

SASH Action Plan Jul 2024 - Jun 2025

AHRC Recommendation #	Sub-number	AHRC Recommendation Details	Action	
Recommendation 1	R1.1	The CEO takes direct responsibility for the implementation of these recommendations, including decision-making and monitoring and evaluation of actions taken.	The CEO receives the following reports from the SASH-AB: SASH Evaluation Report , which includes implementation and evaluation of R2.1, R2.2, R2.3, R3.1, R4.2, and the SASH Counselling Audit Report and takes necessary actions in response (refer to R7.2)	
	Governance and Public Reporting	R1.2 & 1.4	An advisory body is responsible for recommending and guiding implementation.	SASH-AB to meet 2 times a year SASH-AB to establish a SASH Working Group
		R1.3	The advisory body reports directly to the CEO includes representatives from: • the university's senior leadership • the student body • academic staff • student services, such as: counselling services, and • frontline sexual assault services.	CEO to review the membership of the SASH-AB. Invite a student to represent the student body.
	R1.5	The development of an action plan involves broad and extensive consultation with all relevant stakeholders and seeks independent expertise where relevant and draws on existing research and best practice.	The SASH Working Group to create and oversee the implementation of an Action Plan Jul 2024 - Jun 2025.	
	R1.5	The advisory body assess and publicly reports on progress on an annual basis.	Annually publish on the website a summary report of the reports provided to the CEO.	
Recommendation 2	R2.1	Students and staff are educated about: 1) behaviours that constitute sexual assault and sexual harassment, 2) consent, 3) respectful relationships, 4) 'violence supportive attitudes' and 5) bystander intervention	Provide training on 1 (Student SASH Course and Staff SASH Module). Report on the implementation in the SASH Evaluation Report .	
			Provide training on 2 (Student SASH Course and Staff SASH Module). Report on the implementation in the SASH Evaluation Report .	
			Provide training on 3 (recording for orientation/video for class). Report on the implementation in the SASH Evaluation Report .	
			Provide training on 4 (recording for orientation/video for class). Report on the implementation in the SASH Evaluation Report .	
	Existing Campaigns	R2.2	A plan is devised to address the drivers of SASH by identifying existing resources and communications campaigns that reinforce key messages for staff and students	Update campaigns and existing resources that address drivers and disseminate information. Include campaigns that address SASH in the context of Public Transport. Report on the implementation in the SASH Evaluation Report.
Education Programs and Communications	R2.3	Education programs and communications • target all levels of the organisation - current and future students, staff, public transport to/from university • is based on best practice and research • is developed and delivered by individuals and/or organisations with expertise in sexual violence prevention • is developed in consultation with students, and • includes measures for evaluating and refining the actions taken.	Cover these points in the SASH Evaluation Report . The SASH - AB to assess implementation against this criteria.	

