Athena Swan
Bronze Award for
Research Institutions

Name of Institution	Murdoch Children's Research Institute
Date of Application	October 31, 2023
Contact for Application	Nicole Kleppe
Email	nicole.kleppe@mcri.edu.au
Telephone No	0402 623 602

31 October 2022

Professor Kathryn North AC
Director, Murdoch Children's Research Institute

By email via Nicole Kleppe, Organisational Development Consultant – SAGE,
nicole.kleppe@mcri.edu.au

Dear Professor North,

Thank you for your letter of 26 October 2022 requesting an extension to the submission deadline for the Murdoch Children's Research Institute's Athena Swan Bronze Award application.

I have considered the circumstances detailed in your letter and acknowledge the impact they have had on the Institute's ability to undertake a rigorous self-assessment and action planning process. Noting this, the request to submit the Athena Swan Bronze Award application on Tuesday 31 October 2023 is granted.

I ask that you please append this approval to the front of your application when it is submitted in due course to ensure that it is taken into account as part of the SAGE validation process.

Should your team require further assistance as they prepare the application, they should not hesitate to contact the SAGE Senior Advisor: Capacity Building, Tamzen Armer (tamzen.armer@science.org.au).

I thank for your continuing commitment to the SAGE journey and the Athena Swan process.

Yours sincerely,

Dr. Wafa El-Adhami
SAGE CEO

SAGE Athena SWAN Bronze Institute Application

October 2023

Murdoch Children's Research Institute acknowledges the Wurundjeri people of the Kulin nation, the Traditional Custodians of the land upon which its offices are located, and pays its respects to Elders past, present, and emerging.

Murdoch Children's Research Institute also acknowledges the Traditional Custodians of the Aboriginal and Torres Strait Islander lands upon which its research takes place.

Contents

Glossary of terms

Abbreviation and/or Word	Description
AAMRI	Association of Australian Medical Research Institutions
AEC	Animal Ethics Committee
ARG	Aboriginal Reference Group
CARM	Culturally and Racially Marginalised
D&I	Diversity and Inclusion
DiSC	Dominance, Influence, Steadiness and Conscientiousness Model
EAP	Employee Assistance Program
FT	Full-Time
FTE	Full Time Equivalent
GEDI	Gender Equity, Diversity and Inclusion
HDR	Higher Degree by Research
HRIS	Human Resources Information System
IBC	Institutional Biosafety Committee
L&D	Learning and Development
LGBTQIA+	Lesbian, gay, bisexual, transgender, queer, intersex, asexual and other sexually or gender divers
MEL	Monitoring Evaluation and Learning
MCRI	Murdoch Children's Research Institute
NHMRC	National Health and Medical Research Council
P&C	People and Culture
P&D	Performance and Development
PDF	Performance and Development Framework
Pillar	Areas of focus that bring our strategic vision to life.
PT	Part-Time

Abbreviation and/or Word	Description
RA	Research Assistant
RAP	Reconciliation Action Plan
RCH	Royal Children's Hospital
RSA	Research Student Association
RSO	Research Support & Operations
SAGE	Science in Australia Gender Equity
SAT	Self-Assessment Team
SD	Standard Deviation
SMT	Senior Management Team
STEMM	Science, Technology, Engineering, Mathematics and Medicine
Theme	Specialist research areas
ToR	Terms of Reference
Unit	Cross-functional teams to enable research and researchers
VCGS	Victorian Clinical Genetics Service
WG	Self-Assessment Team Working Group
WGEA	Workplace Gender Equality Agency

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Comments Pertaining to Application

Comments Pertaining to Data

The data in this application covers 2018-2022. Data for employment by headcount and FTE is reported as a yearly snapshot in alignment with Workplace Gender Equality Agency (WGEA) reporting (i.e., March 2018- March 2019, etc.), all other data (i.e., grants and bullying) are presented as a cumulative amount for each year (January-December). Tables and Figures generally provide percentages and numbers to aid interpretation with care taken where necessary to protect staff identity. Tables generally refer to headcount; where there are six or fewer people, the data is presented as ≤6 to protect confidentiality. Most data presented in the application is from 2022, with trends from 2018-2022 remaining generally consistent.

Historical data collected by MCRI's Human Resources Information System (HRIS) and reported to the WGEA is only available by Sex; no intersectional factors are available. As a result, data related to Gender, Aboriginal and Torres Strait Islander background, cultural background, disability status and sexuality are unavailable for sections describing MCRI's workforce.

Comments Pertaining to Sex and Gender

Sex for humans is a legal status, classified as either male or female in most jurisdictions, and which is typically presumed or observed at birth based on external Sex characteristics. Gender refers to how people identify or express themselves, including behaviour, attitudes, appearance, and habits[1]. A person's Gender identity or Gender expression is not always binary and may change over time. MCRI acknowledges that Gender is distinct from Sex and that definitions for these terms have differed through time and across the globe.

MCRI acknowledges that Sex and Gender are historically interrelated and often used interchangeably. For example, WGEA reporting uses Sex and Gender interchangeably, and MCRI's HRIS has a "Gender" question but only provides Sex (male/female) as a reporting option. While the two terms are related concepts, MCRI has exercised caution in our SAGE Athena SWAN Application when comparing counts for Sex with those for Gender and providing an overview of the state of Gender equity at MCRI. The term "Sex" is used to present data where only female and male options were provided, "Gender" is used to present data where broader sections for Gender, including woman and/or female, man and/or male, non-binary and "other term, please specify" was available. Conclusions and relevant actions to address areas of concern use Gendered terms such as women, men, and non-binary people to align quantitative data with qualitative findings. We know these conclusions may conflate Sex with Gender in some instances. Efforts to further distinguish these terms through how we collect and compare Sex and Gender data at MCRI are in the Application and Action Plan.

Comments Pertaining to Actions and Action Plan

MCRI's SAGE Athena SWAN seven-year Action Plan is a product of a five-month co-design process that engaged our people at all Levels to consider the self-assessment findings and recommend actions based on institutional data and national/global evidence of best practice. This process resulted in broad-ranging activities that simultaneously address multiple Priority Areas (barriers). Our co-design participants recognised that our Problem Areas do not exist in silos and are often interrelated and mutually reinforcing. As such, the Action Plan is presented as a phased timeline to

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[1] Definitions from Sex and Gender Health Policy (https://www.sexandgenderhealthpolicy.org.au/).

allow cross-priority actions and illustrate how actions are built upon each other. Actions referenced within the body of the application are cross-referenced in the Action Plan with corresponding icons (below) that directly link each action to our Priority Areas. Keeping true to the co-design principles agreed to, we have also included sub-topics and enabling actions that may not directly relate to the narrative due to word limit but have been identified as activities that will comprehensively address our Problem Areas. MCRI's structure and ways of working require an innovative approach to organisational change; how actions are presented and discussed throughout this document reflects this and communicates our commitment to transparency and rigour.

Equity and diversity policies and procedures

Workload /flexibility

Professional development

Career pathways

Culture and safety

Accessibility and mental health

1. Letter of Endorsement from Head of the Research Institution

Recommended Word Count	**1,000**
Actual Word Count	**501**

Dr. Janin Bredehoeft
Chief Executive Officer
Science in Australia Gender Equity
PO Box 7050
Greenway ACT 2900

Dear Dr. Bredehoeft,

I am delighted to endorse the Murdoch Children's Research Institute (MCRI) application for the Science in Australia Gender Equity (SAGE) Athena SWAN Bronze Institute Award accreditation. As Director of MCRI, I take pride in supporting this initiative that reflects our commitment to Gender equity, diversity, and inclusion (GEDI).

About MCRI

Established in 1986, MCRI is an impact organisation powered by research; our purpose is "for all children to have the opportunity to live a healthy and fulfilled life". We are Australia's leading child health research institute and ranked in the top 3 worldwide for research quality and impact. Our research programs and partnerships span 143 countries, 1,867 organisations and 14,177 collaborators and impact the lives of millions of children and their families by contributing to changes in policy and practice. MCRI is co-located with The Royal Children's Hospital and The University of Melbourne Department of Paediatrics, united as the Melbourne Children's Campus – a world-leading academic health science centre.

Home to more than 3,000 staff working together to address the urgent unmet health needs of infants, children, and adolescents, MCRI's organisational structure reflects its focus on five research "Themes": Clinical Sciences; Genomic Medicine; Stem Cell Medicine; Infection, Immunity & Global Health; and Population Health. The breadth of research at MCRI spans discovery, trials, intervention, translation, and large-scale global implementation. Our strategic "Pillars" (Research Support, Funding; Engagement; People & Culture; and Growth & Innovation) delivered by five Units (Office of Director, Office of Research, Innovation, Operations, and Engagement & Development) make our impact possible. United by our purpose, the impact of MCRI's research is realised by a tri-lateral relationship between MCRI, our funders, and strategic partners, with children at the heart of what we do.

As Director, I am supported by Senior Management and Executive teams, who form MCRI's governance structure and shape our vision and activities. The Board of Directors provides oversight, sets priorities, and ensures financial stability, while additional committees offer specialised expertise. A rigorous reporting system maintains transparency, accountability, and adherence to strategic objectives.

Our commitment to SAGE recognises the importance of GEDI for MCRI. We understand that transformative change is best achieved through an evidence-based structure and believe that providing and maintaining a safe and supportive environment is a collective responsibility shared by all staff. My commitment to fostering a culture that celebrates all has played a pivotal role in shaping the organisational culture and inspiring others to embrace these principles actively. The MCRI Senior Management and Executive Teams have been invested in our progress towards SAGE accreditation and have taken a hands-on role in supporting and driving this work across MCRI while ensuring grassroots initiatives and specialist roles have the resourcing required for success. Our Self-Assessment Team (SAT) of 53 volunteers reflected the diversity and complexity of MCRI, and participation from our people across MCRI in self-assessment engagement opportunities to share their needs, concerns and viewpoints was impressive. I am proud to lead an organisation where people at all Levels strive toward a diverse and inclusive workplace.

The SAGE process has enabled MCRI to celebrate existing practices toward advancing Gender equity, representation, progression, and success for all and map targeted actions to address areas for improvement. Our areas for improvement, or 'Priority Areas', include Policies and Procedures, Workload & Flexibility, Professional Development, Career Pathways and Workplace Culture, with a 'Sub-Group" Specific Priority Area in Accessibility & Mental Health. By addressing these Priority Areas through our Action Plan, we aim to foster attraction, retention, and progression to ensure significant impact and the health and fulfilment of all our people.

Developed through a co-design process that fostered a sense of ownership and dedication among our people to engage with and support actions moving forward, MCRI's Action Plan creates impetus and responsibility to embed the work of SAGE into our overarching Strategy and resource teams and engagement initiatives to ensure their success. The Action Plan will have champions from the Board, researchers, students, and research professional staff and have a dedicated GEDI team responsible for coordinating the work and assessing impact through monitoring, evaluation and learning initiatives. Together, these parts will enable us to progress in our commitment to being a workplace where diversity is celebrated, voices are amplified, and opportunities are accessible to all.

I confirm that the information presented is an honest, accurate, and true representation of MCRI and complies with the word limit. Figures and Tables outlining MCRI's structure, staff profile, Priority Areas and Action Plan are on the following pages. Please note that data discussed throughout this application relates only to MCRI Staff and Students (not including VCGS or Honoraries) from 2018-2022. The extended timeframe for Self-Assessment (5 years) reflects the impacts of the Covid-19 pandemic.

Sincerely,

Professor Kathry

Figure 1: MCRI Organisational Structure

MCRI Executive

Animal Ethics Committee (AEC)
Biospecimen Advisory Committee
Diversity & Inclusion (D&I)
Health and Safety Committee
Institutional Biosafety Committee (IBC)
Risk Management Committee

Executive Director

Prof Kathryn North

Murdoch Children's Research Institute Board of Directors

Chairman - Patrick Houlihan
Co-Chair – Sarah Murdoch

MCRI Board Committees

Development Board
Global Advisory Board
Audit, Finance & Risk Committee
Investment Committee

VCGS Board

Chief of Staff to the Director

Dr Leanne Mills
Directors Office
Research Strategy
Major Projects
Government Relations
Research Governance & Integrity
Research Impact & Consumer Involvement
Strategy & Communications

Deputy Director

Prof Andrew Sinclair
Office of Research
Data
Grants
Research Governance & Integrity

Chief Operating Officer

Greg O'Brien
RSO
Cyber Governance
Finance
Information Technology
EHS
Legal
People & Culture
Scientific Services
Risk & Compliance

Chief Scientist

Prof Melissa Little

Director of Engagement & Development

Matthew Hannan
Brand
Media & Communications
Engagement & Philanthropy

Director of Innovation

Nirasha Parsotam
Innovation

VCGS CEO

Martin Smith

Genomic Medicine

Prof John Christodoulou, Director of Genomic Medicine

Bioinformatics
Biomedical Ethics
Brain and Mitochondrial
Centre for Population Genomics
Diagnosis and Development
Genetic Health
Genomics Health Alliances
Genomics in Society
Metabolic
Molecular Therapies
Muscle Research
Neurogenetics
Reproductive Development
Reproductive Epidemiology
Speech & Language
Translational Genomics

Stem Cell Medicine

Prof Enzo Porello, Director of Stem Cell Medicine

Blood Development
Functional Phosphoproteomics
Heart Regeneration
Heart Disease
Immune Development
Kidney Regeneration
Muscle Bioengineering
Neural Stem Cell
Neuro-oncology
Stem Cell Ethics & Policy
Transcriptomics and Bioinformatics

Clinical Sciences

Prof Vicki Anderson, Director of Clinical Sciences

Anaesthetics
Brain and Mind
Clinical Paediatrics
Developmental Imaging
Diabetes
Emergency
Facial Sciences
Gait Lab & Orthopaedics
Haematology
Heart
Hormone Research
Neonatal Research
Neurodisability and Rehabilitation
Neuroscience
PICU
Surgery
Victorian Infant Brain Studies (VIBeS)

Population Health

Prof Sharon Goldfeld, Director of Population Health

Adolescent Health
Clinical Epidemiology & Biostatistics Unit (CEBU)
Health Services
Intergenerational Health
Justice Health
LifeCourse
Prevention Innovation
Policy and Equity
Population Allergy

Infection, Immunity & Global Health

Prof Andrew Steer, Director of Infection, Immunity & Global Health

Allergy Immunology
Antimicrobials
Asia-Pacific Health
Cellular Immunology
Enteric Diseases
Health Informatics
Infectious Diseases
Inflammatory Origins
International Child Health
Intestinal Failure & Clinical Nutrition
Molecular Immunity
Molecular Microbiology
New Vaccines
Respiratory
SAEFVIC
Translational Microbiology
Tropical Diseases
Vaccine Immunology
Vaccine Uptake

Figure 2: MCRI Strategic Plan

Impact organisation powered by research

Purpose: We want all children to have the opportunity to live a healthy and fulfilled life
Vision: The place to be to change the face of child health
Strategy: Towards precision child health

Genomic Medicine	Stem Cell Medicine	Clinical Sciences	Population Health	Infection, Immunity & Global Health

Flagships

Aboriginal Health | Allergy | Cancer | Heart failure | High risk infants | Kidney | Neurodevelopment

Adolescent Health | Mental Health | Infection | Respiratory | GenV | Rare disease

Enablers

Discovery Research Hub | Translation Research Hub | Data Science Hub

Pillars

Research support | Funding | Engagement | People & Culture | Innovation & Impact

Figure 3: MCRI Staff Profile, August 2023

Table 1: MCRI Staff Profile by Theme or Unit, August 2023

Research Theme, Research Support Unit, or Office	Female	Male	Total
Clinical Sciences	540 (72.10%)	209 (27.90%)	749
Population Health	473 (82.26%)	102 (17.74%)	575
Infection, Immunity and Global Health	391 (74.90%)	131 (25.10%)	522
Genetics	310 (77.31%)	91 (22.69%)	401
Stem Cell Biology	193 (70.96%)	79 (29.04%)	272
Gen V	179 (88.61%)	23 (11.39%)	202
Operations	88 (63.7%)	50 (36.23%)	138
Growth and Innovation	52 (61.90%)	32 (38.10%)	84
Core Groups	49 (69.01%)	22 (30.99%)	71
Office of Director	27 (71.05%)	11 (28.95%)	38

Table 2: MCRI Staff Profile by Employment Classification, August 2023

Employment Classification	Female	Male	Total
Academic (Levels A-E)	571 (81.22%)	132 (18.78%)	703
Professional (Levels 1-10)	569 (77.73%)	163 (22.27%)	732
Research Nurses	95 (95%)	5 (5%)	100

Table 3: MCRI Staff Profile by Appointment Type, August 2023

Appointment Type	Female	Male	Total
Students	259 (76.63%)	79 (23.37%)	338
Contractors and Volunteers	187 (70.04%)	80 (29.96%)	267
Honoraries	621 (68.09%)	291 (31.91%)	912
MCRI Paid Employees	1235 (80.46%)	300 (19.54%)	1535

Figure 4: MCRI SAGE Priority Areas

Our priority areas

Policies and procedures

Ensure that our workplace embeds the values of Equity and Diversity in our Policies, Procedures, Practices and Programs.

Workload /flexibility

Alleviate workload stress by creating flexibility for our people to succeed.

Professional development

Improve our Professional Development opportunities to support our people to achieve their best and develop their skills.

Career pathways

Strengthen MCRI's current approach to career progression by expanding Career Pathways and revamping associated processes to ensure people at all levels are well informed and considered.

Culture and safety

Align our Workplace Culture with MCRI's values to improve and cultivate Psychological Safety for all our people.

Accessibility and mental health

Recognise the impact of Disability and/or Mental Health concerns on people experience and wellbeing and take targeted action to address these concerns across all priority areas.

Our vision	**MCRI's commitment to gender equity, diversity, and inclusion fosters the attraction, retention, progression and empowerment of all to ensure significant impact and the health and fulfillment of our people.**
Impact	**The reduction or removal of MCRI's problem areas through our priority areas:**

Outcomes

Embedding the values of equity and diversity in our **polices, procedures, practices and programs.**	Alleviating **workload stress** by creating **flexibility** for our people to succeed.	Improving our **professional development** opportunities to support our people to achieve their best and develop their skills.	Strengthening MCRI's current approach to career progression by expanding **career pathways** and associated processes.	Aligning our **workplace culture** to MCRI's values to improve and cultivate psychological safety for all our people.

Sub-group priority area: Taking targeted action to address the impact of **disability and/or mental health** concerns across all priority areas.

Strategies

2024

Strengthen institutional architecture to deliver GEDI	Create clarity across the employee lifecycle and workplace processes to cultivate safety, security and trust	Build capacity of our people to meet our objectives

Strengthen

• Engage staff to revitalise MCRI's values. • Develop an Institute GEDI Strategy that includes an institutional governance and accountability framework for MCRI's Board, Executive, Committees and relevant roles and stakeholders. • Amend MCRI's Health, Safety and Wellbeing Strategy • Undergo a Cultural Safety Audit to develop a Cultural Safety Framework and RAP • Develop strategy to increase cultural diversity of MCRI and reach or maintain 60:40 gender representation at all levels.	• Expand MCRI's current D&I statement to recognise intersectionality and reframe as an Aim.	• Establish ongoing budget for GEDI initiatives.

Progress

• Continue to conduct regular surveys. • Regularly report on outcomes and progress.	• Address inequities found in Pay-equity reviews and audits. • Adapt Parental Leave mechanisms to support the progression of research. • Improve internal job posting visibility.	• Build on and improve hybrid meeting infrastructure including. mandating/endorsing hybrid and recording options for all meetings, seminars and major events.

Build on

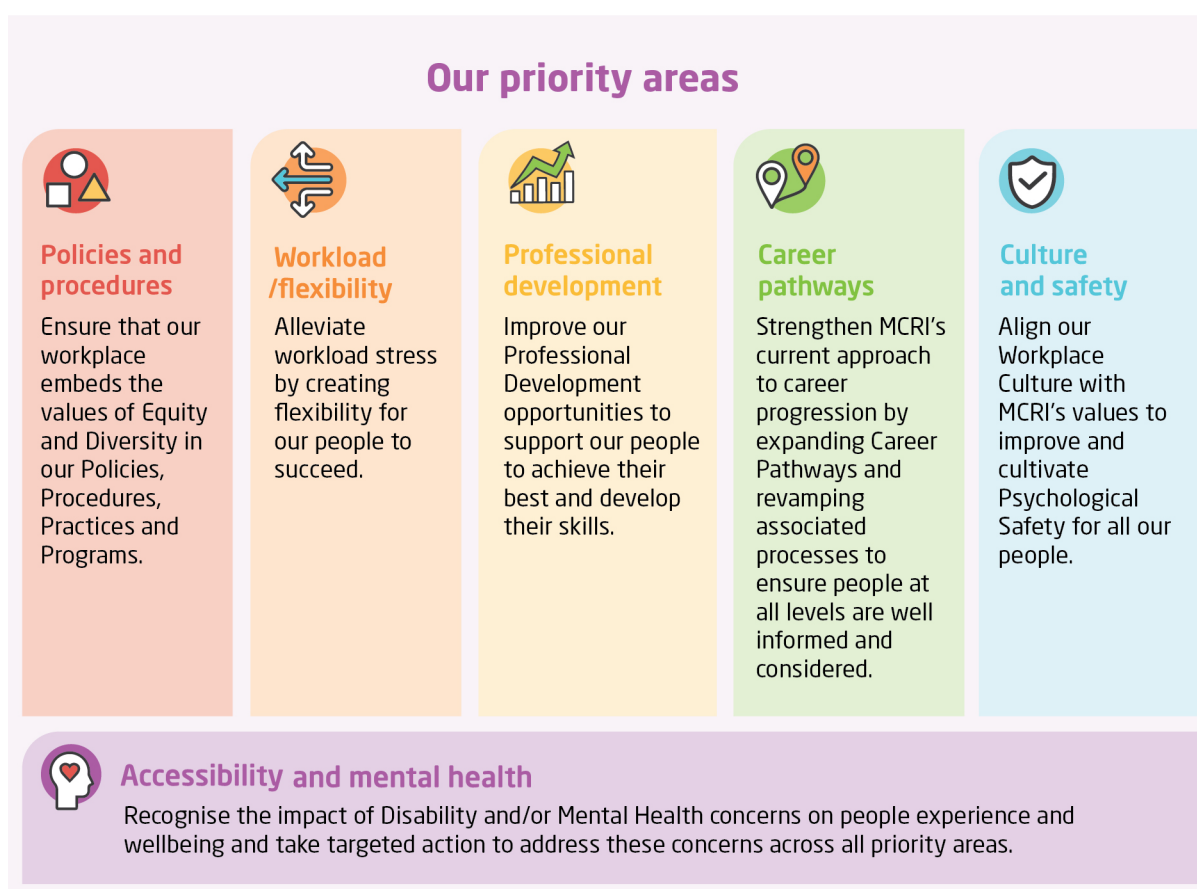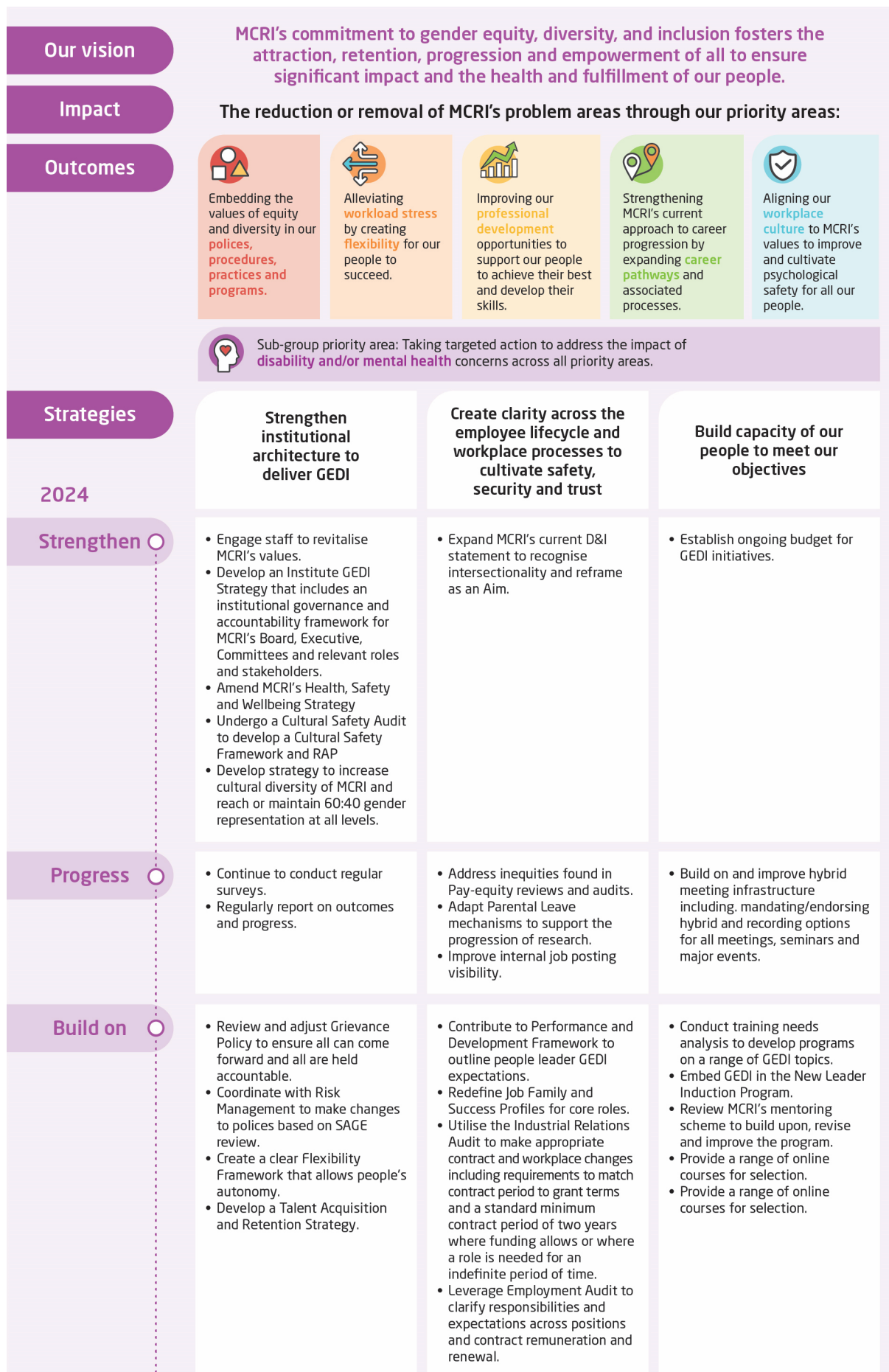|		
• Review and adjust Grievance Policy to ensure all can come forward and all are held accountable. • Coordinate with Risk Management to make changes to polices based on SAGE review. • Create a clear Flexibility Framework that allows people's autonomy. • Develop a Talent Acquisition and Retention Strategy.	• Contribute to Performance and Development Framework to outline people leader GEDI expectations. • Redefine Job Family and Success Profiles for core roles. • Utilise the Industrial Relations Audit to make appropriate contract and workplace changes including requirements to match contract period to grant terms and a standard minimum contract period of two years where funding allows or where a role is needed for an indefinite period of time. • Leverage Employment Audit to clarify responsibilities and expectations across positions and contract remuneration and renewal.	• Conduct training needs analysis to develop programs on a range of GEDI topics. • Embed GEDI in the New Leader Induction Program. • Review MCRI's mentoring scheme to build upon, revise and improve the program. • Provide a range of online courses for selection. • Provide a range of online courses for selection.

Establish

- Clarify and expand the TOR and decision-making power of committees.

- Establish a Remuneration Framework that addresses the barriers to progression and reward including updated PDs, regular step increments and bonuses.
- Develop expectations of people leaders related to admin time, committee involvement, professional development the career progression of their teams and GEDI.

- Scope capacity to increase finances to meet promotion and representation goals.
- Develop toolkit for leaders to support the Performance Development Framework.
- Establish supports for leaders to role-model best practice in equity, diversity and inclusion across MCRI's priority areas.
- Create a gender equity, intersectionality and co-design checklist for the development, implementation and review or new and existing initiatives.

Socialise

- Establish Family Friendly/Flexible Meeting Procedure.
- Amend leave policy to allow for floating Holiday model.
- Establish Wellbeing Leave Days.

- Commit to 40:40:20 representation for invited speakers.
- Engage leaders in GEDI days of significance, speaking about GEDI and sharing their own stories.
- Develop anonymous pathways for staff to share, disclose and request.

- Create Guidelines to enable family friendly ways of working including meetings, emails and social gatherings.
- Promote guidelines for the Acknowledgement of Country, diverse representation in research and inclusive language and imagery.

Expand

2031

- Co-Design Theme Action Plans to address theme specific issues and create linkages between Action plan and GEDI strategy
- Based on above outcomes consider additional GEDI accreditations or certifications are needed.
- Undertake a gender equity review of all committee membership and develop a strategy to reach diversity targets.
- Explore opportunities to establish physical spaces that demonstrate MCRI's commitment to GEDI including but not limited to childcare/parenting, toilets, collaboration spaces, prayer spaces, hot desking.

- Establish feedback loop mechanism for leadership decisions.
- Increase trust in People and Culture and Leadership with regular information sessions for people to raise concerns.
- Improve communication and transparency regarding funding allocation and support available form MCRI.
- Re-imagine the ways MCRI recognises and values staff by shifting away from a 'superstar culture' to recognise teams, non-academic roles and non-PhD staff in an equitable manner.
- Streamline MCRI forms, templates and ongoing processes.
- Expand definition of career break/relative to opportunity.

- Support leaders to conduct regular retrospectives for their teams
- Advocate to external funders to increase funding and flexibility for researcher wellbeing.
- Implement targeted program to support/prepare women researchers to successfully apply for promotion.
- Engage mental wellbeing charities for seminars and best practices resources/training.
- Encourage leaders to support their team in participating in professional development opportunities to enable their careers to flourish.
- Expand professional development opportunities and targeted training for traditionally underrepresented groups.

Enabling factors

Data collection ··›

Communications ··›

Engagement ··›

Resourcing ··›

2. The Self-Assessment Process

Recommended Word Count	**500**
Actual Word Count	**586**

(i) A Description of the Self-Assessment Team

From August 2021 to October 2023, 53 members of MCRI's SAGE Self-Assessment Team (SAT) volunteered their time, skills, and expertise to support the data collection, analysis, and action planning that has formed the basis of this application. Members spanned across MCRI and ranged from students to executives. Table 4 provides a complete description of each member's role in the SAT, the Theme/Unit they represent, their role within MCRI, and the time spent supporting the self-assessment process.

Table 4: MCRI SAT Membership

Member	Theme/Unit	Position	Time on SAT
CORE SAT MEMBERS			
Andrea Frigo- Systems & Processes and Organisational Culture Core SAT Member	Innovation / Operations	Head of People and Culture	Full
Dr. Helene Kammoun- Communications & Engagement Core SAT Member	Innovation	Innovation Program Manager	Full
Dr. Kiymet Bozaoglu – Evidence & Data Core SAT Member	Genomic Medicine	Team Leader/Senior Research Officer, BLC Neurogenetics	Full
Nicole Kleppe – Core SAT Member on all working Groups	Innovation / Operations	Gender Equity, Diversity and Inclusion Manager	Full
Prof. Vicki Anderson – Career Pathways Core SAT Member	Clinical Sciences	Theme Director, Clinical Sciences	Full
COORDINATION TEAM MEMBERS (Core SAT + Working Group Chairs)			
Dr. Ann Frazier – Evidence & Data Working Group Chair	Genomic Medicine	Senior Research Officer, Brain and Mitochondrial Genetics	Full
Edwina Grant – Systems & Processes Co-Chair (Oct 22-Mar 23)	Innovation / Operations	GEDI & Learning Experience Coordinator	August 2022-May 2023
Ellice Zoumboulis – Systems & Processes Co-Chair (Aug 21-Mar 22)	Infection, Immunity & Global Health	Project Officer, Tropical Diseases	Full
Dr. Hansen Kosasih – Career Pathways Working Group Chair (Aug 21-Jul 22)	Stem Cell Medicine	Postdoctoral Researcher, Cancer	August 2021-July 2022

Member	Theme/Unit	Position	Time on SAT
COORDINATION TEAM MEMBERS (Core SAT + Working Group Chairs)			
Dr. Holly Voges- Organisational Culture Working Group Chair	Stem Cell Medicine	Senior Research Officer, Heart Regeneration	Full
Dr. Jesse Shapiro – Co-Design & Best Practice Working Group Chair (Aug 21-Feb23)	Clinical Sciences	Research Assistant, Brain and Mind	August 2021- February 2023
Dr. Nikita Sood – Career Pathways Working Group Co-Chair (Jun 22-Oct 23)	Clinical Sciences	Research Officer, Brain and Mind	Full
Sigrid Pitkin – Communications & Engagement Working Group Chair (Aug 21-Aug 22)	Infection, Immunity & Global Health	Senior Research Nurse Coordinator Allergy Immunology	August 2021-August 2022
Yuen Chang- Systems & Process Co-Chair (Aug 21-Feb 22)	Innovation	Business Development Manager, Heart Regeneration	August 2021- February 2022
CAREER PATHWAYS WORKING GROUP MEMBERS			
Dr. Adam Piers	Clinical Sciences	Program Manager, Heart	Full
Dr. Mihiri Silva	Infection, Immunity & Global Health	Clinician Scientist Fellow, Inflammatory Origins	August 2021- September 2022
Dr. Nitya Phillipson	Office of Research	Research Governance Lead	Full
Sarah Davies	Population Health	Strategy Lead, Policy and Equity Population Health	Full
CO-DESIGN & BEST PRACTICE WORKING GROUP MEMBERS			
Ahuva Segal	Centre for Health Analytics- MCRI Honorary through Office of Research	EMR Research Analyst	Full
Elle Cartmill	Centre for Health Analytics- MCRI Honorary through Office of Research	Health Analytics Workforce Lead	December 21- May 23
Dr. Jane Seto	Stem Cell Medicine	Team Leader/Senior Research Officer, Muscle Research	Full
Prof. Paul Lockhart	Genetics	Group Leader/ Co-Director BLC, Neurogenetics	Full

Member	Theme/Unit	Position	Time on SAT
COMMUNICATIONS & ENGAGEMENT WORKING GROUP MEMBERS			
Anne Nattembo	Infection, Immunity & Global Health	Communications Officer, Tropical Diseases	May 2022-October 2023
Anju Bundhoo-Banipersand	Engagement & Development	Internal Communications Specialist	September 2022-October 2023
Arlene Adonis-Hawkins	Engagement & Development	Internal Communications Specialist	August 2021-July 2022
Dr. Celeste Donato	Infection, Immunity & Global Health	Senior Research Officer, Enteric Diseases	July 2022-October 2023
Prof. David Thorburn	Genomic Medicine	Group Leader/ Senior Principal Research Fellow, Brain and Mitochondrial	Full
Douglas Russell	Clinical Sciences	PhD Student, Brain and Mind	June 2022-October 2023
Prof. Fiona Russell	Infection, Immunity & Global Health	Group Leader/Senior Principal Research Fellow, Asia-Pacific Health	Full
Kimberley Porter	Population Health	Project Management Coordinator, GenV	August 2021-August 2022
Sophia Mah	Stem Cell Medicine	Research Assistant, Kidney Regeneration	November 2022-October 2023
EVIDENCE & DATA WORKING GROUP MEMBERS			
A/Prof. Catherine Satzke	Infection, Immunity & Global Health	Group Leader/Principal Research Fellow, Translational Microbiology	Full
Dr. Darren Cullerne	Office of Research	Data Apps Team Lead	Full
Dr. Gareth Ball	Clinical Sciences	Senior Research Fellow, Developmental Imaging	Full
Kate Francis	Population Health	Biostatistician/Senior Research Officer, Clinical Epidemiology and Biostatistics	Full

Member	Theme/Unit	Position	Time on SAT
EVIDENCE & DATA WORKING GROUP MEMBERS			
Dr. Meredith O'Connor	Population Health	Program Manager, Data Management	August 2021-July 2022
ORGANISATIONAL CULTURE WORKING GROUP MEMBERS			
Alison Graham	Stem Cell Medicine	Research Assistant, IPSC Derivation & Gene Editing Facility	Full
Dr. James Dromey	Innovation	Chief Innovation Officer & Head Growth Strategy	August 2021-Jan 2023
Dr. Josh Osowicki	Infection, Immunity & Global Health	Research Fellow, Tropical Diseases	Full
Kathleen Strumila	Cell Biology	Research Assistant, Immune Development	June 2022-Jan 2023
Dr. Louise Crowe	Clinical Sciences	Team Leader/ Senior Research Officer, Brain and Mind	Full
Prof. Vera Ignjatovic	Clinical Sciences	Senior Principal Research Fellow/Group Leader, Haematology	August 2021-June 2022
SYSTEMS & PROCESSES WORKING GROUP MEMBERS			
Dr. Chantal Attard	Clinical Sciences	Senior Research Officer, Haematology	Full
A/Prof. David Elliot	Stem Cell Medicine	Group Leader/Principal Research Fellow, Heart Disease	Full
Greg O'Brien	Operations	Chief Operating Officer	August 2021-Feb 2022
Jacky Lipson	Clinical Sciences	Research Assistant, Neurodisability and Rehabilitation	April 2022-October 2023
Mai Raabus	Genomic Medicine	Research Assistant, Neurogenetics	April 2022-December 2022
Marianne Ciavarella	Core Groups & RSO	Head of Research Grants	Full

Member	Theme/Pillar	Position	Time on SAT
ADVISORY MEMBERS			
Dr. Graham Gee	Population Health	Team Leader/Principal Research Fellow, Intergenerational Health	Advice to Co-Design WG As Needed
Ken Knight	Office of Research	Research Impact Manager	Advice to Co-Design WG As Needed
Lanthi Locke	Innovation / Operations	Employment Relations Manager	Advice to Evidence & Data WG As Needed
Dr. Leanne Mills	Office of Director	Chief of Staff to the Director	Advice to Core SAT As Needed
Minu Vipin	Innovation / Operations	HRIS Manager	Advice to Evidence & Data WG As Needed

In August 2022, a survey was sent to the SAT (at the time, totalling 46) to understand the diversity of our membership and the relevant lived experience and expertise each member brought. The results from the 44 SAT respondents in Figures 6, 7 and 8 reflect MCRI's overall population, particularly the Sex/Gender ratio of 80:20 (see Figure 12). No members identified as being from an Aboriginal and/or Torres Strait Islander background, and most identified as Australian or Anglo-European. Approximately 85% identified as heterosexual, and 13% reported having a physical or mental health condition. Three-quarters identified with more than one of the lived experience options available.

Figure 6: SAT Membership by Gender

- 77% Female
- 21% Male
- 2% Non Binary
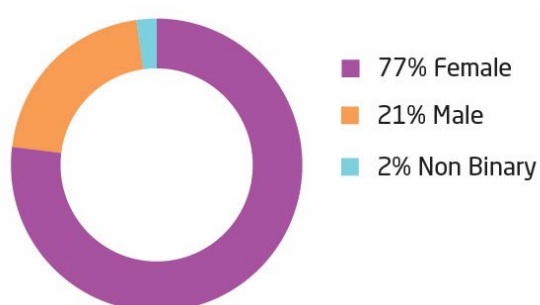
Figure 7: SAT Membership Information

	0 Identify as Aboriginal or Torres Strait Islander	**15%** Identify as LGBTQIA+	**13%** Report a Chronic Physical and/or Mental Health Condition and/or Disability
48% have Child Caring Responsibilities	**37%** Report experience of barriers impacting GEDI in the higher education and research sector	**32%** Report experience with Equity, Diversity and Inclusion Work	**11%** Provide Care to those with Chronic Health Conditions, Disabilities and/or Special Needs
25% Provide Care to Elderly Family Members	**27%** Report experience with Communications and Engagement	**23%** Report experience with Human Resources and People and Culture work	**23%** Report experience with Organisational Leadership and Decision-Making
13% Report English as a Second Language	**63%** With Full-Time Appointments	**18%** Belong to Clinical Sciences Theme	**15%** Belong to Genomics Medicine Theme
15% Belong to Infection, Immunity & Global Health Theme	**4.5%** Belong to Population Health Theme	**9%** Belong to Stem Cell Medicine Theme	**18%** Belong to Innovation Unit
9% Belong to Operations Unit	**9%** Belong to the Office of Research Unit	**2.3%** Belong to Data Science Core Group	**27%** Postdoctoral and/or Early-to-Mid Career Researcher
27% Professional and Administrative Staff	**18%** Research Staff	**13%** Senior Leaders	**2.3%** Students

25%
Anglo-European

43.2%
Australian (excl. Aboriginal and/or Torres Strait Islander)

2.3%
New Zealander (excl. Māori)

6.8%
North America

4.5%
Northern and/or Western European (excl. Anglo-European)

2.3%
South and/or Central American and/or Caribbean Islander

11.4%
South-East Asian

6.8%
Southern and/or Central Asian

11.4%
Southern and/or Eastern European

2.3%
Sub-Saharan African

15.4%
Other cultural/ ethnic group

Respondents were able to choose multiple responses so percentage sums to more than 100

Considering that all members contributed significantly more time and effort than initially advertised toward completing this application, MCRI is committed to recognising and rewarding all members for their commitment to GEDI and workplace improvement. In addition to recognition at Town Halls (all-staff meetings where the Director can speak to Institutional updates/changes) and all-staff communications, MCRI is ensuring that participation in workplace service activities such as SAGE will be considered in performance discussions (Action 4.2.2.a) and will be awarding members between $50-$1500 in gift cards and Professional Development opportunities. The reward framework is outlined in Table 5 and will be determined by the Core SAT based on contribution to the SAT.

Table 5: MCRI SAT Reward Framework

Contribution	Award
Chairs	$1,500 towards staff Professional Development Fund
Co-Chairs and Active Contributors	$500 Myer Voucher or contributed towards staff Professional Development Fund
Regular Contributors	$100 Myer Voucher
All Members	$50 Myer Voucher

Action Information

The SAGE self-assessment process has illustrated the skill, time and effort many of our people put in towards projects and endeavours that are not considered for promotion. Action 4.2.2.a ensures that this work will be recognised and addresses Professional Development and Career Pathway Priority Area concerns explored in Sections 4.2.i and 4.2.iii.

Action 4.2.2.a: Modify and Adapt MCRI's promotion process to ensure it considers "non-traditional" research outputs, part-time capabilities, committee participation and mentorship.

(ii) An Account of the Self-Assessment Process

MCRI established the SAT in August 2021 as a stand-alone committee reporting to MCRI's Executive Committee. Members joined through self-nomination as first choice and direct nomination where specific expertise, position types or Theme/Unit was required to ensure representation from all relevant stakeholders throughout the self-assessment process. The SAT comprised 6 Working Groups (WGs), a Coordination Team, and a Core SAT Group. Figure 9 outlines the corresponding work plan, governance, and responsibilities of each.

Figure 9: MCRI SAT Structure and Responsibilities

Evidence and Data Working Group
- Collect and analyse quantitative data collected through People and Culture, Finance and the Gender Equity, Diversity and Inclusion Survey necessary for the SAGE application.

Organisational Culture Working Group
- Conduct surveys, focus groups and interviews to gather staff feedback on culture, wellbeing and MCRI's commitment to GEDI.
- Identify gaps in how MCRI fosters a positive culture and encourages staff use of benefits and entitlements.

Co-design & Best Practice Working Group
- Build Capacity of SAT (intersectionality, facilitating focus groups, data collection).
- Consult with relevant stakeholders and traditionally. underrepresented groups
- Coordinate Action Plan Co-Design Process.

Communications & Engagement Working Group
- Develop internal communicaitons to keep staff informed and drive engagement for other working group activities.
- Conduct a communications audit to identify gaps.

Systems & Processes Working Group
- Conduct Policy Audit
- Identify gaps in MCRI's Decision Making and Accountability Frameworks.
- Understand how GEDI is embedded across MCRI's systems, processes, polices and procedures.

Career Pathways Working Group
- Conduct surveys, focus groups and interviews to gather staff feedback on career support and satisfaction.
- Identify gaps in how MCRI supports employee lifecycle and progression at all levels.

Coordination Team — Align Activities — Report to Core SAT

Core SAT — Project management — Report to Executive

The WGs, Coordination Team and Core SAT met regularly and had 1.5 FTE support from a dedicated GEDI Manager and Coordinator. The Core SAT included MCRI's Executive and Senior Management Team representatives, ensuring progress was regularly reported to MCRI's leadership.

MCRI's SAT utilised co-design principles (Figure 10) to ensure that the experiences of all our people informed self-assessment conclusions and that our Action Plan embedded an intersectional approach to institutional change and equity initiatives. The participatory approach of the SAT's co-design model established a space for equal feedback and collaboration so all people could share their experiences, identify improvement areas, and build recommendations for future action across our self-assessment timeline (Figure 11). The extensive qualitative data collected through the co-design model provided invaluable information to draw conclusions where qualitative data was limited. Table 6 outlines the quantitative and qualitative data collection and analysis methods used to identify barriers in this application.

Figure 10: MCRI's SAT Co-Design Principles

Inclusion
Find all relevant voices and include them at the outset of the self-assessment.

Respect and trust
Create an environment where everyone has the freedom and safety to speak frankly and share their truth.

Equal partnership
Seriously and equally consider all participant experience, solutions and recommendations in our self-assessment.

Ongoing transparency
Commit to an iterative process that develops over time and allows regular updates and opportunities to provide feedback.

Data driven exploration
Let data guide our discussions and identify areas for further learning and understanding about people's experiences and areas for improvement.

Figure 11: MCRI Self-Assessment Timeline

Self assessment timeline

2021 ○

March	Application to SAGE International Women's Day Celebration
July	GEDI Manager and SAT Recruitment 🔵
September	WGs Established
December	WG Workplans Established

2022 ○

March	International Women's Day Celebration People Experience Survey 🔵
May	Co-Design Process Consultation Focus Groups 🟡
July	Data Analysis Opt-Out 🔵 SAT Member Survey Governing Body Survey
August	Gender Equity, Diversity and Inclusion (SAGE) Survey 🔵
September	Organisational Culture and Career Pathways Focus Groups 🔵
October	Staff Consultation on Policy Audit 🔵
December	Career Conversations and Culture Conversations Complete 🔵

2023 ○

March	SAT Sense-Making Workshop International Women's Day Celebration
April	Priority Areas Identification Exercise 🟡
May	Ideation Focus Groups 🔵 Action Plan Consultation 🟡
June	Action Planning Workshops 🟡
July	Action Plan Feedback and Approval 🟡
September	SAT Application Review 🟡
October	Submit Application to SAGE

Legend

🔵 All staff engagement opportunity that was advertised widely to gain diversity of experiences and data.

🟡 Targeted consultation with Diversity and Inclusion Committees, the Aboriginal Reference Group, MCRI Leaders from traditionally underrepresented backgrounds, students and external friends.

Table 6: Quantitative and Qualitative Data Collection and Analysis Methods

Focus Group	Information	Participants	Gender
MCRI Culture (ran twice)	Focus Group to explore staff experiences and feelings related to MCRI's culture and how MCRI upholds its values. The Organisational Culture WG developed questions to fulfil application requirements.	11	≥ 6 Women ≤ 6 Men
Work Life Balance	Focus Group to understand staff experience with flexibility and workload stress at MCRI. The Organisational Culture WG developed questions to fulfil application requirements.	9	≥ 6 Women ≤ 6 Men
Gender Equity, Diversity, and Inclusion at MCRI	Focus Group to gauge staff connection to MCRI's GEDI commitment and understand the efficacy of MCRI's D&I Committee work. The Organisational Culture WG developed questions to fulfil application requirements.	7	≥ 6 Women ≤ 6 Men
Safety and Trust	Focus Group to understand staff comfort, psychological safety, and experiences of conflict. The Organisational Culture WG developed questions to fulfil application requirements.	≤ 6	≤ 6 Women
Experience of Traditionally Marginalised Groups	Focus Group to explore the negative experiences of traditionally underrepresented groups at MCRI. Questions were developed by the Organisational Culture WG to fulfill application requirements.	≤ 6	≤6 Women
Experience of Women in STEMM (ran twice)	Focus Group to explore the barriers women in STEMM experience particularly related to career progression including stereotypes, microaggressions, traditional narratives and bias. Questions were developed by the Organisational Culture WG to fulfill application requirements.	13	13 Women
Career and Support (ran twice)	Focus Group to find shared experiences related to barriers and enablers to career progression at MCRI. Questions were developed by the Career Pathways WG to fulfill application requirements.	14	≥ 10 Women ≤ 6 Men

Focus Group	Information	Participants	Gender
Equity and Diversity Policies, Procedures, Practices and Programs	Following the announcement of MCRI's Problem and Priority Areas, a Focus Group to validate findings and recommend action items was held for the Policies and Procedures Priority Area.	9	≥ 6 Women ≤ 6 Men
Workload and Flexibility	Following the announcement of MCRI's Problem and Priority Areas, a Focus Group to validate findings and recommend action items was held for the Workload and Flexibility Priority Area.	7	≤ 6 Women ≤ 6 Men
Professional Development	Following the announcement of MCRI's Problem and Priority Areas, a Focus Group to validate findings and recommend action items was held for the Professional Development Priority Area.	13	≥ 6 Women ≤ 6 Men
Career Pathways	Following the announcement of MCRI's Problem and Priority Areas, a Focus Group to validate findings and recommend action items was held for the Career Pathways Priority Area.	15	≥ 10 Women ≤ 6 Men
Workplace Culture	Following the announcement of MCRI's Problem and Priority Areas, a Focus Group to validate findings and recommend action items was held for the Career Pathways Priority Area.	10	≤ 6 Women ≤ 6 Men
Recognising Disability and/or Mental Health	Following the announcement of MCRI's Problem and Priority Areas, a Focus Group to validate findings and recommend action items was held for the Recognising Disability and/or Mental Health Sub-Group Priority Area	7	≤ 6 Women ≤ 6 Men
Diversity and Inclusion Sub-Committees	One-hour check ins with each sub-committee of the Diversity and Inclusion Committee to validate findings and recommend action items.	N/A[#]	N/A[#]
Aboriginal Reference Group	One-hour check in with the Aboriginal Reference Group (ARG) to validate findings and recommend action items which incorporate Indigenous knowledges and perspectives.	N/A[#]	N/A[#]
Post Doc Experience	Conversational Interviews with Post-Doc staff to understand the transition between PhD and post-doc at MCRI. The Career Pathways WG developed questions to fulfil application requirements.	N/A[*]	N/A[*]

Career Conversations	Information	Participants	Gender
Experience of Parents at Work	Conversational Interviews with parents at MCRI to understand their experience with parental leave and the support they receive for caring responsibilities such as flexibility, leave and childcare. The Career Pathways WG developed questions to fulfil application requirements.	13	≥ 10 Women ≤ 6 Men
Research Mentorship and Support	Conversational Interviews with staff from various career stages to explore the frequency and efficacy of line manager support and/or mentorship at MCRI. The Career Pathways WG developed questions to fulfil application requirements.	14	≥ 10 Women ≤ 6 Men
Post Doc Experience	Conversational Interviews with Post-Doc staff to understand the transition between PhD and post-doc at MCRI. The Career Pathways WG developed questions to fulfil application requirements.	N/A[*]	N/A*
Culture Conversations	Information	Participants	Gender
Equitable Workloads	Conversational Interview with staff from a range of career stages to explore how workload is allocated at MCRI and frequency of workload stress. Questions were developed by the Organisational Culture WG to fulfill application requirements.	7	≤ 6 Women ≤ 6 Men
Motivation and Flexibility	Conversational Interview with staff from a range of career stages to explore how motivation and flexibility has changed at MCRI post Covid-19 pandemic. Questions were developed by the Organisational Culture WG to fulfill application requirements.	7	≤ 6 Women ≤ 6 Men
Diversity and Inclusion at MCRI	Conversational Interview with staff from a range of career stages to understand sentiment and support for GEDI in the workplace. Questions were developed by the Organisational Culture WG to fulfill application requirements.	7	≤ 6 Women ≤ 6 Men

Surveys	Information	Participants	Gender
Gender Equity, Diversity & Inclusion (SAGE) Survey	Sent to all staff in August 2022 to understand the current state of GEDI. The survey contained 205 questions to measure the broad experiences that contribute to a culture of diversity and inclusion and measured a wide range of contributing Factors, including: • Bullying and Intimidation • Leave and Flexibility • Comfort and Safety • MCRI Culture • Career Satisfaction • Leadership • Diversity, Equity and Inclusion • Career Support and Mentoring • Prejudice and Discrimination	900	704 Women 181 Men 9 non-Binary ≤ 6 All Others
People Experience Survey	People and Culture survey to gain a better understanding of employee morale, satisfaction, and engagement across MCRI. The survey contained 51 questions to measure the broad experiences that contribute to engagement and measured a broad range of contributing factors including: • Work & Life Blend • Management • Company Confidence • Teamwork & Ownership • Leadership • Social Connection • Enablement • Service & Quality Focus • Enablement • Service & Quality Focus • Collaboration & Communication • Innovation • Learning & Development • Feedback & Recognition • Action	976	735 Women 206 Men ≤ 6 non-Binary ≤ 6 All Others

Surveys	Information	Respondents	Gender
SAT Survey	Survey sent to the SAT to gather information on: • Gender • Aboriginal and/or Torres Strait Islander Identity • Age • Cultural Background • (Dis)ability • Sexual Orientation • Employment Classification and Theme • Lived Experience	44	34 Women 9 Men 1 non-Binary
Governing Body and Decision-Making Committee Composition Survey	Survey sent to Governing Bodies and Decision Making Committees to gather information on: • Gender • Aboriginal and/or Torres Strait Islander Identity • Age • Cultural Background • (Dis)ability • Sexual Orientation • Employment Classification and Theme • Lived Experience	26	11 Women 15 Men
General Committees Composition Survey	Survey sent to General Committees (e.g. D&I and Wellbeing) to gather information on: • Gender • Aboriginal and/or Torres Strait Islander Identity • Age • Cultural Background • (Dis)ability • Sexual Orientation • Employment Classification and Theme • Lived Experience	34	26 Women ≥ 6 Men ≤ 6 non-Binary

Data Analysis, Evaluations and Audits			
Employee Data Set Analysis	Evidence and Data WG reviewed de-identified 2018-2022 data from MCRI WGEA reports and data extracted by MCRI's P&C Team. The reporting period is from 1 April (the previous year) to 31 March (the current year). Employees were informed that this work was being done and given the option to opt out. Given approximately 5-6% of MCRI staff hold multiple contracts within MCRI the following approach was applied to collapse a person with multiple rows to a single row of data: • *If 2nd or 3rd role is casual – ignore casual role, the part time/ full time position is the role we include them as* • *If 2nd/ 3rd role is the same - for salary, level and classification, just sum FTE and use first role details.* • *If there is variation between roles (e.g. 0.4 FTE at Level A and 0.2 FTE at Level 5) - The role with higher FTE provides salary, classification information, and FTE is summed.* • *If FTE is the same but there is variation between roles – The higher salary position provides salary, classification information, and FTE is summed.* Most of the tables in this document are generated from the 2022 data, with the trends from years 2018-2022 remaining generally consistent. Extracted data was analysed in Stata statistical software *(StataCorp. 2019. Stata Statistical Software: Release 17.0 College Station, TX: StataCorp LLC)*	N/A	N/A

Data Analysis, Evaluations and Audits	Information	Participants
Policy Audit	79 Policies Reviewed through a four-step process by the System & Processes WG: 1. Primary Review- One lead reviewer is assigned to a policy to leave initial comments. 2. Secondary Review- WG members review lead reviewer comments through an intersectional lens to highlight any specific GEDI concerns based on the Victorian Commission for Gender Equality in the Public Sector Gender Impact Assessment Tool. External Policy Review and Benchmarking Group Discussion to identify gaps in practice. • External Policy Review and Benchmarking • Group Discussion and Conclusions A Policy and Procedure Audit conducted by the Systems and Process WG that reviewed 79 policies and accompanying procedures through an intersectional lens. Policies and procedures were additionally benchmarked against best practice in the sector to identify gaps and potential barriers to a truly inclusive workplace.	N/A
Communications Audit	Review of MCRI's: • Images • Branding Guidelines and Communications Standards • Templates • Visibility of Role Models • Internal Communications Themes	N/A

 # Validation sessions were open attendance for any member, time restrictions prevented accurate data collection.

* The SAT spoke to STAR Network and Post Doc Society (Information Available in 19) about opportunities to share experience through a conversation at multiple points through the self-assessment, no one signed up.

(iii) Plans for the Future of the Self-Assessment Team

MCRI will repurpose the role of the Diversity and Inclusion (D&I) Committee and SAT to establish a new workplace committee with expanded responsibilities to deliver the Action Plan and the pending MCRI GEDI Strategy. Managed by the GEDI Manager and MCRI's GEDI Team, this group will monitor action plan implementation and update staff. The Core SAT will be responsible for continuing SAT work and activities until such a committee is established.

Action Information

SAGE is one driver of GEDI at MCRI and the Melbourne Children's Campus; many other interested parties and groups contribute to the state of GEDI and are interested in improving our workplace. Building upon the SAGE Action plan to develop a GEDI Strategy (Action 1.2.1) that links these various groups' ongoing and future work will ensure that actions are enacted sustainably and lead to lasting change. This Strategy will create a more robust framework and work plan to structure a resourced team to progress this work (Action 1.2.3).

Action 1.2.1 Building upon MCRI's SAGE Action Plan and MCRI's values, develop a GEDI Strategy through an intersectional lens that articulates MCRI's commitment to GEDI and creates a framework to embed GEDI and relevant initiatives.

Action 1.2.3 Repurpose the role of the Diversity and Inclusion Committee and MCRI's SAT to establish a new Workplace Committee (name TBC) to expand on the work of the SAT and shift to the implementation of the 2024-2031 SAGE Action Plan.

