

Notice number: 2022/00129

**COMMISSION OF INQUIRY INTO FORENSIC DNA TESTING
IN QUEENSLAND**

Section 5(1)(d) of the *Commissions of Inquiry Act 1950*

STATEMENT OF LARA KELLER

I, Lara Keller, of 39 Kessels Road, Coopers Plains, do solemnly and sincerely declare that:

1. I am the Acting Executive Director of Queensland Health Forensic and Scientific Services.
2. I have been issued with a requirement to provide a written statement by Commissioner Sofronoff QC, Notice 2022/129.
3. I have considered the schedule of topics provided by the Commissioner.
4. In this statement I have made reference to correspondence. For ease of reference to this correspondence, the file names have been updated to include the date and time at which the latest email was received. The Commission should note that the original file name of each document as included in this statement is exclusive of the date and time.

Background

Question 1 - Describe your qualifications, current position, how long you have held that position and duties and responsibilities.

5. I hold a Bachelor of Applied Science – Medical Laboratory Science and a Graduate Certificate of Health Management. I also have Mental Health First Aider Accreditation, PROSCI Change Management Practitioner Certification, PRINCE2 Project Management Foundation Accreditation, Certificate in Laboratory Quality Management Systems,

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Practitioners Certificate in Mediation, Certificates in Corporate Investigations and Investigation Report Writing, and Certificate IV in Assessment and Workplace Training.

6. I am presently the Acting Executive Director, Queensland Health Forensic and Scientific Services (FSS). I took this secondment in October 2021 and have been extended in the role until 23 December 2022. My substantive position is Pathology Queensland Group Laboratory Manager – Gold Coast.
7. The role of Executive Director, FSS is to manage, lead and optimise the state-wide multi-disciplinary operations of FSS, ensuring the provision of high quality, cost effective and client centred service delivery. The key responsibilities of the role include governance, delivering strategic and operational outcomes, managing compliance and risk, stakeholder engagement and leading others. Please see **Exhibit LK-1 - Executive Director FSS Role Description** for key responsibilities and accountabilities.

Question 2 - Describe (in brief) your work history.

8. After graduating, I worked for Sullivan Nicolaides Pathology from March 1991 to November 2002, as a Medical Laboratory Scientist then Assistant Manager, specialising in Haematology. From November 2002 to April 2003, I took a position with Queensland Health at The Prince Charles Hospital Pathology Queensland Laboratory as a Medical Laboratory Scientist in Transfusion. In April 2003, I was promoted to Supervising Scientist, Haematology Main Laboratory at Royal Brisbane and Women's Hospital. In July 2005, I was promoted to Core Laboratory Manager, Central Laboratory and held this position until November 2020. In November 2020 I was again promoted, this time to Group Laboratory Manager, Gold Coast Group. I took the secondment to FSS in October 2021.

Question 3 - Describe any previous experience with forensic DNA testing or analysis.

9. I have not trained in forensic DNA analysis. This is not a requirement for the role of Executive Director, FSS.

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Question 4 - Explain the organisational structure of the Queensland Health Forensic and Scientific Services (FSS) and the organisational structure above you at Queensland Health.

10. Forensic and Scientific Services (FSS) consists of scientific, forensic and public health laboratories co-located with police units and other agencies.
11. The doctors, scientists, technicians, nurses, counsellors, librarians and support staff employed at FSS provide expert analysis, advice, teaching and research as a vital part of the government response to threats to public health and the environment, epidemics, civil emergencies, criminal investigations, and Coroners' inquiries into reportable deaths.
12. FSS is scientifically diverse and has capabilities in Clinical Forensic Medicine Unit (CFMU); Public and Environmental Health (PEH) Stream including Inorganic Chemistry, Organic Chemistry, Radiation and Nuclear Sciences, Public Health Microbiology (including WHO accredited lab) and Public Health Virology; Coronial Services Stream including Forensic Pathology, Forensic Toxicology, and Coronial Family Services; Police Services Stream including Forensic Chemistry and Forensic DNA Analysis; Scientific Support; Quality; Research and Human Ethics; Information Research Services; Client Support and Liaison; Campus Management and Support; and Warehouse Services.
13. The Executive Director FSS has eight direct reports, being:
 - a) Director Clinical Forensic Medicine Unit
 - b) Chief Forensic Pathologist
 - c) Managing Scientist, Public and Environmental Health (PEH) Stream
 - d) Managing Scientist, Coronial Services Stream
 - e) Managing Scientist, Police Services Stream
 - f) Quality Manager FSS
 - g) Campus Support Services Manager FSS, and

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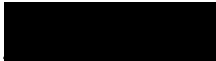
h) Principal Advisor FSS.

14. Please see **Exhibit LK-2 - Organisational Charts**. The Executive Director FSS currently reports to the Chief Pathologist, Pathology Queensland and Forensic and Scientific Services (PQ-FSS).
15. The Chief Pathologist PQ-FSS reports to the A/Deputy Director-General, Prevention Division, Queensland Health.
16. The Deputy Director-General, Prevention Division, Queensland Health reports to the Director-General, Queensland Health.
17. It is possible that these reporting lines will change with the implementation of the 2021-2022 Queensland Health Business Case for Significant Organisational Change.

Funding

Question 5 - Explain the funding model of FSS and, in particular, the DNA Analysis Unit. Describe, using figures, how the DNA Analysis Unit is funded, and how much it has cost to operate for each financial year since 1 July 2017.

18. It is my understanding that the majority (85%) of the funding for FSS comes from appropriation which includes 17% for depreciation expenses (budget neutral). The balance (15%) comes from a combination of Own Source Revenue (OSR) and other revenue including:
- a) Charges to Queensland Police Service
 - b) Charges to Local Government Bodies
 - c) Balance in charges to other government departments, Universities; other States and other organisations including private health insurance and water companies.
 - d) Fee for service (Queensland Health)
 - e) Campus recoverable income predominately associated with campus tenants.

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19. Police Services Stream (Forensic DNA Analysis and Forensic Chemistry) is funded through appropriation and own source revenue. Appropriation allocation has fluctuated by an average of 0.2% over the past 5 years, however not at the same level of expenses which have increased by an average of 3.5%.
20. Please see **Exhibit LK-3 - Forensic DNA Analysis Funding** for financial data for past financial years.

Question 6 - Do you consider that funding model fit for purpose and effective? In particular:

a. the division of funding between the Queensland Police Service and Queensland Health;

21. I am unsure how the division of funding was established between QPS and QH as this was years before my secondment to FSS. I have concerns that the funding allocation from QPS appears to have remained static for many years.
22. I would welcome a revised funding model, supported by a Memorandum of Understanding or Service Level Agreement or contract between parties. Hopefully this would detail the division of funding, and facilitate charging QPS on a fee-for-service basis for both volume and major crime exhibits above an agreed activity cap.

b. the way the funding from the Queensland Police Service and Queensland Health is calculated.

23. Please see response above. As managers, we always wish for more funding, however I understand that resources are limited, and we do the best we can with our allocations.

Question 7 - Explain how the DNA Analysis Unit would go about requesting further funding from the Queensland Police Service or Queensland Health.

24. I understand that funding requests within Queensland Health may be undertaken by submission of a business case, briefing note or with the assistance of Finance Business Partner from September each financial year as part of forecasting process.

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25. I am unsure of the process for requesting further funding from QPS.

Question 8 - Outline any requests for further funding made in relation to the DNA Analysis Unit to the Queensland Police Service or Queensland Health, and the reason for those requests, since 1 July 2017.

26. I am aware of a draft briefing note for the A/Deputy Director-General Prevention Division, originally approved by former Executive Director Mr John Doherty on 31 August 2021, requesting additional funding for Forensic DNA Analysis Unit for two Clinical Assistant positions (see **Exhibit LK-3.1 - Draft BFOG Investment Bids FSS**). I'm advised that this version did not progress further, and that the final revised version did not include the two aforementioned positions.

27. I am not aware of any requests for further funding to the Queensland Police Service.


Question 9 - Outline any notification or discussions with the Queensland Police Service or Queensland Health about the adequacy of the DNA Analysis Unit's funding that you are aware of since 1 July 2017.

28. I do not recall having any discussions with QPS regarding funding.


29. The process of budget allocation within Queensland Health requires considerable discussion regarding requirements, pressure points and growth. I'm certain I had conversations with the FSS Finance Business Partner and others, but I do not specifically recall discussing Forensic DNA Analysis funding.

Question 10 - Outline any discussion you have had about the adequacy of the DNA Analysis Unit's funding that you have had with Cathie Allen or any other staff member of that unit since commencing your current role.

30. Since my appointment at FSS, I have become familiar with the financial management and financial position of FSS, through multiple discussions with each of my direct reports as well as with the FSS Finance Business Partner. I have had conversations with Cathie Allen, the FSS Finance Business Partner and others about the allocation of funding by Queensland Police Service and Queensland Health for Forensic DNA Analysis Unit, but I am unable to

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recall exact dates and specific topics of each of these discussions. My opinion from these discussions is that funding across all areas of FSS is insufficient, given that activity and cost to serve is increasing. This is supported by financial reports showing FSS in deficit.

31. I meet with Cathie Allen and the FSS Finance Business Partner on a (generally) fortnightly basis. The FSS Finance Business Partner prepares (generally) monthly financial performance reports and I review these for the whole of FSS, not just Forensic DNA Analysis Unit.
32. A workshop was held on 26 May 2022 with the senior leadership team at FSS and was led by the FSS Finance Business Partners. During this workshop, budget management was discussed for all units at FSS. **(Exhibit LK-4 - Budget Workshop Slides copy annotated)**

Question 11 - Explain any prospective plans or inquiries you have regarding requesting further funding for the DNA Analysis Unit.

