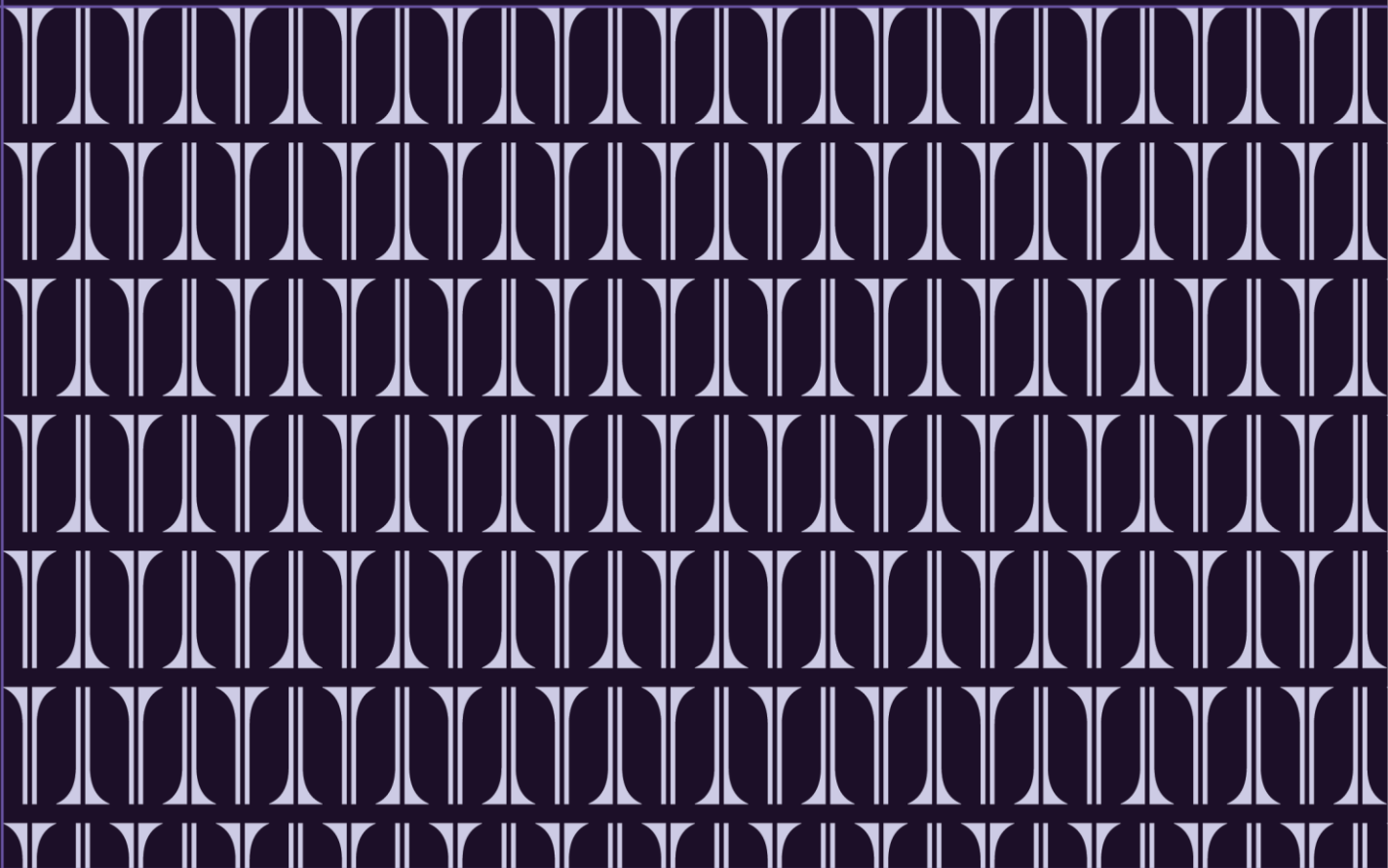


SUMMARY REPORT IN THE INDEPENDENT REVIEW OF SAFETY AND WORKPLACE CULTURE AT THE WESTPAC RESCUE HELICOPTER SERVICE

23 JUNE 2026

STRICTLY CONFIDENTIAL AND SUBJECT TO LEGAL PROFESSIONAL PRIVILEGE





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1 Section 1: Introduction

1.1 Executive Summary

Introduction

Mallesons was engaged by the Westpac Rescue Helicopter Service (the **Service**) on 11 November 2025 to undertake an independent review of the safety and workplace culture within the Service, with a particular focus on the prevalence of, and organisational response to, allegations of sexual harassment (and other gender-based harms), discrimination, bullying and victimisation (the **Review**).

The Review was commissioned following media reports in the newspaper and on television which, amongst other things, alleged a 'toxic' workplace culture at the Service.

The Review was sponsored by, and had the full support of, the Service's Board.

Mallesons provided a final report to the Service's Board on 17 June 2026 (**Final Report**) which ran to 207 pages including annexures.

We were instructed by the Service on 23 June 2026 to prepare a summary report that could be shared with the Service's key stakeholders, including, but not limited to, NSW Ambulance (**NSWA**). This document constitutes the summary report. It extracts in full the Final Report's:

- (a) executive summary;
- (b) recommendations;
- (c) terms of reference;
- (d) assessment of qualitative and quantitative data; and
- (e) concluding observations.

It does not include a description of the Review methodology or other general matters (such as terminology and concepts used in the Final Report). It also does not include the substantive observations set out in the Final Report, relating to the desktop review, survey data and interview responses. This is because employees were informed that their participation in the Review would be confidential. We are mindful of the commitments made to employees in this regard. While we took steps to ensure, so far as possible, that the Final Report did not inadvertently identify employees, we were particularly cognisant of the Service's relatively small workforce and the fact that even apparently benign details may be sufficient to identify employees.

In the Final Report, there were occasions on which we chose to identify employees about whom concerns were raised (but not the employees raising those concerns). We did so only when there were numerous concerns raised about the individual. However, the Review was not an investigation. The concerns raised are perceptions only and have not been investigated or substantiated. We included them because, given the number of employees who raised the concerns, it was an important data point for the Service.

We also included in the Final Report factual details about some previous and current complaints. Those details were relevant because it was difficult to make meaningful observations that would assist the Service in the absence of the relevant factual background. However, those details may identify the complainants and respondents.

In our experience, employee trust in processes like the Review is paramount and it can be highly damaging to culture if employees feel that commitments regarding confidentiality are not upheld. Accordingly, it is not appropriate for this summary report, which will be provided to stakeholders, to include our more detailed observations. In circumstances where claims have not been



investigated, it would be inappropriate and unfair for any named individuals to be identified at large, or for information that inadvertently identifies participants to be disseminated more broadly.

There is also a small amount of text in the Recommendations and the Assessment of Qualitative and Quantitative Data sections which has been redacted. This is to ensure the stakeholders can review those sections to the fullest extent possible, while protecting the identity of named individuals or other sensitive matters not appropriate for broader dissemination.

We are confident that this summary report provides an accurate representation of the substance of the Final Report, while appropriately respecting confidentiality.

Executive Summary of the Final Report

The Review has been informed by a comprehensive desktop review of over 220 key documentary materials, a voluntary and anonymous employee survey (which received 116 responses, representing a 68% participation rate), approximately 100 interviews conducted with current and former employees and other stakeholders and site visits to the Service's four operational locations.

Our principal assessments are as follows.

First, the Service is an organisation that has undergone significant transformation over the past five years, and particularly since the commencement of the current Chief Executive Officer (CEO), Mr Steven Underwood, in December 2023. The data gathered during the Review, including interview feedback, survey results and documentary evidence, consistently indicated the culture of the Service has improved materially in this time. The Service's physical and operational safety record is exemplary, and its aviation safety culture is a genuine organisational strength.

Second, the Review does not support a finding of a pervasive 'toxic' workplace culture. The majority of employees described the Service as a positive and respectful workplace. 96% of survey responders reported feeling safe from sexual harassment and 88% reported feeling safe from bullying. Patient safety has not been impacted by workplace cultural issues.

Third, notwithstanding the overall positive trajectory, the Review has identified areas in which further work is required. In particular:

- (a) there have been instances in which the Service's disciplinary responses to substantiated allegations of sexual harassment and bullying have been inadequate, creating a disconnect between the Service's stated 'zero tolerance' policy position and its practice;
- (b) employee perceptions of the complaints handling process are poor, and the [REDACTED], is widely distrusted within the Service. This represents a fundamental deficiency in the Service's psychosocial safety architecture;
- (c) there is a significant disconnect between the perspectives of senior leaders and the remainder of the workforce, with leaders perceiving that employees experience the Service more positively than is borne out in the data;
- (d) there are concerns about perceptions of nepotism or favouritism in recruitment and promotion practices, together with concerns about conflicts of interest;
- (e) the Service's psychosocial risk assessment does not treat sexual harassment as a standalone risk, and does not adequately assess industry-specific risk factors relevant to the Service's operational environment; and
- (f) while the Service's training programs are appropriate in their coverage, there are opportunities to deliver more targeted, practical and frequent training, particularly in relation to sexual harassment, leadership capability, and receiving and management of complaints.