3. The Research Institution Workforce

Recommended Word Count	**2,500**
Actual Word Count	**2,876**

3.1 Staff Data

(i) Staff by Employment Classification Type and Level

There are four employment classification types at MCRI outlined in Table 7, within which there are multiple Levels. MCRI defines Career Paths in line with Employment Classification. For example, there is an Academic Pathway and a Professional Pathway, and those within each pathway should ideally progress linearly from their starting position to one higher in this path (e.g., B to C) with no formal pathway for non-traditional careers or moves between classification types.

> **Action Information**
>
> Four employment categories do not allow for proper benchmarking or classification of specialist roles or reflect the size and complexity of MCRI's staff. Actions 3.5.1 and 3.5.5 will let MCRI look externally and reconsider how we define employment types at MCRI to better represent and classify the breadth of professionals in our workplace and allow for improved Career Pathways and more appropriate Professional Development opportunities.

> **Action 3.5.1:** Conduct an Employment Audit to assess legislative compliance with employment practices.

> **Action 3.5.5:** Redefine Job Family architecture and Success Profiles for core roles to determine skills, competency, experience, and career pathways that support talent attraction, performance and development.

Table 7: Employment Classification Type and Levels at MCRI

Employment Type	Levels
Individual Contractor (MISC)	Individual Contract (Clinician Researcher) Individual Contract (Nurse Researcher) Individual Contract (Professional) Individual Contract (Researcher)
Academic Staff	Level A to Level E
Professional Staff	Level 1 to Level 10
Research Nurse	Step 1 to 9

Figure 12 shows the distribution of our people across employment classifications in 2022. Figure 13 shows that 44% of our workforce are academics, and 74% of this cohort are at Level A.
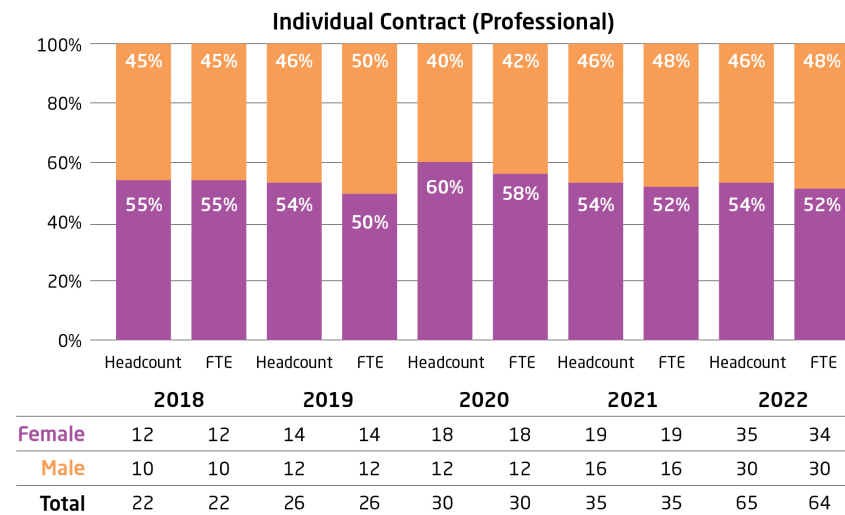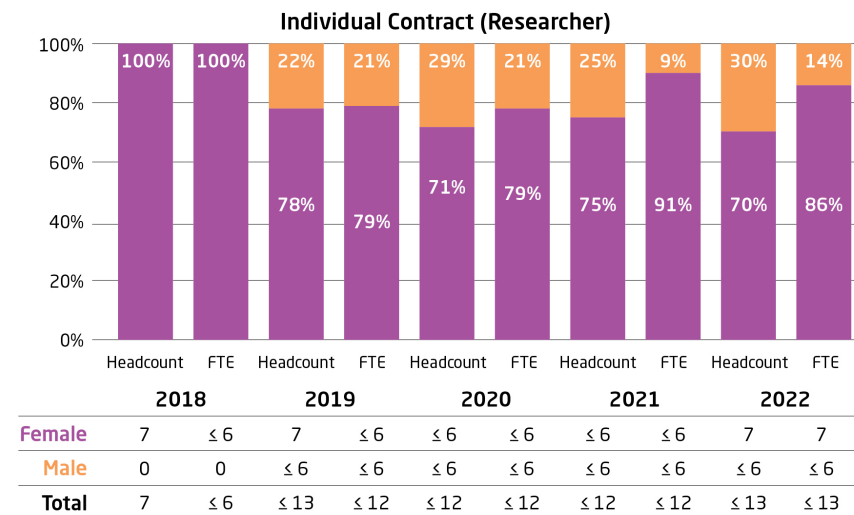
Figure 12: Distribution of staff (all Sexes) by employment type, 2022

- ■ 9% Individual Contracts
- ■ 41% Professional Staff
- ■ 6% Research Nurse
- ■ 44% Academic Staff A-E
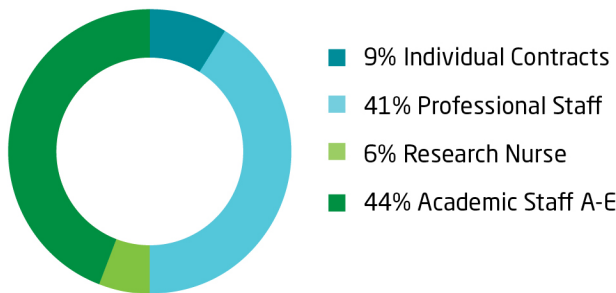
Figure 13: Distribution of academic staff (all Sexes) across research Levels, 2022

- ■ 74% Level A
- ■ 14% Level B
- ■ 6% Level C
- ■ 3% Level D
- ■ 3% Level E
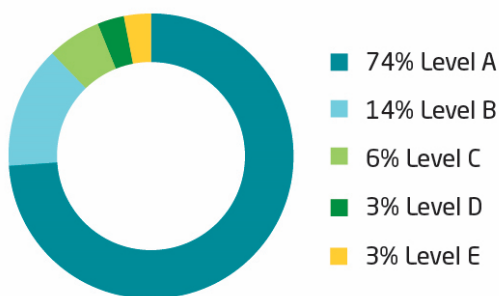
MCRI's workforce has steadily grown by 27.8% from 2018-2022 and has remained at 80% females and 20% males (Figure 14). The GEDI Survey confirmed that MCRI's workforce is primarily women (Figure 15). This ratio is consistent in MCRI's Themes and Units[2] (Figure 16), with slight variations in the Office of the Director, Population Health, Core Groups and Research Support and Operations (Figure 3 and Table 1 for 2023 data).

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[2] Note that Theme and Unit names changed in 2023. However, data related to Themes and Units in this report use historical titles for consistency. Stem Cell Biology is now "Stem Cell Medicine", Genetics is now "Genomic Medicine", and Infection & Immunity is now "Infection, Immunity & Global Health." RSO Support and Operations are now "Operations," "Innovation," and "Engagement and Development" Units. The Office of Director includes the Office of Research. Core Groups and Data Science responsibilities have been moved to various Units.

Figure 14: MCRI Workforce Headcount by Sex
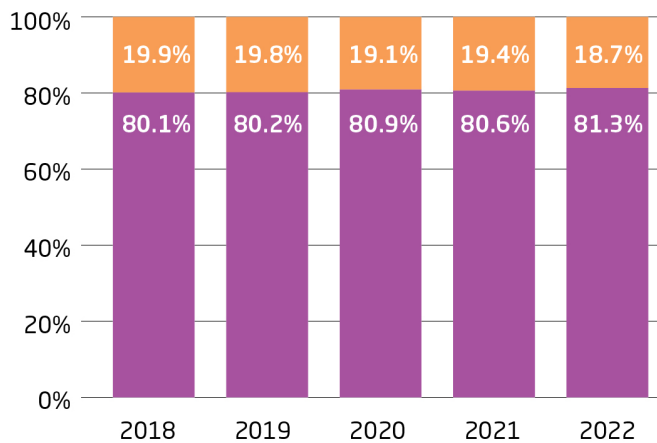
	2018	2019	2020	2021	2022
Female	776	816	873	929	1092
Male	193	201	206	224	251
Total	969	1017	1079	1153	1343

Figure 15: GEDI Survey Participant Headcount by Gender
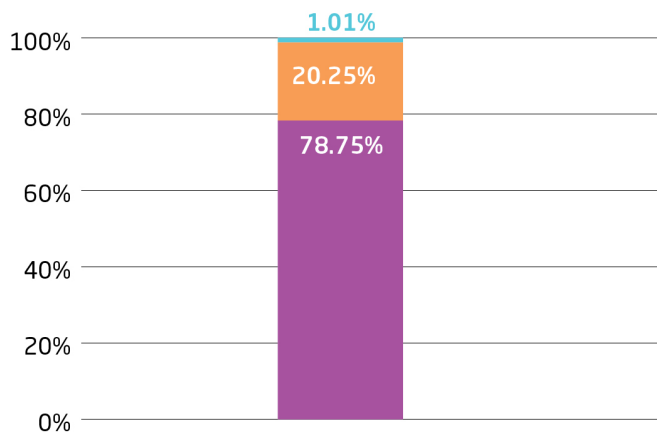
Woman and/or Female	704
Man and/or Male	181
Non Binary	9
All Others	≤6
Total	900

Cell Biology

	2018	2019	2020	2021	2022
Female	77%	79%	80%	79%	77%
Male	23%	22%	20%	21%	23%

Clinical Sciences

	2018	2019	2020	2021	2022
Female	86%	85%	87%	85%	83%
Male	14%	15%	13%	15%	17%

Core Groups

	2018	2019	2020	2021	2022
Female	73%	77%	82%	84%	86%
Male	27%	23%	18%	16%	14%

Data Science

	2018	2019	2020	2021	2022
Female	76%	76%	78%	N/A	N/A
Male	24%	24%	22%	N/A	N/A

Office of Director

	2018	2019	2020	2021	2022
Female	100%	67%	67%	67%	67%
Male	0%	33%	33%	33%	33%

Genetics

	2018	2019	2020	2021	2022
Female	79%	81%	79%	76%	82%
Male	21%	19%	24%	24%	18%

Infection & Immunity

	2018	2019	2020	2021	2022
Female	81%	79%	77%	78%	78%
Male	19%	21%	23%	22%	22%

Population Health

	2018	2019	2020	2021	2022
Female	86%	87%	88%	89%	87%
Male	14%	13%	12%	11%	13%

Research Support & Operations*

	2018	2019	2020	2021	2022
Female	69%	67%	69%	69%	N/A
Male	31%	33%	31%	31%	N/A

*Research Support and Operations (RSO) disbanded prior to conclusion of the data collection period

Considering the overall 80% female to 20% male (80:20) Sex/Gender ratio at MCRI, the SAT analysed workforce data to assess if this ratio is reflected across all relevant data sets. Figure 17 reports the total number of individuals by headcount at MCRI from 2018-2022 at all employment classification types and Levels. Sex ratios across the classification Levels range from 95:5 (Research Nurses) to 56:44 (Academic Level E and Professional/Clinical Research Individual Contracts) and 43:57 (Academic Level D) in 2022. These variations suggest that there may be barriers to the progression of women and/or females within the organisation, particularly at Academic Levels B/C (also see Figure 24), and retention as explored in Section 3.1.iii.

Academic Levels

	Level A					Level B					Level C					Level D					Level E				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
Female	339	343	355	349	367	63	59	54	67	66	24	19	20	21	25	12	13	8	9	9	≤6	7	≤6	7	9
Male	71	65	61	69	70	17	15	15	17	18	16	13	13	11	10	8	10	8	11	12	9	9	9	9	7
Total	410	408	416	418	437	80	74	69	84	84	40	32	33	32	35	20	23	16	20	21	≤15	16	≤15	16	16

Professional Levels

	Level 1					Level 2					Level 3					Level 4					Level 5					Level 6					Level 7					Level 8					Level 9+10				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
Female	14	18	20	21	22	13	19	18	14	10	30	28	35	37	32	23	23	32	44	93	45	52	72	73	114	37	37	34	58	64	27	42	36	46	58	30	33	53	56	61	17	16	21	18	17
Male	≤6	9	7	≤6	8	≤2	≤6	≤6	≤6	≤6	7	≤6	7	≤6	≤6	7	≤6	7	≤6	9	≤6	9	7	12	14	≤6	≤6	7	8	7	9	9	10	10	14	≤6	7	12	13	15	≤6	7	7	9	≤6
Total	≤20	27	27	≤27	30	≤18	≤25	24	≤20	≤16	37	≤34	42	≤43	≤38	30	≤29	39	≤50	102	≤51	61	79	85	128	≤43	≤43	41	66	71	36	51	46	56	72	≤36	40	65	69	76	≤23	23	28	27	≤23

Nurses and Individual Contractors

	Individual Contract (Clinician Researcher)					Individual Contract (Nurse Researcher)					Individual Contract (Professional)					Individual Contract (Researcher)					Research Nurse				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
Female	10	11	13	16	20	≤ 6	7	≤ 6	≤ 6	≤ 6	12	14	18	19	35	7	7	≤ 6	≤ 6	7	62	68	67	64	80
Male	11	15	16	16	16	0	0	0	0	0	10	12	12	16	30	0	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6
Total	21	26	29	32	36	≤ 6	7	≤ 6	≤ 6	≤ 6	22	26	30	35	65	7	≤ 13	≤ 12	≤ 12	≤ 13	≤ 68	≤ 74	≤ 73	≤ 70	≤ 86

* Including casuals

Action Information

MCRI's Sex/Gender ratio is not represented at all Levels or Classifications at MCRI. Action 1.3.4 aims for all Levels and Classifications to reflect MCRI's overall Sex/Gender ratio. In the short term, this means 80:20; however, with the increase in women at senior levels and men at entry levels (Action 3.6.3), we expect to see the overall ratio balance to around 60:40 within 7 years. Setting our target to align with the general workforce population allows for continued adjustment and multiple targets as appropriate at each Classification and Level. These targets will create clarity in our policies and procedures and available career pathways.

Action 1.3.4: Set a target for increasing the representation of women at Research Levels C, D, and E Professional Levels 9+10, and Individual Contract Researchers and Clinician Researchers in line with MCRI's Sex/Gender ratio (to have this ratio be 60:40 women-to-men in 7 years), through the promotion of existing women to this Level as a first option and recruitment where needed and/or identified.

Action 3.6.3: Target recruitment for men at Levels A and B, Culturally and Racially Marginalised (CARM) and women candidates where they are underrepresented in shortlisting or interviewing.

As depicted in Figure 18, most of MCRI's workforce are on Part-Time contracts. Across 2018-2022, females consistently account for more than 85% of Part-Time workers but only 70% of Full-Time workers (Figure 19), in contrast to MCRI's overall 80:20 Sex/Gender ratio. The reasons for this trend are unclear and may result from personal preference, caring responsibilities and/or funding restrictions. Further investigation is needed to understand the main contributing factor to Part-Time arrangements across classifications and Levels, particularly considering the decline of FT arrangements for females during COVID-19 (2021 and 2022 in Figure 20). Trends in Figure 21 are difficult to identify due to small numbers across classification Levels, however, males appear to have a higher proportion of full-time staff at all Levels excluding Professional Level 6, Individual Contract (Researcher) and Individual Contract (Clinician Researcher).

Figure 18: MCRI Headcount by Full-Time and Part-Time Status 2018-2022
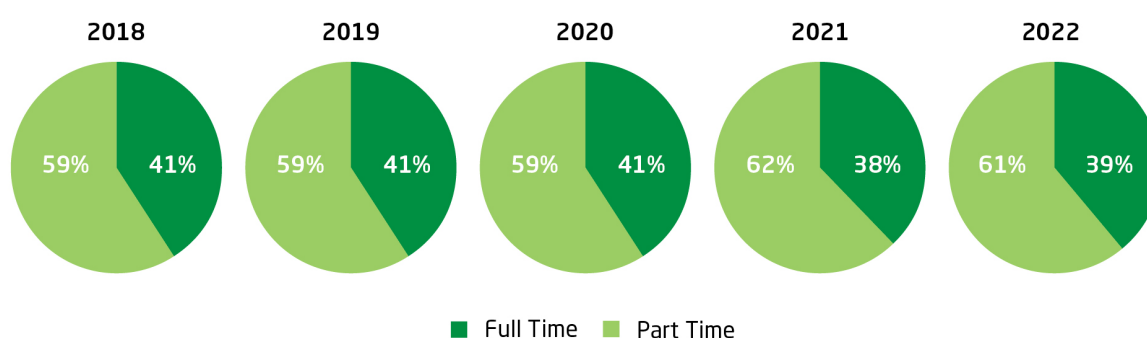
Figure 19: Full-Time and Part-Time workers by Sex 2018-2022
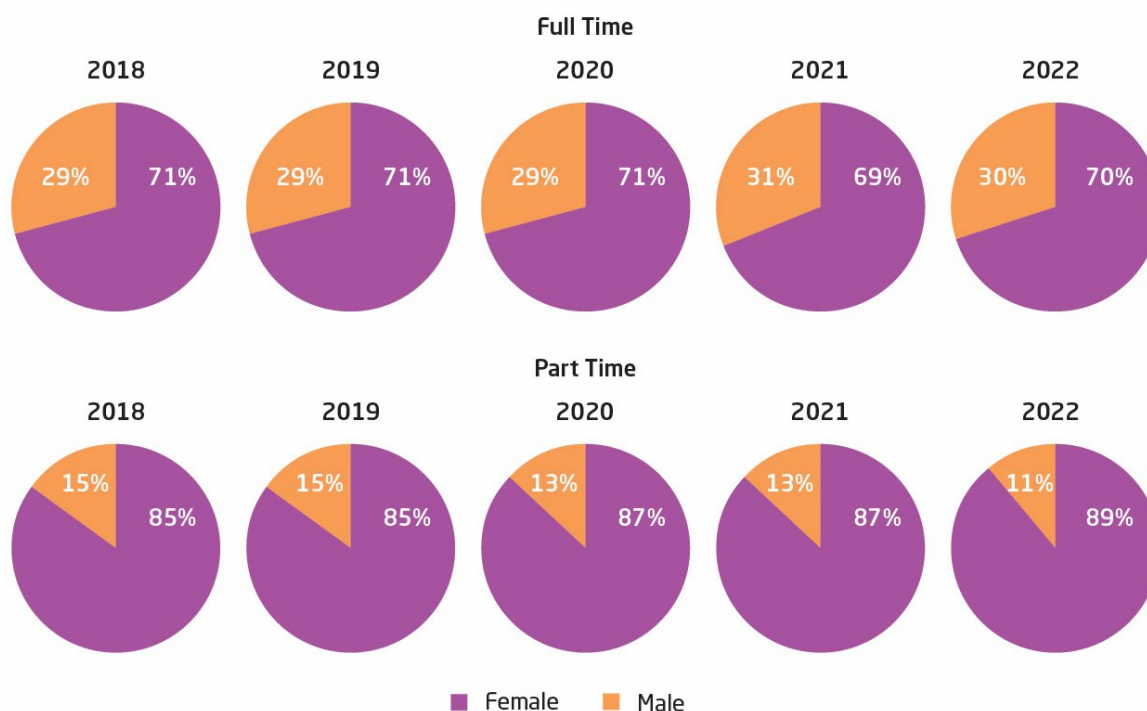
Figure 20: MCRI Headcount by Sex and Full-Time or Part-Time Status 2018-2022

	2018	2019	2020	2021	2022		2018	2019	2020	2021	2022
			Female						**Male**		
Full Time	227	254	261	256	302		94	102	107	117	131
Part Time	388	430	469	537	609		67	73	70	75	79
Total	615	684	730	793	911		161	175	177	192	210

■ Female Part Time ■ Female Full Time ■ Male Part Time ■ Male Full Time
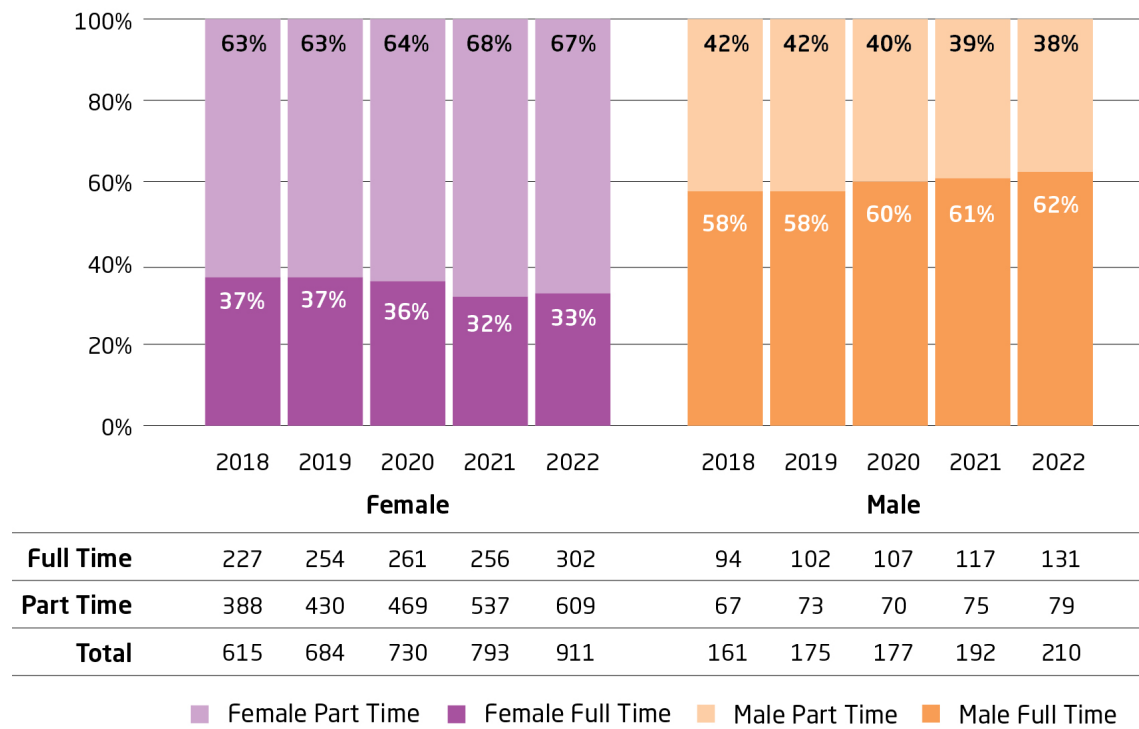
Figure 21: Classification Headcount by Full-Time and Part-Time Status and Sex, 2022

Academic Staff

	Level A		Level B		Level C		Level D		Level E	
	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male
Full Time	86	30	24	9	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6
Part Time	199	17	37	9	14	≤ 6	≤ 6	7	≤ 6	≤ 6
Total	285	47	61	18	≤ 20	≤ 12	≤ 12	≤ 12	≤ 12	≤ 12

Professional Staff

	Level 1		Level 2		Level 3		Level 4		Level 5		Level 6		Level 7		Level 8		Level 9 or 10	
	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male
Full Time	≤ 6	≤ 6	≤ 6	≤ 6	13	≤ 6	13	≤ 6	30	11	23	≤ 6	16	10	27	12	9	≤ 6
Part Time	≤ 6	≤ 6	≤ 6	0	15	≤ 6	60	≤ 6	71	≤ 6	39	≤ 6	38	≤ 6	28	≤ 6	8	≤ 6
Total	≤ 12	≤ 6	≤ 6	≤ 6	28	≤ 6	73	≤ 6	101	≤ 17	62	≤ 6	54	≤ 16	55	≤ 18	17	≤ 6

Individual Contracts

	Individual Contract (Clinician Researcher)		Individual Contract (Professional)		Individual Contract (Researcher)		Individual Contract (Nurse Researcher)		Research Nurse	
	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male
Full Time	≤ 6	0	25	27	≤ 6	0	≤ 6	0	13	≤ 6
Part Time	19	16	9	≤ 6	≤ 6	≤ 6	0	0	48	≤ 6
Total	≤ 25	16	34	≤ 33	0	≤ 6	≤ 6	0	61	≤ 6

Action Information

PT and FT arrangements data indicate a discrepancy in our workforce by Sex. However, it only tells part of the story as to why. Enabling Action 4.5.2.c commits MCRI to fully understanding if employment arrangements meet staff expectations and needs or if other factors, such as People Leader, budget, caring responsibilities, and more, contribute to this trend.

Action 4.5.2.c: Conduct further investigation and seek feedback to develop recommendations and make relevant changes to MCRI's foundational GEDI Work related to our people's ambitions or "ideal" role compared to their current pathway, position and/or FTE.

Figure 22 reports the total headcount versus the total full-time equivalent (FTE) at MCRI. Across all 5 years, the ratio of females to males by FTE is consistently lower than the total headcount, suggesting that males are more likely to have higher FTE. This trend is observed across employee classification types (Figure 23), where the average (2018-2022) male FTE is higher than the average female FTE for nearly all Levels (excluding Individual Contract Nurse Researchers, Individual Contract Researchers and Research Nurses).

Figure 22: MCRI Headcount vs FTE by Sex, 2018-2022*

	2018		2019		2020		2021		2022	
	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE
Female	776	596	816	658	873	701	929	747	911	627
Male	193	159	201	172	206	174	224	188	210	170
Total	969	755	1017	830	1079	875	1153	935	1121	797
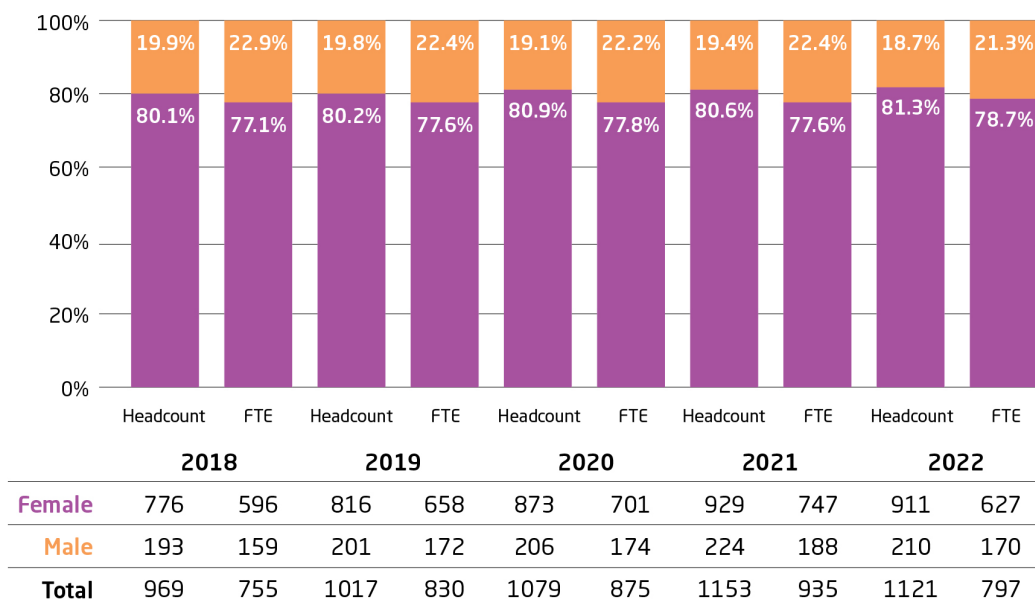
* Not including casuals
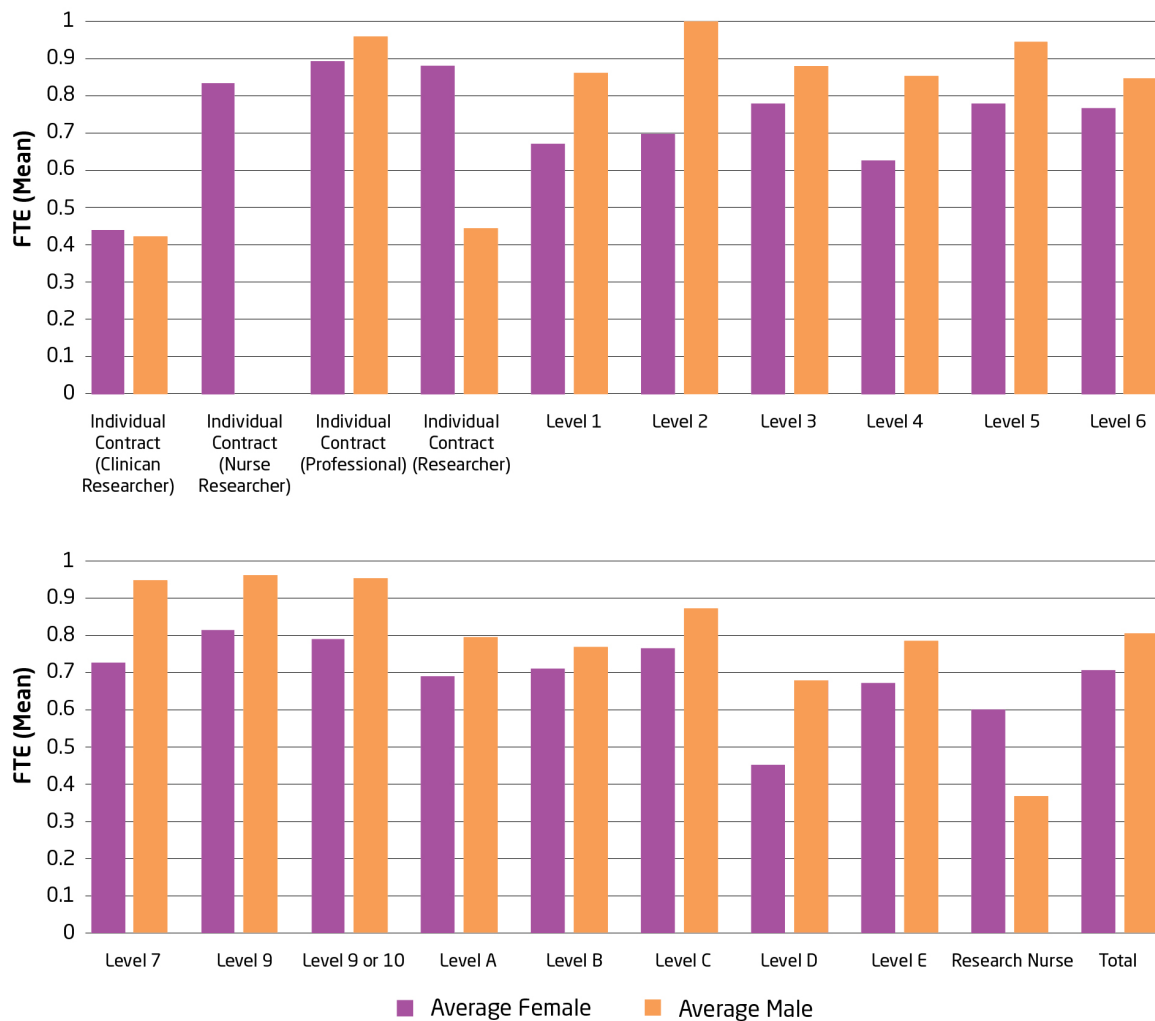
Figure 24 compares the percentage of females versus males by headcount and FTE for all Academic Levels from 2018-2022. It illustrates the shift in female-to-male ratios across the Levels (e.g., 2022 Level A (84:16) versus Level E (56:44)). Across all years, the headcount and FTE for Levels A and B are generally equivalent, with a significant shift in FTE occurring at Level C that generally continues through Levels D and E. Across all Academic Levels, 94 males make up the equivalent of 74 FTE roles (78%). In contrast, 384 females comprise 262 FTE roles (68%). Factors to consider are age, caring responsibilities, and whether more females are in part-time positions because they choose to or because it is the only option due to research budgets. However, if budgeting were the main driver, similar trends may have also been visible for males at these Levels. Findings in section 4.4.iii suggest that the more likely cause of this discrepancy is the variance in flexible work practices that could allow women to work more FTE and balance other life considerations and responsibilities.

Figure 24: Academic Headcount Percentage vs. FTE Percentage by Sex

Total #		A	B	C	D	E
	Female	367	66	25	9	9
	Male	70	18	10	12	7
	Total	437	84	35	21	16

FTE (Total #)*		A	B	C	D	E
	Female	193.88 (285)	43.45 (61)	13.88 (20)	5.6 (9)	5.95 (9)
	Male	36.72 (47)	14.1 (18)	9 (10)	8.62 (12)	6 (7)
	Total	230.59 (332)	57.55 (79)	22.88 (30)	14.22 (21)	11.95 (16)

—— Female Total   —— Male Total   - - - Female FTE   - - - Male FTE

The percentage headcount compared to the percentage FTE for all Professional Levels from 2018-2022 is depicted in Figure 25. Headcount and FTE appear generally event across all years. However, in 2022, 362 females from Professional Levels constitute 248 FTE roles (69%) compared to 54 males at 49 FTE roles (89%), indicating that males in Professional Levels are more likely to work full-time. The sharp contrast between headcount and FTE for females versus males at Levels 1 and 2 suggests females in these roles are more likely to have reduced FTE.

Figure 25: Professional Headcount Percentage vs. FTE Percentage

		1	2	3	4	5	6	7	8	9/10
Total #	**Female**	22	10	32	93	114	64	58	61	17
	Male	8	≤ 2	≤ 6	9	14	7	14	15	≤ 6
	Total	30	≤ 12	≤ 38	102	128	71	72	76	≤ 23
FTE (Total #)*	**Female**	4.7 (8)	3.8 (≤ 6)	21.8 (28)	35.9 (73)	63.5 (101)	48.9 (62)	40.2 (54)	44.8 (55)	14.3 (17)
	Male	4.6 (≤ 6)	1 (≤ 1)	3.8 (≤ 6)	2.4 (≤ 6)	11.4 (12)	2.8 (≤ 6)	11.7 (12)	13.8 (15)	5.8 (≤ 6)
	Total	9.3 (≤ 14)	4.8 (7)	25.6 (≤ 34)	38.3 (≤ 79)	74.9 (113)	51.7 (≤ 68)	51.9 (66)	58.6 (70)	20.1 (≤ 23)
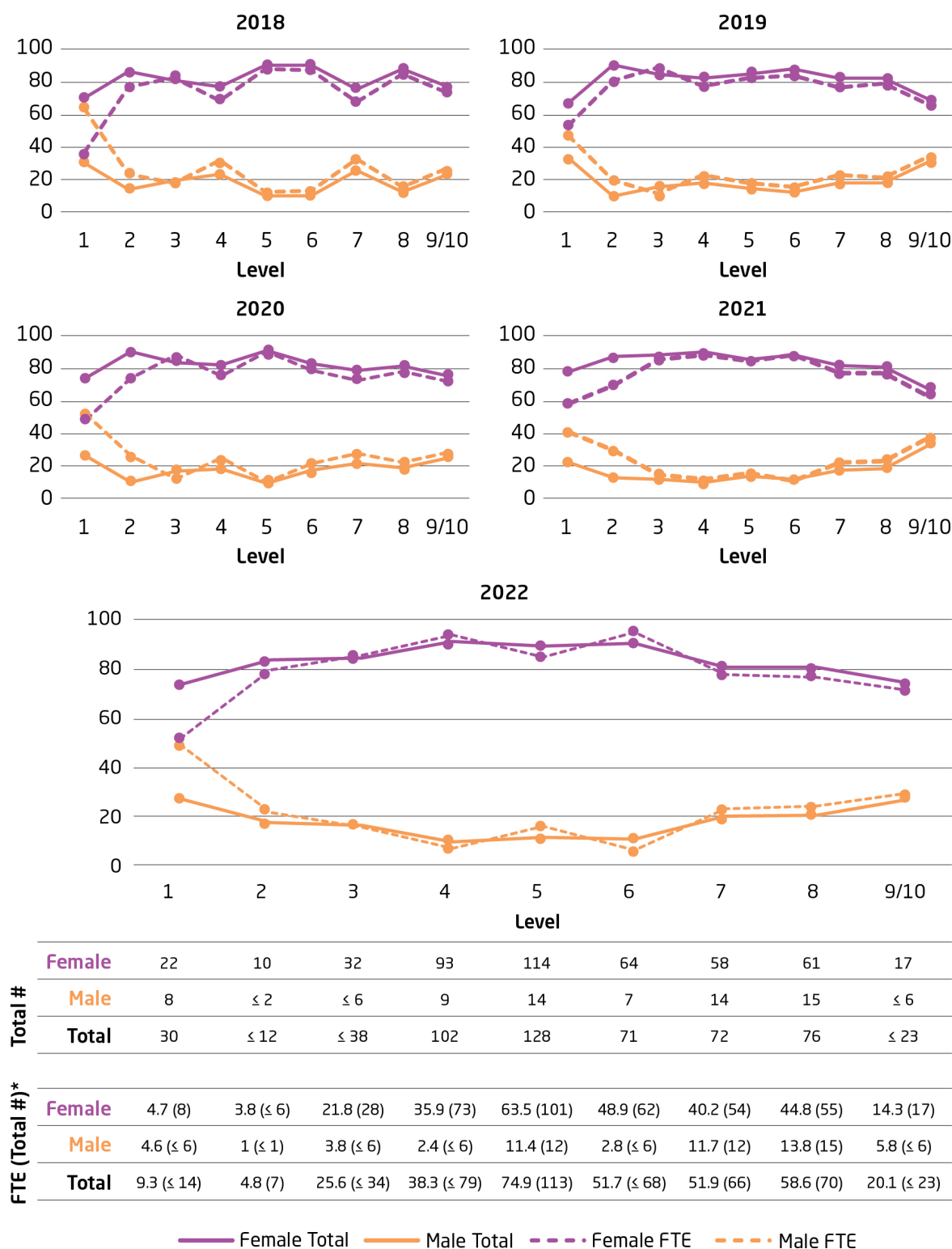
Figure 26 depicts the percentage headcount compared to the percentage FTE for all Research Nurses and Individual Contractors (Clinician Researcher, Professional, or Researcher) from 2018-2022. Across all years, headcount and FTE are generally even. Small numbers of Individual Contract (Researchers) and male Research Nurses make more in-depth comparisons challenging.

*Figure 26: Headcount Percentage vs. FTE Percentage for A) Research Nurses, B) Individual Contract (Clinician Researcher), C) Individual Contract (Professional), D) Individual Contract (Researcher). ***

A.

Research Nurses

	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE
	2018		**2019**		**2020**		**2021**		**2022**	
Female	62	51	68	55	67	56	64	53	80	61
Male	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6
Total	≤ 68	≤ 57	≤ 74	≤ 61	≤ 73	≤ 62	≤ 70	≤ 59	≤ 86	≤ 67

B.

Individual Contract (Clinician Researcher)

	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE
	2018		**2019**		**2020**		**2021**		**2022**	
Female	10	10	11	11	13	13	16	16	20	20
Male	11	11	15	14	16	15	16	16	16	16
Total	21	21	26	25	29	28	32	32	36	36

C.

Individual Contract (Professional)

	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE
	2018		**2019**		**2020**		**2021**		**2022**	
Female	12	12	14	14	18	18	19	19	35	34
Male	10	10	12	12	12	12	16	16	30	30
Total	22	22	26	26	30	30	35	35	65	64

D.

Individual Contract (Researcher)

	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE
	2018		**2019**		**2020**		**2021**		**2022**	
Female	7	≤ 6	7	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	7	7
Male	0	0	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6
Total	7	≤ 6	≤ 13	≤ 12	≤ 12	≤ 12	≤ 12	≤ 12	≤ 13	≤ 13

Figures 25 and 26 demonstrate that females have an overall reduced FTE compared to males at MCRI. In analysing all employment categories, this trend is relatively consistent but most prominent in Professional Level 1 and Academic Levels C (through to D/E).

As noted, intersectional analysis is unavailable for MCRI's workforce data. However, the GEDI Survey provided a snapshot of the diversity of MCRI's headcount. Results of the GEDI survey could not be disaggregated by employment classification type to protect confidentiality within our survey system. Figures 27 and 28 summarise the results from 900 respondents and illustrate the diversity of MCRI. Regular surveys will allow us to understand further the diversity of our institute.

Figure 27: Who Makes Up MCRI, GEDI Survey Demographic Results 2022

10+ Languages Spoken	**49%** With Caring Responsibilities	**12%** Identify as LGBTQIA+	**20%** Report a Physical and/or Mental Health Condition and/or Disability
0.8% Aboriginal and/or Torres Strait Islander Respondents	**32%** With History of Migration	**40%** Practice a Major Faith Religion	**27%** in People Leader Positions
59% Practice No Religion	**65%** Born in Australia	**9%** Born in Europe	**14%** Born in Asia
2% Born in North America	**3%** Born in New Zealand	**15%** Born in Africa	**1%** Born in South America

Figure 28: Cultural Background of MCRI Staff, GEDI Survey Demographic Results 2022

	37% Australian (excl. Aboriginal and/or Torres Strait Islander)	**17%** Anglo European	**8.3%** South-East Asian
7.7% Southern and/or Eastern European (excl. Anglo-European)	**5.5%** Northern and/or Western European (excl. Anglo-European)	**4.8%** One or More Cultural Background	**3.7%** Southern and/or Central Asian
3.6% East Asian	**3%** All others	**2.7%** New Zealander (excl. Māori)	**1.2%** South and/or Central American
1.2% North American	**1%** North African and/or Middle Eastern	**0.7%** Not Specified	**0.7%** Sub-Saharan African

Action Information

To date, MCRI has not adequately monitored or tracked its diversity; regular surveys (Actions 2.2.1 and 2.2.2) will develop our understanding of our gaps and areas for improvement and allow us to establish appropriate targets with traditionally underrepresented groups (Strategy 1.3). Action 1.3.5 is an example of this strategy in practice. Having met with the Aboriginal Reference Group (ARG) following confirmation of 0.8% Indigenous representation at MCRI, the ARG recommended improving contract security to enable increased representation. These targets and strategies create impetus for MCRI to establish policies, procedures, practices, and programs that deliver GEDI at all career Levels.

Strategy 1.3: Commit to formal targets and strategies to increase the diversity of MCRI at all Levels.

(ii) Staff by Contract Type

As a not-for-profit organisation that depends on the support of individual donors, charitable trusts, corporate sponsors, and government grants, MCRI relies on continued funding to enable the continuity of employment of our people. As such, most of our staff are on Maximum Term contracts to align with funding terms, as seen in Figure 29. Across all 5 years, males are more likely to have ongoing contracts. However, this is suspected to be a result of the increased proportion of males in senior positions (e.g., Academic Levels D and E and Professional Levels 9/10 as seen in Figure 17) and the fact that males are more likely to be on Full-Time arrangements (Table 8 below and see Figure 19).

Figure 29: Total MCRI Staff by Ongoing, Maximum Term or Casual Contracts as A) Percent females vs males in 2022 and B) Over the 5-year period from 2018-2022 as percent total females or total males

A.

B.

	Female					Male				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
Ongoing	60	60	59	57	81	30	36	32	31	32
Maximum term	536	598	642	690	830	129	136	142	157	178
Casual	180	158	172	182	181	34	29	32	36	41
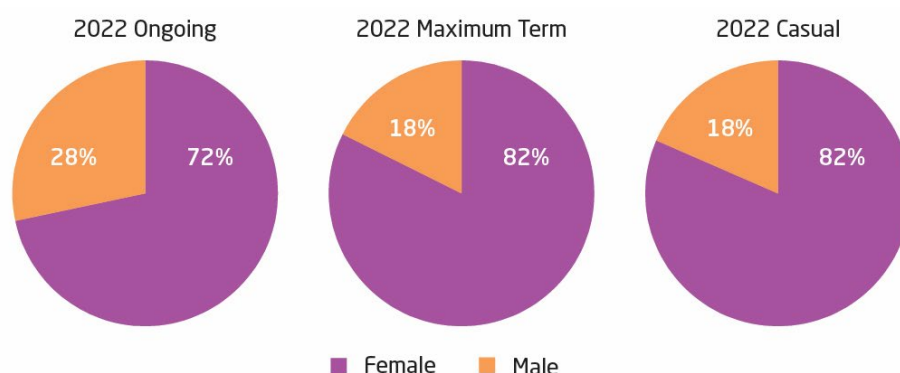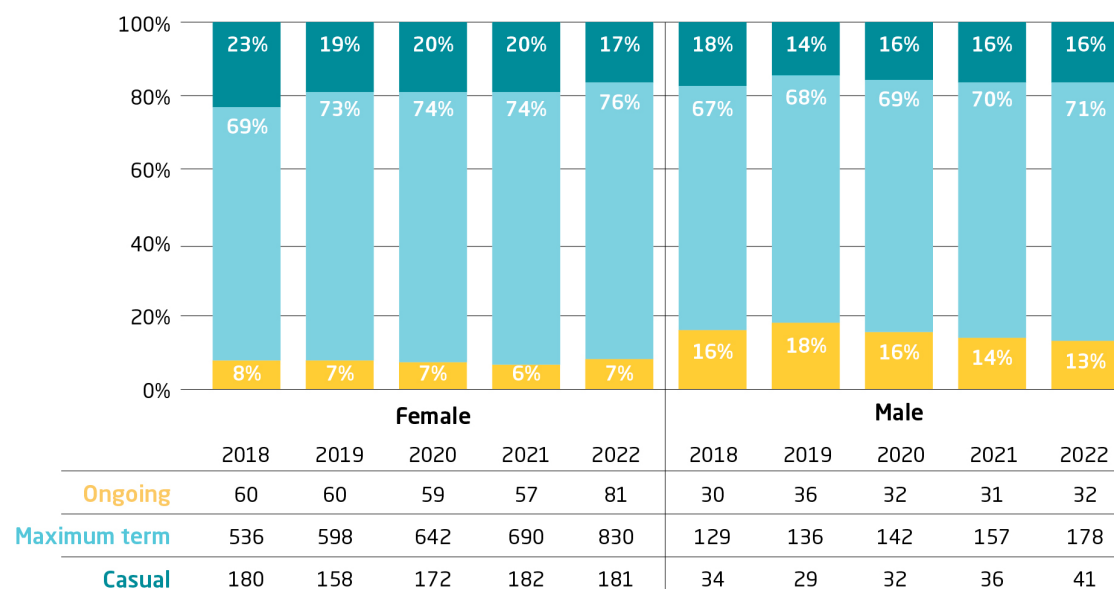
Table 8: Number of staff (by headcount and FTE) by contract type, Sex and full-time or part-time status 2018-2022

2018

	Full Time			Part Time			FTE		
	Female	Male	Total	Female	Male	Total	Female	Male	Total
Ongoing	34 (58%)	25 (42%)	59	26 (84%)	≤ 6 (16%)	≤ 32	50.4 (65%)	27.5 (35%)	77.9
Maximum term	193 (74%)	69 (26%)	262	343 (85%)	60 (15%)	403	373.8 (79%)	98.7 (21%)	472.6

2019

	Full Time			Part Time			FTE		
	Female	Male	Total	Female	Male	Total	Female	Male	Total
Ongoing	37 (54%)	31 (46%)	68	23 (82%)	≤ 6 (18%)	≤ 29	51.6 (61%)	33.7 (39%)	85.3
Maximum term	217 (75%)	71 (25%)	288	381 (85%)	65 (15%)	446	418.3 (80%)	101.7 (20%)	520.0

2020

	Full Time			Part Time			FTE		
	Female	Male	Total	Female	Male	Total	Female	Male	Total
Ongoing	38 (58%)	27 (42%)	65	21 (81%)	≤ 6 (19%)	≤ 27	51.4 (63%)	29.7 (37%)	81.1
Maximum term	223 (74%)	80 (26%)	303	419 (81%)	62 (13%)	481	444.3 (80%)	112.19 (20%)	556.4

2021

	Full Time			Part Time			FTE		
	Female	Male	Total	Female	Male	Total	Female	Male	Total
Ongoing	37 (60%)	25 (40%)	62	20 (77%)	≤ 6 (23%)	≤ 26	50.1 (64%)	28.3 (36%)	78.4
Maximum term	219 (70%)	92 (30%)	311	471 (88%)	65 (12%)	536	480.3 (79%)	124.5 (21%)	604.8

2022

	Full Time			Part Time			FTE		
	Female	Male	Total	Female	Male	Total	Female	Male	Total
Ongoing	50 (50%)	28 (36%)	78	31 (89%)	≤ 6 (11%)	≤ 37	70.9	30.6	101.5
Maximum term	252 (71%)	103 (29%)	355	578 (89%)	75 (11%)	653	557.0	139.7	696.7

Figure 30 depicts the average percentage of those on Ongoing, Maximum Term or Casual contracts from 2018 to 2022. See 2022 data as a representative example of the headcounts used for these averages in Table 9. Generally, Academic Staff are more likely to be on Maximum Term contracts due to their funding sources. The majority of Professional Staff are also on Maximum Term contracts; however, they are most likely of all MCRI staff to be on ongoing contracts, likely due to operational roles that require ongoing management. Anomalies in Professional Staff averages (e.g., 70% Ongoing Contracts for males at Level 2) are an artifact of 2 males at this Level and contract type for 3 years. Those on Individual Contracts have similar differences as in Academic versus Professional Classifications. All Individual Contracts with research responsibilities are on Maximum Term contracts, while 47% of those on Professional Individual Contracts are on Ongoing contracts, likely due to the ongoing nature and need for professional roles to support MCRI's daily operations and functioning.

Figure 30: Staff by Contract Type as average percent (2018-2022) by Employment Classification and Level

Academic Staff

Female / Male — Level A–E

Professional Staff

Female / Male — Level 1–9/10

Individual Contracts and Research Nurses

Female / Male

Legend: Ongoing | Maximum Term | Casual
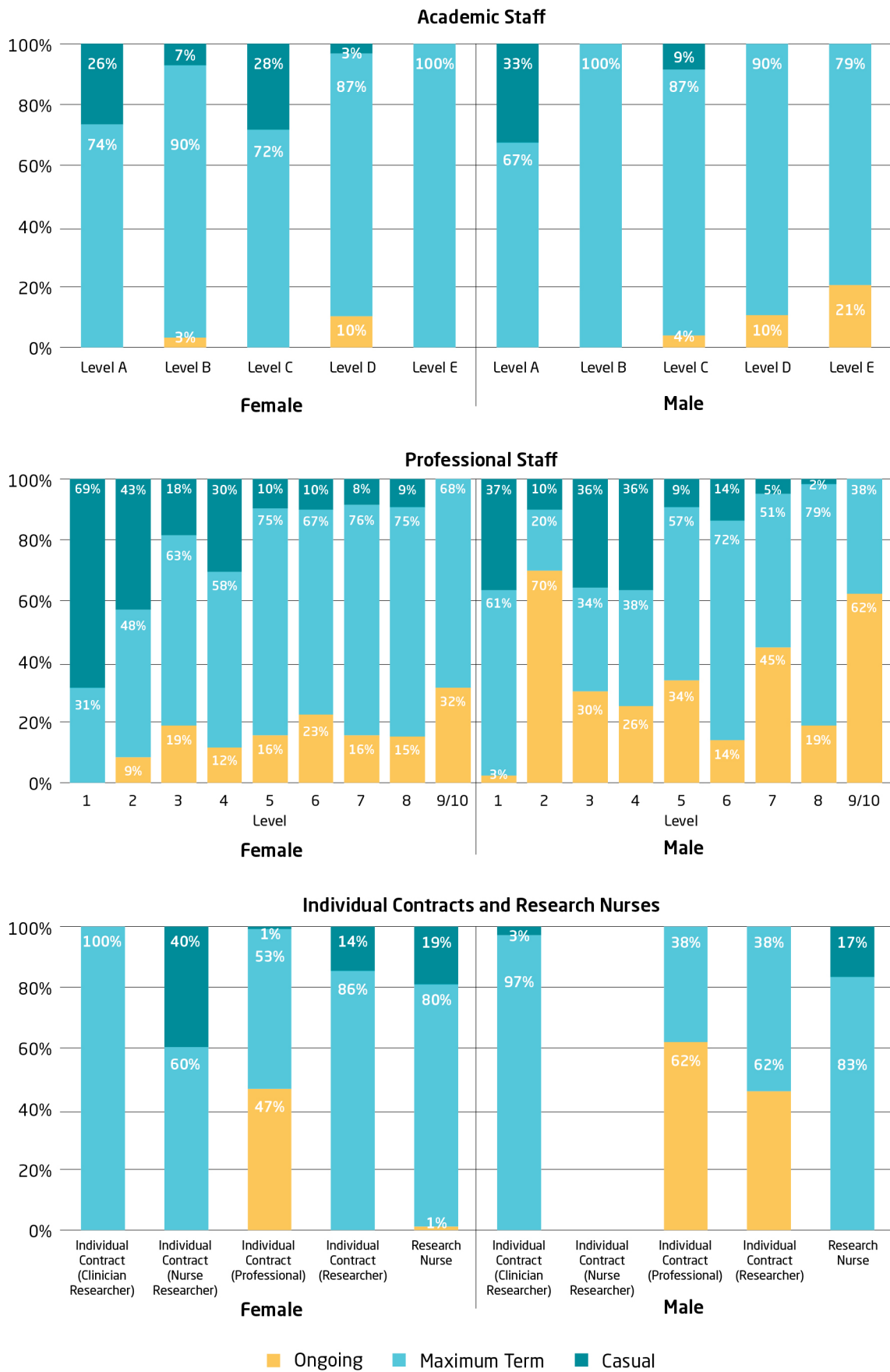
Table 9: Contract Type by Headcount, Classification and Sex, 2022

Academic Staff

	Level A	Level B	Level C	Level D	Level E	Level A	Level B	Level C	Level D	Level E
			Female					Male		
Ongoing	0	≤ 6	0	≤ 6	0	0	0	0	≤ 6	≤ 6
Maximum term	285	59	20	8	9	47	18	10	11	≤ 6
Casual	82	≤ 6	≤ 6	0	0	23	0	0	0	0
Total	367	≤ 71	≤ 26	≤ 14	9	70	18	10	≤ 17	≤ 12

Professional Staff

	Level									Level								
	1	2	3	4	5	6	7	8	9/10	1	2	3	4	5	6	7	8	9/10
					Female									Male				
Ongoing	0	≤ 6	12	8	9	14	12	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	0	≤ 6	0	≤ 6
Maximum term	8	≤ 6	16	65	92	48	42	49	12	≤ 6	0	≤ 6	≤ 6	8	≤ 6	≤ 6	15	≤ 6
Casual	14	≤ 6	≤ 6	20	13	≤ 6	≤ 6	≤ 6	0	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	0	0
Total	22	≤ 12	≤ 34	93	114	≤ 68	≤ 60	≤ 61	≤ 18	≤ 12	≤ 6	≤ 6	≤ 12	≤ 20	≤ 12	≤ 18	15	≤ 6

Individual Contracts

	Individual Contract (Clinician Researcher)	Individual Contract (Professional)	Individual Contract (Researcher)	Individual Contract (Nurse Researcher)	Research Nurse	Individual Contract (Clinician Researcher)	Individual Contract (Professional)	Individual Contract (Researcher)	Individual Contract (Nurse Researcher)	Research Nurse
			Female					Male		
Ongoing	0	11	0	0	0	0	12	≤ 6	0	0
Maximum term	20	23	7	≤ 6	61	16	18	≤ 6	0	≤ 6
Casual	0	≤ 6	0	≤ 6	19	0	0	0	0	≤ 6
Total	20	≤ 40	7	≤ 6	80	16	30	≤ 6	0	≤ 6

Acknowledging that Maximum Contracts can create insecurity for our people, MCRI has begun to address this concern by enabling continuity of employment within MCRI and the broader sector by offering outplacement services, access to the Employment Assistance Program (EAP), directing our people to internal job listings and providing support through the P&C Career Transition Portal. However, qualitative data gathered revealed that many of our people on maximum term contracts are on year-to-year short-term contracts, many sharing that they have been on 1-year contracts for 5-15 years. This creates an environment of insecurity that impacts our culture, well-being, and ability to retain the best people (as explored in Sections 4.2.iii and 4.4.i). As such, further action is required to enable continuity at MCRI and the broader research sector. MCRI is assessing the legislative changes to fixed-term contracts and the applicability to our contracts given contract extensions is based on the applicability of funding, which is one of the exemptions in the legislation (Actions 3.3.1 and 3.3.4).

Action Information

MCRI's ability to offer contract security is highly dependent on ongoing funding and support; advocating to funders on the constraints researchers face (Action 6.1.3) may address this issue. However, without clear policies and procedures that enable retention and progression, People Leaders and their team can make decisions based on scarcity and fear. If funding allows, Actions 3.3.1, 3.3.4 and 3.3.5 will create responsibility for People Leaders to plan for retention and career progression, contributing to a culture of safety at MCRI.

Action 3.3.1: Pending legislative changes, institute an expectation that the length of all contracts should be 2 years if funding/grant terms allow unless a clear rationale is provided for a shorter contract term.

Action 3.3.4: Pending legislative changes, set a policy for ongoing contracts past a certain number of years at MCRI.

Action 3.3.5: Pending legislative changes, convert current maximum contracts to ongoing where available and/or possible

Action 6.1.3: Advocate to external funders to increase funding for research employment continuity and wellbeing and consider flexibility in deadlines and KPI's by either extending deadlines or allowing Groups to request extensions for parental leave to reduce stress and competition.

(iii) Staff Exit Data

MCRI's P&C team collects exit numbers and reasons for departure through the Human Resources Information System (HRIS). Figure 31 provides a summary of exit rates from 2018 to 2022. There is a general trend indicating that there has been a slight increase over the years in female versus male exits. However, these are still relatively consistent with the overall 80:20 Sex/Gender Ratio at MCRI. Figure 32 indicates that no particular Classification or Level appears to account for this trend, with exit rates generally in line with the overall percentage of females at each Level. However, small numbers within many Levels and year-to-year variation challenge further interpretation.

