Australian National University

Feedback Findings and Actions Report

2025 Change Implementation Plan

Residential Experience Division

Reporting period: 18 September 2025 – 18 September 2026

Purpose

This document records the outcomes of the Post-Implementation Review (PIR) undertaken for the Residential Experience Division Change Implementation Plan.

It provides a summary of feedback received through the review process, outlines how that feedback has been analysed and considered, and documents the actions, learnings and responses arising from the review.

The PIR supports continuous improvement by:

- capturing staff experiences of implementation;
- identifying strengths, challenges and opportunities for improvement;
- documenting actions arising from the review;
- identifying lessons to inform future change activity;
- recording matters that cannot be actioned and the rationale for those decisions; and
- supporting transparent communication of outcomes to staff and stakeholders.

The PIR is not intended to revisit or reopen approved decisions. Rather, it provides an opportunity to understand how implementation has been experienced in practice and identify opportunities to improve future organisational change activity.

Context

The Residential Experience Division (RED) undertook formal change in 2025. On Friday, 6 August 2025, the University released an Organisational Change Proposal for RED. The formal consultation period ran from 6 August 2025 to 20 August 2025.

An Implementation Plan was then developed, which reiterated the key details of the proposal, outlined the consultation and changes arising from the consultation process, and detailed the implementation schedule in line with the Organisational Change and Consultation provisions of The Australian National University Enterprise Agreement 2023-2026 (Enterprise Agreement). The RED Change Implementation Plan was published and discussed with RED staff on 18 September 2025.

The primary objective for the changes was to transition RED from three operating models to one – the target outcome being a single, equitable and consistent operating model for all ANU residences, which maintains the distinctive identities of each individual residence. This transition would ensure the Division can deliver consistently high student experience outcomes across all ANU residences, and that staff are adequately supported through role clarity and reasonable workloads.

The proposal and Implementation plan recommended transitioning to a single operating model – ANU-managed residences, support by UniLodge staff in front-of-house services – providing

greater consistency, accountability, and alignment with the University's strategic goals for operational efficiency and student experience.

Implementation of the plan commenced from mid-September 2025 and continued through to September 2026. Key implementation activities included several transition stream meetings held regularly throughout the transition period, the development of the RED psychosocial working group, and the StarRez migration and uplift project. The majority of implementation and transition activities have now been completed, with operations now returning to BAU, with standard monitoring mechanisms and ongoing support in place.

Summary of PIR Feedback Process

Purpose of the Review

Per clause 70.19 of the Enterprise Agreement this review is required to assess:

a) if the original objectives of the change process have been met;

b) The effect onto staff member workloads;

c) the effect to Aboriginal and Torres Strait Islander employment or diversity;

d) the impact on casualisation; and

e) if any improvements can be made to the process for the future.

All questions above were included in the survey to ensure direct feedback on these items. Additional questions were asked related to effectiveness of communication and management of psychosocial risks.

A copy of the survey is attached at **Appendix A.**

Consultation Methods

On Monday 17 August 2026 staff were invited and encouraged to participate in the Post Implementation Review survey. The survey was open for two weeks and closed at 11:30pm on Sunday 30 August 2026. Staff received several reminders during the review period (through emails and announcements at the monthly Divisional meeting) and were encouraged to seek support from various channels should they need it.

Support and additional feedback channels included the anonymous RED suggestion box, the local Health and Safety Representative (HSR), Millan Pintos-Lopez, the local HR representative, Mika Yamaguchi (HRBP@anu.edu.au), or directly to the Chief Residential Experience Officer.

Implementation updates and these channels were regularly provided to staff over the past year and were encouraged to be utilised through the fortnightly RED regular update from the CREO and at monthly division meetings.

Overview of Feedback Received

Twenty-nine (29) responses were received to the Post-Implementation Review (PIR) survey out of a total of fifty-seven (57) staff (including casuals). Eighteen (18) were fully completed, with a consistent drop-off after the initial questions. Most of the substantive questions were answered by 19–20 respondents (35% response rate).

Feedback was broad rather than obviously concentrated in a single team or role. Respondents included both those whose positions were directly listed as impacted in the Implementation Plan (16 respondents) and those whose were not (8). This suggests that the change was felt beyond the specific roles the plan targeted, and that communication of the change was not limited to those impacted.

Overall sentiment was mixed but constructive. A majority of respondents rated most process measures favourably and recognised that the core operating model objective had been delivered. Respondents consistently and specifically raised workload as an area requiring further attention.

