

STATEMENT OF MICHEL LOK

I, Michel Lok, Acting Workforce Programs Manager, [REDACTED],
 [REDACTED], of [REDACTED] [REDACTED]
 [REDACTED] do solemnly and sincerely declare that:

Background

Question 1 – List your qualifications. In your answer include the institution you obtained the qualification from and the year you obtained it.

1. Bachelor of Business, Curtin University, 1992
2. Master of Financial Management, Australian National University, 2002
3. Certified Practising Accountant, CPA Australia, 2005
4. Graduate of the Australian Institute of Company Directors, AICD, 2013

Question 2 – In brief, describe your work history. Attach a current CV.

5. I commenced in the Australian Public Service in 1986 as an auditor with the Australian National Audit Office and progressed my career in financial management and program administration until my promotion to the Senior Executive Service in 2001. I held senior executive roles with the National Health and Medical Research Council, the Therapeutic Goods Administration and the Department of Families, Housing, Community Services and Indigenous Affairs. In 2009 I was appointed to a management position with Cape York Health Service District within Queensland Health before becoming the inaugural Health Service Chief Executive for Central West Hospital and Health Service in 2012. I transferred as Health Service Chief Executive to the Torres and Cape York Hospital and Health Service in 2016, and later joined Health Support Queensland (a Division of the Department of Health) in October 2017 as General Manager Community and Scientific Services. I retired from Queensland Health in mid-2021. I later accepted a temporary project role as acting Workforce Programs Manager within [REDACTED] in mid-2022. A recent CV is enclosed.

[REDACTED]
 Your name

[REDACTED]
 Witness

- b) the Health Contact Centre providing 24-hour health advice through 13HEALTH and a range of telephone-based support services. The Executive Director Health Contact Centre, Ms Victoria Calmers, reported to me.
- c) Health Support Queensland's governance functions including planning, performance management, risk management, compliance, audit, communications strategy and web services. Several service managers reported to me.

Question 6 – Identify the responsibilities/duties of that position. Identify whether you had any duties unique or peculiar to the period of late 2017 to January 2018.

- 10. All General Managers within Health Support Queensland were members of the senior leadership team and responsible for the good governance and performance management of the business units supporting Hospital and Health Services and other stakeholders (including Queensland Police Service and Coroners). The leadership team was also responsible for strategic and operational planning, building a performance culture and embedding our values throughout the organisation.
- 11. I worked with my Executive Directors to plan and monitor each business unit's performance and develop strategies that aligned with Departmental and Health Support Queensland's objectives. My role included relationship management with key stakeholders, supervising the performance and development of the Executive Directors, review and assessment of significant business change and investment proposals, maintaining communication between the operational units and Health Support Queensland's central functions, providing advice on matters as requested and conducting reviews of decisions relating to workplace grievances and customer complaints.
- 12. In the period late 2017 to January 2018 I was briefed on a small number of staff complaints that warranted my immediate attention, one of which involved a senior scientist in the DNA laboratory who had escalated an unresolved bullying and harassment grievance to the Director-General.

Question 7 – As part of your onboarding/induction, what issues with respect to the DNA Laboratory were brought to your attention?

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13. Following my commencement, I received a brochure outlining the functions of Forensic and Scientific Services (I no longer have this document), received a number of verbal briefings from the Executive Director Forensic and Scientific Services, Mr Paul Choban, completed a tour of the facilities at Coopers Plains and was briefly introduced to senior staff. I was informed that the DNA laboratory had successfully implemented the Forensic Register as a joint initiative with Queensland Police Services, though outstanding issues remained with required enhancements and future applications management. I was also briefed that the DNA Laboratories had a significant backlog of testing exhibits with some having very long turn around times. I was advised that priority testing was consistently completed within agreed timeframes to assist with investigations or court dates. I was informed that some additional temporary resources had been provided to assist with testing in the lab and overtime was being used to reduce the outstanding backlog.

Question 8 – Identify any extended periods of leave you had during that time.

14. I was on leave from 12 January 2018 to 6 April 2018. Mr Robert Graham acted in my role during my absence.

Question 9 – Explain what type of contact and oversight of the DNA Laboratory you had up until you commenced leave in about January 2018. As part of your answer, identify:

- a. who you typically had contact with that worked in the DNA Laboratory;
15. Mr Paul Choban was my primary contact at that time.
- b. what issues in the DNA laboratory were raised with you or you were aware of; and
16. I was aware of outstanding case work and testing, some of which was more than 12 months old. I was also made aware that enhancements to the Forensic Register were required and that there were concerns regarding the future management of the application, including commercialising the software.
- c. any actions taken to address those issues.
17. I reviewed data on the outstanding testing. I received assurances that priority testing was being completed within agreed timeframes to assist with investigations and meet

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court dates. I was advised additional temporary resources had been provided and overtime was being approved to reduce the backlog.

Question 10 – Provide the same information requested in the paragraph immediately above in relation to the period commencing from when you returned from leave in 2018 up until the end of 2019.

