Context

In response to Recommendation 7 of the Australian Human Rights Commission’s (AHRC’s) 2017 report, “Change the Course: National Report on Sexual Assault and Sexual Harassment at Australian Universities” (“the Report”), Monash University’s Campus Community Division engaged KPMG to conduct an internal audit of Counselling Services available to students.

The AHRC’s investigation was conducted at the request of Australia’s 39 universities, and involved an independent survey of university students to gain an understanding of the nature, prevalence and reporting of sexual assault and harassment at Australian universities. It also looked into the effectiveness of university services and policies that address sexual assault and harassment on campus.

Objective and Scope

The objective of this internal audit was to review and analyse Monash University’s Australian Counselling Services in accordance with Recommendation 7 of the AHRC’s “Change the Course “ report. This included consideration of:

- The structure of the University’s Counselling Services team, identifying and noting its growth over the period 1 July 2015 to 31 August 2017;
- Monash University’s booking system for students to utilise to arrange appointments with counsellors;
- Monash University’s use of data from its booking systems in terms of monitoring and analysis; and
- Counselling staff training over the period on working with sexual assault survivors.

Limitation of Scope

Counselling services offered at the Monash Berwick campus have not been included in this audit as the campus will be transferred to Federation University at the end of 2017.

Recommendation 7

Within six months of this report, but as soon as possible, universities should conduct an audit of university counselling services to assess:

- the capacity of university counselling services to respond to students’ requests for counselling in an appropriately timely manner, and
- how many university counselling staff have received training in working with sexual assault survivors.

As part of this audit, universities should collect data on:

- the average length of time students are required to wait to see a university counsellor, and
- the number of urgent/crisis requests for counselling received.

This data should be assessed to determine whether additional counselling services are required to meet the urgent needs of students who have experienced sexual assault or harassment.

If additional counselling services are required, universities should ensure that these additional resources are in place as soon as practicable.

Attention

This report was prepared solely for your use in accordance with our engagement contract and may not be distributed without our consent. KPMG does not accept responsibility for any third party or any unintended use.
The AHRC Report

In August 2017, the AHRC published a report entitled “Change the Course: A National Report on Sexual Assault and Sexual Harassment at Australian Universities”. The report was based on data collected through a national survey of university students throughout the second half of 2016. It focussed on the nature, prevalence and reporting of sexual assault and harassment at Australian Universities.

The report produced nine recommendations for Australian Universities to reduce the incidences of sexual assault, and increase the reporting and support available for victims. These recommendations focussed on five areas of action:

1) Leadership and governance; including strong and visible commitment from university leaders, and transparent implementation of the recommendations,

2) Changing attitudes and behaviours; including the development of measures to prevent sexual assault and harassment,

3) University responses to sexual assault and harassment; including implementation of effective processes for responding to sexual assault and harassment,

4) Monitoring and evaluation; including ensuring steps are taken to prevent and respond to sexual assault and harassment, and that improvements to these methods are made over time,

5) Residential colleges; including the development of specific steps to improve the culture and risk management within residential services.

Monash University Counselling Services Restructure

In January 2017, prior to the publication of the AHRC report, Monash University Counselling Services underwent a restructure designed to provide a greater number of counselling appointments with greater flexibility to students. The Counselling Services were physically relocated to be incorporated in the University Health Services department at the Clayton, Caulfield and Peninsula campuses to provide more integrated services.

Additionally, the model of employment was changed whereby counselling services can be accessed via a range of providers (see below). There are 24 counsellors currently based at the Clayton campus. Other health services staff assist in providing mental health services to students, including:

- Eight nursing staff (including triage), to assess students requesting urgent or priority appointments;

- Twelve General Practitioners, to provide mental health support and counselling referrals for students;

- Two Psychiatrists; and

- Two South Eastern Centre Against Sexual Assault (SECASA) Counsellors.