33. I understand that budget allocations have been delivered by Queensland Health for this current financial year. Negotiations are underway with Queensland Police Service to establish a Memorandum of Understanding (or Service Level Agreement or contract) for Forensic Testing. Should the opportunity present, I will submit a request for additional resourcing for the unit.

Management

Question 12 - Explain your management approach to the DNA Analysis Unit, for example how you stay informed and interact with staff within the DNA Analysis Unit.

34. My management approach to all work units across FSS is to assume we are all equal and that we simply have different jobs. When I commenced at FSS, I met with each of my direct reports, then their direct reports and team leaders, to understand their services, challenges, and achievements. In the first weeks of my appointment, I was invited to attend Forensic DNA Analysis Unit Senior Leadership Team meetings (not minuted, informal). This no longer takes place.

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35. I meet with Cathie Allen on a (generally) fortnightly basis during which we discuss current issues and activities within the Forensic DNA Analysis Unit. These meetings are not minuted.

36. I visit the Forensic DNA Analysis Unit when I'm able, to chat with the staff, check on their wellbeing, thank them for their service and be available for questions.

Question 13 - Explain your management approach to Cathie Allen, Managing Scientist of the DNA Unit, including how you communicate with her, the regularity of those communications and how her performance is assessed and managed.

37. I am Cathie Allen's line manager. We communicate verbally, by email, and occasionally by phone. The frequency of our verbal and email communications depends upon issues arising or projects underway. We meet on a (generally) fortnightly basis during which we discuss current issues and activities within the Forensic DNA Analysis Unit. Cathie is also welcome to speak with me any time on an informal basis.

38. There are (generally) weekly very informal FSS Leadership Team catch-up meetings, during which each of the leaders (including Cathie) can update colleagues on hot issues and achievements in their areas.

39. I assess Cathie's performance by various means including observation, records (e.g. reports, emails), feedback, and by asking questions. Cathie has a Career Success Plan (CSP) in place, which is the tool to document performance and development. To date, I have only undertaken the 6-month touch-base review of the CSP for Cathie which was initiated by my predecessor.

Question 14 - What are the current performance measures for the DNA Analysis Unit?

40. To my knowledge, current performance indicators for Forensic DNA Analysis Unit include:

- a) Financial position
- b) Approved Full Time Equivalent (FTE)

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- c) Activity
- d) Turnaround time
- e) Quality indicators
- f) Excess and sick leave balances

41. I understand that scientific performance is monitored by internal quality control and other proficiency programs. Please refer to my response to Question 22.

Question 15 - Does the DNA Analysis Unit have a method to measure effectiveness and efficiency? If so, describe the measure or measures, how and when it is measured, and its performance by that measure or measures in the financial years since 1 July 2019.

42. My response to Question 5 outlines the financial performance, FTE and activity changes for the Forensic DNA Analysis Unit across financial years.

43. I am aware of turnaround time metrics for Forensic DNA Analysis tabled by Inspector David Neville as referenced in my response to Question 24.

44. Quality performance is tabled at each FSS Leadership Team meeting (**Exhibit LK-5 – FSS LT Minutes Jul 2019 – Aug 2022**)

45. I have created leave balance reports since I arrived at FSS (refer **Exhibit LK-6 Leave Balances 31.10.2021**; **Exhibit LK-7- Leave Balances 26.12.2021**; **Exhibit LK-8 - Leave Balances 06.02.2022**)

Question 16 - Explain your understanding of the processes currently in place in the DNA Analysis Unit for staff members to raise concerns in relation to quality or scientific processes and management or managerial decisions or approach.

46. My view is that staff should be free to raise any issue with their colleagues, managers, union, via any other avenue, and/or HR Practitioner either formally or informally, any time.

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47. I am aware of a document in the Queensland Health Quality Information System (QIS2) which refers to management of differences of scientific opinion (please see **Exhibit LK-9 - QIS 36061**).

48. I am aware that a QIS2 document was published in 2021 which is a guide for Forensic DNA Analysis staff in modelling the values and behaviours expected in the workplace (please see **Exhibit LK-10 - QIS 36129**).

Question 17 - Do you consider those processes are effective and freely used by staff? Why/why not?

49. In my experience in this and my former workplaces, there will always be some people who may not be comfortable in raising their concerns with their line manager. It is my impression that, as only a small number of Forensic DNA Analysis staff have asked to meet privately with me, processes are effective.

Question 18 - Describe all concerns or issues (including in relation to quality or scientific processes and management or managerial decisions or approach) that staff members of the DNA Analysis Unit have raised with you since you became the Acting Executive Director and for each concern or issue:

- a. identify who raised the concern or issue with you, how and when;
- b. explain your understanding of the issue, whether it was justified, whether it had systemic or laboratory-wide implications;
- c. explain what you perceived to be concerns for the operation of the laboratory on which you should act;
- d. explain what actions you took as a result of the concern or issue (or a number of concerns or issues);
- e. explain whether you consider each concern or issue has been adequately dealt with, and if not, what you intend to do about the concern or issue;

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- f. **attach all relevant correspondence or notes from meetings about each concern or issue.**

50. I have had many conversations with staff and managers within the Forensic DNA Analysis Unit since I commenced at FSS. I have included as many of these as I can recall. Please see **Exhibit LK-11 - 2022-00129 Question 18 table noting that this exhibit has sub-exhibits numbered 11.1 – 11.50. Note: this exhibit and its sub-exhibits have been removed subject to further discussion with the Commission.** I acknowledge that there may have been other issues raised with me, however I am unable to locate or recall the details.

Question 19 - As of the 30 August 2022, please advise how many (if any) staff members of the DNA Analysis Unit were absent from the workplace as part of a Workcover process, and the reason for each absence.

51. I am advised that the number is zero.

Culture

Question 20 - Describe your perception of the culture of the DNA Analysis Unit and how you have reached that view.

52. I consider that the culture of the Forensic DNA Analysis Unit could be enhanced. I have reached this view after reading the Queensland Health Working for Queensland 2021 Survey report (please see **Exhibit LK-12 - 2021 WFQ Survey copy annotated**) and through informal conversations with some of the staff in the unit.

53. My impression is that there is mistrust within the supervisory team, and the department is managed in a hierarchical, “command and control” manner

54. I am aware that my predecessor initiated a workplace culture project to optimise culture, however I am not aware of the circumstances which led him to initiate that project. I had received a written handover document prepared by the former Executive Director FSS, Mr John Doherty, which included a single short paragraph indicating that there were “some cultural issues that need to be resolved”, and that “processes are already in train to improve

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this and realign the management team culture” (See **Exhibit LK-12.1 – Excerpt Handover JD**). There was no face-to-face handover with Mr Doherty, and he had left his post before I commenced.

55. I am aware that a QIS2 document was published in 2021 which is a guide for Forensic DNA Analysis staff in modelling the values and behaviours expected in the workplace (please see **Exhibit LK-13 - QIS 36129**).

56. It appears that a less hierarchical, more inclusive approach to managing the Unit may improve morale.

57. The preliminary findings of the 2022 Workplace Harmony Survey for the Forensic DNA Analysis Unit suggest that improvements could be made to the culture of the Unit.

Question 21 - Explain the workplace harmony survey you recently disseminated through the DNA Analysis Unit, including identifying:

a. The reasons for undertaking that survey

58. I initiated workplace harmony surveys when I was working as the Gold Coast Group Laboratory Manager. I wanted to compare my impressions of the satisfaction of staff within the teams with their responses to targeted questions. In my time at Gold Coast, I surveyed the Gold Coast Phlebotomy/Specimen Collection; Specimen Reception; Haematology; Chemistry; Anatomical Pathology and Mortuary; Microbiology; and Administration teams as well as the Robina Laboratory. The survey was initiated at FSS as I had become aware of some workplace culture concerns in a few units, one of which was Forensic DNA Analysis Unit.

b. The aim of the survey

59. The intention of the survey is to take a point-in-time snapshot of the culture within a team.

c. The questions asked (or attach a relevant document outlining the survey)

60. Please see **Exhibit LK-14 - Workplace Harmony Survey Questions**.

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d. The response rate (i.e. how many responses)

61. I believe that the invitation was sent to 66 Forensic DNA Analysis Unit staff. A total of 47 staff responded to the survey. This suggests a 71% response rate.

e. The themes that emerged from the responses to the survey

62. I am presently collating and analysing the responses.

f. Your actions or intended actions as a result of the responses to the workplace harmony survey.

63. My actions from the survey responses will be to distil into themes and add the creation and execution of an action plan to the Career Success Plan (CSP) for each of my direct reports. This is the approach I took at Gold Coast. If I am still at FSS, I will seek to resurvey staff at a future date to confirm effectiveness of the action plan.

Results

Question 22 - Explain what measures are in place to monitor the results of the DNA Analysis Unit, in terms of its success in obtaining results (that is, obtaining a DNA profile that can be compared to a reference profile) and the accuracy of those results.

