules 2016, including answering the key evaluative questions set out in s.3 of Appendix 1 of those rules
- 2.5. The CEO is accountable for ensuring that organisational self-assessment is completed, and that the outcomes are reported to the Board of Trustees, and to the Academic Board as they relate to academic matters delegated to that body. The Quality Assurance manager will have responsibility for managing and coordinating the process, with the Head of School and other relevant staff as necessary. The Head of School is responsibility for implementing any actions identified as a result of the self-assessment process
- 2.6. Self-assessment will include the use of relevant quantitative and qualitative data regarding learner enrolments, retention and completion, the minimum requirements for which are set out in s.5 of Appendix 1 of the Quality Assurance Rules 2016. This will, at the minimum, include being able to answer the key evaluative questions consistently, and generating comprehensive evidence to answer the key evaluative questions, provide the basis for making valid comparisons, and reaching consistent conclusions about performance and quality
- 2.7. The organisation will maintain ongoing processes which are comprehensive, authentic, transparent, robust and focussed to gain evidence of its own effectiveness in providing quality education, and for the purposes of self-assessment. The Head of School, with the Quality Assurance Manager, is responsible for ensuring that appropriate processes are in place for this, and communicating this expectation to relevant staff
- 2.8. The processes established and maintained will be focussed on the following, as outlined in s.2.3 of the Quality Assurance Rules 2016 Appendix 1: needs assessment; supporting students learning and



- achieving outcomes; student achievement; outcomes for students; reaching evidence-based conclusions to inform decision-making; actual improvements that have occurred
- 2.9. As part of the ongoing processes required for self-assessment, the relevant programme delivery team will meet quarterly to assess against the requirements for self-assessment outlined above
- 2.10. The outcomes of self-assessment will be reported to the Academic Board for consideration, and the evidence made available to the Board of Trustees with any major issues and required actions flagged for decision or ratification
- 2.11. The outcomes of self-assessment may also be made available to others via the Annual Report and to government agencies
- 2.12. Where identified, the above programme evaluation process can be initiated with a specific focus, as identified, for instance, in the strategic plan or by an external moderator. In such a case, the same process will be followed as for ongoing self-assessment



3. Finance

| Version | 1 | Review Period | | |
|------------------|---|---------------|--|--|
| Approved by | Board of Trustees Last Review Date | | | |
| Approval Date | Next Review Date | | | |
| Relevant | Charities Services | | | |
| legislation etc. | • IRD | | | |
| | Companies Office | | | |
| Purpose | To ensure the organisation has robust governance and operational systems that | | | |
| | support effective management of its financial affairs, in order to maintain the | | | |
| | organisation's reputation, sustainability and to offer value for money for its funders, | | | |
| | students and other stakeholders. | | | |

Principles underpinning this policy

- 3.1. The Board of Trustees are accountable for providing strategic direction and oversight of financial management of the organisation
- 3.2. The CEO will manage the financial affairs of the organisation in accordance with the policy direction established by the Board, and will have delegated authority for operational matters
- 3.3. Expenditure decisions will be made in line with the organisation's purpose and values
- 3.4. The organisation's finances will be managed in order to maximise the impact upon our primary beneficiaries, to minimise risk, to maximise sustainability, and in a way that offers maximum value to funders, students and other stakeholders

Delegated Financial Authority

- 3.5. Only staff members with the relevant delegated financial authority may approve:
- Operating or capital expenditure
- Asset disposals
- Revenue generating activity that will result in raising an invoice for payment by a third party
- Agreement to accept donations, gifts or sponsorship
 - 3.6. Any approval must be obtained from a staff member with the relevant delegated financial authority <u>before</u> approving any of the above
 - 3.7. Employees with delegated authority must:
- Ensure all authorised expenditure is within the relevant approved budget limits
- Utilise the relevant financial control systems as necessary
 - 3.8. The following table outlines financial delegations for staff:

| Person(s) | Delegations |
|-----------|---|
| CEO | Operational and Capital Expenditure approved within the annual budget or with |
| | other Board approval, and; |
| | Account transactions up to \$25,000 per day |
| | Any single payment approved within the annual budget up to \$100,000 |
| | Any single payment not previously approved as part of the annual budget |
| | up to \$10,000 |
| | Credit Card limit of \$5,000 |
| | Full value of payments for payroll and to IRD for PAYE and GST |
| | Transfer of funds between Cheque and Savings account |
| | Transfer of funds to investments |
| | Approval of donations, gifts and sponsorship |



| | • | Employment and other contracts |
|--|---|---|
| Senior Leadership • Operational and Capital Expenditure approved within the annual budget or | | Operational and Capital Expenditure approved within the annual budget or with |
| Team/ Authorised | | other Board approval that sits within the SLT member/ Budget holder's budget |
| Budget holders | | responsibility |
| | • | Specific one-off transactions authorised by the CEO |
| Other staff | • | Operational and Capital Expenditure approved within the annual budget and |
| | | explicitly approved by the relevant budget holder |

3.9. All delegations are subject to the relevant financial controls outlined in this policy

Approval of expenditure

- 3.10. The organisation's financial year is January 1 to December 31
- 3.11. An Annual Budget for the following financial year will be prepared by the CEO and approved by the Board of Trustees in the final quarter of each financial year
- 3.12. The Annual Accounts will be prepared and approved by the Board of Trustees at the end of each financial year
- 3.13. The Annual Accounts will be audited and approved by the Board of Trustees by the end of the second quarter of the subsequent financial year
- 3.14. Board approval for the audited accounts will be recorded either as a Board meeting minute, or via email, prior to submission to Charity Services

Finance Sub-committee of the Board of Trustees

- 3.15. A Finance Sub-Committee of the Board of Trustees will meet prior to each Board meeting to discuss financial matters and to approve the monthly management accounts
- 3.16. The Finance Subcommittee will make its recommendations to the full Board for approval
- 3.17. The Sub-committee will consist of a minimum of three members, to include the Board Chair, with the CEO attending as a guest
- 3.18. The Terms of Reference of the Finance Sub-Committee are:
- To oversee that all payments are within delegated authorities
- To monitor expenditure against approved budget
- To provide a regular forum for discussion of strategic financial management issues
- To ensure that financial reporting processes for audit purposes are completed
- To approve the Management Accounts to be recommended to the full Board
- To provide strategic advice and guidance to the CEO regarding financial management and planning
- 3.19. There is a quorum of two members of the Finance Sub-Committee. Where there is no quorum, the papers will be referred to a full meeting of the Board of Trustees for approval

Internal Financial Controls

- 3.20. All expenditure of the organisation will reflect the budget priorities and strategic direction set by the Board of Trustees on an annual basis
- 3.21. At the end of each quarter the CEO will present to the Board a reforecast budget which reflects a revised projection of expenditure for the remainder of the financial year. The Board will review and approve the reforecast budget which will become the relevant approved budget for expenditure for that financial year from that point forwards
- 3.22. The CEO has delegated authority to authorise expenditure approved as part of the annual or quarterly reforecast budget
- 3.23. Expenditure will be monitored through the submission by the CEO of Management Accounts at each meeting of the Board of Trustees



- 3.24. Management Accounts submitted by the CEO to the Board will include for each month and year to date (YTD):
 - Profit & Loss (Income and Expenditure) Statement
 - Variance Report (Actual expenditure vs Budget)
 - Balance Sheet (Statement of Financial Position)
- 3.25. The CEO will provide additional information related to management accounts, including transaction records, as required by the Board
- 3.26. The Chair and the Chair of the Finance Committee will have access to the organisation's accounting software, payroll system and internet banking
- 3.27. Authorisations and delegations will be reviewed and renewed annually when the budget for the next financial year is approved

Expenditure from cheque or savings account

- 3.28. All payments from the organisation's accounts will be approved by two approved authorisers
- 3.29. The daily approval limit for payments from the organisation's account is set out in the schedule of financial delegations
- 3.30. The CEO is authorised to commit expenditure as noted in the financial delegations schedule, within the approved budget and daily spending limit
- 3.31. All payments over the authorisation limit must be approved by the Board of Trustees and authorised by minute where not previously authorised as part of the annual budget before the transaction is authorised
- 3.32. All expenditure will be reconciled at the end of each month

Cheque Book

- 3.33. The organisation will not make payments via cheque unless there is no alternative method of payment
- 3.34. Cheque book signatories are the authorised signatories to the organisation's cheque account
- 3.35. All expenditure by cheque is subject to the same delegations and financial management processes as all other payment methods

Direct Debits

- 3.36. Direct Debits that are included and approved as part of the annual or reforecast budget can be authorised by the CEO
- 3.37. Direct Debits not included and approved as part of the annual or reforecast budget must be approved by the Board of Trustees
- 3.38. The CEO will review all ongoing direct debits annually as part of the annual budgeting process

Credit Cards

- 3.39. All credit cards connected to the organisation's account(s) will be used for business purposes only
- 3.40. All additional credit cards added to the organisations account(s) will require approval by the Board of Trustees
- 3.41. All original receipts for use of the Credit Card will be submitted for reconciliation and filed



3.42. The monthly Credit Card statement will be signed by the CEO and by the Chair of the Finance sub-committee to approve payment of incurred expenditure

Savings and investments

- 3.43. The balance of any online savings account will be managed to maximise the interest payable
- 3.44. The CEO will have delegated authority to transfer funds between the organisation's cheque and savings accounts
- 3.45. The CEO will have delegated authority to open and manage investments (e.g. fixed-term bonds) of less than 6 months. The CEO is responsible for managing such investments for maximum return and reporting to the CEO on this basis
- 3.46. Investments can only be made with institutions approved by the Board
- 3.47. Any investments greater than \$100,000 will be spread across more than one institution
- 3.48. Any fixed-term investments for longer than 6 months or greater than \$100,000 will require the approval of the Board
- 3.49. The CEO will manage investments in such a way as to reasonably minimise the risk and maximise the return

Payroll

- 3.50. Staff salaries will be paid fortnightly in arrears
- 3.51. Each payrun will be authorised by two approved authorisers
- 3.52. 'i-Payroll' is authorised to act as an IRD intermediary and all tax-related payments are made to IRD directly by i-Payroll
- 3.53. Where necessary (e.g. on termination of an employee's contract) a one-off payrun can be made, authorised by the CEO if within the daily spending limit. Otherwise approval is required from the Board of Trustees

Capital Expenditure

- 3.54. Where capital expenditure has been approved by Trustees as part of the annual budget, the CEO has delegated authority to authorise the expenditure, within the relevant delegated authorities
- 3.55. Where capital expenditure has not previously been approved as part of the annual budget, Board approval is required

Sale of Assets

- 3.56. The organisation may from time to time dispose of assets. The principles of impartiality and integrity will be upheld in any such process
- 3.57. All assets will be valued prior to disposal. The method of arriving at the value will be documented
- 3.58. Assets will not be sold at a discounted rate to staff if a greater value could be realised by an alternative method of disposal.

Reclaiming Expenses

- 3.59. Where staff, Board members or others incur expenditure on behalf of the organisation this will be repaid on the submission by the individual of an acceptable GST receipt
- 3.60. Reimbursement will be made only if the expenditure was undertaken with the relevant delegated authority
- 3.61. All reclaimed expenses will be approved by an individual with the relevant delegated authority (likely the relevant budget holder/ line manager of the individual submitting the claim) before payment is made



- 3.62. For expenses over NZ\$50 the original receipt must be submitted and filed. All other expenditure can be reclaimed with the submission of a receipt electronically
- 3.63. Prior approval must be given by the CEO for expenses that are not previously approved as part of the annual budget and which exceed NZ\$100
- 3.64. Individuals may accrue benefits as part of loyalty schemes (such as Airpoints) on expenses incurred on behalf of the organisation, but the organisation will not cover the costs of membership of any such loyalty scheme, and all expenditure decisions must be made in-line with the provision, including the principles, of this policy

Sensitive expenditure

- 3.65. As a charitable trust, all expenditure is expected to be made in ways that are for the benefit of the organisation's charitable aims, minimising costs where possible
- 3.66. It is acceptable sometimes for employees to incur expenditure for the purposes of recognising others' non-monetary contribution, for cultural reasons, for entertainment, catering a meeting, or for other similar reasons
- 3.67. All expenditure incurred, whether in budget or discretionary, on items such as koha (gifts), lunches, coffee, travel etc., should be minimised and made in ways that uphold the organisation's values, and honours the organisation's funders
- 3.68. All such expenditure must be incurred in-line with the relevant sections of this policy regarding approval and delegations etc.