Figure 31: MCRI Exits by Sex 2018-2022

	2018	2019	2020	2021	2022
Female	146	152	164	149	247
Male	44	42	47	35	53
Total	190	194	211	184	300
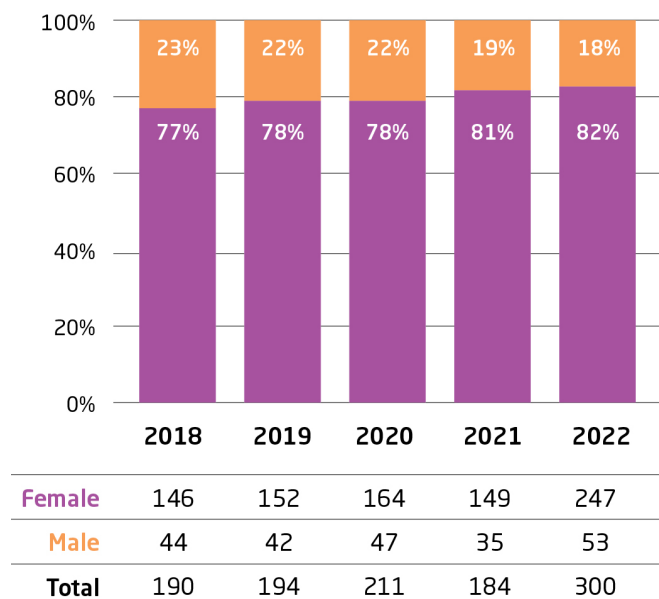
Figure 32: MCRI Exits by Level and Sex versus MCRI Total Females 2018-2022

	Individual contract (Clinican Researcher)	Individual contract (Professional)	Individual contract (Researcher)	Individual contract (Nurse Researcher)	Research Nurse	Level 1	Level 2	Level 3	Level 4	Level 5	Level 6	Level 7	Level 8	Level 9/10	Level A	Level B	Level C	Level D	Level E
Female Exits	≤ 6	9	≤ 6	0	23	8	≤ 6	15	18	27	10	≤ 6	10	≤ 6	98	7	≤ 6	≤ 6	0
Male Exits	≤ 6	≤ 6	0	0	≤ 6	≤ 6	0	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	23	≤ 6	≤ 6	0	≤ 6
Total Exits	≤ 6	≤ 15	≤ 6	0	≤ 29	≤ 14	≤ 6	≤ 21	≤ 24	≤ 33	≤ 16	≤ 12	≤ 16	≤ 12	121	≤ 13	≤ 6	≤ 6	≤ 6
Total Female	36	65	10	≤ 6	84	30	12	38	102	128	71	72	76	23	437	84	35	21	16

■ Female Exits   ■ Male Exits   --- Total % Female

The mechanisms to collect qualitative exit data from leavers are inconsistent and not enforced because they are not outlined in MCRI's Departure Policy and Procedure. As such, the information depicted in Table 10 is of limited value in identifying areas for improvement related to retention of all our people, particularly those from traditionally underrepresented backgrounds or those with fractional appointments. The available information from 2018-2021 indicates that contract expiry is the most prominent reason for departure (representing approximately 40% of exiting reasons). However, in 2022, resignation accounted for a third of total exits. Improving our exit process will allow us to understand what drives resignations and will provide further information about those with unspecified reasons for departure (31%) and the growing trend of female exits seen in Figure 31.

Table 10: Exit Numbers by Reason and Sex (headcount only), 2022

	Female	**Male**	**Total**
Other reasons: specified*	11 (73.3%)	≤6 (26.7%)	≤17
Other reasons: unspecified	77 (82.8%)	16 (17.2%)	93
Resignation	93 (84.5%)	17 (15.5%)	110
Contract expired	66 (80.5%)	16 (19.5%)	82
Total	**247 (82.3%)**	**53 (17.7%)**	**300**

* Specified reasons include: Alternate Position, death, dismissed for other reasons, left without notice, personal reasons, redundancy, or temporary position.

Action Information

Actions 1.5.2.h and 3.8.4 will enable MCRI to have more robust quantitative and qualitative data to understand the driving factors of exits at various Levels and appropriately address them in the future to drive Career Pathway progression.

Action 1.5.2.h: Collaborate with relevant departments, themes and committees to establish, align and/or expand data collection methods to lessen data gaps and inconsistencies related to exit rates and exit reasons.

Action 3.8.4: Monitor and expand MCRI's new Exit Survey and Interview Framework to understand our retention issues and identify issues for traditionally underrepresented groups.

(iv) Composition of the Research Institution's Governing Body and Decision-Making Committees

MCRI's governance structure includes our Director, Professor Kathryn North, who sits on the Board of Directors and is supported by an Executive Committee and Senior Management Team (SMT). Members of the Board of Directors are nominated by the Nomination and Remuneration Board Sub-Committee to meet the needs of the Board and recruit experts in relevant categories.

Figure 33 depicts the membership survey responses of the Board of Directors as of November 2022[3]. Of the 13 Board members who received the survey, the response rate of 115% indicates two directors answered twice, skewing the data presented. The Board has Gender Diversity as an agenda item, so it is assumed the ratio is balanced in practice; however, further investigation, formalised targets and tracking will eliminate confusion moving forward. Figure 34 outlines the Board's cultural diversity, with the majority identifying as Australian. 100% identified as heterosexual, and none expressed lived experience of (dis)ability.

Figure 33: MCRI Board of Directors Membership by Gender, 2022 Survey Results

- 33% Woman and/or Female
- 67% Man and/or Male

Woman and/or Female	5
Man and/or Male	10
Total	15
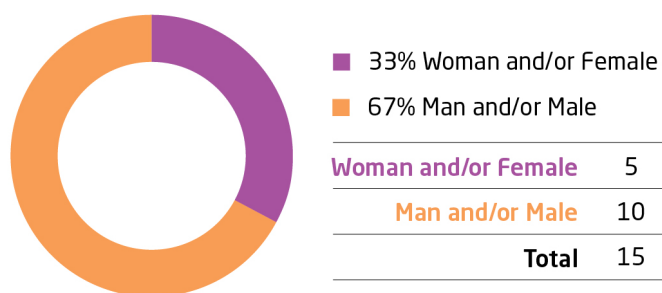
Figure 34: Board of Director Membership by Cultural Background, 2022 Survey Results

- 13% Anglo-European
- 81% Australian (excl. Aboriginal and/or Torres Strait Islander)
- 6% Other cultural/ethnic group

The Executive Committee at MCRI comprises 18 senior leaders. Membership is based on role and position description within MCRI, which generally entails those with leadership of a Theme or Unit. Considering the barriers to women's progression, men are more likely to be in roles with Executive position descriptions, resulting in an Executive Committee that does not reflect MCRI's 80:20 Gender ratio. Based on the results of 13 survey submissions (72% response rate), membership information is depicted in Figures 35 and 36. 93% have cultural backgrounds from Australia or Europe, 100% identified as heterosexual, and none expressed lived experience of (dis)ability.

Figure 35: MCRI Executive Team Membership by Gender, 2022

- 38% Woman and/or Female
- 62% Man and/or Male

Woman and/or Female	5
Man and/or Male	8
Total	13

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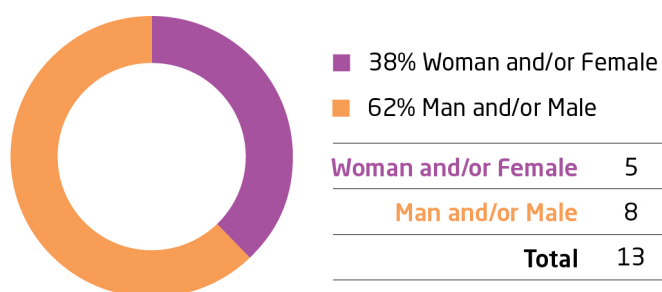
[3] Note that some data in this section is not presented as ≤6 because it was determined by the SAT that the data was not identifiable or sensitive and whole numbers were needed for interpretation of this small group.

- 13% Anglo-European
- 53% Australian (excl. Aboriginal and/or Torres Strait Islander)
- 7% Other cultural/ethnic group
- 27% Southern and/or Eastern European

MCRI's SMT has 6 members and is responsible for regular activity at MCRI. Membership in this body is determined by role and position description, which outlines leadership of MCRI operations. The SMT does not reflect MCRI's 80:20 Gender ratio as women are less likely to be in these senior positions. The 6 responses to the Governing Body Survey indicating membership of the SMT reflect a 100% response rate as detailed in Figure 37. 100% identified as Australian and heterosexual, and none expressed lived experience of (dis)ability.

Figure 37: MCRI Senior Management Team Membership by Gender, 2022 Survey Results

- 33% Woman and/or Female
- 67% Man and/or Male

Woman and/or Female	2
Man and/or Male	4
Total	6
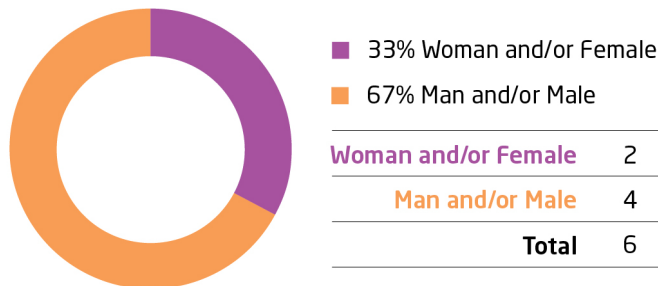
Table 11 outlines MCRI's Decision-Making Committees and their responsibilities; these committees have been highlighted due to their connection to the Board. While MCRI has internal committees that make decisions (e.g., the Clinician-Scientist Fellowship Committee or the Data Steering Committee), these decisions are based on the guidance provided by either the Board, Executive, and/or SMT. Decision-Making Committee membership is also recommended by the Nomination and Remuneration Board Sub-Committee based on need and expertise in relevant categories to be approved by the Board. Further, each board sub-committee has at least one MCRI director to ensure connection to MCRI's daily operations.

Table 11: MCRI Decision-Making Committees

Committee	Purpose
Audit Risk and Finance Committee	Monitors the systems and controls established to safeguard the Institute's assets.
Development Board	Provides advice on fundraising, marketing, and communications to engage donors and supporters at the national level.
Global Advisory Board	Provides advice on fundraising, marketing and communications to engage donors and supporters at the global level.
Investment Committee	Advises on the financial investments of the Institute.
Translation and Commercialisation Committee*	Provides advice on research translation and patents.

*Committee no longer operating, will be replaced by an Innovation Committee starting late 2023

Only 3 responses to the Governing Body Survey indicated membership on a committee other than the Board of Directors, Executive Committee or SMT. As such, the makeup of the combined Governing Body and Committee groups is summarised in Table 12. There is a greater proportion of men in this group (58%) than women. Considering MCRI's Gender composition, MCRI's governing and decision-making bodies do not reflect our workforce. There are no Aboriginal and/or Torres Strait Islanders in this group, and approximately a fifth reported English was not their first language. Of the 21 women, 3 (27%) reported being the chair of a decision-making committee, and none reported being a secretary. Of the 15 men, 2 (13%) reported being a committee chair, 3 (20%) reported being a secretary.

Table 12: MCRI Decision Making Committee(s) Membership Information

How do you describe your Gender?	
Woman	11 (42.3%)
Man	15 (57.7%)
Non-binary	N/A
Do you identify as Aboriginal and/or Torres Strait Islander?	
No	26 (100.0%)
How would you describe your cultural background?*	
Anglo-European	≤6
Australian (excl. Aboriginal and/or Torres Strait Islander)	18 (69.2%)
North American	≤6
Southern and/or Eastern European	≤6
North African and/or Middle Eastern	≤6
Other cultural/ethnic group	≤6
Are you a fluent English speaker?	
Yes, English is my first language	27 (79.4%)
Yes, but English is not my first language	7 (20.6%)
How do you describe your sexual orientation?	
Heterosexual	26 (100%)
Number of committees involved with:	
Not reported	≤6
1	15 (57.7%)
2	≤6
3	≤6
4	2 (7.7%)
5	3 (11.5%)

Committees reported (n=25)*	
Audit, Finance and Risk	7 (28.0%)
Development Board	3 (11.5%)
Investment Committee	4 (15.4%)
MCRI Board of Directors	15(60.0%)
MCRI Executive Committee#	13(52.0%)
MCRI Senior Management Team#	6 (24.0%)
Translation and Commercialisation Committee	2 (7.7%)
Are you the Chair of this Committee or Governing Body?	
No	21 (80.8%)
Yes	5 (19.2%)
Are you the Secretary of this Committee or Governing Body?	
No	23 (88.5%)
Yes	3 (11.5%)
Lived experiences that Decision Making Committee members identified with$	
Organisational Leadership and Decision-Making	13
Gender Equity, Diversity and Inclusion Work Experience	<6
Experience of barriers impacting GEDI in higher education and research sector	<6
The collection, management and presentation of quantitative and/or qualitative data	<6
Caring Responsibilities	<6
N/A	12

Multiple responses available, so percentage sums to > 100

 # Senior Management are part of the Executive

$ Survey contained open comment section for lived experiences, answers analysed and grouped by Evidence and Data WG

Action Information

Lack of participation in the Governing Body and Decision-Making Committee Survey makes establishing clear targets difficult. Following improved data collection, Leadership Strategies will be developed (Action 1.3.1 and 1.3.2) to reach or maintain 40:40:20 Gender balance (leaning towards more women to align with targets established in 1.3.4) and increase diversity so our governing and decision-making bodies reflect our workplace. These strategies will prioritise succession planning to enable career progression for our people.

Action 1.3.1: Develop a leadership strategy to reach or maintain 40:40:20 (women:men:people of any Gender) Gender representation at the Board of Directors, Executive and Decision-Making Committees.

Action 1.3.2: Develop a strategy to increase the diversity of the Board of Directors, Executive and Decision-Making Committees, specifically considering the representation of culturally and racially marginalised (CARM), LGBTQIA+ and Indigenous Communities.

(v) Pay Equity

Pay equity analyses of the combined MCRI workforce indicated that from 2018 to 2022, there was a pay gap of around 20% between females and males (Figure 38). However, when disaggregated by employment classification Level (Figure 39), we observed approximate pay equity for both base salary and total remuneration for all employee types except for those with individual contracts (clinician researchers and researchers).

Figure 38: Organisational Pay Gap 2018-2022

	2018	2019	2020	2021	2022
Base Salary Organisational Gap	20%	20%	20%	21%	20%
Total Remuneration Organisational Gap	19%	20%	21%	22%	21%

— Base Salary Organisational Gap   — Total Remuneration Organisational Gap

Figure 39: Pay Equity based on Job Classification Level 2022*

| Average Female Base Salary | $103,762 |
| Average Male Base Salary | $130,210 |

Base Salary Pay Equity **80%** Organisational Gap **20%**

Average Base Salary by Job Title

| Pay equity | 100% | 98% | 98% | 104% | 104% | 99% | 97% | 102% | 97% | 90% | 97% | 96% | 97% | 99% | 105% | 57% | 104% | N/A | 75% |

Job titles: Research Nurse, Level E, Level D, Level C, Level B, Level A, Level 9/10, Level 8, Level 7, Level 6, Level 5, Level 4, Level 3, Level 2, Level 1, Individual contract (Researcher), Individual contract (Professional), Individual contract (Nurse Researcher), Individual contract (Clinical Researcher)

Base salary values (Female / Male):
- Research Nurse: $103,037 / $103,322
- Level E: $218,276 / $221,891
- Level D: $171,911 / $175,125
- Level C: $154,250 / $148,871
- Level B: $122,120 / $117,989
- Level A: $97,077 / $97,635
- Level 9/10: $133,917 / $137,874
- Level 8: $118,117 / $115,709
- Level 7: $103,829 / $106,533
- Level 6: $93,502 / $104,133
- Level 5: $82,972 / $85,297
- Level 4: $77,657 / $81,172
- Level 3: $66,802 / $68,934
- Level 2: $66,375 / $68,934
- Level 1: $63,435 / $60,552
- Individual contract (Researcher): $137,501 / $242,591
- Individual contract (Professional): $162,795 / $157,122
- Individual contract (Nurse Researcher): $86,006 / N/A
- Individual contract (Clinical Researcher): $234,785 / $311,627

| Average Female Remuneration | $114,224 |
| Average Male Remuneration | $144,085 |

Remuneration Pay Equity **79%** Organisational Gap **21%**

Average Total Remuneration by Job Title

| Pay equity | 100% | 93% | 97% | 103% | 99% | 99% | 97% | 102% | 97% | 90% | 97% | 96% | 97% | 99% | 105% | 56% | 103% | N/A | 75% |

Remuneration values (Female / Male):
- Research Nurse: $113,341 / $113,654
- Level E: $241,741 / $259,612
- Level D: $190,503 / $195,607
- Level C: $170,541 / $164,825
- Level B: $134,472 / $129,788
- Level A: $106,784 / $107,399
- Level 9/10: $147,854 / $151,611
- Level 8: $129,928 / $127,280
- Level 7: $114,212 / $117,186
- Level 6: $103,056 / $114,546
- Level 5: $91,269 / $93,827
- Level 4: $85,423 / $89,289
- Level 3: $73,482 / $75,827
- Level 2: $73,013 / $73,813
- Level 1: $69,779 / $66,607
- Individual contract (Researcher): $153,135 / $271,513
- Individual contract (Professional): $179,074 / $173,262
- Individual contract (Nurse Researcher): $105,607 / N/A
- Individual contract (Clinical Researcher): $258,263 / $344,830

* Pay equity calculated as percent of male salary. Figure generated with WGEA Gender pay gap calculator

Further analysis of the two individual contract groups (clinician-researcher and researcher) with the pronounced pay gap is presented in Table 13. This group of employees represent 4% of MCRI staff, with a median base salary for females of $195,000 compared to males at $289,000, resulting in a difference of $94,000. The median total remuneration for females was $215,000 versus $318,000 for males, a $103,000 difference. This variance for Individual Contract Clinician Researchers may be linked to MCRI's policy to match Royal Children's Hospital (RCH) salaries to attract high-profile clinician researchers to MCRI's clinical research programs and create stronger links between RCH, MCRI and the University of Melbourne. However, information on the Levels within this cohort is unavailable, preventing further disaggregation of this data. As MCRI does not establish salaries for this cohort, no other evidence is available to confirm if there is a gap in like-for-like work at RCH. Regarding Individual Contract Researchers, the small number of the group and the unique nature of their roles may not make salary benchmarking possible. However, the data available does not allow us to rule out potential Gender bias in pay in these roles—further investigation on this topic is outlined in our Action Plan.

Table 13: Females and males on Individual Contract, Research or Clinician Research 2022*

	Female	**Male**
	N=27	N=19
Age (mean(SD))	45.9 (7.6)	48.5 (9.7)
FTE	median= 0.4 (IQR 0.3-0.9)	median= 0.4 (IQR 0.3-0.5)
Base Salary FTE p.a.	median= $195,379.7 (IQR 157,147.4-276,135.0)	median= $289,275.5 (IQR 195,381.3-370,500.0)
Total Remuneration (including super) FTE p.a.	median= $214,917.7 (IQR 172,862.2-303,748.5)	median= $318,203.0 (IQR 214,919.5-407,550.0)

* SD is standard deviation, FTE is full-time equivalent, p.a is per annum, IQR is interquartile range.

An additional pay gap analysis (Figure 40) was conducted for MCRI's Senior Leadership (excluding Director Salary) as their roles do not fit neatly into employment classifications or may be identifiable. The 5-year pay-gap analysis (not pictured) flagged Level E as an area to monitor since the pay equity at this Level has dropped steadily from 100% (no difference) in 2018, 99% in 2019, 96% in 2020, 95% in 2021 and 93% in 2022. Similar to the Individual Contract (Researchers), the 2022 gap of 17% is most likely explained by the differing nature of the roles that make like-for-like comparisons difficult.

Figure 40: Pay Gap by Senior Leadership 2018-2022

	2018	2019	2020	2021	2022
Base Salary Organisational Gap	22%	25%	15%	21%	16%
Total Remuneration Organisational Gap	24%	27%	17%	22%	17%

—— Base Salary Organisational Gap —— Total Remuneration Organisational Gap
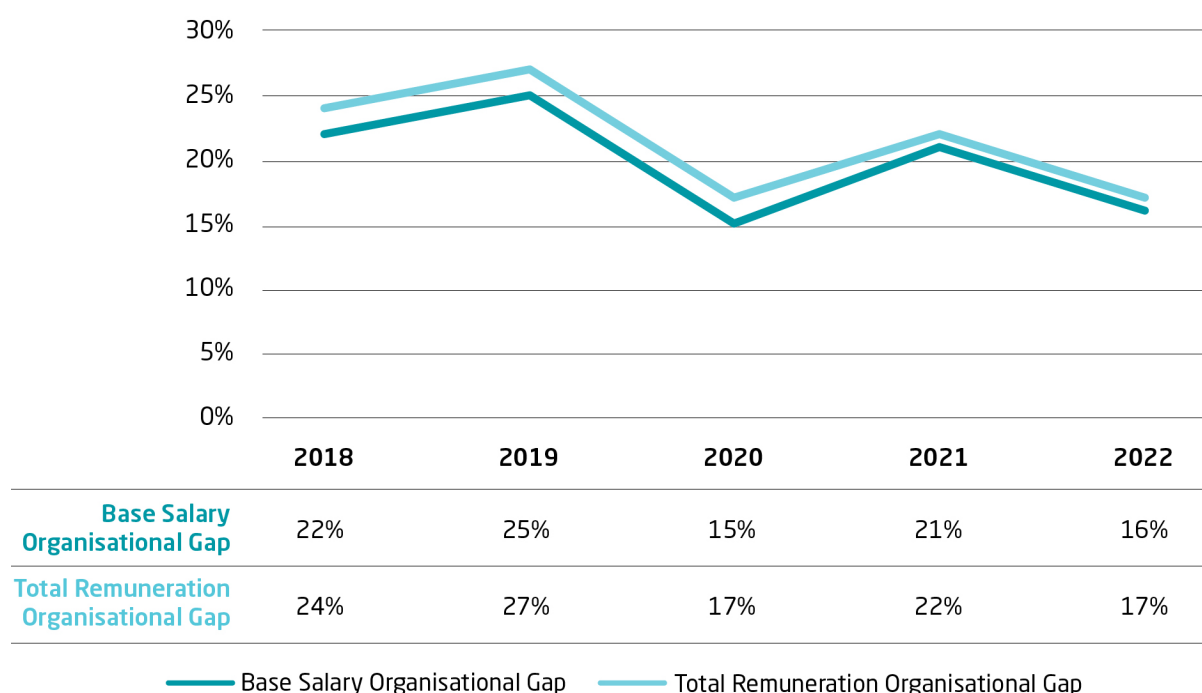
Action Information

Remuneration data indicates a discrepancy in pay for those on Individual Contracts; continuing to conduct regular reviews and investigation (Action 2.2.3 and 4.5.2.j) on this will enable MCRI to identify if this is a potential bias concern or due to the nature of individual roles. Considering MCRI will be expanding Employment Classifications and redefining our Job Family architecture (Action 3.5.5 above), establishing a remuneration framework (Action 3.5.3) will ensure that new classifications and career pathways are adequately remunerated and provide clarity for People Leaders to have impactful and productive Professional Development and remuneration discussions (Action 3.7.3.d).

Action 2.2.3: Continue to conduct annual or bi-annual salary and pay-equity reviews by Gender, career stage (Levels/steps) and "like-for-like" position to investigate any job value and pay scale anomalies (including bonuses), address any inequities found and report results to Director and Board.

Action 3.5.3: Establish a remuneration framework to define MCRI's governance system, purpose and strategy, and commitment to appropriately and consistently manage remuneration across MCRI. Within the framework, determine and establish measures to address the barriers to progression.

Action 3.7.3.d: Add additional training sessions for People Leaders before they are given leadership of a lab, Group, or team to ensure they are equipped to lead in an equitable, inclusive, and appropriate manner on combating unconscious bias in remuneration discussions.

3.2 Student Data

(i) Higher Degree by Research Students

MCRI is committed to educating tomorrow's researchers through hosting, mentoring and supervising Honours, Masters, and PhD students from Victorian, interstate and international universities. Data related to recruitment (applications, offer rates, enrolment rates), attrition and time taken to complete a Higher Degree by Research (HDR) for students at MCRI are not applicable. Students must enrol at a university before commencing a placement at MCRI, and relevant universities collect this data. MCRI does, however, collect information on headcount. From 2018-2022, there have been 380 students per year on average at MCRI, with a 75:25 female-to-male ratio (Figure 41).

Figure 41: Total HDR Students by Sex 2018-2022

	Graduate Student					Honours/Undergraduate					Summer Student					Total				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
Female	159	167	151	199	186	123	113	127	132	83	≤ 6	≤ 6	≤ 6	≤ 6	7	249	281	281	332	276
Male	50	59	58	64	48	29	49	47	37	33	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	80	109	106	104	84
Total	209	226	209	263	234	152	162	174	169	116	≤ 6	≤ 6	≤ 6	≤ 6	≤ 12	329	390	387	436	360
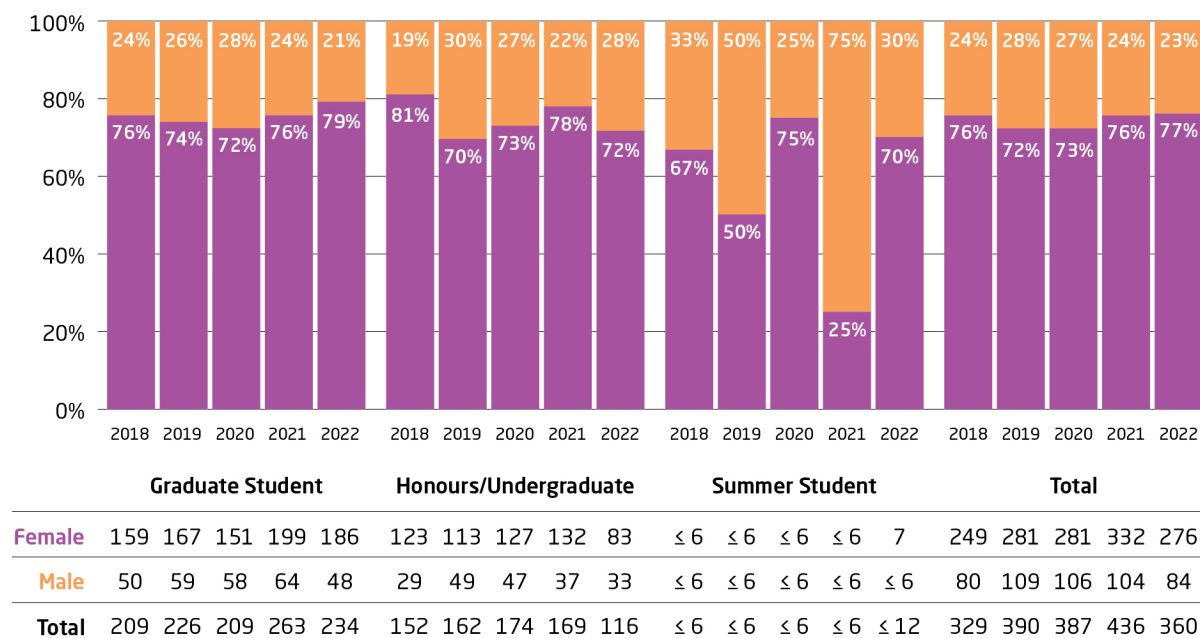
Across MCRI's Research Themes, students were most likely to be enrolled through the Clinical Sciences Theme, which hosted 37% of all students between 2018-2022 (Figure 42).

Figure 42: HDR Students by Theme 2018-2022

- 37% Clinical Sciences
- 2% Core Groups
- 10% Genetics
- 20% Infection and Immunity
- 17% Population Health
- 14% Stem Cell Biology
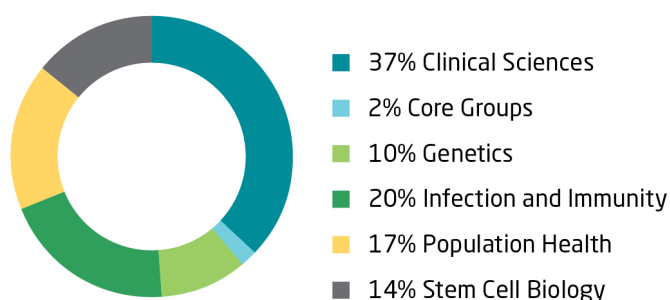
Table 14 details the headcount of students across MCRI's Research Themes by Sex, degree, age and study load in 2022. There were 254 full-time students and 96 part-time students during this period, with a 77:23 Sex ratio similar to the 2018-2022 average of 75:25. Older students are more likely to study part-time; this may be due to competing responsibilities and commitments. This assumption is supported by the trend in the increase of part-time students coinciding with the peak of Melbourne's COVID-19 lockdown measures in 2022 and 2021 (Figure 43).

Table 14: HDR Student Information 2022

	Count n (%)		Age (mean)		Age (median)	
Theme	**F**	**M**	**F**	**M**	**F**	**M**
Clinical Sciences	101 (75.9%)	32 (24.1%)	30.8	29.4	28.3	27.8
Core Groups	11 (78.6%)	≤ 6	27.0	24.5	27.2	24.5
Data Science	(0%)	(0%)	0	0	0	0
Genetics	29 (82.9%)	≤ 6	30.2	28.2	30.7	28.2
Infection and Immunity	59 (75.6%)	19 (24.4%)	29.9	26.7	30.2	24.9
Population Health	53 (82.8%)	11 (17.2%)	33.7	32.7	32.8	26.5
(Stem) Cell Biology	23 (63.9%)	13 (36.1%)	28.9	27.0	27.7	25.7
Degree and Study Load	**F**	**M**	**F**	**M**	**F**	**M**
PhD or Masters (FT)	139 (81.3%)	32 (18.7%)	32.1	28.3	30.2	27.5
PhD or Masters (PT)	47 (74.6%)	16 (25.4%)	34.8	35.3	34.8	32.8
Honours or Undergrad (FT)	56 (67.5%)	27 (32.5%)	25.1	25.8	22.9	24.0
Honours or Undergrad (PT)	27 (81.8%)	≤ 6	30.6	28.2	30.1	25.8
Summer Student	7 (70%)	≤ 6	22.3	21.9	22.0	19.7
Total	**276 (76.7%)**	**84 (23.3%)**	**30.8**	**28.6**	**29.3**	**26.6**

Figure 43: HDR Students by Part Time and Full Time Study Load 2018-2022

	Full Time PhD or Masters Student					Part Time PhD or Masters Student					Full Time Honours or Graduate Student					Part Time Honours or Undergraduate Student				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
Female	127	140	119	150	140	32	28	33	52	47	78	100	109	108	61	15	25	30	32	27
Male	38	48	40	45	32	12	11	18	19	16	28	42	39	27	29	≤ 6	8	11	13	≤ 6
Total	165	188	159	195	172	44	39	51	71	63	106	142	148	135	90	≤ 21	33	41	45	≤ 33

At the time of writing, four scholarships are specifically available to students at MCRI, outlined in Table 15. Students are also able to receive support from MCRI's Grants and Student Support offices when applying for external funding. Information on scholarship applicants and recipients is tracked manually, making further analysis by the SAT difficult, considering assumptions about scholarship recipient Sex and/or Gender would have to be made based on name. Consequently, no data related to scholarships is available.

Table 15: Scholarships Available to MCRI HDR Students

Scholarship	About	Amount	Application and/or Selection Process
Murdoch Children's Research Institute Honours Student Scholarships	Awarded to top-performing students during their Honours year.	$5,000	Students are automatically assessed based on prior academic achievement. The MCRI Scholarships and Travelling Fellowships Committee assesses applications.
Melbourne Children's Postgraduate Health Research Scholarships	Scholarships to support health professionals undertaking research on the Campus to pursue postgraduate research training to obtain a postgraduate degree. Available to graduates in the fields of medical, surgical, nursing, and allied health.	Support equivalent to NHMRC scholarship stipends.	Application considered on type of research to be conducted, track record, publications, conference attendance and awards relative to opportunity. The Postgraduate Health Research Scholarship Committee assesses applications.
Murdoch Children's Research Institute PhD Top Up Scholarships	"Top-Up" awards to current holders of PhD scholarships awarded by an external funding body that provides a stipend of equal or lesser value to that of a Research Training Program Scholarship stipend.	$5,000-$7,500 per annum pro-rata to supplement the recipient's standard stipend until the conclusion of the third year of candidature.	Application is considered based on research type, academic performance, research-related experience, peer-reviewed publications, conference attendance and awards relative to opportunity. The MCRI Scholarships and Travelling Fellowships Committee assesses applications.
Murdoch Children's Research Institute Student Conference Support Scheme	Funding to present a poster or oral presentation at a conference relevant to their research at an international, interstate or local conference or training program.	Maximum $1,250	Applicants must meet eligibility criteria and are assessed on the application's merit (CV, evidence or registration, evidence of presentation, quotes relevant to the application such as flights and accommodation). The MCRI Scholarships and Travelling Fellowships Committee assesses applications.

Action Information

Student data is limited and does not provide enough information for robust discussion or to identify potential issues. Action 1.5.2.q enables MCRI in the future to develop appropriate measures and supports for our students.

Action 1.5.2.q: Collaborate with relevant departments, themes and committees to establish, align and/or expand data collection methods to lessen data gaps and inconsistencies revealed during the self-assessment process, including student scholarship applications and recipients.

(ii) Visiting Students

Students who visit MCRI are typically selected by advisors through national or international collaborations to experience differing research environments or learn new techniques. Considering they are not at MCRI to complete coursework, they are not included in the collated student data.

4. Workplace Barriers

Recommended Word Count	**10,000**
Actual Word Count	**10,068**

4.1 Entry to the Workforce

(i) Recruitment

The Recruitment Policy and Procedure guides recruitment at MCRI and is in place to ensure that the best people are in the correct position. Recruitment is based on fairness, diversity, credibility, equal opportunities, merit, and career advancement for current staff. Data related to recruitment is not gathered consistently at MCRI; before 2021, 85% of applications had incomplete data.

Table 16: Number and rates of applications, interviews and offers by Sex 2021-2022

2021	F (% Total Cohort)	M (% Total Cohort)	Not Recorded	Total
Applications	3661 (70.6%)	1247 (24.0%)	280 (5.4%)	5188
Interviews	701 (76.9%)	166 (18.2%)	44 (4.8%)	911
Offers	460 (80.8%)	89 (15.6%)	20 (3.5%)	569
Acceptance	439 (81.4%)	82 (15.2%)	18 (3.3%)	539
2022				
Applications	1842 (66.4%)	814 (29.3%)	120 (4.3%)	2776
Interviews	466 (75.3%)	124 (20.0%)	29 (4.7%)	619
Offers	322 (78.9%)	67 (16.6%)	19 (47.7%)	408
Acceptance	312 (78.6%)	66 (16.6%)	19 (4.8%)	397

At first glance of Table 16, application and acceptance ratios align with MCRI's 80:20 Sex Ratio. However, when using the above to calculate the proportion of males progressing through the stages of recruitment, we see that there may be areas to address in shortlisting and interviewing. In 2022, only 15.2% of male applicants were interviewed compared to 25% of female applicants who were interviewed (in 2021, this was 13.3% of males vs 19% of females). Following this, 54% of male interviewees receive offers compared to 69.1% of female interviewees (53% vs 65% in 2021).

Conclusions as to why fewer males apply for roles at MCRI are challenging to reach, considering the limited data available. However, outside of a Diversity and Inclusion statement on all job postings encouraging all to apply, there are no strategies to actively recruit underrepresented groups and mitigate against potential bias through the recruitment process. Final recruitment decisions are made at the hiring manager's discretion, and there is little guidance related to accommodations, avoiding bias, considering GEDI or interviewing besides prepared lists of potential questions. The

above disadvantages males throughout the recruitment process and may impact females applying for senior positions; however, limited data regarding Theme and Level for open roles prevents further analysis. Improving data collection, establishing recruitment targets, and improving current recruitment procedures and practices will allow for more robust discussion and action in the future.

Action Information

Actions 1.5.1.c and 1.5.2.d will enable MCRI to better identify areas for improvement and potential barriers to recruitment at various levels by Gender. Establishing formal workplace targets and policies (Action 1.3.4 and 3.6.3) builds the accountability for relevant teams to develop the procedures and practices that drive diverse recruitment (3.6.4, 3.6.5, 3.6.6, 3.7.3.d).

Action 1.3.4: Set a target for increasing the representation of women at Research Levels C, D, and E Professional Levels 9+10, and Individual Contract Researchers and Clinician Researchers in line with MCRI's Sex/Gender ratio (to have this ratio be 60:40 women-to-men in 7 years), through the promotion of existing women to this Level as a first option and recruitment where needed and/or identified.

Action 1.5.1.c: Collaborate with the systems working group to upgrade the HRIS and relevant backend systems to report on GEDI across career life cycle, including recruitment, application, shortlisting, interview, offers, promotion application/success.

Action 1.5.2.d: Collaborate with relevant departments, themes and committees to establish, align and/or expand data collection methods to lessen data gaps and inconsistencies related to Gender differences over the recruitment cycle for senior positions.

Action 3.6.2: Co-design specific measures for recruiting Indigenous Australians in a culturally safe manner with Aboriginal and/or Torres Strait Islander staff at MCRI.

Action 3.6.3: Target recruitment for men at Levels A/B, culturally and racially marginalised (CARM) candidates or women where they are underrepresented in shortlisting or interviewing.

Action 3.6.4: Amend current procedures related to de-identification, shortlisting, selection panels, data collection and non-biased interviewing.

Action 3.6.5: Upgrade job descriptions, advertisements, templates, and recruitment materials to remove Gender bias, include inclusive imagery and highlight MCRI's commitment to GEDI, family-friendly practices and support for Gender-diverse applicants.

Action 3.6.6: Create guidelines for external search firms on MCRI's commitment to GEDI and consideration of GEDI criteria for recruitment.

Action 3.7.3.d: Develop training sessions for People Leaders on combatting unconscious bias in recruitment.

(ii) Induction

During the COVID-19 Pandemic, MCRI's P&C Team concluded that our Induction process was no longer fit for purpose and did not thoroughly induct our people into our culture, systems and processes. Before 2020, induction was a three-month program consisting of a campus tour, an overview of electronic systems, mandatory compliance training, morning tea for new starters, and a meeting between the new start and their People Leader to provide an overview of MCRI, performance expectations and standards. MCRI only has data related to the completion of compliance training, which currently sits at 85%. This is the only historical data on induction because there has yet to be a formal monitoring evaluation and learning (MEL) framework to track onboarding and gather feedback. Informal feedback suggested that this process was too short and broad to meaningfully make new starters feel welcomed and prepared to work at MCRI, especially if they had People Leaders who lacked the capacity and/or interest to properly onboard new team members.

P&C launched a new Induction Roadmap in mid-2022 to centre people's inclusion at MCRI. The induction process is now a 12-month journey with seven critical markers and surveys at the one-, six- and 12-month mark (Figure 44). This multi-modal program allows for more comprehensive onboarding and multiple pathways to establish connections for inclusion. Given the recent launch of the Induction Roadmap, no data is available to enable the P&C team to assess the program's efficacy.

Day 1

Welcome to MCRI and VCGS!
Understand who we are, our history, your team and ensure your technology is set up correctly.

Day 2

Let's get you inducted
Understand your role and get connected to our strategy and our purpose. Familiarise yourself with staff benefits and entitlements.

Month 1

Understand and connect with MCRI and VCGS
Understand our core organisation. Connect with P&C- understand development opportunities, programs available and the support we provide.

Month 3

Check In
Check in with your People Leader and explore the organisation in more detail.

End of Probation
Connect with your People Leader to provide information on your experience so far and understand what the next steps are.

Month 6

Networking Series
Attend a networking event to meet other colleagues in the organisation.

Month 9

End of Induction
Connect with your People Leader and other colleagues to share your experience. Complete the Induction survey.

Month 12

Following the first year of the Induction Roadmap, MCRI will apply learnings from the self-assessment and induction surveys to improve this program and ensure People Leaders are trained and GEDI is embedded across the new starter journey.

> **Action Information**
>
> Considering all the changes our SAGE Action Plan will deliver, Action 3.8.3 will ensure that the induction process is updated to reflect the positive changes and increased clarity to Policies and Procedures, Career Progression, Professional Development and MCRI's Workplace Culture over time.

> **Action 3.8.3:** Use SAGE feedback on the Induction process to modify and adapt MCRI's Induction and Onboarding Journey to be multi-modal and comprehensive to develop a sense of belonging and acceptance within the organisation for new and returning staff. This includes accessible and inclusive language outlining PDF expectations, GEDI policies committee information, assigning a buddy and/or mentor and agreeing to career goals and KPIs.

(iii) Support Given to PhD Students for Academic and/or Research Career Progression

MCRI provides administrative, mentoring, development and financial support opportunities to all students undertaking research or learning at MCRI. Administrative support includes access to the Student Admin Team, which facilitates pre-screening, onboarding, coordination, supervision, and committee membership support for newcomers and students with questions or queries. Mentoring and Development supports include:

- the Research Student Association (RSA),
- an RSA-specific mentoring program and access to MCRI's broader mentoring scheme,
- training specific for HDR students via host institutions where they are enrolled,
- graduate and campus training programs.

Students also have financial support opportunities, including prizes, awards and grants such as scholarship funding as outlined in Table 15.

Feedback related to the above is limited as attempts to arrange focus groups or conversations with the members of the RSA did not come to fruition, the GEDI Survey comments are sparse, and the Student Support Team does not regularly seek feedback. However, those who did share feedback suggested that there is "a lack of student support within [MCRI] outside of a student-only network[4]" and that more tailored professional support is needed, such as a "student support officer[5]," "collaboration between RSA, Philanthropy and Communications[6]," "increased networking opportunities[7]," "clearer career pathways[8]," and "supervision discussions [including] future career goals and skills[9]."

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[4] GEDI Survey Comment
[5] GEDI Survey Comment
[6] GEDI Survey Comment
[7] GEDI Survey Comment
[8] GEDI Survey Comment
[9] GEDI Survey Comment

MCRI will address these concerns through institute work related to the Career Pathways and Professional Development Priority Areas outlined in Sections 4.2.i, 4.2.iv and 4.2.v.

4.2 Developing and Progressing the Workforce

(i) Professional Development

Several opportunities are available to all staff to further their professional development, including training and workshops organised by the MCRI P&C Learning and Development (L&D) Team. As of January 2023, the L&D Team offer seven programs to support professional development outlined in Table 17. These have been developed in consultation with key stakeholders and will be evaluated and improved based on an updated MEL framework. Additional campus-wide professional development opportunities are available to MCRI staff through the Grants Office, the Melbourne Children's Campus and the University of Melbourne, including Supervisor Training, NHMRC Grants/Fellowship Workshops, and Clinical Research Development Office/Clinical Epidemiology Biostatistics Unit training. All opportunities are listed and advertised on the intranet with varying results. Support and encouragement depend on People Leaders who may need to be made aware of the options available and their benefits.

Table 17: L&D Professional Development Programs and Eligibility

Program	Objective	Participation Criteria
Leadership Aspirations	Stream 1 of *Leadership Pathways Program* for emerging leaders and those who have leadership aspirations to gain insight, knowledge on key leadership skills.	People Leader Sponsorship
Leading Self and Others to Success	Stream 2 of *Leadership Pathways Program* for those who have People Leader and/or Line Management responsibilities to foster emotionally intelligent leadership principles and practices that will build and sustain flourishing teams and lead performance excellence through effective performance management practices.	For All People Leaders through self-nomination
Leading for Impact	Stream 3 of *Leadership Pathways Program* for established leaders to gain further insight into their leadership style and approach to enhance leadership presence and impact to cultivate positive team culture and engagement.	For Group and Senior Leaders through self-nomination
DiSC Workshop	Team workshops to build flourishing workplace relationships based on DiSC model where participants receive personalised insights that deepen their understanding of self and others.	Team self-nomination
Online Learning	E-learn modules on Change and Resilience that have practical solutions and guidance on navigating change.	Self-Access available to all staff
Coaching	1:1 conversations to help individuals unlock their potential and deliver change within their own behaviour and across the organisation through insights on drivers and effective leadership.	Available to Team Leader/Equivalent Level Upwards through Theme Director Nomination
Beyond Mentoring	10-month program to build capability to discuss career development, goals and aspirations of both mentees and mentors through facilitated group coaching and peer group networking.	Open to all staff and 3rd year PhD students through self-nomination

Campus-wide training is hosted in partnership with various entities (such as the University of Melbourne) and is open attendance, so no accurate data related to uptake rates is available. Further, L&D workshops have had many iterations across the self-assessment period due to staffing changes. As a result, the data available is inconsistent and incomplete. From the little data available, there have been a total of 565 people who have utilised L&D Programming from 2018-2022. 353 in Learning Workshops (Theme Breakdown outlined in Table 18) and 212 who participated in MCRI's Mentoring, Coaching and DiSC programs (no Theme information available). **Action 1.5.2.d** addresses these data concerns.

Table 18: Learning Workshop Attendees 2018-2022 by Theme

Theme	Learning Workshop Attendees
Clinical Sciences	64
Genetics	70
Population Health	79
Stem Cell Biology	36
Growth & Innovation and Operations	63

Action Information

Although data on program attendance is limited, MCRI values the importance of Professional Development for staff wellbeing, progression, and retention. Considering workload concerns explored in Section 4.2.iii, establishing protected time for Professional Development (Action 4.1.3.d) will enable more people to attend in-house offerings flexibly without workload pressure.

Action 4.1.3.d: Create protected time for professional development for all (even those with high workloads, fractional and/or dual appointments) to encourage a culture of continuous education and learning.

It is difficult to evaluate the efficacy of MCRI's L&D workshops considering the many iterations of programming across the self-assessment period, COVID-19 lockdowns, and insufficient data collection. The L&D Team has observed that our people want more development opportunities based on comments made during programs and increased sign-up rates in 2022 and 2023. However, formal feedback still needs to be collected. It is clear from Survey Comments, Career Conversations and Focus Groups that current iterations of professional development programs at MCRI, while helpful, have been limited and require expanding the offerings in-house and support for external opportunities. Comments in the survey described the leadership and mentoring programs as "helpful," "encouraging", and "a great start," however, 60 comments have specifically requested expanding opportunities to make them more relevant for their work. Career Conversation participants further confirmed that support to undertake professional development opportunities wholly depends on who your People Leader is, particularly if they see the program's benefit and relevance to their work. This dynamic creates uncertainty for those wanting to pursue professional development but needing more support, information, or budget. Lastly, Focus Group participants expressed that better access to professional opportunities through protected time, increased funding for external opportunities, and explicit responsibility for People Leaders to consider and encourage the professional development of their people in yearly reviews would support their career development at MCRI.

The above suggests that MCRI's insufficient processes related to career development leave people reliant on People Leader knowledge and support, creating a system vulnerable to bias and resulting in uneven access to professional development for our people. For this reason, Professional Development has been identified as a key priority area for MCRI to ensure all our people have the opportunity to achieve their best and develop their skills.

Priority Area: Improve our Professional Development opportunities to support our people to achieve their best and develop their skills.

Action Information

The support people receive for Professional Development varies based on People Leadership. By creating accountabilities and formal policies or expected practices for our People Leaders we can ensure that Professional Development is always on the agenda and an expected deliverable (Actions 3.8.1.l, 4.4.5 and 5.4.2). Further, by building the expectation that all staff should continuously learn (Action 4.1.2.b) the L&D team can begin to design and commission training appropriate for our diverse professional staff (Actions 3.7.6, 3.7.8 and 7.2.2). Actions 3.7.5, 4.5.2.a, 4.5.2.b will enable us to continue monitoring staff professional development needs, the efficacy of our programs and adjust as needed.

Action 3.7.5: Develop a feedback loop mechanism that seeks staff opinion and suggestions on improving professional development at MCRI and tailoring opportunities for our workforce.

Action 3.7.6: Assess professional development online tools that provide a range of courses for selection that people can access.

Action 3.7.8: Seek input and advice from other organisations with successful professional development programs and frameworks and explore opportunities for cross-industry mentoring with other institutions/universities or partnerships with corporations, volunteer organisations or other institutions to share training and resources.

Action 3.8.1.l: Encourage leaders to include $2,000 in their yearly budget per team member per annum to support their professional development.

Action 4.1.2.b: Develop a Behavioural Framework to reinforce expectations on investing in Professional Development activities for all team members for People Leaders.

Action 4.4.5: Build the capacity (or expand authority) of People Leaders to support the professional development of their teams and address staff requirements individually as appropriate for their needs.

Action 4.5.2.a: Conduct further investigation on staff expectations related to professional development for researchers compared to professionals.

Action 4.5.2.b: Conduct further investigation on the professional development needs of early-mid career researchers and the resources that would be most useful to this cohort.

Action 5.4.2: Develop an awareness strategy that engages leaders in speaking about the importance of professional development in their career journeys.

Action 7.2.2: Expand the delivery of internal training and support based on training analysis that includes professional development and/or upskilling and provide Gender-equitable access to staff at all Levels with clear criteria for self-nominating.

Varying support for professional development similarly impacts Committee Membership at MCRI. Committees open to all staff (Table 19) have low engagement, with 59% of GEDI Survey respondents noting that they do not participate in internal committees. Low membership results from poor communication, lack of clarity related to committee remit and limited support/encouragement from People Leaders. Many GEDI Survey participants noted that they "did not know where to go and find out what committees [to] join[10]." Outside of a remark about committees in induction, our people are left to find information on their own, resulting in the assumption that committee roles are only open to some. Focus Group findings concluded that committees are considered external to people's roles. Focus Groups also note that without clear terms of reference outlining decision-making power and recognition for committee work, members feel frustration related to the amount of time they spend doing "lip service work that has little power to change anything[11]," or "complex and skilled work that should be paid[12]," and has not been recognised or valued for promotion. Further, mixed comments about encouragement to join committees indicate that leadership support is critical to people's participation at MCRI. Experiences ranged from those who have support to join committees they are passionate about to those who feel they can only join research committees and those who are actively discouraged from involvement because "committee work does not get papers written[13]."

The committees outlined in Table 20 are open to only some staff and act more in line with governing or decision-making bodies. MCRI's Executive or Senior Management Team may identify staff within their Themes to join a committee based on their expertise and skills relevant to the committee's remit and terms of reference. The lack of clarity related to membership of these committees has most likely created some confusion related to engagement with all staff internal committees. However, it is essential to note that this method of selecting members may be biased and potentially overlook qualified persons who have not made connections or do not have leaders supporting them to step into these spaces as a professional development opportunity. Other intersecting committees on the Melbourne Children's campus may include MCRI staff. However, membership information is unavailable, and similar issues may exist in these groups.

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[10] GEDI Survey Comment
[11] Focus Group Comment
[12] Focus Group Comment
[13] GEDI Survey Comment

Table 19: MCRI Internal Committees

Committee	Purpose
Animal User Group	Discuss issues raised by the Mouse Advisory Committee and the Disease Model Unit.
Diversity and Inclusion Committee	The Diversity & Inclusion Committee aims to foster an inclusive, accessible and culturally responsive workplace that embraces and celebrates individual differences through advocacy and education, promoting equal opportunities for all in the MCRI community.
Eat.Move.Relax Committee	The Eat.Move.Relax Committee's focus is to provide information and coordinate activities and events for staff and students to assist them with living a healthy life and encourage healthier lifestyle choices across all areas, from nutrition exercise to relaxation.
Imaging User Group	The Imaging User Group is a forum for discussing all aspects of microscopy, imaging and image analysis.
MCRI Postdoc Society	The Postdocs Society represents all staff with a PhD (postdocs) across all themes. They aim to provide a voice for all postdocs by sharing news, feedback, grant & seminar information, and assist in delivering new networking & career development opportunities and training for members.
Research Student Association (RSA)	The RSA provides opportunities to connect with students and research leaders across MCRI and the broader Melbourne Children's campus. The RSA offers resources, support, and advice to all students (including postgrads and honours students) on campus. All students who study on the children's campus are welcome to join the RSA and participate in all activities. The in-hour events range from monthly free coffee mornings and networking events to professional development workshops and seminars. They also run after-hours events to allow students to unwind and network in a less formal environment.
STAR Network	The Society of Team Members and Associates of Research (STAR) aims to bring together all research support staff and anyone who does not fit the criteria of a Group leader, post-doc or student across the campus. They aim to provide support, career development and networking opportunities and host social events tailored to support our staff.
Sustainability Committee	The Sustainability Committee recognises the importance of an environment that supports a healthier future for all children. The Committee works with EHS and other departments to support environmental initiatives, encourage new ideas, and empower staff to consider sustainability in their daily lives.

Table 20: Decision-Making Internal Committees at MCRI

Committee	Purpose
Animal Ethics Committee	Approve ethical research using live non-human vertebrates and cephalopods and promote best practices in using animals for scientific purposes, focusing on the 3R's principles- Replacement, Reduction and Refinement- to safeguard both the animals and researchers.
Biospecimen Advisory Committee	Makes recommendations to the MCRI Executive for improvements related to biospecimen collection, processing, storage and usage procedures at the Melbourne Children's campus.
Clinician-Scientist Fellowship Committee	Assesses applications for part-salary support for RCH health professionals involved in the clinical care of children in the early to mid-stages of their research career to support their research independence.
Health and Safety Sub-Committee	Elected Health and Safety Representatives of designated working groups with similar workplace health and safety interests and conditions to discuss safety concerns, consult with staff and recommend changes to the Environment, Health and Safety Office.
Institutional Biosafety Committee	Assesses and manages all work for the Office of the Gene Technology Regulator.
Mouse Advisory Committee	Advise the Executive on operational issues relevant to the user community.
Performance Evaluation Committee	The Performance Evaluation Committee (PEC) was established as an advisory Committee to the MCRI Director and Executive Committee. Its role is to review annual research performance data using the MCRI Performance Evaluation Framework, assign a research performance score for each Theme to allocate discretionary funding, and provide feedback to Themes on research performance.
Postgraduate Health Research Scholarship Committee	Considers applications from health professionals undertaking research training on the Melbourne Children's Campus to obtain a PhD.
Scholarships and Travelling Fellowship Committee	The Top Up Scholarship Committee considers applications for "top up" awards to PhD and MD students on the Royal Children's Hospital campus who are current holders of APA and MRS scholarships (or university equivalent) to supplement their standard stipend

Concerns related to appraisal, review and promotion (outlined in sections 4.2.iv and 4.2.v) highlight the need for formal recognition for committee participation at MCRI. Town Halls celebrate committee membership and accomplishments. However, the extent to which someone has grown professionally through committees is at the discretion of People Leaders to acknowledge, recognise and reward. This ad-hoc support has resulted in the perception that committee members are

predominately women who are passionate about a cause beyond career motivation[14]. Nevertheless, the Gender makeup of general committees combined appears to align with MCRI's population according to Table 21 (80:20 women-to-men). However, this data is incomplete as not all members completed the committee membership survey, as such, conclusions on the Gender representation on 'prestigious' or 'more acknowledged' committees cannot be made. Of the 26 women who responded, 5 (19%) reported being the committee chair, and 4 (15%) reported being a committee secretary. Of the 7 men, 2 (29%) reported being the committee chair, and none reported being a secretary.

Table 21: General Committee Membership at MCRI

How do you describe your Gender?	
Woman	26 (76.5%)
Man	7 (20.6%)
Non-binary	≤ 6
Do you identify as Aboriginal and/or Torres Strait Islander?	
No	34 (100.0%)
How would you describe your cultural background?*	
Anglo-European	10 (29.4%)
Australian (excl. Aboriginal and/or Torres Strait Islander)	18 (52.9%)
New Zealander (excl. Māori)	≤ 6
North American	≤ 6
Northern and/or Western European (excl. Anglo-European)	≤ 6
South and/or Central American and/or Caribbean Islander	≤ 6
South-East Asian	≤ 6
Southern and/or Eastern European	≤ 6
East Asian	≤ 6
North African and/or Middle Eastern	≤ 6
Other cultural/ethnic group	≤ 6

[14] Focus Group conclusion.

Are you a fluent English speaker?	
Yes, English is my first language	27 (79.4%)
Yes, but English is not my first language	7 (20.6%)
Do you consider yourself to have a chronic (or long-term) physical and/or mental health condition and/or disability?	
No	27 (79.4%)
Prefer not to answer	≤ 6
Yes	≤ 6
How do you describe your sexual orientation?	
Bisexual	≤ 6
Gay or Lesbian	≤ 6
Prefer not to answer	≤ 6
Queer	≤ 6
Heterosexual	27 (79.4%)
How would you describe your position?	
Postdoctoral and/or Early-To-Mid Career Researcher	9 (26.5%)
Professional and Administrative Staff	8 (23.5%)
Research Staff	≤ 6
Senior Leader	≤ 6
Student	8 (23.5%)
What is your current role classified as?	
Casual (irregular hours weekly)	≤ 6
Full-Time (at least 35 hours per week)	22 (66.7%)
Part-Time (less than 35 hours per week)	9 (27.3%)

What Theme or Department do you belong to?	
Clinical Sciences	≤ 6
Core Groups	≤ 6
GenV	≤ 6
Genetics	9 (28.1%)
Infection and Immunity	≤ 6
Office of Research	≤ 6
Operations	≤ 6
Population Health	≤ 6
Stem Cell Biology	≤ 6
GenV & Population Health	≤ 6
Number of committees involved with:	
No reported	15 (44.1%)
1	14 (41.2%)
2	≤ 6
3	≤ 6
Are you the Chair of this Committee or Governing Body?	
No	27 (79.4%)
Yes	7 (20.6%)
Are you the Secretary of this Committee or Governing Body?	
No	29 (85.3%)
Yes	≤ 6
Lived experiences that committee members identified with*	
Organisational Leadership and Decision-Making	14
Gender Equity, Diversity and Inclusion Work Experience	≤ 6
Experience of barriers impacting GEDI in higher education and research sector	9

* Multiple response available, percentage sums to >100

Without People Leader support from all Levels, there is a risk that institutionally important work will fall to women despite their time poverty (explored in Section 4.2.iii and 4.4.iii). This risk is worrisome considering there is currently little weighting for committee work concerning promotion and career progression and that women on part-time status or those with "less" research output are less likely to be promoted. Enabling People Leadership support and amending our processes to allow for this is central to our Action Plan.