The Service has a strong operational safety background and understands how to think critically about safety issues and risk assessments. This is a firm base from which to work. However, effort is required to extend that rigour into the psychosocial safety domain, and particularly to address the concerns raised about complaints handling, leadership capability and the ■■■ function.

We have made 31 formal recommendations directed at concrete steps we consider the Service should take to address the matters identified in the Review. Those recommendations are listed at Section 1.2 below and are set out in detail throughout the report.

On balance, the Review gives the Service an overall ‘pass mark’. It does not support a finding of a pervasive or systemic ‘toxic’ culture. Instead, it identifies a safe organisation with exceptional operational standards, a strong aviation safety culture, a deeply committed workforce and a clearly positive trajectory under the current CEO and Board. The recommendations made in the report should be understood as constructive next steps: opportunities to extend the rigour that underpins the Service’s operational safety into the psychosocial safety domain, with particular focus on strengthening the ■■■ function, leadership capability, complaints handling and disciplinary consistency. They are practical next steps for a professional organisation with strong foundations, a respected CEO, an accountable Board and a workforce that has engaged candidly in the Review because it wants the Service to succeed.

1.2 Recommendations

1. **Recommendation 1:** The Service to engage an external expert to provide refresher training for the PCC team and other people leaders and decision-makers on the scope of the Respect@Work laws, appropriate disciplinary outcomes, and the differences in how performance concerns and misconduct allegations should be addressed.
2. **Recommendation 2:** The Service to deliver (or engage an external provider to deliver) refresher sexual harassment training to all leaders and employees with a particular focus on ‘low level’ sexual harassment and sex-based harassment. We suggest this training be separate and distinct from the ‘How We Work’ program and instead be more targeted and practical. The training should draw on our observations throughout the report, particularly in Part A of Section 2.2¹ of the Final Report, in addressing some employees’ outdated attitudes towards these matters. This recommendation should be read in conjunction with Recommendations 11 and 18 below.
3. **Recommendation 3:** In conjunction with Recommendations 1 and 2, the Service to ‘draw a line in the sand’ and reset expectations with employees to correct any perception that ‘low level’ sexual harassment, sex-based harassment and bullying is condoned or tolerated within the Service. The manner in which this is done is a matter for the Service but could take the form of an ‘all hands’ meeting followed by a written communication from the CEO.
4. **Recommendation 4:** The Service to:
 - (a) consider conducting annual employee engagement surveys which include questions that focus on sexual harassment, sex discrimination and other gender-based harms and bullying. The Service to particularly assess whether such survey results suggest the issues identified in the Cultural Remediation Project have been resolved; and
 - (b) further consider how the results of employee surveys are authentically shared with the Board and the workforce.
5. **Recommendation 5:** At an appropriate time, in line with usual cycles for refreshing policies and template documents, the Service to consider the following updates to its materials for recruitment of senior leaders and Board directors:

¹ Part A of Section 2.2 of the Final Report sets out observations from the employee survey on the category of questions relating to sexual harassment.



- (a) in relation to the Recruitment, Selection and Onboarding Policy, consider updates to include clearer criteria to assess candidates' commitment to a safe, respectful and inclusive culture;
 - (b) when issuing job advertisements, consider updating the reference to safety leadership to refer specifically to a commitment to inclusivity and eliminating unlawful conduct such as sexual harassment, bullying and victimisation;
 - (c) when conducting reference checks, consider including a specific question in relation to the candidate's demonstrated history of engaging in and championing appropriate workplace behaviours;
 - (d) consider updating position descriptions for senior leaders and Board directors to clearly and specifically articulate expectations regarding leaders' roles in fostering a respectful and safe working environment; and
 - (e) consider updating the contractual definition of serious misconduct to include sexual harassment.
6. **Recommendation 6:** The Service to consider:
- (a) including Respect@Work compliance as a standing agenda item for SLT meetings;
 - (b) undertaking a separate survey on an annual basis for employees in leadership positions, designed to assess leaders' understanding of the risk of sexual harassment, bullying and victimisation in the Service and how such risks should be managed (including resources and processes for reporting and responding to incidents, at both an informal and formal level);
 - (c) its approach to diversity within the SLT.
7. **Recommendation 7:** The Service to consider updating its performance assessment materials for senior leaders to:
- (a) articulate the expectation that senior leaders role model appropriate behaviours, create safe and inclusive work environments and eliminate sexual harassment and related behaviours; and
 - (b) take into account other forms of meaningful evaluation of performance, such as employee feedback.
8. **Recommendation 8:** To ensure the Board's ongoing awareness, management and accountability in relation to the Positive Duty and related matters:
- (a) the upcoming review of the Board Charter take into account our feedback in relation to opportunities to uplift the Charter;
 - (b) the Service communicate to employees with appropriate regularity the role of the Board, particularly in relation to compliance with the Positive Duty;
 - (c) the Board consider whether the 2004 Safety Vision is still operative and consider updates to ensure its currency and fitness for purpose;
 - (d) compliance with the Positive Duty and related issues be introduced as a standing agenda item for Board meetings; and
 - (e) the Board be regularly informed about any incidents of alleged or substantiated sexual harassment, bullying and victimisation and the actions taken in response (de-identified as required).
9. **Recommendation 9:** At an appropriate juncture (for example, in line with the Service's next scheduled review of its suite of policies), the Service to consider:



- (a) updating the policies identified in the report in light of our feedback; and
 - (b) opportunities for the number of policies to be reduced or the policies otherwise streamlined.
10. **Recommendation 10:** The Service to consider the content and delivery of its training programs and the opportunities for uplift in light of our observations at Part E of Section 2.1², Part F of Section 2.2³ and Recommendation 18.
11. **Recommendation 11:** The Service to deliver annual training on sexual harassment and other gender-based harms (in line with Recommendations 2 and 18), which is supplemented with more frequent ‘micro learning’ opportunities.
12. **Recommendation 12:** The Service to update its psychosocial risk assessment having regard to our observations, and in particular, to include sexual harassment as a standalone risk that is separately assessed and controlled.
13. **Recommendation 13:** The Service to:
- (c) consider additional steps which could be taken to leverage its strong relationship with NSW to further protect against the risk of unlawful workplace conduct (for example, consultation, data-gathering and reporting specifically in relation to sexual harassment); and
 - (d) review its current engagement with operators of Cash Housie programs and consider whether any further measures are required to confirm those operators have in place adequate processes to ensure the ongoing safety of the Service’s employees.
14. **Recommendation 14:** The Service to consider recording and analysing data regarding sexual harassment and gender-based harm and other forms of unlawful workplace conduct.
15. **Recommendation 15:** The Service to consider our feedback about opportunities to improve on its already strong supports for employees and incorporate that feedback at appropriate junctures (for example, in line with regular policy updates and other internal cycles).
16. **Recommendation 16:** The Service to consider additional measures which could be introduced into the remuneration review process to ensure that pay discrepancy between comparable roles is not driven by discrimination.
17. **Recommendation 17:** The Service to consider the introduction of appropriate models to analyse:
- (a) performance outcomes by reference to gender equity; and
 - (b) performance and remuneration outcomes for employees who have made complaints, supported by manager training in the models, including the factors that undermine gender equity.
18. **Recommendation 18:** The Service to provide further in-person training for employees about:
- (a) sexual harassment, including to:
 - (i) correct misunderstandings about what constitutes sexual harassment and how it manifests in workplaces (including through so-called ‘banter’ and ‘fun comments’, particularly amongst employees who have worked together for a long time);

² Part E of Section 2.1 of the Final Report sets out observations from the desktop review of key materials from the Service in respect of training materials prepared and delivered by the Service between 2023 and 2025 across groups of employees at various levels (including leaders).

³ Part F of Section 2.2 of the Final Report sets out observations from the employee survey in respect of a series of general questions asked of responders.



- (ii) support employees to deal with 'lower level' conduct at the time at which it occurs;
- (b) 'casual sexism', including 'every day' examples of sex discrimination and sex-based harassment, to improve understanding and recognition of such behaviours. This training should include information about what employees can expect from leaders if sex-based harassment occurs (including bystander action, support and appropriate consequence management).

These training sessions should be practical and engaging, with opportunities for role playing or 'workshopping' scenarios and the ability to ask questions confidentially.

This recommendation should be read together with Recommendations 2 and 11 and having regard to the observations made in the report about the survey responses and employees' suggestions for approaches to training.