Feedback was both positive and negative and all data has been included in the summary.

Findings, Responses and Actions

Per clause 70.19 of the Enterprise Agreement, this report responds directly to those applicable criteria, as indicated in **Table 1** below.

Table1: Assessment of Feedback Against Clause 70.19

Criteria	Responses/key themes	Findings/outcome
If the original objectives of the change process have been met	Of 19 respondents, 65% agreed or strongly agreed that objectives have been met. 15% respondents were neutral, 15% disagreed, and 5% responded as 'not applicable'. The operating-model consolidation is broadly recognised as having been successfully delivered. Individual observations noted the cost and disruption of relocating and restructuring staff, and lack of clarity around local objectives of the change.	The original objectives of the change process are recognised as achieved. The individual observations indicate minority variations in experience at the team level.
The effect on staff member workloads	Of 20 respondents, 75% reported an increase (of which 40% noted a significant increase). 25% of respondents noted no change. Many responses suggest that workload has increased since the change – and for some this increase is perceived to be significant. This has been felt through redistribution of tasks between roles and the adding of responsibilities to some roles.	The experience of the majority of respondents is that workload has increased. Attempts to track and recalibrate workload have been made throughout implementation, led by the RED Psychosocial Working Group, with 'workload monitoring' a standing agenda item. Strategies developed by this group to better manage workloads need to be more widely and rigorously deployed.
The effect to Aboriginal and Torres Strait Islander employment or diversity	Of the 20 respondents to the question concerning Aboriginal or Torres Strait Islander employment, 45% were unsure or did not wish to comment, 20% considered it not applicable, 20% considered it about the same. Only three staff responded that the effects were either positive or negative. 20 staff also responded to the question concerning diversity outcomes. Of these, 35% were unsure or did not wish to comment, 25% felt it was about the same, 20% felt the outcomes were either	While the results are largely ambiguous – in both questions, most respondents perceived no change or did not feel qualified to comment on the change – the results suggest that questions of equity and diversity were not central to staff concerns about institutional change.

Criteria	Responses/key themes	Findings/outcome
	positive or very positive. 10% of responses (2 respondents) considered the outcomes to be very negative. While one respondent commented that diversity and inclusion was not explicitly referenced in the Implementation Plan, several responses were received noting that RED's existing inclusive culture continued through the change process. Of the negative responses received, no comment was provided to make clear the reasons for the response.	The theme of a consistent inclusive and diverse culture at RED is heartening as a marker of how impacts of the change on RED staff and teams were highly localised. It also suggests that the considerable efforts invested in maintaining this culture throughout the process were largely successful. It is recognised however that for future change there is an opportunity for cultural uplift to be a key consideration.
The impact on casualisation	Responses to this question were mixed. Of the 20 respondents, 35% were not applicable or unsure/did not wish to comment, 25% felt the change made no significant impacts, 25% felt the impacts were negative, 15% felt they were positive. Most comments provided did not relate specifically to casual or fixed term staff impacts. Instead, they related to general workload concerns, or the contract-staff structure implemented as an adjunct to the formal change.	As there was no consistent theme in the survey responses related to casualisation, the true impacts of the RED change implementation on casualisation are better reflected in headcount data, of which there has been no major impact.
If any improvements can be made to the process for the future.	Communication and leadership were positively received. In addition to the quantitative responses (of 20 respondents, a significant majority considered the communications either excellent (60%) or good (15%)), this was also independently raised in comments by five respondents, who praised the clarity, openness and care shown throughout the process. The strategic shift to a single operating model was seen as necessary and successfully delivered. However, some responses suggest that individual employment decisions were not always handled fairly or consistently, and that the shift in ANU policy (reversing job losses) midway through the change caused confusion and potential for harm.	The broadly positive response to leadership communication suggests that the broad model for consultation, including pre-change discussion and multiple open lines of communication throughout (including an avenue for anonymous feedback), should be replicated for any future change – noting that there is always room for improvement. The perception of fairness or consistency in relation to individual employment decisions is a matter to be addressed directly with affected staff. The specific instances should be analysed and any learnings incorporated into future process.

Theme 1: Broad perception of workload increase

What We Heard

Six respondents independently described the same underlying pattern: workload not reduced but redistributed across fewer or different staff. The mechanisms raised included additional administrative tasks (such as room allocations) added to residential staff roles during peak periods; a newly formed two-person team absorbing a significant backlog with limited flexibility to adjust; increased operational volume from migration of the Lodges and connected systems project work; and a general anecdotal sense of colleagues being 'constantly busy' without enough time in the day.

