

SESLHD PROCEDURE COVER SHEET



Health
South Eastern Sydney
Local Health District

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KEY TERMS	Sexual Assault, Disclosures, Safety, Reporting
SUMMARY	This document outlines the procedures to be followed when a patient, staff member or visitor discloses that they have been sexually assaulted in a SESLHD facility.

COMPLIANCE WITH THIS DOCUMENT IS MANDATORY

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SESLHD PROCEDURE

Sexual assault: responding to disclosures that occurred in a SESLHD Facility

SESLHDPR/781

1. POLICY STATEMENT

South Eastern Sydney Local Health District (SESLHD) ensures that patients, visitors and staff who disclose that a sexual assault has occurred in a SESLHD facility are responded to in a timely and supportive manner, and that required reporting occurs consistent with the [NSW Health Policy Directive PD2020_006 - Responding to Sexual Assault \(adult and child\) Policy and Procedures](#).

2. BACKGROUND

A staff member, patient or visitor may disclose that they have been sexually assaulted in a SESLHD facility by a staff member, patient, or visitor. The patient may be a current inpatient, discharged patient, outpatient or a current patient in the community.

Definitions:

Sexual Assault

Sexual assault occurs when a person is forced, coerced, or tricked into sexual acts against their will or without their consent. Consent must be given freely and voluntarily, and a person has the right to withdraw their consent before and during any sexual activity with which they are uncomfortable. It also matters whether a person is fully able to give or withdraw their consent at the time.

Sexual assault includes:

- Sexual intercourse without consent including the penetration of the vagina or anus of any person with any part of the body of another person, or any object, against their will or consent. It also includes oral sex.
- Sexual touching which includes unwanted touching of a person's body by another person. This can include kissing or inappropriate touching of a person's breasts, buttocks or genitals.

Many people believe there must be violence or physical injuries to indicate a sexual assault. This is not true. People respond to non-consensual sexual activity differently and some people may freeze and not be able to move or get away as they are in fear. The absence of violence or injury does not mean that a person consented to the sex act.

3. RESPONSIBILITIES

3.1 All employees will:

- Respond compassionately and promptly to disclosures of sexual assault to ensure that people who have experienced sexual assault can access timely medical/forensic and psychosocial care to meet their needs.
- Any employee who receives a disclosure of sexual assault should immediately report the disclosure to their line manager.

SESLHD PROCEDURE

Sexual assault: responding to disclosures that occurred in a SESLHD Facility

SESLHDPR/781

3.2 Managers will:

- Respond supportively to staff who report disclosures of sexual assault and escalate these reports to a relevant Executive.
- Provide support to the staff member, patient or visitor to ensure the safety and privacy of the person who has made the disclosure.
- Immediately contact the relevant sexual assault service for support options for the person who has experienced sexual assault.

3.3 Executive staff within facility or after-hours Executive on call will:

- Meet reporting obligations around disclosures of sexual assault in SESLHD facilities (see 4.5 Reporting).
- Ensure that patients/consumers who have disclosed sexual assault in a SESLHD facility are consulted about their ongoing health needs and are supported to access specialist or other health care sensitive to their needs.

4. PROCEDURE (see [Appendix 1](#) for flowchart)

4.1 If a patient, visitor or staff member discloses that they have been sexually assaulted:

- Respond in a compassionate, non-judgmental and supportive manner so that the person who has experienced sexual assault feels heard and believed.
- Take steps to ensure the immediate safety and privacy of the person who has experienced sexual assault.
- When a disclosure is by an Aboriginal or Torres Strait Islander person, they may require additional supports. This may include family, Aboriginal health professionals such as Aboriginal liaison officers, health workers or other culturally specific services. The Southern Sydney Sexual Assault Service (SSSAS) has an Aboriginal Counsellor who may be consulted.
- If the person is from a non-English speaking background, call the interpreter service: [NSW Health Policy Directive PD2017_044-Interpreters Standard Procedures for Working with Health Care Interpreters](#).
- If a consumer/patient discloses that sexual assault has occurred in a SESLHD mental health facility Mental Health Service staff must follow the SESLHD Procedure [SESLHDPR/293 - Consumer Sexual Safety in Mental Health Settings](#).
- When a disclosure is made by a person with disability, Health staff must follow the policy directive, [PD2024_030 - Responding to the health care needs of people with disability](#).

4.2 Age of the person who has experienced sexual assault:

Over 16 years

If the person who has experienced sexual assault is aged **over 16 years**, contact the Southern Sydney Sexual Assault Service (SSSAS) on 9113 2494 in **business hours or**

Sexual assault: responding to disclosures that occurred in a SESLHD Facility**SESLHDPR/781**

call St George Hospital switchboard on 9113 1111 after hours and ask for the on call Sexual Assault Counsellor.

The Sexual Assault Counsellor will give advice about how to respond and information about the medical/forensic and psychosocial support options available to the person who has disclosed sexual assault. These options will vary depending on whether a recent sexual assault (past 7 days) or a historical sexual assault has been disclosed.