19. **Recommendation 19:** The Service to provide further training for leaders about inappropriate conduct, including receiving and acting on complaints using a trauma-informed and person-centred approach and understanding the impact that their position of power may have in the management of such matters.
20. **Recommendation 20:** The Service to consider the most appropriate ways to improve the current perceptions of the complaints handling process. Steps in this regard should include clear communication with employees about:
 - (a) how reports can be made and to whom (including reporting options outside the [REDACTED] team);
 - (b) the importance of a robust complaints process that balances a 'speak-up' culture while not entertaining vexatious complaints;
 - (c) the Service's clear policy position that victimisation is not tolerated;
 - (d) the level of communication employees should expect during a complaint (including that employees should not expect to hear the outcome of a complaint unless they are a party to it, and that in an employer the Service's size, even sharing de-identified information will rarely be appropriate); and
 - (e) investigation processes in general, including the fact that if an allegation is not substantiated, it does not mean the reporter made 'false accusations'.
21. **Recommendation 21:** The Service to consider the most appropriate way to address the concerns raised about [REDACTED]
[REDACTED] will present an opportunity to reset relationships and perceptions across the Service.
22. **Recommendation 22:** The Service to consider the most appropriate way to address the perception that concerns about leaders or the SLT would not be taken seriously, or that the SLT is otherwise a 'closed group'. This may involve direct communication from the CEO about this feedback and his views about it; reiterating a wide range of reporting avenues; and ensuring the SLT actively engages with employees at all levels through regular Service-wide meetings and cross-functional working groups.
23. **Recommendation 23:** The Service to review its recruitment and promotion practices and develop a position on these matters to ensure fairness, clarity and transparency for employees and candidates.
24. **Recommendation 24:** The Service to consider whether further training is required in relation to conflicts of interest (in particular, potential or perceived conflicts) and whether the current



system of having employees disclose conflicts to [REDACTED] is appropriate [REDACTED]
[REDACTED]

25. **Recommendation 25:** The Service to consider ways in which collaboration across teams and geographic locations can be increased.
26. **Recommendation 26:** Following internal validation of the concerns regarding the conduct of NSW / NSW Health employees, the Service to consider joint training with NSW and NSW Health employees in relation to the clearly delineated roles of the aircrew, NSW and NSW Health, including in relation to responsibility for aviation safety.
27. **Recommendation 27:** The Service to consider the most appropriate way to communicate to employees the results of the survey conducted as part of the Review, with a particular focus on presenting a balanced picture that reports the mixed feedback across questions and any proposed actions the Service intends to adopt in response to the feedback.
28. **Recommendation 28:** The Service to investigate the allegation that in around [REDACTED], there was a pattern of [REDACTED] deleting or relocating investigation reports or other information containing material adverse to the Service. Such investigation may require forensic analysis of systems from this period.
29. **Recommendation 29:** The Service to consider the most appropriate way to rapidly upskill senior and mid-level leaders, including in leadership development, conflict management and grievance resolution (including trauma-informed and people-centred approaches, consistent with Recommendation 19).
30. **Recommendation 30:** The Service to consider the appropriate time at which to limit the CEO's involvement in receiving initial complaints, and to transition this function to another suitable person within the Service.
31. **Recommendation 31:** The Service to review:
 - (a) its register of complaints to identify and review any concerns raised about inappropriate or sexist conduct occurring at fundraising events; and
 - (b) the way in which fundraising events are run, including the selection of external persons and the expectations communicated to all attendees (including external attendees, guests and Service employees) about appropriate conduct.

1.3 Terms of Reference

The Review has been conducted in line with Terms of Reference which are at **Annexure 1**.

The scope of the Review includes the following eight matters (**Scope**):

- (a) an **overall assessment** of physical and psychosocial safety for employees at the Service over the past five years, including in relation to the existence of an allegedly 'toxic' workplace culture characterised by sexism, discrimination, and other unlawful or inappropriate behaviour;
- (b) the extent to which unlawful behaviour (including sexual harassment, other gender-based harms, discrimination, bullying, and victimisation) may be **currently occurring** within the Service;
- (c) the extent to which unlawful behaviour (including sexual harassment, other gender-based harms, discrimination, bullying and victimisation) may have **historically occurred** within the Service, within the past five years;
- (d) the extent to which **nepotism or discrimination** may currently exist, or has historically existed, in **recruitment and promotion practices**;



- (e) the adequacy of current and historical policies, systems, and training programmes for **preventing** sexual harassment (and other gender-based harms), discrimination, bullying and victimisation, in light of obligations under workplace health and safety and Respect@Work laws;
- (f) the adequacy of current and historical policies, systems, and training programmes for **responding** to alleged incidents of sexual harassment (and other gender-based harms), discrimination, bullying and victimisation, in light of obligations under workplace health and safety and Respect@Work laws. This includes but is not limited to:
 - (i) barriers to reporting;
 - (ii) accessibility and appropriateness of complaints processes; and
 - (iii) adequacy of disciplinary outcomes.
- (g) the **adequacy of the actions taken by the Service in response to specific [REDACTED] and other complaints** concerning inappropriate or unlawful behaviour (related to the issues within the scope of the review) occurring within the past five years, including matters that were the subject of media reporting on 14 November 2025 and 20 October 2025. This aspect of the Review includes an examination of:
 - (i) the adequacy of the investigation undertaken;
 - (ii) the adequacy of the response provided to the complainant; and
 - (iii) the appropriateness of any disciplinary sanction imposed by the Service and/or other actions taken.
- (h) in light of the findings concerning the above areas, **an assessment in relation to:**
 - (i) **whether or not patient safety was, or may have been, negatively impacted.** This aspect of the review is not intended to intrude upon the matters properly within the jurisdiction of the Civil Aviation Safety Authority (CASA), and focuses on the impact of reported workplace cultural issues on patient safety and care; and
 - (ii) the extent to which **any negative impact on patient safety arose because of (or for reasons relating to), the existence of an allegedly ‘toxic’ workplace culture**, including the cultural relationship between the Service’s teams and the New South Wales (NSW) Health and NSW Ambulance teams (to the extent the Review has oversight of the relationships between these services).

Our assessment of these matters is addressed in **Section 3** below, informed by our observations in Section 2.⁴

The Terms of Reference also set out key terms relevant to the Review including in relation to governance, confidentiality, privilege, engagement and wellbeing, communications, dependencies and quality assurance. We do not repeat those matters here.

The Terms of Reference did not extend to the Review investigating or making findings about individual complaints or allegations. Employees who disclosed concerns during the Review were encouraged to raise those matters directly with the Service.

2 Section 3: Assessment of Quantitative and Qualitative Data

2.1 An overall assessment of physical and psychosocial safety for employees over the past five years

⁴ Section 2 of the Final Report sets out observations from a desktop review of key materials from the Service, the employee survey, interviews and site visits.



The first matter for assessment is: an overall assessment of physical and psychosocial safety for employees at the Service over the past five years, including in relation to the existence of an allegedly ‘toxic’ workplace culture characterised by sexism, discrimination and other unlawful or inappropriate behaviour.

On balance, and having regard to all of the data available to us during the Review, we consider:

- (a) physical and operational safety is one of the Service’s key priorities and strengths, and we do not have any concerns about employees’ physical safety over the past five years;
- (b) psychosocial safety is a more complex and nuanced assessment as a result of historical concerns and some prevailing issues. However, it is clear that there have been material improvements over the past five years. The data, taken as a whole, supports a finding that while there is room for improvement on psychosocial safety, the Service is nonetheless safe.

Physical safety

The data gathered in the Review presents an overwhelmingly positive picture of physical and operational safety at the Service. Interview feedback on this topic was consistent, with employees across all bases and operational roles expressing confidence in the physical safety standards maintained by the Service.

Multiple NSW Health employees who work alongside the Service independently described its safety standards as “*excellent*” or “*exemplary*”, and several interviewees with experience across multiple aviation organisations placed the Service at or near the top in terms of physical safety performance.

No interviewee expressed concerns about current physical safety standards. Where any concerns were raised, they were very limited in nature and related to historical matters rather than the present operating environment.

While a comprehensive review of aviation safety was outside Scope, we are aware that the Service passed its CASA Surveillance Audit strongly, which provides an independent regulatory confirmation of the standards reported by interviewees.

The Service’s operational safety record, its reporting systems, and the evident pride that operational employees take in their safety culture collectively indicate that physical safety is a genuine organisational strength.

This is significant in the context of the media allegations that prompted the Review. It also provides a strong foundation upon which to build improvements in psychosocial safety.

Psychosocial safety

The assessment of psychosocial safety is more complex and presents a mixed picture, though one that has improved materially over the past five years.

The scope of the Review’s consideration of psychosocial safety was limited to matters of sexual harassment, discrimination, bullying and victimisation. Accordingly, we have not assessed each of the 14 psychosocial hazards recognised by Safe Work Australia (SWA). However, some of those psychosocial hazards are particularly pertinent given the nature of the Service’s work (e.g. exposure to traumatic events) and where it has been possible for us to make observations across the range of psychosocial hazards, we have done so. The headings below reflect SWA’s categories of psychosocial hazards.

Poor support

The most consistent theme to emerge from both the survey data and the interviews was the inadequacy of support provided by the [REDACTED] team. 48% of interview feedback concerning [REDACTED] was negative, and [REDACTED] was identified by multiple sources as unapproachable. More than a quarter of those who raised the issue stated unequivocally that they would not bring concerns to [REDACTED], and multiple free-text survey responses were in a similar vein.