64. I am aware of documents held in the Queensland Health Quality Information System (QIS2) which describe various quality management procedures and practices in Forensic DNA Analysis Unit including:

- a) Document 17154 – Procedure for Quality Practice in Forensic DNA Analysis (noting that this document includes a large number of associated links to supporting documents). Please see **Exhibit LK-15 - QIS 17154**.
- b) Document 24514 – Preparation & Testing of Quantification Standards, in-house controls, quantification kits and amplification kits (please see **Exhibit LK-16 - QIS 24514**)

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- c) Document 30800 – Investigating Adverse Events in Forensic DNA Analysis Unit (please see **Exhibit LK-17 - QIS 30800**)
- d) Document 34114 – Proficiency Testing in Forensic DNA Analysis -FR (please see **Exhibit LK-18 - QIS 34114**)
- e) Document 33315 – Procedure for verification and maintenance of equipment (please see **Exhibit LK-19 - QIS 33315**)
- f) Document 23401 – Forensic DNA Analysis Validation and Verification Guidelines (please see **Exhibit LK-20 - QIS 23401**)
- g) Document 34063 – Preparation & Testing of Extraction Quality Controls and Testing of Extraction Reagents (please see **Exhibit LK-21 - QIS 34063**)
- h) Document 34298 – Validation of Examinations (please see **Exhibit LK-22 - QIS 34298**)
- i) Document 34514 – Preparation & Testing of Quantification Standards, In House Controls, Quantification Kits and Amplification Kits (please see **Exhibit LK-23 - QIS 34514**)
- j) Document 36061 – Procedure for Resolving DNA Profile Interpretation Differences of Opinion (please see **Exhibit LK-24- QIS 36061**)

65. Other documents may exist but I am not familiar with them.

Question 23 - In the paper entitled "Variation in forensic DNA profiling success among sampled items and collection methods: a Queensland perspective", Dr Matthew Krosch reported the percentage of samples submitted to FSS that returned results. Describe:

a. Your view of the results reported in the paper

66. As I am not a qualified Forensic DNA Scientist, it would be inappropriate for me to comment on the scientific aspects.

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b. Whether the results in this paper led to any investigation or action by FSS and if so, describe that action or investigation

67. The journal article was published before my arrival at FSS, so I am unaware of activities prior to my appointment.
68. I understand that a Right To Information application was made in February 2022 in relation to this journal article (**Exhibit LK-25 - 26D-01b**). This RTI request was actioned by relevant FSS staff, cleared by Cathie Allen as the Managing Scientist Police Services Stream, and provided to the QH RTI decision-maker as required.
69. Cathie Allen raised her concerns with me about the paper in our fortnightly meeting of 10 February 2022 (**Exhibit LK-26 - Meeting agenda 10.02.2022 annotated**). She subsequently prepared a brief for me, requesting that I approve for an "Expression of Concern" letter to be lodged with the journal publishers (see **Exhibit LK-27 - ED Briefing Note Journal Articles**). I understand that several iterations of the letter were drafted in the following months, and I ultimately signed a letter on 4 July 2022 to the publishers of the journal (Taylor & Francis) expressing our concerns and requesting these be investigated and a response provided (**Exhibit LK-28 - Letter to Taylor & Francis**). To date, we have not received a response from Taylor & Francis to this letter.

c. Who you spoke to at FSS or QPS regarding this paper and the reported results and the content of those conversations.

70. I understand that a Right To Information application was made in February 2022 in relation to this journal article (**Exhibit LK-25 - 26D-01b**). This RTI request was actioned by relevant FSS staff, cleared by me, and provided to the QH RTI decision-maker as required.
71. I was copied into an email from Inspector David Neville to Cathie Allen dated 17 December 2021, entitled "Enquiries from Ms Kirsty Wright". Please see **Exhibit LK-29 - 20211217 DN CA Enquiries from Ms Kirsty Wright**.
72. I have spoken with Cathie Allen about the paper on a number of occasions, however I am unsure of the exact dates/times of each conversation, apart from those described in my

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informal notes (**Exhibit LK-30 20220210 Catch up Cathie, Exhibit LK-31 - 20220426 Catch up Cathie, Exhibit LK-32 - 20220714 Catch up Cathie**)- and as part of the RTI package. I recall Cathie mentioning that she and Allison Lloyd had offered feedback on the paper when it was being prepared but that this did not seem to have been incorporated into the final version; but am unsure of the date/time of this.

Dealings with Queensland Police Service

Question 24 - Explain your involvement with members of the Queensland Police Service (QPS) in relation to the DNA Analysis Unit, including identifying:

a. Your understanding of the relationship between QPS and the DNA Analysis Unit, including the relationship between management in the relevant respective areas.

73. I understand that the working relationship between QPS Officers and the laboratory scientific and administrative staff in the Forensic DNA Analysis Unit is professional. I cannot comment on the working relationship between QPS and QH prior to my arrival at FSS.

74. Cathie Allen has expressed to me her mistrust of Inspector David Neville, however the root cause or history of this is unknown to me. I perceive tension between Cathie Allen and Inspector Neville however I have not witnessed unprofessional behaviour from Cathie Allen towards the Inspector, nor have I been copied into any emails from Cathie Allen to Inspector Neville which I consider inappropriate. I have expressed my concern that the Managing Scientist Police Services Stream has a less than trusting relationship with QPS to others but cannot recall specific dates/times of this.

75. I have worked collaboratively with many QPS representatives during my various roles with Queensland Health. I remain focussed upon establishing and maintaining positive working relationships.

b. Your understanding of the role that the QPS plays in the way the DNA Analysis Unit operates.

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76. My understanding is that QPS considers itself the primary client and owner of samples submitted to the Forensic DNA Analysis Unit. QPS does not operationally manage the Forensic DNA Analysis Unit, and in my opinion, there is limited understanding of the day-to-day operations of the Unit. I understand that neither the substantive Superintendent of the QPS Forensic Services Group (Supt McNab) nor the current Inspector of QPS Biometrics (Insp Neville) are qualified Forensic DNA Scientists.

- c. Any concerns or issues raised with you by members of the QPS (including in relation to quality or scientific processes and management decisions or approach), when the issue was raised, who raised the issue and what actions you took in relation to those issues.**

63 Please refer to **Exhibit LK-33- 2022-00129 Question 26** table noting that this exhibit has sub-exhibits numbered 33.1 – 33.63.

Question 25 - Describe your understanding of, and involvement in, the process to date in developing a Memorandum of Understanding and/or Service Agreement with the QPS, including:

- a. Explaining the reasons for beginning that process;**

77. The initiation of a Memorandum of Understanding specific to Forensic DNA analysis was prior to my tenure at FSS. I understand though that this was initiated to ensure that there was shared understanding of the service, and a model to recoup expenses for increasing activity. Additional information about the MOU is detailed in my response to Question 39.

- b. Explaining what, from the perspective of FSS, the document should include;**

78. I consider the MOU should outline the agreed principles of engagement between the organisations, how resources may be shared, activity management and the model for reimbursement for services.

- c. identifying the benefits of such an agreement for FSS;**

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79. I consider the benefits for FSS are in matching activity with revenue, accessing development hours for the Forensic Register software platform, and in clearly articulating a shared service and engagement model.

d. identifying any challenges that have been faced in developing these agreements;

80. Challenges that have arisen in an effort to progress the MOU are covered in my response to Question 39, however they can be summarised as:

- a) QPS COVID-19 priorities meant that the MOU, as drafted by QH and provided to QPS in late 2019, was not actioned by QPS. The MOU was re-invigorated as a priority for both agencies following an exchange of letters in late 2021 (ref **Exhibit LK-34 - 39-02, Exhibit LK-35 - 39-03 & Exhibit LK-36 - 39-04** - see also Question 39).
- b) Change-over in executive leadership at QH and QPS. I have been advised that the former Executive Director FSS, John Doherty, and Supt Bruce McNab QPS met regularly to discuss various matters, however there are no records of these meetings. Both are no longer working in their previous roles, which left a significant knowledge gap in progressing this MOU.
- c) Differences of opinion have recently emerged between QPS and FSS about the suitability (completeness) of the MOU / Header Agreement for signing. FSS acknowledges that additional work is required to complete the service/cost schedule (addendum), however we believe that the MOU / Header Agreement as is, is suitable for progression, and does not require the Schedule addendum in order to achieve an initial signed agreement.
- d) The uncertainty of potential recommendations stemming from this Commission of Inquiry, and also in how recommendations from the WSJT will be implemented, is creating pause for FSS in moving ahead with specific commitments to services and costs (ie development of a Schedule of

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services/costs addendum to MOU). I do not believe, however, that this uncertainty should prevent progression of the MOU / Header Agreement.

- e) I have recently been advised that the former General Manager overseeing FSS, Michel Lok, had been seeking to have just the Header Agreement signed, and was then looking to enter into discussions regarding the Service Schedule/s. I have been advised that this was an attempt at a different tactic this time, as apparently the previous attempts regarding an MOU with a Schedule included in it had failed. I have been advised that Michel Lok's intention was to progress with just the Header agreement only, and once signed, then move to the Schedules for consultation.

- e. attaching the most recent draft version of the agreement.**

81. Please see **Exhibit LK-37 – 19.11.01 Draft MOU**.

October 2021-June 2022

Question 26 - Explain in detail all meetings, discussions or correspondence you were involved in with management of Queensland Health or the Queensland Police Service between 1 October 2021 and 2 June 2022 in relation to:

- a. Thresholds used by the DNA Analysis Unit for determining what testing and processing would be applied to samples (for example, thresholds for reporting "No DNA detected" or "insufficient DNA for further processing");**

82. There have been an extraordinary number of discussions regarding Forensic DNA Analysis Unit since my appointment in October 2021. I consider it impossible for me to recollect every single conversation, the date/time of the conversation and the precise details of the conversation. I have referred to my notes, emails and calendar and offer the following response to the best of my knowledge:

- a) Please refer to **Exhibit LK-33 - 2022-00129 Question 26 table**.