Action Information

To ensure that People Leaders lead consistently and equitably at MCRI, we must create clarity of expectation and responsibilities through Polices, Procedures, Processes and Programs (Actions 4.1.2.f, 4.1.3.c and 4.2.2.a) so there is less opportunity for biased behaviours that may disadvantage someone from gaining skills through committee and service work. Actions 4.3.3 and 7.43 will enable us to use committee involvement towards our career progression and diversity goals. Actions 3.8.3 and 3.9.5 will encourage more people to participate in committees and professional development opportunities.

Action 3.8.3: Modify and adapt MCRI's Induction and Onboarding Journey to include committee information.

Action 3.9.5: Contribute to the cost of women's only coaching and or leadership programs (such as Women in Science Parkville Precint (WISPP) or establish an in-house program to improve the representation of women on senior committees and senior roles. This can include a shadowing scheme that matches women researchers with senior leaders in medical research, academia and industry.

Action 4.1.2.f: Develop a Behavioural Framework that will reinforce expectations related to service, organisational citizenship and committee participation.

Action 4.1.3.c: Develop expectations of People Leaders at every Level by providing examples of best practices for protecting time for committee involvement as a formal expectation for all staff.

Action 4.2.2.a: Modify and adapt MCRI's promotion process to ensure it considers committee participation.

Action 4.3.3: Review and capture committee workload to understand to what extent participation and engagement should be weighed for promotion.

Action 7.4.3: Undertake a Gender equity review of all committee membership and develop a strategy to implement 40:40:20 Gender targets for membership, specifically recruit people from migrant and refugee backgrounds, LGBTQIA+ and Aboriginal and Torres Strait Islander members and enable rotating leadership positions.

(ii) Support Offered with Applying for Research Funding and Demonstrating Research Impact

An essential function of MCRI's Grants Office is to support our researchers in finding, developing, writing, reviewing, and submitting research funding applications. The wide array of supports available are in Table 22.

Table 22: MCRI Grants Office Support Available

Grants Office Support
• Publishing opportunities on a Grants Calendar
• Providing support and advice in application preparation
• Grant writing seminars
• Grant pitch sessions
• Reviewing and amending applications in line with grant requirements
• Submitting applications
• Guiding researchers through rebuttals or interviews
• Notifying researchers about funding outcomes and supporting grant acceptance

This support is primarily available for National Health and Medical Research Council (NHMRC) and Medical Research Future Fund (MRFF) Grants; however, researchers can request support from the Grant's Office for other forms of funding, including external grants, fellowships and philanthropic funding. Figures 46 and 47 show application and success rates for NHMRC[15], MRFF and external grants from 2017-2021.

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[15] Includes Investigator, Ideas and all other grant schemes

*Figure 45: NHMRC Grant Application and Success Rates 2017-2021**
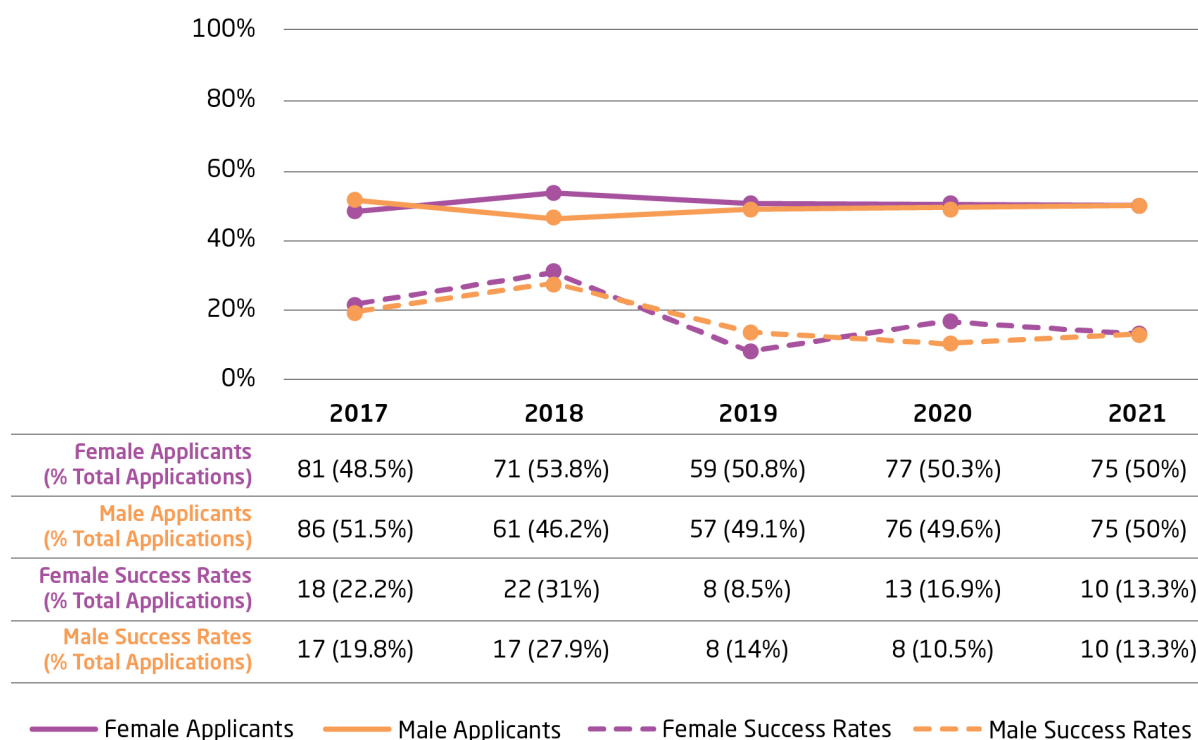
	2017	2018	2019	2020	2021
Female Applicants (% Total Applications)	81 (48.5%)	71 (53.8%)	59 (50.8%)	77 (50.3%)	75 (50%)
Male Applicants (% Total Applications)	86 (51.5%)	61 (46.2%)	57 (49.1%)	76 (49.6%)	75 (50%)
Female Success Rates (% Total Applications)	18 (22.2%)	22 (31%)	8 (8.5%)	13 (16.9%)	10 (13.3%)
Male Success Rates (% Total Applications)	17 (19.8%)	17 (27.9%)	8 (14%)	8 (10.5%)	10 (13.3%)

Female Applicants — Male Applicants — Female Success Rates — Male Success Rates

Due to capacity limits, MCRI's Grant Office was only able to provide data up until 2021. Data is presented from 2017 to evaluate trends over 5 years.

Figure 46: MRFF Grant Application and Success Rates
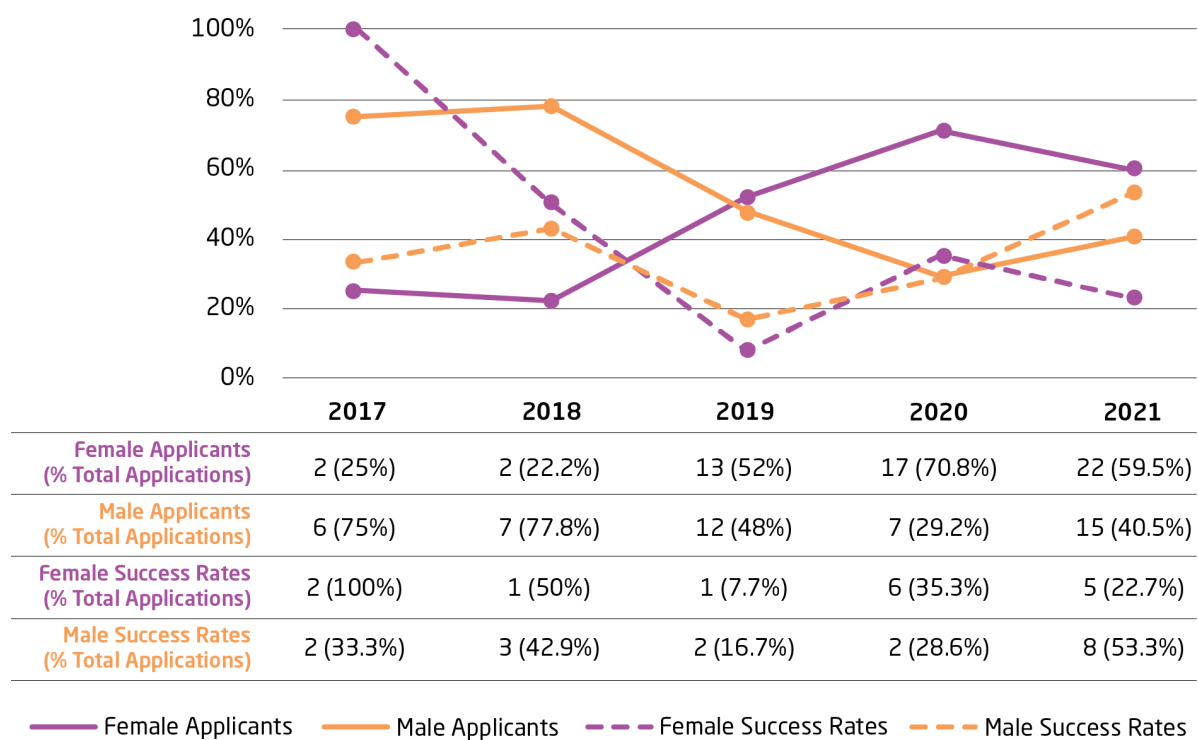
	2017	2018	2019	2020	2021
Female Applicants (% Total Applications)	2 (25%)	2 (22.2%)	13 (52%)	17 (70.8%)	22 (59.5%)
Male Applicants (% Total Applications)	6 (75%)	7 (77.8%)	12 (48%)	7 (29.2%)	15 (40.5%)
Female Success Rates (% Total Applications)	2 (100%)	1 (50%)	1 (7.7%)	6 (35.3%)	5 (22.7%)
Male Success Rates (% Total Applications)	2 (33.3%)	3 (42.9%)	2 (16.7%)	2 (28.6%)	8 (53.3%)

Female Applicants — Male Applicants — Female Success Rates — Male Success Rates

Due to capacity limits, MCRI's Grant Office was only able to provide data up until 2021. Data is presented from 2017 to evaluate trends over 5 years.

Figure 47: External Grant Application and Success Rates 2017-2021*
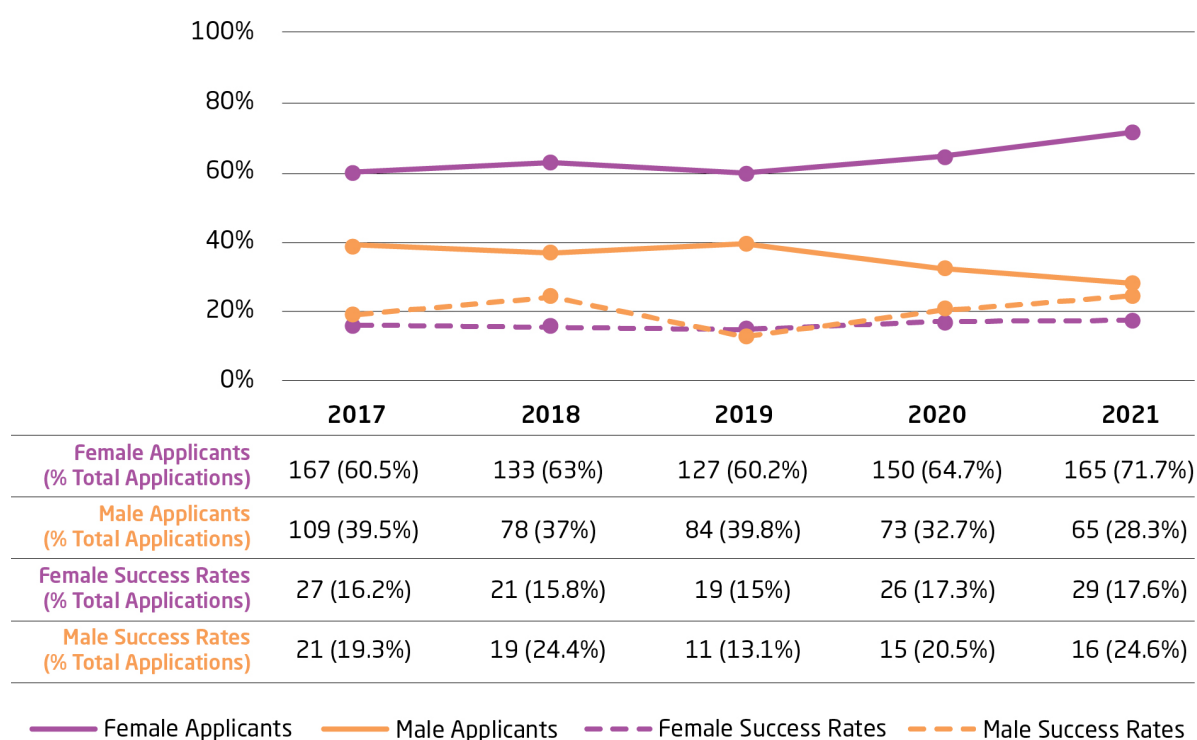
	2017	2018	2019	2020	2021
Female Applicants (% Total Applications)	167 (60.5%)	133 (63%)	127 (60.2%)	150 (64.7%)	165 (71.7%)
Male Applicants (% Total Applications)	109 (39.5%)	78 (37%)	84 (39.8%)	73 (32.7%)	65 (28.3%)
Female Success Rates (% Total Applications)	27 (16.2%)	21 (15.8%)	19 (15%)	26 (17.3%)	29 (17.6%)
Male Success Rates (% Total Applications)	21 (19.3%)	19 (24.4%)	11 (13.1%)	15 (20.5%)	16 (24.6%)

—— Female Applicants ——— Male Applicants – – – Female Success Rates – – – Male Success Rates

*Due to capacity limits, MCRI's Grant Office was only able to provide data up until 2021. Data is presented from 2017 to evaluate trends over 5 years.

Figure 45, depicting NHMRC grant applications, does not reflect the overall Sex ratio of MCRI (80:20). However, the success rate is generally equal between females and males. In Figure 46, the wide variability across application and success rates may be due to small numbers in the early years of the relatively new MRFF grant scheme. However, females in more recent years have shown a trend toward reduced success rates. It is unclear if this results from a lack of internal support from MCRI or the sector's competitiveness. Females comprise a larger portion of external grant applicants (Figure 47) but have slightly lower success rates than men. Again, whether this is an internal barrier and/or external competition must be clarified. However, our Action Plan makes an effort to create more support to assist in these instances and understand if part-time and full-time status may influence success rates.

Action Information

Actions 1.5.2 and 4.5.2.i will enable MCRI to understand the root cause of unequal grant success rates and build programs and supports to address them through Action 7.2.4. Considering that many of the Professional Development opportunities in Table 17 require People Leader support and reflections in Section 4.4.vi suggest that there is a self-fulfilling cycle of "successful" researchers who receive additional support and are therefore more likely to become even more successful, creating targeted programming for those who have *not* been successful in Action 7.2.4 will provide an opportunity to break the cycle that acts as a barrier to Professional Development and Career Pathway Progression.

Action 1.5.2: Collaborate with relevant departments, themes, and committees to establish, align and/or expand data collection methods to lessen data gaps and inconsistencies revealed during the self-assessment process.

Action 4.5.2.i: Conduct further investigation and seek feedback to develop recommendations and change MCRI's foundational GEDI work to address the barriers to research funding success.

Action 7.2.4: Develop targeted coaching and/or mentoring to positively support and uplift those who have not succeeded in grants or near-miss grants.

As shown in Table 23, MCRI evaluates research impact through various mechanisms that consider different impact drivers.

Table 23: MCRI's Research Impact Assessment Mechanisms

Research Impact Assessment
• International and Other Strategic Reviews
• Group and Theme Reviews
• Flagship Reviews
• Annual Performance Evaluation Consultation
• Talent Matrix
• Acquittal Processes through Philanthropy and the Royal Children's Hospital Foundation
• Flagships, initiatives, and other research Groups who have developed impact pathways with indicators

MCRI is currently co-developing an aligned and integrated model for assessing research impact, based on the Association of Australian Medical Research Institutes' (AAMRI) Research Impact Framework. As such, research impact data has not been collected to date and is unavailable. Action 1.5.2 addresses data limitations, and MCRI's Impact by Design Program, established in 2018, supports culture, capacity, competency and collaboration toward knowledge translation and impact, including data collection. The Impact by Design Program provides the support, resources and training researchers need to consider and plan for knowledge translation and research impact at the inception of a project (rather than retrospectively) and encourages collaboration for better research. Table 24 outlines the features of the Impact by Design program. The Head of Research Impact and Consumer Involvement has been a key stakeholder in the development of MCRI's Action Plan, current and planned actions will coordinate with the Impact by Design program for actions related to career development and progression.

Table 24: MCRI Impact by Design Program Supports

Impact by Design Program

• Interactive Webinars on:
    ○ Understanding Impact
    ○ Planning for Impact
    ○ Stakeholder engagement
    ○ Co-Design
    ○ Communication and Dissemination
    ○ Impact Assessment

• Impact Hub that has a range of Tools, Resources and Templates
• Grant and Publication Support
• Training, Coaching and Mentoring
• Support to establish Partnerships
• Access to campus Knowledge Translation and Impact Community of Practice for information sharing and learning
• Information and collaboration opportunities from the MCRI Impact Working Group
• Direct Support for Researchers and Professional Teams
• Leadership guidance to AAMRI
• Access to AAMRI Impact Working Group presentations and collaboration opportunities

(iii) Workload

Workload allocation is at the discretion of People Leaders to meet the requirements of their grant, project and key responsibilities. There is no Institutional guidance or framework to assist People Leaders in this decision-making, resulting in suboptimal feedback and mixed experiences related to the workload from our people. Table 25 provides an overview of the most significant results from the GEDI Survey[16].

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[16] The Gender Equity, Diversity and Inclusion Survey was conducted on CultureAmp. CultureAmp survey scores are reported as percentages showing the percentage of people who agreed/were neutral/disagreed with a question out of all people who answered the question. By default, the favourable score is shown, meaning people who chose a favourable response like 'Strongly agree' or 'Agree'. Scores are rounded to the nearest whole number (using only one decimal place to decide the rounding), except for neutral scores, where neutral is calculated as 100% minus the favourable % and unfavourable %. This ensures that scores always add up to 100%, rather than have rounding cause a total of all 3 scores to be more than 100%.

Table 25: GEDI Survey Results 2022, Workload Questions by Group and People Leader Spread

Survey Question	Overall Percentage Score	Population	Gender Spread (Gender: Score)	Group Spread (Lowest Score to Highest Score)	People Leader Spread (Lowest Score to Highest Score)
The expected workload in my organisation makes it easy to balance work and home responsibilities	61%	865	7% Spread (Woman or Female: 62 Man or Male: 56 Non-Binary: 63)	51% Spread (38- 89)	69% Spread (17 -86)
I feel comfortable saying no to higher workload if it is outside my capacity or responsibility	55%	829	33% Spread (Woman or Female: 53 Man or Male: 61 Non-Binary: 86)	54% Spread (29-83)	66% Spread (17-83)
Workload allocation is fair and transparent	52%	841	33% Spread (Woman or Female: 49 Man or Male: 62 Non-Binary: 29)	71% Spread (17-88)	66% Spread (17-83)
Administrative tasks that don't have a specific owner (e.g., taking notes in meetings, scheduling events, cleaning up shared space) are fairly divided at MCRI	44%	845	7% Spread (Woman or Female: 43 Man or Male: 48 Non-Binary: 50)	65% Spread (10-75)	64% Spread (14-78)
Decisions about workload are fair (e.g. teaching loads)	41%	829	11% Spread (Woman or Female: 50 Man or Male: 39 Non-Binary: 50)	65% Spread (10-75)	71% (0-71)

In the intersectional analysis of the survey, there was no emerging pattern in score difference based on identity factors such as Gender, cultural background, sexuality or (dis)ability; this indicates that workload is an issue across MCRI and not something explicitly impacting traditionally underrepresented groups. Low positive scores across all demographic factors indicate that workload is an issue that affects all of our people; this is likely due to the nature of research and the not-for-profit model of MCRI, which limits the resources available to support the management of high workloads. These results indicate that MCRI must prioritise alleviating workload and find more sustainable ways to achieve our mission.

> **Priority Area:** Alleviate workload stress by creating flexibility for our people to succeed.

While most MCRI staff may be dealing with high workloads, someone's experience can be improved or exacerbated by the Group[17] they belong to or who their People Leader is. In Table 25, Group and People Leader had the highest spread[18] of positive scores, reinforcing previous conclusions that People Leaders shape experience at MCRI and those who may not have the guidance, support, skills, or desire to lead inclusively, equitably, or transparently impact staff experience of workload. Comments made in the GEDI Survey, Equitable Workload Conversations and Work-Life Balance Focus (Figure 46) indicate that there is a fear-based pressure to accept more work beyond capacity due to insecure contracts and negative perceptions of those who do not meet unhealthy expectations where "overwork is the norm[19]." 127 out of 466 comments (27%) in response to the question "What factors do you believe have negatively affected your career to date?" related to workload and insecure contracts and the lack of support from MCRI to alleviate these issues (Figure 48).

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[17] 'Group' refers to sub-groups of MCRI Research Themes (see Figure 1). E.g. the Neuroscience Group sits within the Clinical Sciences Research Theme

[18] 'Spread' refers to the spread of scores for groups within a particular demographic. The table compares the favourability of the lowest-scoring group to the favourability of the highest-scoring Group within a demographic. The larger the spread, the more different the experience groups are having.

[19] Culture Conversation Comment

"I am going to be completely honest and say that at the end of work I feel completely exhausted. Because of my role I am juggling things all day long."

Focus Group Participant

"It feels like overwork is the norm at MCRI, if you don't look like you're drowning then you are [viewed as] lazy."

Culture Conversation Participant

"I am not looking for 'easy' just 'remotely possible.' Life shouldn't be a series of decisions about who you are going to be disappointing today."

Survey Comment

Sometimes I feel like People Leaders don't know how to spread the workload or don't have time to plan and look at all the projects to spread workload evenly."

Culture Conversation Participant

"It might not always be that People Leaders expect you to do the work outside of hours. However, sometimes it is hard to have the discussion around the fact that you have too much work on your plate for work hours."

Focus Group Participant

Qualitative data indicates that Gender compounds the pressure of high workloads and insecure contracts[20]. In addition to being viewed as the default holders of admin, such as taking notes or minutes in meetings, 9 out of 12 Women in STEMM Participants feel pressure to go above and beyond to compete with men who are more likely to be full-time or on longer-term contracts (Figure 20 and Figure 29). This results in most workplace committee members being women, as seen in Table 21, even though extracurricular work is not adequately weighted or considered for promotion, and there is varied support related to committee participation.

Given that there is no top-down approach or encouragement for staff to participate in committees or workplace improvement projects, People Leader discretion ranges from enthusiastic support to active discouragement, as evidenced by the 41% unsure response to the question related to People Leader encouragement of committees in Table 26. This seems to be related to multiple contributing factors including the trade-off between time spent on an already heavy workload and volunteering (58% would participate in committees if capacity allowed) and the tension between participation and securing funding that enables further employment.

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[20] Participants in the Work-Life Balance, Experience of Traditionally Marginalised Staff and Experience of Women in STEMM Focus Groups and Career Conversations.

Table 26: GEDI Survey Results 2022, Participation Multichoice Responses

If you had more time or capacity, would you participate in voluntary committees?	N= 859
Yes	58%
Unsure	27%
No	13%
Prefer Not To Say	1%
Does your People Leader create space for you to participate in committees?	**N= 857**
Yes	45%
Unsure	37%
No	16%
Prefer Not To Say	2%
Does your People Leader encourage or celebrate your participation in committees	**N= 849**
Unsure	41%
Yes	37%
No	20%
Prefer Not To Say	2%
Do you feel that MCRI values your volunteer or service activities to support the institute?	**N= 842**
Unsure	51%
Yes	35%
No	12%
Prefer Not To Say	2%

Nevertheless, committee work still needs to be progressed, and women are being tapped on the shoulder to volunteer their already limited time to committees, taking time away from their work or research. Unfortunately, the consensus from the Women in STEMM Focus Groups is that the nature of the committee work they find themselves in is administrative rather than strategic, perpetuating

ideas that women are responsible for "soft-skill[21]" activities. Considering women already feel pressure to go above and beyond in their roles, this creates an unsustainable and emotionally laboursome workload that risks women's well-being. Caring duties and part-time schedules make this situation more complex, adding additional pressure to juggle multiple responsibilities to maintain job stability and gain acknowledgment. Moreover, those from traditionally underrepresented groups feel obliged to dedicate their limited time to D&I committees to improve the inclusivity of MCRI because there is a sentiment that the work would not progress without passionate members who have a vested interest in the topic[22]. The emotional labour associated with educating a workforce with competing priorities about the benefits of GEDI and the knowledge, insights, and expertise your identity group can offer without compensation or recognition can lead to "Diversity Fatigue[23]" and burnout.

Stress, job insecurity, performance pressure and unsustainable workloads put all our people's wellbeing at risk. Broad actions to reduce workload stress and targeted actions for women and traditionally underrepresented groups form the basis of MCRI's Workload/Flexibility priority area.

Action Information

The Workload and Flexibility Priority Area closely links to the Workplace Culture Priority Area, as fear and insecurity influence our people to go above and beyond to an extent that puts their wellbeing at risk. Creating Policies and Procedures to create a standard practice around workload (Actions 3.8.1.e, 4.1.2.a and 4.1.3.e) will alleviate some pressure for insecure staff members to discuss their workload stress and flexibility needs. While Actions 4.5.1.a and 7.3.1 will address workload concerns for People Leaders who are often overloaded and need more capacity to properly engage with and support their teams. Actions 1.1.3.e and 6.2.1 will enable MCRI to track this work, adjust appropriately and train our leaders to achieve our Workload and Flexibility Priority Area.

Action 1.3.1.e: Take steps to amend MCRI's Health, Safety and Wellbeing Strategy and hold sessions for People Leaders on managing workloads and wellbeing.

Action 3.8.1.e: Adjust MCRI's Performance and Development Framework to eliminate individual responsibility to raise issues related to workload stress, wellbeing and/or accessibility needs by having these as regular conversations in team meetings and 1:1 meetings initiated by People Leaders.

Action 4.1.2.a: Develop a Behavioural Framework to reinforce expectations on managing equitable workload for People Leaders.

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[21] Women in STEMM Focus Group Comment

[22] Comments made across Experience of Traditionally Marginalised Groups, D&I Committee and the ARG Focus Groups

[23] Also known as DEI Fatigue which is exhaustion and stress in response to discussions around diversity, equity and inclusion due to lack of support from organisational leadership. Valorie Waldon, B.A. (2021) *Diversity fatigue: What it is and why it matters, Employers Council.* Available at:
https://www.employerscouncil.org/resources/diversity-fatigue-what-it-is-and-why-it-matters/

Action 4.1.3.e: Develop expectations of People Leaders at every Level to protect time to be accessible to their teams for workload discussions.

Action 4.3.3: Review and capture committee workload to understand to what extent participation and engagement should be weighed for promotion.

Action 4.5.1.a: Explore ways to lessen the span of control and workload of People Leaders so that they can properly engage in professional development expectations.

Action 6.2.1: Develop multiple accessible anonymous and/or informal pathways for staff to safely share feedback and suggestions related to workload stress, flexibility, wellbeing, and changes to enable success.

Action 7.3.1: Review MCRI forms, templates and ongoing processes to consider how they can be lessened, combined or streamlined while simultaneously considering GEDI data considerations and a culture of inclusion. Following the review, make needed changes to reduce workload stress.

(iv) Appraisal/ Development Review

From 2018-2021, there was no formal process for performance reviews at MCRI; they were ad hoc and inconsistent, given that reviews were at the discretion of People Leaders to complete, and there was little support for both appraisers and appraisees. Recognising that this can be a barrier to staff inclusion and progression, MCRI developed a Performance Review Policy and Procedure in March 2021. However, this was optional and not enforced, so no data on completion rates of performance reviews from 2018-2021 is available.

Following the People Experience Survey (April 2022), the P&C Team conducted a Performance and Development (P&D) pilot for Teams and Groups with low engagement scores to test the viability, efficacy, and relevance of a P&D process at MCRI. The pilot consisted of Career Development, Goal Setting and People Leader Awareness workshops to support completing goal-setting meetings and regular 1-on-1 conversations. The P&D Pilot had a 45% completion rate for goal-setting meetings and regular 1-on-1 conversations. The P&C team concluded that low participation resulted from multiple factors, including lack of mandate, disengaged staff, limited knowledge of successful performance discussions for leaders and team members, time scarcity in research and unfamiliarity with new technology.

Concurrent with the P&D Pilot, the self-assessment sought feedback and reflections on performance evaluations at MCRI and found similar concerns. Once more, Group and People Leaders had the highest impact on scores and the experience of performance reviews, as demonstrated in Table 27. Men had around 5% higher scores than women, suggesting that men may be more likely to receive clear feedback that supports promotion. However, P&D appears to be an institute-wide issue and, thus, a focus of multiple priority areas in our Action Plan.

Table 27: GEDI Survey Results by Performance Related Questions, Group and People Leader

Career Support and Mentoring Question	Overall Percentage Score	Population	Group Spread (Lowest Score to Highest Score)	People Leader Spread (Lowest Score to Highest Score)
Positive Feedback is equally given	75%	850	60% Spread (40-100)	83% Spread (17-100)
My job performance is evaluated fairly*	69%	847	76% Spread (17-93)	100% Spread (0-100)
My people leader gives me helpful feedback about my performance	65%	880	73% Spread (27-100)	83% Spread (17-100)

* Note that this question was also asked in the Engagement Survey, and we see a 3% drop of favourable scores from 72% to 69% from March 2022 to October 2022

Feedback from the GEDI Survey, Focus Groups and Career Conversations highlight the desire for straightforward, easy-to-find policies, processes, and guidelines to support performance review and progression. 97 comments in response to the question, "What can MCRI do better to support your career?" in the GEDI Survey related to performance reviews. Figure 49 provides a summary of these explicit requests. Participants in the Career, Support and Mentorship Focus Groups and Career Conversations desired clarity on how performance was measured and what success looks like in various roles so they could advocate for themselves in these discussions, especially considering the varied management styles of MCRI's People Leaders. When there is no clear direction for P&D and no guidance for People Leaders to support individuals, people are often left to navigate a complex system with limited information. This conundrum is further exacerbated by issues explored in Section 4.4.i because "performance reviews not being organised by [People Leaders] mean that staff need to feel comfortable enough initiating the conversation and asking for opportunities for career progression or salary increases[24]", and not all staff have the psychological safety to initiate appraisal discussions.

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[24] GEDI Survey Comment

Figure 49: Responses to GEDI Survey Question "What can MCRI do to progress and support your career?"

"Clear requirements and easy to find guidelines for leaders to manage performance."

Survey Comment

"Annual reviews should be essential for all staff members and should include prompts to discus pay and career goals."

Survey Comment

"A centralised professional development service that does not rely on People Leaders."

Survey Comment

"Mandatory annual reviews that include prompts to discuss remuneration, progression and career plans."

Survey Comment

"Move beyond task-focused meetings and give us an opportunity to discuss development."

Survey Comment

The above issues are a symptom of two distinct problem areas at MCRI: the lack of formal requirements for People Leaders and the insufficient framework for increasingly diverse career pathways. MCRI has begun to address this with an updated Performance and Development Framework (PDF) that cuts across our Policy and Procedure and Career Pathways Priority Areas. The central elements of the PDF are regular one-on-one conversations with quarterly Goal Setting, Performance and Development Check-Ins, illustrated in Figure 50. Our Action Plan includes e-learns, help guides, improved communication and training to support and educate people on successful PDF conversations and build upon current work.

Figure 50: MCRI Performance and Development Framework

Beginning of year

Goal setting

Two way conversation to discuss and agree on 2-3 goals (development and work).

Every 2-6 weeks

Check in's / 1-on-1 conversations

Informal conversation using 1-on-1 template to check in on:
- Wellbeing
- Progress against goals
- Provide feedback s
- Offer support
- Discuss recent wins / what's going well
- Discuss any blockers / challenge

June / July

Midway review

In addition to informal conversation using 1-on-1 template, there will be career conversation to discuss:
- Strengths and areas of development
- Career aspirations
- Approach to development

Every 2-6 weeks

Check-ins / 1-on-1 conversations

Informal conversation using 1-on-1 template to check in on:
- Wellbeing
- Progress against goals
- Provide feedback s
- Offer support
- Discuss recent wins / what's going well
- Discuss any blockers / challenge

December / January

End of year review

Two way conversation to reflect and review:
- Achievement of goals
- Feedback received
- Overall summary of performance

Priority Area: Strengthen MCRI's current approach to career progression by expanding Career Pathways and revamping associated processes to ensure people at all Levels are well-informed and considered.

Action Information

Considering MCRI will be expanding Employment Classifications and redefining the success profiles and critical competencies for each (Action 3.5.5 above), amending our Performance and Development Framework (Action 3.8.1) will ensure that our people are clear on the essential skills and experience needed to progress at MCRI and that development towards this goal is regularly considered by both staff and People Leaders. Action 3.8.2 will enable People Leaders to proactively and appropriately engage in these discussions to support progression and cultivate a workplace culture of safety and open discussion.

Action 3.8.1: Contribute to and continue to adjust MCRI's Performance and Development Framework (PDF) based on the SAGE self-assessment learnings and outcomes.

Action 3.8.2: Develop a toolkit for leaders to support the PDF through visibility of career pathways to support and enable discussions.

(v) Pathways for Career Development

The Recruitment Policy and Procedure recommends internal and external advertising for all job opportunities. However, the hiring manager has discretion on where to post job vacancies, leading to infrequent internal advertisements. This compliance issue comes from a combination of time scarcity related to research timelines constraining the ability to advertise widely within MCRI and internal communications barriers. Internal recruitment managed by the teams, unless a role is advertised, ranges from a call for expressions of interest, announcements to individual teams, posts on Microsoft Teams, tapping people in the network on the shoulder and an advertisement on the internal bulletin. This ad-hoc approach is at risk of bias and reduces access to more opportunities for our people.

Action Information

Inconsistencies in our approach to career development result from a lack of straightforward practice or procedure. Establishing clear guidelines or expectations on internal recruitment (Action 2.1.2) and improving our current practice of linking those on expiring contracts with new opportunities (Action 4.2.3) will encourage internal recruitment and contribute to our Career Pathways Priority Area.

Action 2.1.2: Improve the reach of regularly posted information and job vacancies on MCRI's intranet. Regularly post to encourage internal staff, particularly women, to apply.

Action 4.2.3: Review current mechanisms for the assistance of researchers whose contracts end after 1 year with other internal opportunities relevant to their skill set.

Promotion is guided by MCRI's Research Promotion Policy and Procedure and is only available to Academic staff (Level A to Level E). Academic staff achieve promotion through an application process submitted to People Leaders and/or Committee Members, dependent on the Level one applies for. It is based on merit, contribution to research, publications, and leadership at MCRI and considers the applicant's achievements since their last promotion. Table 28 and Figure 51 provide data on Academic staff successfully promoted from 2018-2022 via formal promotion processes (applicant success rate was 100%) or by reclassification. Across the five years, 12 females had two promotions; 5 males had two promotions; 1 male and 1 female had three promotions. There were only two promotions for casuals in the years 2018 to 2022. A higher proportion of full-time staff received a promotion compared to part-time staff. As males are more likely to be full-time (see Figure 23), they are more likely to be promoted (as a percentage of workers, not in total number).

Considering the Promotions Policy applies only to Academic staff, there is no formal promotion process for Professionals, Research Nurses, and Individual contract staff. Career mobility for these cohorts is done through reclassification initiated by People Leaders, with remuneration determined by industry standards. Figure 52 compares the Level Change or Promotion rate to the average percentage headcount for each employment classification to assess whether similar trends exist at all Levels. Level changes generally represent MCRI's 80:20 Sex ratio across classifications. However, there appear to be anomalies in Professional Levels 5 and 6 and reduced Level changes for females in the highest employment categories (Academic Level D, Professional Levels 9/10, and Individual Contract Researcher). Since the headcount is small across these classifications, further monitoring will be required to ensure equal progression.

Table 28: Academic Promotion Data by Sex and Full-Time/Part-Time Status, 2018-2022

Year	Employment	Female			Male		
		Total number	Number promoted	Percentage promoted	Total number	Number promoted	Percentage promoted
2018	Casual	180	0	0	34	0	0
	Full Time	227	23	10%	94	13	14%
	Part Time	369	18	5%	65	≤ 6	5%
2019	Casual	158	0	0	29	0	0
	Full Time	254	12	5%	102	10	10%
	Part Time	404	18	4%	70	≤ 6	3%
2020	Casual	172	≤ 6	1%	32	0	0
	Full Time	261	20	8%	107	≤ 6	4%
	Part Time	440	19	4%	67	≤ 6	6%
2021	Casual	182	0	0	36	0	0
	Full Time	256	17	7%	117	7	6%
	Part Time	491	16	3%	71	≤ 6	4%
2022	Casual	181	0	0	41	0	0
	Full Time	302	10	3%	131	7	5%
	Part Time	609	13	2%	79	≤ 6	5%

Figure 51: Number of Full-Time and Part-Time Staff by Sex and the Corresponding Percentage of Academic Promotions, 2018-2022
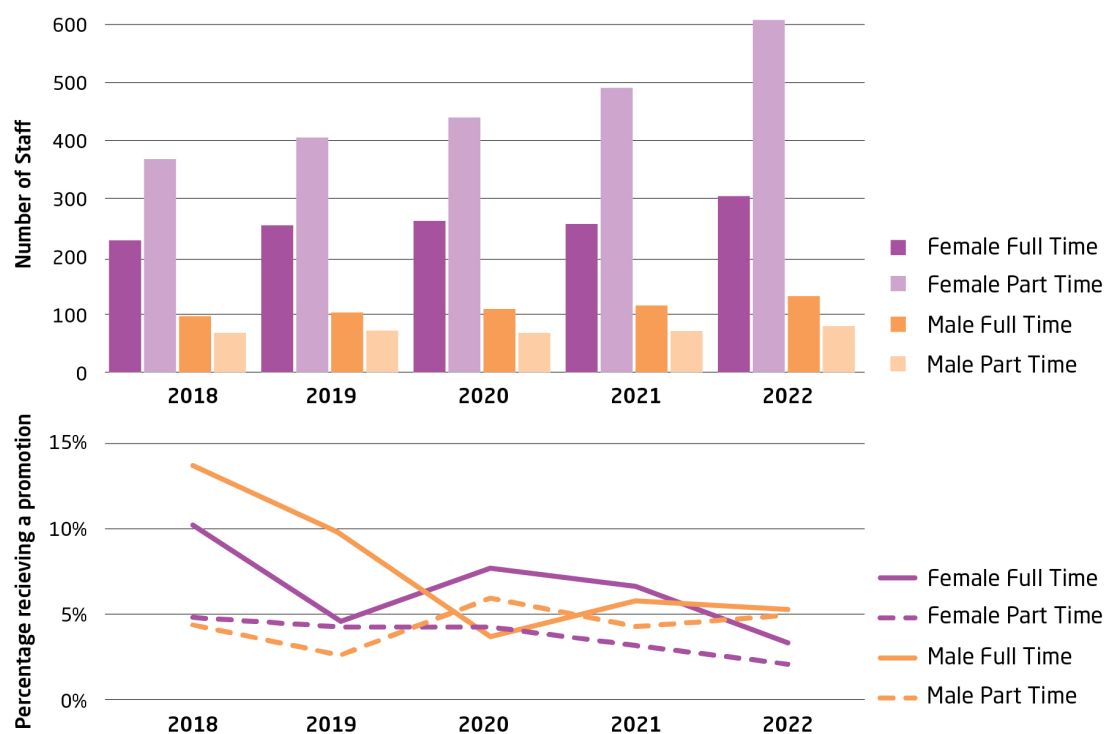
Figure 52: Level Change Rate versus Percentage Headcount 2022 A) Academic Levels. B) Professional Levels. C). Individual Contracts

Academic Staff Levels

	Level A		Level B		Level C		Level D		Level E	
	Promotions	% Headcount	Promotions	% Headcount	Promotions	% Headcount	Promotions	% Headcount	Promotions	% Headcount
Male	18%	16%	22%	21%	29%	37%	71%	49%	20%	55%
Female	82%	84%	78%	79%	71%	63%	29%	51%	80%	45%

	Level A	Level B	Level C	Level D	Level E
Female	40	32	15	≤ 6	≤ 6
Male	9	9	≤ 6	≤ 6	≤ 6
Total	49	41	21	7	≤ 6

Professional Staff Levels

	Level 3		Level 4		Level 5		Level 6		Level 7		Level 8		Level 9/10	
	Level Change	% Headcount	Level Change	% Headcount	Level Change	% Headcount	Level Change	% Headcount	Level Change	% Headcount	Level Change	% Headcount	Level Change	% Headcount
Male		16%		16%	38%	12%	28%	18%	20%	20%	12%	17%	67%	28%
Female	100%	84%	100%	84%	62%	88%	72%	82%	80%	80%	88%	83%	33%	73%

	Level 3	Level 4	Level 5	Level 6	Level 7	Level 8	Level 9/10
Female	≤ 6	≤ 6	≤ 6	≥ 10	≥ 15	≥ 15	≤ 6
Male	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6	≤ 6
Total	≤ 6	≤ 6	13	18	20	17	≤ 6

Individual Contract Levels

	Individual Contract (Clinician Researcher)		Individual Contract (Professional)		Individual Contract (Researcher)	
	Level Change	% Headcount	Level Change	% Headcount	Level Change	% Headcount
Male	33%	52%	42%	45%	50%	21%
Female	67%	48%	58%	55%	50%	79%

	Individual Contract (Clinician Researcher)	Individual Contract (Professional)	Individual Contract (Researcher)
Female	≤ 6	≤ 6	≤ 6
Male	≤ 6	≤ 6	≤ 6
Total	≤ 6	12	≤ 6

Action Information

Considering MCRI will be redefining the Job Family architecture and accompanying success profiles for core roles (Action 3.5.5 above), reviewing the position descriptions for roles and adjusting remuneration accordingly (Action 3.5.2) will enable Career Pathway progression by ensuring our people are at the appropriate Level.

Action 3.5.2: Ensure yearly reviews of position descriptions (PDs) are conducted in line with performance and development reviews to ensure PDs are up-to-date and paid at the appropriate Level and to maintain equity.

MCRI Academic (Level A to E), Professional (Level 1 to 10) and Research Nurse employment classification Levels are further separated into individual pay steps. Changes in these steps (i.e. step increment from Academic Level C Step 2 to Academic Level C Step 3) are at the discretion of People Leaders and are associated with a salary increase. Table 29 analyses these steps for individuals who have held a position for at least three years between 2018-2022[25].

Table 29: Total Step Increments by All Staff 2018-2022

	Female	Male	Total
	N=576	N=122	N=698
no step change	240 (41.7%)	49 (40.2%)	289 (41.4%)
1 step different	92 (16.0%)	20 (16.4%)	112 (16.0%)
2 steps different	66 (11.5%)	13 (10.7%)	79 (11.3%)
3 steps different	50 (8.7%)	7 (5.7%)	57 (8.2%)
4 steps different	30 (5.2%)	7 (5.7%)	37 (5.3%)
5 steps different	16 (2.8%)	≤6 (1.6%)	18 (2.6%)
6 or more steps different	57 (9.9%)	20 (16.4%)	77 (11.0%)
changed between academic/professional	25 (4.3%)	≤6 (3.3%)	29 (4.2%)

Approximately two in five (41%) people who have held a position for at least three years have not received an increment (i.e., at least one step increase). It is, therefore, possible that a significant minority of the workforce is operating at a higher Level than their current remuneration. This remains an issue across all classification Levels, with 46.9% of Academics, 36.4% of Professionals and 53.2% of Research Nurses not receiving an increment in this period. Due to funding restrictions, Academic/Research staff are less likely to receive a step increase than Professional staff.

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[25] The table does not include casuals, and there had to be at least three years of data for the position to complete analysis.

To track this in more detail, Figures 53, 54 and 55 indicate the initial position (e.g. Level and step) on the X axis versus the most recent position on the Y axis, according to Sex and years of employment[26]. The diagonal straight line indicates people who have not changed position, whereas the further a marker is from the diagonal, the greater the change in position. There is no evidence of Sex difference between those who did not have any step increments. However, a higher proportion of those with 'extreme' change (6 or more Levels/steps in the 5 years) appears to be males.

Figure 53: Initial Position and Most Recent Position of Academic Staff with at least 3 years of data 2018-2022
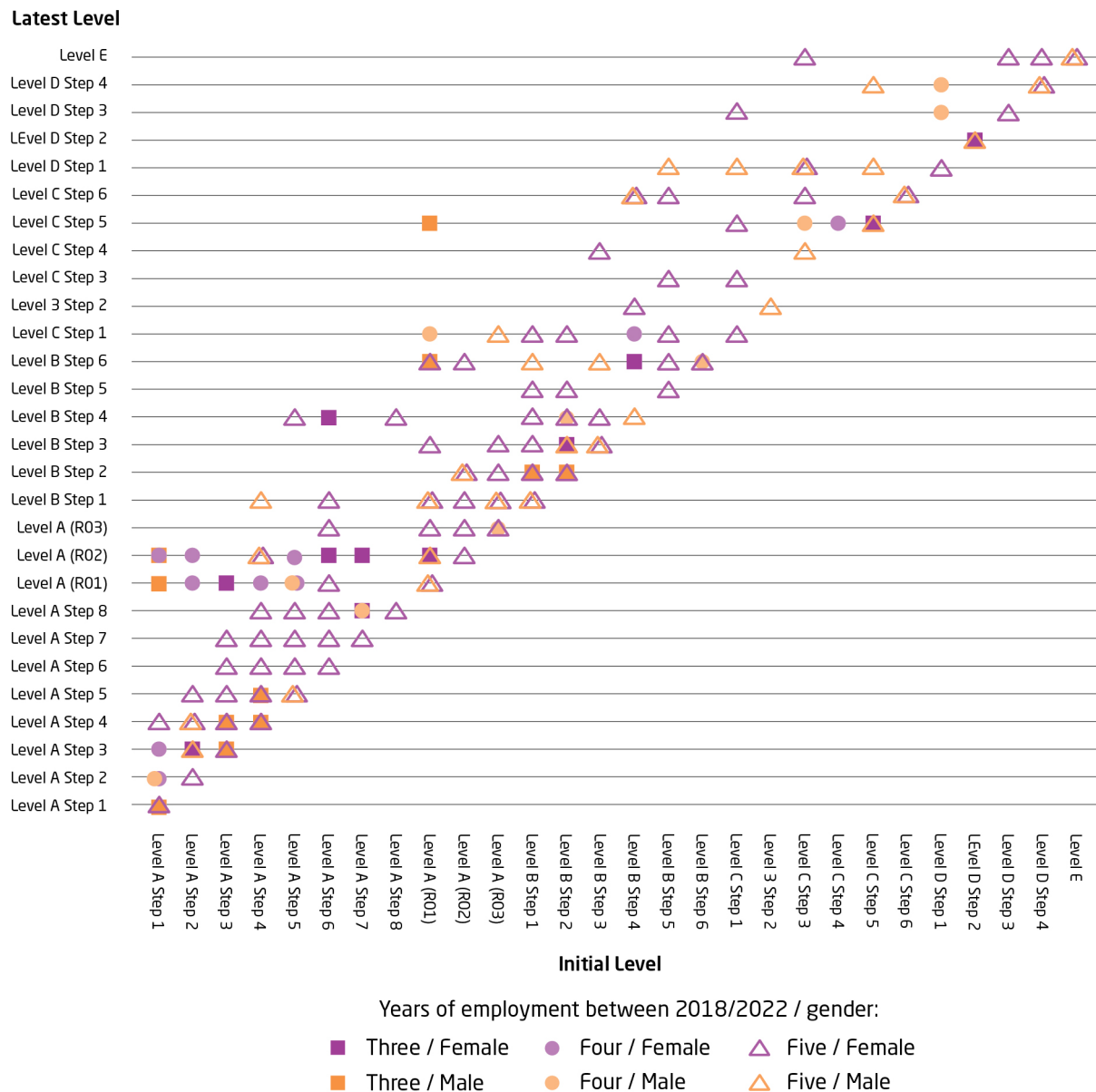
Figure 54: Initial Position and Most Recent Position of Professional Staff with at least 3 years of data 2018-2022
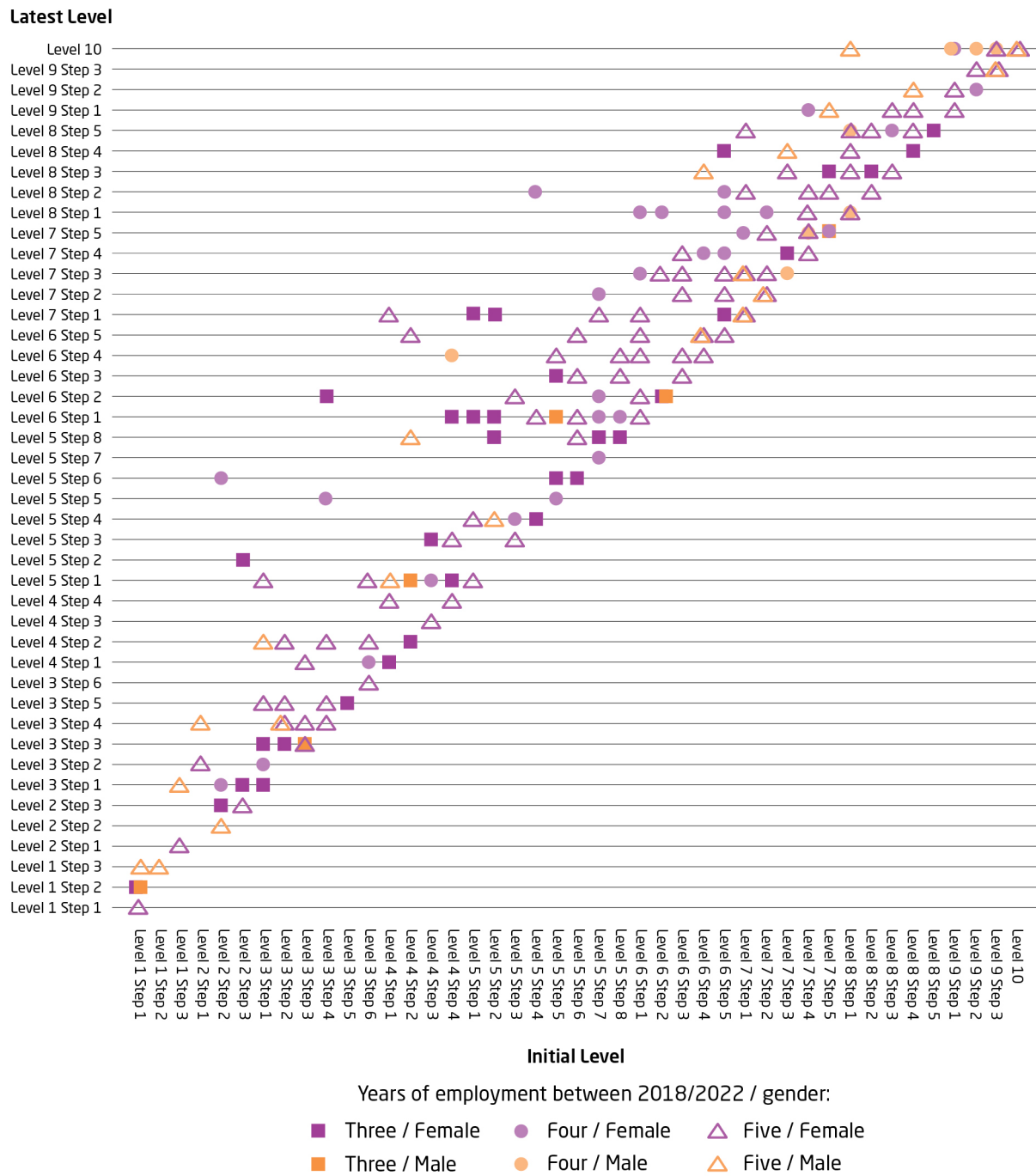
Figure 55: Initial Position and Most Recent Position of Female Research Nurses with at least 3 years of data 2018-2022*

Years of employment between 2018/2022 / gender:

■ Three / Female   ● Four / Female   △ Five / Female
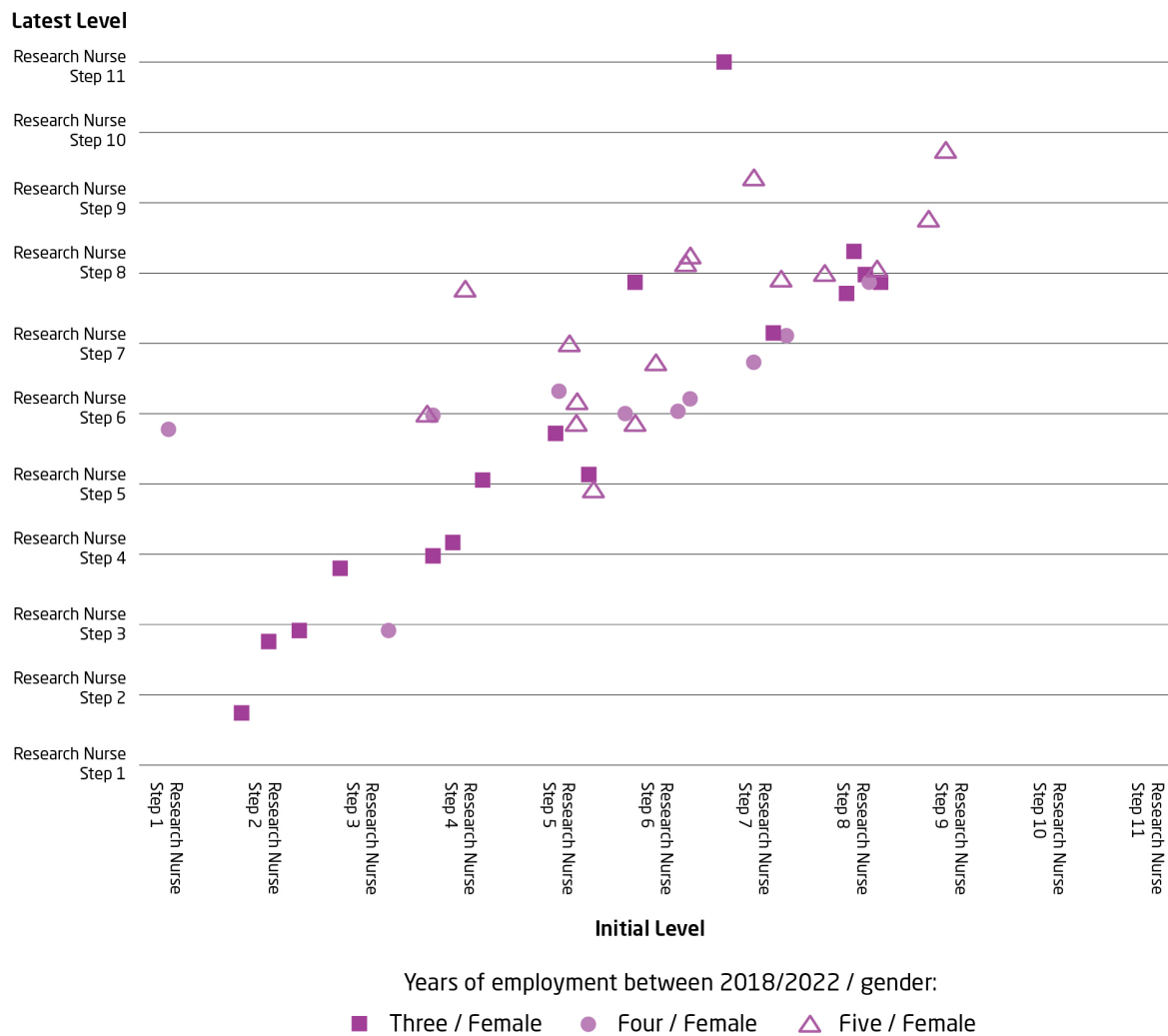
* Note Males were excluded due to small numbers and therefore the risk of being re-identifiable

Step increments are at the discretion of People Leaders, and given that there is no formal process related to the progression of staff or support for leaders to communicate their expectations to their teams, Survey, Focus Group and Career Conversation participants expressed frustration and uncertainty regarding career mobility and promotion at MCRI. Once more, People Leaders and Groups have the most significant impact on experience and progression at MCRI as "some leaders are more interested in science than leading[27]," and others "ensure that salary increases are budgeted and [staff] are reassured[28]." A key reason for this disparity seems to be partly a result of the lack of transparency at MCRI related to Career Pathways, Position Descriptions and Performance Development for People Leaders to refer to, communicate to their teams or support them with preparing an application. However, there also appears to be hesitancy to support step increments due to budget implications. This environment does not foster the best in our people and is a barrier to the promotion of researchers, considering they must be at the top step within a Level to qualify for promotion applications. The above concerns are Problem Areas for MCRI and are addressed through Career Pathways and Policies and Procedures Priority Areas in our Action Plan.

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[27] Focus Group Participant

[28] Career Conversation Participant

Action Information

The lack of clear, consistent, and straightforward policies, procedures and practices related to Career Pathways at MCRI has resulted in limited career progression for some. Redefining MCRI's Job Architecture (Action 3.5.5) in line with best practice and legislation (Action 3.5.1) will enable MCRI to meet our targets (Action 1.3.4) through appropriate strategies and frameworks (Actions 1.3.3 and 3.5.3) that hold our People Leaders accountable (3.5.3.e). Action 4.5.1 recognises that financing is also a significant factor in step increments; while increasing funding may not be achievable at this scale, it can contribute to an environment where more Career Pathways are available to our people in addition to Policy and Procedure Priority Area work.

Action 1.3.3: Align planned Succession Planning Strategy work at Executive to SAGE self-assessment learnings to outline steps to achieve and maintain Gender representation and reflect the diversity of our people on the Executive Team.

