

POSITION DESCRIPTION FOR NAVIGATOR

Date: February 2021

Tikanga

Te Rūnanga o Te Rarawa is committed to ensuring:

- The cultural imperatives and integrity of Iwi Māori are upheld; Tapu o Te Tangata, Mana, Tika, Pono, Aroha, Manaaki and Whanaungatanga.
- Support and maintain a culturally safe environment and recognise the role of the Treaty of Waitangi (Te Tiriti o Waitangi) in providing a framework for this in Aotearoa/New Zealand.

Ngā Whakamōhiotanga (Overview of the Role)

The role in this context is to coordinate, lead, support and motivate approximately 20 kaingaki kāri who will be participants on a 12-month Horticulture Group Employment Programme, administered by Te Rūnanga o Te Rarawa. You will support participants through a period of training to ready them for the workplace, and ultimately achieving ongoing seasonal employment within various primary industries in Te Hiku o Te Ika, starting with Bells Produce.

Key to this role is applying traditional cultural practices and Mātauranga Māori to maximise opportunities and sustainability of ongoing and long-term employment for all participants.

Ngā Taipitopito (Position Details)

Responsible To	Project Lead
Direct Reports	Nil
Nature of Term	Fixed term from March 2021-April 2023 (renewable dependant on funding)
Internal Relationships	<ul style="list-style-type: none">• All Te Rūnanga o Te Rarawa Staff & Contractors
External Relationships	<ul style="list-style-type: none">• Iwi, hapū, whānau• Key community stakeholders• Employers• Training Providers• Social Services and other government/non-government agencies• Wider Te Hiku Community

Ngā Takohanga (Key Accountabilities)

Enrolment and Induction	<ul style="list-style-type: none"> • Support Project Lead to complete administrative, reporting and compliance functions when onboarding kaingaki kāri. • Assist in the induction and enrolment process so that kaingaki kāri are supported appropriately and standards are maintained.
Training and Development	<ul style="list-style-type: none"> • Identify and coordinate training and development requirements for kaingaki kāri with training providers and document evidence of on-job training. • Support the delivery of training activities to enhance Te Tinana (physical), Te Hingengaro (Mind), Te Wairua (spiritual) in preparation for successful placement. • Ensure the quality of on-job and off-job training delivery is relevant to the group employer's and training providers requirements. • Ensure that employees are well informed about career opportunities in the Te Hiku horticulture industry. • Deliver mātauranga Māori knowledge, stories, history, whakapapa that will motivate, stimulate, inspire and build self-belief. • Be culturally capable to support kaingaki kāri with attaining a unit standard on the application of tikanga Māori in the workplace. • Work alongside local horticultural and other primary industries to support potential employees to become reliable workers and enthusiastic learners.
Daily Coordination and Supervision	<ul style="list-style-type: none"> • Coordinate and oversee day to day activities of kaingaki kāri including in preparation for training and supervision on the job.
Reporting and Record Keeping	<ul style="list-style-type: none"> • Ensure record keeping, data entry, and reporting is accurate, up to date and that data is maintained to a high standard. • Support Project Lead with reporting to Steering Group and Funders.
Planning and Evaluation	<ul style="list-style-type: none"> • Manage and report on progress towards successful employment placement and support in finding alternatives and/or other interventions for kaingaki kāri to explore post programme. • Report any perceived or actual identified issues of activities to Project Lead. • Seek to understand the barriers to individuals successfully working and learning as part of the programme and be an advocate on behalf of kaingaki kāri to address issues as required. • Participate in planning activities, guest speakers, reviews, hui, wānanga, in liaison with and as directed by the Project Lead. • Support the kaupapa by actively learning, developing, and responding to constructive feedback in order to maintain continuous improvement.
Relationship Building	<ul style="list-style-type: none"> • Develop and maintain the trust, respect and confidence of kaingaki kāri to foster a positive workplace culture.

	<ul style="list-style-type: none"> • Build on, develop and foster networks and relationships with agencies, stakeholders, community support services, education and training providers, local employers and other stakeholders. • Maintain and enhance active relationships between whānau, hapū and iwi to ensure the needs and wellbeing of the kaingaki kāri are front of mind. • Work with employers and key designated staff to ensure outcomes are reached and standards are maintained.
Health and Safety (H&S)	<ul style="list-style-type: none"> • Maintain knowledge of host employer’s H&S procedures to ensure the safety of kaingaki kāri. • Comply with all H&S procedures of Te Rūnanga o Te Rarawa as well as the host employer(s). • Ensure all premises and vehicles used are maintained to a clean, tidy and safe standard and in accordance with any organisational policy.
Additional Duties as Required	<ul style="list-style-type: none"> • Any other reasonable duties to support the kaupapa. • Flexibility and some weekend work will be required to meet the needs of host employers.