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b) I have informal notes suggesting that thresholds were discussed on the following dates:

- i. 16 December 2021 (**Exhibit LK-33.48- 20211216 Catch up Cathie**). This was my regular catch up with Cathie Allen, and it seems that I asked about Operation Tango Amunet enquiry progress.
- ii. 23 March 2022 (**Exhibit LK-33.51 – 20220312 Catch up Cathie notes**). This was my regular catch up with Cathie Allen and my notes state that “Justin finished writing paper. CA doing exec summary” This was linked to the note Tango Amunet report progress. 17 March 2022 (**Exhibit LK-33.54 – 20220317 LK notes QPS FSS meeting**). The calendar invitation states that Superintendent Bruce McNab, Inspector David Neville, Cathie Allen, Delinda Brits and I were in attendance. Refer to **Exhibit LK-33.54a – 20220317 DN email** for proposed agenda items and **Exhibit LK-33.54b – 20220317 – CA comments re agenda items**. My notes indicate that there was discussion about Inspector Neville’s review of data and that Cathie Allen suggested that the follow up report would be available next the week.
- iii. 7 April 2022 (**Exhibit LK-33.49 – 20220407 Catch up Cathie**). This was my regular catch up with Cathie Allen, and my notes indicate that I enquired about the progress of the threshold report and that Cathie indicated that if further options were presented it would require Forensic Register modification.

b. The Queensland Police Service submission in response to the Women’s Safety and Justice Taskforce (WSJT) Discussion Paper 3 regarding the overall success rate of obtaining a useable profile when the QPS requested re-testing of samples reported as "DNA insufficient for further processing"

83. I became aware of the QPS submission to the WSJT on 1 June 2022 and read it on the WSJT website that day. I forwarded a link to the QPS submission to the following staff

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within Queensland Health that same day: Megan Fairweather, Nicola Lord, Dr Adam Griffin, Jacqui Thomson, Cathie Allen, Dr Petra Derrington and Prof Keith McNeil, for their information.

84. We received a media enquiry from The Australian (via the QH Media Team) that afternoon requesting a response to various matters raised by the QPS in their WSJT submission, and the FSS response is provided in (**Exhibit LK-38 - 26B-01**).
85. We received a further media enquiry that afternoon from The Gold Coast Bulletin which may have been prompted by the QPS WSJT submission, however it was more focussed on a particular individual's case plus broader questions, and the FSS response to this is provided in (**Exhibit LK-39 - 26B-02**).
86. I became aware of subsequent media reports referring to the QPS WSJT submission the following day (2 June 2022), and forwarded these to QH Legal, Dr Petra Derrington and Prof Keith McNeil for their information.
87. That morning (2 June 2022) I was advised that I would need to attend an online meeting with the Minister and A/Director-General, plus others. Details of that meeting are described in my response to Question 28c.
88. I recall a telephone conversation with Superintendent Bruce McNab on 6 June 2022 during which I expressed my disappointment about the content of page 21/22 of the report. I recall Superintendent McNab commenting that there had been long-term conflict between organisations and that he had to acknowledge the outstanding issues in the report. We talked about the follow up thresholds report and status of that and I recall committing to expediting this. He added that he had advised the QPS Commissioner that I was trying to work through the various issues, and this was not about me personally. I recall the conversation ended with us agreeing to meet and work together to resolve outstanding items.

c. The processing and reporting of results in the case involving the murder of Shandee Blackburn;

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89. There have been an extraordinary number of discussions regarding Forensic DNA Analysis Unit since my appointment in October 2021. I consider it impossible for me to recollect every single conversation, the date/time of the conversation and the precise details of the conversation. I have referred to my notes, emails and calendar and offer the following response to the best of my knowledge:

- a) Please refer to Exhibits tendered in response to Question 26 for QPS engagement.
 - b) I am aware that two Right to Information requests were made by Hedley Thomas – one on 13 January 2022 (**Exhibit LK-40 26D-01a**), and the other on 9 February 2022 (**Exhibit LK-25 - 26D-01b**). Both RTI requests were actioned by relevant FSS staff, cleared by me, and provided to the QH RTI decision-maker as required.
 - c) Conversation with Cathie Allen on or around 3 June 2022 regarding further samples submitted as part of the Blackburn case (not minuted)
 - d) A Hot Issues Brief (HIB) sent on 3 June 2022, titled “Update to advice regarding DNA sample results in Shandee Blackburn case” (see **Exhibit LK-41B - HIB FDNA 3 June 2022**).
- d. Any matter raised by the Hedley Thomas podcast "Shandee's Story" or other media discussion regarding forensic DNA testing in Queensland.**

90. There have been an extraordinary number of discussions regarding Forensic DNA Analysis Unit since my appointment in October 2021. I consider it impossible for me to recollect every single conversation, the date/time of the conversation and the precise details of the conversation. I recall informal conversations with Cathie Allen, Justin Howes, and Paula Brisotto regarding responses to media enquiries; podcast content and staff listening to the content; and case file review, but I cannot remember the specific dates/times or details.

91. I am aware that two Right to Information requests were made by Hedley Thomas – one on 13 January 2022 (**Exhibit LK-40 26D-01a**), and the other on 9 February 2022 (**Exhibit**

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LK-25 - 26D-01b). Both RTI requests were actioned by relevant FSS staff, cleared by me, and provided to the QH RTI decision-maker as required.

92. The following media enquiries were made to FSS, and were responded to as follows:

- a) 18 November 2021 (rec'd at FSS 22 Nov 2021): The Australian (see **Exhibit LK-41A - 26D-01c**). The nature of the questions asked by the journalist were scientific in nature and required a significant amount of time for the relevant Forensic DNA scientists to prepare a response. This response was ultimately forwarded to QH legal for advice about the appropriateness of responding given that our understanding was that the Shandee Blackburn case (police investigation) may still have been open (unsolved), and there may have been legal implications in publicly releasing information about the case.
- b) 7 February 2022: The Australian (see **Exhibit LK-42 26D-02**) and (see **Exhibit LK-43 - 26D-03**).
- c) 8 February 2022: The Australian (see **Exhibit LK-44 26D-04**)
- d) 15 February 2022 (rec'd at FSS 16 Feb): The Australian (see **Exhibit LK-45 26D-05**).
- e) 21 February 2022: The Australian (via the Minister's Office) (see **Exhibit LK-46 - 26D-06**).
- f) 1 June 2022: The Australian (see **Exhibit LK-47 - 26D-07**).
- g) 1 June 2022: Gold Coast Bulletin (see **Exhibit LK-48 - 26D-08**).
- h) Additional information was requested by the Minister's Office on 10 May 2022 regarding a Courier Mail article (see **Exhibit LK-49 - 26D-09**).
- i) Additional information was requested by the Minister's Office on 23 February 2022 regarding an article in The Australian (see **Exhibit LK-50 - 26D-10**).

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93. The following meetings (relevant to discussions stemming from the podcast or other forensic DNA testing related media) were recorded in my calendar, and my recollection of them is described below:

- a) A meeting was held on 1 December 2021, between myself, Cathie Allen and Brett Bricknell (my then General Manager/supervisor), to brief Brett on the history of the 2018 Options Paper (thresholds).
- b) A whole of Forensic DNA Analysis meeting was held in the FSS Conference Theatre on Friday 3 December 2021 to broadly discuss the matters raised in the media. It was my intention to reassure the staff of my support for them, and to offer access to additional professional support (e.g., Benestar Employee Assistance Service). During this meeting it was apparent that there was significant distress amongst some staff about the media reports, and the negative impact it was having on them professionally and personally.
- c) A meeting was held on Wednesday 12 December 2021 between myself, Brett Bricknell and QH lawyers to discuss the implications for FSS regarding the announcement that the Shandee Blackburn coronial investigation was being re-opened.
- d) On Friday 11 February 2022, I met with Forensic DNA Analysis staff in person again to similarly re-affirm my support for them during this heightened time of media coverage.
- e) On 16 February 2022, there was an online meeting between myself, Brett Bricknell, Cathie Allen and my Principal Advisor, Alison Slade, to discuss a media enquiry from The Australian re thresholds.
- f) On 17 February 2022, there was a meeting with QH Legal, myself and others to discuss the Shandee Blackburn coronial investigation.
- g) Prof Keith McNeil (A/DDG) and Brett Bricknell (GM) attended FSS for a whole of Forensic DNA Analysis meeting on Friday 18 February 2022, to

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provide them with an opportunity to address the staff and offer support re the current media coverage of the laboratory.

- h) I met with Cathie Allen and Alison Slade on 23 February 2022, to discuss the preparation of a briefing note to the Director-General regarding the Shandee Blackburn case and subsequent media interest.
- i) Please refer to details regarding a meeting record of 28 February 2022 in my response to Question 27a.
- j) On 2 March 2022, I had a meeting with an officer from the QH media unit and Alison Slade to discuss possible additional support from QH media for a potential announcement re a proposed Independent Review of the Forensic DNA Analysis laboratory.