The Sexual Assault Counsellor can speak directly with the person who has disclosed sexual assault, with their consent. Anyone who discloses sexual assault should be offered support from the Sexual Assault Service and has the right to decline this support. The SSSAS can provide advice and support around reporting to police.

Under 14 years

If the disclosure is about sexual assault of a child **aged under 14 years**, the Child Protection Unit (CPU) at Sydney Children's Hospital Randwick should be contacted for advice about a medical/forensic response and psychosocial response.

Contact the CPU at Sydney Children's Hospital Randwick on **9382 1412** in business hours or call the Sydney Children's Hospital Randwick switchboard on **9382 1111** after hours and ask for the on-call CPU counsellor.

Mandatory reporting to the Department of Communities and Justice (DCJ) **Child Protection Helpline** must occur (**see 4.5 Reporting below**).

14 or 15 years

If the disclosure is about the sexual assault of a young person **aged 14 or 15 years**, medical/forensic and psychosocial care can be provided by SSSAS *or* the CPU at Sydney Children's Hospital Randwick, depending on the needs of the child and ease of access to the service for the child and family/carers. Either service may be contacted for urgent advice.

Mandatory reporting to the **DCJ Child Protection Helpline** must occur (**see 4.5 Reporting below**)

4.3 Secure potential evidence:

Secure potential evidence (for example, clothing and sheets) where appropriate if a recent assault has been disclosed. The SSSAS, CPU and/or police (if involved) can provide advice on this process.

4.4 Safety planning:

Put in place a safety plan to ensure that there is no opportunity for further contact between the person who has experienced sexual assault and the alleged perpetrator. This may involve:

SESLHD PROCEDURE

Sexual assault: responding to disclosures that occurred in a SESLHD Facility

SESLHDPR/781

1. Supervision plans
2. Changes to bed/ward locations
3. Changes to staffing arrangements

4.5 Reporting

Staff members must report disclosures of sexual assault occurring in SESLHD facilities to their line manager immediately. It is not the role of general staff to investigate the matter or discuss with the alleged perpetrator.

A Senior Manager or on-call Executive (after hours) should then be notified of the disclosure.

Senior managers will comply with the reporting obligations outlined in Chapter 4 'Reporting Responsibilities' of [NSW Health Policy Directive PD2020_006 - Responding to Sexual Assault \(adult and child\) Policy and Procedures](#). Reporting obligations differ depending on the age of the victim and the age and status of the alleged perpetrator.

Senior Managers will need to follow [NSW Health Policy Directive PD2023_034 - Open Disclosure Policy](#) if required.

If the alleged perpetrator is an NSW Health worker, senior managers must notify the Head of Human Resources, Culture and Capability who must report to the **NSW Police**. Liaise with SSSAS for guidance about timeframes and how to contact police to ensure a co-ordinated response. Out of business hours, the Executive on-call either at facility or district level must make the police report as soon as possible and advise People and Culture in business hours.

Senior managers must report to the **DCJ Child Protection Helpline** (132 111) when:

- **The person who has experienced sexual assault** is under 16 years of age
- **The person who has experienced sexual assault** is aged over 16 but under 18 and in a care relationship with the alleged perpetrator

4.6 Documentation of disclosure and response

All **disclosures of recent sexual assault** (in the current episode of care) of a patient who has been assaulted in a SESLHD facility must be documented in the patient's health care record.

The staff member must document contemporaneously in the medical record the relevant information about the disclosure. This may include:

- what the patient told the staff member. If possible, quote the patient verbatim
- information about the incident may include: when it occurred, where, who, witnesses
- record information about patient's decision-making capacity. Where the patient's decision-making capacity may be a factor in the allegation of the sexual assault, further review and documentation by the medical team is required.

SESLHD PROCEDURE

Sexual assault: responding to disclosures that occurred in a SESLHD Facility

SESLHDPR/781

- record the Incident Information Management System (IMS+) identification number.

The staff member will document what actions were taken following the disclosure. This may include actions to:

- ensure patient safety
- preserve forensic evidence
- seek further advice, for example from the SSSAS or CPU

The staff member who received the initial disclosure must enter it in the Incident Management System (ims+) as soon as practical. Information should be entered in a de-identified manner.

5. DOCUMENTATION

IMS+

6. AUDIT

To ensure ongoing compliance and effectiveness of this policy, local services are required to conduct regular audits. These audits should include:

- Review and reporting of IMS+ notifications related to sexual assault disclosures
- Collection and analysis of staff and consumer feedback

Findings from these audits should inform continuous quality improvement activities and be reported through appropriate governance channels.