These kinds of response track closely with the quantitative data: 75% of respondents reported an increase in workload (40% significant, 35% minor), 25% reported no change, and none reported a decrease.

Assessment

It is acknowledged that some new administrative tasks will take some more time for staff to become comfortable with. The first year of implementation was always going to be more time consuming for staff who had to participate in additional transition meetings and training for new tasks. This is the implicit nature of change.

The StarRez migration and uplift project was also a significant contributor to workload. Now that these projects are completed, it will be important to continue to assess whether that additional workload is now alleviated. It will also be important to track if staff are still undertaking activities that are no longer required, or of strategic importance.

Outcome

✓ Action to be implemented

☐ Learning to inform future change

☐ No further action

The Psychosocial Working Group (PWG) already identified this as an area for continued action. A specific focus for the PWG in 2027 will be to continue to monitor workloads, upskill staff and supervisors with time management techniques, provide additional StarRez training and introduce further automation to reduce manual processing.

Actions and Commitments

Action	Owner	Timeframe
RED session on time management	*CREO*	*Q1/2027*
Continuation of Psychosocial Working Group to *monitor workload actions*	*CREO*	*Ongoing*
StarRez training	*Head, Residential Services*	*Q1/2027*
Suggest to People & Culture that future University change proposals include explicit reference that the implementation phase of change may increase some workloads for the short term and this should be transparently communicated to staff.	CREO	Q4/2026

Theme 2: Change communication and leadership were positively received

What We Heard

This was the strongest and most consistent positive theme in the survey. At least four respondents specifically praised the openness, clarity and care shown throughout the process, while others described the division as transparent, considered, and supportive of affected staff. One respondent favourably contrasted the RED implementation against a change process they'd experienced elsewhere in the University. Two further comments were similarly positive.

This result was strongly supported by the quantitative data: 75% rated communication from local leadership as 'excellent' or 'good' (60% excellent), and 80% rated the opportunities they had to provide feedback as 'excellent' or 'good' (50% excellent).

Assessment

This is a positive sign for the division and an indicator that consistent and caring communication during change is imperative.

Outcome

Select the most appropriate outcome category:

☐ Action to be implemented

☐ Learning to inform future change

✓ No further action

Actions and Commitments

Action	Owner	Timeframe
Continue regular staff updates, the PWG and division meetings	CREO	Ongoing

Theme 3: Role clarity, scope and documentation were not fully resolved

What We Heard

Three respondents raised distinct instances of the same underlying issue from different angles: one described an experience of unclear role boundaries affecting a working relationship; another reported that role scope post-change had grown beyond the benchmarking originally used to set remuneration; and a third commented they had not received a final, updated Position Description following the change.

Assessment

Due to the small number of individual staff experiencing this issue, a localised approach with individual supervisors through the Focus process will likely be of the most benefit. All Position Descriptions for new and refreshed roles were provided to all RED staff as Appendix 6 in the RED Implementation plan.

Outcome

Select the most appropriate outcome category:

✓Action to be implemented

☐ Learning to inform future change

☐ No further action

Actions and Commitments

Action	Owner	Timeframe
Supervisors to discuss with staff during their Focus conversations if there are concerns with individual role clarity and workload management. Supervisors can then also discuss this with the CREO and Director, RED if required.	*Supervisors and staff*	*End of year Focus review period.*

Theme 4: Individual employment decisions were not always handled fairly or consistently

What We Heard

Two respondents made comments relating to the unfairness or inconsistency of employment decisions. One relates to the University decision to roll back job losses midway through the change process, which created uncertainty and the potential for psychosocial harm among those affected. The other was specific to the respondent's role, which was directly affected by this University-level decision, and describes the negative impacts of the reversal.

While no survey question measured this theme directly, it is worth noting that only 68% of respondents (n19) agreed concerns raised during implementation were addressed effectively (47% strongly), leaving a meaningful minority who did not.

Assessment

It is acknowledged that the integrity of the original change proposal was impacted due to the broader University decision to roll back on the decision related to forced redundancies. This had an impact on some staff outside of the Division's control, particularly related to ensuring that their amended roles in the Implementation Plan were fit for purpose.

It is natural that there will be staff who feel their concerns were not addressed effectively if no change was implemented as a result of their feedback. The learning here is that better efforts can be made in communicating the reasons for decisions.

Outcome

Select the most appropriate outcome category:

☐ Action to be implemented

✓Learning to inform future change

☐ No further action

Provide a brief explanation of the decision and rationale.