The new structure of the counselling services can be summarised below:

```
<table>
<thead>
<tr>
<th>Monash Employed Counsellors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contractors</td>
</tr>
<tr>
<td>Licence Holders</td>
</tr>
<tr>
<td>Triage Nurse</td>
</tr>
<tr>
<td>General Practitioners</td>
</tr>
<tr>
<td>SECASA Counsellor</td>
</tr>
<tr>
<td>Psychiatrists</td>
</tr>
</tbody>
</table>
```
### Recommendation 7 - AHRC's “Change the Course“ report

*Recommendation 7* of the Report outlined four components of university counselling services to be included in an audit. The table below provides a summary of how Monash University Counselling Services considers that these matters have been addressed:

<table>
<thead>
<tr>
<th>AHRC Recommendation 7 - Audit Areas</th>
<th>Observations</th>
</tr>
</thead>
</table>
| The capacity of university counselling services to respond to students’ requests for counselling in an appropriately timely manner | The following were noted in relation to the capacity of Counselling services within the University’s Clayton Campus:  
• 24 qualified Counsellors;  
• Use of the Zedmed patient booking system to highlight availability of sessions;  
• Multiple avenues for students to seek assistance (i.e.: in person, on-line, mobile app, Self Check-in facility); and  
• Adequate access to professional consulting suites within the Clayton campus. |

| How many university counselling staff have received training in working with sexual assault survivors? | 18 Counselling staff had received SECASA facilitated training in June 2017, with the remaining 6 counselling staff scheduled to receive the training in November 2017. |

| Universities should collect data on the average length of time students are required to wait to see a university counsellor | Data on student wait times has not to date been recorded, however all urgent presentations are seen. Please refer to *Detailed Finding 2.1* in relation to this observation. |

### Observations (Cont.)

Universities should collect data on the number of urgent / crisis requests for counselling received

Data is collected on urgent student requests through the Triage Nurse who records the nature of the appointment (triage or mental health triage).

### Finding

Internal Audit identified the following finding as part of this internal audit:

<table>
<thead>
<tr>
<th>Description</th>
<th>Issue Owner</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wait Times - Data on student wait times was not recorded however all urgent presentations are seen</td>
<td>Director, Counselling and Mental Health Programs, Director, University Health Services</td>
<td>30 June 2018</td>
</tr>
</tbody>
</table>

Findings are reported on an exception basis.
**Types of Appointment**

The types of appointments available to students have changed as part of the restructure so that each day, each counsellor has specific blocks of time segregated in their calendar in Zedmed as follows:

- ‘Same-day’ appointments, coloured in pink, only able to be booked on the same day as a student request for an appointment. There are 19 of these available per day across all Monash campuses.
- ‘Three-day’ appointments, coloured in red, only able to be booked where a student in the day/s previous had requested a ‘same-day’ appointment where one was not available; and
- Recurring appointments, coloured in green, only able to be booked by students who have already had at least one appointment.

This system has been designed to enable a greater volume of students to be seen as soon as possible (i.e.: within three days).

**Urgent Appointment Requests:**

Where there is an urgent or critical need identified, or a same day appointment is requested, under the new structure the student is referred to a triage nurse.

The triage nurse is able to discuss the student’s need for counselling services, and take one or more of the following actions:

- Liaise with the Counselling Coordinator to fit the student in a previously unavailable time for that day;
- Book the student into an appointment with a campus General Practitioner, trained in mental health;
- Book a student in to see a SECASA trained counsellor; and
- In extreme cases the triage nurse at the Clayton Campus can contact psychiatric triage at nearby Monash Medical Centre and provide immediate psychiatric support to a student.
- Book them an appointment for the next day;
Counselling Services across Monash University Campuses

All Victorian campuses’ counselling services are managed centrally from the Clayton campus University Health Services (UHS).

We have been informed that 2017 Triage Nurse facility trialed at Clayton will be implemented at the Caulfield campus.