This represents a fundamental deficiency in the psychosocial safety architecture of the Service, as [REDACTED] is ordinarily the primary conduit through which employees can raise concerns and seek organisational support for psychosocial harm.

Bullying and harassment, including sexual harassment and other gender-based harms

With respect to bullying and harassment, including sexual harassment, there is sufficient data to indicate that such conduct has occurred within the Service over the past five years. However, reports of conduct of this nature were in the minority and we do not consider that this would be materially different to any other workplace with over 100 employees.

On sexual harassment, most interviewees (including most women and most NSW Health and NSW employees, many of whom are women) said they had not experienced or witnessed sexual harassment at the Service. However, 20% of survey responders reported they had experienced or witnessed sexual harassment, with 11 survey responders indicating such conduct had occurred within the last 12 months. Similarly, a small number of interviewees described specific incidents of sexual harassment and three reports of sexual harassment were made to the Service during the course of the Review.

Sexist and racist material was also identified as being present at fundraising events (with at least three specific instances identified through the interview process).

28% of survey responders reported experiencing or witnessing bullying, with interview responses suggesting this alleged conduct largely arose from those employees' relationships with their direct managers.

Poor organisational justice

A further theme of significance was poor organisational justice and accountability. Multiple interviewees and survey responders described perceptions of inconsistent accountability, with certain individuals perceived as "untouchables" due to their tenure or personal relationships within the Service.

Employees were concerned that jobs were not always advertised, and survey data indicated concerns about acting-up arrangements and secondments leading to substantive appointments without open, competitive processes.

27% of interviewees described a pattern of problems being allowed to fester rather than being addressed promptly by management.

Poor organisational change management

Interviews also disclosed concerns about poor change management, with the rapid growth of the Service creating tension between long-tenured employees who were more accustomed to the former operating model (described as the 'old guard'), and newer employees brought in as the Service has grown to its current portfolio business.

Employees also raised concerns about the pending contract renewal, which was repeatedly identified as a current and significant source of anxiety for employees.

Traumatic events or material

With respect to traumatic events associated with operational duties, the feedback about the Service's support was broadly positive. Exposure to traumatic incidents is an accepted part of the operational role, and interviewees indicated that the supports provided by the Service were appropriate. The desktop review confirmed that documented support systems are in place.

Most interviewees identified the 60 Minutes broadcast and related media coverage as a source of considerable personal and professional distress. Multiple interviewees raised concerns about the perceived lack of visibility and support from the [REDACTED] during this period.



Poor workplace relationships and interactions

Reports of poor workplace relationships and interpersonal conflict were present but were isolated to particular areas or individuals within the Service. The [REDACTED] [REDACTED] were most frequently identified as sources of relational difficulty.

This was not a prevalent concern in the Review and we do not consider the data is materially different from that which would be found in any workplace with over 100 employees.

Overall assessment and trajectory

Having regard to all of the material available to the Review, the issues identified in relation to psychosocial safety are not completely resolved, but there has been clear and material improvement over the past five years.

The Service's strong operational safety background provides a solid base from which to extend its safety systems and culture into the psychosocial domain.

On balance, the Service is assessed as safe, with room for improvement on psychosocial safety.

2.2 The extent to which unlawful behaviour may be currently occurring

The second matter for assessment is: the extent to which unlawful behaviour (including sexual harassment, other gender-based harms, discrimination, bullying and victimisation) may be currently occurring within the Service.

This assessment relates to conduct that if substantiated, would engage the Service's obligations under the Fair Work Act, anti-discrimination legislation or workplace health and safety legislation.

Sexual harassment

The data indicates that sexual harassment is currently occurring within the Service to a limited extent.

One instance of sexual harassment was investigated to completion during the Review, in which [REDACTED] [REDACTED] which we considered an appropriate disciplinary outcome.

Two additional matters of sexual harassment were disclosed to Mr Steirn during the interview process. One involved [REDACTED], which was managed well by the Service. The other involved [REDACTED] and this matter was still being managed at the time of reporting.

11 survey responders reported experiencing or witnessing sexual harassment within the last 12 months, which suggests that conduct of this nature continues to occur with some degree of regularity.

However, it is important to acknowledge that statistically, sexual harassment is likely to occur in any workplace, and particularly in male-dominated operational environments. This is not offered as a defence or justification. Such conduct is unlawful and unacceptable. However, it is relevant context when assessing whether the incidence of sexual harassment at the Service is indicative of a systemic or cultural problem or whether it instead reflects an anticipated 'baseline' that preventative measures seek to minimise. The data supports the latter characterisation, although the matters identified are sufficiently serious to warrant continued vigilance and improvement.

Hostile workplace environments

Multiple interviewees described conduct that, if accurate, would be considered conduct that contributes to a hostile workplace environment for women. This includes the use of sexist and misogynistic jokes in workplace settings, senior male employees drinking alcohol while female



employees ‘work the floor’ at fundraising events, and guest speakers at corporate events delivering material that included racist, sexist and sexualised jokes.

Collectively, these matters indicate that elements of a hostile workplace environment persist, albeit in pockets rather than as a pervasive organisational concern.

Sex discrimination

Reports of sex discrimination were limited and largely isolated. 12% of survey responders reported witnessing or experiencing sex discrimination in the last five years, with six responders indicating such conduct had occurred in the last 12 months.

Some survey responders identified examples of “casual sexism”, including women being asked to take notes in meetings and being excluded from networking opportunities. This low level sex-based harassment was also referenced in passing at site visits.

There were a small number of interviewees who raised concerns about conduct that could be characterised as sex discrimination, including one interviewee who described a pattern of differential treatment of women in [REDACTED], such as women being ‘passed over’ for certain tasks or projects based on gender.

However, the majority of interviewees and survey responders said they had not experienced or witnessed sex discrimination and this does not appear to be a prevalent issue within the Service.

Bullying

As noted above, 28% of survey responders reported experiencing or witnessing bullying. Nine survey responders reported that bullying had occurred within the last 12 months. Many of these reports related to concerns with an employee’s direct manager, and given these matters have not been investigated, it is not apparent to us whether they represent actual instances of bullying or whether they are properly characterised as reasonable management action.

However, there is data to suggest that bullying has recently, or is currently, occurring. One survey responder indicated that management are aware of the conduct of a particular individual but “*struggle to deal with*” that person.

Other reports suggested [REDACTED]
[REDACTED]
[REDACTED]

Victimisation

22% of survey responders reported witnessing or experiencing victimisation, with 10 responders indicating it had occurred in the last 12 months. Multiple survey responders and interviewees expressed concerns about being labelled as “troublemakers” or otherwise experiencing retaliation. Interviewees gave examples of being bullied or victimised after raising concerns.

The existence or perception of victimisation can have the effect of suppressing the reporting of concerns, meaning that the true incidence of other forms of unlawful conduct may be higher than the reported figures suggest. However, our perception based on the data is that survey responders and interviewees felt able to speak freely in the Review, evidenced by the level of engagement and detailed responses provided. The Review data does not suggest that perceptions of victimisation had a chilling effect on employees’ participation in the Review, and we feel comfortable that if there were significant concerns about unlawful conduct at the Service, they would have emerged during the Review.

Overall assessment

Having regard to the matters above, unlawful conduct is currently occurring at the Service to a small extent.



However, it is important to place this assessment in context. A substantial body of data demonstrates that across the majority of the workforce, the workplace is experienced as respectful and unproblematic. 96% of survey responders reported feeling safe from sexual harassment, and 88% reported feeling safe from bullying. These figures indicate that the unlawful conduct identified is not pervasive or systemic.

Rather, the evidence points to pockets of conduct, particular individuals, and specific contexts (such as social events and fundraising functions) in which standards are not consistently maintained. The conduct is unlawful and requires remediation, but it does not support a characterisation of the Service as having a uniformly ‘toxic’ culture.

2.3 The extent to which unlawful behaviour may have historically occurred

The third matter for assessment is: the extent to which unlawful behaviour (including sexual harassment, other gender-based harms, discrimination, bullying and victimisation) may have historically occurred within the Service, within the past five years.

For the purposes of this assessment, historical conduct refers to conduct alleged to have occurred more than two to three years before the commencement of the Review, involving individuals who have since left the Service, or conduct that survey responders or interviewees themselves described as historical in nature.

This temporal distinction is important because the evidence consistently indicates that the culture of the Service five to ten years ago was materially different from the current culture, and a substantial transformation has occurred, particularly since the commencement of the 2017 NSW contract, which catalysed the Service’s transition from a small community-based charity to a professional aviation business.

This context is critical to understanding the historical data. Prior to the NSW contract, the Service operated as a small family-style not-for-profit organisation with limited formal systems, policies and governance structures. The organisational environment was described by multiple interviewees as “*fundamentally different*” from the current operating model. In that context, conduct that would now be readily identified as unlawful was more likely to be tolerated or overlooked, and the absence of robust systems meant that even where concerns were raised, the organisational capacity to investigate and respond was limited.