Actions and Commitments

Action	Owner	Timeframe
To continually improve communications on detailing the rationale for decisions made.	*CREO*	*Ongoing*

Theme 5: Existing inclusive team culture continued through the change

What We Heard

Two respondents separately noted their team's existing inclusive, diverse culture continued through the change without disruption. One response was specific to the newly-established

ANU Lodges team. The other was ambiguous as to whether it referred to a local team, or to the RED team more broadly.

While 35% of respondents were unsure or 'did not wish to comment' on the quantitative diversity question, the most common definitive response to that question was that diversity remained 'about the same' following the change (25%), with a further 20% rating the impact as positive (15% very positive, 5% somewhat positive).

Assessment

This is a positive sign for the division and an indicator that the RED staff culture is strong. This is a testament to the many hardworking staff in the division who have remained focused and engaged with the purpose of the division which is to 'To provide an exceptional and memorable on-campus living experience for our students. We build and nurture safe, supportive residential communities, empowering our students to succeed at ANU – and into the future'.

One area the division can continue to improve is through our diversity. It is recommended that the division apply again (were unsuccessful in 2025) for the ANU Indigenous staff internship program.

Outcome

Select the most appropriate outcome category:

✓ Action to be implemented

☐ Learning to inform future change

☐ No further action

Actions and Commitments

Action	Owner	Timeframe
Re-apply for Indigenous Internship program	*CREO*	*When applications open*

Summary of Outcomes

The table below provides a consolidated summary of how feedback has been addressed.

Action	Owner	Timeframe
RED session on time management	*CREO*	*Q1/2027*
Continuation of Psychosocial Working Group to *monitor workload actions*	*CREO*	*Ongoing*
StarRez training	*Head, Residential Services*	*Q1/2027*
Suggest to People & Culture that future University change proposals include explicit reference that the implementation phase of change may increase some workloads for the short term and this should be transparent for staff.	CREO	Q4/2026
Continue regular staff updates, the PWG and division meetings	CREO	Ongoing

Supervisors to discuss with staff during their Focus conversations if there are concerns with individual role clarity and workload management. Supervisors can then also discuss this with the CREO and Director, RED if required.	*Supervisors and staff*	*End of year Focus review period.*
To continually improve communications on detailing the rationale for decisions made.	*CREO*	*Ongoing*
Re-apply for Indigenous Internship program	*CREO*	*When applications open*

These action items will be monitored as a standing item of the RED Psychosocial Working Group (PWG) and reported back to staff through the regular RED update from the CREO.

Psychosocial Considerations

As an outcome of the Implementation Plan, it was determined that staff would benefit from the establishment of a RED Psychosocial Working Group (PWG). The Terms of Reference for this group are attached at **Appendix B.** Staff nominated to participate in the group, which met regularly with the Chief Residential Experience Officer (CREO) from November 2025 and are continuing to meet. Meetings of the PWG are an opportunity for staff to raise psychosocial issues and to hold senior management to account. Minutes, relevant documents and actions from all meetings were regularly shared with all RED staff through the CREO's fortnightly RED update emails.

The primary outcome for the group was the development of a psychosocial hazard traffic light report specific to the change implementation. The PWG developed the report collaboratively and then reviewed actions and progress taken during meetings. The latest report is attached at **Appendix C.** Following this review, the PWG will continue, transitioning to BAU, to ensure that psychosocial hazards are actively monitored and improved upon going forward.

As per comments above, a specific focus for the PWG in 2027 will be to continue to monitor workloads, upskill staff and supervisors with time management techniques, and introduce further automation to reduce manual processing.

Next Steps and Communication

The key priority for the division is to continue to monitor workloads and implement the actions raised in the Post Implementation Review (PIR).

Actions arising from the PIR will be documented and tracked through the Psychosocial Working Group (PWG) and the associated risk registers and traffic light reports. The CREO has accountability for the delivery of these actions.

When actions are completed, this will be communicated to staff through the regular RED email updates and at division meetings.

Upon release of the PIR staff are encouraged to discuss any concerns with their supervisor, the CREO or Director, RED. Staff can still also continue to utilise the anonymous RED suggestion box, contact our local Health and Safety Representative (HSR), Millan Pintos-Lopez, or our local HR representative, George Guest (HRBP@anu.edu.au).

Any future proposals involving workforce variation or substantial organisational change will be progressed in accordance with the University's approved change governance processes.