Ngā Kaiakatanga (Ideal person specification)

The ideal candidate will have a strong track record with the following skills, experience and qualities:

- Current full NZ car licence.
- An adult teaching certificate or similar would be advantageous.
- Experience in work brokerage/building relationships with potential employers.
- Experience in a similar role including the pastoral care support of clients.
- Experience in the successful delivery of Māori focused holistic wānanga would be advantageous.
- Rapport in the local community, and the ability to build close, trusting relationships with a wide range of stakeholders.
- Excellent listener/communicator – both written and oral.
- Strong organisation and time management skills
- Experience in facilitating training with youth/young adults.
- An understanding of Te Reo me ōna Tikanga Māori as relevant to local Hapū / Māori communities.

APPLICATION FOR EMPLOYMENT

POSITION APPLIED FOR	DATE

PERSONAL INFORMATION			
Family Name:			
Given Names:			
Contact Address:			
Email Address:			
Contact Phone:	Day		Evening
Have you reached the current school leaving age			Yes/No
Are you legally entitled to work in New Zealand?			Yes/No
As:			
A New Zealand citizen			Yes/No
A permanent resident			Yes/No
A holder of a current work permit			Yes/No

EDUCATION AND TRAINING		
<i>Schools and institutions attended</i>	<i>Dates</i>	<i>Courses taken and qualifications gained</i>
Do you have any other qualifications/certificates/licenses or attended any courses? (Give details)		

Present or most recent employer	
Company:	
Address:	
Position Held:	
Main duties:	
No. of hours per week:	
Length of service:	
Reason for leaving:	
For the purposes of compliance with the Privacy Act 1993 do you consent to the company contacting your present employer for the purposes of reference checking	Yes/No
Next most recent employer	
Company:	
Address:	
Position Held:	
Main duties:	
No. of hours per week:	
Length of service:	
Reason for leaving:	
Next most recent employer	
Company:	
Address:	
Position Held:	
Main duties:	
No. of hours per week:	
Length of service:	
Reason for leaving:	

Have you ever worked for this company or an associated company before?	Yes/No
If yes, where and when:	
Do you have secondary employment?	Yes/No
If yes, please detail:	

REFEREES

Give name, address and telephone numbers of at least two referees.

<i>Name</i>	<i>Position</i>	<i>Address</i>	<i>Phone No.</i>

I.....consent to the company seeking verbal or written information on a confidential basis about me from representatives of my previous employers and/or referees and authorise the information sought to be released by them to the company for the purposes of ascertaining my suitability for the position for which I am applying. I understand that the information received by the company is supplied in confidence as evaluative material and will not be disclosed to me.

Signature: Date:

GENERAL

Are you prepared to work shifts if required to do so?	Yes/No
Have you worked shifts before	Yes/No
Are you prepared to work overtime if required?	Yes/No
Do you have any criminal convictions, not including any concealed under the Criminal Records (Clean Slate) Act? If yes, please detail:	Yes/No
Have you been the subject of a Diversion ordered by the courts?	Yes/No
Are you awaiting the hearing of any criminal charges? If yes, please detail:	Yes/No
Do you have a current drivers license? If yes, what classes? Drivers License no:	
Do you have any demerit points or endorsements?	Yes/No
Do you have any civil legal proceedings against you pending? If yes, please detail:	Yes/No

MEDICAL

Do you have any health related issues (including stress) that may impact on your ability to perform the tasks listed in the Job Description for the job that you are applying for? If yes, please detail:	Yes/No
If you are offered employment, the offer may be made subject to your obtaining a full medical clearance (by completion of medical examination) to assess your fitness for the job for which you are applying.	
Do you consent to undergo a medical examination if you are offered employment?	Yes/No

PRIVACY ACT CONSENT

Do you consent to the company retaining the information contained in this application form for the purposes of considering your suitability for any other position that may arise with this company in the future?	Yes/No
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DECLARATION

I.....(full name) declare that to the best of my knowledge the information provided in this application and in any resume enclosed is accurate and I understand that if any false or misleading information is given, or any material fact suppressed, I will not be employed, or if I am employed, my employment may be terminated. [I further understand that any offer of employment if made is conditional on my obtaining a full medical clearance]

Signature: Date:

Section 1: Approved Agency to complete

(For more information please see the [Guide to Completing the Consent Form](#) - <http://www.police.govt.nz/advice/businesses-and-organisations/vetting/forms-and-guides>)

Name of Approved Agency submitting vetting request:

Name of Applicant to be vetted:

Description of Applicant's role:

Applicant's purpose

- | | | | |
|--|--|---|--------------------------------------|
| <input type="checkbox"/> Employee | <input type="checkbox"/> Contractor/Consultant | <input type="checkbox"/> Volunteer | <input type="checkbox"/> Prosecution |
| <input type="checkbox"/> Vocational Training | <input type="checkbox"/> Licence/Registration | <input type="checkbox"/> Visa/Work Permit | <input type="checkbox"/> Other |

What group(s) will the applicant have contact with in their role for your agency?

- | | | | |
|---|----------------------------------|--|--------------------------------|
| <input type="checkbox"/> Children/Youth | <input type="checkbox"/> Elderly | <input type="checkbox"/> Other Vulnerable Adults | <input type="checkbox"/> Other |
|---|----------------------------------|--|--------------------------------|

What is the applicant's *primary* role for your agency?