Historical sexual harassment

Several instances of historical sexual harassment have been identified through the desktop review and interviews.

The most significant of these is the [REDACTED]. This matter was externally investigated, allegations were substantiated and the respondent is no longer employed by the Service. This outcome demonstrates that where serious matters were properly investigated, the Service was capable of taking decisive disciplinary action.

The matters concerning [REDACTED] were also raised, though the precise nature of the allegations and their resolution remain unclear on the available data.

A historical allegation of sexual assault was raised by [REDACTED] described the Service’s response at the time as unsupportive.

[REDACTED]

[REDACTED]

Other interviewees reported discrete historical incidents including sexually explicit conversations and comments.



Historical hostile workplace environments

The Review received reports of historical conduct at internal and external events which, if substantiated, would contribute to a hostile workplace environment.

The [REDACTED] comments made by [REDACTED] in around 2019 were raised by multiple employees.

Similarly, several employees described sexist comments by guest speakers at golf days and fundraising events.

Historical bullying

A small number of matters were identified that were perceived as bullying, and which on their face would constitute bullying within the meaning of the relevant legislation. The [REDACTED] was the most frequently cited location of this historic bullying.

Many of the instances described by interviewees relate to individuals who are no longer employed by the Service.

Historical discrimination and victimisation

The data did not disclose significant or specific incidents of discrimination or victimisation in addition to the matters already identified in the report. Most interviewees had not personally observed historic sex discrimination.

Some survey responders reported experiencing victimisation three to five years ago, with one responder stating victimisation had occurred “*over many years*”. We are not aware of the nature of the conduct perceived as victimisation in these instances.

Assessment

The matters set out above describe conduct said to have occurred that, if substantiated, suggests that unlawful conduct has occurred historically.

Several of the more serious accounts relate to individuals who have left the Service, and many relate to conduct that interviewees said had been formally addressed at the time.

The strong consensus among interviewees was that the workplace environment has materially improved over the period under review.

2.4 The extent to which nepotism or discrimination exists in recruitment and promotion

The fourth matter for assessment is: the extent to which nepotism or discrimination may currently exist, or has historically existed, in recruitment and promotion practices.

Recruitment and promotion practices attracted the weakest survey results, indicating that this is an area of concern among the workforce.

70% of survey responders agreed that recruitment is free from bias, 75% agreed that promotions are free from bias, 68% agreed that senior staff are held to the same standards as others and 68% agreed that career advancement is equally available to all employees. 28% of survey responders reported that they had witnessed or experienced nepotism or favouritism.

While these results indicate that a majority of employees have confidence in the fairness of recruitment and promotion processes, the proportion expressing concern is materially higher than in other areas assessed by the survey.

Concerns regarding nepotism in recruitment and promotion

As highlighted earlier in the report, the appointment of [REDACTED] was raised by many employees as an example of nepotism in recruitment. Employees also raised other examples such



as family members or close connections of existing employees being appointed to roles, with one survey responder stating that “*an employee’s partner, that is not qualified for the job, was employed over other candidates.*”

A pattern of concern emerged from both interview and survey data of secondments and acting-up arrangements leading to substantive appointments without genuinely open competitive processes. Multiple responders also observed that once an individual is seconded into a role, it becomes virtually impossible for anyone else to be appointed, effectively rendering any subsequent recruitment process a formality.

Roles were also identified as having been created for specific individuals without advertising, including a specific example of [REDACTED]

Some interviewees raised concerns that individuals had been promoted or retained despite known performance or behavioural issues, with interviewees citing examples of poor behaviour being tolerated in [REDACTED], and promotions granted notwithstanding behavioural concerns during [REDACTED], leading a small group to describe the Service as historically reluctant to manage performance or terminate employment.

Concerns regarding discrimination in recruitment and promotion

The most frequently raised concern regarding discrimination related to gender, particularly the under-representation of women in operational roles. Most interviewees attributed the imbalance to industry-wide factors (namely the low number of qualified female candidates) rather than discriminatory recruitment practices. Several pointed to recent developments, including the appointment of a female [REDACTED], a female [REDACTED], and the successful integration of a female [REDACTED], as evidence of openness to female representation.

Separate concerns about more subtle gender-based patterns were raised in relation to [REDACTED]. One interviewee described hiring in that area as potentially gender-biased, citing stereotypical attitudes from certain senior managers, including women being placed on different development paths, directed into roles deemed more suitable for their gender and passed over for roles characterised as male-oriented.

However, multiple interviewees said they had not personally observed discrimination in recruitment or promotion, describing the workplace as an environment where women could thrive and where decisions were made on the basis of ability and skills rather than gender.

There were no concerns raised either in the survey or in interviews about discrimination on the basis of any other protected attributes such as age, disability, race, sexual orientation or religious belief.

Assessment

In relation to nepotism, there is at least a perception among employees that nepotism exists in recruitment and promotional practices. There is also potentially some evidence that nepotism may in fact exist, however these matters have not been investigated, and we do not make a finding in that respect. However, the perception alone is problematic, and as identified elsewhere in the report, addressing this perception and ensuring fairness, clarity and transparency for employees and prospective employees moving forward is important.

In relation to discrimination, a small minority of employees hold concerns about discrimination on the basis of sex within the Service. Most employees do not consider this a significant concern. We did not identify any practices which appear discriminatory on their face. However, we refer to and repeat our observations about the gender pay gap and the lack of gender diversity in the workforce set out earlier in the report.



2.5 The adequacy of current and historical systems for preventing sexual harassment, discrimination, bullying and victimisation

The fifth matter for assessment is: the adequacy of current and historical policies, systems and training programmes for preventing sexual harassment (and other gender-based harms), discrimination, bullying and victimisation, in light of obligations under workplace health and safety and Respect@Work laws.

Current preventative systems

Policy and other frameworks

The Service maintains a comprehensive suite of policies relevant to the prevention of unlawful workplace behaviour, as detailed earlier in the report. The policy framework demonstrates the Service has invested significant effort in establishing the documentary architecture of a compliant preventative system.

However, the volume of policies is excessive for an employer the Service's size. The proliferation of overlapping documents is liable to create confusion about policy application and to dilute the clarity of the obligations and protections contained within them. This observation was reflected in interview feedback, where some employees expressed uncertainty about the correct pathway for raising concerns.

Further, there is no systematic data recording or analysis of sexual harassment or grievance trends, which means that the Service is unable to identify patterns, measure the effectiveness of its interventions, or report meaningfully to the Board on the state of its preventative systems.

Training

Relevant training is delivered through two primary programs: "How We Work" (delivered to all employees) and "How We Lead" (delivered to leaders). The content of these programs is appropriate in its coverage of relevant topics.

However:

- (a) the programs are content-heavy and risk diluting the key topics of sexual harassment and related unlawful behaviours within a broader suite of workplace conduct expectations;
- (b) the sexual harassment content specifically is relatively 'light on' given the significance of the topic and the Service's risk profile;
- (c) training frequency is insufficient. Programs are delivered every two to three years, whereas at least annual delivery would be more consistent with best practice and the requirements of the Positive Duty; and
- (d) no specific training is provided for leaders in receiving complaints (including training in trauma-informed and people-centred approaches), which is a significant gap given that leaders are often the first point of contact for employees who experience unlawful behaviour.

Psychosocial risk assessment

While the Service has a psychosocial risk assessment, it does not treat sexual harassment as a standalone risk to be assessed and controlled. Rather, it is amalgamated with other harmful behaviours in a manner that limits the specificity of the controls and the quality of the risk analysis.

Further, the risk assessment does not acknowledge industry-specific risk factors that are directly relevant to the Service's risk profile, including the male-dominated composition of the operational workforce, the hierarchical nature of aviation organisations, and the geographically dispersed operating model.



Additionally, the risk assessment does not identify victimisation as a risk in its own right, which is particularly relevant given the concerns raised in the Review about the fear of victimisation and the mental barrier this might present to reporting.

Leadership engagement

As identified earlier in the report, there are many areas in which the SLT and the Board are actively involved in, and accountable for, the risk-management and preventative processes relating to sexual harassment, bullying, victimisation and related conduct. This is pleasing.

However, the Review has identified deficiencies in the governance and leadership layer. Amongst other things, Respect@Work is not a standing item on the SLT or Board agenda. The Service does not currently survey the SLT or other leaders to assess their understanding of the risk of sexual harassment, bullying and victimisation.

Employee perceptions were that systems have improved materially but that implementation and uptake at the leadership level have lagged behind policy development. Some interviewees observed that values are “*not consistently reflected in day-to-day conduct*” and that compliance with behavioural standards is “*blasé*” in certain areas.

Leadership capability

A number of senior leaders demonstrated limited familiarity with the Respect@Work and Positive Duty framework compared to their familiarity with other regulatory obligations.

Several leaders repeatedly referred to a “positive duty of care” in broad terms without demonstrating an understanding of the Positive Duty as defined. There was also a low level of sophistication in discussing the drivers of gender-based harms, and a tendency to conflate generalised notions of “respect” in the workplace with the specific obligations under the SDA.