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Appendix A

PIR Survey – Final Questions

Introduction and consent

Completion of this survey is voluntary. All responses are anonymous, and where identifiable information is submitted, it will be treated confidentially and handled in accordance with applicable privacy requirements.

The University will take reasonable steps to maintain the confidentiality of information provided. However, confidentiality may be limited where information is disclosed that indicates a serious and imminent risk of harm to yourself or others, involves incidents of gender-based violence, sexual misconduct, child safety concerns, or other matters that the University is required to respond to or report under applicable laws, policies, or regulatory obligations. In such circumstances, information may need to be shared with appropriate University staff or external authorities to ensure safety, fulfil legal obligations, or enable appropriate support and response.

If you are affected by any issues raised in this survey, you are encouraged to access appropriate support services available through the University or in the broader community.

This survey will take approximately 5 to 10 minutes to complete.

1. **To what extent do you agree with the following statement:**

   The original objectives of the Implementation Plan have been met in the area I am providing feedback for.

Response scale:

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Not applicable

Please provide any context to your answer on whether the objectives of the Implementation Plan have been met.

2. **To what extent has the implementation impacted staff workloads in your area?**

- Significant decrease
- Minor decrease
- No change
- Minor increase
- Significant increase

- Not applicable

Please provide any context to your answer on the impact on staff workloads in your area.

3. **To the best of your knowledge, what impact, if any, has the implementation had on Aboriginal and Torres Strait Islander staff, including employment opportunities and participation? Please comment only on impacts you have directly observed or experienced.**

Response scale:

- Significant positive impact
- Some positive impact
- No impact
- Some negative impact
- Significant negative impact
- Unsure / do not wish to comment

Optional comments:
Please provide any further comments about your response.

4. **To the best of your knowledge, what impact has the implementation had on diversity and inclusion outcomes in your area?**

For the purpose of this review, diversity and inclusion outcomes may include equitable access to opportunities, representation of diverse perspectives, cultural safety, accessibility, and the recruitment, retention, and development of staff from diverse backgrounds.

Response scale:

1. Significant positive impact
2. Some positive impact
3. No impact
4. Some negative impact
5. Significant negative impact
6. Unsure / do not wish to comment

Optional comments:
Please provide any further comments about your response.

5. **To the best of your knowledge, what impact has the implementation had on the use of casual and fixed-term employment in your area?**

This may include changes in the number of casual or fixed-term staff and reliance on these employment arrangements.

Response scale:

- Significant increase
- Some increase
- No change
- Some decrease
- Significant decrease

- Unsure / do not wish to comment

Optional comments:
Please provide any further comments about your response.

6. ***To what extent do you agree with the following statement?***
7. ***I was aware of the psychosocial controls that were put in place to address psychosocial risks associated with the implementation plan.***

Response scale:

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Not applicable

8. ***Are there any additional control measures you believe would have been useful in managing psychosocial risks?***

Free text

9. **Thinking about the overall Implementation Plan and the process of its implementation, what worked well?**

Free text

10. **Thinking about the overall Implementation Plan and the process of its implementation, what could be improved?**

Free text

11. **How would you rate the communication you received from your local leadership (your supervisor, manager, or area leadership) during implementation?**

- Terrible
- Poor
- Average
- Good
- Excellent
- Not applicable/unsure

12. **How would you rate the opportunities you had to provide feedback throughout implementation?**

- Terrible
- Poor
- Average
- Good

- Excellent
- Not applicable/unsure

Please provide any context to your rating of the communication and engagement.

To what extent do you agree with the following statements?

13. **The timelines for the transition were realistic and allowed staff to adapt effectively.**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Not applicable / unsure

14. **I had access to the support I needed during the implementation.**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Not applicable / unsure

15. **The transition was managed in a way that minimised disruption to work and business-as-usual activities.**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Not applicable / unsure

16. **I felt informed and supported about what the changes meant for my role.**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Not applicable / unsure

17. **If I experienced challenges during implementation, I knew where to go for help or support.**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Not applicable / unsure

18. **When concerns or issues were raised during implementation, they were addressed effectively.**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Not applicable / unsure

Outcomes to date

To what extent do you agree with the following statement?

19. **The changes have worked as intended and any unintended outcomes have been managed effectively.**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Not applicable / unsure

Please add any comments.

20. **What opportunities for improvement do you see in how future change processes are designed or implemented at ANU?**

Free text

21. **Is there anything else you would like to share about your experience of the implementation?**

Free text

Final support page

Thank you for taking the time to complete this survey.