94. The following official correspondence was prepared to inform QH management and/or the Minister of background information related to matters raised in the podcast and other forensic DNA testing related media:

- a) DG Brief for noting (C-ECTF-21/22452) sent to the Director-General on 25 November 2021, titled “DNA analysis of samples at Queensland Health Forensic and Scientific Services (FSS) pertaining to the death of Shandee Blackburn in February 2013” (see **Exhibit LK-51 - 26D-11**). **Exhibit LK-51 - 26D-11** contains legal professional privilege and is not attached to this statement. Please note discrepancy in signing date – physical DG signature is dated 30 December 2021, however the corporate electronic records system indicates that he signed this brief on 30 November 2021.
- b) DDG Brief for noting (C-ECTF-22/2603) sent to the A/Deputy Director-General of Prevention Division on 4 February 2022, titled “Right to Information Request 22-2959 re Shandee Blackburn” (see **Exhibit LK-52 - 26D-12** and **Exhibit LK-53 - 26D-13**). **Exhibit LK-53 - 26D-13** contains legal professional privilege and is not attached to this statement.

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- c) Ministerial Brief for Noting (C-ECTF-22/5219) in March 2022, titled: “Independent Review of the Forensic and Scientific Services Forensic DNA Analysis Service”. This brief and attachments were provided in response to Notice 2022-00002¹.
- d) Director-General Brief for Approval (C-ECTF-22/6199) signed on 4 April 2022, titled: “Independent Review of the Forensic and Scientific Services Forensic DNA Analysis Service”. This brief and attachments were provided in response to Notice 2022-00002.²
- e) Hot Issues Brief (HIB) sent 8 February 2022, titled “Response to media enquiry from The Australian”, noting this HIB was edited by Brett Bricknell after being sent from FSS (see **Exhibit LK-54 - 26D-14**).
- f) PPQs (Possible Parliamentary Questions) prepared and updated for the following Parliamentary sitting dates, noting that the Exhibits provided reflect the document versions as they were sent from FSS, and do not incorporate any changes made by other levels of the Department after FSS had updated / onforwarded them. These documents have been identified as being subject to parliamentary privilege and are accordingly not attached to this statement:
- iv. 26 November 2021: (prepared by Pathology Queensland – no records at FSS)
 - v. 22-24 February 2022: “Involvement of Forensic and Scientific Services in the murder investigation of Shandee Blackburn” (**Exhibit LK-55 - 26D-15**).
 - vi. 29-31 March 2022 (Version 1 – updated on 21 March 2022): “Involvement of Forensic and Scientific Services in the murder investigation of Shandee Blackburn” (**Exhibit LK-56 - 26D-16**).

¹ See FSS.0001.0024.4382

² See FSS.0001.0024.4409

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- vii. 29-31 March 2022 (Version 2 – updated on 31 March 2022): Renamed “Forensic DNA Analysis Internal Reviews” (**Exhibit LK-57 - 26D-17**).
- viii. 10-12 May 2022: “Status of recommendations from the QAO ‘Delivering Forensic Services 2018-19’ Report” (**Exhibit LK-58 - 26D-18**).
- ix. 10-12 May 2022: “Independent External Review of the Forensic DNA Analysis Service” (**Exhibit LK-59 - 26D-19**).
- x. 21-24 June 2022: “Status of recommendations from the QAO ‘Delivering Forensic Services 2018-19’ Report” (**Exhibit LK-60 26D-20**).

Question 27 - Explain your involvement in a meeting in late February 2022 with Shaun Drummond, Megan Fairweather, Keith McNeil and John Wakefield regarding the DNA Analysis Unit, including identifying:

a. When this meeting occurred.

95. Whilst I have a record of an appointment to meet with the Director-General at his office at 1 William St, Brisbane, on 28 February 2022 between 11:30-12:00pm, I can confirm I did not attend an in-person meeting. An equivalent Teams Meeting appointment was also located in my diary, however, I have no recollection of attending this meeting, nor can I locate any respective diary or meeting notes. The Microsoft Teams calendar appointment indicates that the invitees included: Dr John Wakefield, Dr Petra Derrington, Prof Keith McNeil, Dawn Schofield and myself (I do not recall the circumstances for my not attending this Teams meeting, and am unsure if it actually took place).

b. How you prepared for the meeting.

96. Please see response to part a) of this question.

c. Who you discussed or corresponded with, when, and what was said, in preparation for that meeting.

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97. Please see response to part a) of this question.

d. Any documents you reviewed prior to, or during, the meeting.

98. Please see response to part a) of this question.

e. What was discussed in the meeting and your role in those discussions.

99. Please see response to part a) of this question.

f. What occurred as a result of the meeting, and the reasons for those actions.

100. Please see response to part a) of this question.

Decision on 6 June 2022

Question 28 - Explain your involvement in two decisions made on or about 6 June 2022, namely:


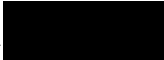
a. That the threshold for reporting samples as "DNA insufficient for further processing" be removed, and samples in the range 0.001—0.0088 ng/pL (range) be processed; and

101. I did not make the decision to remove the threshold for reporting samples as “DNA insufficient for further processing” be removed, and samples in the range 0.0010 to 0.0088 ng/pL (range) be processed. As detailed in my response to part c) of this question, I took advice from Cathie Allen about the reversion to the process in place for samples in that range before 2018.

b. that some or all new samples in the range 0.001—0.0088 ng/pL will go directly for amplification rather than for concentration,

102. I did not make that decision.

including identifying:

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a) Your understanding of who made each decision, when it was made and on what information.

103. I do not know who made the decision or when it was made. I provided advice to the A/Director-General as described in paragraph 115 and I have no understanding of who ultimately made the decision, when it was made, or on what basis.

b) What other options were considered as part of the decision-making process.

104. I am only aware of the options presented in the email of 3 June 2022 to Mr Shaun Drummond understood to have been provided to the Commission of Inquiry already)

c) The details and content of a meeting on or about 2 June 2022 with the Health Minister, Yvette D'Ath, and Shaun Drummond and their advisors regarding the DNA Analysis Unit, and:

(i) How you prepared for the meeting.

105. I prepared for the meeting by making some handwritten notes (**Exhibit LK-60A - Pre-meeting notes – Ministerial mtg 2 June 2022; Exhibit LK-60B Ministerial Zoom meeting 2 June 2022_pt1 and Exhibit LK-60C - Ministerial Zoom meeting 2 June 2022_pt2_attendees**). These notes related to FSS position on the statements made in the QPS response to Discussion Paper 3 from the Women's Safety and Justice Taskforce, page 21 and 22 as well as some key messages regarding the service.

(ii) Who you discussed or corresponded with, when, and what was said, in preparation for that meeting.

106. Immediately prior to the meeting, I had a telephone conversation with Shaun Drummond and one of his advisors. I presented a summary of the key points I would put forward at the meeting.

(iii) What was discussed in the meeting and your role in those discussions.

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107. During the meeting, I recall Minister D'Ath asking questions relating to the QPS statements made in the Discussion Paper, including (not verbatim):

- a) When I became aware of the Discussion Paper.
- b) How the data presented by QPS in the report was derived. I said that this was not known to me, and that in a previous meeting with QPS, it was suggested that as the cases were known sexual assaults, and perhaps there had been some 'cherry picking';
- c) Is the data in the submission by QPS accurate? I said that I cannot confirm this as we do not know yet how the data was derived, and that we would need to collaborate with QPS to determine this.
- d) The status of any follow up about thresholds. I said that a follow up report was in draft, and Mr Drummond and Minister D'Ath requested this, data about reworks and a timeline of events be sent to them after the meeting.

108. I recall stating that thresholds may vary across jurisdictions as different labs use different equipment and processes.

109. I recall stating that FSS was prepared to send the Blackburn casefile to another laboratory for peer review, but that QPS asked us not to do that.

110. I recall stating that the process for not further testing below the threshold (introduced in 2018) was not in place at the time of the Blackburn case. I was asked by Shaun Drummond if I was 1000% certain that all samples had been fully tested to the end in that case. I said I would need to ask Cathie Allen and I called her into the meeting. Cathie then said she could 1000% confirm that all samples were fully tested in the Blackburn case.

111. Whilst Cathie was present in the meeting, there was a question about the data which Dr Kirsty Wright apparently refers to in the media. I recall Cathie proposing that this data may be from the journal article by Dr Matt Krosch.

(iv) What occurred as a result of the meeting.

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112. I sent two emails to Shaun Drummond and Minister D'Ath directly. The first email included the 2018 Options Paper, email confirmation from QPS that Option 2 was approved, and the draft follow up assessment paper. The second email contained the timeline of events, the rework statistics and the working spreadsheet from Cathie Allen on the QPS data. (Please refer to Exhibits **LK-60D - FW: Options Papers - First one and Draft of Second** and **LK-60E - FW: Documents - timeline and number of requests**).

d) The impetus for your email to Shaun Drummond and the Minister for Health dated 2 June 2022, 2.33pm, attaching the 2018 "Options Report" presented to the Queensland Police Service, a 2022 "Update Report and an email from QPS officer Dale Freiberg.

113. I was asked by the A/Director General and Minister for Health for these documents to be sent directly to them. The email from QPS Superintendent Frieberg was attached to demonstrate approval of the option presented to QPS in the 2018 Options Paper.

e) In relation to your email to Shaun Drummond dated 3 June 2022, 5.10pm:

(i) The process by which you prepared that email, including who you discussed or corresponded with, when, and what was said;

114. My recollection is that Shaun Drummond contacted me by phone and requested advice about reverting to workflows in place prior to the 2018 change, and for information about costs and risks, by that afternoon.