Action 1.3.4: Set a target for increasing the representation of women at Research Levels C, D, and E, Professional Levels 9+10, and Individual Contract Researchers and Clinician Researchers in line with MCRI's Sex/Gender ratio through the promotion of existing women to this Level as a first option and recruitment where needed and/or identified.

Action 3.5.1: Conduct an Employment Audit to assess legislative compliance with employment practices.

Action 3.5.3: Establish a Remuneration Framework to define MCRI's governance system to remuneration, purpose and strategy and commitment to appropriately and consistently managing remuneration across MCRI.

Action 3.5.3.e: Establish requirements for budget holders to plan for step increments with the Budget Review process to ensure we plan for the financial health of all our people.

Action 3.5.5: Redefine Job Family architecture and Success Profiles for core roles to determine skills, competency, experience, and career pathways that support talent attraction, performance and development.

Action 4.5.1: Scope capacity to increase finances to meet promotion and representation goals set in GEDI strategy and SAGE Action Plan through Fundraising, Funding Allocation, or other means.

4.3 Support for Career Interruptions and Caring Responsibilities

(i) Parental Leave Uptake and Return Rates

As of 2021, MCRI offers Full and Part-Time employees Paid Parental Leave, separately and in addition to the Australian Government Paid Parental Leave Scheme, for employees with a minimum of 12 months of continuous service before commencing leave. Three leave types are available, outlined in Table 30, that can be taken to a maximum period of 24 months if an employee opts for

half pay over double the period or unpaid leave. For those who suffer a miscarriage, stillbirth or infant death, MCRI offers full paid parental leave (depending on the gestation period), compassionate leave, and personal and annual leave. Employees with less than 12 months of continuous service at MCRI before commencing parental leave are eligible for a maximum of 52 weeks of unpaid parental leave. All employees can access available Personal, Annual, Long Service and Purchased Leave as applicable. Before the above changes, parental leave was offered only to primary carers at 12 weeks.

Table 30: MCRI Paid Parental Leave Benefit

Leave Type	Benefit
Primary Carers Leave	12 weeks, plus an additional 4 weeks (if eligible) with MCRI paying the gap between the Government Funded Parental Leave payments and the employee's salary for weeks 13 to 16.*
Adoption Leave (includes Permanent Care)	12 weeks, plus an additional 4 weeks (if eligible) with MCRI paying the gap between the Government Funded Parental Leave payments and the employee's salary for weeks 13 to 16.*
Secondary Carers Leave	2 weeks

*Employees who do not meet the eligibility conditions for the Government Funded Parental Leave Payments will receive a lesser fortnightly salary for weeks 13 to 16. In this instance, MCRI will only cover the gap that would have been received if eligibility conditions were met.

Table 31 provides an overview of parental leave data from 2020-2022. Before 2020, parental leave data was not consistently collected, and the current data available does not contain information related to FTE upon returning to work or identify factors. Actions 1.5.1 and 1.5.2 will address these gaps.

Table 31: Headcount of Parental Leave Update, Rate of Return and Retention by Sex*

Parental leave end date	2022		2021		2020	
	F	M	F	M	F	M
Uptake	N=51	N=≤ 6	N=57	N=7	N=68	N=10
Remaining in post after 6 months	39 (76.5%)	≤ 6 (100.0%)	48 (84.2%)	7 (100.0%)	56 (82.4%)	10 (100.0%)
Remaining in post after 12months	39 (76.5%)	≤ 6 (100.0%)	47 (82.5%)	≤ 6 (85.7%)	48 (70.6%)	10 (100.0%)
Remaining in post after 18 months	39 (76.5%)	≤ 6 (100.0%)	47 (82.5%)	≤ 6 (85.7%)	42 (61.8%)	8 (80.0%)

* FTE after return not available

98% of Primary Carers who took parental leave were female, while 82% of secondary carers were male. 4.6% of females have taken parental leave compared to 2.3% of males. This bias is also seen in 2021, with 5.7% of females compared to 3.1% of males taking parental leave, and in 2020, 7.7% of females and 4.9% of males. This trend is likely due to traditional Gender roles and cultural norms in Australia associating females and/or women with primary caregiving. However, MCRI does little to

promote the uptake of Secondary Carers Leave, which may contribute to the discrepancy. It is encouraging to note that there are generally high percentages of both Sexes remaining at MCRI after 12 months and that an upward trend of those staying after 18 months is emerging following 2020.

MCRI encourages employees to use the "Parental Portal" on the intranet for information on parental leave but requests that those interested in or requiring parental leave contact P&C and Payroll. This approach misses the opportunity to proactively inform our people of their entitlements and responsibilities, particularly when considering how MCRI encourages Secondary Carers to connect with their children, builds People Leader and workforce knowledge on entitlements, and furthers its status as a family-friendly workplace.

Action Information

Parental leave relates to MCRI's Policies and Procedures Priority Area because, even though the policy is available and clear, MCRI has room for improvement regarding informing all people of their entitlements, roles and responsibilities. Actions 3.12 and 5.4.2 will enable increased awareness and utilization of Parental Leave. Action 4.5.1.b will allow a possible change to the policy that creates more equitable opportunities for all parents at MCRI.

Action 3.1.2: Improve communication of parental leave policies, entitlements, expectations, and support for staff to refer to before, during and after leave expectations and develop a guide for People Leaders on how to plan for and support the flexibility needs of those taking and returning from parental leave.

Action 4.5.1.b: Scope capacity to increase finances to increase parental leave to both primary and secondary carers and remove the minimum term of employment (12 months) for eligibility to encourage the shared responsibility of caring.

Action 5.4.2: Develop an awareness strategy that engages leaders in speaking openly about caring responsibilities and role-model the taking of carers and parental leave.

(ii) Support and Cover for Parental Leave: Before, During and After Leave

Employees needing parental leave should contact P&C and Payroll and use the Parental Portal on the intranet for support, as outlined in Section 4.3.i. In addition to Flexible Working Practices (outlined in 4.4.iii), various supports are available to our people before, during and after parental leave, as summarised in Table 32. Arrangements for parental leave cover are determined by People Leaders and team members based on availability and need. The supports outlined below allow those preparing to welcome a child the flexibility and autonomy to design a parental leave plan that works best for them. It also provides People Leaders with the information and support necessary to adapt to these plans and enable smooth transitions before and after parental leave.

Table 32: Support for Parental Leave Before, During and After Leave

Before Parental Leave	
EHS Team Support	Should an employee require changes to their job or work environment due to a variety of physical effects caused by pregnancy, they can arrange changes through the EHS Team to keep doing their job.
Personal Leave Entitlements	An employee can take their ordinary personal leave entitlements during pregnancy to cover medical appointments.
"I'm Expecting" Resource	Document on Parental Portal containing multiple answers to frequently asked questions and guides on best managing pregnancy at work and access entitlements.
"My Partner is Pregnant or on Parental Leave" Resource	Document on Parental Portal containing multiple answers to frequently asked questions and guides on accessing secondary carer leave.
Grants Office Support	MCRI's grant office will support staff to notify and request variations for relevant Fellowship, Scholarship and Investigator grants related to parental leave.

During Parental Leave	
"I'm On Parental Leave" Resource	Document on the Parental Portal containing multiple answers to frequently asked questions and guides on managing the period of parental leave and returning to work at MCRI, including considerations for childcare and keeping in touch.
Shorten or Extend Parental Leave Arrangement	All employees on parental leave can shorten their leave period in agreement with MCRI or extend their leave beyond the initial 12-month period with four-week notice.
Keeping in Touch Days	Keeping in Touch days allows those on unpaid parental leave to return to work for up to ten days paid before officially returning to work to stay updated with MCRI, refresh skills and assist a return to work.
MCRI Maternity Leave Research Support Award for Women	One grant per annum up to the value of $25,000 (inclusive of on-costs) will be awarded to a woman postdoctoral scientist/researcher to allow their work to continue during a period of parental leave through the employment of a technical or research support staff for 3-months full-time work (or equivalent if the award is elected to be utilised across a more extended period by reducing FTE).

After Parental Leave	
Parental Portal Managers Guide	Document on Parental Portal to guide People Leaders who have team members taking or returning from parental leave, including considerations for managing leave, parental leave replacements, keeping in touch days and flexibility.
"I'm Returning to Work" Resource	Document on the Parental Portal to support the transition back to work after parental leave, including guidance on requesting flexible working arrangements and parenting spaces.
Welcome Back Packet	Information packet provided by P&C to both the employee and people leader to upskill, keep both abreast on workplace policy and laws and offer contacts for support.

The overall feedback related to parental leave is mixed, indicating room for improvement in the support MCRI provides before, during and after parental leave. Only 69% of 435 GEDI Survey respondents with caring responsibilities think MCRI offers sufficient support for parents/careers. There were mixed results in response to the question, "Carer or family responsibilities impede career progression in my organisation", as seen in Figure 56. High neutral scores may indicate that those answering may not feel the question applied to them. However, the 24% favourable score and accompanying comments suggest that MCRI has not provided sufficient support to combat the challenges in the research sector for those who must take parental leave. Further, Section 4.4.ii indicates that women have higher unfavourable ratings for discrimination based on childcare or carer duties at 11.4% (non-binary 14.3%) compared to men (3.0%).

Figure 56: Carer or Family Responsibilities Impede Career Progression GEDI Survey Results*

Favourable	Neutral	Unfavourable
24%	40%	36%
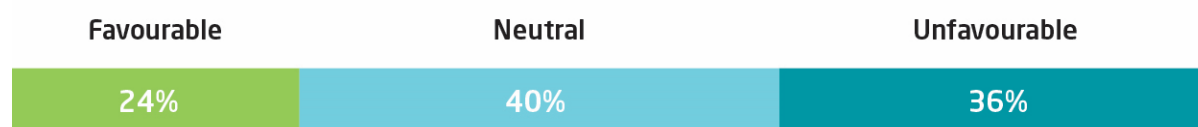
> **Note that for this question we wanted to see higher "unfavourable" answers which means that respondents disagreed that carer and family responsibilities impede progression. 24% Favourable indicates that 24% of survey respondents agree that caring and family responsibilities impedes career progression at MCRI.*

Comments made by primary carers about parental leave support the argument that experience at MCRI depends on People Leaders. Some have had positive experiences, citing supportive leaders, improved flexibility since COVID-19, encouragement to take on part-time work upon return to work following parental leave, and leaders who respected their team's caring responsibilities[29]. Conversely, those who have had more negative experiences cite feeling "pressure to return to work[30]," inappropriate questions about intention to have children[31], the challenge of breastfeeding without an easily accessible parenting room at MCRI[32], the difficulty of balancing caring responsibilities, workload and leave, and negative perceptions from colleagues that make people

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[29] Career Conversation and GEDI Survey Comments
[30] Career Conversation Participant
[31] GEDI Survey Comment
[32] Career Conversation and GEDI Survey Comments

feel obligated to "explain and justify long career breaks or the choice to spend time with [their] children.[33]" Further, 13% of answers in response to the question "what factors do you believe have negatively affected your career to date" related to taking career breaks for parental leave and lack of support for carers at MCRI. For example, comments expressed frustration that the research funding support is only available to one woman and is a competitive grant that adds additional stress and burden for those juggling multiple personal and professional priorities.

Eight fathers who participated in the co-design process after MCRI's Problem Areas were announced to staff shared more consistent feedback on their experience of Secondary Carers Leave. They shared individually that their secondary carer experiences were "extremely suboptimal[34]," particularly when MCRI did not have paid secondary carers leave. However, those who have taken leave following the updated parental leave policy felt disappointed that a children's research institute has a policy that perpetuates "unfairness for women who usually bear the brunt of caring responsibilities[35]," and avoids "well-documented research about familial and infant bonding and risk factors for perinatal depression for both parents[36]."

Action Information

Considering that Parental Leave and career breaks can negatively affect career progression, MCRI will offer more support for primary carers to continue their work (Action 3.1.1). Further, MCRI will seek additional finances to enable flexibility for parents (Actions 4.5.1.b, 4.5.1.c, 4.5.1.d and 6.1.4) and lessen the negative impacts of career breaks (Action 5.4.3.a) on our people's ability to move along our established Career Pathways. Regular surveys and focus groups with parents (Actions 7.4.2.a and 7.4.5) will allow us to track our progress and amend practice as needed.

Action 3.1.1: Offer support for researchers on/on return from parental leave to continue their work (part-time RA, funding for project management/technical assistance).

Action 4.5.1.b: Scope capacity to increase finances to increase parental leave to both primary and secondary carers and remove the minimum term of employment (12 months) for eligibility to encourage the shared responsibility of caring.

Action 4.5.1.c: Scope capacity to increase finances to offer return-to-work arrangements on reduced hours at full pay when returning from parental leave.

Action 4.5.1.d: Scope capacity to increase finances to contribute to superannuation during parental leave to prevent the Gendered inequity seen in superannuation at retirement.

Action 5.4.3.a: Establish a communications strategy to combat negative perceptions about caring responsibilities and "choice" in the workplace.

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[33] GEDI Survey Comment
[34] Focus Group Participant
[35] Focus Group Participant
[36] Email Submission

> **Action 6.1.4:** Advocate to external funders to increase funding for research wellbeing and consider flexibility in deadlines and KPIs by extending deadlines or allowing Groups to request extensions for parental leave to reduce stress and competition.

> **Action 7.1.2:** Conduct regular pulse surveys to understand the support parents need before, during and after parental leave.

> **Action 7.4.5:** Hold Focus Groups to ascertain attitudes and expectations regarding parental leave.

(iii) Childcare Provisions

Two childcare centres are at the Melbourne Children's campus, the RCH Early Learning Centre and the Bambini Early Learning Centre. Spaces are not reserved for MCRI staff as the RCH Early Learning Centre prioritises RCH full-time staff, and Bambini is open to the broader community. However, the RCH Early Learning Centre does provide a discount to MCRI parents. Parents have expressed frustration with the difficulty securing a spot at either childcare centre due to the limited numbers available.

Given that both centres are run externally to MCRI, there is no data related to uptake rates or feedback outside of the self-assessment process regarding the efficacy of childcare on campus. While the flexibility provided by COVID-19 alleviated childcaring pressures for some, the return to campus has resurfaced previous issues related to childcare, including inaccessible parenting rooms, inflexible schedules, and exhausting caring leave allocation.

> ### Action Information
>
> Action 7.5.2 offers increased flexibility for parents who may be pressured to return to work after parental leave but require childcare. Exploring options for additional care will communicate MCRI's commitment to wellbeing and contribute to Workload/Flexibility and Workplace Culture Priority Areas. Action 7.5.3 addresses parents' frustrations in Sections 4.3.ii and 4.3.iii regarding breastfeeding and the inaccessibility of available parenting rooms.

> **Action 7.5.2:** Explore options to increase the capacity of onsite childcare options, including ad hoc, short-stay (<2 hours) access to childcare and creating and maintaining a child/family-friendly space within MCRI's offices for times when staff need to bring children to work.

> **Action 7.5.3:** Provide a dedicated parenting/expressing room with appropriate storage within MCRI's building and promote widely.

(iv) Carer's Leave, Caring and Cultural Responsibilities, and Extended Personal Leave

MCRI's Leave Policy covers carer's leave and caring responsibilities. Personal/Carer's leave is accrued based on ordinary time worked and FTE (Table 33) and accessed through evidence or request (Table 34). Those experiencing family or domestic violence are entitled to the provisions outlined in the Family & Domestic Violence Policy, which is 10 days per year. This is in addition to and separate from an employee's accrued personal/carer's leave, with consideration for additional leave depending on context. Before 2022, carer's leave only applied to caring for a member of the employee's direct

family. This policy has been updated to include family or household members of employees, allowing for broader interpretations of family care. Further, the Family & Domestic Violence Policy broadly defines the family as partners of the same and opposite Sex, siblings, parents/guardians, grandparents, and children. In future, we will update this policy to include carers and housemates.

Table 33: Calculation of Accrued Personal/Carer's Leave Entitlements

Service with MCRI	Entitlement Accrual- Full Time Employees	Entitlement Accrual- Part-Time Employees
During 1st Year	1 ordinary day (7.6 hours) for each completed month of service (total of 12 days/91.2 hours)	As for full-time employees, pro-rata accrual is based on the ordinary hours worked, including authorised paid leave, in each month of the applicable first 12 months of employment.
Years 2, 3 and 4	14 ordinary days (106.4 hours) are given at the commencement of each anniversary year.	As for full-time employees, but pro-rata accrual is based on the ordinary hours worked, including authorised paid leave, in each previous year of the applicable first 3 years of employment.
Years 5 Onwards	21 ordinary days (159.6 hours) given at the commencement of each anniversary year.	As for full-time employees, but pro-rata accrual is based on the ordinary hours worked, including authorised paid leave, in the 4th and each subsequent year of employment.

Table 34: Evidence Requirements and Item Limits for Personal and Carer's Leave

Leave (Item) Type	Type of Evidence Required	Leave (Item) Type- Limits Within Anniversary Year
Paid Personal Leave	Medical certificate from Qualified Medical Practitioner registered in Australia with the Australian Health Practitioner Regulation Agency (AHPRA) Or Certificate from Qualified Health Professional registered in Australia with the Australian Health Practitioner Regulation Agency (AHPRAA) i.e. Chiropodist, podiatrist, chiropractor, dentist/orthodontist, optometrist, osteopath, physiotherapist, psychologist or naturopath/acupuncturist	No limit, subject to availability of paid entitlement hours.
Paid Personal Leave	Statutory Declaration	3 single occasions (up to 1 day per occasion) per anniversary year, subject to availability of paid entitlement hours
Paid Personal Leave	No Certificate	3 single occasions (up to 1 day per occasion) per anniversary year, subject to availability of paid entitlement hours
Unpaid Personal Leave	As for Paid Personal Leave, but the leave is unpaid.	Not applicable
Paid Carer's Leave	No certificate required	No limit, subject to availability of paid entitlement hours.
Unpaid Carer's Leave	As for Paid Carers Leave, but the leave is unpaid	Not applicable

Action Information

Action 3.4.1 is central to MCRI's delivery of the Policies, Procedures, Practices and Programs Priority Area; following 79 policies reviewed, significant edits and changes must be made by relevant teams across policies, including those related to Leave. Action 3.4.9 builds on these changes to ensure that MCRI has broad definitions inclusive of our people's diverse experiences.

Action 3.4.1: Coordinate with Risk Management to review and make changes to MCRI policies based on SAGE review, Focus Groups and internal audit to ensure that policies better support intersectionality, Gender equity, cultural safety and sensitivity and are inclusive to transgender people and are actionable and clear for all our people.

Action 3.4.9: Update to include caring for the elderly and extended relatives in carers leave.

MCRI handles extended personal leave for medical or other reasons on a case-by-case basis with P&C and People Leaders. There are no formal entitlements, but past support has included discretionary leave and increased access to the EAP. Currently, MCRI does not provide leave entitlements for individuals affirming their Gender. So far, no one has made any requests for such assistance. There are no entitlements for cultural and ceremonial leave for Aboriginal and/or Torres Strait Islander peoples, and limited entitlements exist for those requiring leave to undertake cultural responsibilities. The Leave Policy outlines that those under the Nursing or Health Professionals and Support Services Award can substitute a public holiday for a nominated religious holiday. However, those not under this award must submit a request to do so, and there is a risk that some People Leaders may not be supportive in these cases without these entitlements explicitly included in MCRI's Leave Policy.

Action Information

The Policies, Procedures, Practices and Programs Priority Area aims to create clear and formal considerations for our diverse staff. Without these, people's ability to bring their whole selves to work (Action 3.4.6), participate in cultural or religious practices (Action 5.1.3) or care for their wellbeing in the manner appropriate for themselves (Action 6.1.2) is left to People Leader discretion. The below actions ensure that these entitlements are clear, accessible and not subject to bias.

Action 3.4.6: Establish Gender Affirmation Leave and a Transgender and Gender Diverse Procedure for staff undergoing transition.

Action 5.1.3: Amend leave policies to allow for a floating Holidays model to allow employees to substitute Victorian Public Holidays for days that are more suited to them and expand provisions for Indigenous Australians to partake in family and community events in consultation with Aboriginal and Torres Strait Islander people.

Action 6.1.2: Remove the requirement for a doctor's note and/or increase the number of days where a doctor's note is not required for the maximum leave limit; this keeps those with chronic illnesses or disabilities in mind as they know how to take care of themselves.

In an analysis of leave taken from 2017-2022, it appears at first glance that total hours of leave across all categories is reflective of MCRI's female-to-male ratio (80:20). However, full-time males are taking more annual leave compared to their proportion at MCRI as seen in Figure 57. Full-time females are taking significantly more unpaid annual and unpaid personal leave across this period as demonstrated in Figure 58. These trends are visible across Part-Time and Casual contracts as well, suggesting that females may be exhausting their personal/carers leave and must resort to unpaid forms of leave to fulfil caring responsibilities and/or take time away from work to recharge. This conclusion aligns with GEDI Survey findings, which found that 51% of women, compared to 41% of

men, had caring responsibilities, particularly caring for children or elderly adults and facing negative responses (Figures 59 and 60). The decrease in personal leave taken from 2020 onwards, as seen in Figure 61, aligns with flexible working arrangements introduced during COVID-19 and indicates that females may have more options to meet their caring responsibilities without exhausting leave or facing adverse reactions. We plan to build upon this progress through our Workload/Flexibility Priority Area.

Figure 57: Full Time Staff Annual Leave Hours 2017-2022

	Leave without pay	Purchased leave	Annual leave	**Full Time Staff**
Female	12,484.75 (80.21%)	1,025.05 (93.1%)	139,014.33 (67.78%)	152,676.13 (68.79%)
Male	3,081.1 (19.79%)	76 (6.9%)	66,096.4 (32.22%)	69,253.5 (31.21%)
Total	15,565.85	1,101.05	205,110.73	221,929.63
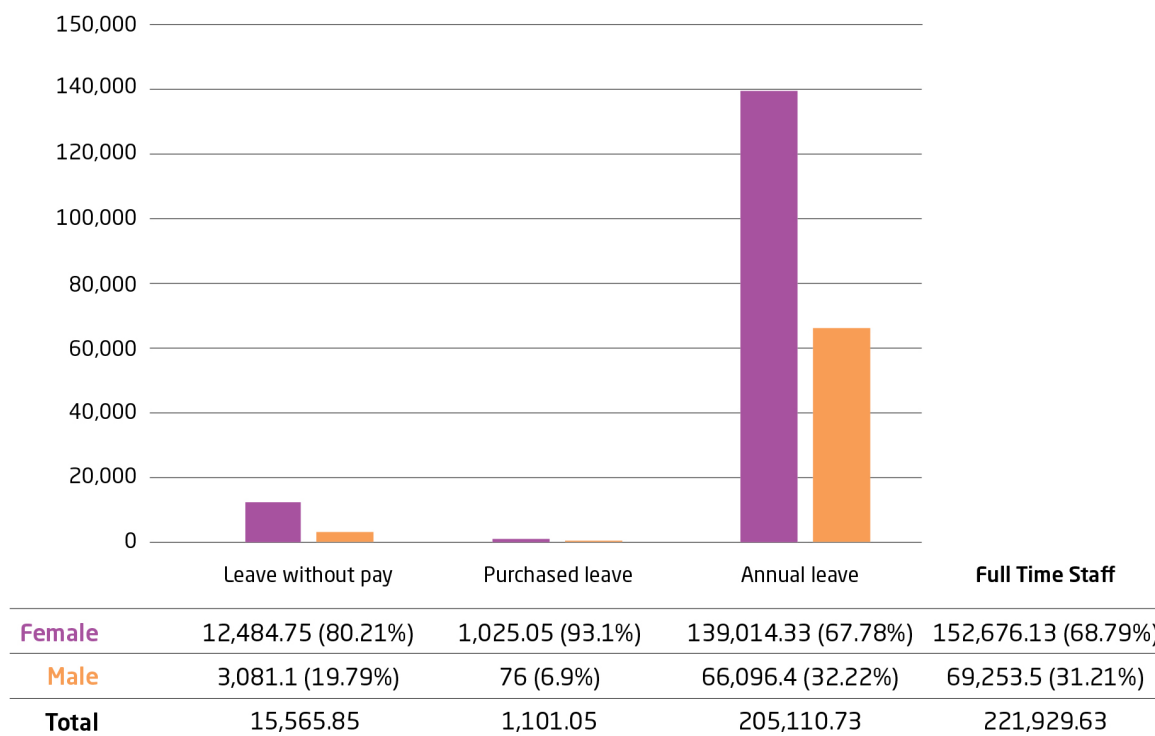
Figure 58: Full Time Staff Personal/Carer's Leave Hours 2017-2022

	Personal Leave Unpaid	Carers Leave	Personal Leave Combined*	**Full Time Staff**
Female	2,856.92 (99.55%)	9,493.48 (69.69%)	50,955.07 (74.29%)	148,384.26 (87.2%)
Male	12.85 (0.45%)	4,128.39 (30.31%)	17,632.08 (25.71%)	21,773.32 (12.8%)
Total	2,869.77	13,621.87	68,587.15	85,078.79
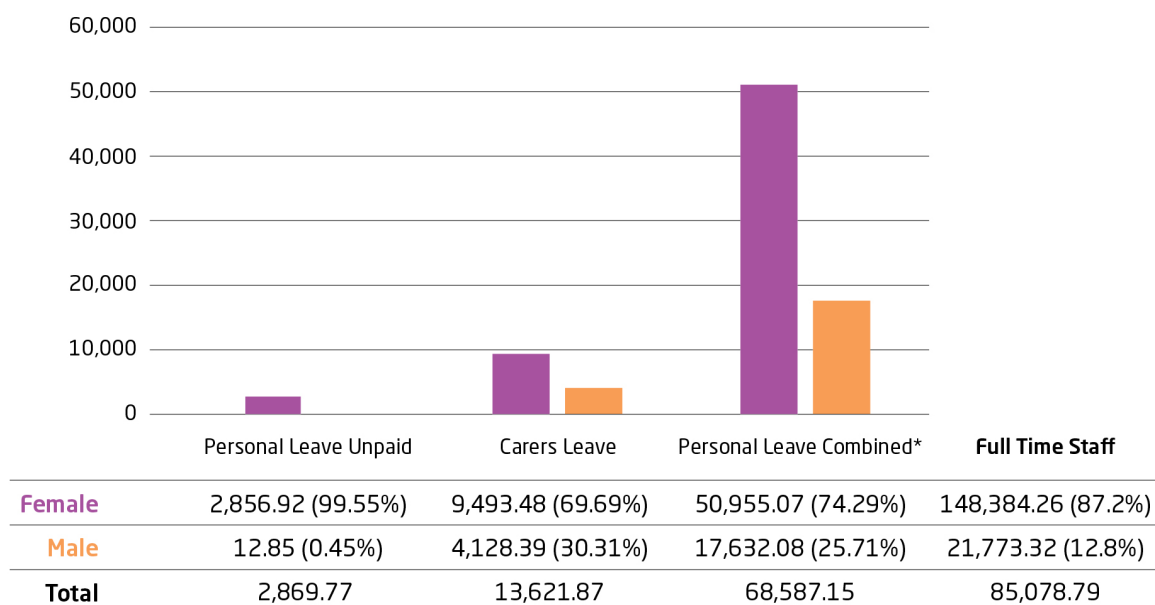
Personal Leave Combined includes all personal leave items by evidence request including Personal Leave, Personal Leave without a certificate, Personal Leave Statutory Declaration, and Discretionary Personal Leave

Figure 59: To Whom Do You Provide Care Survey Answers % Total Carers by Gender*

	Prefer not to say	Child(ren) with a disability	Other, please specify...	Child(ren)	Adult(s) with a disability	Elderly adults
% Total Female/Women Carers (359)	2%	8%	1%	83%	4%	19%
% Total Male/Men Carers (75)		12%	1%	93%	1%	8%

■ % Total Female/Women Carers (359)   ■ % Total Male/Men Carers (75)
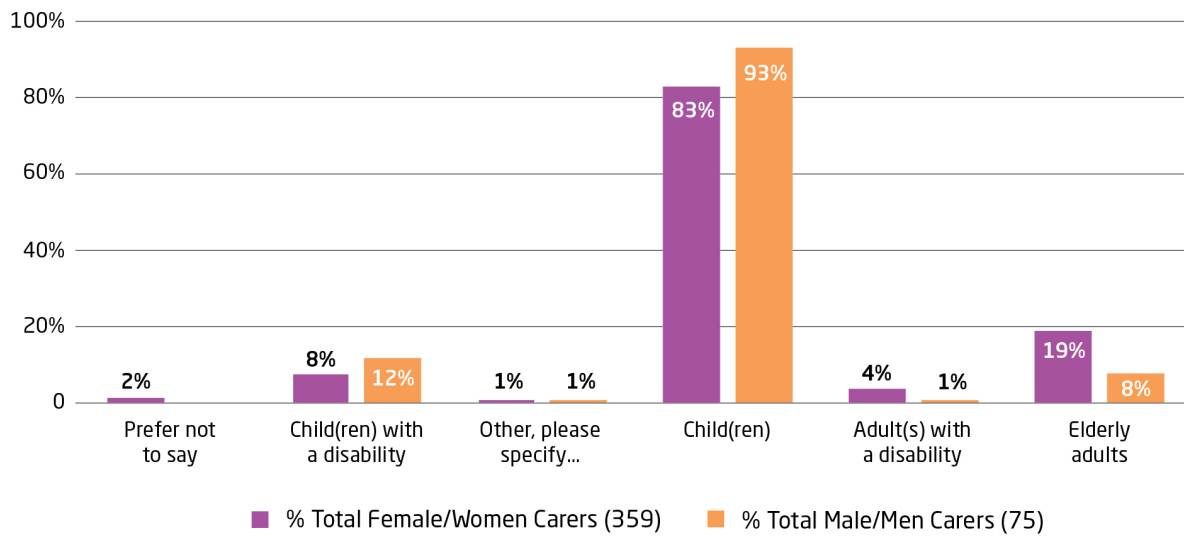
*Multiple responses available, so percentage sums to > 100

Figure 60: Comments Related to Taking Carer's/Personal Leave

"I feel that taking leave for personal reasons is more highly critiqued than annual leave."
Survey Comment

"I feel like I can't take time to look after myself and my family because it looks bad."
Culture Conversation Participant

"MCRI is focussed on being competitive, not the wellbeing of its people, so when I need to take time away, it always feels like an issue."
Focus Group Participant

"I've been made to feel guilty for making my family a priority."
Focus Group Participant

"I was once told I was I was taking 'too much leave' because I needed to share care with my husband for our children during the school holidays. I'd never taken more than my leave allocation so I'm not sure how 'too much' was defined."
Survey Comment

Figure 61: Number of Personal Leave Days Taken 2017-2022 by Full and Part Time Status

	2017		2018		2019		2020		2021		2022	
	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male
Full Time	10038.48	4042.22	14208.11	5203.65	13597.24	4224.8	10040.78	3351.45	9066.24	3511.15	6354.62	1440.05
Part Time	6358.38	220.05	10622.21	866.72	10349.64	913.67	8564.78	627.05	8593.48	461.2	4940.21	307.9
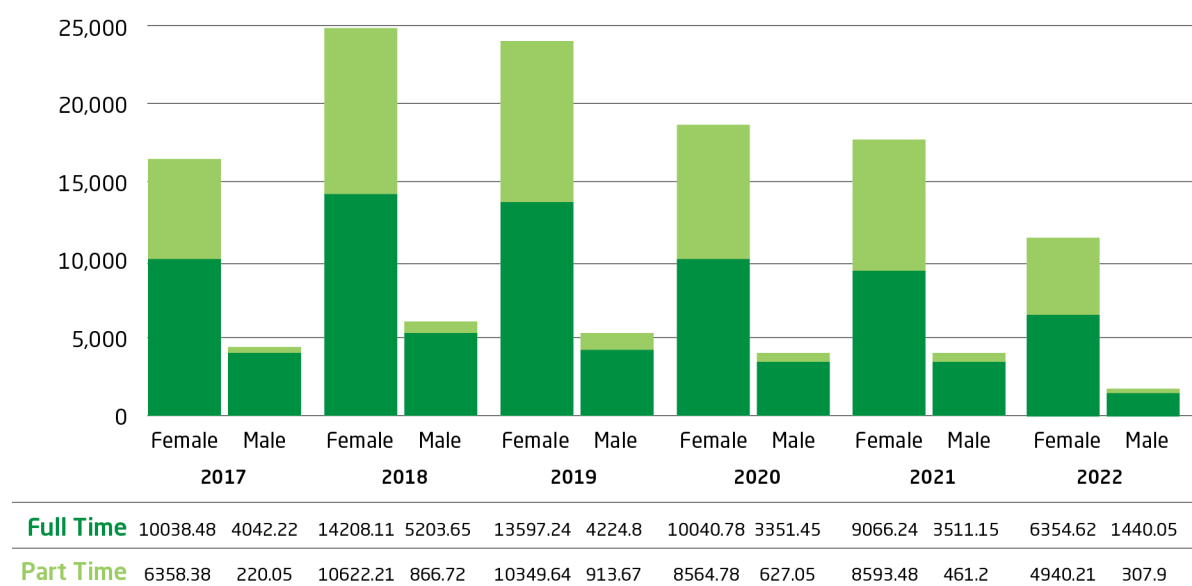
Action Information

The Disability and Mental Health Sub-Priority Area requires that we comprehensively address staff wellbeing; Action 6.1.1 creates additional days of leave so that all our people can recharge when needed. Actions 3.2.3 builds upon previous Policy, Procedure, Practice and Program Priority Area actions to establish a strategy that all People Leaders are accountable for in relation to taking leave to alleviate workload stress, improve flexibility and address workplace culture concerns. Actions 5.4.2 and 7.2.4 will enable People Leaders and staff to speak more openly about flexibility and the need for rest and support.

Action 3.2.3: Create a top-down approach and strategy for leaders to encourage work-life balance, flexibility, establishing flexible working arrangements and taking leave.

Action 5.4.2: Develop an awareness strategy that engages leaders in sharing stories about using flexible work/leave options to work effectively at MCRI to role model these among staff.

Action 6.1.1: Establish Wellbeing Leave days that do not require doctors' notes for mental health and wellbeing that are separate from Personal/Carers leave that are often exhausted by caring responsibilities so that staff can have days to recharge as needed.

Action 7.2.4: Develop targeted coaching and/or mentoring to positively support and uplift those who have returned from an extended leave period.

4.4 Providing a Safe, Equitable and Inclusive Environment

(i) Institutional Culture

In 2019, MCRI developed a Diversity and Inclusion Statement (Figure 62) outlining our commitment to building a culture of inclusivity that celebrates the many Genders, ages, ethnicities, cultural backgrounds, abilities, religions, and sexual orientations within our organisation. This statement is built upon MCRI's Values that shape how we behave, treat other people, and make decisions with clarity (Figure 63). MCRI would define an inclusive workplace culture as one that upholds our values and our commitment to diversity, where all our people can draw upon their unique experiences, skills, and knowledge to enhance our mission to ensure every child can live a healthy and fulfilled life.

Figure 62: MCRI's Diversity and Inclusion Commitment

Our diversity and inclusion commitment

At Murdoch Children's, we are proud of our diversity and believe it drives our innovation. We are committed to creating a culture of inclusivity, equity and respect that celebrates the many genders, ages, ethnicities, cultural backgrounds, abilities, religions and sexual orientations within our organisation. We encourage and celebrate the diverse voices of our staff and students, and the communities we serve. We hope you feel welcome.

Figure 63: MCRI's Values

Our values

Support the individual
To achieve their best and develop their skills.

Perseverance
Pursue answers and embrace challenges with tenacity and resilience.

Generosity of spirit
Delight in the success of others.

Creativity & innovation
Curious, imaginative and open to discovering new knowledge.

Scientific integrity
Honest and open in our work and how we deal with others.

Relationships & collaboration
With partners, community, patients, families and teams – everyone has a part to play.

Courage
To be honest and seek the truth no matter what. To be leaders and first adopters, and to think outside the box.

The GEDI Survey provided insight into where our barriers to achieving our goal of an inclusive culture that reflects our values lie. The survey asked a range of questions using a rating scale (*strongly agree* to *strongly disagree)* on diversity, belonging, fairness, opportunity, voice, and decision-

making. These questions were grouped into Factors, allowing us to easily aggregate the scores of multiple contributing questions to understand and analyse people's experiences. Table 35 demonstrates the Scores for the GEDI Survey Factors[37], which all contribute to MCRI's culture.

*Table 35: GEDI Survey Factor Results 2022**

Factor	# of Questions	Overall Percentage Score	Population	Favourable	Neutral	Unfavourable
Bullying and Intimidation	1	81%	833	81%	12%	7%
Leave and Flexibility	6	80%	842	80%	13%	7%
Comfort and Safety	19	73%	745	73%	18%	9%
Prejudice and Discrimination	11	70%	792	70%	24%	6%
MCRI Culture	16	70%	831	70%	25%	5%
Career Satisfaction	9	65%	878	65%	25%	10%
Leadership	7	57%	791	57%	33%	10%
Diversity, Equity, and Inclusion	43	55%	661	55%	30%	15%
Career Support and Mentoring	17	48%	759	48%	34%	18%

* This report only depicts the aggregate scores of teams with more than 6 members, this may mean that there are smaller teams with lower scores.

Across MCRI's internal surveys, we aim for an average Factor score of at least 80%. 7 out of 9 Factors scoring below 80% suggest that we have not effectively embedded our values in our work and daily operations, establishing the grounds for Workplace Culture as a Key Priority Area for MCRI. Exploring this issue further by Gender in the heatmap[38] presented in Table 36 confirms that the variance in

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[37] Groups of behavioural topics or cultural attributes that allow meaningful analysis.

[38] This heatmap highlights the most significant differences in results for demographics compared to the aggregated results. The heatmap colours are always based on the favourable percentage scores from the first column. The most positive differences are highlighted in green, and the most negative differences are highlighted in red- as the favourable percentage score between a group and the aggregated results gets larger, the shading gets darker.

workplace culture is also a Gendered issue, as men have higher scores than women and Gender-diverse people on 8 out of 9 Factors.

Table 36: GEDI Survey Factor Results by Gender, 2022

	Report overall	Woman or Female	Man or Male	Non Binary, Other, Prefer Not To Say
N (no. of responses)	**900**	**704**	**181**	**15**
Bullying and Intimidation	81%	81%	86%	50%
Leave and Flexibility	80%	80%	80%	71%
Comfort and Safety	73%	72%	78%	n/a
Prejudice and Discrimination	70%	69%	72%	65%
MCRI Culture	70%	70%	72%	75%
Career Satisfaction	65%	64%	69%	68%
Leadership	57%	55%	62%	55%
Diversity, Equity, and Inclusion	55%	54%	60%	50%
Career Support and Mentoring	48%	46%	57%	63%

To understand if Gender interacts with other identity factors to compound or alleviate workplace culture issues, MCRI conducted an intersectional analysis of the GEDI Survey data. Table 37 presents a snapshot of the study of the 206 possible demographic factor combinations in the GEDI Survey results. It highlights disaggregated scores that show some of the compounding barriers on the top and some of our people's advantages and positive experiences on the bottom.

	Report overall	Woman or Female X One Or More Cultural Background	Woman or Female X Yes Disability	Man or Male X Yes Disability	Woman or Female X Prefer Not To Say Sexuality	Woman or Female X Queer	Woman or Female X Unsure Sexuality	Woman or Female X Prefer Not to Say Religion	Woman or Female X Buddhism	Woman or Female X Other Religious Groups
N (no. of responses)	900	37	142	26	29	19	11	25	17	14
Bullying and Intimidation	81%	89%	80%	69%	62%	88%	90%	73%	79%	58%
Leave and Flexibility	80%	79%	79%	77%	75%	86%	83%	74%	77%	76%
Comfort and Safety	73%	70%	66%	66%	55%	72%	62%	65%	56%	75%
Prejudice and Discrimination	70%	54%	67%	64%	55%	56%	n/a	61%	45%	n/a
MCRI Culture	70%	71%	69%	64%	64%	66%	54%	62%	57%	72%
Career Satisfaction	65%	70%	60%	56%	58%	64%	57%	45%	61%	62%
Leadership	57%	59%	48%	43%	38%	51%	40%	52%	39%	44%
Diversity, Equity, and Inclusion	55%	57%	53%	52%	46%	44%	n/a	47%	51%	53%
Career Support and Mentoring	48%	48%	41%	49%	34%	52%	32%	47%	44%	41%

	Man or Male X No Disability	Woman or Female X 18-24	Man or Male X 25-34	Man or Male X Asian Langauges	Woman or Female X More Than 1 Language Apart From English	Woman or Female X Hinduism	Woman or Female X Islam	Man or Male X Full Time	Woman or Female X Honours or Graduate Student
N (no. of responses)	152	30	40	24	22	15	8	100	9
Bullying and Intimidation	89%	93%	84%	91%	91%	100%	88%	88%	100%
Leave and Flexibility	82%	87%	83%	89%	79%	80%	86%	81%	83%
Comfort and Safety	80%	76%	77%	86%	75%	84%	79%	77%	87%
Prejudice and Discrimination	74%	73%	77%	n/a	77%	99%	81%	75%	80%
MCRI Culture	74%	79%	72%	75%	75%	84%	82%	72%	83%
Career Satisfaction	72%	77%	73%	75%	72%	77%	63%	71%	75%
Leadership	65%	79%	61%	81%	62%	83%	79%	60%	82%
Diversity, Equity, and Inclusion	61%	67%	60%	72%	60%	75%	66%	59%	74%
Career Support and Mentoring	58%	77%	58%	62%	46%	72%	71%	54%	73%

The intersectional analysis of the GEDI Survey data provided more detailed information on how MCRI can holistically address GEDI in our workplace. For example, our approach to accessibility must be strengthened, as low scores for women and men with a disability and/or mental health condition were noticeably lower than other demographics across all Factors. Subsequent focus groups on this topic revealed that MCRI's approach to accessibility has created additional barriers for this cohort across all Problem Areas. As such, disability and mental health have been identified as MCRI's sub-group priority to be addressed across our Action Plan and all Priority Areas.

Sub-Group Priority Area: Recognise the impact of disability and/or mental health concerns on people's experience and wellbeing and take targeted action to address these concerns across all priority areas.

Further, the intersectional demographic Factor analysis indicated that MCRI staff who preferred not to share certain aspects of their identity or identified as "other" scored lower for these Factors than other groups. This may suggest that these people are experiencing a lack of trust or safety to be their authentic selves in our workplace. These numbers were too small to make definitive conclusions; however, focus group sessions, Culture Conversations, and Survey comments relating to insecurity signal that safety and trust are areas for improvement at MCRI. Outside of Gender, those who identified as having a Disability, identified as "other", or preferred not to share, other demographic factors did not significantly impact survey results. The most significant effect on GEDI Survey scores was MCRI Group and People Leader. Scores in these demographics varied by up to 72%, as detailed in Table 38.

Table 38: GEDI Survey Factor Results by Group and People Leader Spread, 2022

Factor	Overall Percentage Score	Population	Group Spread (Lowest Score to Highest Score)	People Leader Spread (Lowest Score to Highest Score)
Bullying and Intimidation	81%	833	62% Spread (38-100)	67% Spread (33-100)
Leave and Flexibility	80%	842	43% Spread (53-96)	53% Spread (44-97)
Comfort and Safety	73%	745	36% Spread (54-90)	43% Spread (51-93)
Prejudice and Discrimination	70%	792	18% Spread (82-100)	17% Spread (83-100)
MCRI Culture	70%	831	31% Spread (51-82)	54% Spread (37-91)
Career Satisfaction	65%	878	43% Spread (38-81)	72% Spread (26-98)
Leadership	57%	791	37% Spread (36-73)	64% Spread (29-93)
Diversity, Equity, and Inclusion	55%	661	33% Spread (35-68)	37% Spread (36-73)
Career Support and Mentoring	48%	759	48% Spread (24-72)	60% Spread (19-79)

As in other sections in this application, the vast difference between Groups and People Leaders results from a lack of formal and strategic guidance for our People Leaders and staff about the expected language and behaviours for all interactions at MCRI. MCRI does not have a Behavioural Framework that brings our values to life and does not build accountability for leaders to uphold these values in their interactions with their team members. Considering these gaps with the conclusions related to professional development, workload, professional and career development and contract insecurity, it is clear why the experience of MCRI's culture is so varied; leaders are ill-equipped, ill-prepared and ill-supported to proactively, consistently and inclusively lead, resulting in a "toxic[39]" workplace culture[40] for some and a positive workplace for others. Those in a group with a toxic culture or working with an unsupportive People Leader are further influenced by the insecurity and fear they feel related to their continuing employment that few advocate for themselves in terms of development and progression, bring their whole selves to work or are supported in living MCRI's values. This dynamic emphasises the necessity of the Policies and Procedures Priority Area as People Leaders need the support to create an environment where our people thrive.

Consultation with our people in the form of Culture and Career Conversations, Focus Groups and Surveys support this conclusion. All 11 MCRI Culture Focus Group participants agreed that MCRI's culture depends on team and Theme; this results in pockets of positive and toxic culture at MCRI. Those in supportive teams are "lucky because of the safety [there][41]." In contrast, others note teams that have a "soul-destroying[42]," "personally draining[43]", "toxic grind culture[44]," where "leaders are not present at all[45]." This cultural dichotomy results in about a third of our people not feeling safe at all Levels of MCRI, as demonstrated by the results of the Comfort and Safety questions outlined in Table 39.

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[39] Focus Group Participants

[40] "Toxic", in this instance, would refer to practices that can act as barriers to GEDI and a detriment to staff wellbeing and growth due to burnout. This can include unreasonable workloads, unsupportive leadership, reduced (or non-existent boundaries) between work and life and psychologically unsafe interactions.

[41] Focus Group Participant

[42] GEDI Survey Comment

[43] Culture Conversation Participant

[44] GEDI Survey Comment

[45] Focus Group Participant

Table 39: GEDI Survey Comfort and Safety Question Results 2022 by Group and People Leader Spread

Comfort and Safety Question	Overall Percentage Score	Population	Group Spread (Lowest Score to Highest Score)	People Leader Spread (Lowest Score to Highest Score)
I can be my authentic self at work	82%	828	50% Spread (50-100)	57% Spread (43-100)
I am comfortable sharing my personal background and experiences at MCRI	78%	834	44% Spread (56-100)	53% Spread (47-100)
I can voice contrary opinion without fear of negative consequences	66%	829	71% Spread (29-100)	73% Spread (27-100)
In the last 12 months no one in the organisation has made assumptions based on personal characteristics about me or another person	65%	814	70% Spread (30-100)	83% Spread (17-100)
I feel comfortable reporting instances where I have been treated unfairly	62%	818	75% Spread (25-100)	83% Spread (17-100)
I feel comfortable saying no to higher workload if it is outside my capacity or responsibility	55%	829	54% Spread (29-83)	30% Spread (17-83)

This contrast is even more stark when considering the experience of traditionally underrepresented groups. Those "unlucky" who find themselves in a team or Group with poor leadership may endure un/conscious sexist and/or exclusionary behaviour and microaggressions from their leaders. 16 out of 18 women in the *Experience of Women in STEMM* Focus Group have experienced Gendered microaggressions and stereotypes in the workplace (primarily from those in more senior positions). All members of the *Experience of Traditionally Marginalised Groups* Focus Group have experienced some form of exclusionary behaviour and have felt discomfort due to the lack of knowledge across MCRI on how to engage with GEDI or recognise when micro/aggressions or discrimination happens. Further, comments made in the GEDI Survey and Culture Conversations reemphasised that leaders tend to "undervalue the importance of cultural lens [their team members] represent[46]" and make little effort to "build the opportunity or the space for [these perspectives][47]."

The above amounts to an environment that does not make our people feel safe in all spaces. The lack of safety leads to mistrust in MCRI and furthers the sense of insecurity our people feel. Mistrust and insecurity contribute to poor career satisfaction, as confirmed by the Safety and Trust Focus

[46] GEDI Survey Comment
[47] Culture Conversation Participant

Group and the Career Satisfaction, Career Support and Mentoring, and Leadership questions in Table 40, and is also supported by conclusions in Section 4.4.ii. Some people do not feel valued and have expressed that some People Leaders abuse hierarchy, avoid difficult conversations and do not live up to our values. This combination breaks trust and prevents our people from having meaningful support and guidance in career progression and retention.

Table 40: GEDI Survey Career Satisfaction, Leadership and Career Support and Mentoring Question Results by Group and People Leader Spread, 2022

GEDI Survey Question	Factor	Overall Percentage Score	Population	Group Spread (Lowest Score to Highest Score)	People Leader Spread (Lowest Score to Highest Score)
I believe that senior colleagues are supportive of my career	Career Satisfaction	78%	889	57% Spread (43-100)	67% Spread (33-100)
I generally experience high levels of wellbeing in relation to my job	Career Satisfaction	75%	888	62% Spread (38-100)	57% Spread (43-100)
Leadership in my organisation understand the need to engage with issues relating to equality	Leadership	72%	822	60% Spread (40-100)	67% Spread (33-100)
My role is valued by my organisation	Career Satisfaction	70%	890	67% Spread (33-100)	86% Spread (14-100)
I feel that there is open and honest two-way communication between staff and leadership	Leadership	59%	818	63% Spread (25-88)	75% Spread (25-100)
I feel confident putting myself forward for the next step in my career	Career Support and Mentoring	47%	871	71% Spread (18-89)	86% Spread (14-100)
I feel leader decision making in my organisation is transparent	Leadership	47%	817	100% Spread (0-100)	83% Spread (0-83)

Acknowledging that MCRI should be a safe workplace that is not dependent on luck, Workplace Culture is a Priority Area in our Action Plan. Actions in this Priority Area will intersect with others,

primarily Policies and Procedures, to create responsibility for all our people to live up to our values and develop accountabilities for our People Leaders to foster a supportive and caring environment.

Workplace Culture Priority Area: Align our Workplace Culture with MCRI's values to improve and cultivate psychological safety for all our people.

Action Information

MCRI's workplace culture is varied because our values appear no longer fit for purpose, and there is little accountability to uphold our values at every Level. Actions 1.1.1, 1.1.5, and 4.1.1 will revamp MCRI's values to ensure they are relevant and all staff buy-in. Actions 1.1.3, 1.1.2, 3.3.2, 4.1.2, 4.1.3, 4.2.1 and 7.3.2 link culture work to the Policies and Procedures Priority Area to ensure clear expectations, responsibilities and strategies for our people and teams to cultivate and maintain a safe workplace. Actions 3.7.2.b,c,f,g,i and j, 4.4.1, 6.3.1, 6.3.2, 6.3.3 6.3.4, and 7.3.4 will provide the training, information and support for all people to uphold their responsibilities and deliver on actions across Priority Areas. Lastly, Actions 1.4.2 and 3.8.5 will enable MCRI to monitor progress and amend practice to ensure our work addresses workplace culture concerns.

Action 1.1.1: Establish an all-staff engagement and education process to revitalise MCRI's values and collaboratively explore and define how our values can be embedded in our code of conduct and performance and behaviour frameworks to ensure GEDI is a part of our culture.

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Action 1.1.3: Take steps to amend MCRI's Health, Safety and Wellbeing Strategy through a co-design process that considers the Campus Mental Health Strategy and the results of the SAGE self-assessment that will support and guide overall psychological, physical, and emotional wellbeing at work.

Action 1.1.5: Commit to undergoing a Cultural Safety audit to develop a Cultural Security Framework that addresses institutional and structural racism for Aboriginal and Torres Strait Islander staff at MCRI in line with the Reconciliation SAGE Action Plan.

Action 1.2.2: Appoint additional or identify existing Executive and Board Member(s) who are accountable for GEDI, Workplace Safety, Accessibility, Mental Health and Cultural Safety/Change.

Action 1.4.2: Create a Positive Feedback Loop Mechanism that improves workplace transparency and builds a culture of two-way feedback and honest communication.

Action 3.3.2: Establish guidance provisions to set a time before contract expiry before a renewal decision is required.

Action 3.7.2.b: Develop new training topics that will be required for all staff on a frequency to be determined appropriate for supporting GEDI and understanding Intersectionality.

Action 3.7.2.c: Develop new training topics that will be required for all staff on a frequency to be determined appropriate for cultural safety and awareness and anti-racism.

Action 3.7.2.f: Develop new training topics that will be required for all staff on a frequency to be determined appropriate for Voice Safety (safe and respectful relationships).

Action 3.7.2.g: Develop new training topics that will be required for all staff on a frequency to be determined appropriate on the Code of Conduct, Behaviour Framework and our Values.

Action 3.7.2.i: Develop new training topics that will be required for all staff on a frequency to be determined appropriate for Self-Advocacy.

Action 3.7.2.j: Develop new training topics that will be required for all staff on a frequency to be determined appropriate for supporting those with disabilities and/or mental health concerns.

Action 3.8.5: Take steps to update the current workplace accommodation requests system to improve accessibility and adequately understand and adjust to the needs of staff with accessibility or mental health needs.

Action 4.1.1: Review and amend our Code of Conduct to align with the outcomes of 1.1.1, 1.1.5 and 1.2.1 (Values, Cultural Safety and the GEDI Strategy).

Action 4.1.2: Develop a Behavioural Framework based on the amended Code of Conduct (4.1.1), MCRI's Values (1.1.1) and GEDI Principles (1.2.1) that will reinforce expectations for how we behave, how we treat other people and how we make decisions with clarity.

Action 4.1.3: Develop expectations of People Leaders at every Level by providing best practices for cultivating a positive and inclusive workplace culture.

Action 4.2.1: Socialise these expectations and tie raise and promotion to satisfactory performance of the above items (4.1.1, 4.1.2, 4.1.3).

Action 4.4.1: Initiate information sessions for People Leaders on building an inclusive culture.

Action 6.3.1: Improve communication and transparency regarding funding allocation and support available from MCRI.

Action 6.3.2: Establish a feedback loop mechanism for leadership decisions to establish trust and communicate that they have heard, acknowledged and considered staff requirements.

Action 6.3.3: Encourage regular retrospectives for line managers and their teams to openly discuss feedback, issues, and team culture and actively build safe spaces.

Action 6.3.4: Host regular lunch sessions featuring senior People Leaders to allow an informal channel for staff to communicate with management and Executives.

Action 7.3.2: Expand the remit of all People Leaders by establishing KPIs for fostering an enabling culture and workplace that supports our people to thrive.

Action 7.3.4: Establish peer learning groups for people leaders to share best practices and experiences related to culture building.

(ii) Preventing and Responding to Bullying, Harassment, Sexual Harassment and Discrimination

Relevant legal provisions and legislation (such as the Human Rights Commission Action and Fair Work Act) guide MCRI's approach to preventing and responding to bullying, harassment, sexual harassment and discrimination in the workplace. We outline that all our people are responsible for creating a culture of harmony and respect through our:

- Anti-Discrimination, Harassment & Bullying Policy
- Grievance Policy & Procedure
- Code of Conduct

The above policies explicitly outline the responsibilities of People Leaders to guard against discrimination, bullying, adverse action, and harassment and establish the expectation that People Leaders know their legal obligations, set an appropriate standard of behaviour, ensure safety for reporting, support investigation, take early corrective action and work with P&C as needed. They further describe the expectations of all our people to uphold our Code of Conduct and values and be an active and supportive bystander in workplace sexual harassment, bullying or harassment. MCRI supports staff to understand their obligations by providing education and compliance training during onboarding. However, this is limited and does not provide proper support for everyone to meet their obligations (i.e., how to be an active bystander or identify bullying or harassment).

MCRI responds to reports of bullying, harassment, sexual harassment, and discrimination through supporting self-management (informal) conversations and a formal investigation, resolution and disciplinary (if deemed necessary) process. Both aim to provide a safe and confidential way for individuals to report complaints and ensure corrective action is taken. The policy audit revealed that the Anti-Discrimination, Harassment and Bullying Policy has room for improvement concerning zero tolerance for this behaviour and providing prompt responses to complaints.

Action Information

Preventing and responding to bullying, harassment, sexual harassment, and discrimination is another area where our Policies and Procedures Priority Area intersects with the Workplace Culture Priority Area. To encourage reporting, our people must understand MCRI's approach and have confidence that reports will be taken seriously (Actions 3.4.2 and 3.4.3). In addition to creating an expectation that our people respond appropriately and act as active bystanders, MCRI must support them through training (Actions 3.7.2c,d and e) to be aware of inappropriate behaviours and call them out.

Action 3.4.2: Review MCRI's Grievance and Complaint policy to improve transparency and integrity of complaints process, keep individuals updated on actions taken and have a more robust zero-tolerance approach to harassment, discrimination and bullying where all reports must be investigated.

Action 3.4.3: Develop a stand-alone Sex Discrimination, Sexual and Sex-based Harassment Policy

Action 3.7.2.c: Develop new training topics that will be required for all staff on a frequency to be determined appropriate for cultural safety and awareness and anti-racism.

Action 3.7.2.d: Develop new training topics that will be required for all staff to review on a frequency determined as appropriate for Bystander Intervention.

Action 3.7.2.e: Develop new training topics that will be required for all staff to review on a frequency determined as appropriate on Discrimination, Harassment and Bullying.

From 2018 to 2022, there were 17 reported instances of bullying/harassment/discrimination. Given the small number, the following tables are for years 2018-2022.