Private use of Teach First NZ Assets

3.69. No Teach First NZ assets may be used for private purposes or private benefit

Contracts

- 3.70. Contracts include any agreements, Memorandums of Understanding (MOU), Employment Agreements or other documents which involve financial transactions or commitments, or non-financial commitments which are likely to have a significant financial value (including staff time, use of the organisation's equipment, use of premises etc.)
- 3.71. Responsibility for negotiation, renegotiation and management of contracts is delegated to the CEO
- 3.72. The CEO can delegate authority for contract negotiation, renegotiation and management to relevant staff
- 3.73. Where a contract or amendments to a contract as a result of renegotiation represents expenditure or transfer of assets greater than the value of the delegated expenditure authority, approval for commitment is required from the Board of Trustees

Employment Agreements

- 3.74. Employment Agreements will be entered into in accordance with the organisation's relevant employment policy(s) and legislation
- 3.75. The CEO has delegated authority to sign employment agreements

Subcontractors and Other Suppliers

- 3.76. The CEO has delegated authority to sign agreements with subcontractors or other suppliers
- 3.77. The CEO can delegate authority to sign agreements with subcontractors and other suppliers worth a total value no greater than \$5,000
- 3.78. The signing of agreements with subcontractors and suppliers is subject to the requirements of all other financial delegations and controls
- 3.79. Agreements to sub-contract for the delivery of educational services as part of a programme approved by NZQA is subject to limitations set by that Authority



3.80. All contracts will be centrally recorded and reviewed annually by the CEO and Board of Trustees

Audit

- 3.81. The organisation will have annual accounts audited before submission to Charities Services
- 3.82. A chartered accountant will be appointed as auditor by the Board of Trustees on an annual basis
- 3.83. The Auditors will report annually to the Board of Trustees at a relevant meeting of the full Board

Receipt of revenue

- 3.84. Revenue received electronically into a Trust bank account will be reconciled with an invoice, and a receipt provided in a timely way
- 3.85. The invoice and receipt will clearly note what the donation is for, who it was from, and the terms under which the revenue is received, including its terms of use and, if relevant, its return and reporting requirements
- 3.86. Revenue received in cash will be held by the CEO or delegated staff member and paid in at a relevant bank branch at the earliest possible opportunity, after which the revenue will be dealt with using the same process as for revenue received electronically

Procurement/ Acquisition policy

- 3.87. Staff members making procurement decisions must seek to obtain value for money, taking into account the total cost of the good or service procured over the life of the relevant good or service, and other considerations such as (but not limited to) price, fit-for-purpose, quality, reliability, costs of maintenance and ownership etc.
- 3.88. All decisions to procure goods or services must be based on a properly identified requirement, budget and approval process, including being in-line with the relevant financial delegations
- 3.89. The table below outlines the minimum quotation and tender requirements for procurement decisions:

| Value of good or service | Minimum Requirements |
|--------------------------|--|
| Up to \$5,000 | Single quote, though it is good practice to gain at least two quotes to show good value |
| \$5,000 to \$25,000 | Two written quotes |
| \$25,000 to \$100,000 | At least two written quotes and a brief business case, including details of quotes and the reasoning supporting the selection of the supplier. |
| Over \$100,000 | Formal tender process |

- 3.90. Where it is not possible or inappropriate to meet the relevant minimum requirements, an explanation and the purchasing process must have approval of the Board of Trustees, or the CEO where they are not the procurement manager and they have the relevant delegated authority
- 3.91. Procurement decisions, including the purchasing process, will be recorded for audit purposes



4. Personnel Recruitment and Management

| Version | 1 | Review Period | |
|------------------|---|-------------------------|--------------|
| Approved by | Board of Trustees | Last Review Date | October 2019 |
| Approval Date | | Next Review Date | |
| Relevant | Employment Relations A | ct (2000) | |
| legislation etc. | Human Rights Act (1993) |) | |
| | State Sector Act (1988) | | |
| | Holidays Act (2003) | | |
| | Employment Protection Act (1987) | | |
| | Health & Safety at Work Act (2015) | | |
| | Private Training Establishment Registration Rules 2016, s.5.1.6 | | |
| | Education Act (1989), s. 233(1)(e) | | |
| Purpose | To ensure the organisation engages sufficient competent staff to meet our | | |
| | responsibilities to students. This includes cultivating a positive, inclusive and | | |
| | productive organisational culture and ethos. | | |

- 4.1. The organisation will maintain processes to ensure adequate staff with the necessary knowledge, skills and experience, including (as relevant) in relation to: relevant education and training experience; academic subjects; educational delivery; assessment and moderation; student support; educational administration (including financial expertise); education management and governance.
- 4.2. This policy is relevant for all individuals who have a relationship of 'employee' to the organisation. This includes full-time, part-time, permanent and fixed-term employees. It also applies to casual employees as appropriate
- 4.3. Our aspiration is that, where applicable, feasible and affordable, this policy also applies to volunteers, interns and others who work with the organisation over a significant period of time and who might benefit from aspects of the system that the organisation operates. This will be at the discretion of the CEO and relevant employee, and subject to resource constraints
- 4.4. This policy should be read in line with the standard and individual organisational employment agreements, relevant employment legislation and other guidance provided by the organisation, government agencies and best practice

Staff Planning & Budgeting

- 4.5. The organisation will identify future staffing needs as part of the annual strategic planning and budgeting process, drawing on, amongst other information, ongoing self-assessment
- 4.6. An organisational chart showing names of current staff (including contractors) and currently approved but vacant roles, will be kept up to date

Principles of employment

- 4.7. At Teach First NZ: Ako Mātātupu we want all of our employees to perform to their best, be committed to our mission and vision, and make the greatest impact possible for our rangatahi in Aotearoa New Zealand. We aim to add value for all employees, and help them to grow and develop professionally
- 4.8. The organisation is committed by law to working in good faith in relation to all employment relationships. This means: not being misleading or deceptive; being responsive and communicative; good communication; and following a fair process in decisions that may cause job loss.



Principles of recruitment and appointment

- 4.9. In relation to recruitment and appointment of staff, the following principles guide our work:
- **Transparency** we are open and fair in our advertising and recruitment for the role, giving all candidates a fair chance
- Fit we seek to employ people who fit with the values and culture of our organisation
- Collaboration we seek input from others throughout the process of recruitment and appointment, in design and decision-making
- **Best Person** we make decisions on the best person for the job, doing our best to reduce the influence of all other factors
- **Professionalism** our process is high quality, timely and friendly, so that all candidates have a professional experience of our organisation
- **Equity** we consider factors that may affect outstanding candidates from being considered or being appointed
- Value for money and sustainability new positions will be identified to minimise the risk to the organisation and individuals that the role is unsustainable for the intended period of employment
 - 4.10. As an organisation we have a commitment to bi-culturalism and cultural responsiveness, and our aspiration is that all employees have an understanding and commitment to working in ways that honour this commitment. We recognise that the organisation has a role to play in helping some new members of staff to develop in this regard, and to acknowledging that candidates should not be excluded from consideration if they show an openness to learning in this regard

Identifying vacancies

- 4.11. All vacancies are identified as part of the annual budget. This budget identifies the expenditure available within the year for the employment of full-time, part-time, fixed-term and permanent employees, as well as any specifically identified casual employees or contractors
- 4.12. The CEO has delegated authority for directing, according to the strategic plan and business needs, the use of this budget, which may differ from the indicative annual staffing plan
- 4.13. Unless specifically approved by the CEO on the basis of a strong and reasonable business case provided by the 'Hiring Manager', all vacancies for full-time, part-time, fixed-term and permanent employees must be advertised on the open market
- 4.14. For the avoidance of doubt 'open-market' will require, at the minimum, that:
- The role is advertised for two full weeks (14 days)
- The role is advertised on the appropriate page of the organisation's website
- The role is advertised on Seek
 - 4.15. The staff recruitment process will be managed by a 'Hiring Manager' who will standardly be but does not have to be, the person who will act as line manager for the role being recruited for
 - 4.16. The staff recruitment process consists of the following for which the hiring manager has accountability, in line with this policy:
- Making the business case and writing the job description, to be approved by the CEO
- Advertising the role (inc. writing a job advert, promoting the role through relevant channels)
- The selection process (inc. long-listing, short-listing, interviewing, reference checks, communicating with all candidates as necessary)
- Appointment (inc. preparation of the relevant contract, negotiation of salary and benefits as necessary, collection of required information from the successful applicant)
- Induction (inc. arranging start date, creating an induction plan, monitoring progress according to the relevant trial or probation period, confirming completion of probation)

Advertising vacancies



- 4.17. Unless otherwise authorised by the CEO, all roles must be publicly advertised as outlined in the relevant section above
- 4.18. The aim of advertising is to ensure that as many people as possible are aware of the role, that we maximise the potential of attracting high quality candidates, and meet the principle of transparency in our employment processes
- 4.19. In line with the organisational commitment to biculturalism, job descriptions should be posted in both English and Te Reo Māori, and in places (online and otherwise) that are likely to be seen by a diverse range of candidates
- 4.20. Recommendations: on occasion, a role may become available for which existing staff or friends of the organisation would like to recommend someone. In such an instance, it is acceptable for employees and others to encourage someone to apply for the role, on the condition that the role is still advertised publicly and all applicants are considered independently and on their own merits

Selection

- 4.21. The process for selection will be decided by the Hiring Manager, drawing on the guidance for staff recruitment provided by the organisation, input from other relevant staff and stakeholders, and approval of the CEO
- 4.22. Selection of candidates should be on the basis of role requirements and assessment criteria agreed before applications are reviewed and shortlisting of candidates takes place
- 4.23. The selection process will include, at a minimum, one in person interview with shortlisted candidates involving two or more members of staff
- 4.24. Additional elements, such as a phone interview, two or more rounds of interviews, tasks etc., may be used in the selection process
- 4.25. At least two professional references from a previous employer or manager will be taken before an offer of employment can be made. Other references may be taken
- 4.26. Negotiation of employment terms, including salary, benefits, start date, considerations of part-time or flexible working etc., is the responsibility of the Hiring Manager, with any change from the advertised job description details requiring approval of the CEO
- 4.27. All employment contracts are to be signed by the CEO

Appointment

- 4.28. The organisation will ensure that all teaching staff appointed are sufficiently experienced and qualified to at least one level above the students being taught, or have demonstrated equivalent experience, for the tuition they are providing, and that their skills and subject knowledge is current and relevant to the needs of the learners and relevant stakeholders. This includes that their relevant qualification is in a discipline which supports delivery of the programme that the staff member teachers as part of, and underpins that programme's theoretical framework (PTERR 2016, s5.1.6 (b)(c))
- 4.29. For programmes offered by the organisation to be delivered at NZQF level 7 or above ('Degree Level'), the majority of teaching staff will be expected and supported to be research active
- 4.30. The organisation will ensure that management and administration staff are able to competently fulfil their roles, such as in having appropriate prior experience and, where necessary and relevant, qualifications and endorsements (PTERR 2016, s5.1.6 (d))



5. Staff Development

| Version | 2 | Review Period | |
|------------------|---|------------------|----------------|
| Approved by | Board of Trustees | Last Review Date | September 2019 |
| Approval Date | | Next Review Date | |
| Relevant | • Education Act 1989 s.233(I)(e) | | |
| legislation etc. | Private Training Establishment Registration Rules 2016, s.5.1.6 (c) | | |
| Purpose | To support all staff to develop their understanding of the work that the organisation | | |
| | does, and to increase their own skills and knowledge to perform to the highest level in | | |
| | their specific role | | |

5.1. This policy should be read in-line with other relevant policies related to employment with the organisation

Induction

- 5.2. All new employees will be provided with support to:
 - understand the purpose of the organisation and their role within it
 - feel committed to the organisation
 - understand the ways in which the organisation operates, including relevant policies, processes and people
 - Be aware of and become equipped to abide by relevant regulatory and legislative requirements

Line Management / Kaiwhakaaki

- 5.3. All employees will be assigned a line manager to whom they will report and who will be responsible for their performance and development. The line manager will be responsible for providing an effective induction plan.
- 5.4. All line managers | Kaiwhakaaki will be provided with support to understand the expectations of this position, and to develop as an effective manager

Growing performance

- 5.5. While employed by the organisation, employees will be supported to:
 - Perform their role to the best of their ability
 - Grow and develop professionally
 - Make the biggest impact possible
 - (For teaching staff) Be sufficiently experienced and qualified to at least one Level above the students they teach, or to have demonstrated equivalent experience, for the tuition they are providing
 - (For teaching staff) Develop and maintain the skills and subject knowledge that is current and relevant to the needs of learners and relevant stakeholders
 - (For management and administration staff) Be able to competently fulfil their roles
- 5.6. To achieve this, the organisation will operate a Professional Development model which is outlined in relevant documents, and allocate sufficient budget to support staff development
- 5.7. As relevant (e.g. where this is required of teaching staff for programmes at NZQF Level 7 and above), the professional development model will support staff in reviewing their research outputs, including setting plans for the following year, and identifying the support they require from the organisation



Working practices

- 5.8. The organisation operates a flexible working model. Principles and guidance for this are outlined in separate documents
- 5.9. The aim of the flexible working model is to support employees to fulfil their role as effectively as possible, aligning their personal and professional lives to support in this aim
- 5.10. The organisation reserves the right to expect any employee to adhere to standard working practices as outlined in our standard employment agreements and in other standard and reasonable ways. Specifically, this relates to situations in which it is considered that an employ is not adhering to the flexible working framework with integrity or in a way that encourages the employee to complete their role to the best of their ability
- 5.11. Failure to adhere to the spirit of the flexible working guidance may be considered misconduct

Performance issues and Misconduct

- 5.12. In situations in which an employee shows evidence of not meeting expectations or having not adhered to the rules of their employment, the organisation is committed to acting in good faith towards the employee, following a fair process, and, where possible, supporting the employee to address the concerns and continue as an employee of the organisation
- 5.13. This policy should be read in line with relevant legislation, and guidance offered, for instance on the Employment New Zealand website here: https://www.employment.govt.nz/, and in the organisation's standard employment agreements
- 5.14. The below outlines the organisation's process for addressing performance issues and misconduct. This includes, but is not limited to:
 - Repeated misconduct
 - Serious misconduct
 - Failure to meet performance expectations
- 5.15. In any case in which a performance issue or misconduct is identified the below process will be followed, led by the line manager with support from the senior leadership team. Where necessary, a third party mediator may be engaged.

Performance Management process

- 5.16. The below outlines the process to be followed for all performance issues and misconduct
- 5.17. In cases of misconduct, an appropriate person, likely the line manager or a member of the senior leadership team, will conduct a fair investigation to establish whether there is evidence of misconduct or not. If that person considers that there is evidence of misconduct, the following process will be followed
- 5.18. Throughout the process, there will be ongoing communication between the organisation and the employee, and details of the performance issue and the performance management steps taken will be recorded
- 5.19. Throughout the above process, the employee will be kept informed and up to date regarding the process, including with details of the performance issue that has been identified, and given an opportunity to respond and input into the process
- 5.20. The outcome of any investigation and performance management process will not be predetermined, and any decision will be based upon the facts of the situation and outcome of the Performance Improvement Plan (PIP) or informal process
- 5.21. All processes and decisions will meet the requirements of relevant legislation, guidance and policies
- 5.22. Standardly, it is anticipated that an employee will receive three formal warnings (at least two of which should be 'written', and all must be recorded) before notice of termination of employment is given. However, it is not a requirement in all cases as long as a fair process has been



followed in good faith, dismissal has been clearly communicated as a potential outcome of the process and the senior leadership team considers there to be reasonable grounds for dismissal

Misconduct

- 5.23. Misconduct is when an employee does something wrong either by: doing something; not doing something; or through their behaviour. This may justify some disciplinary action being taken
- 5.24. Examples of misconduct include, but is not limited to: Using inappropriate language; Internet misuse; Minor instances of failing to follow an employer's reasonable and lawful instruction; Minor breaches of the employment agreement e.g. inappropriate clothing; Lateness; Failure to meet expectations of working practices (See www.employment.govt.nz)
- 5.25. In cases of misconduct it will be communicated to the employee what the identified misconduct is, and the employee given the opportunity to respond and address the issue. This will be recorded by the line manager

Repeated Misconduct

5.26. Where there is a repeat of the same or other misconduct, this will be communicated as above, and where appropriate the performance management process as outlined above will be used.