115. I think I then went to see Cathie Allen to ask her to put together the proposal as per Shaun Drummond's request. I am not sure who if anyone from the laboratory Cathie consulted in preparing for this. The deadline was very tight. I received an email from Cathie at 3:58 pm which contained options, costs and risks. Please see **Exhibit LK-61 - Email CA to LK & AS 3 June 22, 3.58pm**. With Alison Slade, Cathie and I finalised wording for the email I subsequently sent to Shaun Drummond at 5:10 pm (see **Exhibit LK-62 - Email LK to DG 3 June 2022 5.10pm**). Note that the wording used to describe the scientific processes and the preferred/non-preferred status of each option, originally

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prepared by Cathie, remained almost completely unchanged in the final version sent to Shaun Drummond. My changes to this final email were mainly related to summarising the risks and costs associated with each option.

(ii) Your understanding at that time of which, if either, of the options in the 3 June 2022 email, constituted a reversion to the process in place for samples in that range before 2018, and the basis for that understanding;

116. I took advice from Cathie Allen about the reversion to the process in place for samples in that range before 2018. Her role is Managing Scientist, Police Services Stream, and I rely on her to provide scientific direction relevant to her profession and expertise. She also held this role during the time when the abovementioned process was changed.

(iii) Your understanding at that time of the benefits and risks of each of the options in the 3 June 2022 email, in particular for the obtaining of a DNA profile, and the basis for that understanding;

117. I understood that Option 1 was the proposed preferred option on the basis that it may yield a DNA profile, cost less for kits and may result in a lesser backlog. I understood that Option 2 may result in loss of all sample (which I also understood was something QPS was not supportive of), that it was more expensive in terms of kits, and would lead to a longer backlog of cases. I took this advice from Cathie Allen.

(iv) Your understanding at that time of sample concentration and the significance of omitting this step for the reliability of testing and/or the likelihood of obtaining profiles that are adequate for comparison to a reference sample for samples in that range, and the basis of your understanding.

118. I received an email from Cathie at 3:58 pm which contained options, costs and risks. Please see **Exhibit LK-61 - Email CA to LK & AS 3 June 22, 3.58pm**. I did not challenge this information provided by Cathie is the Managing Scientist overseeing Forensic DNA

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Analysis at FSS and I rely on her to provide scientific direction relevant to her profession and expertise, and I am not a Forensic DNA Scientist.

(v) Your understanding at that time of any other impacts of sample concentration, and the basis of your understanding.

119. I received an email from Cathie at 3:58 pm which contained options, costs and risks. Please see **Exhibit LK-61 - Email CA to LK & AS 3 June 22, 3.58pm**. I did not challenge this information provided by Cathie as she is the Managing Scientist overseeing Forensic DNA Analysis at FSS and I rely on her to provide scientific direction relevant to her profession and expertise, and I am not a Forensic DNA Scientist.

(vi) The discussion or consideration of the difference between those two options, why they were offered and why one was preferred over the other.

120. My recollection is that Cathie Allen proposed the options and the preference statuses. I was involved in fine tuning the wording of the email in terms of the risks and costs, but not the science.

f) What discussions or correspondence took place to consider each decision, who was involved and your role in those discussions or correspondence.

121. I was not involved in the making of the decision regarding options. I sent the email to Shaun Drummond on 3 June 2022.

g) For any discussion or correspondence in which you were involved, identify the persons involved in those discussions or correspondence, what material was considered, what was said and by whom. Attach all notes made of discussions or correspondence.

122. I was not involved in the making of the decision regarding options. I attended a meeting on 6 June 2022 with Shaun Drummond, Dr Petra Derrington and Professor Keith McNeil.

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My recollection and my informal notes suggest that Mr Drummond advised that option 1 was chosen. Refer to **Exhibit LK-60F – 20220606 LK meeting note** which states “Option 1 - revert back”

h) Your understanding of the reasons for each decision, and for not choosing any other option presented, and the basis of your understanding.

123. I was not involved in the making of the decision regarding options.

i) Whether, to your knowledge, prior to the announcement of each decision, the options were communicated or discussed with scientists or management working within the DNA Analysis Unit, and if so, how, when and by whom.

124. Not to my knowledge.

j) Whether, to your knowledge, prior to the announcement of each decision, the options were communicated to, explained to or discussed with persons outside of the DNA Unit or Queensland Health, including the Queensland Police Service, the office of the Director-General for Health or any member of the Executive Government or their advisors, or any person whose interests might be affected by the carrying out of the relevant processes in the DNA Unit, and if so, who was involved and what was communicated, explained or discussed.

125. Not to my knowledge.

k) Whether, following either decision, your understanding of the options or decision made has changed. Identify the basis for any change in your understanding.

126. I understand there was reconsideration of the options put forward in my email on 3 June 2022 to the A/Director General. Per the 17 August 2022 email (see **Exhibit LK-63 - Email**

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HG to DG 17 August 2022), I understand this reconsideration was necessary due to an unintended human error, and this led to a correction to the previous information put forward.

Question 29 - Explain whether any decision was made, or any discussion or consideration held, in relation to cases in which samples had been processed before 6 June 2022, reported as "insufficient DNA" on the Forensic Register or in a formal witness statement because they had a quantitation value between 0.001—0.0088ng/pL, but the case had not yet finalized. If so, explain what discussion or consideration was held or decision made, by who, when and with what information, and attach all relevant notes or correspondence.

127. I have not been involved in any decision making regarding the management of reporting through Forensic Register and do not have access to that IT platform.

Question 30 - Explain how the 6 June 2022 decisions were communicated to staff within the DNA Analysis Unit and your involvement in that.

128. I recall visiting the staff on duty in Forensic DNA Analysis Unit on the afternoon of 6 June 2022, to advise them of the announcement by the Premier that there would be a Commission of Inquiry into forensic DNA testing in Queensland. My intention was to reassure them and offer my support to them.

129. I have a vague recollection of possibly saying something to the effect of, the Minister has said that we are to revert back to our pre-2018 processes.

130. I sent an email to all FSS staff on 8 June 2002 entitled "A message of support" which referenced the Commission of Inquiry. (**Exhibit LK-64 - A message of support email**).

Question 31 - Explain how the 6 June 2022 decisions were communicated to stakeholders, including the Queensland Police Service, or any person whose interests might be affected by the carrying out of the relevant processes in the DNA Unit, and your involvement, if any, in that.

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131. On 10 June 2022, I emailed Superintendent Bruce McNab the internet link to the terms of reference to the Commission of Inquiry.

132. On 21 June 2022, I received an email from Cathie Allen entitled "Advice to the QPS" (**Exhibit LK-65 - Advice to the QPS email**). I asked Cathie if she would send this to QPS or should I. She suggested that I send it. I sent an email to Superintendent Bruce McNab on 21 June 2022 entitled "FSS advice regarding DNA reporting". (**Exhibit LK-66 - FSS advice regarding DNA reporting**).

Question 32 - Explain the reason for the DNA Analysis Unit all staff meeting on 6 June 2022 and what was discussed and by who.

133. I recall visiting the staff on duty in Forensic DNA Analysis Unit on the afternoon of 6 June 2022, to advise them of the announcement by the Premier that there would be a Commission of Inquiry into forensic DNA testing in Queensland. My intention was to reassure them and offer my support to them. I do not specifically recall explaining the revised workflows.

Question 33 - Describe any further discussions or communications you have had with staff at FSS or QPS in relation to the 6 June decisions, including identifying:

a. Any concerns or queries raised by staff or QPS about the decisions.

134. I received an email from Ingrid Moeller on 17 June 2022 (refer to Exhibit **LK-11.27-20220617 Email Ingrid Moeller re process**), enquiring about the process change. I responded to her email stating "*As you know, I am not an expert in DNA analysis. Have you put this to Justin or Cathie for clarification? They are the people who should confirm this for you, sorry*". I presumed that Ingrid went on to engage with Justin or Cathie about this.

b. Any direction or discussion of further action to be taken to comply with relevant Standard Operating Procedures.

135. Not to my recollection.

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Decision on 19 August 2022

Question 34 - Explain any discussion about or reconsideration of the decision of 6 June 2022 that occurred between 6 June 2022 and 19 August 2022 and identify:

a. Who was involved;

136. I received an email from Ingrid Moeller on 17 June 2022 (as referred to in response to Question 33(a)) I presumed that Ingrid went on to engage with Justin or Cathie about this.

b. What occurred in any correspondence or discussions;

137. On 17 August 2022, I received a forwarded email from Helen Gregg entitled "FW: Wording to describe pre-2018 thresholds and options" (**Exhibit LK-67 - FW_Wording to describe pre-2018 thresholds and options**). Within that email was an email from Helen Gregg to Dr David Rosengren. I was on leave when I received this email. I had no input in the discussions regarding the generation of this email.

c. The reason for any discussion or reconsideration.

138. Please refer to response above.

Question 35 - What involvement, if any, did you have in a decision made on or about 19 August 2022, or consideration leading to that decision, to determine the process to be followed for Priority 1 or 2 samples with a quantitation value between 0.001 ng/uL and 0.0088 ng/uL? Explain your involvement in detail, with reference to material and information you had access to in relation to the decision, meetings, discussions or correspondence in relation to the decision, and others' contribution to the decision. Include in your answer your understanding of:

a. Who made that decision;

139. I cannot comment as I was on leave from 18 July 2022 to 26 August 2022.

b. When the decision was made;

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140. I cannot comment as I was on leave from 18 July 2022 to 26 August 2022.

c. The reasons for the decision;

141. I cannot comment as I was on leave from 18 July 2022 to 26 August 2022.

d. The reason for reconsidering the decision made on 6 June 2022, and how, when and by what means that reason came to your attention;

142. When I returned from recreational leave, I was advised verbally of the decision and received a copy of the memo.

e. The material or information on which the decision was based;

143. I cannot comment as I was on recreational leave from 18 July 2022 to 26 August 2022.

f. The meetings, discussions or correspondence in relation to the decision.