<p>Recommendation 3</p> <p>Awareness of Reporting Avenues, Support Services</p>	<p>R3.1</p> <p>Students and staff know about support services and reporting processes • widely disseminate information about reporting avenues • widely disseminate information about internal and external services, including: internal counselling services, campus security, local sexual assault services, police, medical centres, hospitals, counselling services and anti-discrimination agencies • ensure that information about internal and external reporting procedures and support services is displayed clearly, in a logical place(s) on the website • ensure that information about internal and external reporting procedures and support services is provided to students as part of their orientation and to new staff as part of their induction/on-boarding • ensure that information about internal and external reporting procedures and support services is accessible to all students and staff, including: people with disability, people from CALD backgrounds, and • develop relationships with external services (local sexual assault service, local hospital) to enable referral of students to these services where necessary.</p>	<p>Roll out compulsory completion of the SASH Course and SASH Module for students and staff which informs students and staff about AAPoly's and external support services and reporting avenues. Include information on the LMS. Report on the implementation in the SASH Evaluation Report.</p> <p>AAPoly Student Counsellors develop and maintain relationships with key support services in Melbourne, Sydney and Perth</p>
<p>Evaluation of awareness</p>	<p>R3.2</p> <p>Activities undertaken are evaluated to increase awareness of support services and reporting processes.</p>	<p>Conducted a student survey 6 weeks into each semester to evaluate student and staff awareness of support services and reporting processes.</p>
<p>Recommendation 4</p> <p>Expert Review</p> <p>Policies and Response Pathways</p>	<p>R4.1</p> <p>External expert review is conducted on the effectiveness of existing policies and pathways, with specific recommendations about best practice responses to SASH.</p> <p>R4.2</p> <p>Draw on sexual violence counselling expertise to develop and review processes for responding to SASH to ensure they: • secure the immediate safety and wellbeing of the individual • are clear and accessible • provide individuals with control over what happens to their report • have the flexibility to suit individual circumstances • provide students with support to continue with their studies • provide specialist support, from someone who has specialist expertise and training, and • accommodate the needs of students from a diverse range of backgrounds.</p>	<p>Review AAPoly's SASH P&P in reference to the changes to the National Code.</p> <p>Provide more accessible avenues through posters to AAPoly's SASH reporting. Provide assurance that students have full control over decisions and will not be pressured in posters. Provide assurance that reports will be dealt with in a timely manner through posters.</p> <p>Review AAPoly's Policy and Procedure and report to the CEO .</p>
<p>Recommendation 5</p> <p>Training - responding to disclosures</p>	<p>R5.1</p> <p>Identify staff members and student representatives most likely to receive disclosures of sexual assault and sexual harassment.</p> <p>R5.2</p> <p>Train these staff members and student representatives in responding to disclosures of sexual assault and sexual harassment, delivered by an organisation with specialist expertise.</p>	<p>Identify staff and students for responding to disclosures training with CASA. Staff and Student Rep.</p> <p>Provide training on Responding to Disclosures to the individuals identified (refer to R5.1).</p>
<p>Recommendation 6</p> <p>Data Management</p> <p>Reports</p>	<p>R6.1</p> <p>Information about individual disclosures and reports of sexual assault and sexual harassment is collected and stored confidentially and used for continuous improvement of processes, including: • details of the complaint/incident • steps taken to respond to the complaint/incident, ie: whether the individual reported to police, whether the perpetrator was moved to a different lecture/tutorial • support or assistance received, ie: whether the person received counselling from university services, whether they reported to police, whether they received support from an external sexual assault service • time taken to respond to the report and/or refer the person to support services, and • any feedback provided by the complainant/respondent in relation to the process. Access to this information is limited to staff members with responsibility for responding to disclosures and reports and those responsible for improving university responses to disclosures and reports.</p> <p>R6.2</p> <p>The CEO is provided with de-identified reports of this data, including any trends or identifiable concerns which arise, along with recommendations for any necessary improvements to processes.</p>	<p>Include a Reporting Incidents Audit in the SASH Counselling Audit covering the outlined points (R6.1).</p> <p>Based on the Reporting Incidents Audit in the SASH Counselling Audit, provide the CEO with a report on de-identified incidents, including any trends or identifiable concerns which arise, along with recommendations for any necessary improvements to the process.</p>

<p>Recommendation 7</p> <p>Audit of Counselling Services</p>	<p>R7.1</p>	<p>Audit the counselling services to assess: • the capacity of counselling services to respond in an appropriately timely manner, and • how many counselling staff have received training in working with sexual assault survivors. Collect data on: • the average length of time students are required to wait, and • the number of urgent/crisis requests for counselling received. This data is assessed to determine whether additional counselling services are required.</p>	<p>Conduct a SASH Counselling Audit annually to check that the outline points (R7.1) have been adhered to and the points regarding reporting incidents have been covered (refer to R6.1).</p>
<p>Resourcing</p>	<p>R7.2</p>	<p>Additional resources are in place as soon as practicable if required.</p>	<p>Provide the SASH Counselling Audit to the CEO on the outlined points with a statement on whether further counselling resources are required.</p> <p>The CEO to report to the BOD on whether additional counselling services are required.</p>
<p>Recommendation 8</p> <p>Survey</p>	<p>R8.1</p>	<p>Participate in an external student survey of SASH at three yearly intervals to track progress.</p>	<p>Participate in the next HEPP-QN survey</p>