The University recognises that organisational change can affect people in different ways. Reflecting on workplace experiences and the impacts of implementation may be challenging for some people. Please take care of your wellbeing and access support if needed. Additional support is available through:

- ACT Access Mental Health also offer 24/7 mental health emergency access and support. You can call them on 1800 629 354 or 6205 1065.
- All ANU staff members have access to the Employee Assistance program. We have two options, one is Assure who you can contact 24/7 on 1800 808 374 and Converge who you can contact 24/7 on 1300 687 327.
- ANU Adviser to Staff are on campus counsellors who can provide confidential support on work and personal concerns. You can reach out by emailing staff.adviser@anu.edu.au.
- Here is also a great support page for external supports as well. If you need any further support the information is available through the link.
- If you are unsure where to seek support, you can contact the Staff Respect Consultant who provides a confidential, trauma-informed space to discuss your concerns, explore available options, and identify support pathways that best meet your individual needs and circumstances.

Urgent help is also available at:

- Lifeline 13 11 14
- Mental Health Crisis Service 1800 629 354
- Kids Helpline (young people up to 25 years) 1800 551 800
- Canberra Rape Crisis Centre 02 6247 2525
- Domestic Violence Crisis Service 02 6280 0900
- ANU Security 02 612 52249
- Emergency (Police, Fire, Ambulance) 000

Submission page

Thank you for taking the time to share your experiences and feedback. Your contribution to this review is valued and will help inform learning and continuous improvement for how we do implementation.

Your response has been successfully submitted.

If, after completing the survey, you would like to share any further feedback, reflections, or experiences, you are welcome to contact the Organisational Change Team at **org.change@anu.edu.au**. We recognise that people may reflect on their experiences differently over time and welcome any additional information you wish to provide.

Appendix B

Australian National University

Residential Experience Division (RED)

Psychosocial Working Group

Purpose

The role of the RED Psychosocial Working Group is to:

- regularly review the RED Psychosocial Risk Register to ensure controls are being implemented and monitored.
- identify solutions and recommendations for additional controls.
- promote positive engagement to others in RED on the psychosocial controls.
- draw upon our community's subject matter expertise and local experiences to identify and recommend solutions that will improve our systems, workplace practices and behaviours and embed lasting cultural change.
- Provide advice on mitigations for any potential barriers.

Composition and Tenure

The members of the RED Psychosocial Working Group are:

Felicity Gouldthorp (Chair)
Pankhuri Tiwary
Rob Freeth
Sarah O'Callaghan
Sophie Taylor
Minh-Chau Ho
Millan Pintos-Lopez
Jeremy Lepisto
Tonya Moss
Joseph Ashley Smith (Secretariat)

Roles and Responsibilities

1. The RED RED Psychosocial Working Group will run from 1 November 2025 to 30 June 2026.
2. Members are expected to meet once every three weeks for one hour.
3. Members may choose to leave the group at any time.

Members are also expected to:

a. apply good analytical skills, objectivity and sound judgement; and
b. act in the interests of the RED and the University as a whole.

Administrative Arrangements

1. Meetings are held in person, and a Working Group member may only participate in a meeting by telephone or video conference with the prior consent of the Chair.
2. A Working Group member who is unable to attend a meeting of the Group may nominate an alternate with the prior consent of the Chair.

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Appendix C - RED psychosocial hazard traffic light report

Proposed control	Responsible owner	Current assessment of control measure	Action updates	Status and expected delivery*
Change Management Framework and Job Insecurity Biggest area to continue focus on for RED with change management is to ensure the mobilisation and transition to the new operational model is planned and communicated optimally. Also to focus on rebuilding and earning trust. Though we are in the implementation plan phase, some staff still require assurance that their negative experiences during that change are acknowledged and that ongoing supports to heal from this experience are provided.				
For future change, increase communication related to change with a broader group prior to proposals being developed.	CREO	In progress	CREO has consulted with multiple ANU stakeholders and seems unlikely that the University will develop a 'Change Charter'. There is a commitment to consult with employees who are, or are likely to be, affected by a specific change, once a proposal is developed. Communication on any potential changes in broad terms will be communicated to the broader RED staff through REEL and Division updates. Impacts related to the potential undue stress this can create for staff will be considered. RED will actively engage in the Change review process in September.	
Ensure workers understand the changes and why they're happening.	CREO	Completed	RED staff understand the reasons for the operational model change (3 models to 1) and this was clearly outlined in the change proposal and implementation plan.	
Transparent decision rationale: when decisions are made clearly explain the "why" - what factors were considered, what alternatives were weighed and why this outcome was chosen.	CREO	Completed	Rationale related to the alternatives was raised at the RED Town Hall and was addressed in the implementation plan response to the change proposal. Staff provided access to the CREO and Director for several hours after change proposal Town Hall to follow up with further questions and also had access to 1-1 catch ups to discuss specific issues.	
Proactive meetings related to change in reporting lines and official recognition and handover of change.	Supervisors of affected staff	Completed	All reporting line and change letters have been sent from P+C. Transition meetings have been ongoing and actioned. Transition meetings have involved directly impacted staff. Team meetings for any new staff and teams to discuss changes have been held.	
Provide clear, authoritative information about upcoming changes as soon as possible and keep employees up to date and encouraging active input into change proposals.	CREO and Director	Completed	Transition and mobilisation changes are updated in regular RED update every fortnight. Changes are also communicated at monthly REEL and through fortnightly meetings with Heads of Residence.	
Appoint local peer support roles: nominate trusted team members to act as peer support.	Team leaders	Completed	HSR and members of Psychosocial WG available for staff to discuss their concerns and feedback. Anonymous and confidential form available for all staff.	