144. When I returned from recreational leave, I was advised verbally of the decision and received a hard copy of the memo.

Question 36 - If you had no involvement in the decision made on or about 19 August 2022, or consideration leading to that decision, what is your understanding, and explain the basis for your understanding, of the following:

a. Who made that decision;

145. The memo dated 19 August 2022 (Reference C-ECTF-22/13557), which I understand has been provided to the Commission of Inquiry, is signed by Dr David Rosengren, suggesting that he made the decision.

b. When the decision was made;

146. The memo is dated 19 August 2022.

c. The reasons for the decision;

..... [REDACTED]

Lara Keller

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Witness

147. Based upon the email received on 17 August 2022 from Helen Gregg entitled “FW: Wording to describe pre-2018 thresholds and options” (as described in Question 32) , I understand there was reconsideration of the options put forward in my email on 3 June 2022 to the A/Director-General.

d. The reason for reconsidering the decision made on 6 June 2022, and how, when and by what means that reason came to your attention;

148. I was sent the email on 17 August 2022 from Helen Gregg which appeared to explain the reason.

149. Helen Gregg mentioned in our handover meeting on 1 September 2022 that the decision had been reconsidered and a memo had been circulated from the A/Director-General on 19 August 2022. In a handover document prepared by Helen the following items are listed:

- a) Memo from A/DG 5/8/2022 (**Exhibit LK-68 – DG Memo – Urgent Amendment**).
- b) “‘Clarification of process’ memo. Cathie not clear in initial explanation put forward regarding workflows” (**Exhibit LK-69 – Advice regarding information supplied**).
- c) “So additional memo released to clarify ‘pre-2018’. QPS were consulted who advised that they did not want FSS to exhaust the sample without their permission. I suggested a workflow where we do one microcon, leaving behind 15uL for a second amp, and if second amp is required, get QPS permission as we will exhaust sample.” (**Exhibit LK-70 – 20220819 1458 DG Memo and Exhibit LK-71 – 20220819 145 Extract 19.4 from SO**).

150. In a meeting attended by Cathie Allen and Helen Gregg on 1 September 2022 at 10:00am, Cathie verbally advised me that she had made an unintended human error in relation to the options proposed on 3 June 2022. I understand that this situation has caused Cathie considerable distress.

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Witness

e. The material or information on which the decision was based;

151. I now realise that option 1 on the email of 3 June 2022 may have led to misunderstanding. I believed that the options were based upon Cathie's knowledge and understanding of the standard operating procedures in place in the Forensic DNA Analysis Unit immediately prior to the adoption of the 2018 change. I acknowledge that the misunderstanding was reported to be due to unintended human error, and that this led to revised wording. It is my opinion that the very short deadline for the advice to be provided to the A/Director General may have contributed to the unintended human error, and that the advice provided by Cathie Allen on 3 June 2022 was offered in good faith.

f. The meetings, discussions or correspondence in relation to the decision.

152. I'm advised that there were meetings and discussions about the decision, however I do not have the detail as I was on leave at the time. The Acting Executive Director FSS in my absence was Mrs Helen Gregg.

Question 37 - In relation to the memorandum of 19 August 2022, explain the consultation undertaken by you or (to your knowledge) by other members of the Department of Health, before or after the decision was made with:

a. The Managing Scientist of the DNA laboratory;

153. I cannot comment as I was on recreational leave from 18 July 2022 to 26 August 2022 then at a conference until 1 September 2022. The Acting Executive Director FSS in my absence was Mrs Helen Gregg.

b. The management team of the DNA laboratory;

154. I cannot comment as I was on recreational leave from 18 July 2022 to 26 August 2022 then at a conference until 1 September 2022. The Acting Executive Director FSS in my absence was Mrs Helen Gregg.

c. Scientists working in the DNA laboratory;

..... [Redacted]

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155. I cannot comment as I was on recreational leave from 18 July 2022 to 26 August 2022 then at a conference until 1 September 2022. The Acting Executive Director FSS in my absence was Mrs Helen Gregg.

d. Any Deputy Director-General or Acting Deputy Director-General;

156. I cannot comment as I was on recreational leave from 18 July 2022 to 26 August 2022 then at a conference until 1 September 2022. The Acting Executive Director FSS in my absence was Mrs Helen Gregg.

e. Mr Shaun Drummond;

157. I cannot comment as I was on recreational leave from 18 July 2022 to 26 August 2022 then at a conference until 1 September 2022. The Acting Executive Director FSS in my absence was Mrs Helen Gregg.

f. The Queensland Police Service.

158. I cannot comment as I was on recreational leave from 18 July 2022 to 26 August 2022 then at a conference until 1 September 2022. The Acting Executive Director FSS in my absence was Mrs Helen Gregg.

Question 38 - In relation to the memorandum of 19 August 2022, explain what steps were put in place by you or other members of the Department of Health to communicate and explain the decision, and the reasons for the decision, to scientists and management of the DNA laboratory, or the Queensland Police Service.

159. I cannot comment as I was on recreational leave from 18 July 2022 to 26 August 2022 then at a conference until 1 September 2022. The Acting Executive Director FSS in my absence was Mrs Helen Gregg.

Queensland Audit Office Report

Question 39 - Explain the FSS's response to the QAO report, 'Delivering forensic services, Report 21: 2018-19', including identifying the status of the implementation of the

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recommendations of the report. Attach any documents that record the response to the QAO report, or audit of those responses.

160. The QAO Delivering Forensic Services report was tabled in Parliament on 27 June 2019, which was 2 years and 3 months before I commenced as A/ED FSS. As such, I am unable to provide comment on the reasons or rationale behind the actions taken in respect to the recommendations in the years prior to my commencement. The previous Executive Director left in September 2021 without handover, and the General Manager HSQ left in June 2021. I understand that both were responsible for managing the progress of these recommendations.
161. In early October 2021, I was made aware of the QAO audit report, and that there were several recommendations relevant to FSS that remained outstanding.
162. I have attached a document (**Exhibit LK-72 - 39-01a**) which provides information on the status of the recommendations at the most recent point prior to my commencement. I referred to this, as well as other advices, to assist me in continuing FSS' efforts to give further action to these recommendations.
163. In relation to Recommendation 1 (Governance and MOU): I have been advised that some joint QH-QPS meetings were convened (under the title of Forensic Services Liaison Group - FSLG) from June 2019 onwards, however I understand that many of the planned meetings were either postponed or cancelled due to QPS COVID priorities. I have been advised that as part of recommendation 1, an MOU/Header Agreement was drafted by QH in late 2019 and this was provided this to the QPS (unsure of exact date). I have read in minutes of the previous FSLG dated 26 October 2020, in section 3.1, the following status update re the MOU: "Currently sitting with QPS legal. QPS has no appetite for change in the current environment for short to medium term. Happy to keep existing arrangements in place. ACTION: JD (John Doherty) and BM (Bruce McNab) to further discuss MOU for DNA Service." (see **Exhibit LK-73 - 39-01b**) I am not aware of any particular progress made prior to my commencement in relation to that action.

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164. Upon my commencement in Oct 2021, I was advised that a DG letter had recently been prepared by the previous short-term A/ED FSS (Cathie Allen) to be sent to the Commissioner of Police regarding a number of action items relevant to the QAO Audit recommendations. These action items focussed on proposed strategies to improve the management of Illicit Drugs and progressing the FSS-QPS MOU.
165. A copy of the DG letter to the Commissioner of Police (signed on 18/10/22) is provided in **Exhibit LK-34 - 39-02**.
166. The Commissioner of Police replied on 08/11/22 confirming that the QPS largely supported our requests (**Exhibit LK-35 - 39-03**), including progression of the MOU.
167. The Deputy DG Prevention Division replied on 30/11/22 acknowledging receipt and confirming next steps (**Exhibit LK-36 - 39-04**).
168. Progression of the MOU was raised in at least one meeting in the first half of 2022, particularly in reference to Forensic Register development hours, however it was not until the meeting of 23 June 2022, that the QPS advised me they believed there was insufficient detail in the draft MOU provided to them in 2019 for them to be able to sign. The document was returned to QH and sent to in-house legal for advice on possible barriers to signing. QH has since returned the MOU to QPS requesting they review and provide feedback, or progress to signing.
169. At the QH-QPS meeting of 23 June 2022, it was agreed to formalise the TOR and record keeping for the joint FSS-QPS group's deliberations. I subsequently drafted a Terms of Reference which was tabled on my behalf at the FSS-QPS meeting on 18 August 2022 (I was on leave at that time). QPS took an action to review the TOR.
170. Recent reports of the status of actions in response to the recommendations (relevant to QH) are attached at **Exhibit LK-74 - 39-05** and **Exhibit LK-75 - 39-06** (this document contains privilege and accordingly is not attached to this statement), with the most recent actions re Recommendation 1 described above.

Women's Safety and Justice Taskforce

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Question 40 - Explain the FSS's response to the Women's Safety and Justice Taskforce report, 'Hear her voice 2' that are relevant to FSS, including identifying the status of the implementation of the recommendations of the report. Attach any documents that record the response to the Taskforce's report, or audit of those responses.