Serious misconduct

- 5.27. Serious misconduct is where an employee's misconduct has the effect of undermining or destroying the relationship of trust and confidence between the employer and employee
- 5.28. Examples of misconduct includes, but is not limited to: Violent behaviour; Bullying; Harassment; Theft or fraud; Behaviour that endangers the health and safety of the employee or others; Use of illegal drugs at work; Dishonesty (from www.employment.govt.nz)
- 5.29. In cases of serious misconduct it will be communicated to the employee what the identified misconduct is, and the employee given the opportunity to respond. This will be recorded by the line manager
- 5.30. The line manager, with the support of a member of the senior leadership team, will agree the appropriate next step from the following options: formal, verbal warning; formal written warning; immediate dismissal/termination of employment
- 5.31. In cases of serious misconduct the employee can be immediately dismissed without the need to follow the performance management process

Failure to meet expectations

- 5.32. Failing to meet expectations is where an employee does not meet all, some or one part of their role to the expected standard
- 5.33. The line manager has the obligation to agree clear objectives and outcomes against which performance will be measured regularly
- 5.34. Examples of performance issues include, but is not limited to: not meeting objectives/ expectations as agreed with the line manager for the role overall or in any aspect of the role; not addressing situations where expectations or objectives have not been met after feedback from the line manager or other senior colleagues; performing poorly; evidence of not performing according to the organisation's values. This can also include issues of speed, quality, quantity, or how services are delivered
- 5.35. In the first instance, performance issues will be addressed informally by the line manager according to the management framework and as part of the standard management process
- 5.36. A formal approach will be introduced in situations in which an employee has not improved



their performance to the level of expectation/ addressed the issues identified as not meeting expectations, after they have been outlined by their line manager as part of the standard management process. This will be determined by the judgement of the line manager and senior leadership team

- 5.37. Where a formal process is initiated, it will be communicated to the employee the basis upon which such a process has been initiated, and the process explained to them
- 5.38. The process of performance improvement will follow the performance management process outlined above

Termination of employment/ dismissal

- 5.39. All terminations of employment will be made in line with the employee's employment agreement, this and other relevant organisational policies, and government legislation and guidance
- 5.40. Notice to terminate employment/ dismissal of the employee will be made in writing, and will include details regarding the relevant notice period etc.

Supporting staff to be research active

- 5.41. The ambition is for the organisation to be research and evidence-based, informed by and contributing to research and evidence in the sectors of which it is part
- 5.42. To fulfil this the organisation has the aim of all staff having the opportunity to be research active, including the majority of staff who teach on our accredited education programmes
- 5.43. We will encourage this by undertaking the following actions:
 - Employing some staff who have a research background, including staff who are qualified to PhD level, and / or have an active research interest and portfolio (this will be reflected in our annual staffing plan)
 - Maintaining a research register
 - Supporting staff to undertake further academic study as part of their employment
 - Supporting staff to develop research skills, and providing access to resources (e.g. library access, an organisational resource database)
 - Supporting and encouraging staff to undertake research projects as part of their employment (including attending and presenting at conferences)
 - Defining research priorities for the organisation to which staff can contribute
 - Establishing research partnerships which can support the above
- 5.44. An annual summary of research by staff will be collated by the Quality Assurance Manager and submitted to the Academic Board for Review
- 5.45. The Academic Board will undertake a review of the research outputs of staff, and may appoint a Research Sub-Committee for this purpose. Such a review will include assessment of:
 - the quantity and quality of research outputs by staff, including the appropriateness of the balance between pedagogical and discipline-specific research and that this research advances knowledge and/or supports the continued development of the programme and its delivery
 - the extent to which the collective research output of staff is consistent with the development and maintenance of an ongoing, robust research culture
 - the extent to which the research facilities and support of staff involved in research is adequate (including supervision available for staff)
 - the appropriateness of the ways by which the research-teaching links are made in the curriculum, including that the links are clear, adequate and effective
- 5.46. The Academic Board may intermittently convene an expert peer review panel to assess the quality of research outputs



5.47. The findings and any recommendations of a review of research may be used to inform organisational self-assessment and (as relevant) any programme review.



6. Information Management

| Version | 2 | Review Period | |
|------------------|---|------------------|----------------|
| Approved by | Board of Trustees | Last Review Date | September 2019 |
| Approval Date | | Next Review Date | |
| Relevant | Privacy Act (1993) | | |
| legislation etc. | PTE Enrolment and Academic Records Rules 2012 | | |
| | Education Act (1989), s.253 (n),(o),(q) | | |
| Purpose | To ensure the organisation collects, records and transfers information about students | | |
| | in ways that meet our obligations under relevant legislation, and that must be supplied | | |
| | to government agencies. | | |

- 6.1. This policy outlines policies and processes related to information kept on file regarding student enrolments and study, and access to such information
- 6.2. The CEO has accountability, reporting to the Board of Trustees, for meeting the requirements of this policy. The Quality Assurance Manager has responsibility for ensuring sufficient processes and procedures are in place to meet the requirements of this policy, supported by the Head of School and Head Marketing and Recruitment, as relevant, and by other staff as required
- 6.3. The policy relates to both documents and database information
- 6.4. All information about student enrolments and study with the organisation will be held in a confidential electronic student file, with reasonable processes for data protection in place
- 6.5. Where hardcopy documents are required to be kept, equivalent processes for data protection will be put in place
- 6.6. All such information is treated confidentially, and is accessible only to authorised staff who require access for specific and relevant needs associated with enrolment and academic progress
- 6.7. The organisation is required to report certain information to government agencies to fulfil legislative requirements. This will be communicated to students, including identifying which information will be shared, during enrolment, and relevant permission requested regarding the disclosure of any other information
- 6.8. A student may request in writing to have any of their information held on their student file amended or corrected. Where the organisation cannot support such an amendment, the written request will be included with any disclosed information (Privacy Act 1993)
- 6.9. Only information that is required for selection, enrolment, ongoing academic progress or that is required to be held on file permanently or beyond the end of the course, will be kept on the student file
- 6.10. A student may request a copy of all the information held on their student file, with the exception of any information that is expressly exempt from this provision (such as confidential referee reports)
- 6.11. All enrolment and academic records will be stored in a manner that ensures they are easily recovered and printed from, and readily available on the organisation's electronic data storage system, including in backup for access in the event of closure, natural disaster or emergency
- 6.12. Where possible, all paper-based formal academic records will be digitised and recorded in the electronic data management system
- 6.13. Any formal academic records that are kept in hard copy will be held in suitable containers and locations to ensure they are preserved and protected from damage (inc. through fire, flooding, chemicals, insects, rodents, dust etc.)



- 6.14. All data will be managed in-line with the following data management principles, which includes that data:
- Is owned by the organisation, not any individual or organisational unit
- Must be managed by a defined manager who has overall responsibility for the accuracy, integrity, and security of those data
- Be simple to enter, be clearly defined and accurately document their subject, and be in a useful, usable form for both input and output
- Should only be collected for a specific purpose, which is documented
- Must be readily available to those with a legitimate business need
- Should be captured, validated, and processed in as automated a way as is possible
- Should be entered only once
- Processes that update a given data element must be standard across the information system
- Must be recorded as accurately and completely as possible, by the most informed source, as close as possible to their point of creation, and in an electronic form at the earliest opportunity
- Should be recorded and managed over time in an auditable and traceable manner
- Collected at as minimal a cost as is possible
- Must be protected from unauthorised access and modification
- Must not be duplicated unless duplication is absolutely essential and has the approval of the relevant
 manager. In such cases, one source must be clearly identified as the master; there must be a robust
 process to keep the copies in step; and copies must not be modified (i.e., ensuring that the data in the
 source system is the same as that in other databases)
- Structures must be under strict change control, so that the various business and system implications of any change can be properly managed
- Should be defined consistently across the organisation
- Be accurately presented when used in any form

Enrolment Records

- 6.15. Accurate enrolment records will be kept up to date for each student (PTEEaARR 2012 (s4.1)). This includes:
 - Full name and address of the student
 - Contact details for the student
 - The student's national student number (as applicable)
 - Nationality and whether a domestic or international student
 - The education or training in which the student is enrolled
 - The start and finish dates of the education or training
 - Details of the student meeting the entry requirements of the education or training including, where applicable, scores for English language entry requirements
 - Invoices and receipts for fees paid to the PTE and the dates of payment, with course fees, commissions, accommodation fees, living expenses, and other fees separately identified
- 6.16. These records will be kept for a minimum of two years from the completion of the education or training in which the student was enrolled
- 6.17. Police check reports will be held on student file only for so long as is allowed by the New Zealand police vetting service

Academic Records

- 6.18. The following academic records will be kept accurately and up to date for all students enrolled with the organisation:
 - Records of individual student assessment and examination results, including the name of



- the student, date of achievement, the relevant grade. This information will be kept as a permanent record
- Any cross credits, credit transfers, and recognition of prior learning arrangements for individual students, and the evidential basis for them. This information will be kept as a permanent record
- Records of student attendance. This information will be kept at least for the duration of the student's enrolment
- Records of the achievement of awards or qualifications by the students. This information will be kept as a permanent record
- 6.19. Student assessment materials, or full copies of them, will be held on file for at least 12 months from the date that a student completes their programme
- 6.20. As necessary, student's assessment results will be reported to their New Zealand Record of Achievement (NZRA)

Student Management System

- 6.21. The organisation will use and maintain an electronic student data management system for recording data, including student enrolment and academic records
- 6.22. This system will be compatible with the TEC's Single Data Return
- 6.23. Should the organisation move to a new electronic data management system then all student academic records will be transferred to the new system
- 6.24. This system will be used in-line with the relevant privacy and data policies
- 6.25. Assessment results will be recorded in the Student Management System according to the assessment and moderation policy



7. Student Admissions & Enrolment

[Recommend adding a flow chart to show enrolment – e.g. Bethlehem example]

| Version | 2 | Review Period | |
|------------------|--|------------------|----------------|
| Approved by | Academic Board | Last Review Date | September 2019 |
| Approval Date | | Next Review Date | |
| Relevant | PTE Enrolment and Academic Records Rules 2012 | | |
| legislation etc. | Private Training Establishment Registration Rules 2018, Rule 5.1.4 | | |
| | • Education Act (1989), s234B | | |
| | Human Rights Act (1993) | | |
| Purpose | To set out the management of all student admissions, including all possible types of | | |
| | enrolment | | |

Information for prospective students

- 7.1. All prospective students will have access to, or be provided with on request, the following information prior to application or enrolment about any course, programme or training scheme they are considering, or are in the process of, enrolling in, so that they are able to make an informed choice:
 - relevant entry and selection criteria
 - the organisation's EER category and confidence statement
 - any conditions NZQA has placed on the organisation's registration as a Private Training
 Establishment (PTE), of any compliance notice that has been issued by NZQA to the organisation
 that has not been complied with, and any notice of intention to cancel the organisation's
 registration as a PTE that has been issued by NZQA to the organisation
 - any conditions placed on the organisation for any accreditation or training scheme or consent to
 assess by NZQA; and any notice of intention issued by NZQA to withdraw the accreditation or
 training scheme or consent to assess; and any compliance notice issued by NZQA to the
 organisation in respect of the accreditation or training scheme or consent to assess
 - the organisation's processes for receiving and responding to student complaints, and of NZQA's complaint processes for students regarding PTEs
 - student discipline and appeals processes and procedures
 - regulations applying to programmes in which the students are enrolled
- 7.2. For each Programme or Training Scheme that is provided by the organisation, prospective students will have access to, or be provided with, information about:
 - the organisation (mission, values etc.);
 - programme overview and elements (e.g. intended outcomes, course outlines, assessments etc.);
 - the total fees for each programme or training scheme, including fees for class or lecture
 materials, books, special clothing, safety equipment, tools, and any other items that are or may
 be provided to students enrolled for that programme or training scheme, including any students'
 association membership fees, or any of the above that will be required by the organisation to be
 brought or provided by the student
 - The relevant withdrawal and refund policy

Overview of General Admissions and Enrolment Process

7.3. The following outlines the general process for admission and enrolment in a programme, training



- scheme or course with the organisation
- 7.4. The Board of Trustees is accountable for approving the maximum number of places that will be available for each programme or training scheme in each academic year
- 7.5. For the purposes of this policy, the following terms are used:
 - **'Entry criteria'** refers to the conditions required for entry into a programme, training scheme or course. These criteria are deemed necessary to ensure students have a reasonable chance of successfully completing the programme
 - 'Admission' refers to the process of assessing and approving an applicant student for participation in a programme, training scheme or course
 - **'Selection'** refers to the process of assessing applicants against criteria on which they are selected for entry into a programme where there are more applicants who meet the entry criteria than places available
 - 'Enrolment' refers to the process of allocating to an eligible student a place in a
 programme, training scheme or course for which they have been assessed to meet the
 entry, admission and/ or selection criteria and for which they have been offered a place

General Admission

- 7.6. To gain admission to any programme, in addition to the specific entry criteria, an applicant is expected to demonstrate a strong likelihood of successfully achieving the standard required to complete the programme or training scheme and gain the relevant award. This includes assessing the student against admission criteria covering: potential ability to achieve academically; potential ability to achieve professionally; character qualities, such as support for the organisations purpose and aims; communication skills (inc. oral and written); IT capability; suitability for the relevant vocation or profession
- 7.7. The purposes of setting entry and/ or selection criteria is to ensure that all applicants are treated fairly and have a high probability of success
- 7.8. All admission procedures operate within the framework of the Human Rights Act 1993 which prohibits discrimination on the grounds of sex, marital status, religious belief, ethical belief, colour, race, ethnic or national origin, disability, age, political opinion, employment status, family status and sexual orientation. S.57-60 of the Human Rights Act 1993 contains specific exceptions to this basic principle for educational institutions.
- 7.9. Specific admission and selection criteria and processes, including academic requirements, are outlined in the relevant programme regulations and approved by the Academic Board
- 7.10. All admissions are approved by a Selection Panel and reported to the Academic Board for ratification. The selection panel is made up of staff and/ or other relevant stakeholders involved in the relevant programme
- 7.11. The organisation may restrict admission if: student demand exceeds the available resources (inc. staff, facilities or equipment etc.); an applicant owes any debt to the organisation; if any of the grounds laid out in s.224 of the Education Act (1989) apply; the organisation has insufficient funding
- 7.12. To be admitted and subsequently enrolled applicants must be verified as eligible to study, with acceptable evidence of meeting the stated entry and/ or selection criteria, including verification of their identity and whether they are a domestic or international student
- 7.13. All documentary evidence, including academic records, must be either an original or certified copy

Selection

7.14. Where there are a greater number of applicants who meet the requirements of admission than there are available places on the relevant programme or training scheme, selection will be



according to the selection criteria set out in the relevant programme regulations

7.15. The decision of the selection panel will be final in all decisions for admission to a programme

Special Admission

- 7.16. Applicants who do not meet all of the general admission requirements but who show evidence of significant likelihood to be successful in a programme or training scheme may, within the parameters set out in the relevant programme regulations, be granted special admission.
- 7.17. Special admission is at the discretion of the Programme Leader on the basis of evidence of substantial work experience or education in the relevant field. The Programme Leader will present such proposed cases of admission to the Head of School for approval, who will report it to the Academic Board
- 7.18. All cases of special admission will be Approved by the Academic Board
- 7.19. Students granted special admission may be required to meet specific conditions for their continued enrolment. This will be communicated in writing to the student at the time of granting the admission. Conditions may include: provisional admission; requirement to complete pre- or corequisites; requirement to maintain a specified level of achievement etc.)