See below for a summary of how urgent counselling requests are addressed at each Australian campus:

<table>
<thead>
<tr>
<th>Campus</th>
<th>Process for urgent counselling requests</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caulfield</td>
<td>Reception staff consult the Counselling Coordinator or Senior Counsellor to facilitate an appointment for an urgent student need. The nurse on campus assists in ‘de-escalating’ the student’s stress by removing them from the reception area into a more quiet environment. If no counsellor is immediately available the student can be referred to the GP while the Counselling Coordinator creates space for the student to be seen.</td>
</tr>
<tr>
<td>Peninsula</td>
<td>As there is a smaller student population, part of the counsellors’ daily work schedule include activities (for example replying to ‘Counselling Help Online’ requests). These are flexible and where a student has an urgent need counsellors defer these until a later date to prioritise urgent, in-person requests.</td>
</tr>
<tr>
<td>Parkville</td>
<td></td>
</tr>
</tbody>
</table>

We were informed by UHS, based on unaudited data extracted from the Zedmed system, that Counselling Help Online requests have increased from 727 in 2015 to 975 in 2017.

Counsellor Sexual Assault Training

By the end of 2017 management have stated that all counselling staff and some additional Health Services staff (i.e. GPs, Triage nurses) will have completed a SECASA facilitated training session to enable counsellors to provide additional support to students who have experienced sexual assault or harassment. This session was first delivered in June 2017 and is proposed to be repeated in November. This training covers:

- Principles of intervention and the foundations for safe sexual assault counselling;
- Impacts of sexual assault (emotional, behavioral, interpersonal, physical);
- Post Traumatic Stress Disorder (PTSD) and the impact of trauma;
- How counselling staff should respond to disclosures of sexual assault or harassment; and,
- Information on the varied Centers Against Sexual Assault (CASAs) around metropolitan and regional Victoria, and the services provided by CASAs for victims of sexual assault and family violence.

UHS Data:

We were also informed by UHS that according to unaudited data extracted from the Zedmed system that the number of face-to-face Counselling sessions provided has grown since 2015:

<table>
<thead>
<tr>
<th>Total number of face-to-face sessions</th>
<th>Qty.</th>
<th>% Growth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan. to Oct. 2015</td>
<td>10,649</td>
<td>N/A</td>
</tr>
<tr>
<td>Jan. to Oct. 2016</td>
<td>13,002</td>
<td>22%</td>
</tr>
<tr>
<td>Jan. to Oct. 2017</td>
<td>15,088</td>
<td>16%</td>
</tr>
<tr>
<td><strong>Total growth Jan. 2015 – Oct. 2017</strong></td>
<td><strong>42%</strong></td>
<td></td>
</tr>
</tbody>
</table>
Wait times

Context

The Monash University Counselling Services booking system (Zedmed) records appointments for all staff and students to see university counsellors. Zedmed records student appointment times, and student check-ins for their appointment. Zedmed is synced to the desktop computers of the University Health Services staff and reception.

“Self-check-in” booths at the entrance of the University Health Services (UHS) also inform the Zedmed booking system and Health Services staff when patients have arrived.

This data recorded in Zedmed is used to inform monthly reporting on:
• Appointment fulfilment;
• Proportion of counsellors’ time spent in consultation with students; and
• Growth in demand for appointments.

Finding

Through discussions with key stakeholders involved in the appointment booking process and generating monthly data, Internal Audit noted that Zedmed currently has no capability to capture wait times for students who are either:

• Seeking an initial appointment; or
• Seeing the Triage nurse where an appointment on the same day is being sought.

The Zedmed system has a limitation which does not allow the recording of the date and time when a student first requests an appointment, to then compare it to when the student is actually seen.

Impact

As discussed earlier in the report, the triage nurse model provides for urgent / crisis counselling sessions to be allocated to students on the same day. Monash University Counselling and Health Services are unable to accurately measure how long students may be required to wait for a non-urgent / crisis appointment.

Without access to this data, no specific monitoring of wait times is occurring, presenting a risk that unacceptably long wait times are not identified and remediated.