Proposed control	Responsible owner	Current assessment of control measure	Action updates	Status and expected delivery*
Two-way consultation mechanisms beyond formal processes.	CREO	Completed	Actively seek feedback and input in fortnightly updates. This traffic light report will serve as an accountability framework for actions on staff concerns. Staff can have confidential discussions with the HSR.	
Provide individual career support and utilise sector networks for directly impacted staff.	CREO	Completed	Staff offered through P+C access to EAP and career support.	
Monitor for delayed impacts: change fatigue and distress often peak after the change is implemented. • Promote access to employee assistance program services. • Promote staff to take wellbeing and personal leave when required, especially for impacted staff. • Provide flexible work arrangements for work-life balance to recover from change, ensuring business and operational requirements are maintained	CREO	Completed	This has been communicated and encouraged through individual staff meetings and in regular RED updates. Discussion with staff on 21 January on flexible work arrangements.	
Build a post change support phase (e.g. check-ins at 1, 3 and 6 months.	CREO	Complete – now in monitoring phase	Talk this through in 2026 RED business plan process to ensure all change projects (large and small) are discussed and known to staff. Utilise monthly REEL as a check-in. Support provided by supervisors in 1-1 catch ups and through relevant Supervisors having a goal in Focus related to this requirement. Monitor PULSE survey results and action plan progress. Utilise RED Psychosocial WG to monitor any additional supports required. Monitor workload of Residential Services team across Q3.	
Job demands, role clarity and job control Particular focus here needs to ensure that role scope creep does not occur in the first year of implementation and that expectations for any new roles or changed position descriptions are clearly discussed and that questions or concerns are raised and addressed early by affected staff.				
Develop simple communications protocol of when to use platforms – email vs teams etc. and have clear guidance on group lists.	EO to CREO	Completed	Guideline drafted and feedback being sought.	
Implement workload monitoring: Use quick manager-led check-ins to flag overwork early. Review work allocation to ensure no individual or team is unintentionally overloaded as roles and responsibilities shift.	CREO and Director, RED	Commenced	Met with ITS to discuss their workload and allocation process. Propose to develop mini horizon planning model in RED. Interdependency - require support from central Safety and Wellbeing team to provide advice on workload monitoring approach for ANU Addressing workload monitoring at a local level. Scheduled REEL for workload/time management and action tracking	Q3/2026
New team building exercises to help establish new roles and teams to work together in new environment.	Director, RED	Commenced	Pending 2026 budget finalisation. Director, RED has commenced discussions with P&C to see what potential training might be available. Increase in team connection activities. (Teams and supervisors can consider ad hoc team building exercises.)	Q2/2026