Provisional Admission

7.20. A student granted provisional admission will have their studentship reviewed at the end of their first year of study. To continue to be enrolled the student will be required to show academic and professional progress at at least a passing grade

Other types of admission

7.21. At the time of establishment, the organisation does not make provision for the following types of admission: non-assessed students; audit; restricted enrolment for a course; ad eundem admission; international student admissions

Confirmation of confirmed or denied admission

- 7.22. Following the admissions process, applicants will be informed in writing whether their application for entry into a programme, training scheme or course has been accepted or declined
- 7.23. Where a student has been accepted for admission, further details outlining the process for enrolment and the type of admission will be provided to them, and they will be required to acknowledge and accept the offer of enrolment before the enrolment process begins

Enrolment

- 7.24. The enrolment process is considered to have begun when a student accepts in writing their offer for enrolment. After this point the student will be asked for all outstanding information required to complete enrolment
- 7.25. Once all required enrolment information has been received by the organisation, the student's enrolment will be confirmed and recorded
- 7.26. Once enrolment is completed, the organisation will issue an invoice for tuition fees either to the student or the relevant organisation. The policy and processes related to tuition fees is outlined in Student Fees and student fee protection policy
- 7.27. Subsequent changes to enrolment, including date changes, withdrawals, and refunds will be recorded and signed by both parties

Multiple enrolments



- 7.28. The organisation does not encourage students to be enrolled with more than one tertiary institution at the same time
- 7.29. The organisation reserves the right to refuse or cancel enrolment for any student who is enrolled for full-time study in another institution

Deferred Enrolment

- 7.30. Deferred enrolment is where an applicant, having been accepted onto a programme, subsequently decides to delay the start of their studies before the programme starts
- 7.31. The applicant is required to apply in writing for deferred enrolment to the Programme Leader who will recommend the deferral for approval by the Head of School
- 7.32. If granted a deferral, the applicant is only eligible for enrolment after the period of deferral if they continue to be eligible for admission, including any changes to relevant entry or selection criteria that apply at the later time

Recognition of Credit Transfer and Prior Learning

7.33. Students who are admitted to the programme have the right to apply for credit recognition

Academic records

7.34. Details regarding enrolment and academic records, in accordance with the PTE Enrolment and Academic Records Rules 2012, including information on how it will record assessment results and, where applicable, report these to student's New Zealand Record of Achievement, are covered in the Information Management policy.



8. Monitoring Academic Quality

| Version | 1 | Review Period | | |
|------------------|--|------------------|--|--|
| Approved by | Academic Board | Last Review Date | | |
| Approval Date | | Next Review Date | | |
| Relevant | Quality Assurance (External Evaluation and Review (EER)) Rules 2016 | | | |
| legislation etc. | Private Training Establishment Rules (2018), s.5.1.8. | | | |
| | Public Records Act (2005) | | | |
| | Privacy Act (1993) | | | |
| Purpose | To ensure the organisation operates a coherent system to meet assessment and | | | |
| | moderation requirements in order to maintain academic quality and ensure the | | | |
| | outcomes of qualifications are valid and consistent, including consistent with | | | |
| | qualifications offered by other providers. | | | |

- 8.1. Assessment outcomes, tasks and grading criteria will be outlined and approved as part of the development and approval process for each course and programme. This will be shared with students in the overview for each course
- 8.2. The internal and external moderation process is managed by the Quality Assurance Manager, with outcomes approved by the Academic Board
- 8.3. The purpose of the internal and external moderation process is to ensure the standards and consistency of all assessments
- 8.4. In all cases, moderation will be carried out by an informed, objective professional appointed as moderator with the aim of supporting all assessment to be of the highest quality and as consistent as possible
- 8.5. A schedule for internal and external moderation for all relevant programmes will be published annually
- 8.6. The outcome from internal and external moderation will be included in the relevant annual programme report shared with NZQA, the Programme Monitor, Academic Board, and other bodies as relevant

Assessment

- 8.7. This policy provides a framework and set of policies to ensure that assessment activities are valid, fair, reliable and consistently applied
- 8.8. The policy relates to all assessment undertaken within the organisation, unless otherwise stated
- 8.9. The Academic Board has responsibility for developing, approving and reviewing policy related to assessment
- 8.10. Departures from this policy must be approved by the Academic Board
- 8.11. The relevant Programme Leader and teaching staff are responsible for ensuring that all assessment meets the requirements of this policy
- 8.12. The following principles guide the organisation's approach to assessment. Assessment should:
 - enhance learning and measure progress
 - be based on the concept of 'constructive alignment'
 - provide opportunities for timely and constructive feedback
 - be valid, reliable, fair, transparent, sufficient, authentic and academically rigorous
 - consider and take into account staff and student workload and achievable timeframes



- allow for appeals, through which students have a right to support, advocacy advice and representation
- be criterion, not norm, based, using a standard competency or achievement based criteria, approved by the Academic Board
- As necessary, students with documented impairments will have access to appropriate, additional
 assessment arrangements and support, ensuring this doesn't invalidate or compromise the
 stated learning outcomes and adhering to the requirements of any external bodies which
 administer or regulate assessments
- 8.13. In addition to the information provided to students prior to enrolment, and in the course guide (outlined in the relevant policy) students will be provided with the following assessment information at the start of the relevant course:
 - Programme regulations, including: overall requirements of completion, including transition plans;
 the grade scale(s) to be used; formal attendance requirements, and the process and
 consequences of not meeting these requirements; requirements for progression within the
 programme (e.g. course prerequisites etc.); maximum allowed time for completion of the
 programme; details of assessment appeals, resits/ resubmissions, extension, second results, and
 aegrotat provisions, consequences of not completing or failing practicum elements of the course
 - Assessment/ Assignment due dates
 - Whether assessments are formative or summative
 - Timeframe for the return of marked grades
 - Marking procedures and methods for calculating final grades, including forced fail grades and grades carried forward
 - Requirements for students to keep electronically submitted assignments
 - Any other assessment details specific to the relevant course
- 8.14. Any significant changes to what has been communicated to students will be highlighted and explained clearly
- 8.15. Students enrolled in the same course, even if they are completing different qualifications, will be covered by the same assessment procedures unless approved by the Academic Board

Assessment language

- 8.16. Students can submit assessments in either Te Reo Māori or English
- 8.17. The same policies, principles and guidelines apply regardless of which language a student chooses to submit in. This includes guidance on the timeframe for marking and feedback

Attendance

- 8.18. The organisation recognises that attendance is likely to be correlated with greater success in the qualification, and this will be communicated to students as appropriate
- 8.19. However, attendance is not standardly considered an assessed course requirement, except in specifically communicated situations (such as practicum requirements, or specific events)
- 8.20. The organisation reserves the right to require attendance as a condition of enrolment or progress in any programme
- 8.21. Situations in which compulsory attendance is required as an element of assessment will be communicated to students with a reasonable amount of time for them to ensure they can attend
- 8.22. Attendance at compulsory attendance events will be monitored, including attendance at required external elements of the programme (e.g. practicum)
- 8.23. Alternative arrangements for making up attendance will be shared with all students, including for situations of compulsory attendance
- 8.24. Failure to meet the attendance requirements outlined for a programme/ course will be



considered as misconduct for the purposes of the student disciplinary process

Marking and returning assessed work

- 8.25. For all assessments, a marking scheme and guide will be used by staff to ensure the reliability, transparency and validity of the assessment results. These marking guides may be shared with students
- 8.26. The Programme Leader is responsibility for identifying and appointing assessors, with the approval of the Head of School. This includes ensuring these assessors understand the relevant policy which regulates assessment, and are able to confidently, fairly and consistently apply the marking scheme
- 8.27. It is expected that all assessors will take part in marking workshops, including understanding and undertaking moderation
- 8.28. The timeframe for the return of assessed work will be communicated to students prior to the assessment
- 8.29. All assessment results will be entered into the Student Management System following the completion of assessment and internal moderation
- 8.30. Assessment work (assignments etc.) which are not returned to students will be kept on record for a period as determined by the relevant policy relating to academic records and, as necessary, the Public Records Act (2005)
- 8.31. Privacy of assessment results are safeguarded by the Privacy Act (1993) and outlined in the relevant policy
- 8.32. If, as a result of moderation or other issue, marks need to be adjusted for a group of students, the relevant marking scheme will be amended and relevant sections of the assessment remarked. Students will be informed of their revised grades and the reasons for the revision

Privacy

- 8.33. As outlined in the Privacy Act (1993), assessment results (including assessment and final grades) will not be published, announced or displayed in a way that is reasonably 'readable' by people other than the student, and which includes the student's name or other identifier
- 8.34. A student's assessment results will not be given to another person without the written permission of that student
- 8.35. Students' assignments, test or examination results may be used, in an anonymised fashion unless specifically required, for the purpose of: internal or external moderation; Self-assessment and EER; Programme Review; Aegrotat and other academic decisions; Resolutions of academic appeals and complaints; Statistical analysis (e.g. trends, completion rates, success rates of specified groups); Other academic reasons as agreed by the Academic Board
- 8.36. The Academic Board will have authority to make any exemptions to the above, in-line with relevant legislation

Conflicts of interest

- 8.37. Staff involved in assessment will be required to report any actual or potential conflict of interest related to a student they are asked to assess
- 8.38. The Programme Leader and Head of School will be responsible for ensuring appropriate safeguards are in place to resolve conflicts of interest related to assessment. This might include:
- Asking another member of staff or other person, suitably qualified, to assess the student's work, either instead of or with the conflicted staff member
- The assessed work is 'blind moderated' by another member of staff or other person along with the assessments of two other students with approximately the same grade



Alternative Assessment Arrangements

- 8.39. The Programme Leader can provide alternative assessment arrangements in cases where a student(s) are unable to complete an assessment on/ by the scheduled date for reasons they consider to be acceptable. This will be approved by the Head of School, and reported to the Academic Board
- 8.40. Students can only apply for an **aegrotat pass** if the programme regulations allow for it and alternative assessment arrangements cannot be made
- 8.41. Where a student is allowed to sit an exam before or after the scheduled date, the Programme Leader must take all reasonable steps to ensure the arrangement is fair, including: scheduling the alternative date as close as possible to the original date; taking steps to limit the possibility of information about the assessment being shared with other students; requiring the student to sign a statement acknowledging the alternative arrangements
- 8.42. Extensions to assignment hand-in dates can be awarded where the Programme Leader is satisfied that there are good reasons why the student is unable to meet the original deadline. The reason for the extension will be recorded along with the amended submission date, agreed with the student
- 8.43. Extensions are initiated by the student, and should be agreed prior to the original submission date
- 8.44. Details of extensions will be defined in the Programme Regulations, but all extension dates must fall before the course end date, and it is recommended that extensions are awarded for a maximum of 6 weeks after the original submission date
- 8.45. Any extension that is after the course completion date must be agreed with the Programme Leader and the Head of School, and reported to the Academic Board
- 8.46. No result will appear on the student's academic record until all assessments (including extensions and resits) are completed, marked and (as appropriate) moderated

Resits, Resubmissions, Reassessment and conceded pass

- 8.47. Students who have submitted and reasonably attempted an assessment task and who have failed will be allowed one resubmission of the assessment, unless the Programme Regulations state otherwise
- 8.48. Requests for resubmission must be made by the student within 5 working days of the marked work being returned to the student, unless the Programme Regulations state otherwise
- 8.49. The maximum grade available for any resubmission of an assessment task shall be the minimum passing grade, unless the Programme Regulations state otherwise
- 8.50. Any reassessment will be developed to reflect the learning outcomes of the course and the relevant weightings
- 8.51. A **conceded pass** is interpreted as where a marginal fail (to be defined in the relevant Programme Regulations) in one course is deemed, in the judgement of the Programme Leader and Head of School and reported to the Academic Board, to be compensated for by good overall performance in the relevant programme
- 8.52. To be eligible for a conceded pass, a student must have either:
- Fulfilled the minimum course requirements to date but narrowly failed to achieve the standard required in the relevant assessment(s), OR
- Completed most but not all of the required work at an acceptable level, and be deemed by the Programme Leader and Head of School to have worked in good faith and conscientiously and to merit special consideration
 - 8.53. If the conceded pass grade is a requirement of ongoing study the Programme Lead, with the Head of School, will judge whether the conceded pass is or is not an advancing grade
 - 8.54. A student is only eligible to receive one conceded grade per programme in any one academic



year. Any exemptions must be approved by the Academic Board

Marks carried forward

- 8.55. A student may apply to carry forward grades from past assessments to the next iteration of the relevant course, unless the Programme Regulations state otherwise
- 8.56. Such requests will be approved on the judgement of the Programme Leader with the Head of School, and reported to the Academic Board
- 8.57. A student can only carry forward grades for one re-enrolment
- 8.58. The organisation will determine whether a re-enrolment fee applies, and the level of this fee, to be communicated to the student before re-enrolment
- 8.59. The grades for both the original enrolment and re-enrolment may be included on the student's transcript
- 8.60. The subsequent grade will be the combination of marks carried forward and the marks attained in the subsequent enrolment

Additional assessment arrangements for students with a disability and/ or special educational need

- 8.61. Students with specific needs may be eligible for additional learning assistance (e.g. reader/writer, interpreter, extra time in examinations, alternative arrangements for assessment)
- 8.62. Students with a disability or special educational need will be asked to provide supporting documentary evidence that will support the organisation to make appropriate arrangements and meet the principles of assessment outlined above
- 8.63. All applications for additional assessment arrangements will be to the Programme Leader, approved by the Head of School and reported to the Academic Board for ratification.