Table 41: Summary of 17 Cases Received by P&C 2018-2022

Type of Case	N	Theme	N
Bullying	≤ 6	Inappropriate Jokes/ Comments/Contact	≤ 6
Harassment	≤ 6	Deliberate Exclusion	≤ 6
Sexual Harassment	≤ 6	Unprofessional Behaviour	13
Discrimination	0	Verbal Bullying	≤ 6
Grievance	10	**Outcome**	**N**
Time to Resolve	**N**	Recover and Continuation	≤ 6
Less Than 1 Month	≤ 6	Relocation Internally	≤ 6
1-2 Months	≤ 6	Warning	≤ 6
3-5 Months	≤ 6	Suspension	≤ 6
6-12 Months	≤ 6	Termination	≤ 6
Year +	≤ 6	External Process	≤ 6
N/A	≤ 6	Formal Process Not Pursued	≤ 6
Ongoing	≤ 6	N/A	≤ 6

Table 42: Cases 2018-2022 by Gender of Complainant and Respondent

		Respondent			
		Male/Man	Female/Woman	Gender Not Recorded	*total*
Complainant	Male/Man	11.8%	11.8%	N/A	*25.3%*
	Female/Woman	35.3%	23.5%	N/A	*58.8%*
	Whole team	N/A	6%	6%	*12%*
	Male/Man & Female/Woman	N/A	6%	N/A	*6%*

Table 43: Support Provided to Complainant and Respondent in the 17 cases of Bullying, Harassment, Sexual harassment, and Discrimination received by P&C 2018-2022

Support Offered	Support Provided to Complainant	Support Provided to Respondent
EAP	14	10
Work Well Program	≤ 6	≤ 6
P&C Support / Check Ins	14	7
Leadership Adjustment	≤ 6	
Coaching	≤ 6	≤ 6
Counselling	N/A	≤ 6
Compliance Training	N/A	≤ 6
N/A*	N/A	7

* N/A refers to instances where the individual does not accept offer of support and/or the situation corrected itself.

The information within Tables 41 and 42 was provided by P&C, who currently capture complaints in case notes and offer a range of support appropriate for the case at hand, as outlined in Table 43. Until the self-assessment process, there had been no previous methods to identify high-risk groups or measure the prevalence of bullying, harassment, sexual harassment, and discrimination, given the seemingly low number of cases (3 per year average) and no discernible Gender impact for both complainants and respondents.

However, following the results of the GEDI Survey, there appears to be a reluctance to report issues of bullying, harassment, sexual harassment and intimidation at MCRI due to the discrepancy between Formal Complaints outlined in Tables 41 and 42 and those who have reported experiencing or witnessing sexual harassment, bullying and intimidation and/or prejudice and discrimination in the last five years (Table 44). According to the GEDI Survey, 41% of bullying victims reported that the aggressive or intimidating behaviour, exclusion, and withholding of information started less than a year before the survey date.

Table 44: GEDI Survey Results by Experience of Bullying, Harassment, Sexual Harassment, Discrimination and Witnessing Bullying or Intimidation by Gender 2022*

In The Last 5 Years	Total	Woman/Female	Man/Male	Non-Binary
Experienced Sexual Harassment	19	≥ 15	≤ 6	
Experienced Occasional or Frequent Bullying and Intimidation	58	48	≤ 10	≤6
Experienced Prejudice and Discrimination	181	160	≤ 20	
Witnessed Bullying or Intimidation	115	91	≥ 20	

* Whole numbers not provided where totals ≤6 would be able to be calculated

The results in Table 44 do not align with reported cases in Table 41, suggesting a barrier to reporting at MCRI. 89.5% of those who have experienced sexual harassment did not formally report or make a complaint, with approximately 50% of those respondents citing "people would think I was overreacting," "easier to keep quiet," or "person too senior" as their reasons for not reporting. Further, 58% of those who experienced any frequency of bullying did not report because they did not think things would change or MCRI would do anything. Hesitancy to report seems warranted, given that out of the 34 survey respondents who said they formally reported to MCRI, 53% selected the outcome as "Nothing Happened." 67% of those who have witnessed bullying and intimidation did not make a report or complaint, with approximately 50% of those respondents citing "person too senior" and "easier to keep quiet" as their barriers to reporting.

Further, around 1 in 5 (21.9%) GEDI Survey respondents reported being the subject of discrimination at MCRI due to aspects of their identity (Table 45). In those reporting being subject to discrimination either 'occasionally' or 'often', rates doubled in women (10%) compared to men (5%). Rates of reported discrimination did not differ significantly across age groups or groups with caring responsibilities but varied across Themes (12% – 28%).

Table 45: GEDI Survey Results, Discrimination Rates by Gender*

Frequency of Discrimination	Total	Woman and/or Female (n=651)	Man and/or Male (n=7)	Non-Binary (n=7)
Yes, often	13	≥ 10	≤ 6	≤ 6
Occasionally	69	61	≥ 6	
Rarely	99	77	≥ 10	
No	632	490	≥ 100	≤ 6
Prefer not to say	13	11	≤ 6	

* Whole numbers not provided where totals ≤6 would be able to be calculated

Generally, ratings of Gender-based discrimination at MCRI were more negative in women than men and older women reported a significantly worse view of age-based discrimination at work. Views on discrimination based on childcare or carer duties and part-time or flexible work at MCRI were most negative in women aged between 25 and 54 (Figure 64) and varied significantly over Themes (Table 46).

Figure 64: Proportion of unfavourable scores for the presence of discrimination based on childcare duties at MCRI for women and/or female respondents, stratified by age*
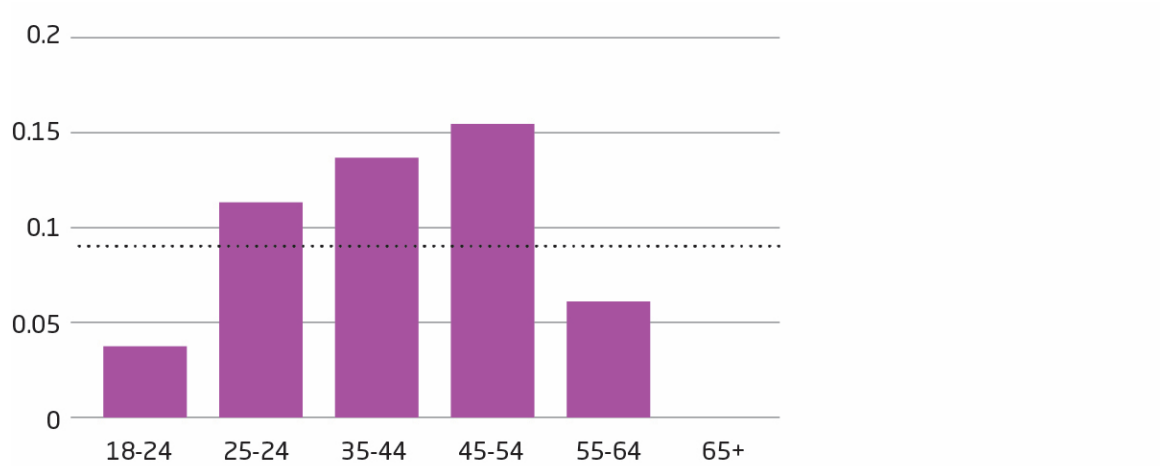
* Dashed line indicates MCRI average

Table 46: Proportion of unfavourable scores for discrimination based on part-time or flexible work at MCRI, stratified by Gender and Theme

Theme	Gender	Total	%Unfavourable
Clinical Sciences	Woman/Female	96	8.0
	Man/Male	24	8.7
Core	Woman/Female	124	9.7
	Man/Male	21	6.3
Genetics	Woman/Female	98	17.6
	Man/Male	22	4.8
Growth & Innovation	Woman/Female	42	21.1
	Man/Male*		
Infection & Immunity	Woman/Female	107	12.0
	Man/Male	34	0.0
Stem Cell Biology	Woman/Female	75	9.0
	Man/Male	31	3.3
Operations	Woman/Female	42	7.5
	Man/Male*		
Population Health	Woman/Female	118	12.9
	Man/Male*		

The above data all align with the conclusions of Section 4.4.i: not all people feel safe at MCRI, and our workplace lacks trust to uphold our values and hold people accountable for equitable and fair treatment. Efforts to address concerns related to safety are embedded across our Action Plan, particularly in the Workplace Culture and Policies and Procedure Priority Areas.

Action Information

Actions 5.4.3.a, 6.2.1 and 6.2.2 will enable the increased reporting of bullying, harassment, sexual harassment, and discrimination and provide MCRI with the information to develop prevention strategies and mechanisms that cultivate a safe workplace culture. Actions 3.7.3.d, 3.7.3.e builds on previous actions to build people awareness by creating specific training for People Leaders to meet their responsibilities outlined in policies and procedures as those with people management responsibilities to be aware of and call out inappropriate behaviour.

Action 3.7.3.d: Develop People Leader-specific training on combatting unconscious bias in management, recruitment, promotion and remuneration discussions.

Action 3.7.3.e: Develop People Leader-specific training on challenging gender biases about caring responsibilities.

Action 5.4.3.a: Establish a communications strategy to celebrate GEDI and combat negative perceptions in the workplace through acknowledging the balance those with caring responsibilities must meet between family and work by developing an awareness campaign to shift negative perceptions about their "choice."

Action 6.2.1: Develop multiple accessible anonymous and/or informal pathways for staff to safely share and disclose experiences of bullying, intimidation, harassment or discrimination to address reporting concerns.

Action 6.2.2: Build trust by combatting the perception that People and Culture (HR) are there to protect the company, not the employee. People and Culture should outline how they can support staff and the safety measures taken.

(iii) Flexible Work Practices

From 2018-2022, multiple policies and supports have allowed flexible working practices at MCRI. Unfortunately, data on this has not been consistently collected by P&C before 2019, and the onset of the COVID-19 pandemic resulted in a change of policy that provided flexibility to all staff. At the time of writing, there are two policies related to flexible work practices outlined in Table 47.

Table 47: MCRI Flexibility Policies as of August 2023

Flexibility Policy	Description
Flexible Working Arrangements Policy	Policy in line with the Equal Opportunity Act that provides a mechanism for full-time, part-time and casual staff with at least 12 months, or those with caring, disability, age or safety needs at MCRI, to formally request flexible working arrangements that adjust their hours, drop to part-time, work from home, purchase leave or compress work hours. After consulting with People Leaders and P&C, this arrangement can be extended for 12 months and utilised to transition between full-time and part-time work.
Flexibility Policy	Applies to those who do not meet the Flexible Working Arrangements Policy's and Equal Opportunity Act requirements and allows for flexibility for all staff to manage their work, life, family and personal needs. The Flexibility Policy does not require formal approval but rather ad-hoc approval from People Leaders considering the needs and requirements of all key stakeholders.

During the COVID-19 pandemic, MCRI deployed additional flexibility supports as outlined in Table 48.

Table 48: Flexible Work Practices at MCRI during COVID-19

Flexibility Support	Description
Flex 75	An interim strategy that allowed employees needing flexibility to work at 75% or above of their contractual hours at full pay in agreement between people and their People Leaders.
Work From Home Options	As a Medical Research Institute, our people could come into our offices during the pandemic lockdowns in Victoria. Those who did not need to be in a lab were encouraged to stay home, prompting MCRI to improve the infrastructure to support flexible at-home working for most of our people.
Gifted Leave	Several times across the pandemic lockdowns in Victoria, MCRI provided a "gift of time" to all our people to prioritise wellbeing and flexibility.
Leave Options	Our people were offered additional options to take accrued leave for part of their contract hours or reduce hours of work for a period with a pro-rata reduction in salary.

The COVID-19 Pandemic has shifted MCRI's approach to flexible working, and there is a noticeable difference in the promotion of flexibility from 2019 to the present. Flexibility has been actively encouraged by the Director at Town Halls and has been considered a part of how we work. However, feedback related to flexibility is mixed and reveals that despite the above measures and top-down encouragement, People Leaders do not equally apply flexibility at MCRI. MCRI scored 80% favourable for the Leave and Flexibility Factor in the GEDI Survey. However, the overall Factor score and individual question scores again vary most when disaggregated by Group and People Leader, as seen in Table 49. This supports the conclusion that People Leaders need more support, guidance, or expectations to lead equitably at MCRI. Outside of COVID-19-produced resources on working resilience and how leaders can support their teams during times of change, there was no support provided to People Leaders to help them better promote and manage flexibility at work before 2020. Following the establishment of the above flexibility policies, there was also no accountability mechanism to ensure leaders equally applied flexibility in the workplace.

Table 49: GEDI Survey Leave and Flexibility Question Results by Group and People Leader Spread

Factor/Question	Overall Percentage Score	Population	Group Spread (Lowest Score to Highest Score)	People Leader Spread (Lowest Score to Highest Score)
Leave and Flexibility	80%	842	43% Spread (53-96)	53% Spread (44-97)
My people leader supports flexible working	89%	866	50% Spread (50-100)	50% Spread (50-100
I can work flexible hours to accommodate personal commitments without requesting leave	83%	863	56% Spread (44-100)	57% Spread (43-100)
My people leader is supportive of requests for flexible working arrangements	81%	858	50% Spread (50-100)	57% Spread (43-100)

Feedback from our people across the GEDI Survey, Career and Culture Conversations and the Work-Life Balance Focus Group overwhelmingly highlighted that flexibility is "unbelievably helpful[48]," with "balancing workload, personal responsibilities and wellbeing[49]" and is a "real asset to the institute[50]." However, participants acknowledged that MCRI's approach to flexibility did not consider all staff. For example, Flex-75 was available to all staff but communicated as a parent's initiative, delaying people's access to the benefit. Additionally, Lab-Based staff have not been afforded the same flexibility as Professional and Non-Lab-Based staff due to lab-role-specific constraints.

As MCRI has begun its return to campus in the last year (requesting 50-60% of contracted hours in the office with final arrangements to be approved by People Leaders), there is concern that a continued lack of consideration of the diverse needs of our people will diminish progress on flexibility. Considering there is no formal guidance related to the timing of meetings or social gatherings and the inconsistency of People Leaders, individuals have shared that they felt "panicked about childcare[51]," "awkward asking for flexibility[52]," and "uncomfortable requesting meetings and social events to be held hybrid just for [themselves][53]" upon the return to campus.

MCRI can build on the progress made during COVID-19 to improve and expand flexible working and clarify that it is for all our people to succeed. Considering the workload considerations explored in Section 4.2.iii, flexibility is a priority in our Action Plan.

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[48] GEDI Survey Comment
[49] Focus Group Participant
[50] Culture Conversation Participant
[51] Career Conversation Participant
[52] Focus Group Participant
[53] Culture Conversation Participant

Workload/Flexibility Priority Area: Alleviate workload stress by creating flexibility for our people to succeed.

Action Information

Inflexibility appears not only to impact workload stress, but also our workplace culture, the ability of our people to participate in professional development and career progression. Improving or creating policies, practices and procedures that encourage flexibility and explicitly consider the work life balance many of our people try to achieve (Actions 3.2.2, 3.2.3, 5.1.1, 5.1.2 and 5.2.2) will support the delivery of outcomes across multiple Priority Areas. Continued training and support for People Leaders will enable them to meet their key culture and wellbeing responsibilities (Actions 3.7.3.c, 4.4.2, 5.4.2). While improving our infrastructure (Actions 3.2.1, 3.7.4, 7.5.7 and 7.5.8) and seeking regular feedback (Action 4.5.2.h) will enable us to meet our people's flexibility needs.

Action 3.2.1: Build on and improve the infrastructure to have effective hybrid meetings and develop a mandate endorsed and supported at all Levels of MCRI for all meetings, seminars and significant institute events such as town halls to be hybrid and recorded

Action 3.2.2: Collapse current policies to create a clear Flexibility Framework available to all staff and allow employee autonomy to decide how and what works for them, particularly with productivity and output

Action 3.2.3: Create a top-down approach and strategy for leaders to encourage work-life balance flexibility, establishing flexible working arrangements and taking leave.

Action 3.7.3.c: Develop People Leader-specific training on enabling wellbeing and flexibility.

Action 3.7.4: Amend training programs to ensure they are flexible and accessible (hybrid, modular and recorded) so that all people can access learning and development at MCRI.

Action 4.4.2: Provide workshops regarding the practical application of the Flexibility Framework.

Action 4.5.2.h: Conduct further investigation and seek feedback to develop recommendations and make relevant changes to MCRI's foundational GEDI work related to the negative perceptions in relation to work flexibility.

Action 5.1.1: Establish a Family Friendly/Flexible Meeting Procedure.

Action 5.1.2: Create an email guideline and infrastructure that limits emails outside of core work hours and encourages scheduling emails as standard.

Action 5.2.2: Schedule social gatherings and end-of-year parties during working hours and communicate a commitment to workplace events being accessible to all staff.

Action 5.4.2.: Develop an awareness strategy that engages leaders in speaking about GEDI and sharing their stories, including flexibility.

Action 7.1.6: Pursue a Family Friendly Workplace Certification.

Action 7.5.7: Consider options for hot desking and formalise to facilitate onsite schedules.

(iv) Equity and Diversity Policies and Procedures

In addition to policies and codes of conduct outlined in Sections 4.1.i, 4.2.iv, 4.2.v, 4.3.ii, 4.3.iv and 4.4.8ii, MCRI is guided by an Equal Employment Opportunity and Diversity Policy that aims to create a fair and inclusive workplace and builds a workforce that better reflects the diversity of our people and maximises organisational performance through proper employment decisions. This policy was one of 79 reviewed in the Systems and Processes WG Policy Audit.

The audit revealed four emerging thematic issues across all policies. Either a policy needed to be updated, had significant GEDI concerns where specific populations were not considered or acknowledged, needed to be clearer and more understandable, and/or needed proper institute support to uphold the policy in practice. Table 50 provides a summary of the various sub-topics and issues discovered. Of 79 policies reviewed, 31% were out of date, 64% had some GEDI concerns, 31% were unclear or inaccessible, and 12% did not have proper support from MCRI to uphold the policy, as seen in Figure 65.

Table 50: Policy Audit Thematic Issues and Sub-Topics

Out of Date or General Review Needed	GEDI Concerns	Unclear or Inaccessible	Improper Institute Support
Incorrect Information- references made to incorrect teams, emails, or links.	*Gendered Language-* Woman, Man, Pregnant Woman etc.	*Limited Clarity- The policy is confusing and/or lacks transparency to understand accompanying processes.*	*No Guidelines or Decision-Making Criteria-* The policy is missing a systematic way to make a decision based on what the policy is recommending/asking for.
Contradictory- policy provisions contradict each other and/or other policies.	*Onus on Employee-* responsibility falls to staff to request items outlined in policies (e.g., in place of mandatory P&D reviews, the employee must request this meeting).	*Roles and Responsibilities Unclear-* The policy outlines decisions and or responsibilities but does not clarify roles.	*No Support or Accountability-* The policy does not outline the support available for employees to meet the policy and their responsibilities (e.g., active bystander or professional development).
Not Practiced- The process outlined in the policy is not an accurate representation of MCRI's practice (e.g., Internal Recruitment).	*No GEDI Statement-* Missing D&I Statement and/or commitment to not discriminate in policy application.	*Loose Definitions-* The policy is vague and open to interpretation.	*Lack of Training-* There are gaps in leadership training to implement or uphold policies in meaningful and fair ways.

Out of Date or General Review Needed	GEDI Concerns	Unclear or Inaccessible	Improper Institute Support
	GEDI Responsibility Unclear- The policy commits to GEDI tenants but does not outline how leaders and staff are held accountable for this.	*Flexible Working Not Considered*- Eligibility for certain entitlements (e.g., parking) is only available to full-time on-campus staff.	
	Fails to Consider (Dis)ability- The policy does not consider how it may impact disabled people and/or offer accommodations in these instances.		
	Career Progress Detriment- The process may adversely affect someone's career mobility.		
	Gender Inequity- The policy has an unintentional bias towards a particular Gender.		
	Culturally Limited- The policy does not consider cultural responsibilities (e.g., leave for Aboriginal and/or Torres Strait Islander staff).		
	Potential Disadvantage for Traditionally Underrepresented Groups- The policy lacks measures to combat bias or consider diverse opinions in group decision-making.		

Figure 65: Policy Thematic Issue Frequency*

Legend:
- Improper Institute Support
- Unclear or Inaccessible
- GEDI Concerns
- 'Out of Date' or General Review Needed

Bar values: Improper Institute Support 12%, Unclear or Inaccessible 31%, GEDI Concerns 64%, 'Out of Date' or General Review Needed 31%
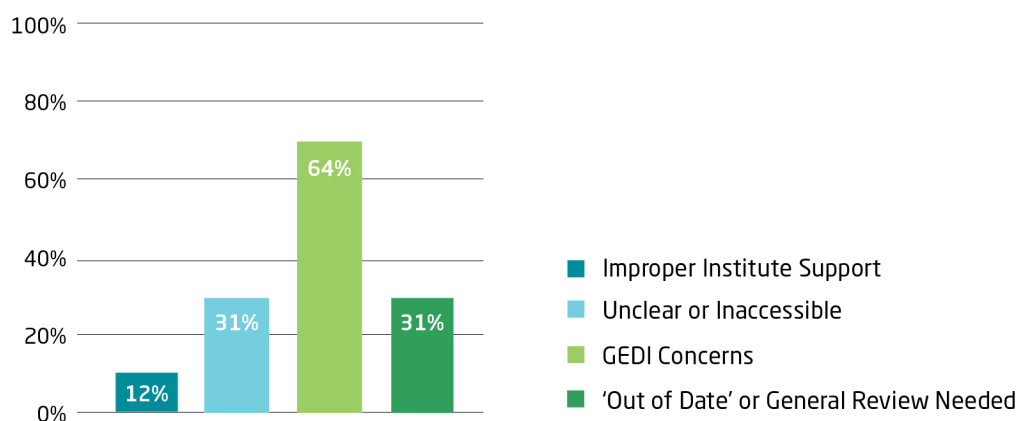
*Percentage is higher than 100% as a policy could have more than one thematic issue

Action Information

The lack of up-to-date and transparent policies that properly consider diverse staff and outline the supports available to meet obligations has resulted in poor practice across MCRI. To ensure that all policies are updated to reflect SAGE principles and are consistent with MCRI procedure and practice, Action 3.4.1 establishes more formal and coordinated work to update policies reviewed in the Policy Audit.

Action 3.4.1: Coordinate with Risk Management to review and make changes to MCRI policies based on SAGE review, Focus Groups and internal audit to ensure that policies better support intersectionality, gender equity, cultural safety and sensitivity and are inclusive to transgender people and are actionable and clear for all our people.

These numbers suggest that MCRI lacks an institutional approach to critical areas that drive GEDI in our workplace. This gap may be due to a lack of knowledge and guidance in this area before the SAGE self-assessment. However, the gap still results in policies, procedures, practices, and programs that do not consider traditionally underrepresented groups, are open to a bias and an ad-hoc approach that leaves the state of GEDI at MCRI vulnerable because when everyone is responsible, no one is responsible. The gaps in our policies, procedures, practices, and programs may have been easily fixed through the policy audit. However, they have had flow-on effects on how People Leaders understand and uphold their responsibilities. As noted in various sections of this application, leadership style and support significantly impact people's experience and progression. It is clear from the policy audit that MCRI fails to properly inform, support, or create accountability for People Leaders to actively consider and consistently apply equity and inclusion in the way they conduct themselves concerning people, procedures, and processes (as highlighted by the "Unclear and Inaccessible" and "Improper Institute Support" thematic issues). The gaps in our policy and procedure library directly link to the barriers explored throughout the application; as a result, Policies and Procedures are a Priority Area in our Action Plan. MCRI plans to strengthen our approach to GEDI through an overarching strategy and targets that flow on through established and to-be-created policies, procedures, practices, and programs. Various actions and commitments related to policy and procedure are mentioned throughout the application; the following list covers those not previously highlighted.

Policies and Procedures Priority Area: Ensure that our workplace embeds the values of Equity and Diversity in our Policies, Procedures, Practices and Programs.

Action Information

Considering MCRI lacks an institutional approach to GEDI, Actions 1.1.4, 1.2.1, 1.2.2 and 4.4.6 contribute to an overall framework with formal commitments and leadership (including Executive) responsibility for GEDI in our workplace. To combat an ad-hoc approach, it is pertinent to properly inform our people of their responsibilities and our ways of working through Actions 3.4.12, 3.4.13 and 3.4.14. Action 7.1.4 will enable us to monitor impact and amend practice as needed.

Action 1.1.4: Commit to taking substantial action for reconciliation by developing a "Reflect" (first stage) Reconciliation Action Plan via Reconciliation Australia.

Action 1.2.1: Building upon MCRI's SAGE Action Plan and MCRI's values, develop a GEDI Strategy through an intersectional lens that articulates MCRI's commitment to GEDI and creates a framework to embed GEDI in the objectives and strategies of current and future Institute Strategic Plans.

Action 1.2.2: Appoint additional or identify existing Executive and Board Member(s) who are accountable for GEDI.

Action 3.4.12: Disseminate and communicate new and updated policies in an accessible and informative way so that those of different backgrounds and requirements are fully aware of their rights and responsibilities.

Action 3.4.13: Ensure all new staff can access a core MCRI policies and procedures list via the HRIS, including monitoring and reminders.

Action 3.4.14: Leverage current work to upgrade MCRI's systems to create an upgraded Policy Database with accompanying guidelines/documents/procedures to ensure guidelines and policies are easily accessible and provide a consistent approach.

Action 4.4.6: Institute a decision-making framework to assist with decisions "under People Leader discretion" related to progression to create consistency and address bias.

Action 7.1.4: Identify key external organisations that benchmark best practice policies and procedures in relation to GEDI and amend policies, procedures, practices and programs as emerging evidence and best practices arise.

Although participants have yet to respond to the staff-wide call for comments on policies and processes at MCRI, the above actions were suggested and validated with Focus Groups in our co-design process. Further, the spread of scores across the Diversity and Inclusion Factor Questions (Table 51) and comments made in the survey (Figure 66) indicate that a top-down approach with clear policies, practices, procedures and programs that drive GEDI is needed to complement the work of the D&I Committee. 81% of survey respondents agree that MCRI values diversity, and 92% of survey respondents feel a responsibility to uphold our commitment to D&I; policies and procedures will build on this connection to better support our people and, most importantly, our leaders in embedding GEDI in all that we do.

Table 51: GEDI Survey Results 2022, Diversity Equity and Inclusion Questions by Group and People Leader Spread

Diversity, Equity and Inclusion Survey Question	Overall Percentage Score	Population	Group Spread (Lowest Score to Highest Score)	People Leader Spread (Lowest Score to Highest Score)
I feel that diversity and inclusion is the responsibility of all MCRI staff	92%	859	50% Spread (50-100)	50% Spread (50-100)
MCRI Values Diversity	81%	867	48% Spread (52-100)	71% Spread (29-100)
MCRI uses inclusive language	78%	841	60% Spread (40-100)	67% Spread (33 – 100)
I am included in decisions that affect my work	68%	849	77% Spread (23-100)	83% Spread (17-100)
People from all backgrounds have equal opportunities to succeed at MCRI	66%	842	71% Spread (29-100)	83% Spread (17-100)
I feel that MCRI's workforce is diverse	65%	864	64% Spread (29-93)	86% Spread (14-100)
I feel MCRI has people of all genders as visible role models	64%	842	68% Spread (32-100)	78% Spread (22-100)
I feel that MCRI adapts to meet people's diversity and inclusion needs	61%	854	71% Spread (29-100)	86% Spread (14-100)
Office space is allocated fairly in my organisation	52%	832	64% Spread (19-83)	73% Spread (17-90)
I feel the organisation offers part-time staff the same opportunities as full-time staff	50%	830	73% Spread (13-86)	69% Spread (14-83)
Perspectives like mine are included in the decision making at MCRI	44%	839	75% Spread (8-83)	100% Spread (0-100)
Lab space is allocated fairly in my organisation	29%	775	76% Spread (6-82)	80% Spread (0-80)

Figure 66: GEDI Survey Comments in response to Gender Equity, Diversity, and Inclusion Questions

"Leadership related to Diversity and Inclusion should come from the top, MCRI should not put this only on the staff."
Survey Comment

"There has been a lot of focus on Gender and cultural background in MCRI's focus on equity and inclusion, but disability has been severely neglected."
Survey Comment

"There are no inherent barriers within MCRI to any form of diversity, but the instruments to ensure this is in place are not always well disseminated."
Survey Comment

"MCRI appears to value diversity, although it will take considerable work to match its culture to those espoused values."
Survey Comment

"Diversity and Inclusion is MCRI's responsibility, always, and they should be leading staff on this, not shifting the onus away onto individuals who aren't in charge of making change."
Survey Comment

"Diversity and Inclusion is not very visible. There should be gender equity and diversity considerations for committees at all levels."
Survey Comment

Action Information

Actions 1.1.2, 7.1.1 and 7.1.2 will contribute to MCRI's institutional approach to GEDI and assist in establishing formal commitments at all levels. Actions 1.6.1, 1.6.2, 3.9.1 and 7.1.5 enable MCRI to deliver on these commitments through resourced and well-informed teams.

Action 1.1.2: Expand MCRI's current Diversity and Inclusion statement to include a comment and/or recognition of the importance of intersectionality in consultation with the Diversity and Inclusion Committee and critical stakeholders. Reframe commitment as "Aims" to acknowledge that GEDI is not a destination but a process requiring continued work through relevant mechanisms such as a GEDI Strategy, the SAGE Action Plan and other campus-wide mechanisms.

Action 1.6.1: Appropriately fund and hire a GEDI team with the relevant skills and expertise to lead the completion of the SAGE Action Plan.

Action 1.6.2: Resource teams that have direct responsibility for Action Items to support the completion of the Action Plan.

Action 3.9.1: Support the work of the Accessibility Sub-Committee by resourcing their efforts to pursue an Australian Network of Disability Accreditation.

Action 7.1.1: Co-design Theme Action Plans to address theme specific SAGE survey results and create linkages between the SAGE Action Plan and GEDI Strategy.

> **Action 7.1.1:** Co-design Theme Action Plans to address theme specific SAGE survey results and create linkages between the SAGE Action Plan and GEDI Strategy.

> **Action 7.1.5:** Become a member of Diversity Council Australia to expand resources available to staff related to diversity and inclusion.

(v) Equity Impact Assessment of all Policies, Practices and Procedures

Before the self-assessment, MCRI had not formally considered GEDI in developing our policies, practices and procedures. Relevant Units write policies, and those linked to employment legislation are reviewed and signed off by an external employment lawyer. As explored in Section 4.4.iv, this results in inconsistent application of MCRI's diversity and inclusion statement and commitments across all policies. The Policy and Procedures Priority Area will address this gap.

MCRI has placed a greater focus on understanding the impact of policies and consulting staff on their experiences following the COVID-19 pandemic. During lockdowns, MCRI made significant efforts to seek feedback through surveys to inform our response, particularly concerning flexible working. Upon the decision to return to the office, MCRI also consulted with traditionally underrepresented groups. However, this had negative feedback as some D&I Committee groups felt their concerns had been ignored and overlooked. The co-design focus of the self-assessment process has illustrated how MCRI can be more effective when seeking consultation, and MCRI plans to build on this progress through the Action Plan.

> **Action Information**
>
> Co-design will enable the delivery of actions across Priority Areas, particularly Policies and Procedures. Action 3.4.15 seeks to establish an MCRI process to co-design that can be utilised across updates and future work. Action 3.4.10 will ensure that this approach is applied to regular reviews and that a co-design approach and best practice inform future Policies, Procedures, Practices and Programs. Action 3.4.11 will enable all staff to utilise a foundational co-design and intersectional lens to ensure equity moving forward.

> **Action 3.4.15:** Establish and commit to a co-design process that seeks input from those with expertise, lived experience and/or traditionally marginalised backgrounds, and relevant committees or external organisations when developing new policies, procedures and guidelines. The co-design process should acknowledge the contributions and suggestions made by relevant stakeholders responding to each item with a rationale for the final decision.

> **Action 3.4.10:** Finalise a review framework to conduct regular audits and amendments of MCRI policies informed by experts and people's experience.

> **Action 3.4.11:** Develop an intersectionality checklist for MCRI's Policy and Project Development.

(vi) Visibility of Role Models

There has been no formal or institutional guideline to consider Gender equity or diversity at events such as seminars or workshops at MCRI. However, the David Danks committee, responsible for choosing speakers for MCRI's flagship seminar series, invites speakers who are leaders in their field and aims for a Gender balance across the year. Diversity is considered mainly in relation to scientific

discipline; however, the group does seek to include at least one Indigenous speaker and one speaker from a traditionally underrepresented group each year. No data related to the Gender or diversity of speakers is available as the Danks Committee has not collected this consistently or appropriately. However, only 64% of GEDI Survey respondents feel that MCRI has people of all Genders as visible role models.

Action Information

The lack of formal targets and an institutional approach (Policies and Procedures) to GEDI has resulted in an ad-hoc approach to the visibility of role models. Action 5.2.1 establishes clear targets and creates the impetus for MCRI to collect this data for monitoring and reporting.

Action 5.2.1: Commit to 40:40:20 representation for invited speakers and seminar chairs/facilitators and proactively seek speakers from various cultural backgrounds, ages, physical abilities, sexual orientations, and Gender identities when seeking presenters.

The lack of an institutional approach to GEDI has created similar issues in both our internal and external communications. The Communications Audit revealed that MCRI communications templates do not include instructions or resources that could drive a culture of inclusion, such as:

- An Acknowledgement of Country Statement
- An Inclusive Language and Imagery guide (As of April 2022, the branding guidelines mention diversity, but the stock images lack representation of LGBTQIA+, disabled, and multicultural people and families.)
- Accessibility Adjustments and Considerations
- Pronoun and Name Recognition
- Inclusion Commitments for Media Opportunities

Without an institutional approach and more formal information to guide this work, we found that internal communications related to SAGE topics (diversity, career progression, recognition, and growth & wellness) make up only 30% of all MCRI communications, as depicted in Figure 67. This suggests that these are not priorities for MCRI and are not considered at the start of the year. This conclusion is further compounded by the fact that our diversity is mainly recognised on significant days, such as International Women's Day or Wear It Purple Day. There is a perception that MCRI only considers GEDI in events, publicity materials and media opportunities as a "tick-boxing exercise[54]," We hope to change these perceptions through the actions below.

Figure 67: Internal Communications Post Topics 2018-2022

- 70% All other
- 6.16% Diversity
- 2.82% Career Stage and Focus
- 13.7% Reward and Recognition
- 7.04% Growth and Wellness

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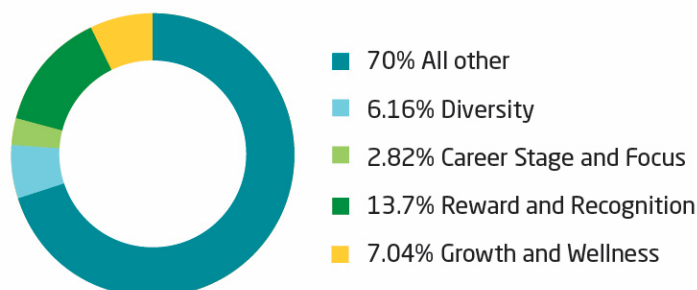
[54] Focus Group Participant

Action Information

The perception that MCRI uses GEDI as a 'tick boxing exercise' can contribute to a pessimistic workplace culture where some don't believe we care for their wellbeing and safety or value the diversity of our people. Actions 4.4.1.c, 5.2.3 and 5.3.2, build on the Policy and Procedures Priority Area to create guidance and expectations on our regular work practices. Actions 1.4.3, 5.4.1 and 5.4.3 enable us to communicate an ongoing commitment to this work and combat views that may contribute to a more negative workplace culture for some.

Action 1.4.3: Establish a GEDI Awareness Campaign to raise awareness of the importance of GEDI in our workplace, celebrate and support our diverse workforce and share resources to educate our people on GEDI topics of significance.

Action 4.4.1.c: Establish expectations that early career women staff join senior staff at media events, conferences, meetings, and other networking events whenever feasible.

Action 5.2.3: Revise MCRI's Templates and Branding to include guidelines on appropriately representing the diversity of our people.

Action 5.3.2: Institute and promote guidelines for the Acknowledgement of Country by all speakers and in all relevant meetings.

Action 5.4.1: Establish a GEDI Calendar and Strategy that assigns an executive representative to acknowledge days of significance related to GEDI and creates the impetus for increased participation and engagement.

Action 5.4.3: Establish a communications strategy to celebrate GEDI and combat negative perceptions in the workplace.

When celebrating the achievements of our people, MCRI showcases the progress, outcomes, and success stories of individuals across various platforms, including Town Halls, our website, annual reports, and the media. Staff have indicated that across these platforms, there is a focus on profiling "superstars." For example, Town Halls have an agenda item where the Director highlights MCRI's "superstars" or "rising stars" who have been successful in competitive grants or have made a significant impact with their research. While the Office of the Director seeks agenda items and success stories to raise in the Town Hall, it has been flagged with the SAT that the focus on superstars at MCRI can be alienating and demotivating. Across all qualitative collection methods, people shared that "highly visible leaders and star achievers get all the attention[55]," and "many quiet achievers [are] overlooked[56]," so if your Group or team does not take time to acknowledge your work, there are "almost no opportunities to celebrate workplace achievements that are not research-based or do not align with MCRI's version of success[57]." Given all staff emails are not standard practice, MCRI's intranet is overloaded, and celebration drastically varies by Group and People Leader (Table 52), we must rethink how we celebrate our people.

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[55] GEDI Survey Comment
[56] Career Conversation Participant
[57] Focus Group Participant

Table 52: "Achievements are equally celebrated in my team" GEDI Survey Response by Group and People Leader Spread

Question	Overall Percentage Score	Population	Group Spread (Lowest Score to Highest Score)	People Leader Spread (Lowest Score to Highest Score)
Achievements are equally celebrated in my team	77%	848	62% Spread (38-100)	67% Spread (33-100)

Action Information

The focus on "rising stars" contributes to a workplace culture where those considered "successful" progress through a self-fulfilling cycle regarding access to Professional Development and Career Pathway progression. Actions 6.4.1, 6.4.2 and 6.4.3 will enable the celebration of our diverse people and contribute to a workplace culture that celebrates achievements and elevates other forms of success for development and progression.

Action 6.4.1: Ensure non-academics are included in recognition announcements and end-of-year awards.

Action 6.4.2: Establish a reward and recognition program to recognise those who uphold MCRI's values and workplace culture.

Action 6.4.3: Establish a NAIDOC Award to recognise the contribution of staff members (Indigenous or non-Indigenous) to advancing Aboriginal and Torres Strait Islander health and wellbeing.

SAGE Athena
Swan Action Plan

2024-2031

5. Action Plan

MCRI's SAGE Athena SWAN seven-year Action Plan is a product of a five-month co-design process that engaged our people at all levels to consider the findings of the self-assessment and recommend actions based on institutional data and national/global evidence of best practice. This process included:

- One **Sense-Making Workshop**, where the Self-Assessment Team (SAT) identified MCRI's Problem Areas.
- A **Priority Identification Exercise**, where the Core SAT mapped MCRI's problem areas against the SAGE application to identify our Priority Areas in consultation with relevant stakeholders.
- Multiple **Ideation Focus Groups** where all staff could recommend and request action for each Priority Area.
- **Action Plan Consultation Sessions** with relevant stakeholders to ensure an intersectional approach and actions that consider the needs and experiences of all our people.
- Several **Action Planning Workshops** where the Coordination Team, MCRI and Gender Equity, Diversity, and Inclusion (GEDI) Leaders from across MCRI considered the outcomes of the Ideation Focus Groups and Action Plan Consultation Sessions against MCRI's strategy, projected budget, planned work and capacity to propose a draft Action Plan for feedback; and
- **Feedback Opportunities** to those who participated in focus groups and the SAT to consider and recommend additions or changes to draft action plan prior to Director Approval.

MCRI's co-design process has been instrumental in fostering a sense of ownership and dedication among our people to actively engage with and support the action plan presented in this application. Further, the co-design process allows for increased transparency on our overarching areas for improvement. Table 1 outlines the seven Problem Areas identified by the SAT in the Sense-Making Workshop.

Table 53: MCRI Problem Areas

Problem Area
1. Resourcing for GEDI
2. Inefficient, Incomplete and Disjointed Staff and Student Data Collection Processes
3. Leaders at All Levels Do Not Have the Time, Capacity, Experience and/or Knowledge to Properly Engage with Issues Related to Gender Equity, Diversity and Inclusion and Drive Cultural Change
4. Insufficient and Untransparent Processes to Support Career Development and Progression are Vulnerable to Inconsistency, Bias, and Favouritism- Driving Underrepresentation
5. Suboptimal Psychological Safety at All Levels of the Institute Creates an Environment of Insecurity, Fear, Avoidance and Hierarchy
6. Policies and Processes are Outdated and Not Fit for Purpose
7. Complexity of MCRI Complicates Finding Shared Priorities

These problem areas were mapped to the workplace barriers outlined in the SAGE application to identify MCRI's five Institute Wide Priority Areas, as pictured in Table 2 Resulting in our five Institute Wide Priority Areas, Policies and Procedures; Workload and Flexibility; Professional Development; Career Pathways and Workplace Culture, and one 'Sub-Group" Specific Priority Area in Accessibility and Mental Health (Figure 1).

Table 54: MCRI Problem Area and Priority Area Matrix

Problem Area	Priority Area					
	Equity and Diversity Policies and Procedures	Workload Flexibility	Support for Professional Development	Career Pathways	Workplace Culture and Safety	Accessibility and Mental Health
Leaders at All Levels Do Not Have the Time, Capacity, Experience and/or Knowledge to Properly Engage with Issues Related to Gender Equity, Diversity and Inclusion and Drive Cultural Change	X	X	X		X	X
Insufficient and Untransparent Processes to Support Career Development and Progression are Vulnerable to Inconsistency, Bias, and Favoritism, Driving Underrepresentation	X		X	X		X
Suboptimal Psychological Safety at All Levels of the Institute Creates an Environment of Insecurity, Fear, Avoidance and Hierarchy		X	X		X	X
Policies and Processes are Outdated and Not Fit for Purpose	X	X		X	X	X
Complexity of MCRI Complicates Finding Shared Priorities Related to Communications and Education		X	X		X	X
Resourcing for Gender Equity, Diversity, and Inclusion	X	X	X	X	X	X
Inefficient, Incomplete and Disjointed Staff and Student Data Collection Processes	X	X	X	X	X	X

Our priority areas

Policies and procedures
Ensure that our workplace embeds the values of Equity and Diversity in our Policies, Procedures, Practices and Programs.

Workload /flexibility
Alleviate workload stress by creating flexibility for our people to succeed.

Professional development
Improve our Professional Development opportunities to support our people to achieve their best and develop their skills.

Career pathways
Strengthen MCRI's current approach to career progression by expanding Career Pathways and revamping associated processes to ensure people at all levels are well informed and considered.

Culture and safety
Align our Workplace Culture with MCRI's values to improve and cultivate Psychological Safety for all our people.

Accessibility and mental health
Recognise the impact of Disability and/or Mental Health concerns on people experience and wellbeing and take targeted action to address these concerns across all priority areas.

Our Action Plan is focussed on these 6 priority areas to deliver outcomes that embed GEDI values, improve professional development, align our culture to our values, alleviate workload stress, create flexibility, strengthen our approach to career development for all our people, including those with disability and/or mental health concerns. With dedicated budget, project management and governance planned and/or established, we are confident that those responsible and accountable for each action can deliver real outcomes and change through actions that address multiple priority areas in a comprehensive and strategic manner. The action plan is presented as a phased timeline to allow for cross-priority actions and illustrate how actions are built upon each other.

Key

Timeline

◯ = not yet started

◯ = started

✓ = completed

Priorities

Equity and diversity policies and procedures

Workload /flexibility

Professional development
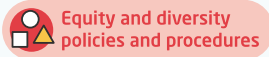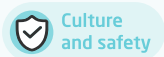
Career pathways

Culture and safety

Accessibility and mental health

PHASE 1: Establish Institutional Frameworks, Strategies and Systems to Deliver SAGE Action Plan at MCRI

Strategy and Rationale	Action	Timeline	Responsibility	Accountability	Success Measures
1.1 Strengthen and Expand Organisational Commitment and Strategies to deliver GEDI. ▪ *The application of MCRI's values, particularly our commitment to GEDI, has been inconsistent across Teams and People*	**1.1.1** Establish an all-staff engagement and education process to revitalise MCRI's values and collaboratively explore and define how our values can be embedded in our code of conduct and performance and behaviour frameworks to ensure GEDI is a part of our culture. 🔴 Equity and diversity policies and procedures 🛡 Culture and safety	**Q1 2024 – Q4 2025** 🔵	• Engagement & Development Team • People & Culture Team	• Director of Engagement & Development • Director of People & Culture	i. By Q3 2024, at least 2 staff from each Theme and Unit participate in Value Co-Design process. ii. New and/or amended values framework by end of Q4 2025. iii. 80% Positive Score on GEDI Survey questions related to how MCRI upholds and lives our values.

Leaders. This is a result of lack of Institutional strategies, policies, procedures, practices and programs that drive a culture of equity and inclusion and creates responsibility for all our people to uphold our values and contribute to our goals. ▪ *Strengthening our commitment to GEDI by establishing formal goals and embedding them at the highest levels will ensure that GEDI is always on the agenda and will build accountability for our People Leaders at all levels.*	**1.1.2** Expand MCRI's current Diversity and Inclusion statement to include a comment and/or recognition of the importance of intersectionality in consultation with the Diversity and Inclusion Committee and critical stakeholders. Reframe commitment as "Aims" to acknowledge that GEDI is not a destination but a process requiring continued work through relevant mechanisms such as a GEDI Strategy, the SAGE Action Plan and other campus-wide mechanisms. 🛡 **Equity and diversity policies and procedures** 🛡 **Culture and safety**	**Q1 2024 – Q4 2025** ◯	• GEDI Team (within the broader People & Culture team) • Diversity and Inclusion Committee	• Director of People & Culture	i. Revised more nuanced statement that explicitly mentions intersectionality and demonstrates a commitment to addressing unique challenges developed by Q4 2024. ii. Engagement from at least 50% of Group Leader/ Unit Heads and at least 1 member of relevant stakeholder groups (Themes, Aboriginal Reference Group, Diversity and Inclusion Committee) in the co-design process. iii. GEDI becomes a more concerted part of MCRI's story in Annual Reports, Town Halls and External Communications. iv. GEDI is embedded across MCRI's regular practice such as meeting acknowledgements and performance discussions. v. 80% Positive Score on Diversity, Equity and Inclusion Survey Factor.
	1.1.3 Take steps to amend MCRI's Health, Safety and Wellbeing Strategy through a co-design process that considers the Campus Mental Health Strategy and	**Ongoing** ◯	• People & Culture Team • Environmental Health & Safety Team	• Director of People & Culture	i. By Q3 2025, at least 2 staff from each Theme and Unit participate in Health, Safety and Wellbeing Strategy Co-Design process.
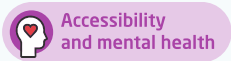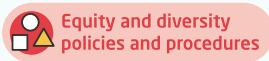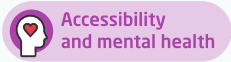
the results of the SAGE self-assessment that will support and guide overall psychological, physical, and emotional wellbeing at work through: a. Mental health awareness training b. Employee-led Wellbeing Initiatives c. Providing guidance to People Leaders and staff d. Building the capability of our people to manage periods of change e. Holding sessions for managers on managing workloads and wellbeing. f. Evaluating and reporting outcomes g. Establishing a Mental Wellbeing Committee **Equity and diversity policies and procedures** **Workload /flexibility** **Culture and safety** **Accessibility and mental health**			• Head of Environment, Health & Safety	ii. Development of Health, Safety and Wellbeing 4-year action plan (2026-2030) to deliver relevant strategies by Q4 2025. iii. Standalone training modules for mental health and wellbeing developed and available by Q2 2026 and have 80% completion from staff by Q2 2027. iv. Mental Wellbeing Committee established by Q1 2026 and has clear responsibilities to deliver the Health Safety and Wellbeing Strategy and regularly reports progress to Board and in Annual Reports. v. Wellbeing strategy and initiatives lead to a 10% increase in Career Satisfaction and Wellbeing GEDI Survey question scores. vi. 5% improvement in Comfort and Safety Factor score across all demographics. vii. Survey, focus group and interview comments indicate that People Leaders are more responsive to wellbeing, health and safety concerns.
1.1.4 Commit to taking substantial action for reconciliation by developing a "Reflect" (first stage) Reconciliation Action Plan (RAP) via Reconciliation Australia that considers gender equity across structure, leadership, research	**Q1 2024 – Q4 2026** ◯	• GEDI Team • Aboriginal Reference Group	• Institute Director	i. Reconciliation and Aboriginal and Torres Strait Islander Inclusion becomes a more concerted part of the Institutional story in Annual Reports, Town Halls and External Communications and are emphasised as ongoing commitments.

focus, impact, capacity building, engagement, and translation in consultation with relevant stakeholders 🔴 Equity and diversity policies and procedures				ii. The RAP is completed by Q4 2026 in consultation and collaboration with Aboriginal and Torres Strait Islander staff at MCRI and contains an accountability framework to ensure that commitments are met. iii. Targets for the equal recruitment of Aboriginal and Torres Strait Islanders set and applied to MCRI's SAGE Action Plan. iv. Gender Equity considerations are integrated into the RAP across various dimensions, such as leadership, research focus, impact, capacity building, engagement and translation. v. One Executive Sponsor is assigned for 2-years to the RAP. vi. 5% decrease in "Neutral" score in response to GEDI Survey Question "Discrimination on the basis of Aboriginal or Torres Strait Islander heritage." vii. New questions in the GEDI survey related to the RAP indicate 75% favourable sentiment towards MCRI's commitment to Reconciliation.
1.1.5 Commit to undergoing a Cultural Safety audit to develop a Cultural Security Framework that addresses institutional and structural racism for Aboriginal and Torres Strait Islander	**Q1 2024 – Q1 2026** ◯	• GEDI Team • Aboriginal Reference Group	• Institute Director	i. Cultural Safety Audit project plan developed with key milestones and timelines for completion by Q3 2024. ii. Cultural Safety Audit completed by Q3 2025. iii. Cultural Safety Framework developed by Q1 2026, the framework addresses

	staff at MCRI in line with the Reconciliation SAGE Action Plan. **Accessibility and mental health**			power imbalance and has provisions to address areas for improvement related to institutional and structural racism at MCRI. iv. Cultural Safety Framework recommendations are incorporated into MCRI's SAGE Action Plan and Reconciliation Action Plan. v. At least 2 staff members from each Theme and Unit participate in Safety Audit and 3 Senior Leaders (Group Leader and/or Unit Head up) engage in audit process.
1.2 Establish an institutional governance and accountability framework to embed GEDI at all levels of MCRI. ▪ *The SAGE Self-Assessment revealed that in addition to a lack of strategy related to GEDI, there is a lack of clarity on who is ultimately responsible for GEDI at MCRI which results in disjointed*	**1.2.1** Building upon MCRI's SAGE Action Plan and MCRI's values, develop a GEDI Strategy through an intersectional lens that articulates MCRI's commitment to GEDI and creates a framework to embed GEDI and relevant initiatives. (i.e., LGBTQIA Strategy or Health, Safety and Wellbeing) in the objectives and strategies of current and future Institute Strategic Plans. **Equity and diversity policies and procedures** **Culture and safety** **Accessibility and mental health**	**Q2 2024 – Q3 2026**	• GEDI Team	• Institute Director • Director of People & Culture	i. MCRI embeds GEDI in its brand and institutional strategies through clear recognition and aligned actions. ii. GEDI Strategy is developed by Q2 2025 and outlines key expectations and responsibilities of all people to uphold GEDI in alignment with our values and includes actionable objectives and initiatives that can be implemented alongside the SAGE Action Plan. iii. GEDI is embedded in MCRI's next Strategic Plan. iv. GEDI is included in MCRI institute key performance indicators to measure progress and impact at an institutional level.
	1.2.2 Appoint additional or identify existing Executive and Board Member(s) who	**Q4 2023 – Q1 2027**	• GEDI Manager	• Institute Director	i. Responsibilities related to GEDI, Workplace Safety, Accessibility, Mental Health and Cultural Safety/Change are
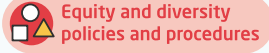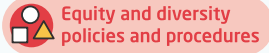
priorities, data collection and outcomes. ▪ *High workloads prevent most (especially senior leaders) from participating in Committees or service work outside of their direct responsibilities.*	are accountable for GEDI, Workplace Safety, Accessibility, Mental Health, and Cultural Safety/Change. Equity and diversity policies and procedures · Culture and safety Accessibility and mental health	◯	• Director of People & Culture		included in 3 Executive Member Remit and Responsibilities by Q1 2027. ii. Senior Leader roles and responsibilities align with MCRI's governance structure and contribute to our overall strategic objectives. iii. Roles and responsibilities of the Executive and Board members are transparently communicated to our people with regular reports on activities and achievements. iv. 80% score for GEDI Survey question "Leadership in my organisation understand the need to engage with issues relating to equality."
▪ *Building formal governance to deliver the SAGE Action Plan and GEDI at MCRI will ensure that work is coordinated, and that GEDI is considered part of Senior Leader responsibility.*	**1.2.3** Repurpose the role of the Diversity and Inclusion Committee and MCRI's SAT to establish a new Workplace Committee (name TBC) to expand on the work of the SAT and shift to the implementation of the 2024-2031 SAGE Action Plan. In the Workplace Committee Terms of Reference Outline: a. Expected Membership (including leadership participation) b. Formalised Roles and Duties within Position Descriptions c. Decision-Making Power d. Budget Equity and diversity policies and procedures · Culture and safety	**Q1 2024 – Q1 2025** ◯	• SAGE SAT • Diversity and Inclusion Working Groups	• Institute Director	i. Committee and Terms of Reference (ToR) established by Q3 2024. The ToR will outline rules and duties and purpose. ii. At least 1 staff member from each Theme and Unit and at least 2 Senior Leaders (Group Leader/Unit Head up) is represented in the committee. iii. GANTT Chart and Workplan for committee developed to support the delivery of the action plan by Q1 2025. iv. One off survey to committee members (Q1 2025) indicates that they have effective decision-making power and appropriate budget to succeed.
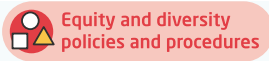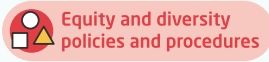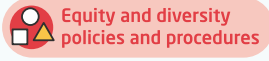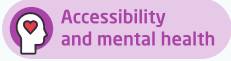
	Accessibility and mental health				
	1.2.4 Outline commitment to building greater diversity in partnerships, in our procurement and supply chain practices and in serving the community through respectful engagement that reflects leading practice. **Equity and diversity policies and procedures**	**Q1 2024 – Q1 2026** ◯	• Finance • Growth and Innovation	• Chief Financial Officer • Director of Engagement & Development • Director of Innovation	i. Statement made by Q1 2025. ii. Policy and Procedure developed by 2026. iii. Regular assessment (every 2 years) of the diversity of our partners and collaborators demonstrates at least 20% representation of traditional underrepresented groups such as minority-owned business and organisations ed by individuals from diverse backgrounds.
1.3 Commit to formal targets and strategies to increase diversity of MCRI at all levels. ▪ *MCRI's Sex/Gender Ratio (80:20) is not reflected across MCRI. Areas of concern include the Board of Directors (33:67), the Executive Committee (38:62), the Senior Management Team (33:67), Academic Level E (56:44), Academic*	**1.3.1** Develop a leadership strategy to reach or maintain 40:40:20 (women: men: people of any Gender) Gender representation at the Board of Directors, Executive and Decision-Making Committees. **Equity and diversity policies and procedures**	**Ongoing** ◉	• Senior Management Team	• Institute Director	i. MCRI Leadership clearly define and communicate Gender representation goals and timeline for achieving them to staff by Q1 2025. ii. Gender Equity included on Board, Executive and Decision-Making Committee agendas every quarter. iii. All Board Committees are Gender balanced by 2030.
	1.3.2 Develop a strategy to increase the diversity of the Board of Directors, Executive and Decision-Making Committees, specifically considering the representation of culturally and racially marginalised (CARM), LGBTQIA+ and Indigenous Communities.	**Ongoing** ◯	• Senior Management Team • Executive Team	• Institute Director	i. Policy and Strategy is developed and agreed to by Director and Board that commits to the Board and Executive Teams to reflect MCRI demographics by 2030 by Q1 2026. ii. Diversity and Inclusion included on relevant agenda every quarter. iii. Progress on achieving diversity goals in Leadership reported annually to staff.
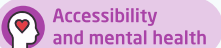
Level D (43:57) and various Individual Contracts (56:44). Establishing formal targets to reflect MCRI's Sex/Gender Ratio will allow for MCRI to increase women's representation at relevant levels.	🔴 Equity and diversity policies and procedures				iv. Board of Directors, Executive and Decision-Making Committees better reflect MCRI's staff demographics by Q4 2030.
	1.3.3 Align Executive Succession Planning Strategy to SAGE self-assessment learnings to outline steps to achieve and maintain Gender representation and reflect the diversity of our people on the Executive Team. 🔴 Equity and diversity policies and procedures 🟢 Career pathways	**Ongoing** 🔵	• People & Culture Team • Office of the Director	• Director of People & Culture	i. Succession Strategy is completed and shared with staff to communicate commitment to staff development by Q1 2025. ii. Succession Strategy revisited every 2 years to adjust based on learnings and decision-making group membership data. iii. Development of a comprehensive succession plan for each Executive Member that includes a diverse pool of candidates and clear pathways for advancement by Q1 2026. iv. At least 25% of new Executive Team members are hired internally by 2030.

*   *Demographic data collected by the GEDI Survey indicates that MCRI reflects Victoria's demographic as of the 2021 Census. However, lack of intersectional data collection makes it difficult to account for diversity and the representation of traditionally underrepresented groups at senior levels. Considering 86% of the Board, 61% of the Executive Committee and*

	1.3.4 Set a target for increasing the representation of women at Research Levels C, D, E, Professional Levels 9+10, Individual Contract Researchers, and Clinician Researchers in line with MCRI's Sex/Gender ratio (to have this ratio be 60:40 women-to-men in 7 years), through the promotion of existing women to this Level as a first option and recruitment where needed and/or identified.	**Ongoing** 🔵	• Office of the Director • Research Theme Directors	• Deputy Director	i. Define next generation of women leaders by Q3 2025 (complete). ii. Specific Gender representation targets for each Classification Level established to make progress towards representing MCRI's Sex/Gender ratio by Q3 2024. iii. Yearly review of Sex/Gender Ratio at all Levels demonstrates progress towards Gender Equity (depending on level this may be increase of women or men). iv. MCRI Sex/Gender Ratio is 60:40 at all Levels in 7 years (leaning towards more women).