171. I have been advised that FSS's first response to the WSJT Hear Her Voice 2 Report occurred whilst I was on leave (18 July 2022 to 26 August 2022). I understand that FSS provided a high-level initial response to the DoH Strategy, Policy and Reform Division in late July 2022 as per the spreadsheet in (**Exhibit LK-76 - 1st WSJT Response.xlsx**)

172. I have also been advised that FSS provided a second, more detailed response to the WSJT Hear Her Voice 2 Report on 31 August 2022 (**Please see Exhibits LK-77 to Exhibits LK-84 - 8 separate spreadsheets**). Although I was not on recreation leave at that time, Helen Gregg remained as acting Executive Director until 31 August 2022 as I was attending a professional development conference from 29-31 August 2022.

173. I have not been further advised by the Department of the status of the implementation of the recommendations of the report, other than to acquaint myself with the submissions provided to the DoH by FSS in my absence. I am unsure of the likely timeframes required to progress to implementation due to the significant planning, consultation and funding required for many of these recommendations.

Sexual Assault Investigation Kits (SAIKs)

Question 41 - Explain the current process by which Queensland Health prepare, distribute and perform SAIKs.

174. I am familiar with a Queensland Health Intranet QHEPS page which describes caring for people disclosing sexual assault. On this intranet site are references to the Health Service Directive: Caring for people disclosing sexual assault; Guideline for the management of care for people 14 years and over disclosing sexual assault ; and Response to sexual assault – Queensland Government Interagency Guidelines for Responding to People who have Experienced Sexual Assault (2014) . This site also references the Sexual Offences Medical Protocol ; JIC instructions for clinicians and JIC SAIK Flowchart . The

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intranet site also has education and support resources for clinicians, including information about the Sexual Assault Nurse Examiner Course and Medical Officer Adult Sexual Assault Forensic Examinations Workshop.

175. I am aware of a number of documents held in the Queensland Health Quality Information System (QIS2) database which describe the laboratory processes for SAIKs and Just in Case kits, including:

- a) Document 17151 – Configuration of SAIKs (please see **Exhibit LK-85 - QIS 17151**)
- b) Document 32143 – Examination of Sexual Cases Training Module (please see **Exhibit LK-86 - QIS 32143**)
- c) Document 33798 – Examination of Sexual Cases (please see **Exhibit LK-87 - QIS 33798**)
- d) Document 35274 – Pathology Queensland Laboratory: Potential forensic evidence “Just in Case” Forensic Examinations (please see **Exhibit LK-88 - QIS 35274**)

176. Other documents may exist in relation to the preparation, distribution and performance of SAIKs, however I am not familiar with them.

Question 42 - Which FSS unit or person, if any, designed the current SAIK model used in Queensland? When was the current model designed? What input did the DNA Analysis Unit have into that process.

177. I was not part of the design of the current SAIK model however am advised that initial development began around 2007. I am advised that relevant documentation has been submitted to the Commission of Inquiry into Forensic DNA Testing in Queensland in response to Requirement to Produce Documents and Things, Notice 2022/00107, Schedules 11, 12 and 13.

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Question 43 - Does the FSS DNA Analysis Unit provide Queensland Police Service (QPS) with SAIKs to use?

178. Yes

a. If no, where do QPS obtain SAIKs from?

179. N/A

b. If yes, are the SAIKs provided by FSS for QPS officers state-wide, or only for QPS officers in certain regions?

180. I understand that SAIKs and JICs are provided for the entire state.

Question 44 - Does a unit or team within FSS produce and/or assemble SAIKs?

181. Yes

a. If yes, which unit?

182. I understand that SAIKs are prepared by the Forensic DNA Analysis Unit.

b. If no, what agency or organisation produces the SAIKs?

183. N/A

Question 45 - Does a unit or team within FSS produce and/or assemble just-in-case SAIKs?

184. Yes

a. If yes, which unit?

185. I understand that JICs are prepared by the Forensic DNA Analysis Unit.

b. If no, what agency or organisation produces the just-in-case SAIKs?

186. N/A

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Question 46 - Do you provide just-in-case SAIKs to QPS and/or other agencies? If yes, detail which agencies. If they are provided to QPS — are the just-in-case SAIKs provided to QPS officers state-wide, or only for QPS officers in certain regions?

187. I understand that SAIKs and JICs are provided for the entire state for QPS.

Question 47 - To your knowledge, does the SAIK and the just-in-case SAIK contain equipment that is designed to take a reference sample?

188. Not to my knowledge.

Question 48 - Detail any issues or feedback you have been notified of between 2021 to now in relation to the use of SAIKs. Include the method by which each issue or piece of feedback was communicated to you. Attach any emails containing such matters.

189. I do not recall any feedback particular to the use of currently configured SAIKs, as these do not include reference DNA sampling.

Question 49 - Identify any meetings you have attended since 2021 with persons internal and/or external to QH in relation to any issues about SAIKs, including for each meeting: when it was held, who attended, what was discussed during the meeting and what was the outcome of the meeting. Identify any ongoing review or feedback processes, or working group processes, in relation to SAIKs or policies regarding forensic medical examinations that you are aware of. Attach any notes you made about those meetings, or copies of minutes you received.

190. Please see response to Question 26 which includes engagement regarding reference DNA sampling as part of SAIK.

191. Minutes of previous meetings are referenced as **Exhibit LK-89 - SAIK Working Group – 07.12.2021.**

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192. An ABC news article “Queensland sexual assault victims forced to wait for forensic tests, women’s safety taskforce told” was published on 16 November 2021 (**Exhibit LK-90 - DDG BN Attachment 1 – News article**) and a Parliamentary Question on Notice was raised on 1 December 2021 (**Exhibit LK-91- DDG BN Attachment 2 – Question on Notice**). This led to a brief (**Exhibit LK-92 - DDG BN – Sexual Assault Investigation Kits (SAIKs)**) and a meeting attended by Dr Mark Elcock, Genevieve Siddle and myself on 10 December 2021. My recollection of that meeting was to clarify information provided in the brief.

193. I understand that there is ongoing review of the Interagency Guidelines. I added the requirement to take active steps to reconvene the Response to Sexual Assault Multi-Jurisdictional Working Group to Dr Adam Griffin’s Career Success Plan (CSP) in March 2022.

194. I recall a telephone conversation with Superintendent Bruce McNab on 6 June 2022. I recall him expressing frustration about the difficulty in negotiating the SAIK reference sample collection process, and that he had been trying for years to have this addressed. I recall him saying that he was happy that now I was trying to resolve this with QPS.

195. There have been a considerable number of conversations since my commencement at FSS in relation to SAIKs. I am unable to recall the specific details of each conversation, however my informal notes suggest that I discussed SAIKs on the following dates:

- a) 5 April 2022 (**Exhibit LK-93 - 20220405 Catch up Adam**).
- b) 19 April 2022 (**Exhibit LK-94 - 20220419 Catch up Adam**).
- c) 30 June 2022 (**Exhibit LK-95 - 20220630 Catch up Cathie**).
- d) 18 November 2021 (**Exhibit LK-96 - 20211118 Catch up Justin**).
- e) 02 December 2021 (**Exhibit LK-97 - 20211202 Catch up Cathie Justin**).
- f) 13 January 2022 (**Exhibit LK-33.50- 20220113 Catch up Cathie**).

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- g) 7 April 2022 (Exhibit LK-100 - 20220407 Catch up Cathie).
- h) 26 May 2022 (Exhibit LK-101 - 20220526 Catch up Cathie).
- i) 27 May 2022 (Exhibit LK-102 - 20220527 LK notes BMcN).
- j) 28 June 2022 (Exhibit LK-103 - 20220628 Catch up Adam).
- k) 4 July 2022 (Exhibit LK-104 - 20220704 Catch up Petra).

Question 50 - Identify any changes in relation to SAIKs, or any changes to the practices of the Clinical Forensic Medicine Unit (CFMU), which you have implemented or overseen since commencing in your current role. Identify any directions you have given to any staff members of CFMU, and attach the emails or other documents recording those directions.

196. I have spoken with Dr Adam Griffin, Dr Cathy Lincoln, Cathie Allen and Jacqui Thomson in the previous months regarding the composition of, collection of, training of staff to conduct and the Interagency Guidelines. I cannot recall each conversation date/time and specific detail.

197. Specific to SAIKs, I issued an email to Dr Adam Griffin on 6 June 2022 requesting that he coordinate documenting how to operationalise the collection of DNA reference samples (please see **Exhibit LK-105 - Direction email thread**).

Question 51 - Outline any other changes which, in your opinion, would improve any practices relating to SAIKs.

198. It is my opinion that collection of the DNA reference sample should, where possible, be collected from the victim at the time of the forensic examination. This opinion is based upon compassion for the victim, and upon the expertise of the forensic examiners in collecting specimens.

199. It is my opinion that there should be a single decentralised SAIK/JIC model across the state, which offers hospital-based forensic examinations, supported by hospital services

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such as social work. These forensic examinations could be conducted by suitably trained nurses and doctors.

All the facts and circumstances declared in my statement, are within my own knowledge and belief, except for the facts and circumstances declared from information only, and where applicable, my means of knowledge and sources of information are contained in this statement.

I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1867*.

TAKEN AND DECLARED before me at 3:00 pm in the State of Queensland this Twentieth day of September 2022

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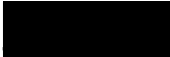
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