Reconsideration and appeals

8.64. The process for student appeals against assignment or course grades is outlined in the Student Expectations and Support policy

Internal moderation

8.65. The purpose of internal moderation is to ensure the consistency and standard of assessment, and support continuous improvement in-line with the principles of assessment

Before the start of the course

- 8.66. Before the start of each course, the Academic Quality Committee, appointed by the Academic Board and consisting of staff, Academic Board members, adjunct faculty and others as necessary, will review the course outline to assess the number, weight and appropriateness of the assessment tasks for the agreed learning outcomes for that course.
- 8.67. The Academic Quality Committee may make recommendations to the Programme Leader as to amendments to be made, and included in a revised programme outline. These recommendations are subject to the ratification of the Academic Board

At the end of the course

- 8.68. At least one assessment task for each course will be internally moderated annually. This is likely to be, but does not have to be, the assessment task carrying the greatest weight for that course
- 8.69. For each course, an internal moderator will be appointed who will work with the Programme Leader to undertake internal moderation



- 8.70. The internal moderator should not be an assessor on the course to be moderated, and can be a permanent staff member, adjunct faculty member, member of the Academic Board, or other individual with close knowledge of the organisation and with professional understanding and interest in the course to be moderated
- 8.71. For each course, the Programme Leader will select at least three assessment tasks that have been assessed and graded, and which represent a range of achievement (e.g. high, medium, low)
- 8.72. The internal moderator will assess the selected assignments against the approved assessment criteria as published in the course outline, and will record comments to be shared with the Academic Quality Committee, with recommended actions to be taken for the future
- 8.73. Where there is disagreement between the internal moderator and the Programme Leader which affects the awarded grade or feedback for the student, action will be agreed between the Programme Leader and the internal moderator. Where no agreement can be reached, the issue will be escalated to the Academic Quality Committee
- 8.74. All internal moderation will be collated and reviewed regularly to identify trends and patterns to inform the self-assessment process

External Moderation

- 8.75. External moderation of a course or programme has the purpose of reviewing and assessing: the effectiveness of assessment for the approved learning outcomes; the consistency of the approved learning outcomes, assessments and NZQA levels; the standard of the internal moderation process
- 8.76. The external moderator will be an individual with knowledge, expertise and interest relevant to the programme to be moderated. They will not be a permanent employee of the organisation
- 8.77. For the course to be moderated, the external moderator will have access to the: course outline; assessment tasks; internally moderated assessments; internal moderator feedback
- 8.78. All information that can be used to identify individual students will be removed where possible and practicable for the purposes of external moderation
- 8.79. Following moderation, the external moderator will provide feedback and any recommendations to the Quality Assurance manager
- 8.80. A schedule for external moderation will be published at the start of each academic year. Each course will be externally moderated in the first year of delivery
- 8.81. In accordance with NZQA policy on the continuing approval and accreditation of programmes, the organisation will ensure that an external Monitor is appointed for each programme at the time of initial or continuing approval.
- 8.82. The process for ongoing monitoring and review of accredited programmes is covered in the Developing and reviewing education Programmes and Training schemes policy



9. Management of Risk

| Version | 1 | Review Period | |
|------------------|---|------------------|--|
| Approved by | Board of Trustees | Last Review Date | |
| Approval Date | | Next Review Date | |
| Relevant | Health and Safety at Work Act (2015) | | |
| legislation etc. | | | |
| Purpose | To ensure the organisation has effective policies and procedures in place to identify | | |
| | and manage risk in relation to both educational and business activities. | | |

- 9.1. The identification and effective management of the organisation's risks are a priority. This Risk Management Policy assists the Board and its officers in fulfilling its risk assurance and audit responsibilities.
- 9.2. The organisation manages risks in line with the following principles:
- Risk management is a critical business discipline that reduces uncertainty in the achievement of the Trust's objectives, and strengthens and complements other governance initiatives
- Effective management of risk is essential for us to achieve our goals and objectives and to satisfy key
 external stakeholder expectations and requirements, including legislative and regulatory
 requirements
- Managing risk reduces uncertainty associated with the performance of the Trust and gives us greater freedom to plan and use resources for innovation and measured risk taking
- Managing risk directly contributes to our financial sustainability as a Trust by reducing additional costs and assisting to improve certainty around revenue achievement.
 - 9.3. The organisation's approach to governance is set out in the Board Charter and related documents
 - 9.4. The organisation is committed to proactively and consistently managing risk in order to:
- enhance and protect our value by delivering on our commitments and meeting stakeholders' expectations
- allow the organisation to pursue opportunities in an informed way and aligned with the Board's risk appetite; and
- ensure a safe and secure environment for Teach First NZ: Ako Mātātupu's people (employees and contractors), partners and the students enrolled in our programme(s)
 - 9.5. A robust risk management framework is a valuable strategic tool. It enables the organisation to proactively manage risk, by setting out disciplines that can be embedded in day-to-day business operations and decision-making processes
 - 9.6. To implement risk management effectively, it will be integrated into organisational operations, projects and decision-making processes
 - 9.7. We will maintain and adhere to the risk management framework to ensure:
- the risk management process is evident whenever key decisions are made
- risks are identified and evaluated
- effective responses and control activities are developed for these risks
- there is appropriate monitoring and timely re-evaluation of risks
- that the CEO and the senior leadership team have discretion to select the approach they use to manage risk within the guidance provided in our framework
- regular measurement and reporting on the efficiency and effectiveness of our risk management processes
- encourage balancing the level of control implemented to mitigate identified risks with our commitment to comply with external regulation and governance requirements and our value and growth aspirations
- Meet or exceed IOD best practice standards for risk management processes and related governance



Risk Management Framework

- 9.8. The objective of our risk management framework is to ensure we operate within our agreed risk tolerance and risk limits. We do this by the:
- effective and efficient continuity of operations
- safeguarding our assets
- preserving and enhancing our reputation
- having reliable internal and external reporting
- complying with applicable laws and regulations.
 - 9.9. Creating and maintaining a culture consistent with our risk tolerance is an important element of operational risk management

Roles and Responsibilities

9.10. The roles and responsibilities in relation to this policy are as follows:

• Board of Trustees responsibilities include:

- Reviewing the effectiveness of the implementation of the risk management and internal control system
- o Promoting a culture of proactively managing risks, setting the organisation's risk appetite and reviewing enterprise-wide risks annually
- Providing oversight and monitoring, including through receipt of regular reporting from management on our risks.

• Chief Executive responsibilities include:

- Promoting a culture of proactively managing risks, aligned with this policy and the Board's risk appetite
- Reviewing the organisation's principal risks regularly and regularly reporting to the Board regarding that review and, at other times by exception, reporting on any changes to the rating of enterprise-wide risks
- Monitoring action plans to mitigate risks rated as critical and high on a premitigation basis.

• **CEO and management** responsibilities include:

- Providing leadership of the organisation for risk management by: Identifying, managing, updating and monitoring risks
- Creating a focus on risk awareness and management for their teams
- o Ensuring that key decisions are made taking into account risk factors
- Ensuring that mitigations are in place and are effective.

• All staff responsibilities include:

- Appropriately identifying and managing risks in their area of work.
- 9.11. The organisation uses the following key concepts in understanding and defining the management of risk
- **Risk** is anything that has the ability to impact on our ability to achieve our goals and objectives and is therefore interconnected with our business plan and strategy. Risk is assessed in terms of a combination of the impact and likelihood of an event occurring, and can be categorised according to the areas it could potentially impact. These are:
 - o commercial/financial sustainability
 - o performance of core services (including educational)
 - o stakeholder confidence/reputation
 - preparedness to manage and respond to a crisis situation
 - o people safety and resource availability, and
 - o regulatory/contractual



- Enterprise-wide risks are the key risks facing our organisation and are identified and reviewed by the Board of Trustees twice a year. The Board regularly monitors the executive's management of these enterprise-wise risks
- Risk appetite describes the organisations tolerable levels of risk. It draws together risk metrics and risk management so they can be translated into everyday business decisions, reporting and discussions. Risk appetite is set by the Board of Trustees and reviewed annually. It sets the boundaries which form a dynamic link between strategy, target setting and risk management
- **Risk management** is the process through which risk is managed and includes risk identification and reporting through to risk mitigation and allocating risk ownership.



10. Health and Safety

| Version | 2 | Review Period | |
|------------------|--|------------------|--|
| Approved by | Board of Trustees | Last Review Date | |
| Approval Date | | Next Review Date | |
| Relevant | Health & Safety at Work Act (2015) | | |
| legislation etc. | | | |
| Purpose | To ensure that the organisation is taking all reasonably practical steps to ensure a | | |
| | healthy and safe workplace/learning environment for all employees, students and | | |
| | visitors. | | |

- 10.1. Under the Health and Safety at Work Act (HSWA) introduced in 2015, organisations like Teach First NZ are required to take all 'reasonably practicable' steps to ensure a healthy and safe workplace for all employees and visitors
- 10.2. This policy also relates to the health and safety of students enrolled in any of the organisation's programmes of training schemes
- 10.3. Under the relevant legislation the Board of Trustees and Officers (including the CEO) are personally liable for not taking such reasonably practicable steps. The maximum penalty for a breach of due diligence is 5 year's imprisonment and/ or a fine of up to \$600,000
- 10.4. To achieve better outcomes in relation to health and safety, the legislation states that all workers should be encouraged to contribute to continuous improvement by raising issues, generating ideas, and participating in system development, implementation, monitoring and review.
- 10.5. Teach First NZ's health and safety policy lays out our aims and objectives, responsibilities, how we will monitor and review our policy, processes and responsibilities, and how we will help employees, visitors and students to be aware of their responsibilities and how to promote good health and safety
- 10.6. Guidance and more information about Teach First NZ's obligations under HSWA (2015) and policies and processes is available at http://www.worksafe.govt.nz and on the Teach First NZ Shared Drive.

Our Health and Safety Charter

- 10.7. Our Health and Safety Charter describes the Board's role in ensuring health and safety at Teach First NZ
- 10.8. The Board of Trustee's aim is to ensure that all Teach First NZ employees, volunteers, students and visitors are able to operate in a safe and healthy environment. With this aim in mind, the Board commits to taking reasonable steps to manage health and safety risks to meet our legal obligations by:
- acquiring and updating our knowledge of health and safety matters
- gaining an understanding of the operations carried out by Teach First NZ, and the hazards and risks generally associated with those operations
- ensuring Teach First NZ has, and uses, appropriate resources and processes to eliminate or minimise those risks
- ensuring Teach First NZ has appropriate processes for receiving and considering information about incidents, hazards and risks, and for responding to that information in a timely way
- ensuring there are processes for complying with any duty, and that these are implemented
- verifying that these resources and processes are in place and being used
- 10.9. The Board will monitor delivery against this charter and in-line with the Health and Safety policy outlined below by requiring management to report back to the Board. Specifically, the Board



- requires management to report significant health and safety events or risks to it as soon as is practicably possible
- 10.10. Further, the Board requires that in the case of serious incidents management seek external input for review in a way that avoids potential vested interests. The Board will review all serious incidents, including near misses, and non-compliance, to ensure they are satisfied with the adequacy of management's response
- 10.11. The Board will require management to develop improvement goals on an annual basis and regularly report progress to the Board, along with the reporting of health and safety performance results. The Board will review such reports to identify trends, system breakdowns and improvement needs
- 10.12. The Board will conduct a formal review of Teach First NZ's health and safety performance annually to establish whether health and safety principles have been embedded in the organisation's culture and whether the policy and systems are being effectively implemented and are still fit for purpose
- 10.13. The Board will oversee an internal audit and review of health and safety at Teach First NZ, including employees in this process, on a bi-annual basis. The outcome of the review will, where necessary, identify an action plan with a process for management to track progress and report back to the Board

Our Health and Safety Policy Statement

- 10.14. Our Health and Safety Policy and Policy Statement sets out what we want to achieve in relation to health and safety at Teach First NZ
- 10.15. It is the responsibility of the Board, CEO, management and all employees, students and volunteers working in our premises to contribute to the development and review of this policy, and to put it into practice. This includes using the processes that explicitly support it, and through our everyday practice
- 10.16. To ensure a safe and healthy work environment, we will develop, maintain and regularly update a health and safety management system. Specifically, we will:
- Set health and safety objectives and performance criteria
- Annually review our health and safety objectives and the CEO's performance against these
- Actively encourage the accurate and timely reporting and recording of all incidents and injuries, including 'near misses'
- Investigate all reported incidents, injuries and near misses to ensure all contributing factors are identified and, where appropriate, plans are developed to take corrective action
- Actively encourage people to report any pain or discomfort related to the workplace or working conditions as soon as possible so that the causes can be addressed where appropriate
- Identify all existing and new hazards and take practicable steps to eliminate, isolate or minimise the exposure to significant hazards
- Ensure all employees are aware of the hazards in their work area and are adequately trained to enable them to perform their duties in a safe manner
- Encourage employee and student consultation and participation in all matters relating to health and safety
- Promote a system of continuous improvement including reviewing policies and procedures each year
- Meet our obligations under the Health and Safety at Work Act (HSWA) (2015) and other relevant legislation.
- 10.17. All Teach First NZ employees, volunteers, students and visitors working from our permanent premises are expected to share in this commitment to health and safety in the workplace by:
 - Observing all safe work procedures, rules and instructions
 - Contributing to the development of this document, relevant policies and processes, and sharing ideas to improve health and safety in the workplace
 - Reporting any pain or discomfort as soon as possible and helping to address the causes
 - Ensuring all incidents, injuries and hazards are reported to the appropriate person.