100% of the Senior Management Team identified as Australian and 100% of all listed groups identified as heterosexual and did not report lived experience with disability and/or a mental health concern, greater care to consider diversity in reaching our Gender Targets must be taken.	**1.3.5** Appoint Aboriginal and Torres Strait Islander researchers on 2-year contracts to create job security for relocation. ⬤ Equity and diversity policies and procedures ⬤ Career pathways	**Ongoing** ◯	• Office of the Director • Research Teams	• Deputy Director	i. Consult with Aboriginal and Torres Strait Islander communities to ensure that the proposed 2-year arrangement aligns with community expectations and priorities. ii. 7 Aboriginal and Torres Strait Islander Researchers hired by MCRI on 2-year contracts by 2031. iii. Impact of longer-term contracts on job security and retention of Aboriginal Torres Strait Islander researchers positively assessed at conclusion of year 7.
1.4 Resource and support internal communications function at MCRI to support the delivery of the Action Plan and MCRI change priorities. ▪ *The Communications Audit revealed that MCRI's approach to internal communications*	**1.4.1** Develop an ongoing Change Management, Communications and Engagement Strategy to ensure staff, students and external stakeholders are aware of MCRI's commitment to GEDI and a culturally safe workplace, participate in relevant opportunities to change our workplace and are well informed on MCRI's progress and internal support mechanisms. ⬤ Equity and diversity policies and procedures ⬤ Culture and safety ⬤ Accessibility and mental health	**Ongoing** ◯	• Office of Director • Engagement and Development Team	• Chief of Staff • Head of Communications	i. Change Management, Communications and Engagement Strategy developed by Q1 2025. ii. 10% increased engagement in co-design process and Action Plan activities. iii. 80% participation in GEDI training modules available and/or required by MCRI. iv. GEDI is added to our value proposition on 100% of future job advertisements. v. 10% increase in Leadership GEDI Survey Factor Score.
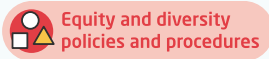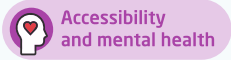
lacks the resources and support to drive a culture of inclusion. The internal intranet is overloaded, engagement opportunities are not appropriately disseminated, the Communications team has little capacity to support additional work and MCRI's leadership communications is inconsistent. This results in a Low GEDI Survey Factor score for Leadership (57%). Of 900 respondents, 54% are satisfied with how leaders make decisions, 59% feel there is open and honest two-way communication, 47% feel decision making is transparent, and 66% feel there is good	**1.4.2** Create a Positive Feedback Loop Mechanism that improves workplace transparency and builds a culture of two-way feedback and honest communication. ⊘ Culture and safety	**Ongoing** ○	• Office of Director Engagement and Development Team	• Chief of Staff • Head of Communications	i. Feedback loop practices established by Q1 2025 and clear communication plan to inform our people on the mechanism, its purpose and how to use it developed. ii. More regular and impactful communications related to workplace changes, benefits and projects resulting in a 35% click rate on new information. iii. Improved organisational transparency across themes and groups. iv. 30% increase in scores on GEDI Survey questions "I feel that there is open and honest two-way communication between staff and leadership," "there is good communication between management and staff in my organisation," and "I feel leaders decision making in my organisation is transparent."
	1.4.3 Establish a GEDI Awareness Campaign to raise awareness of the importance of GEDI in our workplace, celebrate and support our diverse workforce and share resources to educate our people on GEDI topics of significance. ⊘ Culture and safety ♥ Accessibility and mental health	**Ongoing** ○	• GEDI Team	• Director of People and Culture	i. Awareness campaign strategy established by Q3 2024. ii. Dedicated GEDI Page on intranet established by Q1 2025. iii. Increase engagement, membership, awareness, and celebration of MCRI's diversity and inclusion work and committees over 7 years (data not available for 2022 so improvement will be based on first year of collected data).

communication between management and staff. Bolstering our communications will ensure that all our people are aware of our commitment to GEDI and are fully engaged.				
1.5 **Create an Institute wide data collection plan and strategy that identifies areas where Gender, cultural background, disability, mental health concerns, sexuality, caring responsibilities, academic level, remuneration and/or FTE capacity information should be collected for SAGE implementation, monitoring evaluation and learning (MEL) purposes and create a standard approach to data collection.**	**1.5.1** Collaborate with the systems working group to upgrade the Human Resources Information System (HRIS) and relevant Backend Systems to: a. Collect information on Gender versus Sex to prevent assumptions based on names and legal Sex. b. Enable non-discriminatory Gender labelling and workplace accessibility requests in staff records and amend relevant forms and onboarding systems so that people are not misgendered, their name isn't mispronounced, or they don't have to share their accessibility needs with every person they interact with while keeping sensitive information confidential. c. Report on GEDI across career life cycle including recruitment,	**Q1 2024 – Q1 2028**	• HRIS Project Team	• Chief Operations Officer	i. GEDI Team included in HRIS Project team and develop Interim plan to collect relevant data for SAGE prior to new HRIS established by Q1 2025. ii. Project plan for HRIS Change established by Q4 2025. iii. Adaptable and flexible HRIS system picked and established for MCRI's needs by Q1 2028. iv. HRIS System allows MCRI to provide full and accurate data sets in the SAGE Athena SWAN Silver award application.

Historical data collected by MCRI's Human Resources Information System (HRIS) and reported to the WGEA is only available by Sex, no intersectional factors are available. As a result, data related to Gender, Aboriginal and Torres Strait Islander background, cultural background, disability status and sexuality was unavailable for most of the SAGE Application making meaningful and comprehensive analysis difficult. *MCRI does not have an Institute Data Plan, as a result data not related to*	application, short listing, interview, offers, promotion application/success and career aspirations. d. Ensure the new HRIS captures and reports comprehensive data on recruitment, promotions (applications, success rates etc.) and reclassifications including gender, level being applied for and full-time and part time status. e. Uphold policies in a consistent way. **Equity and diversity policies and procedures** **Career pathways** **Accessibility and mental health**			
	1.5.2 Collaborate with relevant departments, Themes, and committees to establish, align and/or expand data collection methods to lessen data gaps and inconsistencies revealed during self-assessment process, including: a. Parental leave data including length of leave, contract type, renewal of contracts during and after parental leave, intentions and desires, changes to rotes etc. b. Completion of GEDI training modules across various career checkpoints c. Progress on the application of new policies	**Q1 2024 – Q1 2027**	• GEDI Team • TBC SAT/ Diversity and Inclusion Committee	• Director of People & Culture	i. Data gaps identified and mapped from SAGE Application and RAP by Q3 2024. ii. GANNT/ Project plan established by Q1 2025. iii. Changes made in line with SAGE requirements and in consultation with relevant stakeholders to ensure most accurate, relevant, and appropriate data collection by Q1 2027. iv. Data collected allows MCRI to accurately and fully report on trends and progress across 4 years in SAGE Silver application. v. Data collected allows MCRI to fulfill its reporting requirements under the

workforce and/or payroll is collected by individual teams as they deem fit. This results in inconsistent data sets that make analysis difficult.

- *As a research institute, MCRI must base our plans for action and change on data. Improving our data collection systems will result in more robust conclusions and action plans in the future.*

d. Gender differences over the recruitment cycle for senior positions
e. Applications, EOIs and success rates for internal grants by gender
f. Attendance of internal and external professional development and training opportunities
g. Membership of internal committees
h. Exit Rate and Exits by Reason
i. Committee outreach activities, workload and time contributed for the PFD framework.
j. Tracking for social events, awards
k. Leave taken
l. Aligning publications to HRIS system
m. Performance Development Framework completion, review ratings and core behaviour ratings
n. Impact on recruitment, promotion, and leadership of women
o. Diversity of images and text in communications
p. Meeting times
q. Student scholarship applications and recipients

Equity and diversity policies and procedures

Workload /flexibility
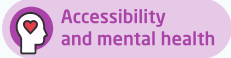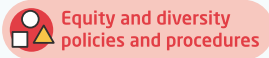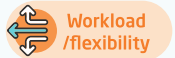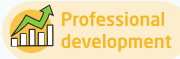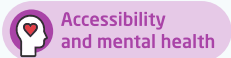
Professional development

Career pathways

Culture and safety

Workplace Gender Equality Agency (WGEA).

	Accessibility and mental health				
1.6 **Explore the allocation of an ongoing budget line for the administration, implementation and evaluation of GEDI initiatives and Athena SWAN actions across MCRI.** ▪ *Considering workload stress is a Problem Area for MCRI, ensuring that GEDI work has the proper resources, staffing and budget to complete the SAGE Action Plan and aligned GEDI work will prime MCRI for success and will alleviate burden from traditionally underrepresented groups who currently progress this work unpaid.*	**1.6.1** Appropriately fund and hire a GEDI team with the relevant skills and expertise to lead the completion of the SAGE Action Plan including but not limited to: a. Data Analysis b. Subject Matter Experts c. Aboriginal and/or Torres Strait Islander-identified position d. GEDI Research Officer(s) Equity and diversity policies and procedures Workload /flexibility Professional development Career pathways Culture and safety Accessibility and mental health	**Q4 2023 – Q1 2027**	• GEDI Manager • Head of People & Culture Operations	• Director of People & Culture	i. Initial team with the relevant skills and expertise in gender equity, diversity and inclusion including knowledge of best practices and strategies recruited by Q1 2024. ii. 7-year SAGE budget prepared by Q3 2024 that outlines funding and resources to achieve SAGE Athena SWAN Silver Award. iii. Team expanded to full size by Q4 2027 and reports 50% completion of SAGE Action Plan. iv. Increased budget and headcount for the GEDI team annually (data not available for 2022 so improvement will be based on first year of collected data).
	1.6.2 Resource teams that have direct responsibility for Action Items to support the completion of the Action Plan, including: a. People and Culture and Operations to deliver training. b. Points of Contact and Coordinator for Safety, Accessibility and Mental Health work c. Corporate/Internal Communications	**Ongoing**	• Chief Operating Officer	• Institute Director	i. MCRI recognises importance of research support teams to deliver GEDI strategy and ensures adequate resources (funding, personnel, and time) are allocated to teams. ii. Increase in budget and headcount for these groups annually (data not available for 2022 so improvement will be based on first year of collected data).

| | | | iii. | Each relevant Team or Unit reports 50% completion of their responsible actions by Q4 2027. |

Equity and diversity policies and procedures   **Workload /flexibility**

Professional development   **Career pathways**

Culture and safety

Accessibility and mental health

PHASE 2: Progress Current Projects Related to GEDI Infrastructure and Reporting

Strategy and Rationale	Action	Timeline	Responsibility	Accountability	Success Measures
2.1 Continue and improve MCRI reporting and reach of internal communications. ▪ *MCRI internal and external communications are established, however they are not as effective as desired given competing messaging and an overrun intranet. Taking steps to improve on existing communications will improve*	**2.1.1** Continue to incorporate GEDI outcomes and progress against the SAGE Action Plan in annual reports to the Executive and Board. Including annual reporting of workforce and committee composition, and GEDI performance indicators across leaders. **Equity and diversity policies and procedures**	**Ongoing**	• GEDI Team	• Director of People & Culture	i. GEDI efforts and SAGE activities are reported in every annual report from 2024-2031. ii. All annual reports from 2025-2031 provide detailed information about workforce and committee composition, highlighting MCRI's commitment to diversity and inclusion in leadership positions and decision-making bodies.
	2.1.2 Improve the reach of regularly posted information and job vacancies on MCRI's intranet. Regularly post to encourage internal staff, particularly women, to apply. **Career pathways**	**Ongoing**	• People & Culture Team	• Director of People & Culture	i. Internal Job board moved to more prominent part of MCRI's intranet by Q4 2024. ii. 75% of new roles are advertised on Intranet by Q4 2025. iii. 10% annual increase in number of internal women applicants for roles (data not available for 2022 so

understanding of MCRI's commitment to GEDI and our people's ability to move along career pathways.				improvement will be based on first year of collected data).
2.2 Continue to regularly self-assess our progress and practice. ▪ *Monitoring and evaluating our work regularly will provide MCRI the evidence and learning to ensure our Action Plan is a live document that can change based on feedback, new information and evolving contexts. Considering the length of the GEDI Survey, regular check points to deep dive on certain topics will allow more robust analysis. Regular pay reviews and audits will further allow us to stay*	**2.2.1** Continue to conduct regular surveys (SAGE and Engagement) to: a. Seek feedback and build a culture of continuous improvement and two-way communication b. Measure culture within groups c. Understand staff makeup and experiences d. Explore issues raised e. Track progress f. Identify gaps g. Adjust actions as needed 🔴 **Equity and diversity policies and procedures** 🟠 **Workload /flexibility** 🟡 **Professional development** 🟢 **Career pathways** 🔵 **Culture and safety** 🟣 **Accessibility and mental health**	**Ongoing** 🔵	• People & Culture Team • GEDI Team	• Director of People & Culture	i. Engagement Survey run bi-annually and Pulse Surveys every-other year. ii. SAGE GEDI Survey run bi-annually. iii. At least one Priority Area specific pulse survey run by 2031. iv. GEDI Survey questions and length of survey amended based on learning from the self-assessment process by 2025. v. Higher participation rate (70%) in future organisation wide surveys. vi. Cultural Metrics and Feedback allows P&C team to gather insights, identify gaps and address issues raised at Group and Team Level.
	2.2.3 Continue to conduct bi-annual salary and pay-equity reviews by Gender, career stage (Levels/steps) and "like-for-like" position to investigate any	**Ongoing** 🔵	• People & Culture Team	• Director of People & Culture	i. Pay Equity review conducted every other year from 2024-2031. ii. Findings and results are considered against relevant awards and applied to Performance Review Framework.
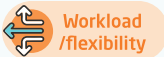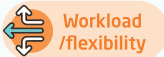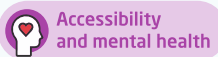
Strategy and Rationale	Action	Timeline	Responsibility	Accountability	Success Measures
abreast of any potential barriers.	job value and pay scale anomalies (including bonuses), address any inequities found and report results to Director and Board. 🔴 Career pathways				iii. Establish 'Like-for-like' analysis by Q2 2025. iv. Results of pay equity analysis shared with MCRI staff. v. Organisational pay gap remains steady and/or reduces at all Levels. vi. At least a 20% increase in pay equity for Individual Contractors (Clinician Researchers).
	2.2.4 Continue to conduct robust auditing to allow casual conversion. 🔴 Career pathways	**Ongoing** 🔵	• People & Culture Team	• Director of People & Culture	i. Audits and Casual conversations are conducted as scheduled. ii. The Gender breakdown of employees who successfully convert from casual to permanent positions reflects MCRI's Sex/Gender Ratio each year.

PHASE 3: Build On, Contribute To, Amend and Expand Current or Planned GEDI Related Projects

Strategy and Rationale	Action	Timeline	Responsibility	Accountability	Success Measures
3.1 **Build on and adapt existing parental leave mechanisms and portals to improve work life balance for carers.** ▪ *MCRI's existing supports for Parents have received mixed*	**3.1.1** Offer support for researchers on/on return from parental leave to continue their work (part-time RA, funding for project management/technical assistance). 🟠 Workload /flexibility	**Ongoing** ⚪	• People & Culture Team • Engagement & Development Team	• Director of People & Culture	iii. MCRI supports 4 researchers on/on return from parental leave to continue their work per annum by Q1 2025. iv. Application for parental leave research support is available all year round and has increased number of applicants per annum (data not available for 2022 so improvement will be based on first year of collected data). v. Number of women remaining in post after 12 months increases to 80%.

feedback with only 69% of 435 GEDI Survey respondents with caring responsibilities agreeing that MCRI provides sufficient support for parents or carers and 40% unsure or neutral about caring responsibilities impeding career progression at MCRI. Increasing financial support and better communicating supports available may address concerns raised.	**3.1.2** Improve communication of parental leave policies, entitlements, expectations, and support for staff to refer to before, during and after leave expectations and develop a guide for People Leaders on how to plan for and support the flexibility needs of those taking and returning from parental leave. ⇄ **Workload /flexibility**	**Q1 2024 – Q1 2026** ◯	• People & Culture team • Engagement & Development Team	• Head of Communication	vi. 5% reduction in those with unfavourable ratings for discrimination based on childcare or carers duties. i. Parental Leave Portal updated. ii. Parental Leave Portal included in staff wide communications quarterly. iii. Parental Leave Portal outlined in onboarding process. iv. People Leader guide developed by Q4 2025. v. 80% of those with caring responsibilities agree that MCRI provides sufficient support for parents and carers in 2026 GEDI Survey.
3.2 **Take steps to improve flexibility for all our people.** ▪ *MCRI's two policies related to Flexibility creates confusion and results in*	**3.2.1** Build on and improve the infrastructure to have effective hybrid meetings and develop a mandate endorsed and supported at all Levels of MCRI for all meetings, seminars, and significant institute events such as Town Halls to be hybrid and recorded. ⇄ **Workload /flexibility** ♥ **Accessibility and mental health**	**Q1 2024- Q4 2028** ◯	• Chief Information Officer • IT Team	• Chief Operations Officer	i. Communications developed by MCRI's Executive team related to MCRI as a hybrid workplace developed by Q1 2025. ii. Hybrid events see increase participation across years (data not available for 2022 so improvement will be based on first year of collected data). iii. 100% of meeting spaces at MCRI have appropriate technology and

inconsistent application across the Institute. The questions within the Leave and Flexibility GEDI Survey Factor vary by up to 57% for Group and People Leader. ▪ *Streamlining the policies and providing the infrastructure and support to enable flexible working will address some of the consistencies particularly as more people return to the office for work.*				clear/accessible guides on hosting hybrid meetings. iv. 80% agreement that having hybrid meetings at MCRI is easy in one-off survey in Q1 2028.
	3.2.2 Collapse current policies to create a clear Flexibility Framework available to all staff and allow employee autonomy to decide how and what works for them, particularly with productivity and output. Within the framework consider and outline: a. Flexibility provisions available to staff b. Shift Leadership ability to provide flexibility c. The removal of personal approval/bias for flexibility d. Protocol to minimise risks for underpayment of salaries e. How teams can decide upon 'working hours' together where they can expect response/team work to be completed. f. Flexible arrangements options including working from home, remote working, teleconferencing and core team hours. g. Strategies to make flexible working arrangements successful and consider options to improve financial literacy and reduce the	**Q1 2024 – Q4 2026** ◯	● People & Culture Team	● Director of People & Culture	i. Flexibility Framework developed by Q1 2025 and disseminated to People Leaders through meetings and information sessions. ii. 80% agreement on GEDI survey related to full knowledge of flexibility provisions at MCRI. iii. Improved Leave and Flexibility Factor Score (90%). iv. Improved sense of wellbeing and satisfaction in SAGE Silver Award Self-Assessment focus group, survey and interview findings.

financial impact of caring responsibilities on superannuation

h. Incorporate language across the framework to reassure staff that they can say no to work if it is outside of their capacity without repercussion.

i. Review contract line which states that staff may be required to work additional hours, define this and make clear against flexibility policy.

j. Consider providing flexible time in lieu if work must be undertaken outside of work hours during Policy Audit

k. Allow for banking or defer payment of grant income for people on part time or casual contracts.

🔴 Equity and diversity policies and procedures   🔶 Workload /flexibility

🟣 Accessibility and mental health

3.2.3	Q1 2025 – Q1 2027	• People & Culture Team	• Director of People & Culture	i. Flexible Working Strategy for People Leaders established by Q2 2025.
Create a top-down approach and strategy for leaders to encourage work-life balance flexibility, establishing flexible working arrangements and taking leave. 🔶 Workload /flexibility	⭕			ii. Flexibility is a regular touchpoint/ Agenda Item at Executive, Group and Team Leader Forums (at least 3 times a year for first 2 years of implementation).
				iii. P&C receive queries related to the Flexibility Framework from 50% of People Leaders.

				iv. Bi-Annual Leave Analysis reveals a decrease in the amount of unpaid leave taken and usage of annual, parental and carers leave in line with staff Gender ratios.
3.3 **Collaborate with Employee and Industrial Relations Team to make relevant and appropriate contract and workplace changes to address MCRI's problem areas.** ▪ *75% of MCRI staff are on Maximum term contracts resulting in feelings of insecurity for many of our people. Coupled with variance in People Leader style due to a lack of strategic guidance and standard policies and procedures related to*	**3.3.1** Pending legislative changes, institute an expectation that the length of all contracts should be 2 years if funding/grant terms allow unless a clear rationale is provided for a shorter contract term. Equity and diversity policies and procedures Career pathways Culture and safety	**Q1 2024 – Q1 2025**	• Finance Team (Payroll & MCRI Finance Manager) • People & Culture Team	• Senior Management Team • Chief Financial Officer • Director of People & Culture	i. 50% of MCRI on 2-year contracts. ii. 50% of Research staff have contracts that align with funding period or grant terms. iii. Rationale Documentation with clear and valid justifications is provided for 80% of those on shorter term contracts and is held by P&C. iv. Engagement and GEDI Survey results and comments indicate improved sense of security amongst our people.
	3.3.2 Establish guidance provisions to set a time before contract expiry before a renewal decision is required. Career pathways Culture and safety	**Q1 2024 – Q1 2025**	• People & Culture Team	• Director of People & Culture • Chief Financial Officer	i. Guidance established by Q1 2025. ii. Staff receive their contract renewal proposal no less than 2 weeks before the end of their contract (50% in first year implementation to 90% at year 7).
	3.3.3 Establish a way of tracking fortnightly working hours to maintain wellbeing and payment for time outside reasonable additional hours. Workload /flexibility Accessibility and mental health	**Q1 2025 – Q1 2026**	• Finance • People & Culture Team	• Chief Financial Officer • Director of People & Culture	i. Tracking system established by Q1 2026. ii. Adoption of more time in lieu for staff in recognition of work outside of reasonable additional hours assessed through GEDI Survey.

contracts, there is a sentiment that "luck" is integral to progressing at MCRI. • *Addressing issues of insecurity through longer term contracts and ensuring decisions are communicated early in line with relevant Industrial Relations regulations will ensure our people have the knowledge and clarity to make decisions about their careers.*	**3.3.4** Pending legislative changes, set a policy for ongoing contracts past a certain number of years at MCRI. Career pathways Culture and safety	**Q1 2024 – Q1 2025** ○	• People & Culture Team	▪ Chief Financial Officer	i. 25% of MCRI staff on ongoing contracts by 2031.
	3.3.5 Pending legislative changes, convert maximum term contracts to ongoing where available and/or possible. Career pathways Culture and safety	**Q1 2024 – Q1 2025** ○	▪ People & Culture Team	▪ Director of People & Culture	i. 25% of MCRI staff on ongoing contracts by 2031.
3.4 **Strengthen MCRI's Policy, Templates and Forms Library** • *Of 79 policies reviewed in MCRI's Policy Audit, 31% were out of date,*	**3.4.1** Coordinate with Risk Management to review and make changes to MCRI policies based on SAGE review, Focus Groups and internal audit to ensure that policies better support intersectionality, Gender equity, cultural safety and sensitivity and are inclusive to transgender people and	**Q2 2023 – Q2 2025** ◉	▪ Policy Working Group	▪ Head of Risk	i. All institute wide policies are reviewed and updated by Q2 2025. ii. Regular checks and reviews established for policy owners by Q2 2025. iii. Ability to proceed to Action 3.4.12. iv. 10% improvement on GEDI Survey scores on questions related to understanding MCRI policies.

64% had some GEDI concerns, 31% were unclear or inaccessible, and 12% did not have proper support from MCRI to uphold the policy. These numbers suggest that MCIR lacks an institutional approach to critical areas that drive GEDI in our workplace.

- *The gaps in our policy and procedure library directly link to the barriers explored throughout the application as they have flow on effects to the way People Leaders uphold their responsibilities.*

- *Addressing issues across Priority Areas through a strong and*

are actionable and clear for all our people.

🔴 **Equity and diversity policies and procedures**

3.4.2
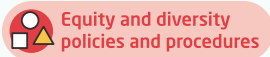
Review MCRI's Grievance and Complaint Policy to:

a. Adjust the grievance and complaint framework for poor behaviour to ensure senior staff are held accountable.

b. Improve transparency and integrity of complaints process, keep individuals up to date on actions taken and have a stronger zero-tolerance approach to harassment, discrimination and bullying where all reports must be investigated.

c. Add a less formal pathway within the grievance and dispute procedure to facilitate reporting and monitor the number of and reasons for grievances and disputes and report to GEDI and health and safety committee.

d. Develop guidelines on resolving workplace conflict and having constructive conversations to support people in following the Informal Process outlined in the Complaints Resolution Procedure.

e. Consider including an option to assign an external investigator to

Q2 2024 – Q2 2026

◯

- People & Culture Team

- Director of People & Culture

i. Ability to proceed to Action 3.4.12.

ii. Reduce the number of those who have reported instances of bullying, harassment and discrimination and noted that the outcome was "nothing happened" to 10%.

iii. Parity between MCRI People and Culture case numbers and those reported in the SAGE GEDI Survey.

consistent policy library will ensure that there is clarity for our People and Leaders.	hold MCRI accountable for senior staff behaviour. f. Ensure that contract renewal is separate from workplace issue reporting. Equity and diversity policies and procedures · Career pathways Culture and safety			
	3.4.3 Develop a stand-alone Sex Discrimination, Sexual and Sex-based Harassment Policy Equity and diversity policies and procedures · Culture and safety	**Q2 2024 – Q2 2025** ○	▪ People & Culture team	▪ Director of People & Culture	i. Policy developed by Q2 2025. ii. Ability to proceed to Action 3.4.12 iii. Parity between MCRI people and Culture case numbers of sexual harassment and those reported in the SAGE GEDI Survey.
	3.4.4 Establish guidelines around authorship to ensure staff are equitably recognised for their contributions. Equity and diversity policies and procedures	**Q2 2024 – Q2 2026** ○	▪ Directors Office	▪ Chief of Staff	i. Guidelines established in consultation with research staff by Q1 2026. ii. Ability to proceed to Action 3.4.12 iii. Increase in early career staff being listed as authors/contributors (data not available for 2022 so improvement will be based on first year of collected data).
	3.4.5 Include Gender and diversity considerations in Authorship of Publications Policy and Statement of Authorship forms. Equity and diversity policies and procedures	**Q2 2024 – Q2 2026** ○	▪ Directors Office	▪ Chief of Staff	i. GEDI considerations included in the Statement of Authorship form by Q2 2026. ii. 70% of forms submitted include statement on how gender was considered in research team (at year 7).
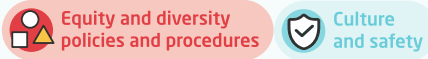
3.4.6 Establish Gender Affirmation Leave and a Transgender and Gender Diverse Procedure for staff undergoing transition. 🔴 Equity and diversity policies and procedures	**Q2 2024 – Q2 2026** ◯	▪ GEDI Team	▪ Director of People & Culture ▪ Chief Financial Officer	i. Policy developed in consultation with staff by Q2 2026. ii. Ability to proceed to Action 3.4.12 iii. 80% score for GEDI Survey question "I feel that the organisation is a great place for gender diverse people to work."
3.4.7 Adjust internal grant eligibility criteria to ensure they do not exclude or limit opportunities for staff that work part-time. 🔴 Equity and diversity policies and procedures 🟢 Career pathways	**Q2 2024 – Q2 2026** ◯	▪ Grants Team	▪ Deputy Director	i. Internal grant eligibility criteria reviewed and amended by Q2 2026. ii. 30% increase in number of applications for internal grants and an increase in % of successful applications on part time arrangements (data not available for 2022 so improvement will be based on first year of collected data).
3.4.8 Develop guidelines on Gender and diversity balance on research teams in line with targets outlined in 1.3.4. 🔴 Equity and diversity policies and procedures	**Q2 2024 – Q2 2026** ◯	▪ Directors Office	▪ Deputy Director	i. 70% of forms submitted include statement on how gender was considered in research team (at year 7).
3.4.9 Include caring for the elderly and extended relatives in carers leave. 🔴 Equity and diversity policies and procedures 🟠 Workload /flexibility	**Q2 2024 – Q2 2025** ◯	▪ People & Culture Team ▪ Finance (Payroll) Team	▪ Director of People and Culture ▪ Chief Financial Officer	i. Leave policy amended and outlines appropriate application by Q2 2025. ii. Ability to proceed to Action 3.4.12. iii. 25% improvement on "Do you know and fully understand MCRI's policies
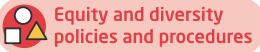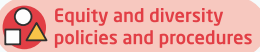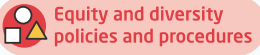
				around flexible work/hours and leave entitlements?" GEDI Survey question.
				iv. 10% Improvement on "In the past five year, have you experienced difficulties or felt uncomfortable asking for personal leave, parental leave, or flexible working hours at MCRI?" GEDI Survey Question.
3.4.10 Finalise a review framework to conduct regular audits and amendments of MCRI policies informed by experts and people's experience. 🔴 Equity and diversity policies and procedures	**Q2 2025 – Q2 2026** ○	▪ Risk Team	▪ Head of Risk	i. Policy Review Framework completed by Q2 2026 in consultation with MCRI staff and outlines key stakeholder responsibilities. ii. 20% reduction in policies that are 'Out of Date' in SAGE Silver Policy Audit.
3.4.11 Develop an intersectionality checklist for MCRI's Policy and Project Development. 🔴 Equity and diversity policies and procedures	**Q2 2025 – Q2 2026** ○	▪ GEDI Team ▪ Risk Teams	▪ Chief Operating Officer	i. Intersectionality checklist developed by Q2 2026. ii. At least one member from each D&I Subcommittee participates in co-design process of checklist developed. iii. Policies with GEDI Concerns reduces to 25% in SAGE Silver Award Policy Audit.
3.4.12 Disseminate and communicate new and updated policies in an accessible and informative way so that those of different backgrounds and requirements are fully aware of their rights and responsibilities	**Ongoing** ○	▪ Risk Team	▪ Head of Communications	i. 80% agreement on GEDI Survey questions related to fully understanding policies.

| | Equity and diversity policies and procedures | | | |
| | Accessibility and mental health | | | |

3.4.13

Ensure that all new staff can access a core list of MCRI policies and procedures via the HRIS, including monitoring and reminders.

Equity and diversity policies and procedures

Accessibility and mental health

| | Q2 2024 – Q2 2027 | ▪ Systems Working Group | ▪ Chief Operations Officer | i. 90% Agreement rate to core policies on HRIS System. |
| | | | | ii. 80% agreement on GEDI Survey questions related to fully understanding policies. |

3.4.14

Leverage current work to upgrade MCRI's systems to create an upgraded Policy Database with accompanying guidelines/documents/procedures to ensure guidelines and polices are easily accessible and provides a consistent approach.

Equity and diversity policies and procedures

| | Q2 2024 – Q2 2027 | ▪ Risk Team ▪ IT Team | ▪ Head of Risk | i. New policy database established by Q2 2027. |
| | | | | ii. 80% agreement on GEDI Survey questions related to fully understanding policies. |

3.4.15

Establish and commit to a co-design process that seeks input from those with expertise, lived experience and/or traditionally marginalised backgrounds, and relevant committees

| | Q1 2023 - Q1 2025 | ▪ GEDI Team ▪ Diversity and Inclusion Committee ▪ Risk Team | ▪ Head of Risk | i. MCRI Co-Design Framework Established by Q1 2025. |
| | | | | ii. Future projects and policies see increased participation and input from MCRI staff year on year (data not |
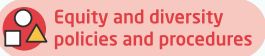
	or external organisations when developing new policies, procedures and guidelines. The co-design process should acknowledge the contributions and suggestions made by relevant stakeholders responding to each item with a rationale for the final decision. 🔴 **Equity and diversity policies and procedures**			available for 2022 so improvement will be based on first year of collected data).
3.5 **Evaluate self-assessment results and suggested actions against changing industrial relations landscape.** ▪ MCRI currently has two career pathways with limited clarity on how to progress between Steps and Levels. 41% of our people who have held apposition for at least three years have not progressed in their career pathway (at least one step increase). This is a result of a lack of performance	**3.5.1** Conduct an Employment Audit to assess legislative compliance with employment practices. 🟢 Career pathways	**Q1 2023 – Q1 2025** 🔵	▪ People & Culture Team	▪ Director of People & Culture	i. Employment Audit completed by Q1 2024. ii. Corrective actions to address any identified gaps and ensure compliance recommended by Q2 2024 and completed by Q2 2025. iii. Ability to proceed to action 3.5.5.
	3.5.2 Ensure yearly reviews of position descriptions (PDs) are conducted in line with performance and development reviews to ensure PDs are up-to-date and paid at the appropriate Level and to maintain equity. 🟢 Career pathways	**Ongoing** 🔵	▪ People & Culture Team	▪ Director of People & Culture	i. Position Descriptions are reviewed annually and updated as necessary. ii. Pay scales for positions align with sector standard and industrial relations laws. iii. 95% of all staff are on correct PDs and appropriate Levels annually.
	3.5.3 Establish a Remuneration Framework to define MCRI's governance system to remuneration, purpose and strategy and commitment to appropriately and consistently managing remuneration	**Q1 2024 – Q1 2026** ⚪	▪ People & Culture Team ▪ Finance Team	▪ Director of People & Culture	i. Those who have not received a step increase in the past 3 or more years received step increment by 2025. ii. Remuneration Framework Developed by Q1 2026.
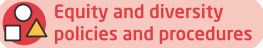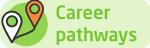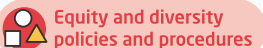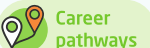
development and review processes and an outdated Career Pathway structure that does not take the new roles, skills, and competencies our growing workforce maintains. ▪ MCRI will expand and strengthen our approach to Career Pathways in line with the most recent Industrial Relations changes to ensure our changes are sustainable and appropriate.	across MCRI. Within the framework, determine and establish measures to address the barriers to progression including: a. Regular Step Increments based on performance b. Reward for achievements over the past 12 months through a bonus structure c. Using the SAGE analysis of length of time staff have spent at an increment within a pay level and provide an incremental progression to all staff who have not received an increment in the past 3 years or more and have achieved satisfactory performance. d. Requirements for budget holders to plan for step increments with the Budget Review process to ensure we plan for the financial health of all our people. **Career pathways**			iii. Bonus structure for those at the top of their Level/Band established by Q1 2026. iv. At least 25% of MCRI staff receive a step increment to their salary each year. v. 75% of People Leaders include consideration for step increments in their budget proposals by 2029.
	3.5.4 Based on outcomes of 1.1.1 and 3.5.1, coordinate a co-design and engagement process to redefine 'success' in Research Themes, particularly when considering research outcomes and work. (Not achieving does not mean "not working") **Workload /flexibility**	**Q1 2025 – Q1 2026** ◯	▪ People & Culture Team	▪ Director of People & Culture	i. Participation from all Theme Directors in Co-Design Process. ii. Participation from at least one member of each MCRI Research Theme and Unit. iii. New success metrics for Research Themes established and incorporated into MCRI's performance review structure for Research staff by Q1 2026.
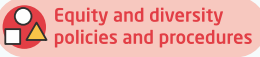
	3.5.5 Redefine Job Family architecture and Success Profiles for core roles to determine skills, competency, experience, and career pathways that support talent attraction, performance and development. ⬤ Career pathways	**Q4 2023 – Q4 2024** ⬤	▪ People & Culture Team	▪ Director of People & Culture	i. Job Family and Success profiles established by Q2 2024. ii. All Careers have clearly outlined pathways and success profiles by Q4 2024. iii. Job Family Architecture and Success Profiles are widely disseminated to all staff. iv. Improvement in Career Satisfaction and Career Support and Mentoring Survey Factors (70% being aim score).
3.6 **Develop a Talent and Retention Strategy that considers MCRI's GEDI Commitments and Targets.** ▪ *MCRI's Talent Strategy does not consider GEDI and therefore MCRI does not actively recruit traditionally underrepresented groups or mitigates against potential bias in the recruitment process.* ▪ *Amending People & Culture Strategies*	3.6.1 Establish provisions to meet MCRI's Gender and diversity employment targets. ⬤ Equity and diversity policies and procedures ⬤ Career pathways	**Q1 2024 – Q1 2025** ◯	▪ People & Culture Team ▪ Office of Director	▪ Director of People & Culture	i. GEDI Recruitment Strategy developed by Q1 2025 and amended based on outcomes of Actions 1.3.1, 1.3.2 and 1.3.4. ii. GEDI Recruitment Strategy shared with all hiring Line Managers and applied to relevant Levels and Position openings from 2025-2031. iii. MCRI Sex/Gender Ratio is 60:40 at all Levels in 7 years (leaning towards more women). iv. MCRI staff better reflect Victoria's demographic makeup in 7 years.
	3.6.2 Co-design specific measures for recruiting Indigenous Australians in a culturally safe manner with Aboriginal and/or Torres Strait Islander staff at MCRI.	**Q1 2025 – Q1 2026** ◯	▪ GEDI Team ▪ Aboriginal Reference Group ▪ Diversity and Inclusion Committee	▪ Director of People & Culture	i. Co-design process engages 50% of Aboriginal and/or Torres staff, ARG and 5 key stakeholders recommended by this group. ii. Outcomes are applied to P&C GEDI Recruitment Strategy.

					iii. At least 7 Researchers and 1 Professional Staff from Aboriginal and/or Torres Strait Islander background hired by MCRI on 2-year contracts by 2031.

to meet out commitments and targets will ensure that we are considering GEDI across the career journey, from recruitment onward.

Equity and diversity policies and procedures   Career pathways

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3.6.3

Target recruitment for men at Levels A/B, culturally and racially marginalised (CARM) candidates or women where they are underrepresented in shortlisting or interviewing.

Career pathways

Ongoing
○

- People & Culture Team
- GEDI Team

- Director of People & Culture

i. Gender equal shortlists for 80% of open positions.

ii. Increase in number of applicants from traditionally underrepresented groups (data not available for 2022 so improvement will be based on first year of collected data).

iii. Increase in number of traditionally underrepresented groups in shortlists (data not available for 2022 so improvement will be based on first year of collected data).

iv. Feedback from hiring teams on the effectiveness of targeted recruitment indicate improved candidate pool.

3.6.4

Amend current procedures related to de-identification, shortlisting, selection panels, data collection and non-biased interviewing.

Equity and diversity policies and procedures   Career pathways

Q2 2025 – Q2 2026
○

- People & Culture Team
- GEDI Team

- Director of People & Culture

i. Project plan for P&C Team Established by Q2 2026.

ii. Changes made to MCRI hiring process completed by Q2 2026

iii. Procedures reviewed and tracked every 2 years.

iv. Parity of Interview and Offer rates by Gender by year 7.

3.6.5

Upgrade job descriptions, advertisements, templates, and

Q1 2024 – Q1 2025

- People and Culture Team
- GEDI Team

- Director of People & Culture

i. Amended Job Advertisement Template by Q1 2025 and use updated job

recruitment materials to remove Gender bias, include inclusive imagery and highlight MCRI's commitment to GEDI, family-friendly practices, and support for Gender-diverse applicants. ◯ **Career pathways**				descriptions from the outcomes of 3.5.2. ii. Increase in number of applicants from traditionally underrepresented groups (data not available for 2022 so improvement will be based on first year of collected data). iii. Commitment to GEDI and a family friendly workplace is advertised and accessible in all relevant channels. iv. Feedback gathered from candidates indicate positive impact of the upgraded materials on the perception of MCRI during the recruitment process.
3.6.6 Create guidelines for external search firms on MCRI's commitment to GEDI and consideration of GEDI criteria for recruitment. **Equity and diversity policies and procedures** **Career pathways**	**Q3 2024-Q1 2025** ◯	▪ People & Culture Team ▪ GEDI Team	▪ Director of People & Culture	i. All external search firms receive updated guidance by Q1 2025. ii. Candidate pools presented by external search firms are Gender equal and have representation of those from traditionally underrepresented backgrounds.
3.6.7 Identify talent via the talent management framework to enhance succession planning of core roles. **Career pathways**	**Q2 2025 – Q2 2026** ◯	▪ People & Culture Team ▪ Office of the Director	▪ Director of People & Culture	i. 25-40% of advertised roles are filled internally (to be reviewed according to organisation growth).
3.6.8 ◯	**Ongoing**	▪ People & Culture Team	▪ Director of People & Culture	i. Increase in those who agree to the survey question "I believe that my total compensation (base salary + any bonuses + benefits + Equity) is fair,

	Benchmark positions prior to advertising to ensure they are classified appropriately. 🧭 Career pathways				relative to similar roles at MCRI" (80% goal). ii. The salary audit shows that MCRI salaries are aligned with sector's averages. iii. Available roles are offered at the salary range advertised post benchmarking.
3.7 **Align Learning and Development Programs at MCRI to SAGE Principles and Self-Assessment Findings.** ▪ *The changing capacity of the Learning & Development Team along with the impact of COVID-19 has resulted in a MCRI training program that is not relevant for all staff. Mixed feedback indicates that there is a desire for more training on all subjects to support*	**3.7.1** Conduct a training needs analysis to assess if current training and compliance embed the principles of diversity, equity, and inclusion and/or are relevant to research staff and amend or develop programs as needed. 📈 Professional development	**Q2 2024-Q2 2027** ◯	▪ People & Culture Team	▪ Director of People & Culture	i. Gap analysis completed by Q2 2026. ii. Programs updated and amended by Q2 2027.
	3.7.2 Develop and curate new training topics that will be required for all staff to review on a frequency determined as appropriate on: a. Additional supports for researcher and professional life cycles b. Supporting GEDI and Understanding Intersectionality c. Cultural Safety and Awareness and Anti-Racism d. Bystander Intervention e. Discrimination, Harassment and Bullying	**Q2 2025 – Q2 2026** ◯	▪ Operations ▪ Directors Office	▪ Head of Risk	i. General GEDI Program available to all staff developed by Q2 2026. ii. Specific resources available to staff on Intranet by Q2 2026. iii. Feedback from training participants indicates that programs have enhanced staff knowledge and understanding of specified topics. iv. Ability to proceed to 3.7.3.

career progression, however, industry relevant training would receive more support form People Leaders. ▪ *People Leaders have the most significant impact on staff experience at MCRI. This is a result of poor systems and process (e.g., the lack of explicit responsibility for People Leaders to consider the professional development of their teams) and limited support from MCRI to lead inclusively. Training for People Leaders on their responsibilities and how to uphold them will address several barriers at MCRI and create impetus for People Leaders to support*	f. Voice Safety (safe and respectful relationships) g. Code of Conduct/ Behaviour Framework/ Living our Values (to be established in 1.1.1) h. Including GEDI in the Research Standards and the Responsible Scientific Conduct i. Self-Advocacy to support those who have difficulties to disclose needs or goals. j. Supporting those with disability and/or mental health concerns by focusing on abilities vs *dis*abilities to support our people to succeed. 🔴 Equity and diversity policies and procedures 🟡 Professional development 🟢 Career pathways 🔵 Culture and safety 🟣 Accessibility and mental health			
	3.7.3 Develop and curate compulsory training sessions for People Leaders before they are given leadership of a Group or team and embed them into the New Leader Induction Program to ensure leaders are equipped to lead in an equitable, inclusive, and appropriate manner on: a. Building Trust b. Supporting Mental Health and Accessibility in the Workplace c. Enabling Wellbeing and Flexibility	**Q2 2026 – Q2 2027** ◯	▪ People & Culture Team	▪ Director of People & Culture	i. GEDI module embedded into Leadership Pathways Programs. ii. 75% completion rate for People Leaders by 2031. iii. Leadership GEDI Survey Factor score improves (80% goal). iv. Feedback from training participants indicates that programs have enhanced staff knowledge and understanding of specified topics.

their teams in attending expanded training opportunities in the future.	d. Combating Unconscious Bias in management, recruitment, promotion, and remuneration discussions e. Challenging Gender biases in relation to caring responsibilities. f. Information and guidelines on eliminating bias in performance/behaviour appraisals and career planning discussions. g. A structured approach to performance and development discussions that is informed by best practice and empowers leaders to ask questions to understand individual needs. h. Building skills in giving and receiving feedback. i. How to be an effective mentor and coach. j. Implementing a junior and senior buddy system. Workload /flexibility Professional development Career pathways Culture and safety Accessibility and mental health			
	3.7.4 Amend training programs to ensure they are flexible and accessible (hybrid, modular and recorded) so that all people can access learning and development at MCRI.	**Q2 2025 – Q2 2027** ◯	▪ People & Culture Team	▪ Director of People & Culture	i. All Leadership Pathways and Professional Development programs have hybrid alternatives.
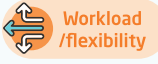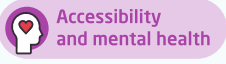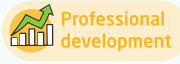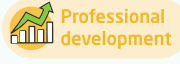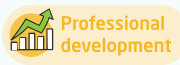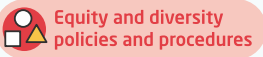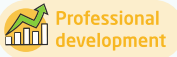
Workload /flexibility **Accessibility and mental health**			

3.7.5 Develop a feedback loop mechanism that seeks staff opinion and suggestions on improving professional development at MCRI and tailoring opportunities for our workforce. **Professional development**	**Q2 2025 – Q2 2027**	▪ People & Culture Team	▪ Director of People & Culture	i. Feedback mechanism developed and 70% of training participant provide feedback.
3.7.6 Assess professional development online tools that provide a range of courses for selection that people can access. **Professional development**	**Q2 2025 – Q2 2027**	▪ People & Culture Team	▪ Director of People & Culture	i. Online tools available in the market evaluated and considered by Q2 2026 and courses selected by Q2 2027. ii. Courses made accessible to all staff by Q2 2027. iii. Courses are widely promoted and there is a 40% completion rate (success measure low as not all courses will be relevant to all staff.)
3.7.7 Continue to conduct surveys about MCRI's mentoring scheme to build upon, revise and approve the mentoring program with information on how to be an effective mentor and mentee and make mandatory for group and team leaders. **Professional development**	**Ongoing**	▪ People & Culture Team	▪ Director of People & Culture	i. 75% of Mentor Program participants provide feedback. ii. Mentor program revised and gaps are addressed every 3 years. iii. 80% of Group and Team Leaders participate in mentorship program by 2031.

	3.7.8 Seek input and advice from other organisations with successful professional development programs and frameworks and explore opportunities for cross-industry mentoring with other institutions/universities or partnerships with corporations, volunteer organisations or other institutions to share training and resources. 🟨 **Professional development**	**Q1 2025 – Q1 2031** ◯	▪ People & Culture Team	▪ Director of People & Culture	i. Professional Development network for cross-industry collaboration and resource sharing established by Q1 2026. ii. 2 partnerships for staff training established by 2031.
	3.7.9 Append quizzes to all compliance training. 🔴 **Equity and diversity policies and procedures** 🟨 **Professional development**	**Q2 2024 – Q2 2025** ◯	▪ Risk Team	▪ Head of Risk	i. Quizzes successfully integrated into all compliance training modules by Q2 2025. ii. 100% completion of all compliance training.
3.8 **Modify and Adjust Current People and Culture Projects, Frameworks and Systems.** ▪ *The People & Culture Team has begun work to address issues related to performance*	**3.8.1** Contribute to and continue to adjust MCRI's Performance and Development Framework (PDF) based on the SAGE Self-Assessment Learnings and outcomes. This includes taking steps to: a. Expand and mandate the use of the PDF b. Outlines expectations for regular 1:1s in People Leader PDs c. Implement individual development plans for all staff	**Q2 2023 – Q1 2025** 🔵	▪ People & Culture Team	▪ Director of People & Culture	i. Mandate the use of the Performance and Development Framework (PDF) across MCRI by Q2 2024. ii. Questions to assist with PDF discussions developed by Q1 2025. iii. 50% of People Leaders complete PDFs in year 1 with progress towards 90% in year 7. iv. 80% of MCRI staff set annual goals yearly to assist with performance review discussions.
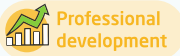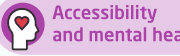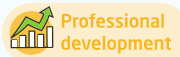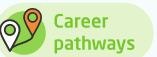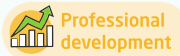
development, induction, exits and disability inclusion at MCRI and have had varying success due to People Leader engagement. Considering People Leaders have the most significant impact on staff experience at MCRI, making the aforementioned processes mandatory and part of People Leader responsibility will ensure at all staff have the same check points at MCRI.	d. Include GEDI intersectionality in PDF discussions. e. Eliminate individual responsibility to raise issues related to workload stress, wellbeing and/or accessibility needs by having these as regular conversations in team meetings and 1:1 meeting initiated by People Leaders. f. Enable adequate goal setting for both scientific and research staff leveraging work of Post Doc Accord g. Decision making frameworks related to managing and assigning workload. h. Explores career planning and development. i. Clarifies promotion and makes it applicable to research and non-research staff. j. Discusses progression (where relevant) k. Utilise Culture Amp platform to record outcomes of PDF conversations monitor completion of PDF conversations to ensure that all staff participate annually and survey frequency of annual incremental increases. l. Encourage leaders to include $2k in their yearly budget per team member per annum to support their professional development.	v. Outcomes of PDF allows for regular step increments for staff, with 25% of staff receiving a step increment to their salary each year in line with Action 3.5.3. vi. 50% of People Leaders include professional development in their team budgets. vii. At least 5% improved "Career Support and Mentoring" and "Career Satisfaction" GEDI Survey Factor scores across all Groups and People Leaders disaggregated scores.

	Workload/flexibility · Professional development · Career pathways · Culture and safety · Accessibility and mental health			
3.8.2 Develop a toolkit that outlines Career Pathways for People Leaders to support the PDF and enable career progression discussions. _Professional development · Career pathways_	**Q2 2024 – Q2 2025** ○	▪ People & Culture Team	▪ Director of People & Culture	i. Toolkit is developed and disseminated to all People Leaders by Q2 2025. ii. Feedback from People Leaders in the form of survey comments, focus groups and interviews indicates that the toolkit supports Career Pathways and PDF discussions.
3.8.3 Use SAGE feedback on the Induction process to modify and adapt MCRI's Induction and Onboarding Journey to be multi-modal and comprehensive to develop a sense of belonging and acceptance within the organisation for new and returning staff. This includes accessible and inclusive language, outlining PDF expectations, GEDI policies and committee information, assigning a buddy and/or mentor and agreeing to career goals and KPIs. _Professional development_	**Q2 2025 - Q2 2026** ○	▪ People & Culture Team ▪ GEDI Team	▪ Director of People & Culture	i. Integrate SAGE feedback into the modification and adaptation of the Induction and Onboarding Journey by Q2 2026. ii. Survey feedback indicates heightened sense of belonging and acceptance among new and returning staff. iii. Questions related to knowledge of policies and benefits in GEDI Survey improve (80% aim).
3.8.4 Monitor and expand MCRI's new Exit Survey and Interview Framework to understand our retention issues and	**Q1 2024 – Q1 2027** ○	▪ People & Culture Team	▪ Director of People & Culture	i. Expand the Exit Survey and Interview Framework by 2025. ii. 80% completion rate or Exit Survey by those leaving MCRI by 2031.

identify issues for traditionally underrepresented groups. *Career pathways*				iii. Data collected allows P&C to identify trends, patterns and issues related to retention. Recommendations and actions to address issues are identified by 2027.
3.8.5 Take steps to update the current workplace accommodation requests system to improve accessibility and properly understand and adjust to the needs of staff with accessibility or mental health needs. Establish additional pathways (both anonymous and informal) for people to share, discuss and disclose their needs to accommodations are open to all staff as a way to support excellence Regularly remind staff of these pathways through training, development, 1:1s and the intranet so that inclusion and accessibility is actively discussed and removes individual responsibility to raise issues. Take an approach that does not assume who needs information and creates multiple opportunities for leaders to creates as people's readiness to share information changes over time. *Equity and diversity policies and procedures* *Culture and safety* *Accessibility and mental health*	**Q1 2024 – Q4 2025** ◯	▪ Environmental Health & Safety Team	▪ Head of Environment, Health & Safety	i. Workplace accommodation request system is updated, and accessibility is improved by Q4 2025. ii. Additional pathways for staff to share discuss and disclose accessibility and mental health needs established byQ4 2025. iii. Utilization of EHS supports increases by 20%

3.9 Continue and Expand current supports for GEDI projects at MCRI.	**3.9.1** Support the work of the Accessibility Sub-Committee by resourcing their efforts to pursue an Australian Network of Disability Accreditation. 🔴 Equity and diversity policies and procedures 🟣 Accessibility and mental health	**Q1 2025 – Q1 2027** ⭕	▪ Environmental Health & Safety Team	▪ Head of Environment, Health & Safety	i. The Accessibility Committee receives additional resources and support to complete an accreditation by Q1 2027. ii. Project plan to achieve an accreditation developed by Q1 2026. iii. At least 5% improved scores across all GEDI Survey Factors when disaggregated by Disability and/or Mental Health concern.
Focus Groups indicated that Committee work is considered external to people's roles, and therefore committees receive little support, decision-making power or recognition for the work accomplished. This concern particularly applies to the work of the Diversity and Inclusion Committee who rely on passion or personal alignment to GEDI to progress "complex and skilled work that should be paid (Focus Group Comment)."	**3.9.2** Reinstate and expand our outreach activities with Indigenous high school students with an interest in health and medical research. 🔴 Equity and diversity policies and procedures 🟢 Career pathways	**Q1 2026 – Q4 2031** 🔵	▪ People & Culture Team ▪ GEDI Team ▪ Diversity & Inclusion Committee	▪ Director of People & Culture ▪ Office of Research Director	i. Program reinstated by Q1 2026. ii. At least 20 students (with equal Gender representation) participate in program by 2031. iii. Feedback from participating students indicate that the outreach program positively impacted their interest in health and medical research.
	3.9.3 Complete the 'Health Research for All' project (through engaging researchers to contribute content) and embed recommendations across MCRI's research guidance. 🔴 Equity and diversity policies and procedures	**Q1 2023 – Q2 2027** 🔵	▪ Diversity and Inclusion Committee	▪ Office of Director ▪ Director of People & Culture	i. "Health Research for All" project completed by Q4 2025. ii. Outcomes of the Health Research for All embedded into MCRI's research guidelines and supports by Q2 2027. iii. 80% of research proposals consider diversity and inclusion in their proposal.
The D&I committee has begun projects related to GEDI to varying degrees of	**3.9.4** Continue to work with other Institutes through WISSP and SAGE to gather data related to women's leadership, career progression, career breaks and the superannuation/pay gap to	**Ongoing** 🔵	▪ People & Culture Team ▪ Directors Office	▪ Institute Director	i. MCRI contributes to at least 3 WISSP reports by 2031. ii. 15% increase in GEDI Survey score for the question "I am aware of initiatives

Strategy and Rationale	Action	Timeline	Responsibility	Accountability	Success Measures
success, by building their work into the SAGE Action Plan and subsequent GEDI strategy, we anticipate that Committee participation will be recognised as development and that the D&I Committee have the proper support to complete their planned work.	advocate to government for policies to address these gaps in the sector. 🔴 Equity and diversity policies and procedures 🟢 Career pathways				in regard to women in science in my organisation."
	3.9.5 Contribute to the cost of women's only coaching and or leadership programs (WISSP) or establish an in-house program to improve the representation of women on senior committees and senior roles. This can include a shadowing scheme that matches women researchers with senior leaders in medical research, academia and industry. 🟠 Professional development 🟢 Career pathways	**Q3 2025 – Q4 2031** ◯	▪ People & Culture Team ▪ GEDI Team	▪ Director of People & Culture	i. Decision to pursue external or internal women's only coaching and leadership programs reached by Q1 2026. ii. 20 women participate in identified or established program by 2031. iii. Feedback from participants indicate that the program was helpful in career planning, development and progression.
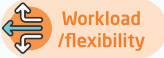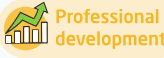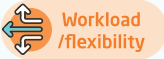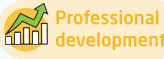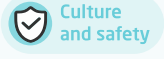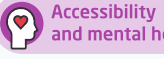
PHASE 4: Establish Foundations of GEDI Accountability at MCRI

Strategy and Rationale	Action	Timeline	Responsibility	Accountability	Success Measures
4.1 **Establish clear expectations for our people to create a positive workplace culture** ▪ *7 out of 9 GEDI Survey Factors had a score below 80%, suggesting that we have not effectively*	**4.1.1** Review and amend our Code of Conduct to align with the outcomes of 1.1.1, 1.1.5 and 1.2.1 (Values, Cultural Safety and the GEDI Strategy). 🔴 Equity and diversity policies and procedures 🔵 Culture and safety	**Q1 2024- Q4 2025** ◯	● People & Culture Team ● Risk ● Office of the Director	● Head of Risk	i. Code of Conduct amended by Q4 2024. ii. Code of Conduct outcomes embedded into PDF and Induction programs by Q4 2025. iii. New/amended Code of Conduct communicated to all staff through compliance training (100% completion rate.) iv. At least 5% improved GEDI Survey Factor Score for MCRI Culture across

				all Groups and People Leader disaggregated results.
embedded our values in our work and daily operations. ▪ *MCRI's workplace culture varies most by People Leader and Group (by up to 83% Spread), indicating that we do not uphold our Value consistently. This is a result of the lack of formal and strategic guidance for our People Leaders and staff about the expected language and behaviours for all interactions at MCRI.* ▪ *Building accountabilities for all our people to bring our values to life and uphold our values in their interactions through Codes of Conduct and*	**4.1.2** Develop a Competency/Behavioural Framework based on the amended Code of Conduct (4.1.1), MCRI's Values (1.1.1) and GEDI Principles (1.2.1) that will reinforce expectations for how we behave, how we treat other people and how we make decisions with clarity. The framework should outline how values are lived and will address: a. The management of equitable workload allocation for People Leaders b. Investment in Professional Development Activities of their team/team investment and outcomes (even those on short contracts) c. The Inclusion of ECRs on funding applications, project teams and peer-reviewed papers d. The retention and progression of staff e. Fulfilling the role of a People Leader, including balancing expectations of teams and management. f. Service, organisational citizenship and committee participation.	**Q1 2024 – Q2 2025** ◯	• People & Culture Team	• Director of People & Culture	i. Competency/Behaviour Framework developed by Q2 2025. ii. Competency/Behaviour Framework is applied to Performance discussions and step increments. iii. SAGE Silver Assessment reveals more consistent culture and leadership style from People Leaders (less than a 20% spread for Group and People Leaders in GEDI Survey disaggregated results).
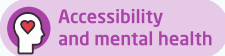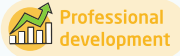
Competency/Behaviour Frameworks will contribute to the success of the Action Plan as a whole and contribute to a positive workplace culture that cultivates safety and security for our people to bring their whole selves to work.	**Workload /flexibility** **Professional development** **Career pathways** **Culture and safety**			
	4.1.3 Develop expectations of People Leaders at every level by providing examples on best practice related to: a. Leading at each level b. Creating designated/protected admin time for people leaders so they are accessible to their teams c. Protecting time for committee involvement as a formal expectation for all staff d. Creating protected time for professional development for all (even those with high workloads, fractional and/or dual appointments) to encourage a culture of continuous education and learning. e. Protecting time to be accessible to their teams for workload discussions. **Workload /flexibility** **Professional development** **Career pathways** **Culture and safety** **Accessibility and mental health**	**Q1 2026 – Q4 2031** ◯	• People & Culture Team	• Director of People & Culture	i. Develop clear expectations for People Leaders and disseminate regularly in Town Halls and Relevant forums (quarterly). ii. SAGE Silver Assessment reveals more consistent culture and leadership style from People Leaders (less than a 20% spread for Group and People Leaders in GEDI Survey disaggregated results).
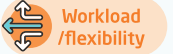
4.2 **Modify and Adapt MCRI's Career Pathways Processes to ensure they align to the amended Performance Development and Competency/Behaviour Frameworks.**	**4.2.1** Socialise these expectations and tie raise and promotion to satisfactory performance of the above items (4.1.1, 4.1.2, 4.1.3). 📍 Career pathways 🛡 Culture and safety	**Q1 2026 – Q4 2031** ◯	• People & Culture Team	• Director of People & Culture	i. Integrate behaviour/competency, code of conduct and best practice expectations into the PDF by Q1 2026. ii. At least a 10% increase on all GEDI Survey Factor Scores (specifically, Culture, Leadership, Career Satisfaction, Career Support and Mentorship) aiming for 80%. iii. 25% increase on GEDI Survey question "I am familiar with MCRI's criteria for promotion."
Workplace culture and service activities (e.g., committee membership) are considered external to people's roles, and heavy workloads prevent those without the time, capacity and/or interest from actively engaging in MCRI's cultural work. *Embedding the outcomes of Strategy 4.1 into the planned Career*	**4.2.2** Modify and Adapt MCRI's promotion process to ensure it: a. Considers "non-traditional" research outputs, part-time capabilities, committee participation and mentorship. b. Addresses the barriers to women's academic promotion through a Promotions Committee/Working Group that considers MCRI's policies, values, and goals in their work. c. Values the contribution and progression of non-PhD roles through project or people leadership. d. Considers evidence that people want to lead a team and have the correct skills to support their people.	**Q4 2023 – Q4 2026** 🔵	• People & Culture Team	• Director of People & Culture	i. Promotions Committee/Working Group established by Q1 2025, and Project Plan established by Q3 2025. ii. Promotion process for researchers modified by Q1 2026. iii. More definitive promotion and/or progression opportunities for non-researcher staff developed and outlined by Q4 2026. iv. Step increments and Promotions better reflect MCRI's Sex/Gender ratio by 2031. v. 25% increase on GEDI Survey questions related to familiarity with and support for promotion at MCRI.