Employee perceptions

The survey data about preventative measures was broadly positive. 86% of responders agreed that the Service takes active steps to prevent unlawful behaviour and 78% agreed that those steps are effective. These are good indicators that the preventative measures are working to a meaningful degree across the majority of the workforce.

Overall assessment

For the foregoing reasons, we consider the Service’s current preventative frameworks are adequate for preventing sexual harassment, discrimination, bullying and victimisation. However, further work is required to ensure the frameworks and systems reflect best practice.

Historical preventative systems

The full suite of historical policy and training materials was not available for review. This was appropriate given the significant volume of documents already provided to the Review, and the fact that the Review is predominantly focused on the present climate.

One of the few historical documents we reviewed was the Enterprise Risk Register as at July 2023. This was unsophisticated and did not reflect the depth of analysis that we would expect.

Survey and interview data suggests that employees consider inappropriate conduct was tolerated to some extent in the past. We have also observed that disciplinary outcomes were lenient in circumstances where more decisive action was warranted. These issues are relevant to prevention because it is an indication to the workforce about how such conduct will be addressed, which bears upon the prevention of future incidents.

Reports of concerning behaviour from [REDACTED] suggests that inappropriate conduct was tolerated at [REDACTED] the Service, which may have had a cascading effect on the willingness of leaders and employees to challenge such behaviour.



Given the limited historical information available to us, it is not possible to fully assess the adequacy of historical systems. On the available data, we hold concerns about the adequacy of historical systems for preventing sexual harassment, discrimination, bullying and victimisation. However, as explained above, the Service's context has changed, and current environment is significantly different. Despite the criticisms of [REDACTED] identified elsewhere in this report, we acknowledge that significant policy and program development occurred during [REDACTED] and the current preventative framework, while imperfect, represents a substantial improvement on what preceded it.

2.6 The adequacy of current and historical systems for responding to alleged incidents of sexual harassment, discrimination, bullying and victimisation

The sixth matter for assessment is: the adequacy of current and historical policies, systems and training programmes for responding to alleged incidents of sexual harassment (and other gender-based harms), discrimination, bullying and victimisation, in light of obligations under workplace health and safety and Respect@Work laws. This should include but is not limited to:

- (a) barriers to reporting;
- (b) accessibility and appropriateness of complaints process; and
- (c) adequacy of disciplinary outcomes.

Current response systems

Formal processes

The Service maintains formal grievance and investigation processes for responding to allegations of unlawful workplace conduct. The documentary materials indicated that matters have been investigated, including through the engagement of external investigators where appropriate.

Complaints were on some, but not all, occasions managed appropriately, demonstrating that the current framework is capable of producing adequate responses when properly activated.

However, employee perceptions of the response systems are mixed, and the data reveals structural and cultural barriers to effective complaint handling.

Employee confidence in response systems

Survey data indicated that 75% of responders agreed that reports of sexual harassment are handled fairly and confidentially, while 74% agreed bullying reports are handled fairly. These figures represent a majority, but they fall short of the level of confidence we would expect of a well-functioning response system.

More concerning is the experience of those who used the system. Of respondents who had raised incidents, 61% expressed dissatisfaction with the process and 59% expressed dissatisfaction with the outcome. While the actual numbers of affected employees are comparatively low, this data nonetheless suggests that the response systems are not functioning as effectively in practice as the policy framework would suggest.

The [REDACTED] function as a barrier

The [REDACTED], yet it is widely distrusted within the Service. As canvassed elsewhere in the report, 48% of interview feedback concerning [REDACTED] was negative, and multiple survey responders described [REDACTED] as unapproachable and untrustworthy.

This creates a fundamental impediment to effective complaint handling. If employees do not trust the [REDACTED], they are far less likely to report, and matters that should be addressed through formal processes will instead remain unaddressed or



be dealt with through other means. The CEO has become the default recipient of complaints in circumstances where employees bypass [REDACTED], which is unsustainable as a long-term arrangement.

Procedural barriers to reporting

The RWI Policy does not refer to trauma-informed or person-centred principles when receiving complaints or determining the next steps. The absence of these principles is apparent in other areas of the policy, which are at times overly prescriptive. The policy requires that complainants submit both a verbal and written complaint and specify their preferred outcome. This level of procedural prescription may discourage reporting, particularly in circumstances where complainants are distressed, unsure of what outcome they seek, or fearful of formalising their concerns. Best practice in complaint handling recognises that the threshold for reporting should be low.

Fear of victimisation was identified as a material barrier to reporting, together with perceptions that complaints are not taken seriously, geographical separation from the central support function, and a lack of communication about outcomes of complaints that have been made. No anonymous reporting mechanism exists beyond the formal whistleblower channel, which is a gap in an organisation of the Service's size and risk profile.

Leaders do not receive training in receiving complaints or adopting trauma-informed and person-centred approaches to disclosure, which may contribute to the inconsistency of responses across the Service.

Adequacy of disciplinary responses

Our analysis of the adequacy of disciplinary responses is addressed in full earlier in the report. As explained, we hold some concerns in relation to the adequacy of disciplinary responses to substantiated complaints.

Multiple instances of substantiated sexual harassment received responses that we assessed as inadequate, including: [REDACTED] being dismissed without formal disciplinary action; [REDACTED] received only counselling; and [REDACTED] received only counselling.

These outcomes create a disconnect between the Service's stated 'zero tolerance' policy position and its practice and may undermine employee confidence and send an implicit message that sexual harassment will be tolerated where it falls short of the most egregious conduct.

We have posited that a potential interplay with the "Just Culture" principles may be contributing to this pattern and inappropriately influencing the disciplinary approach to misconduct.

There is also evidence of confusion between misconduct and performance management processes. A [REDACTED] bullying matter was treated as a performance issue rather than a misconduct matter, which was noted by an independent investigator as reflecting a broader confusion within the Service about the appropriate framing of such complaints.

Overall assessment

For the foregoing reasons, we consider the Service's current response frameworks are adequate for preventing sexual harassment, discrimination, bullying and victimisation. However, further work is required to ensure the frameworks and systems reflect best practice and to address the concerns raised by employees in the Review.

Historical response systems

As was the case with prevention frameworks, the full suite of historical materials was not available for review, which was appropriate.

On the basis of the materials and data available to us, we understand that historical response systems were significantly less developed than the current framework.



The [REDACTED] incident stands as a positive example of historical response. As detailed elsewhere in the report, the matter was investigated, allegations were substantiated, and the respondent is no longer employed by the Service. However, this appears to have been the exception rather than the norm, and the broader historical picture is one of leniency in disciplinary outcomes and a limited organisational capacity to manage complex interpersonal complaints.

Given the limited information available to us, it is not possible to fully assess the adequacy of historical systems. In light of our comments above, we hold concerns about the adequacy of historical systems for responding to sexual harassment, discrimination, bullying and victimisation.

Again, the data suggests there has been a significant improvement over the past two to three years, particularly under the [REDACTED] leadership.

2.7 The adequacy of actions taken in response to [REDACTED] and other complaints

The seventh matter for assessment is: the adequacy of the actions taken by the Service in response to specific [REDACTED] and other complaints concerning inappropriate or unlawful behaviour (related to the issues within the scope of the Review) occurring within the past five years, including matters that were the subject of media reporting on 14 November 2025 and 20 October 2025. This includes:

- (a) the adequacy of the investigation undertaken;
- (b) the adequacy of the response provided to the complainant;
- (c) the appropriateness of any disciplinary sanction imposed by the Service and/or other actions taken.

Limitations of assessment

Our assessment of the adequacy of actions taken in response to [REDACTED] complaints was limited by the information available to us. The materials provided to us in respect of [REDACTED] matters were heavily redacted and the Service was understandably concerned to abide by the confidentiality provisions attaching to such complaints in accordance with [REDACTED].

Further, despite extending the invitation to participate in the Review to previous [REDACTED] (without disclosure of their identity) including a commitment that any non-disclosure obligations would be waived for the purposes of such participation), no confirmed [REDACTED] identified themselves in interview.

Accordingly, the following assessment is based on the limited documentary materials available to us, as well as our observations about other complaints.

[REDACTED]

As noted elsewhere in the report, the action taken in response to [REDACTED] was assessed as adequate. The matter was investigated, the conduct was substantiated, and the respondent is no longer employed by the Service. This outcome demonstrates that the Service is capable of taking decisive and appropriate action in response to serious complaints where the evidence supports a finding of misconduct. The handling of this matter stands as a positive example.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Matters arising during the Review

Three matters involving alleged sexual harassment were raised during of the Review. Two of these were managed well, with the Service adopting an approach that respected the wishes of the affected employees while ensuring that the matters were appropriately addressed. The third matter was still pending at the time of reporting but was being managed appropriately.

The management of these matters gives us confidence that the Service's response to complaints is maturing.