Our Health and Safety Management System



- 10.18. Our health and safety management system is used to effectively manage hazards and risks in the workplace
- 10.19. The system includes the identification and use of appropriate resources and processes to eliminate or minimise risks to health or safety
- 10.20. Teach First NZ's health and safety management system consists of:

| Process, system or procedure | Aim | Review |
|---|---|---|
| A Hazard and Risk Register | To identify and assess work-related health and safety risks. | Annually, and during significant organisational change. New hazards and risks added as they are identified. |
| An Incident Log | To report and investigate incidents to identify root causes and then to respond to these in a timely way. To identify and implement remedial actions to prevent the incident happening again. | Ongoing, as and when incidents occur. |
| We have FIRE ACTION posters displayed in the office. We have two fire wardens. | To manage potential emergencies that may arise in the workplace. To ensure relevant plans are communicated to all persons working on site. | Annually and regularly tested by simulation. |
| We have two me wardens. | | Annually. |
| An Injury management process We have a first aid kit in the office. | To ensure that injured persons are properly cared for. (In the case of serious injuries and fatalities this care will extend to families and work-mates). | Annually. October 2018 |
| Engaging everyone in promoting health and safey and minimising risks through our reporting framework, team meetings, team training, professional development, resources shared on our Shared Drive and team emails. | To engage all employees in health and safety matters. This includes ongoing ways to: raise health and safety concerns get and share information about health and safety issues offer suggestions for improving health and safety, contribute to decisions which affect work health and safety be kept informed about health and safety decisions | Responsively to feedback and review annually. |
| A consultation and Co- ordination process for working with other organisations under HSWA. | To consult and co-ordinate with other organisations where they also have duties under HSWA in relation to the same task or activity. | Annually. |
| Audit and review of this Hazard and Risk management system. | To ensure continuous improvement of the hazard and risk management system at Teach First NZ. | Annually. |

Notifiable events

10.21. Notifiable events are those in which an employee, volunteer, student or visitor on our



- premises is killed, injured, contracts an illness or has their health and safety seriously threatened or endangered as a result of work
- 10.22. Notifiable events must be notified to WorkSafe using the details on their website HERE.

Monitoring

- 10.23. Our monitoring system ensures the Board of Trustees can be satisfied that Teach First NZ has the relevant processes to meet its obligations under HSWA
- 10.24. The Board will monitor the health and safety performance of Teach First NZ to identify whether intervention is required to achieve or support organisational improvements, and to implement long-term health and safety strategies and goals
- 10.25. The Board monitors:

| What | When/ How |
|--|---|
| Data of all incidents, including near misses, work- | At each Board meeting via the CEO Report. |
| related ill-health, compliance with health | Annually reviewed. |
| monitoring programmes and ACC claims. | |
| Data on absence rates due to sickness | At each Board meeting via the CEO report. |
| | Annually reviewed. |
| Data on trends including routine exposure to risks | At each Board meeting via the CEO Report. |
| that are potentially harmful to health such | Annually reviewed. |
| as high noise levels, toxic chemicals and bullying. | |
| Progress towards implementing formal | Annually. |
| improvement plans and meeting policy goals, | |
| including the number of actions closed-out on time. | |
| Actions in place aimed at preventing harm, such as | Annually, or as relevant. |
| training, and maintenance programmes. | |
| The health and safety performance and actions of | |
| contractors. | |
| Reports on internal and external audits and system | |
| reviews. | |
| Data on proactive safety visits such as safety tours | |
| and workplace inspections. | |

Health and Safety for students

- 10.26. Students are expected to act in ways that are in-line with safe practices while on the organisation's premises, either temporary or permanent
- 10.27. In-line with the policy above, students are expected to report any accidents, near misses, health or safety hazards or potential hazards. This can be done in person with an employee or via electronic communication
- 10.28. Students' views and input into health and safety policy will be sought in-line with the above policy
- 10.29. All permanent premises will have a health and safety plan in place to guide expectations for students learning in those premises. These plans will be reviewed and updated annually
- 10.30. Students will be expected to follow the health and safety plans for all temporary premises, as necessary and relevant
- 10.31. Students are required to follow the health and safety plan, including evacuation procedures etc., for the appropriate premises, which will be shared with them as appropriate on their first visit, and updated and reiterated on a regular basis
- [N.B. this policy and related procedures will be updated with individual health and safety plans when temporary and permanent premises are confirmed]



Student Guidance and Support

- 10.32. Teach First NZ: Ako Mātātupu is committed to providing appropriate support services to students that will assist in their learning and ensure their physical and mental well-being is protected. The organisation will also continue to explore ways to ensure that students with various special needs can actively engage in a range of programmes. This includes:
 - Undertaking to provide a safe environment for the physical and emotional wellbeing of students
 - Striving to ensure that students succeed in their educational goals and seeking to provide support where possible.
 - Making learning support available to students independently or by referral by staff
 - Providing access to health and counselling services
 - Maintaining effective systems to resolve student concerns and complaints
 - Providing a learning environment which enables Māori students to succeed as Māori
 - Enabling student to use learning services to their best advantage
 - Providing opportunities for students to give feedback
 - · As appropriate, literacy and numeracy assessment results will be used to inform teaching
- 10.33. The provision of these services will be informed by the concept of hauora, and the models Te Whare Tapa Whā and Fonofale
- 10.34. Students will be provided with a list of services which they can access to support their learning. This includes:

| Type of support | Details of support provided | |
|-------------------------|---|--|
| Selection & Enrolment | Application; selection; induction/ matriculation; Enrolment; reenrolment; | |
| | variations to enrolment; withdrawal; refunds | |
| Academic Records | Academic Transcripts; qualification verification; graduation | |
| Health & Wellbeing | Health; Mental Health; Addiction; Referrals; Spiritual Support; Counselling | |
| Disability Support | Assistance with academic study; special considerations | |
| Academic Support | Academic writing; research skills; academic skills | |
| Learning Resources | Library and learning resources | |
| IT Support | Logins; Access to online resources; | |
| Student ID and Benefits | Discounts and benefits | |
| Student Finance | StudyLink loans and allowances; Student Hardship; Financial Support; | |
| | Scholarships | |
| Careers Advice | Further study; career counselling | |

The services available and access to them is outlined in appropriate policies and guidance

10.35. Students will be asked to disclose any medical conditions that they feel the organisation should be aware of so that appropriate information, training or plans can be put in place. This information will be held confidentially and in-line with the Enrolment and Academic Records policy, and students will not be required to disclose any information which they are not obliged to divulge according to relevant legislation

Offsite events

- 10.36. During off-site and workplace experiences or clinical placements, a quality learning environment, which minimises risk to students while maintaining the integrity of the workplace, provides a context for the development and assessment of relevant skills
- 10.37. Off-site placement of students will be subject to written agreements where necessary, and, where required, formal contracts will specify the terms and conditions for any placement
- 10.38. Workplace or off-site areas will be selected and monitored according to stated criteria. Key criteria in this context will be the health and safety of students and the potential for optimising student learning experiences as specified in the curriculum
- 10.39. Written agreements or formal contracts on the placement of students shall specify the



organisation's requirements and responsibilities for student assessment and reporting student progress, and the responsibilities of industry personnel



11. International Students

| Version | 1 | Review Period | | | |
|------------------|--|------------------|--|--|--|
| Approved by | Board of Trustees | Last Review Date | | | |
| Approval Date | | Next Review Date | | | |
| Relevant | The Education (Pastoral Care of International Students) Code of Practice 2016 | | | | |
| legislation etc. | Export Education Levy | | | | |
| Purpose | To ensure that international student selection and enrolments are carried out in an | | | | |
| | appropriate manner, having regard for the student's potential to succeed in the chosen | | | | |
| | programme or training scheme, and in a way that meets the requirements of the New | | | | |
| | Zealand Code of Practice for the Pastoral Care of International Students. | | | | |

- 11.1. At the time of establishment, the organisation does not intend, nor have approval, to enrol international students. Any change to this will require the approval of the Board of Trustees before the relevant requirements are completed, including becoming a signatory to The Education (Pastoral Care of International Students) Code of Practice 2016
- 11.2. Should the organisation be approved to enrol international students, this policy as well as the policy relating to student fee protection and other relevant policies will be reviewed and approved by the Board of Trustees before enrolling any international students



12. Student Expectations and support (including complaints and appeals)

| Version | 1 | Review Period | |
|------------------|---|------------------|--|
| Approved by | Academic Board | Last Review Date | |
| Approval Date | | Next Review Date | |
| Relevant | Private Training Establishment Registration Rules 2018, s.5.1.5 | | |
| legislation etc. | | | |
| Purpose | To ensure fair and equitable policies and procedures for supporting all students are | | |
| | able to learn in a safe, productive and positive environment in-line with the kaupapa | | |
| | and values of the organisation. | | |

Student Expectations and Support

- 12.1. All students are expected to adhere to the kaupapa and values of the organisation at all times whilst enrolled as a student with the organisation, including when they are representing the organisation
- 12.2. For the avoidance of doubt, this includes during the 'employment-based' elements of any programme a student is enrolled in
- 12.3. The **Expectations and Support Policy** outlines how Teach First NZ will provide support to participants who have not met expectations, or in situations of alleged misconduct
- 12.4. The organisation is committed to supporting all students to perform to their best and make the biggest impact possible through their work.
- 12.5. The organisation will only take formal action with good reason, and will do so always in good faith, and following a fair process.

Performance issues and Misconduct

- 12.6. In situations in which a participant shows evidence of not meeting expectations or having not adhered to the requirements, values or guidelines of the organisation, the organisation is committed to acting in good faith, following a fair process, and, where possible, supporting the student to address the concerns and continue with their learning
- 12.7. This policy is intended to complement, and does not replace, separate policies operated by any relevant partner school, as an employer
- 12.8. For employment-based programmes, where an employing partner school begins a performance or disciplinary procedure with a student enrolled with the organisation, Teach First NZ is committed to upholding the spirit of this policy where relevant
- 12.9. In cases where the partner school fairly and legally dismisses a student enrolled in an employment-based programme in accordance with their own relevant policies, Teach First NZ will withdraw the student where employment is a required part of enrolment on the relevant programme
- 12.10. The requirements, values, guidelines and expectations for the relevant programme will be clearly communicated to all students before and during the Programme including in the Conditional Offer Letter, Participant Handbook etc.
- 12.11. The below outlines the Teach First NZ: Ako Mātātupu process for addressing student performance issues and misconduct. This includes, but is not limited to:
 - Repeated misconduct
 - Serious misconduct
 - Failure to meet expectations and requirements of the programme
- 12.12. In any case in which a performance issue or misconduct is identified the below process will be followed, led by the relevant senior member of staff, with support from others as necessary and relevant



12.13. Where necessary, a third party mediator may be engaged

Performance Management process

- 12.14. The below outlines the process to be followed for all performance issues and misconduct
- 12.15. In cases of misconduct, an appropriate Teach First NZ employee or Board member, likely the Programme Leader or a member of the Teach First NZ senior leadership team, will conduct a fair investigation to establish whether there is evidence of misconduct or not. If that person considers that there is evidence of misconduct, the following process will be followed
- 12.16. Throughout the process, there will be ongoing communication between the organisation and the student, and details of the performance issue and the steps taken will be recorded
- 12.17. Throughout the above process, the student will be kept informed and up to date regarding the process, including with details of the performance issue that has been identified, and given an opportunity to respond and input into the process
- 12.18. The outcome of any investigation and performance management process will not be predetermined, and any decision will be based upon the facts of the situation and outcome of the Performance Improvement Plan (PIP) or informal process
- 12.19. All processes and decisions will meet the requirements of relevant legislation, guidance and policies
- 12.20. Standardly, it is anticipated that a student will receive three formal warnings (at least two of which should be 'written', and all must be recorded) before notice of dismissal from a programme is given. However, it is not a requirement in all cases as long as a fair process has been followed in good faith, dismissal has been clearly communicated as a potential outcome of the process, and the Academic Board considers there to be reasonable grounds for dismissal

Misconduct

- 12.21. Misconduct is when a student does something wrong either by: doing something; not doing something; or through their behaviour. This may justify some disciplinary action being taken
- 12.22. Examples of misconduct include, but is not limited to: Using inappropriate language; Internet misuse; Minor instances of failing to follow the organisation's reasonable and lawful instructions; Lateness; Failure to meet the expectations of the programme
- 12.23. In cases of misconduct it will be communicated to the student what the identified misconduct is, and given the opportunity to respond and address the issue. This will be recorded by the relevant Teach First NZ employee leading the process

Repeated Misconduct

12.24. Where there is a repeat of the same or other misconduct, this will be communicated as above, and where appropriate the performance management process as outlined above will be used

Serious misconduct

- 12.25. Serious misconduct is where a student's misconduct has the effect of undermining or destroying the relationship of trust and confidence between the student and the organisation
- 12.26. Examples of misconduct includes, but is not limited to: Violent behaviour; Bullying; Harassment; Theft or fraud; Behaviour that endangers the health and safety of the student or others; Use of illegal drugs on the organisation's premises; Dishonesty; acting in such a way as to bring Teach First NZ or our partners into disrepute
- 12.27. In cases of serious misconduct it will be communicated to the student what the identified misconduct is, and the student given the opportunity to respond. This should be recorded by the Programme Leader



- 12.28. The Programme Leader, with the support of the Head of School, will agree about the appropriate next step from: formal, verbal warning; formal written warning; immediate dismissal from the programme
- 12.29. In cases of serious misconduct the participant can be immediately dismissed without the need to follow the performance management process

Failure to meet expectations

- 12.30. Failing to meet expectations is where a student does not meet all, some or one part of the expectations or requirements that have been communicated to them for the completion of the Teach First NZ Programme
- 12.31. Examples of performance issues include, but is not limited to: not meeting objectives/ expectations; not addressing situations where expectations or objectives have not been met after feedback; performing poorly; evidence of not performing according to the Teach First NZ: Ako Mātātupu values. This can also include issues of speed, quality, quantity, or how activities are delivered
- 12.32. This includes situations in which a student has not met the academic requirements to continue on their enrolled programme or training course, because they:
 - have or are failing half or more of their courses at the end of a semester
 - are not meeting the requirements for continuation (as laid out in the relevant programme requirements, such as pre-requisite papers etc.)
 - are considered unsuitable for the field of work for which their study leads
 - have not met the requirements of one or more practicums
 - have failed the same academic paper on two or more occasions

unless otherwise stated in the programme regulations.