		Q1 2025 – Q1 2027	People & Culture Team	Director of People & Culture	

Pathways updates will build accountability for all people, especially People Leaders, to uphold our values and will allow for broader considerations in the promotion process.

Career pathways | Accessibility and mental health

4.2.3

Review current mechanisms for the assistance of researchers whose contracts end after 1 year with other internal opportunities relevant to their skill set.

Professional development | Career pathways

Q1 2025 – Q1 2027

- People & Culture Team

- Director of People & Culture

i. Review of current mechanisms for retention assistance completed by Q1 2026.

ii. Method to identify opportunities across the institute and match soon to be expired contracts established by Q1 2027.

iii. 10% of soon to be exiting staff find employment in other parts of MCRI yearly.

4.3

Clarify and expand the Terms of Reference and decision-making power of committees to communicate their importance and formally build them into MCRI's strategy and governance framework

- *59% of GEDI Survey respondents do not participate in internal committees. Low engagement appears to result from lack of clarity*

4.3.1

Increase weight of committee participation and/or organisational development work in promotion considerations to alleviate burden of traditionally underrepresented staff from championing this work and educating their colleagues.

Career pathways

Q1 2023 – Q4 2026

- Office of the Director

- Deputy Director

i. The weight of committee participation and organisational development work is implemented in Action 4.2.2 in consultation with traditionally underrepresented staff.

ii. Survey the Diversity and Inclusion Committees and ARG in year Q4 2026 demonstrates that there is a reduced burden of responsibility to carry such initiatives forward.

iii. Yearly increase in number of women promoted.

4.3.2

Increase weight of other extra-curricular involvement such as informal mentoring as considerations for promotion in performance review.

Career pathways

Q1 2023 – Q4 2026

- Office of the Director

- Deputy Director

i. The weight of extra-curricular participation and organisational development work is implemented in Action 4.2.2 in consultation with traditionally underrepresented staff.

ii. Staff contributions to service activities and engagement opportunities are
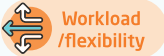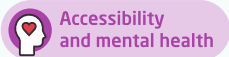
related to committee remit, limited support and encouragement form People Leaders and the little recognition and value committee participation receives for promotion.					recognised and/or rewarded appropriately.
					iii. Yearly increase in number of women promoted.
	4.3.3 Review and capture committee workload to understand to what extent participation and engagement should be weighed for promotion. ![Workload/flexibility] ![Career pathways]	**Q1 2023 – Q4 2026** ◯	• Office of the Director • Systems Working Group	• Deputy Director	i. Complete a review of Committee work plans and average monthly time spent on committee work by Q3 2025. ii. The appropriate reward and/or recognition for this work is determined in consultation with committee members. iii. Yearly increase in number of women promoted.
▪ *Without clear terms of reference or remit for committees, members feel frustration that they are unable to progress institutionally important work due to lack of support and unclear decision-making power. Embedding committees into MCRI's governance structure will allow for collaboration, prevent the duplication of*					

work, and ensure strategic initiatives are completed.					
4.4 **Develop supports for leaders to role-model best practice in equity, diversity, and inclusion across MCRI's priority areas** ▪ *Our people's experiences related to professional development, workload, career pathways, contract insecurity and culture is most impacted by their People Leader (positive GEDI Survey scores vary by up to 83% when disaggregated by People Leaders). This is because leaders are leaders are ill-equipped, ill-prepared and ill-supported to lead proactively,*	**4.4.1** Initiate information sessions for People Leaders on: a. How gender and intersectionality may impact on performance and judgements of performance. b. The benefits of catering to diverse needs and establishing an enabling workplace c. The expectation that early career women staff join senior staff at media events, conferences, meetings, and other networking events whenever feasible Career pathways · Culture and safety Accessibility and mental health	**Ongoing** ○	▪ Engagement & Development Team ▪ GEDI Team	▪ Head of Communications	i. At least 1 information session for People Leaders is run quarterly. ii. Participation reflects MCRI's Sex/Gender Ratio. iii. By 2031 at least 80% of People Leaders have attended one information session. iv. Feedback surveys from participants indicate an increased awareness among People Leaders regarding Gender, intersectionality, diversity and inclusion.
	4.4.2 Provide workshops regarding the practical application of the Flexibility Framework established in 3.2.2 for People Leaders including: a. Practical examples on how to role model and support a work-life balance (emails during working hours, working form home, flexibility in team discussions)	**Q1 2025 – Q4 2031** ○	▪ People & Culture Team	▪ Director of People & Culture	i. At least 3 workshops on the Flexibility Framework held yearly. ii. Participants reflect MCRI's overall Sex/Gender Ratio. iii. 60% of all People Leaders attend a workshop. iv. Feedback from participants indicate increased knowledge and understanding among participants regarding the importance of work-life

consistently, and inclusively.	b. Adapting to people's needs when applying the updated flexibility policy c. How to manage the transition back to work after leave. 🔄 Workload /flexibility 💜 Accessibility and mental health			balance and flexibility in workplace culture.
▪ *From the GEDI Survey data, it can be assumed that supporting our People Leaders to comply with, and support the work that emerges from the SAGE Action Plan will have the most significant impact on people's experience. Guidelines, workshops, practical information, clear messaging and decision-making frameworks will further equip our leaders in upholding our values and supporting their teams through development and progression.*	**4.4.3** Develop guidelines on: a. How to speak to career progression and the re-defined terms related to career paths, levels, steps, and promotion b. How to support career progression for staff, with specific guidance on supporting part-time staff c. How to consider accessibility across career life cycle d. How teams can meet GEDI accountabilities and responsibilities, this can include having GEDI as an agenda item on all team meetings, sharing engagement opportunities etc. 📍 Career pathways 🛡 Culture and safety 💜 Accessibility and mental health	**Q1 2025-Q4 2031** ◯	▪ Grants Office ▪ Office of the Director ▪ GEDI Team	▪ Deputy Director	i. Guidelines developed by Q1 2026 and reviewed/amended biannually. ii. P&C Portals more widely accessed (increased click rate over years). iii. SAGE Silver Assessment reveals more consistent culture and leadership style from People Leaders (less than a 20% spread for Group and People Leaders in GEDI Survey disaggregated results).
	4.4.4 Develop a 'cheat sheet' or standardised key messages for people	**Ongoing** ◯	▪ Communications Team	▪ Director of People and Culture ▪ Chief of Staff	i. Cheat sheets developed for new projects and completed actions when relevant.

leaders to use and reference in 1:1s and regular team meetings. 🔴 Equity and diversity policies and procedures 🟠 Workload /flexibility 🟡 Professional development 🟢 Career pathways 🔵 Culture and safety 🟣 Accessibility and mental health				ii. Sheets are distributed by Senior Leaders for use by People Leaders. iii. Key messages are consistently used, resulting in at least a 5% improvement in Leadership and Workplace Culture Factor Scores on the GEDI Survey (aim for 80%). iv. 15% increase in GEDI Survey question score for "There is good communication between management and staff."
4.4.5 Build the capacity (or expand authority) of People Leaders to support professional development of their teams and address staff requirements on an individual basis as appropriate for their needs. 🟡 Professional development 🟢 Career pathways 🟣 Accessibility and mental health	**Q1 2025- Q4 2031** ◯	▪ Office of the Director	▪ Deputy Director	i. At least 15% increase in GEDI Survey question score for "My people leader encourages me to undertake further training and pursue personal development opportunities relevant to my career."
4.4.6 Institute a decision-making framework to assist with decisions "under People Leader discretion" related to progression to create consistency and address bias. 🔴 Equity and diversity policies and procedures 🟡 Professional development	**Q1 2025- Q4 2031** ◯	▪ People & Culture Team	▪ Director of People & Culture	i. Develop a decision-making framework in consultation with People Leaders Research Themes and Support Units (at least 1 from each) by Q1 2026. ii. SAGE Silver Assessment reveals more consistent culture and leadership style from People Leaders (less than a 20% spread for Group and People Leaders in GEDI Survey disaggregated results).

Career pathways

4.5	4.5.1	Ongoing			
Conduct further scoping, investigative and assessment work to address MCRI problem areas. ▪ *There are areas of concern (e.g., the number of Part-Time Workers, those on Maximum Term Contracts, heavy workloads, career progression and support for those with caring responsibilities) where funding restrictions appear to be a key contributing factor. As a non-for-profit organisation we must scope our ability to address these funding concerns to create a more inclusive workplace.*	Scope capacity to increase finances to meet promotion and representation goals set in GEDI strategy and SAGE Action Plan through Fundraising, Funding Allocation, or other means for: a. Exploring ways to lessen span of control of people leaders so that they can properly engage in professional development expectations (more People Leaders with less direct staff reports, create a 2IC role to assist with 1:1s/share workload, or create Research Leader and People Leader distinctions) b. Increasing paid parental leave to both primary and secondary carers removing minimum term of employment (12 months) for eligibility to encourage the shared responsibility of caring. c. Offering return-to-work arrangements on reduced hours at full pay when returning from parental leave. (1 month paid 100% work 75%). d. Contributing to superannuation during parental leave to prevent		▪ Finance Team ▪ People & Culture Team ▪ GEDI Team	▪ Chief Operating Officer ▪ Chief Financial Officer ▪ Director of People & Culture	i. The organisations capacity to provide additional finances to deliver our GEDI goals is reviewed every 2 years. ii. Every 2 years recommendations for actions best take provided to leadership and are acted upon in the year following. iii. 3 out of 10 items outlined in 4.5.1 receive increased funding support by 2031.

▪ *The self-assessment process revealed areas where further investigation is needed to make definitive conclusions on best use of additional financial resources.*	the gendered inequity seen in superannuation at retirement. e. Covering gaps in external funding sources to enable longer contract terms. f. Converting maximum term contracts with ongoing positions where available. g. Allocating additional funds to groups with uneven funding to assist in administrative and people leadership tasks h. Providing additional funding for promotions for early and mid-career staff. i. Grants that are targeted to those with disability and/or mental health concerns. j. Offering reduced hours (with no reduction in pay) or additional leave if pay rise is not possible due to funding as a formal process ⬌ **Workload /flexibility** 📍 **Career pathways** 🧠 **Accessibility and mental health**			
	4.5.2 Conduct further investigation and seek feedback to develop recommendations and make relevant changes to MCRIs foundational GEDI Work including:	**Q1 2025 – Q4 2031** ◯	▪ GEDI Team	▪ Director of People & Culture	i. Qualitative data collection plan developed by Q4 2025. ii. Yearly recommendations provided to Director of P&C and MCRI's Executive Team based on data analysis.
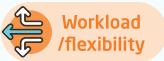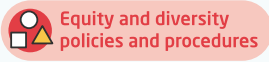
a. Staff expectations related to professional development for researchers compared to professionals.
b. The professional development needs of early-mid career researchers and the resources that would be most useful to this cohort
c. The ambitions/ "ideal" role of our people compared to their current pathway, position and/or FTE.
d. The experience of staff in particular divisions, programs or domains around career development support and retention.
e. Review senior level hires to understand if they were through promotion or external hire.
f. The experience of staff working part-time at MCRI and the reasons for this (clinical roles or caring responsibilities).
g. The experiences of staff from migrant and refugee backgrounds in career progression
h. The negative perceptions in relation to work flexibility held by staff.
i. The barriers to research funding success
j. Salary benchmarking for Individual Contracts

Workload /flexibility   **Professional development**

iii. Results of further investigation support the outcomes of 5 actions in the MCRI's Action Plan.
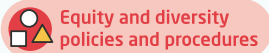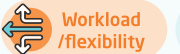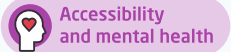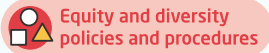
PHASE 5: Socialise and Embed the Importance, Language and Culture of GEDI in our Workplace

Strategy and Rationale	Action	Timeline	Responsibility	Accountability	Success Measures
5.1 **Formally encourage flexible ways of working at MCRI.** ▪ *Feedback related to flexibility at MCRI is mixed as People Leaders to not apply flexibility equally. The MCRI GEDI Survey 'Leave and Flexibility' Factor varied by 53% with contributing questions varying by up to 57%.* ▪ *Following actions to streamline MCRI's Flexibility Policies, guidelines and procedures to facilitate a work-life balance appropriate*	**5.1.1** Establish a Family Friendly/Flexible Meeting Procedure that outlines that: • Meetings are to be held between 10:00am and 4:00pm • Limits the number of meetings held or requires strong reasonings as to not detract from doing the work. • Encourages teams to set their own expectations and 'core working hours' together in line with the amended flexibility policy. **Equity and diversity policies and procedures** **Workload /flexibility**	**Q3 2024 – Q3 2025**	• People & Culture Team	• Director of People & Culture • Chief Operating Officer	i. Family friendly meeting procedure established and disseminated by Q3 2025. ii. 10 senior leaders agree to champion the procedure and encourage uptake amongst People Leaders. iii. 75% institute wide meetings are held within the procedure hours. iv. Feedback from staff indicate that the procedure allows for greater flexibility and work life balance. v. At least 5% improved scores on the GEDI Survey questions "The expected workload in my organisation makes it easy to balance work and home responsibilities" and "Overall, meetings, seminars and other events are scheduled to maximise attendance" (80% goal).
	5.1.2 Create an email guideline and infrastructure that limits emails outside of core work hours and	**Q1 2024 – Q4 2025**	• Engagement & Development Team	• Director of Engagement & Development	i. IT consulted by Q4 2024 to understand possible nudges, reminders, and restrictions available.
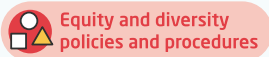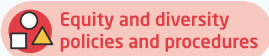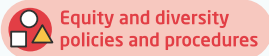
for each of our people will alleviate workload stress.	encourages scheduling emails as standard. Workload /flexibility					ii. Guideline established Q2 2025 and informed by at least one member of each Theme and Unit. iii. Monitoring and evaluation indicate that 50% of staff utilise scheduling emails and there is a reduction in emails sent and received outside core work hours. iv. At least 5% improved GEDI Survey questions scores related to wellbeing when disaggregated by People Leader and Group.
	5.1.3 Amend leave policies to allow for a floating Holidays model to allow employees to substitute Victorian Public Holidays for days that are more suited to them and expand provisions for Indigenous Australians to partake in in family and community events in consultation with Aboriginal and Torres Strait Islander people. Equity and diversity policies and procedures Workload /flexibility	**Q2 2024 – Q2 2025** ◯	• People & Culture Team • Finance	• Director of People & Culture		i. Leave policy amended by Q2 2025. ii. Communications plan and key messages for changes in leave policy developed by Q2 2025. iii. Qualitative analysis in the Self-Assessment for the SAGE Silver award indicates greater ability and inclusivity to partake in cultural practices. iv. 5% reduction in agreement or unsure scores in response to GEDI Survey Question "Discrimination on the basis of cultural background occurs at MCRI."
5.2 **Actively consider the inclusion of diverse communities and voices at MCRI.**	**5.2.1** Commit to 40:40:20 representation for invited speakers and seminar chairs/facilitators and proactively seek speakers from various cultural backgrounds, ages, physical abilities,	**Ongoing** ◯	• Office of the Director	• Deputy Director		i. 85% of internal events and panels show 40:40:20 Gender representation. ii. At least 2 speakers annually are from traditionally marginalised identities and/or backgrounds.
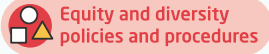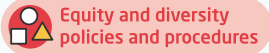
▪ *There is no formal or institutional guideline to consider gender equity or diversity at events, social gatherings, or publication materials. Given this is not an active consideration, there is a risk that traditionally underrepresented peoples may be excluded.*	sexual orientations, and Gender identities when seeking presenters. **Equity and diversity policies and procedures** — **Culture and safety**			
	5.2.2 Schedule social gatherings and end-of-year parties during working hours and communicate a commitment to workplace events being accessible to all staff. **Workload /flexibility** — **Culture and safety** — **Accessibility and mental health**	**Ongoing** ○	• Engagement & Development Team	• Chief of Staff	i. At least a 5% increase score for GEDI Survey questions related to inclusion at social gatherings.
▪ *Committing to formal targets, creating guidelines and templates will ensure that diversity is always considered and on the agenda.*	**5.2.3** Revise MCRI's Templates and Branding to include guidelines on appropriately representing the diversity of our people and those we work with across Themes and Professional Administration roles. Conduct regular monitoring of the Gender representation (in text and images) in the Institute's internal and external communication channels (intranet, internet, social media), take remedial action (if necessary) and report annually to the executive and board. **Equity and diversity policies and procedures** — **Culture and safety**	**Q3 2023 – Q4 2026** ○	• Engagement & Development Team	• Director of Engagement & Development	i. Revised branding guidelines that emphasize diversity and inclusion complete by Q4 2024. ii. Guidelines and templates updated in line with revised branding guidelines by Q4 2026. iii. MCRI communications (annual reports, strategic plans, etc.) showcase diversity of our people and the community. iv. Communications Audit indicates that GEDI is a more visible part of MCRI's brand and story.
5.3	**5.3.1**	**Q1 2026 – Q1 2027**	• Office of the Director	• Chief of Staff	i. Guideline established by Q1 2027.
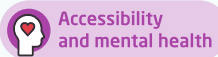
In consultation with relevant communities and people with lived experience, provide support and guidance on inclusive practice in common workplace practices.	Establish guidelines for rotating meeting chairs and how to run an inclusive meeting or workshop to bring and recognise more voices in group discussions. ⬤ Equity and diversity policies and procedures ⬤ Culture and safety	◯			ii. Information and support available on the Intranet by Q1 2027. iii. At least 5% increase in GEDI Survey score for question "I can generally make my voice heard within my organisation" across all Groups and People Leaders disaggregated scores.
▪ *MCRI has not formally or actively considered GEDI in developing polices, practices and everyday procedures, resulting in inconsistent application of MCRI's Diversity and Inclusion Statement and our Values.*	**5.3.2** Institute and promote guidelines for the Acknowledgement of Country by all speakers and in all relevant meetings. ⬤ Equity and diversity policies and procedures ⬤ Culture and safety	**Q1 2024 – Q1 2026** ⬤	• Office of the Director	• Chief of Staff	i. Guideline established – with easy access to Acknowledgment of Country support videos by Q1 2025. ii. Regular (quarterly) reminders through 'everyday' channels on ways to do this. iii. One off survey in 2028 indicates that this is consistently observed. iv. Reduction in negative qualitative evidence in surveys, focus groups and interviews in the SAGE Silver Self-Assessment about People Leader's dismissal of GEDI introduction.
▪ Developing procedures to acknowledge and think about GEDI for regular and/or daily tasks will encourage our people to build the habit of considering GEDI in their future	**5.3.3** Promote the adoption of the Aboriginal and Torres Strait Islander Cultural Protocols and Indigenous training methodologies for broad awareness and application where appropriate across MCRI research. ⬤ Equity and diversity policies and procedures	**Q1 2026 – Q4 2031** ◯	• GEDI Team • Aboriginal Reference Group • Diversity & Inclusion Committee • Office of the Director	• Institute Director	i. Engagement and education plan developed following completion of RAP and Cultural Safety Audit Q1 2027. ii. Qualitative analysis with Aboriginal Reference Group indicates more use and/or respect of Aboriginal methodologies. iii. 10% of research projects mention of Aboriginal Methodology in Authorship form.

work and initiatives and further communicate our commitment to GEDI in the workplace.	**5.3.4** Develop guidelines on the use of pronouns in meetings/email signatures. 🔴 Equity and diversity policies and procedures	**Q1 2026 – Q4 2031** ◯	• Office of the Director • Innovation Team	• Deputy Director	i. Templates for email signatures made available to all staff by Q1 2027. ii. Review of email signatures in 2028 indicate that 50% of our people display their pronouns. iii. Reduction in negative qualitative evidence in surveys, focus groups and interviews in the SAGE Silver Self-Assessment about People Leader's dismissal of GEDI introduction including use of pronouns.
	5.3.5 Review and adopt guidance and information on considering intersectionality in research. 🔴 Equity and diversity policies and procedures	**Q1 2026 – Q4 2031** ◯	• Diversity and Inclusion Committee • Office of Director	• Deputy Director	i. Guidance established and accessible on Health research for all platform by Q4 2026. ii. 10-30% research projects mention intersectionality in Authorship form.
5.4 **Strengthen reach of GEDI communications through leader engagement and storytelling.** ▪ *30% of all internal communications are related to SAGE topics (diversity, career progression,*	**5.4.1** Establish a GEDI Calendar and Strategy that assigns an executive representative to acknowledge days of significance related to GEDI and creates impetus for increased participation and engagement on including but not limited to • International Women's Day • Survival Day • IDAHOBIT • International Day for Elimination of Racial Discrimination • Transgender Day of Visibility	**Ongoing** ◯	▪ GEDI Team ▪ Engagement & Development Team ▪ Office of the Director	▪ Head of Communications ▪ Head of Engagement Pillar ▪ Chief of Staff	i. Minimum GEDI calendar agreed on by Q1 2025 and included in the Engagement Calendar yearly. ii. 10+ Senior Leaders champion the days across 7 years. iii. SAGE Silver Award self-assessment qualitative data does not associate MCRI's GEDI work as "tick-boxing exercises."

recognition and growth and wellness) contributing to the perception that MCRI only considered GEDI as a "tick-boxing exercise" (Focus Group Comment). ▪ *Only 59% of GEDI Survey respondents feel that there is open and honest two-way communication between staff and leadership and there have been reports of leaders undervaluing the importance GEDI in the workplace.* ▪ *Engaging leaders to actively participate in GEDI work and share their stories will build confidence in MCRI's commitment to*	• Global Accessibility Awareness Day • Sorry Day • Reconciliation Week • NAIDOC Week • National Aboriginal & Torres Strait Islander Children's Day • Wear It Purple • RUOK • World Mental Health Day • International Day of People with a disability ⛨ Culture and safety ♡ Accessibility and mental health				
	5.4.2 Develop an awareness strategy that engages leaders in speaking about GEDI and sharing their stories. This can include: • Stories of senior leaders who have or use flexible work options/leave options and work effectively at MCRI to role model the use of these among all staff • Campaign about men with caring responsibilities who utilise flexible arrangements, including those in senior roles shared in newsletters, the intranet and Town Hall good news stories. • Encourage men in senior roles to speak openly in meetings about caring responsibilities and role-	**Ongoing** ◯	▪ Engagement & Development Team ▪ GEDI Team	▪ Head of Communication	i. Awareness strategy developed by Q1 2025. ii. 10+ men share their stories over 6 years. iii. 80% positive answer on question 'I feel MCRI is diverse." iv. 80% positive answer on "I feel MCRI adapts to people's diversity and inclusion needs," GEDI Survey Question.

GEDI and combat stigma related to GEDI topics such as accessing flexibility, caring responsibilities, and speaking about mental health.	model the taking of carers and parental leave. • Career Pathways Role Model Series where leaders speak to the importance of professional development in their career journeys • Highlighting the diversity that exists in leadership at MCRI. • Celebrate and promote safety for accessibility and/or mental health disclosure. Workload /flexibility Professional development Career pathways Culture and safety Accessibility and mental health			
	5.4.3 Establish a communications strategy to celebrate GEDI and combat negative perceptions in the workplace through: a. Acknowledging the balance those with caring responsibilities must meet between family and work by developing an awareness campaign to shift negative perceptions about their "choice" b. Acknowledging cultural differences and personal choices c. Interviewing staff with disabilities and/or mental health concerns about the enabling factors that got them to their current position,	**Ongoing** ◯	▪ Engagement and Development Team	▪ Head of Communications	i. Communications strategy established by Q1 2026. ii. Internal communications team strengthened through increased resources (can be people or budget). iii. 80% positive answer on question 'I feel MCRI is diverse." iv. 80% positive answer on "I feel MCRI adapts to people's diversity and inclusion needs." v. Increased (+20%) presence in D&I topics in internal communications audit.

share the outcomes and change practice as needed

d. Celebrating the achievements of Aboriginal and Torres Strait Islander people in science through internal communications channels and during events

Career pathways **Culture and safety**

Accessibility and mental health

PHASE 6: Establish Foundations of Workplace Trust, Safety and Wellbeing

Strategy and Rationale	Action	Timeline	Responsibility	Accountability	Success Measures
6.1 **Create and champion safety for our people to tend to their wellbeing.** ▪ *51% of women have coring responsibilities compared to 41% of men. From 2018-2022 Females took 99.5% of unpaid personal leave, suggesting that they may be exhausting personal/carers*	**6.1.1** Establish Wellbeing Leave days that do not require doctors' notes for mental health and wellbeing that are separate from Personal/Carers leave that are often exhausted by caring responsibilities so that staff can have days to recharge as needed. **Workload /flexibility** **Culture and safety** **Accessibility and mental health**	**Q1 2025 – Q1 2026**	• Finance (Payroll) • People & Culture Teams • Environment Health & Safety Team	• Chief Financial Officer	i. Wellbeing Leave days established by Q1 2026. ii. 70% staff access Wellbeing Leave by year Q4 2031. iii. 80% positive answer on "I generally experience high levels of wellbeing in relation to my job," and "My organisation cares for the wellbeing of its staff" GEDI Survey Questions. iv. At least 5% increase in score for "I generally experience high levels of wellbeing in relation to my job," and "My organisation cares for the wellbeing of its staff" GEDI Survey Questions when disaggregated by those with disability and/or mental health concerns.
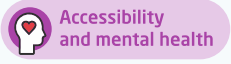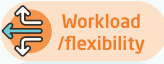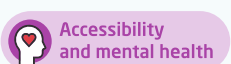
leave and must resort to unpaid forms of leave to fulfill caring responsibilities. ▪ *Only 61% of GEDI Survey Respondents agree that the expected workload in the organisation makes it easy to balance work and home responsibilities and 27% of comments in response to "what factors do you believe have negatively affected your career to date" related to workload.* ▪ *Cultivating and advocating for a work environment where people can take time to recharge without fear will improve wellbeing for all.*	**6.1.2** Remove the requirement for a doctor's note and/or increase the number of days where a doctor's note is not required for the maximum leave limit; this keeps those with chronic illnesses or disabilities in mind as they know how to take care of themselves. 🔺 Equity and diversity policies and procedures ⬍ Workload /flexibility 🛡 Culture and safety ❤ Accessibility and mental health	**Q1 2025 – Q1 2026** ◯	• Finance • People & Culture Team	• Director of People & Culture	i. 5 personal leave days are made available to all staff without doctor's note requirement by Q1 2026. ii. A reduction in Leave Without Pay usage.
	6.1.3 Advocate to external funders to increase funding for research employment continuity and wellbeing and consider flexibility in deadlines and KPI's by either extending deadlines or allowing Groups to request extensions for parental leave to reduce stress and competition. ⬍ Workload /flexibility 🛡 Culture and safety ❤ Accessibility and mental health	**Ongoing** 🔵	• Office of the Director	• Deputy Director	i. MCRI coordinates with AAMRI, Federal and Victoria government towards increased funding and inclusive processes for at least 4 years.

6.2	6.2.1	Q1 2025 – Q1 2027	• People & Culture Team • Environmental, Health & Safety Team	• Director of People & Culture	i. Pathways (online, onsite, and face to face) developed for staff to safely disclose their needs, suggestions and/or adverse experiences by Q1 2027.
Create clarity and security for our people when formally engaging with Operations and/or Growth and Innovation. ▪ *There is a discrepancy between the total number of formal reports of bullying, harassment, sexual harassment, and intimidation at MCRI (17) and those who reported experiencing or witnessing sexual harassment, bullying, intimidation, prejudice, and discrimination in the last five years (373). The majority (more than 50%) did not report because they thought people would think they*	Develop multiple accessible anonymous and/or informal pathways for staff to safely share, disclose and request: • Workplace changes/needs for their success • Feedback and suggestion related to workload stress, flexibility, wellbeing and changes to enable success. • Experience of bullying, intimidation, harassment or discrimination and address fear of reporting concerns. • Feedback to their people leaders Adjust and amend practice based on findings as needed. Equity and diversity policies and procedures Workload /flexibility Culture and safety Accessibility and mental health				ii. Pathways widely disseminated through Intranet and regular communications channels. iii. Parity between MCRI People and Culture case numbers of and those reported in the SAGE GEDI Survey.
	6.2.2 Build trust by combatting the perception that People and Culture are there to protect the company, not the employee. People and Culture should outline how they can support staff and the safety measures taken. Culture and safety	**Ongoing**	• People & Culture Team	• Director of People & Culture	i. Responses to 6.2.1 are received within a week of the report. ii. Increase number of staff approaching People & Culture across 7 years (data not available for 2022 so improvement will be based on first year of collected data). iii. At least 5% increase score for "I feel comfortable reporting instances where I feel I have been treated unfairly," and "I am confident I know
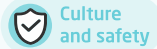
are overreacting, it is easier to keep quite or the person was too senior. • *20% of GEDI Survey participants report a Physical and/or Mental Health Condition and/or Disability, however comments suggest there is a barrier to requesting support at MCRI due to negative perception.* • *Considering MCRI's culture and contract structure can create insecurity for some, taking steps to build strengthen our reporting and response mechanisms will build trust between MCRI Units and our people.*				with whom to raise concerns I have" GEDI Survey Questions.
	6.2.3 Create a designated point of contact to discuss accessibility and inclusion in the EHS or P&C team so these discussions do not go to the team emails. ♡ Accessibility and mental health	**Q1 2025 – Q1 2027** ◯	• People & Culture Team • Environmental Health & Safety Team	• Director of People & Culture • Head of Environment, Health & Safety	i. Designated liaison established and/or integrated into an EHS and/or P&C staff members position description by Q1 2027. ii. Feedback from those who engage with the liaison indicate that their concerns were appropriately addressed. iii. At least a 10% increase in "MCRI makes appropriate accommodations for my disability and/or mental health needs" GEDI Survey question score.
	6.2.4 Following steps to amend insecure contracts at MCRI work with leadership to amend MCRI's Health, Safety and Wellbeing Strategy to reassure people that they can challenge, be themselves and are encouraged to bring up career and life goals at MCRI. ⇄ Workload /flexibility Career pathways 🛡 Culture and safety ♡ Accessibility and mental health	**Q1 2025 – Q1 2028** ◯	• Environmental Health & Safety Team • People & Culture Team • GEDI Team	• Head of Environment Health & Safety	i. Strategy amended by Q1 2028 to acknowledge SAGE self-assessment learnings. ii. Amendments are communicated to all staff and at least 7 Senior Leaders champion the messaging across the Institute. iii. SAGE Silver Assessment reveals more consistent culture and leadership style from People Leaders (less than a 20% spread for Group and People Leaders in GEDI Survey disaggregated results) for Comfort and Safety Factor questions.

6.3	6.3.1	Ongoing	• Office of the Director	• Deputy Director	i. All internal funds allocation is public by year Q4 2031.
Improve transparency between leadership and our people to facilitate open and honest conversation ▪ *Only 47% of GEDI Survey respondents agree that leader decision making at MCRI is transparent.* ▪ *Building upon previous strategies and actions related to honest two-way communication, relaying the rationale, reason and constrictions that leaders use to make decisions and encouraging regular communication will build safety and trust outside of individual Teams.*	Improve communication and transparency regarding funding allocation and support available from MCRI. 🛡 Culture and safety				ii. At least a 20% increase in "I feel leaders decision making in my organisation is transparent" GEDI Survey question score.
	6.3.2 Establish a feedback loop mechanism for leadership decisions to establish trust and communicate that they have heard, acknowledged, and considered staff requirements. 🛡 Culture and safety	**Q1 2025 – Q1 2027**	• Office of the Director	• Chief of Staff • Head of Communications	i. Formal channels for staff to provide feedback on leadership decisions and/or plans established by Q1 2027. ii. Staff are emailed after consultation on next steps, how and why decisions were made (flagging co-design approach and groups consulted). iii. At least 10% increase in GEDI Survey Factor Score for Leadership. iv. At least a 20% increase in "I feel leaders decision making in my organisation is transparent" GEDI Survey question score. v. At least 5% increase in GEDI Survey score for question "I can generally make my voice heard within my organisation" across all Groups and People Leaders disaggregated scores.
	6.3.3 Encourage regular retrospectives for line managers and their teams to openly discuss feedback, issues, and team culture and actively build safe spaces.	**Ongoing**	• People & Culture Team	• Theme Directors	i. At least 10% increase in GEDI Survey Factor Score Comfort and Safety. ii. SAGE Silver Assessment reveals more consistent culture and leadership style from People Leaders (less than a 20%
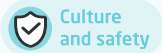
	Culture and safety				spread for Group and People Leaders in GEDI Survey disaggregated results).
					iii. Regular quick surveys at the lunch sessions (6.3.4) indicate improved safety to share feedback.
	6.3.4 Host regular lunch sessions featuring senior People Leaders to allow an informal channel for staff to communicate with management and Executives. Culture and safety	**Q3 2025 – Q5 2031** ○	• Office of the Director	• Chief of Staff	i. At least one lunch session per quarter held starting Q3 2025. ii. Increased attendance across years (data not available so improvement will be based on first year of collected data). iii. Staff feedback and concerns raised at lunches are recorded and shared with senior management for action. iv. Feedback from participants indicate that lunch sessions are effective and impactful.
6.4 **Expand the ways we recognise and value our workforce.** ▪ Focus groups shared concerns that current individual model of recognition and celebration is demotivating and reinforces traditional research outputs	**6.4.1** Ensure non-academics are included in recognition announcements and end-of-year awards. Culture and safety	**Q4 2024 – Q4 2031** ○	▪ Office of the Director	▪ Chief of Staff	i. 20% of awards awarded to non-academic staff. ii. Communications Audit reveal 5% increase in Reward and Recognition communications of non-research teams and/or staff. iii. At least 5% improved scores on the GEDI Survey questions "I feel valued for the unique contribution I can make to MCRI," "Achievements are equally celebrated in my team," and my role is valued by my organisation." (80% goal). iv. Less than a 20% spread for Position type in GEDI Survey disaggregated

that disadvantage those who have other priorities outside of publication.					results for "I feel valued for the unique contribution I can make to MCRI," "Achievements are equally celebrated in my team," and my role is valued by my organisation." Questions.
▪ Recognising non-academics, teams, and those who uphold values and contribute to workplace culture will continue to build on workplace camaraderie and ensure that all our people feel that they belong.	**6.4.2** Establish a reward and recognition program to recognise those who uphold values established in 1.1.1 and workplace culture. 🛡 Culture and safety	**Q4 2026 – Q4 2031** ◯	▪ Office of the Director ▪ People & Culture Team	▪ Director of People & Culture	i. Awards Established by Q4 2026. ii. 1 Non-Academic and 1 Academic awarded yearly. iii. At least 5% improved scores on the GEDI Survey questions "I feel valued for the unique contribution I can make to MCRI," "Achievements are equally celebrated in my team," and my role is valued by my organisation." (80% goal). iv. Less than a 20% spread for Position type in GEDI Survey disaggregated results for "I feel valued for the unique contribution I can make to MCRI," "Achievements are equally celebrated in my team," and my role is valued by my organisation." Questions.
	6.4.3 Establish a NAIDOC Award to recognise the contribution of staff members (Indigenous or non-Indigenous) to advancing Aboriginal and Torres Strait Islander health and wellbeing.		▪ GEDI Team ▪ Office of the Director	▪ Chief of Staff	i. Award established by 2027. ii. 1 Non-Academic and 1 Academic awarded yearly. iii. At least 5% improved scores on the GEDI Survey questions "I feel valued for the unique contribution I can make to MCRI," "Achievements are equally celebrated in my team," and
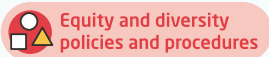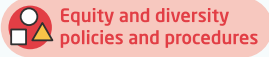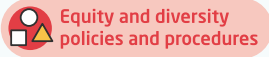
| | Culture and safety | | | | iv. Less than a 20% spread for Cultural Background in GEDI Survey disaggregated results for "I feel valued for the unique contribution I can make to MCRI," "Achievements are equally celebrated in my team," and my role is valued by my organisation." Questions. |

my role is valued by my organisation." (80% goal).

v. 5% decrease in "Neutral" score in response to GEDI Survey Question "Discrimination on the basis of Aboriginal or Torres Strait Islander heritage"
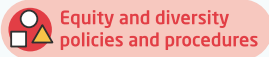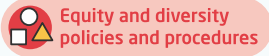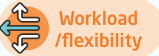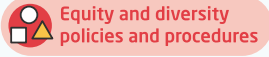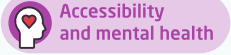
PHASE 7: Expand GEDI work at MCRI Through Targeted Initiatives

Strategy and Rationale	Action	Timeline	Responsibility	Accountability	Success Measures
7.1 **Broaden reach of relevant GEDI Strategies and the SAGE Action Plan to ensure sustainable and systemic change.** ▪ *MCRI's workforce has grown 27.8% over 5 years. This growth makes institutional change*	**7.1.1** Co-design Theme Action Plans to address theme specific SAGE survey results and create linkages between the SAGE Action Plan and GEDI Strategy. Equity and diversity policies and procedures	**Q1 2026 – Q1 2027** ◯	• Theme Program Managers • GEDI Team	• Theme Directors	i. All Themes and Units have Action Plans by 2027. ii. Less than a 20% spread for all GEDI Factor disaggregated by Theme/Unit results.
	7.1.2 Monitor outcomes of the LTBTQIA+ Campus Strategy to determine if a	**Q1 2027 – Q2 2029** ◯	• GEDI Team • Pride Committee	• Director of People & Culture	i. LGBTQIA+ Campus strategy established, and recommendation provided to MCR's GEDI Team by Q2 2027.

more complex as individual Themes, Groups and Teams have their own priorities and barriers to address. ▪ *MCRI is located at the Melbourne Children's Campus and is therefore involved in campus wide activities related to GEDI.* ▪ *Expanding the reach of MCRI's SAGE Action Plan to consider actions in Themes and the Melbourne Children's Campus and improving the resources, supports and initiatives towards GEDI more broadly will result in a more welcoming Campus and workplace.*	Rainbow Tick Accreditation is needed and/or relevant to MCRI. 🔴 Equity and diversity policies and procedures				ii. Relevant actions completed by Q2 2029. iii. At least 5% improved scores on Comfort and Safety and Bullying and Intimidation GEDI Survey Factors when disaggregated by sexual orientation.
	7.1.3 Explore opportunities to create a campus-wide inclusive and non-discriminatory environment for trans and gender diverse staff and students and those from traditionally marginalised backgrounds based on the outcomes of the LGBTQIA+ Campus Strategy. 🔴 Equity and diversity policies and procedures	**Q1 2027 – Q2 2029** ◯	• GEDI Team • Pride Committee	• Director of People & Culture	i. LGBTQIA+ Campus strategy established, and recommendation provided to MCR's GEDI Team by 2027. ii. Relevant actions completed by Q2 2029. iii. At least 5% improved scores on Comfort and Safety and Bullying and Intimidation GEDI Survey Factors when disaggregated by sexual orientation.
	7.1.4 Identify key external organisations that benchmark best practice policy and procedures in relation to GEDI such as WGEA, Diversity Council of Australia and AWEI and amend policies, procedures, practices and programs as emerging evidence and best practices arise. 🔴 Equity and diversity policies and procedures	**Q1 2026 – Q4 2031** ◯	• GEDI Team	• Director of People & Culture	i. List of benchmark organisations established by Q4 2026. ii. MCRI tracks progress on Action Plan yearly against best practice.
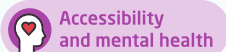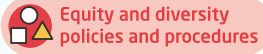
7.1.5 Become a member of Diversity Council Australia to expand resources available to staff related to diversity and inclusion ($3271.36) 🔴 Equity and diversity policies and procedures	**Ongoing** ◯	• GEDI Team	• Director of People & Culture	i. Membership renewed yearly.
7.1.6 Pursue a Family Friendly Workplace Certification 🔴 Equity and diversity policies and procedures 🟠 Workload /flexibility	**Q1 2027 – Q4 2029** ◯	• People & Culture Team	• Director of People & Culture	i. Certification received by Q4 2029. ii. 5% reduction in those with unfavourable ratings for discrimination based on childcare or carers duties. iii. At least 5% improved scores on Leave and Flexibility Factor questions in GEDI Survey when disaggregated by caring responsibility.
7.1.7 Engage mental wellbeing charities for seminars, best practice, resources, and training. 🔴 Equity and diversity policies and procedures 🟣 Accessibility and mental health	**Q1 2027 – Q4 2031** ◯	• Environmental Health & Safety Team	• Heady of Environment, Health & Safety	i. 5 mental wellbeing charities engaged for MCRI events and training by 2031. ii. 80% positive answer on "I generally experience high levels of wellbeing in relation to my job," and "My organisation cares for the wellbeing of its staff" GEDI Survey Questions. iii. At least 5% increase in score for "I generally experience high levels of wellbeing in relation to my job," and "My organisation cares for the wellbeing of its staff" GEDI Survey Questions when disaggregated by those with disability and/or mental health concerns.

7.2 **Provide targeted professional development support for those who would benefit most at MCRI.** ▪ *41% of staff who have held a position for at least three years have not received a step increment.* ▪ *1/7 (14%) of Learning and Development Programs at MCRI are available to non-senior staff, however People Leader sponsorship is required.* ▪ *Qualitative data suggests that highly visible leaders tend to be celebrated and therefore receive more training opportunities and support, perpetuating a cycle of those who*	**7.2.1** Implement a targeted program to support/prepare women postdocs and senior postdocs to successfully apply for promotion. 📈 Professional development 📍 Career pathways	**Q1 2027 – Q4 2031** ◯	• People & Culture Team	• Director of People & Culture	i. Program established by Q1 2028. ii. Increased participation in program each year (dependent on initial interest). iii. 5 women successfully apply for promotion through program. iv. Feedback from participants indicate satisfaction in the program and impact in the application for promotion process.
	7.2.2 Expand the delivery of internal training and support based on training analysis that includes professional development and/or upskilling and provide Gender-equitable access to staff at all Levels with clear criteria for self-nominating. 📈 Professional development	**Q1 2027 – Q4 2031** ◯	• People & Culture Team	• Director of People & Culture	i. Increased enrolment from all Themes and Units in Professional Development Opportunities yearly. ii. At least 5% improved scores on Leave and Career Support and Mentoring Factor questions in GEDI Survey when disaggregated by Gender and Position Type.
	7.2.3 Develop opportunities for professional development and upskilling of students and staff working on Indigenous health projects, with a priority for Aboriginal and Torres Strait Islander project staff. 📈 Professional development	**Q1 2029 – Q4 2031** ◯	• People & Culture Team	• Director of People & Culture	i. Professional development opportunities for Indigenous health projects developed by Q4 2029 in consultation with Indigenous communities, staff, and the ARG. ii. Participation rates increase yearly. iii. 5% decrease in "Neutral" score in response to GEDI Survey Question "Discrimination on the basis of Aboriginal or Torres Strait Islander heritage"

receive support perform well and therefore receive more support. ▪ *Targeting training to those who have been less visible and/or vocal can break the cycle of recognition and increased support to ensure that those who face additional barriers to progression are equitably supported.*	**7.2.4** Develop targeted coaching and/or mentoring to positively support and uplift: • Those with additional accessibility or wellbeing needs (funding, mentorship). • Those who have not been successful in grants or near miss grants. • Those who have returned from an extended period of leave. **Professional development** **Accessibility and mental health**	**Q1 2028 – Q4 2031** ○	• People & Culture Team	• Director of People & Culture	i. Coaching program developed by Q1 2029. ii. Coaching Program proposed to 100% of target staff. iii. Feedback from training participants indicates that programs have enhanced staff confidence and understanding of specified topics.
7.3 **Improve clarity on expectations and responsibilities for all staff.** ▪ *Only 41% of GEDI Survey Respondents agree that workload allocation is fair and transparent. This is partly a result of lack of clear policies, procedures and*	**7.3.1** Review MCRI forms, templates, and ongoing processes to consider how they can be lessened, combined or streamlined while simultaneously considering GEDI data considerations and a culture of inclusion. Following the review, make needed changes to reduce workload stress. **Equity and diversity policies and procedures** **Workload /flexibility**	**Ongoing** ○	• Risk Team • People & Culture Team • GEDI Team	• Head of Risk	i. Forms are reduced by 20%. ii. At least 5% improvement in the GEDI Survey question "the workload in my organisation makes it easy to balance work and home responsibilities."
	7.3.2 Expand the remit of all People Leaders by establishing KPIs related to fostering an enabling culture and	**Q1 2027 – Q1 2028** ○	• People & Culture Team	• Director of People & Culture	i. Revised Position Descriptions of People Leaders include cultural responsibilities by Q1 2028.

processes that make time, responsibilities and planning difficult. ■ *By explicitly outlining the requirements of regular tasks, the responsibilities of People Leaders and the decision-making frameworks used for decision making (e.g., promotion) our people can better plan their workloads.*	workplace that supports our people to thrive. Including but not limited to: • Financial Sustainability to reward and recognise our people. • Promote engagement, inclusion, and wellbeing through agreed ways of working (such as, working flexibility, supporting the individual through EHS measures and accessibility). • Enable their success by providing and supporting leadership and professional development support. • Promoting a culture of compliance. • Fostering collaboration and better connecting institutional initiatives. 🔴 Equity and diversity policies and procedures ⬍ Workload /flexibility 📊 Professional development 📍 Career pathways 🛡 Culture and safety ❤ Accessibility and mental health			• Senior Management Team	ii. Performance Review process for leaders includes provisions to discussion cultural KPIs. iii. 75% of People Leaders provide written evidence on how they have met their Culture KPIs to the GEDI team annually. iv. SAGE Silver Assessment reveals more consistent culture and leadership style from People Leaders (less than a 20% spread for Group and People Leaders in GEDI Survey disaggregated results).
	7.3.3 Expand definition of career break/relative to opportunity to include everything outside of traditional academic outputs for career progression.	**Q1 2027 – Q1 2028** ◯	• Office of the Director • Grants Team	• Deputy Director	i. Definition expanded by Q1 2028. ii. Step increments and Promotions better reflect MCRI's Sex/Gender ratio by 2031.

	Career pathways				
	7.3.4 Establish peer learning groups for People Leaders to share best practice and experience related to culture building. **Professional development** **Culture and safety**	**Q2 2027 – Q4 2031** ○	• People & Culture Team	• Director of People & Culture	i. Peer learning group established, and action iterated if adoption is less than 10% of People Leaders by 2028. ii. SAGE Silver Assessment reveals more consistent culture and leadership style from People Leaders (less than a 20% spread for Group and People Leaders in GEDI Survey disaggregated results).
7.4 **Conduct regular reviews and assessments on attitudes and experience to adjust practice** ▪ *The success of our Action Plan will be dependent on robust Monitoring, Evaluation and learning processes. Continuously reviewing our progress and amending practice based on staff feedback will ensure that our actions remain relevant and reveal*	**7.4.1** Review the salary support (i.e. hiring of RA or similar staff to enable work progression during periods of leave and alleviate impact of career breaks) process, and understand people experiences to investigate future capacity to support research staff who have/are experiencing career disruption. **Career pathways**	**Q1 2028 – Q1 2029** ○	▪ Finance ▪ Office of the Director	▪ Deputy Director	i. Scheme reviewed and recommendations made by Q1 2029. ii. Number of women remaining in post after 12 months increases to 80%. iii. 5% reduction in those with unfavourable ratings for discrimination based on childcare or carers duties.
	7.4.2 Conduct additional pulse surveys to continue understanding: a. The support parents would like or need before during and after parental leave b. The experience of the casual workforce c. The experiences of traditionally underrepresented groups at the	**Ongoing** ○	▪ People & Culture Team	▪ Director of People & Culture	i. Initial targeted pulse surveys regularly sent to specific staff groups by 2027. ii. Findings inform Action Plan revisions by 2029.
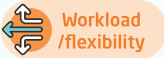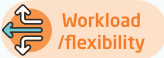
additional gaps along the way.

Institute with a focus on cultural backgrounds covering key employment stages

d. Staff and students' knowledge, attitudes, and practices in relation to issues of gender identity

Develop recommendations and responses based on the findings.

Equity and diversity policies and procedures | Workload /flexibility

Professional development | Career pathways

Culture and safety

7.4.3 Undertake a Gender equity review of all committee membership and develop a strategy to implement 40:40:20 Gender targets for membership, specifically recruit people from migrant and refugee backgrounds, LGBTIQA+ and Aboriginal and Torres Strait Islander members and enable rotating leadership positions. Professional development	**Q2 2025 – Q4 2031** ○	▪ Office of the Director	▪ Chief of Staff	i. Committee membership reviewed by Q4 2025, and Committee Membership Strategy developed by Q1 2026. ii. By year 7 all committees have achieved 40:40:20 gender targets and show people from migrant and refugee backgrounds, LGBTIQA+ and Aboriginal and Torres Strait Islander people in leadership positions.
7.4.4 Hold focus groups for targeted staff consultation and feedback on the promotions process and to gauge why more aren't applying.	**Q1 2027 – Q1 2028** ○	▪ People & Culture Team	▪ Director of People & Culture	i. Participation from all Research Themes in Focus Groups. ii. Recommendations for action developed by focus group participants by Q1 2028.

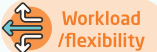|				
	Career pathways			iii. At least 5% improvement in the GEDI Survey questions "I am familiar with MCRI's criteria for promotion," "I feel there is sufficient support and guidance regarding promotion," and "I feel confident putting myself forward for promotion."
	7.4.5 Hold focus groups to ascertain attitudes and expectations regarding parental leave. Workload /flexibility	**Q1 2027 – Q1 2028** ◯	▪ People & Culture Team	▪ Director of People & Culture	i. Participation from all Themes and Pillars. ii. Recommendations for action developed by focus group participants by Q1 2028. iii. Number of women remaining in post after 12 months increases to 80%. iv. 5% reduction in those with unfavourable ratings for discrimination based on childcare or carers duties.
7.5 **Establish Physical Spaces That Demonstrate MCRIs Commitment to GEDI** ▪ *MCRI is based on the Melbourne Children's Campus and shares space with the Royal Children's Hospital and the University of Melbourne Department of*	**7.5.1** Create a permanent display in a central location to highlight important roles that diverse and traditionally underrepresented groups play at MCRI (award winners, non-traditional success stories). Culture and safety	**Q1 2024-Q1 2025** ◯	▪ Engagement & Development Team	▪ Director of Engagement & Development	i. Display established (at either ground floor or level receptions) highlighting 2 to 3 roles from traditionally underrepresented groups by Q1 2025. ii. At least 5% improvement in the GEDI Survey question "I feel the organisation has people of all genders as visible role models." iii. At least 5% improvement across all demographics in the GEDI Survey question "I feel the organisation has people of all genders as visible role models," when disaggregated by cultural background.

Paediatrics. As a result, the location of some rooms (e.g., Parenting Rooms), the space available (childcare) or where GEDI is celebrated is not accessible or convenient for our people.	**7.5.2** Explore options to increase the capacity of onsite childcare options, including ad hoc, short-stay (<2 hours) access to childcare and creating and maintaining a child/family-friendly space within MCRI's offices for times when staff need to bring children to work. ⬍ **Workload /flexibility**	**Ongoing** ○	▪ Engineering Team	▪ Chief Operations Officer	i. Options for childcare expansion and family friendly rooms at Melbourne's Children Campus provided by Q1 2025. ii. At least 5% improvement in the Leave and Flexibility GEDI Factor when disaggregated by caring responsibilities.
▪ Depending on our ability to expand and provide physical space that is accessible, convenient and relevant to our people we can continue to build our peoples confidence in our commitment to GEDI.	**7.5.3** Provide a dedicated parenting/expressing room with appropriate storage within MCRI's building and promote widely. ⬍ **Workload /flexibility**	**Q1 2025 – Q1 2026** ○	▪ Engineering Team	▪ Chief Operations Officer	i. Room established with fridge and breast pump by 2026. ii. At least 5% improvement in the Leave and Flexibility GEDI Factor when disaggregated by caring responsibilities.
	7.5.4 Explore options to provide additional places for collaboration (meeting spaces) to enable connection (perhaps offsite). 🛡 **Culture and safety**	**Q1 2025 – Q1 2026** ○	▪ Engineering Team ▪ Space Committee	▪ Chief Operating Officer	i. Options and explored recommendations proved to MCRI's leadership by 2026. ii. Appropriate and relevant actions taken by MCRI's leadership by 2029. iii. At least 5% improvement in GEDI Survey questions "lab space is allocated fairly in my organisation," and "office space is allocated fairly in my organisation."
	7.5.5	**Q1 2025 – Q1 2026**	▪ Engineering Team	▪ Chief Operating Officer	i. Options and explored recommendations proved to MCRI's leadership by Q2 2025.

Increase number of Gender-neutral toilets at the Institute in consultation with the LGBTQIA+ strategy. 🛡️ Culture and safety ⭕				ii. At least 5% improvement in GEDI Survey question "I feel that the organisation is a great place for gender diverse people to work." iii. At least 5% improvement in the Diversity, Equity and Inclusion GEDI Factor when disaggregated by Gender and sexual orientation.
7.5.6 Provide a room for use by staff and guests who require prayer space at the Institute. 🛡️ Culture and safety ⭕	**Q1 2025 – Q1 2026**	▪ Engineering Team	▪ Chief Operating Officer	i. Options and explored recommendations proved to MCRI's leadership by Q2 2025. ii. At least 5% improvement in the Diversity, Equity and Inclusion GEDI Factor when disaggregated by cultural background and religion.
7.5.7 Consider options for hot desking and formalise to facilitate onsite schedules. ⇅ Workload /flexibility 🔵	**Q4 2023- Q4 2024**	▪ Engineering Team ▪ Space Committee	▪ Chief Operating Officer	i. Positive feedback in surveys and engagement opportunities. ii. At least 5% improved Leave and Flexibility Factor Score in GEDI Survey (aim for 85%).
7.5.8 Create clear and accessible file system for recordings of meetings and seminars that happen outside of individual staff core work hours and all institute wide meetings. ⇅ Workload /flexibility ⭕	**Q1 2025 – Q1 2026**	▪ IT Team	▪ Chief Information Officer	i. Meetings and seminar database established and easily accessible by 2026. ii. Click rate on file system indicate that at least 25% of staff access recordings and important information from this resource. iii. At least a 20% increase in "I feel leaders decision making in my

					organisation is transparent" GEDI Survey question score.

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