Pattern of concerns

Notwithstanding the positive examples identified above, a pattern of concern emerges across the [REDACTED] and complaint response evidence. At times, disciplinary outcomes have been lenient in circumstances where the conduct warranted more decisive action. The [REDACTED] [REDACTED] are specific examples of inadequate responses that undermine the credibility of the organisation's stated zero-tolerance position. There is a perception among some interviewees that responses to complaints are too slow or inadequate, though it is noted with confidence that this has shifted under the current CEO's leadership. The trajectory is positive, and the Service's demonstrated capacity to handle serious matters appropriately (as evidenced by the matters managed during this Review) provides a foundation for continued improvement. The challenge is to bring the same rigour and decisiveness to all matters, including those that fall short of the most egregious conduct.

Overall assessment

As set out in Section 2.1(A) of the Final Report⁵, the Service has managed some complaints well, and in those matters it took appropriate steps including taking a trauma-informed approach, investigating incidents where necessary, and maintaining open lines of communication with the affected parties. The Service has also taken appropriate disciplinary action with respect to many of the complaints of which we are aware, including one of the reports of sexual harassment that arose during the Review.

⁵ Section 2.1(A) of the Final Report sets out observations from a desktop review of key materials from the Service in respect of the Service's management of, and disciplinary responses to, sexual harassment and bullying.



However, there were other matters in which we were concerned by the approach taken to the management of the matter and the disciplinary action applied. Those concerns are detailed elsewhere in the report and are not repeated here.

While there was a perception among some interviewees that responses to complaints are too slow or inadequate, many employees felt that this had improved under the current CEO's leadership. The trajectory is positive, and the Service's demonstrated capacity to handle serious matters appropriately provides a foundation for continued improvement.

On balance, while we consider the Service's approach to [REDACTED] and other complaints has been inconsistent over time, we are encouraged by the Service's recent handling of complaints and feel comfortable that it has the capability to improve its record in this regard.

2.8 Assessment in relation to whether patient safety has been impacted (and the extent to which that arose because of the existence of a 'toxic' workplace culture)

The eighth matter for assessment is: in light of the findings concerning the above areas, an assessment in relation to:

- (a) whether or not patient safety was, or may have been, negatively impacted. This aspect is not intended to intrude upon the matters properly within the jurisdiction of CASA, and focuses on the impact of reported workplace cultural issues on patient safety and care; and
- (b) the extent to which any negative impact on patient safety arose because of (or for reasons relating to), the existence of an allegedly 'toxic' workplace culture, including the cultural relationship between the Service's teams and the NSW Health and NSW teams (to the extent the Review has oversight of the relationship between these services).

In responding to these questions, we have assessed patient safety as a function of the Service's operational performance across several dimensions, including aviation safety, engineering integrity, clinical care, willingness to undertake all mission categories, the existence and efficacy of a 'speak-up' culture for safety reporting and the supporting systems and processes that underpin safe operations.

While the Review was not engaged to conduct a comprehensive review of operational or aeromedical safety, the evidence gathered through interviews, survey data and the desktop review provides a sufficient basis upon which to form a view about whether the workplace cultural issues identified in this report have impacted patient safety.

As set out earlier in the report, the dominant picture that emerged from the interview evidence is one of an organisation that is operationally safe and clinically professional, and in many respects notably so.

No interviewee expressed a belief in the safety allegations as presented in the 60 Minutes broadcast. Several interviewees with direct technical knowledge provided detailed accounts that contradicted the media portrayal of operational safety concerns.

The aviation safety reporting culture was described as universally positive, including a robust, blame-free system in which staff feel supported to raise errors, near-misses and concerns without fear of retribution.

Approximately five survey responders reported that rude, hostile or undermining behaviour from colleagues or leaders at the Service had had a negative impact on patient safety or care.

[REDACTED]
[REDACTED]
[REDACTED]. The details of such alleged conduct, and the specific alleged impact on patient safety or care, is not known. However, it is significant that such reports were in the absolute minority of responses.



Only one interviewee drew a direct link between cultural conditions and patient outcomes. The interviewee was employed by NSW Health and described a reluctance by some Service employees to undertake inter-hospital transfer work in favour of “*high-intensity exciting jobs*”. [REDACTED]

[REDACTED]. However, the interviewee acknowledged that the position has since improved significantly.

Similarly, some conversations at site visits to [REDACTED] anecdotally disclosed that NSW and NSW Health employees can at times apply inappropriate pressure to aircrew, including to fly in dangerous conditions. Ironically, this pressure is ostensibly applied to prioritise patient safety (e.g. to reach a patient more quickly) but it potentially compromises the safety of everyone onboard the helicopter. While no one expressly linked those concerns to patient safety, it is apparent that continued pressure to fly against the advice of the aircrew creates a safety risk and a potential tension point between colleagues.

The material available to the Review does not support an assessment that patient safety has been impacted by workplace cultural issues.

There is no evidence of a pervasive ‘toxic’ workplace culture. Rather, the Service maintains high standards that are consistently praised by external clinical partners.

3 Section 4: Concluding observations

The Review was commissioned in response to serious public allegations about the culture of the Service. Having now had the benefit of a comprehensive desktop review, a detailed employee survey, approximately 100 interviews and site visits across the Service’s four locations, we are in a position to draw together our overall observations.

At its core, the Review has found an organisation that is on a journey. It is not an organisation with a pervasive ‘toxic’ culture. Rather, it is one that has undergone remarkable transformation over a relatively short period, from a small community-based charity to a professional aviation business delivering a complex government contract. That transformation has, unsurprisingly, generated friction and growing pains, particularly in its people management and governance systems. However, the trajectory is clearly positive and the commitment of the Board and the CEO to continuous improvement is evident.

The Service’s operational safety record is exceptional. This was acknowledged by employees, external clinical partners and regulatory authorities alike. It is a credit to the Service and its people that no interviewee expressed concern about current physical safety standards, and that the aviation safety reporting culture was described in universally positive terms. This strength is not merely relevant as a standalone finding; it provides a powerful organisational foundation upon which to build improvements in psychosocial safety. The Service already understands how to think critically about risk, how to maintain robust reporting systems and how to embed a culture of accountability in relation to safety. The challenge now is to extend that same rigour, discipline and cultural expectation to the prevention and management of sexual harassment and other gender-based harms, bullying, victimisation and other forms of unlawful conduct.

The most significant issues identified in the Review are not issues of widespread unlawful conduct. Rather, they are systemic issues that, left unaddressed, may allow pockets of unlawful conduct to persist and may erode employee confidence in the Service’s capacity to respond. Chief among these is the deficit of trust in the [REDACTED] function, which was the most consistently raised concern across all data sources and which represents a material impediment to the effective prevention of, and response to, unlawful workplace behaviour. Until this deficit is resolved, employees who experience or witness unlawful conduct may not report it, and the Service’s formal systems, however well-designed, will not function as intended.



Closely related is the disconnect between the perceptions of senior leaders and the remainder of the workforce. Senior leaders hold a more optimistic view of how employees experience the Service than is borne out in the data. This gap is concerning because it may mean that ‘bad news’ is not consistently being heard or understood by leadership, and that the urgency of the issues identified in the Review may not be fully appreciated at the level at which change must be driven. The Service should be attentive to this gap and take deliberate steps to ensure the findings of the Review are received with the seriousness they warrant.

The adequacy of disciplinary responses is a further matter of importance. The Review has identified instances in which the Service’s responses to substantiated allegations of sexual harassment and bullying have been insufficient. When disciplinary outcomes are perceived as lenient, it sends an implicit message to the workforce that such conduct will be tolerated, notwithstanding the Service’s robust policy settings. The disconnect between policy and practice in this regard requires attention, and the Service should ensure that future disciplinary decisions are commensurate with the seriousness of the conduct.

We are conscious that the Service is currently navigating a period of organisational uncertainty, including the pending contract renewal. We acknowledge that the implementation of the recommendations in this report will require sustained effort, resources and leadership attention over a period of time. Not all recommendations can or should be implemented simultaneously, and the Service will need to exercise judgement about prioritisation. However, we encourage the Service to move with purpose on the matters identified, and particularly in relation to the [REDACTED] function, leadership capability and complaints handling, which represent the most pressing concerns.

It is also important to acknowledge the courage of those employees who participated in the Review, whether through the survey, the interviews or the informal conversations at site visits. Many employees shared their experiences openly and candidly, often about matters of considerable sensitivity. The quality and consistency of that engagement has been critical to the Review’s ability to form reliable assessments. The Service owes it to those employees to demonstrate that their contributions have been heard and will be acted upon. How the Service communicates the findings of the Review to the workforce will itself be a significant cultural moment.

Finally, we observe that the Service has many strengths upon which to build. Its people are committed, professional and deeply proud of the Service’s life-saving mission. Its operational standards are exemplary. Its CEO is widely respected and has demonstrably improved the culture since his commencement. The Board has shown a genuine commitment to accountability and transparency by commissioning the Review and providing it with full support and access. These are not the hallmarks of an organisation that is resistant to change.