- 12.33. In the first instance, performance issues will be addressed informally by a relevant teaching staff member
- 12.34. A formal approach will be introduced in situations in which a participant has not improved their performance to the level of expectation/ addressed the issues outlined as not meeting expectations as outlined by the Kaihapai or Programme Leader. This will be determined by the judgement of the Programme Leader and senior leadership team
- 12.35. Where a formal process is initiated, it will be communicated to the participant the basis upon which such a process has been initiated, and the processes to be used
- 12.36. The process of performance improvement will follow the process outlined in this policy

Termination of enrolment

- 12.37. Termination of a student's enrolment will only be made once the relevant support or performance processes outlined in this policy have been followed
- 12.38. Recommendation of termination of a student's enrolment in a programme or training course will be made by the Programme Lead, in consultation with relevant teaching staff, to the Head of School who will report the recommended termination to the Academic Board for ratification
- 12.39. Notice of termination of a student's enrolment in a programme or training course will be made in writing to the student and in-line with this policy
- 12.40. In situations in which a student is dismissed from the programme for failing to meet expectations, misconduct or serious misconduct, the organisation may seek reparations of costs from the student to reflect the level of investment that has been made to the point of their dismissal. This is outlined in our Fees and Scholarships policy
- 12.41. On termination of enrolment, a student is entitled to a refund of all or part of their student fee according to the relevant policy. The student is not entitled to any refund for a programme for which they received a student fee scholarship
- 12.42. In cases of termination due to academic performance, the student can appeal to the

Student Complaints



- 12.43. The aim of the Teach First NZ complaints procedure is to reinforce the effectiveness of our work as a network, which includes ensuring that every member of our community feels valued and supported in all aspects of their work and learning with us. The Complaints procedure supports this by ensuring that all students can easily raise concerns, feel that they are heard, and achieve resolution through the process in a way that supports the aims of the organisation and the network
- 12.44. The aim is that the complaints procedure is clear and easy to access and understand for all
- 12.45. A complaint may be made to Teach First NZ through any method of communication that is actively used or monitored by a Teach First NZ member of staff. This includes via email, verbally, hard copy letter, social media, SMS or in other ways. In all cases, every complaint will be acknowledged promptly via an official Teach First NZ communication channel (e.g. a Teach First NZ email or letter on headed paper), with a statement provided to the complainant regarding the expected next step and approximate timeline
- 12.46. All complaints, regardless of how they are received, will be documented, including the original complaint, correspondence relating to the complaint, and any report or resolutions agreed upon. The information will be held securely, respecting confidentiality
- 12.47. Complaints may be used to inform processes or service improvements for Teach First NZ as part of regular and ongoing review of the organisation's work
- 12.48. A complaint may be made by an individual directly, or on behalf of an individual by someone acting on their behalf, or someone who has witnessed something that they would like to raise a complaint about. No investigation, assessment or action will be taken without the explicit consent of the individual complainant
- 12.49. In all cases, complaints will be dealt with fairly and in good faith. Action will be taken in line with the relevant sections of this and other polices where there is good reason to do so
- 12.50. All complaints will be investigated, assessed and assigned priority, with a decision made as to who will deal with the complaint
- 12.51. All complaints will be dealt with confidentially, protecting both the complainant and the person(s) or practice complained about
- 12.52. Where a complaint relates not to Teach First NZ but to either a school partner, or other body or agency which is outside of the control of Teach First NZ (for instance the Teaching Council), Teach First NZ will engage with the complainant regarding how they wish to deal with the complaint. This may involve Teach First NZ passing on the complaint, with the participant's permission, or advising that the participant resubmit the complaint directly to the relevant body.
- 12.53. In such instances, Teach First NZ may or may not remain involved with the complaints process, and may or may not offer the complainant support in engaging with the other agency's complaints process.

Issues raised by a student(s) in relation to another student(s)

- 12.54. In situations in which a student or students raises an issue with another student or students, Teach First NZ is committed to working in good faith and through a fair process in relation to both parties. Teach First NZ will never take action against a participant without good reason
- 12.55. Complaints by participants is dealt with in the relevant section below
- 12.56. The process and action that will be followed depends on the nature of the complaint, and will therefore follow the process outlined in the relevant section in this policy

Bullying, Harassment and Discrimination

- 12.57. Teach First NZ aims to have an approach to bullying, harassment and discrimination that: is respectful and upholds the mana of all those involved; makes it clear and easy for any student to get help; provides support for any participant who makes a complaint; ensures each complaint is investigated sensitively, objectively, thoroughly and in a timely way; and ensures that confidentiality is maintained by all parties involved
- 12.58. Bullying, Harassment and Discrimination is never acceptable in Teach First NZ's work. All students are expected to show respect to each other
- 12.59. This expectation extends to all those who engage with our students as part of our work



- 12.60. The respectful behaviours we seek to foster will be modelled by the Board, senior leaders, employees and all those who engage with Teach First NZ's work
- 12.61. Sometimes behaviour which is bullying or harassment may also be civil harassment covered by the Harassment Act 1997 and the complainant may choose to apply for a restraining order. This may affect the process followed by Teach First NZ in line with its policies, if the process would affect or influence the outcome of the application under the Act
- 12.62. If behaviour includes violence, is criminal harassment (where the person intends, and knows it is likely, for the harassment to cause the other person to reasonably fear for their own or their family's safety) or is another criminal offence, it should be reported to the Police. Teach First NZ will take a view whether it is appropriate to continue with the process outlined in this policy in such cases
- 12.63. Where a complaint of harassment, bullying or discrimination is made by a participant, the complaints process outlined below will be followed, and may lead to disciplinary action

Complaints process

- 12.64. All complaints will be dealt with using the following process, led by an appropriate Teach First NZ employee who is assigned to the complaint:
- Step 1: Receiving a complaint: The complaint will be acknowledged by Teach First NZ in a timely manner, and the complainant provided with information regarding next steps and likely timeframe for dealing with the complaint
- Step 2: Investigating the complaint: Information about the complaint will be collated for the purpose of Teach First NZ ensuring we have as accurate a picture of the complaint as possible. This may include: a written statement by the complainant; collecting other materials that relate to the complaint; statements from others who are aware of the source of the complaint (e.g. such as those who observed the specific action or inaction etc.)
- Step 3: Assessing the complaint: On the basis of the information collated, Teach First NZ will assess whether there is good reason to take action on the basis of the complaint, and what the appropriate action should be. This will take into account the preferred resolution of the complainant, but the complainants preferred resolution may not be the final outcome
- Step 4: Resolution of the complaint: On the basis of Step 3, resolution will always include acknowledging the complaint and sharing reasons for the decision made with the complainant. In addition, resolution will include one or more of the following:
 - o informing the complainant that no further action will be taken
 - o proposing an informal resolution (e.g. Teach First NZ discussing with both parties the complaint, facilitating a conversation between the parties, an apology etc.)
 - initiating a formal disciplinary procedure if the complaint is assessed to be about behaviour that is misconduct or gross misconduct (inc. if it is assessed to be bullying, harassment and/or discrimination or other actions outlined in this policy)
 - outlining ways in which the complaint will inform improvements to Teach First NZ's work, if relevant

If a complaint is about Teach First NZ

- 12.65. If the complaint is about Teach First NZ or a Teach First NZ employee(s) (inc. volunteers and contractors) the complaint will be dealt with in the same way as outlined above
- 12.66. In situations in which, after the procedure has been followed, a complaint against Teach First NZ is upheld, an apology will be issued, and steps taken to address the specific issue
- 12.67. In situations in which a Teach First NZ employee(s) (inc. volunteers and contractors) is assessed to have engaged in behaviour that can be considered misconduct or gross misconduct, the appropriate process as outlined in this policy will be followed
- 12.68. In cases where either the complainant or Teach First NZ consider that it is not appropriate for Teach First NZ to manage the complaint procedure, the complaint will be referred to an independent third party to investigate, assess and resolve
- 12.69. In a case where the complaint is about a Teach First NZ employee, that employee will not be involved in any way with investigating the complaint



If the complainant is not satisfied with the resolution reached

- 12.70. If the complainant is not satisfied with the process or resolution provided by Teach First NZ in regards to the complaint they have raised, options include:
 - Raising the complaint directly with the Board of Trustees, who will consider the original
 complaint again along with the additional complaint in relation to the process or resolution
 arrived at by Teach First NZ, using this or an alternative complaints procedure. The Board of
 Trustees will provide both a resolution to the initial complaint, and may initiate a separate
 process if there is good reason in relation to the additional complaint
 - The complainant may request that an independent person or body who is mutually agreeable to both the parties to the complaint consider it
 - A complainant may take the complaint up with an external body directly, such as the Police, Human Rights Commission, Employment Relations Authority, a Union etc.

If the complaint is found to be malicious

12.71. If after an investigation it is judged that a complaint was made maliciously, i.e. that the situation complained about did not happen, a misconduct investigation could be held in relation to the person who made the complaint.

Checking the authenticity of student work

- 12.72. The organisation is committed to upholding the highest academic standards and supporting students to develop the ability to succeed in a tertiary setting. Ensuring student work is authentic and preventing plagiarism is a central part of achieving this
- 12.73. For the purposes of this policy, "Plagiarism" is understood as a situation in which a student claims another person's published or unpublished work as if it is their own. This includes situations in which, without clear acknowledgment of the author, copying directly, quotation, paraphrasing or downloading from the internet, any individual's ideas, including copying from another student
- 12.74. This policy also covers situations in which a student submits work they have previously submitted for assessment with this or another organisation
- 12.75. At the start of enrolment all students will be provided with information about plagiarism, including the nature, seriousness and consequences of plagiarising others' work as part of their study with the organisation
- 12.76. Students will be required to sign an assignment cover sheet when submitting all assignments confirming the work submitted is their own and has not previously been submitted for academic credit

Investigating and dealing with plagiarism

- 12.77. Plagiarism can be considered misconduct according to the student expectations and support policy and is subject to the relevant process for dealing with misconduct
- 12.78. Where a teaching staff member becomes aware of a student having plagiarised as part of a submitted piece of assessed work, they will report it to the Programme Leader
- 12.79. The teaching staff member and the Programme Leader will agree a proportionate course of action according to the process for student misconduct
- 12.80. The relevant teaching staff member and Programme Leader have discretion regarding the course of action for minor issues of plagiarism (such as failure to properly reference a quote etc.). The student may also be required to rework the assessment addressing the issue of plagiarism
- 12.81. All cases of plagiarism will be reported to the Academic Board for information, and for ratification as relevant where the issue requires disciplinary action

Student appeals against an assignment grade

12.82. Should a student feel that they have received a grade lower than they are entitled to for any



- assessable task, or that a course task has been incorrectly marked, the student can contact the Programme Leader stating their reasons
- 12.83. The Programme Leader will judge whether or not there are grounds to review the awarded grade in consultation with the relevant teaching staff and Head of School. The outcome of such an appeal may or may not be a change in the grade. Where there is a change, the grade may be lowered or raised
- 12.84. The Programme Leader's judgement will be final

Student appeals against a course grade

- 12.85. A student may appeal against an overall grade for a course only on the grounds of: new information not available at the time of marking; or process irregularities
- 12.86. Appeals against a course grade must be made in writing to the Programme Leader within 14 days of notification of the course grade
- 12.87. The Programme Leader will make a judgement as to whether the grade should be reviewed. If the decision is to review the grade, the Programme Leader, with the Head of School and relevant teaching staff, will review the grade
- 12.88. Outcomes from such a review can include: confirming the grade; raising the grade; lowering the grade
- 12.89. The decision of the review will be reported to the Academic Board for ratification. The Academic Board's decision will be final.

Student appeals against disciplinary action and/or termination of enrolment

- 12.90. A student who has been subject to a disciplinary decision and/or had their enrolment terminated can appeal the decision within 14 days of notification of the decision by writing to the Head of School requesting that the decision be reviewed
- 12.91. Grounds for review of a disciplinary decision and/or termination of enrolment are limited to: new information; process irregularities; a claim that any sanction / termination is disproportionate
- 12.92. The appellant student will be asked to provide relevant evidence or details of the grounds upon which they are appealing by the Head of School, who will review the decision according to the relevant complaints and disciplinary policies. The Head of School may choose to establish an appeals committee to consider the appeal consisting of staff and/ or members of the Academic Board
- 12.93. Outcomes from a review may be: to uphold the original sanction / termination; to modify the sanction / termination in whole or part; to reverse the sanction / termination; to refer the review to the Academic Board
- 12.94. Reviews will only be referred to the Academic Board where it is considered that neither the Head of School nor any other member of the senior leadership team is able to review the appeal with sufficient objectivity or expertise
- 12.95. The outcomes of all appeal decisions will be reported to the Academic Board for ratification, whose decision will be final.

Escalating Appeals

12.96. In the event that a student who has complained to or appealed against a decision of the organisation, does not consider the organisation's process to have been sufficiently fair, delivered in good faith, or completed in a timely manner, or for any other reasons, they can raise the complaint with NZQA using the 'Complaints kit for formal complaints about providers'



13. Developing and reviewing education Programmes and Training schemes

| Version | 2 | Review Period | | | |
|------------------|--|------------------|----------------|--|--|
| Approved by | Academic Board | Last Review Date | September 2019 | | |
| Approval Date | | Next Review Date | | | |
| Relevant | • Education Act (1989), s.249 & s.253B | | | | |
| legislation etc. | NZQF Programme Approval & Accreditation Rules 2018 | | | | |
| | Private Training Establishment Registration Rules 2018 | | | | |
| | NZQF Qualification Listing and Operational Rules 2012 | | | | |
| Purpose | To manage the development of education programmes and/ or training schemes that | | | | |
| | ensures all such programmes are inline with the vision and purposes of the | | | | |
| | organisation, uphold the highest quality standards, provide value and meet the needs | | | | |
| | of students and others, and meet all legislative and regulatory requirements. | | | | |

Approval of new programmes and training schemes

- 13.1. Only programmes or training schemes that have gained approval through the internal 'New Programme Approval' (NPA) Process outlined below can be submitted to NZQA for accreditation and approval on behalf of the organisation
- 13.2. The NPA process consists in:
 - **Step 1:** Collation of supporting materials, including consultation and other relevant information, for the purposes of an initial business case by the proposed Programme Leader, with their line manager. (It is anticipated that prior to this step, informal discussion has occurred regarding the need or opportunity for a new programme, including with the Head of School and CEO)
 - **Step 2:** Presentation of the Business case to the Head of School, for consideration by the Senior Leadership Team (SLT)
 - Step 3: If the SLT considers the proposed programme to be likely to meet the NPA criteria, they will recommend that a full NPA Case be prepared, which includes preparation of a draft application to NZQA, showing how the programme will meet all NZQA requirements, and any requirements of other relevant authorities (e.g. Teaching Council)
 - Step 4: The NPA Case is presented to the Academic Board for consideration. The Academic Board can make one of three decisions: Decline the Proposal; Recommend changes prior to resubmission; Approve the proposal for submission to NZQA
 - **Step 5:** For approved programmes, the decision is recommended by the CEO to the Board of Trustees for ratification
 - Step 6: The full programme/ training scheme application is prepared to be submitted to NZQA
- 13.3. For a programme or training scheme to be approved by the internal quality assurance approval process, it must be shown to be likely to meet all of the **accreditation criteria**, which are outlined below and in the NZQF Programme Approval & Accreditation Rules 2018.