Recommendation

Internal Audit recommends that Management considers the following:
• UHS to explore how wait times of student requests for appointments can be monitored.
• Management should seek advice as to the development of appropriate performance thresholds to monitor and enhance performance.

Agreed management action

• UHS to explore how wait times of student requests for appointments can be monitored. UHS to implement wait time monitoring.

Responsibility: Director, Counselling and Mental Health Programs and Director, University Health Services

Remediation date: 30 June 2018
Appendix 1 - Scope

At the request of Monash University Management, KPMG have performed an internal audit of the University’s Counselling Services.

Objective

The objective of this audit is to review and analyse Monash University’s Counselling Services in accordance with Recommendation 7 of the AHRC’s “Change the Course” report:

- Recommendation 7

  Within six months of this report, but as soon as possible, universities should conduct an audit of university counselling services to assess:
  - the capacity of university counselling services to respond to students’ requests for counselling in an appropriately timely manner, and
  - how many university counselling staff have received training in working with sexual assault survivors.

As part of this audit, universities should collect data on:
- the average length of time students are required to wait to see a university counsellor, and
- the number of urgent/crisis requests for counselling received.

This data should be assessed to determine whether additional counselling services are required to meet the urgent needs of students who have experienced sexual assault or harassment.

If additional counselling services are required, universities should ensure that these additional resources are in place as soon as practicable.

Source: “Change the Course” report, AHRC 2017 page 21

Scope

The scope of the internal audit includes consideration of the following:

- The structure of the University’s Counselling Services team, and identifying and noting its growth over the period 1 July 2015 to 31 August 2017;
- Monash University’s booking system for students to arrange appointments with counsellors;
- Monash University’s use of data from its booking systems in terms of monitoring and analysis; and
- Counselling staff training over the period on working with sexual assault survivors.

Approach

This internal audit will be performed based on the following approach:

- Discussion with key personnel and stakeholders involved in Counselling Service provision process;
- Obtaining data from the University’s booking system and performing an analysis to ascertain:
  - Average waiting times for the Period, looking for trends;
  - The number of “urgent / crisis” requests for counselling received;
  - Review the University’s assessment on whether “additional counselling services are required to meet the urgent needs of students who have experienced sexual assault or harassment”; and
- Review of counselling staff training records over the period to ensure consistency of training received over time and for evidence of training on “working with sexual assault survivors”;
- Development of draft report for management review and comment;
- Submission of the final report.

Internal control structure

Due to the inherent limitations of any internal control structure, it is possible that fraud, error or non-compliance with laws and regulations may occur and not be detected. Further, the greater internal control structure has not been reviewed in its entirety and, therefore, no opinion or view is expressed as to the effectiveness of the greater internal control structure.

The procedures performed were not designed to detect all weaknesses in the control structure as they are not performed continuously throughout the period and the tests performed on the control structure are on a sample basis.
Appendix 2 - Consultations

The table below outlines Monash University personnel who were involved in discussions and contributed to the findings detailed in this report.

<table>
<thead>
<tr>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director, Campus Community</td>
</tr>
<tr>
<td>Director, University Health Services</td>
</tr>
<tr>
<td>Director, Counselling and Mental Health Programs</td>
</tr>
<tr>
<td>Manager, Safer Community Unit Monash University</td>
</tr>
<tr>
<td>Head Receptionist, Monash University Health Services</td>
</tr>
<tr>
<td>Triage Nurse, Monash University Health Services</td>
</tr>
</tbody>
</table>

Counselling Services Internal Audit Report Distribution:

<table>
<thead>
<tr>
<th>Distribution for Action</th>
<th>Distribution for Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director University Health Services</td>
<td>Chief Operating Officer</td>
</tr>
<tr>
<td>Director Counselling and Mental Health Program</td>
<td>Director Campus Community</td>
</tr>
</tbody>
</table>
The contacts at KPMG in connection with this Internal Audit Report are:

**Adrian Gibby**
Partner
agibby@kpmg.com.au

**Scott Campbell**
Partner
agibby@kpmg.com.au

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