7. REFERENCES

- [NSW Health Policy Directive PD2020_006 - Responding to Sexual Assault \(adult and child\) Policy and Procedures](#)
- [NSW Health Policy Directive PD2013_038 - Sexual Safety - Responsibilities and Minimum Requirements for Mental Health Services](#)
- [NSW Health Policy Directive PD2025_021 – Managing Misconduct, Serious Performance and Child Related Concerns](#)
- [NSW Health Policy Directive PD2013_007 - Child Wellbeing and Child Protection Policies and Procedures for NSW Health](#)
- [SESLHDPR/293 - Consumer Sexual Safety in Mental Health Settings](#)
- [NSW Health Policy Directive PD2024_030 - Responding to the health care needs of people with disability](#)

8. SERVICES

- [Southern Sydney Sexual Assault Service](#)
- [Sydney Children's Hospital Child Protection Unit](#)

9. VERSION AND APPROVAL HISTORY

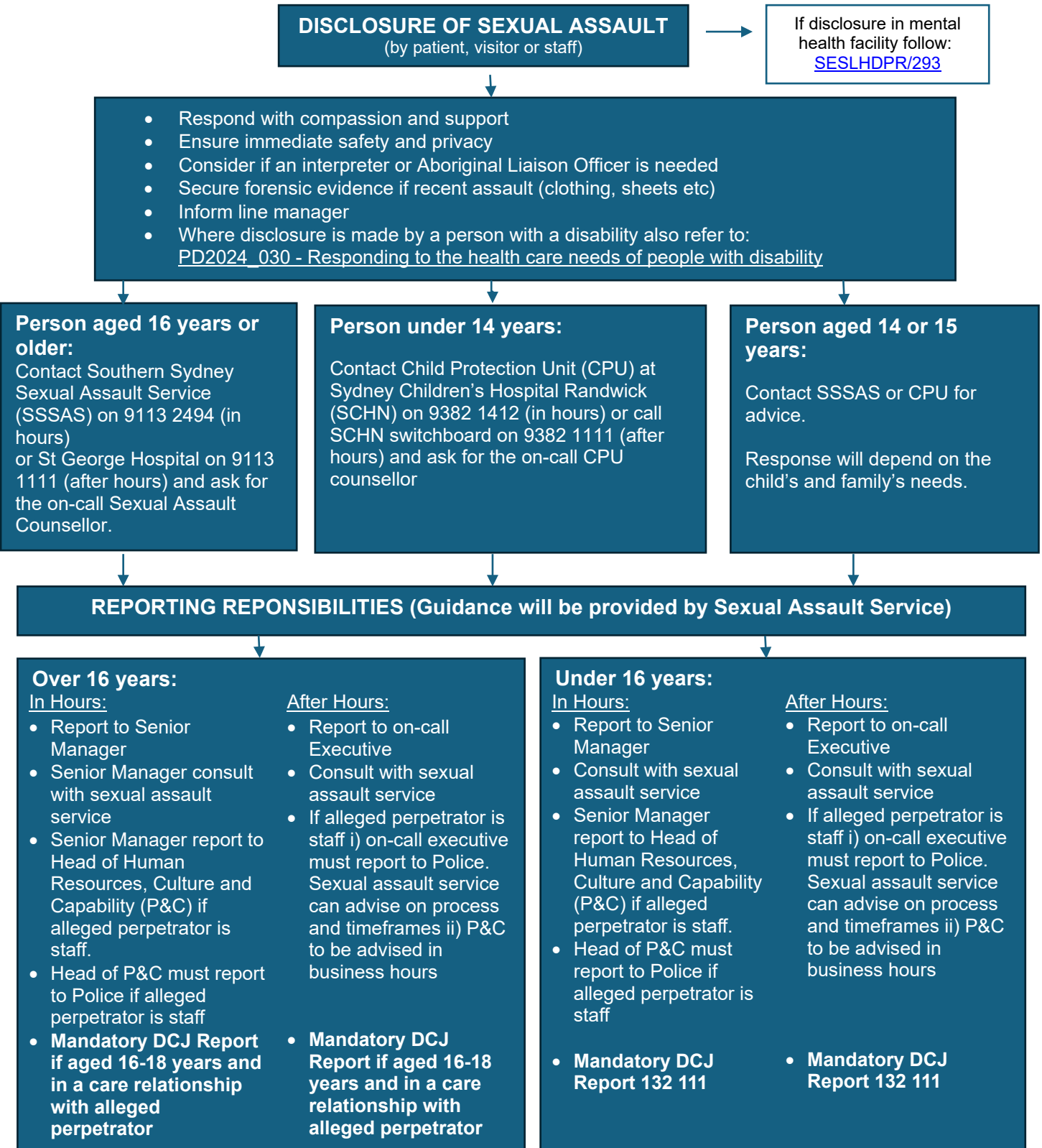
Date	Version	Version and approval notes
5 December 2025	1.0	New procedure developed to implement NSW Health Policy Directive PD2020_006 and associated legislation. Approved by SESLHD Patient Safety and Quality Committee and Chief Executive.

SESLHD PROCEDURE

Sexual assault: responding to disclosures that occurred in a SESLHD Facility

SESLHDPR/781

Appendix 1: Responding to Sexual Assault that occurs in a SESLHD Facility



DOCUMENTATION:

- Document disclosures of sexual assault and actions taken in the patient's health care record – see section 4.6
- Staff member who received initial disclosure to document in ims+ as soon as practical, in a de-identified manner