The business case for a new programme or training scheme must show:

- Assessment & Moderation: that the organisation has the capability and capacity to ensure
 assessment materials and decisions are fair, valid, consistent and appropriate for the level, given the
 stated learning outcomes
- Resources: that the institution has the capability and capacity to support sustained delivery of the programme through appropriate academic staffing, teaching facilities, educational and physical resources, and support services



- Support for delivery: If the organisation is not the holder of the programme approval, that there is support from the holder of the programme approval
- Assessment and Review: that there is adequate and effective review of the programme performance
 and the institutions capability to support the programme. Also, that there will be monitoring of
 improvement following review, and processes for determining whether the programme should
 continue to be delivered
- Research activity required to deliver degrees and postgraduate qualifications: that facilities and the support of staff involved in research are adequate, the levels of research activity of staff involved in the programme are satisfactory, and the ways by which the research-teaching links are made in the curriculum are appropriate
 - 13.4. In addition, for a programme or training programme to gain NPA approval, it must be shown to be likely to meet all of the **approval criteria**, which are outlined below and in the NZQF Programme Approval & Accreditation Rules 2018.

The business case for a new programme or training scheme must show;

- Qualification to which the programme leads: that the programme meets the definition published on the NZQA website of the applicable qualification type
- Title, aims, learning outcomes and coherence: that the title, aims, stated learning outcomes, and coherence of the whole programme are adequate and appropriate and clearly meet the graduate profile and specification for the qualification as listed on the NZQF
- Delivery methods: that the delivery methods are adequate and appropriate, given the stated learning outcomes for the programme. Where specific resources are necessary for the programme to be provided, these resources are clearly outlined
- Acceptability of the programme and consultation: in a written summary, that consultation has been
 undertaken, the views expressed, and how the views have been considered. The consultation and
 summary must articulate the need for and acceptability of the programme to the relevant
 communities and other stakeholders
- Regulations: Show there are clear, relevant and appropriate regulations that specify requirements for: admission; credit recognition and transfer; recognition of prior learning; programme length and structure; integration of practical and work-based components; assessment procedures, including authenticity of student work; normal progression within the programme
- Assessment & Moderation: Show there is an effective system for moderation of assessment materials and decisions
- Assessment & Review: Show that the organisation: assesses the currency and content of the
 programme; has adequate and effective processes for the ongoing review of the programme, taking
 account of the results of any review of the qualification; has adequate and effective processes for
 monitoring the quality of outcomes for learners and other stakeholders, and for reviewing
 programme regulations and content; updates the programme accordingly
- Research required for degrees and post-graduate qualifications: The links between research and the curriculum are clear, adequate, and effective
 - 13.5. The NPA process also requires that a business case shows that the programme or training scheme:
- Supports the kaupapa, mission, values, strategic goals, and ethos of the organisation
- Can attract sufficient funding, either through government or alternative sources, so as to be at least cost-neutral to the organisation for the duration of any initial period of sustained delivery (including estimating non-monetary resources requirements, such as staff time)
- Have the general support of the senior leadership team, Academic Board, and Board of Trustees
 13.6. Applications to NZQA for new programme or training schemes will be managed by the
 Quality Assurance Manager, in coordination with the Head of School and proposed Programme Leader.



Making changes to approved programmes

- 13.7. Any change to an NZQA approved programme or training scheme must be approved by the Academic Board before it is notified to NZQA (if necessary)
- 13.8. Changes to approved programmes may arise from ongoing quality management and improvement or changes in the industry or sector. The Programme Leader is responsible for making all recommendations for programme changes to the Head of School for approval by the Academic Board
- 13.9. For any proposed change to a programme, the relevant Programme Leader will: outline the change to be made; the reasons, including supporting evidence or recommendation, for the change; whether the change is understood to be an NZQA 'Type 1' or a 'Type 2' notifiable change; details regarding how and when the change will be made, and the students affected
- 13.10. Once approved by the Academic Board the change will be notified to NZQA and the response from NZQA reported back to the Academic Board

Programme review and improvement

- 13.11. The organisation will monitor, review and assess the performance of all programmes, including assessing the organisation's capability to continue to support its delivery. This is required for the purposes of ongoing programme accreditation and approval by NZQA
- 13.12. The Academic Board is accountable for ongoing programme review and improvement. The Head of School and relevant Programme Leader are responsible for this process
- 13.13. Following review, improvements to a programme implemented as a result will be monitored, and this will include a process for determining whether the programme should continue to be delivered
- 13.14. Any review may consider the whole of a programme or a part of the programme at any one time, although the whole programme will be reviewed over time
- 13.15. The Academic Board will receive an annual programme report prepared by the Programme Leader and approved by the Head of School for each programme. Such reports will include information about: student statistics, practicum review (as relevant), programme evaluations, and programme changes (with reference to monitors' and moderators' reports). Such reports will also include recommendations for programme developments, resourcing and any specific programme issues
- 13.16. The ongoing assessment and review of all programmes will include:
 - Monitoring and assessing whether the programme continues to meet all of the criteria required in the NPA process
 - Monitoring and assessing whether the programme is being provided as it was approved, including adhering to programme regulations, unless a specific change has been approved in writing by NZQA
- 13.17. A timetable for further programme review will be established annually by the Academic Board. The Academic Board will determine the focus and scope of such reviews
- 13.18. A full programme review will be undertaken every five years and/ or prior to any required resubmission for reaccreditation by NZQA
- 13.19. As a requirement of ongoing programme accreditation and approval the organisation will participate in and cooperate with external evaluation, review and monitoring by NZQA and any relevant professional bodies
- 13.20. Submission of new programmes, programme changes and participation and cooperation with external evaluation, review and monitoring by all other regulatory and professional bodies (including the Teaching Council | Matatū Aotearoa and the Tertiary Education Commission) will be managed and coordinated by the Quality Assurance manager according to the same process as that for NZQA



14. Student Fees and student fee protection

| Version | 2 | Review Period | | | |
|------------------|--|------------------|----------------|--|--|
| Approved by | Board of Trustees | Last Review Date | September 2019 | | |
| Approval Date | | Next Review Date | | | |
| Relevant | • Education Act (1989), s. 235A(I)(c) and 235B | | | | |
| legislation etc. | Student Fee Protection Rules 2013 | | | | |
| | Tertiary Education Commission (TEC) website re: Enrolment of SAC funded | | | | |
| | students | | | | |
| Purpose | To ensure that the organisation has acceptable arrangements for the protection of | | | | |
| | student fees should the student withdraw or an approved programme or training | | | | |
| | scheme or the organisation cease to operate before the student's completion of their | | | | |
| | programme of study | | | | |

For the initial programme for which the organisation intends to seek approval and accreditation we have an agreement with government to cover student fees in full. As such, we will be requesting a letter from NZQA to recognise this.

Paying student fees

- 14.1. The student fee, including relevant levies, for a programme or training scheme delivered by the organisation is considered to be incurred upon completion of registration by the student at the start of the programme or training course. Fees and levies for a full academic year must be paid in full at this point, unless otherwise negotiated
- 14.2. Once a student has completed the enrolment process, an invoice for student fees will be issued to the student or relevant party with information regarding how the student fees are to be paid. This is likely to be directly into the student fee protection trust fund dependent upon the specific circumstances and the relevant policy
- 14.3. On receipt of payment, the organisation will issue a receipt for payment of fees

Student withdrawal before, during, and after the relevant refund period

- 14.4. Students will be informed of this refund policy, including relevant dates, before enrolment. The information will be available on the organisation's website, included in the offer of enrolment letter, and included in the Participant Handbook
- 14.5. No refund of student fees will be given where a student's enrolment is terminated, or they defer or withdraw from a programme or training scheme without completing relevant documentation which is approved by the Academic Board
- 14.6. In all cases, if no fee has been paid, no refund will be given
- 14.7. Students who withdraw from their programme or training scheme after payment of the fees and levies and before completion may be entitled to a refund of all or part of their student fee. The table below outlines the relevant refund periods for domestic students:

| Refund Type | Details |
|--|---|
| Withdrawal more than 14 days before the start of a | Full refund. No administration charge |
| course | |
| Withdrawal within 14 days of the start of a course | Full refund minus administration charge |
| Withdrawal within 10 working days after the start | Full refund minus administration charge |

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| of a course | |
|--|---|
| Withdrawal after 10 working days of the start of a | No refund for full year or first semester |
| course | courses started |
| | Full refund for second semester and |
| | subsequent courses (if paid) |

- 14.8. Applications for withdrawal including the relevant refund are made by the student to the Programme Leader and reported to the Academic Board for ratification
- 14.9. As identified, eligible refunds are calculated as the total charge, inclusive of student fee and relevant levies, minus an administrative charge of 10% or \$500 (whichever is the lesser)
- 14.10. Refunds will only be paid to the person or organisation who paid the fee to Teach First NZ (i.e. fees paid by StudyLink will be paid back to StudyLink)

Closure of the PTE or its programme or training schemes

- 14.11. Private Training Establishments are required by NZQA to have in place acceptable arrangements for the protection of student fees in the event that the programme of the organisation ceases to operate
- 14.12. If the organisation postpones or cancels a programme or training scheme, enrolled students will be eligible for a refund. The organisation is required in such circumstances to offer at least the amount of a pro rata refund within 5 working days from the closure or cessation

Student Fee Protection

- 14.13. As a Private Training Establishment the organisation is required by NZQA to have in place acceptable arrangements for the protection of student fees in the event that the programme or the organisation ceases to operate
- 14.14. The organisation must use one of the approved Mechanisms set out in the Student Fee Protection Rules 2013, and continue to abide by the rules laid out there
- 14.15. For the refund period the Mechanism must be a standard or static trust managed by an Approved Independent Trustee
- 14.16. After the refund period, one or more of the Mechanisms may be used
- 14.17. Suppliers and changes to suppliers must be approved in writing by NZQA before operating the Mechanism
- 14.18.

Exemptions from student fee protection

- 14.19. At the time of establishment, the organisation has in place a financial agreement with government to fully fund the student fees of all students on the sole intended programme
- 14.20. Student fee protection is not required if a student or a group of students' fees are free, fully funded by the government, or fully funded through business-to-business contractual arrangements to enrol in a programme or training scheme. In such circumstances, the organisation will request a letter from NZQA confirming this arrangement
- 14.21. The organisation will immediately inform NZQA should this arrangement subsequently change, ensure sufficient student fee protection arrangements are put in place



Appendix: Quality Management System Amendment Record

| Date of Change | Policy Amended | New Versio n# | Page(s) affected | Effective date | Details of amendment |
|-------------------|--|---------------------|---------------------|-------------------|---|
| 18/09/19 | Organisational Self-Assessment | 2 | 3 | 18/09/19 | Added section 2.5. to address revisions required in NZQA RFI letter dated 13 September 2019, relating to identifying the relevant roles accountable for self-assessment. |
| 18/09/19 | Organisational Self-Assessment | 2 | 3 | 18/09/19 | Amended section 2.7 to clarify roles responsible for ensuring ongoing processed of data capturing etc. to address revisions required in NZQA RFI letter dated 13 September 2019. |
| 18/09/19 | Information Management | 2 | 19 | 18/09/19 | Added section 6.2 to clarify that the CEO has accountability, reporting to the Board of Trustees, for ensuring the requirements of information management are met, with the Quality Assurance Manager responsible for ensuring sufficient processes and procedures for delivery of this. |
| 18/09/19 | Developing and Reviewing Education Programmes and training schemes | 2 | 51 | 18/09/19 | Added section 13.20 to clarify that the process outlined for engaging with NZQA relating to new programmes, programme changes, and external evaluation and monitoring etc. relate to other relevant regulatory and professional bodies, including the Teaching Council. To address NZQA RFI letter dated 13 September 2019. |
| 21/09/19 | Student Admission and Enrolment | 2 | 22 | 21/09/19 | Amended s.7.2 to add an unnumbered bullet to clarify that information made available to students prior to enrolment will including information regarding withdrawal and refunds. This change was made in response to the NZQA RFI letter dated 13 September 2019 |
| 21/09/19 | Student Fee and Student Fee Protection | 2 | 52 | 21/09/19 | Amended s.14.4 to clarify that information regarding withdrawal and refunds will be made available on the organisation's website, through the offer of enrolment letter, and in the Participant handbook. This change was made in response to the NZQA RFI letter dated 13 September 2019 |
| 25/09/19 | Staff Development | 2 | 18 | 25/09/19 | Added s. 5.43., 5.44 and 5.45 outlining the role of the Academic Board in reviewing research outputs. This change was made in response to the NZQA RFI letter dated 13 September 2019. |
| 29/09/19 | Health & Safety | 2 | 40 | 29/09/19 | Added s.10.33 to ensure that Te Whare Tapa Whā and Fonofale are formally included in the development of student services. This change was made in response to the NZQA RFI letter dated 13 September 2019. |
| 30/09/19 | Staff Development | 2 | 15 | 30/09/19 | Added s.5.7 that the professional development model will include, as required for relevant teaching staff, review of research outputs, plans for the following year, and identifying required supports. |
| 01/10/19 | Personnel Recruitment and Management | 2 | 14 | 01/10/19 | Added the following to s.4.28 (p.14) "This includes that their relevant qualification is in a discipline which supports delivery of the programme that the staff member teachers as part of, and underpins that programme's theoretical framework" to strengthen the organisational capacity for research. |