Proposed control	Responsible owner	Current assessment of control measure	Action updates	Status and expected delivery*
Supervisors being very clear on ensuring any new or refreshed roles discontinue work that no longer is needed. Clear management of expectations from day one and having regular checkpoints on this (and utilising Focus)	All supervisors	Ongoing	Discussions have been held with Heads and Deputy Heads of Residence on the new PDs. Transition meetings held. Training provided on new tasks such as room allocation. Clarified that individual case management of students and participation at sporting and social activities of residents is a lower priority.	
Accountability for individuals to no longer take on activities that are not expected and to take reasonable direction.	All supervisors	In progress	Discussions have been held with Heads and Deputy Heads of Residence on the new PDs. Staff regularly encouraged to take breaks and to disconnect.	
Implementation of StarRez project during 2026 will bring many automated efficiencies that will continue to have positive effects on workload.	Head, Residential Services	In progress	Will require communications and training plan on new business processes are part of StarRez project.	Q4/2026
Individual work plans developed through Focus and each residence to have business plan which aligns with broader RED business plan	Heads of all areas	In progress	Expected completion, Q1, 2026.	
Ensuring reporting lines/organisational charts are updated and communicated clearly to staff with clear handover and appropriate induction of staff with new supervisors.	CREO and EO to CREO	Completed	System changes implemented for reporting lines New organisational charts drafted Head of Residence manual created for new starters	
Ensure appropriate communications in advance to all impacted staff (both staff and staff supervised) when changes are about to be implemented.	RED Senior Management staff and Heads	In progress	Utilise REEL and RED regular updates to communicate upcoming initiatives. Heads meeting agenda to be circulated to Deps and Heads prior to meeting to allow Deps to discuss these items with Heads and provide feedback Heads meeting minutes to be circulated to all Heads and Deps following meeting Heads to meet with their Deps following Heads meetings to provide overview Deps (WCOP) meeting minutes to be circulated to Heads and Director. Informing new staff during inductions of the journey of change for RED and historical context.	
Emotional and practical support: respectful workplace relationships Staff need to be given time to adjust to change and any training required for new tasks. Patience and kindness to each other in the workplace is required as each staff member will process change in different ways.				
Encouraging staff to intervene early when negative micro-behaviours or exclusionary conduct occurs.	All staff	Ongoing	This is a continued journey of cultural change. All RED staff encouraged to undertake the Anti-Racism online module pilot. All RED staff encouraged to attend Ally Training and Harmful Behaviours training Promote positive social interactions and workplace culture through shared informal activities which role model inclusion.	
Adopting trauma-informed, restorative approaches to responding to harm.	All staff	In progress	Trauma-informed training to occur in Q1/2026 as part of National Code requirements. This will be supplemented by deep-dive training on restorative practices for three RED staff members, funded by the Chartwells student fund.	

Proposed control	Responsible owner	Current assessment of control measure	Action updates	Status and expected delivery*
Psychosocial check-ins: train managers to conduct quick wellbeing and interpersonal climate checks during regular team meetings and 1:1 meetings	CREO	In progress	Encourage staff to speak with ANU staff respect consultant or HSR if want to flag concerns.	
Encourage participating in training programs: The Neuroscience of Tough Conversations and the Supervisor Development program	CREO	Ongoing	Pending 2026 budget confirmation.	
Peer support and mentoring system	CREO	In progress	Staff encouraged to participate in ANU mentoring program. Heads and Deputies buddy system implemented.	
Combatting bias, discrimination and poor organisational justice Ethical integrity must be at the core of all our activities. We recognise that that people hold multiple identities and experiences that shape how they engage. We need to focus on accessibility considerations and removing structural barriers. We need to actively seek under-represented perspectives.				
Embed the Nixon report values of *Accountability; Respect; Integrity, Excellence for Purpose; Inclusion; Care in all our work* into our RED programs of work	All staff	Ongoing	This is achieved by treating everyone with dignity, regardless of role or status and responding to disrespect early and safely. Staff are encouraged to listening actively and assume good intent where appropriate. Create inclusive forums where all voices are heard and through a variety of channels (i.e. people can give feedback verbally or in writing, providing appropriate consultation period timeframes and that people can provide feedback anonymously). Structured frameworks for seeking staff feedback such as through participation on working groups and regular staff meetings.	
Acting honestly, making fair decisions, and using power responsibly.	All staff	Ongoing	This is achieved by applying policies consistently across all areas and documenting the rationale leading to decisions. Run merit-based, transparent recruitment. Being honest about constraints and trade-offs.	
Managing and declaring conflicts of interest or perceptions of bias	All staff	Ongoing	All RED staff to declare conflicts of interest on the ANU register through the ANU Disclosure of Interest framework and the broader ANU Disclosures framework, including Delegations and complying with the ANU policy governance framework. Staff to recuse themselves from recruitment processes where there is a significant CoI. Clearly explaining criteria for decisions, documenting rationale and applying consistent expectations	
Management adhering to requirements of the PGPA Act and relevant legislation and policies	All staff	Ongoing	Regular updates to staff on compliance requirements related to procurement, privacy, confidentiality and conflicts of interest. Staff encouraged to participate in ANU policy and governance training.	

* Delivery where appropriate