- | | | | |
|--|---|-------------------------------------|------------------------------------|
| <input type="checkbox"/> Caregiving (Children) | <input type="checkbox"/> Caregiving (Vulnerable adults) | <input type="checkbox"/> Healthcare | <input type="checkbox"/> Education |
| <input type="checkbox"/> Other | | | |

Is this request mandatory under the Vulnerable Children Act 2014 (VCA)?

- | | |
|--|--|
| <input type="checkbox"/> Yes (VCA Core Worker) | <input type="checkbox"/> Yes (VCA Non-Core Worker) |
| <input type="checkbox"/> No (mandatory under other legislation/optional/standard Police Vet) | |

If this is a mandatory Vulnerable Children Act request, please specify the check reason below:

- | | |
|--|---|
| <input type="checkbox"/> New Children's Worker | <input type="checkbox"/> Existing Children's Worker |
| <input type="checkbox"/> VCA Renewal | |

Evidence of Identity (to be completed by agency representative/delegate or identity referee - see [guide](#) for details)

- A primary ID has been sighted (Mandatory – see the [guide](#) for further details)
- A secondary ID has been sighted (Mandatory – see the [guide](#) for further details)
- One form of ID is photographic (Mandatory – see the [guide](#) for further details)
- Evidence of name change has been sighted (if applicable)

OR: If your organisation is able to accept a verified RealMe identity then:

- An assertion of a RealMe identity has been received (see [guide](#) for further information).

In making this request, I confirm that:

- ✓ I have complied and will comply with the [Approved Agency Agreement](#)
- ✓ I am satisfied with the correctness of the applicant's identity
- ✓ I have obtained the Applicant's authorisation to submit this vetting request as set out in section 3 of this form

Approved Agency Authorised Representative:

Name:

Date:

Signature:

Electronic
Signature

Name of Approved Agency submitting vetting request:

Section 2: Applicant to complete and return to Approved Agency

**Denotes a mandatory field*

Personal Information

Details (note: the name you are most commonly known by is your primary name)

*Family name (Primary):

Given name(s):

*Gender: (M) (F) (Other) *Date of birth: (dd/mm/yyyy)

Place of birth: (Town/City/State)

*Country of birth

NZ Driver Licence number:

Previous names: If applicable, please include other alias or alternate names; married name if not your primary name; previous/maiden/name changed by deed poll or statutory declaration.

Family name	First name	Middle names
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Permanent Residential Address

*Number/Street:

Suburb: Post Code:

*City/Town/
Rural District:

Section 3: Applicant to complete and return to Approved Agency

Consent to release information

1. The New Zealand Police may release **any** information they hold relevant to the purpose of this vetting request. This includes:
 - Conviction histories and infringement/demerit reports
 - Active charges and warrants to arrest
 - Charges that did not result in a conviction including those that were acquitted, discharged without conviction, diverted or withdrawn
 - **Any** interaction I have had with New Zealand Police considered relevant to the role being vetted, including investigations that did not result in prosecution
 - Information regarding family violence where I was the victim, offender or witness to an incident or offence, primarily in cases where the role being vetted takes place in a home environment where exposure to physical or verbal violence could place vulnerable persons at emotional or physical risk.
 - Information subject to name suppression where that information is necessary to the purpose of the vet
2. If I am eligible under the Criminal Records (Clean Slate) Act 2004, my conviction history will not be released **unless**:
 - a. Section 19(3) of the Clean Slate Act applies to this request (exceptions to the clean slate regime)
 - b. Section 31(3) of the Vulnerable Children Act 2014 applies to this request (safety checks of core children’s workers).
 - c. The vetting request is made by an individual for the purpose of an overseas Visa/Work Permit as a Privacy Act request authorising the vetting result to be provided directly to the relevant embassy, high commission or consulate.

Please see the [guide](#) for more information regarding the Clean Slate legislation.

3. The Police Vetting Service may disclose new relevant information to the Approved Agency after the completion of the Police Vet in the following circumstances:
 - The disclosure of the newly-obtained information is considered to be justified under the Privacy Act 1993 (if it had existed or been available at the time of the Police vet, it would have been disclosed); and
 - The Police Vetting Service has ascertained that the purpose of the Police vet (e.g. employment role) still exists.

The Vetting Service will endeavour to notify you prior to the disclosure.

4. Information provided in this consent form may be used to update New Zealand Police records.
5. I am entitled to a copy of the vetting result released to the Approved Agency (to be provided by the agency) and can seek a correction by contacting the Vetting Service.
6. The Approved Agency will securely dispose of this consent form, copies of identification documents and the vetting result within 12 months of receiving the result unless a longer retention period is required by legislation.
7. I may withdraw this consent, prior to Police’s disclosure of the vetting result, by notifying the Approved Agency.

For further information, please see the [Guide to Completing the Consent Form](#).

Applicant’s Authorisation:

- ✓ I confirm that the information I have provided in this form relates to me and is correct.
- ✓ I have read and understood the information above.
- ✓ I authorise New Zealand Police to disclose any personal information it considers relevant to my application (as described above) to the Approved Agency making this request for the purpose of assessing my suitability at any time.

Name: _____

Date: _____

Signature: _____

Electronic
Signature