The challenge for the Service is to build on these strengths, address the deficiencies identified in this report with rigour and transparency, and demonstrate to its workforce that the commitment to a safe, respectful and inclusive workplace is not merely aspirational but is reflected in the lived experience of every employee. We are confident the Service has the leadership, the intent and the organisational capability to meet that challenge.



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Annexure 1 Terms of Reference

TERMS OF REFERENCE: INDEPENDENT REVIEW OF SAFETY AND WORKPLACE CULTURE AT THE WESTPAC RESCUE HELICOPTER SERVICE

CONFIDENTIAL AND SUBJECT TO LEGAL PROFESSIONAL PRIVILEGE

1.1 Introduction

King & Wood Mallesons (KWM) has been engaged by the Westpac Rescue Helicopter Service (the **Service**) to undertake an independent review of the safety and workplace culture within the Service, with a particular focus on the prevalence of, and organisational response to, allegations of sexual harassment (and other gender-based harms), discrimination, bullying and victimisation (the **Review**). The Review has been sponsored by and has the full support of the Service's Board.

The purpose of the Review is to enable KWM to provide legal advice to the Service and the Board, including in relation to (amongst other things), the Board and the Service's obligations under the *Fair Work Act 2009* (Cth), anti-discrimination laws and workplace health and safety laws. KWM will assist the Service to put in place protocols to ensure everything possible is done to maintain legal professional privilege.

Ms Cilla Robinson, a Partner at KWM, will have carriage of the Review, assisted by an expert team.

Ms Robinson has extensive experience in employment and industrial relations, Respect@Work reforms and whistleblower matters, and will lead the Review with sensitivity, independence and rigour.

1.2 Scope

The scope of the Review includes the following matters:

- 1 An **overall assessment** of physical and psychosocial safety for employees at the Service over the past five years, including in relation to the existence of an allegedly 'toxic' workplace culture characterised by sexism, discrimination, and other unlawful or inappropriate behaviour;
- 2 The extent to which unlawful behaviour (including sexual harassment, other gender-based harms, discrimination, bullying, and victimisation) may be **currently occurring** within the Service;
- 3 The extent to which unlawful behaviour (including sexual harassment, other gender-based harms, discrimination, bullying and victimisation) may have **historically occurred** within the Service, within the past five years;
- 4 The extent to which **nepotism or discrimination** may currently exist, or has historically existed, in **recruitment and promotion practices**;
- 5 The adequacy of current and historical policies, systems, and training programmes for **preventing** sexual harassment (and other gender-based harms), discrimination, bullying and victimisation, in light of obligations under workplace health and safety and Respect@Work laws;
- 6 The adequacy of current and historical policies, systems, and training programmes for **responding** to alleged incidents of sexual harassment (and other gender-based harms), discrimination, bullying and victimisation, in light of obligations under workplace health and safety and Respect@Work laws. This will include but is not limited to:
 - (a) Barriers to reporting;
 - (b) Accessibility and appropriateness of complaints processes; and

- (c) Adequacy of disciplinary outcomes.
- 7 The adequacy of the actions taken by the Service in response to specific [REDACTED] and other complaints concerning inappropriate or unlawful behaviour (related to the issues within the scope of the review) occurring within the past five years, including matters that were the subject of media reporting on 14 November 2025 and 20 October 2025. This aspect of the Review will include an examination of:
- (a) The adequacy of the investigation undertaken;
 - (b) The adequacy of the response provided to the complainant;
 - (c) The appropriateness of any disciplinary sanction imposed by the Service and/or other actions taken.
- 8 In light of the findings concerning the above areas, an assessment in relation to:
- (a) whether or not patient safety was, or may have been, negatively impacted. This aspect of the review is not intended to intrude upon the matters properly within the jurisdiction of CASA, and will focus on the impact of reported workplace cultural issues on patient safety and care; and
 - (b) the extent to which any negative impact on patient safety arose because of (or for reasons relating to), the existence of an allegedly ‘toxic’ workplace culture, including the cultural relationship between the Service’s teams and the NSW Health and NSW Ambulance teams (to the extent the Review has oversight of the relationships between these services).

In the event that the Review receives credible reports or identifies any current physical or psychosocial hazards impacting employees and other workplace participants, or current issues that may seriously impact patient safety and care, these will be reported immediately to the Service.

Out of scope for the Review are individual misconduct determinations and disciplinary outcomes, re-opening of previously resolved matters, legal advice on specific historical cases outside the purposes of the Review (save to the extent necessary to understand systemic themes and risks that are in scope) and aviation safety. Also outside of scope is the review of any documents or materials from NSW Health or NSW Ambulance.

The Service is considering engaging with an aviation safety expert to review the Service’s operations and make findings or observations in relation to aviation safety. In that case, the expert would be engaged by KWM under legal professional privilege and the Review will have regard to the expert’s findings or observations in the form of an addendum to the Review’s report.

1.3 Review methodology

The Review will be undertaken in two streams, to be run in parallel:

- **Stream 1:** A review of key documentary evidence and data points to identify systemic themes and issues related to the Scope above. Sources for this stream include (but are not limited to):
 - Policies and procedures (including Service and Board processes) relating to employee behaviour, sexual harassment, sex discrimination, complaints and grievances, whistleblowing and ‘speaking up’;
 - Training program materials, including ‘How We Work’ and ‘How We Lead’;
 - Employee survey instruments and results relevant to culture, safety, respect and inclusion;
 - Summaries of all complaints or grievances in the last five years, from employees, contractors, volunteers or other workers, appropriately deidentified and, where possible, arranged by theme;
 - [REDACTED] and other complaints concerning inappropriate or unlawful behaviour and specific information (subject to consents and advice on how this information can be provided) on the actions taken by the Service in response to specific [REDACTED] and

other complaints concerning inappropriate or unlawful behaviour (related to the issues within the scope of the review) occurring within the past five years; and

- CASA reports, to the extent that they provide relevant background for the Service's safety systems as context for any cultural concerns.
- **Stream 2:** Qualitative data from current and former employees and other stakeholders, including:
 - A voluntary, anonymous, employee survey with all current employees of the Service (employed within the past five years) and other stakeholders;
 - Interviews with a representative cross-section (including across geography/bases, function, level, operational and non-operational) of current Service employees (and former employees who have been employed by the Service since 1 January 2021) (on an opt in/voluntary basis);
 - Interviews with former complainants and [REDACTED] (on an opt in/voluntary basis);
 - Interviews with the Board and other senior managers and a review of relevant Board material related to risk management, workplace culture and safety; and
 - Site visits to observe and understand workplace operations and context.

KWM will synthesise the findings from both streams into a single comprehensive report, together with suggested recommendations.

An interim report will be delivered as soon as practicable before the end of 2025, subject to the availability of requested data from the Service.

1.4 Work plan

The following steps are underway as of November 2025:

- **Stream 1**
 - A detailed list of Requests for Information (RFIs) has been provided to the Service, with action to respond to the RFIs presently underway as a priority.
 - KWM are reviewing materials and information as it becomes available from the Service.
- **Stream 2**
 - Ms Robinson has initiated scheduling interviews with key Service stakeholders.
 - Interviews with relevant past and current employees from a cross-section of the Service will be conducted by an independent investigator engaged by KWM under legal professional privilege, David Steirn of Enterprise Investigations.
 - An interview schedule and detailed plan will be prepared and circulated by Mr Steirn as part of the culture review for Stream 2.
 - Mr Steirn will provide KWM with a detailed report setting out aggregated and deidentified results arranged by theme.

1.5 Governance, confidentiality and privilege

The Review will be conducted by KWM under legal professional privilege. Communications and work product generated for the purpose of the Review will be treated as confidential and privileged.

Interview participation will be voluntary, and information will be aggregated and deidentified in reporting to protect individual confidentiality and support psychological safety.

The integrity of the Review process will be prioritised over speed where necessary to ensure good process and accurate findings.

1.6 Engagement and wellbeing

The Review will provide clear participation information for employees and relevant past employees, volunteers, contractors or other workers with appropriate support channels and escalation pathways.

The Review will seek to ensure cultural safety and accessibility for participants at all times, and will adopt trauma-informed processes and practices.

Informed consent will be obtained for all participants in the Review.

1.7 Communications and reporting

KWM will provide the Service with a comprehensive report, together with suggested recommendations. An interim report will be delivered as soon as practicable before the end of 2025.

Both the interim and final Review reports will be privileged.

A statement outlining high-level findings and/or recommendations will be made public. The Service will share more detailed findings with NSW Ambulance, the NSW Government, and Westpac.

1.8 Dependencies and risks

The timetable and depth of analysis depend on timely RFI responses, the completeness and quality of available data and documents, and the level of participation by employees, relevant past employees, volunteers, contractors or other workers.

If material constraints arise, the timetable may be revisited to ensure good process and the integrity of the Review.

1.9 Quality assurance

Findings will be arranged by theme, supported by evidence from both streams, and tested for consistency across data sources.

Recommendations will be specific, actionable and proportionate to the identified risks, with an emphasis on sustainable culture change, effective systems and safe reporting pathways.