18. I continued to meet frequently with the Executive Director and the Managing Scientist Police Stream following my return from leave and throughout 2018. I continued to monitor the limited data available on the size of the backlog and turn around times and discussed resourcing in the lead up to the annual budget.
19. I attended a meeting with Queensland Police Service to discuss the status of support and enhancements for Forensic Register, for which Forensic and Scientific Services paid a contribution for enhancements, and plans to commercialise the application. I do not recall the date, but likely this was after my return from leave in April 2018.
20. The QAO had commenced its work on assessing the effectiveness of forensic testing and I met more frequently with the Executive Director and Managing Scientist to speak with the auditors, discuss findings and ensure the content of the report was accurate.
21. I met with the new Assistant Commissioner Alan McCarthy to increase our customer engagement, consider the emerging findings from the QAO performance audit and gain support for the development of an MOU for forensic DNA testing.

Question 11 – Who was the Executive Director at Forensic and Scientific Services (FSS) when you worked there from 2017 to 2019?

22. The Executive Director Forensic and Scientific Services position was held by Mr Paul Choban until mid-2018, Mr Craig Russell on a temporary basis in late 2018, and Mr John Doherty between January 2019 and late 2021.

Project 184 and the Options Paper

Question 12 – In 2017, Project 184 commenced. A copy of Project 184 report is attached. The Project assessed post-microcon results obtained from samples with a quantitation value between 0.001ng/uL and 0.0088ng/uL.

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- a. What involvement, if any, did you have with Project 184?
23. I was not aware of Project 184 or the project report.
- b. Were you briefed about Project 184?
24. No.

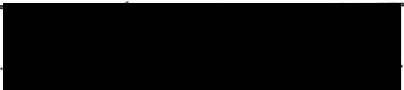
Question 13 – In January 2018, a document titled A review of the automatic concentration of DNA extracts using Microcon Centrifugal Filter Devices: Options for QPS consideration (Options Paper) was presented to the Queensland Police Service (QPS). Attached is a copy of the Options Paper.

- a. What knowledge of the Options Paper did you have prior to its presentation to QPS in January 2018?
25. I had no knowledge of the Options Paper, nor was I made aware of the planned meeting with QPS in January 2018.
- b. Did you have any involvement in the decision to present the Options Paper to QPS?
26. No.
- c. If you were not involved with the Options Paper while on leave, were you, on your return from leave, briefed about the paper or any changes in processes related to the Options Paper? If not, identify when and how you became aware of the Options Paper.
27. I was never briefed or made aware of the Options Paper or the change in scientific method arising.
- d. Do you know if it was brought to the attention of the person acting as General Manager while you were on leave?
28. I am not aware if the Options Paper was considered by any person relieving in my role whilst I was on leave.

Question 14 – In your opinion:

- a. Should the Options Paper have been brought to the attention of the General Manager (the position you held) by staff at the DNA laboratory? Why/why not?
29. I believe the Options Paper should have been brought to the attention of the General Manager. The paper appears to address resourcing concerns that had previously been


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raised with me about the laboratory's capacity to respond to increasing case numbers. The Options Paper suggests that discontinuing routine 'auto-microcon' processing of Priority 2 (Major Crime) samples would provide the ability to divert staff time to samples of higher yield and improve turn around times. A review would have identified that the paper did not adequately assess the impact of the change in testing processes on the judicial system and its stakeholders. I would also have expected to be informed of, and potentially be included in, the meeting with the Queensland Police Service which was our primary stakeholder for DNA testing.

- b. If yes, should the decision to accept the recommendation in the Options Paper have been made by the General Manager, or should the General Manager at least have been involved in the making of such a decision? Why/why not?
30. As outlined in my response in paragraph 29, the scope of the change to testing (the cessation of testing of certain samples) could be prejudicial to some investigations and prosecutions and should have warranted endorsement through senior executives in both Queensland Health and Queensland Police Service.
- c. As part of your answers to (a) and (b), identify any policies, procedures or practices at Queensland Health that stipulated whether such matters and decisions should be brought to the General Manager's attention.
31. I am not aware of any policies, delegations or authorisations that would have been applicable, as the proposals under consideration did not seek additional investment, expenditure or new roles. I do not believe it is possible to document criteria to capture every matter that should be escalated to senior executives, so judgement must be applied in such cases.

Question 15 – If the Options Paper had been brought to the General Manager's attention, is it something that the General Manager would have raised with another person in Queensland Health that sits higher in the management hierarchy than the General Manager? Why or why not?

- a. If yes, identify who it should have been raised with, and in what way.
32. This is a matter of judgement, but had I received the Options Paper and been briefed, and had there been the opportunity to consider the implications for the judicial system

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36. Forensic Register was already in place (and in use) when I commenced in the General Manager position. I understood the application was internally developed by the Queensland Police Service which partnered Forensic and Scientific Services to design the DNA laboratory functionality. I am aware that some procurement issues had been raised prior to my commencement and that the Managing Scientist Police Stream had been identified as having a potential conflict of interest. I have no knowledge of the procurement action taken by the Queensland Police Services to develop the application or establish application support. I have no knowledge of the cost of development of the application. Whilst Forensic and Scientific Services did not pay any licence fees to the Queensland Police Service, it did provide an annual contribution of around \$100,000 to fund enhancements which was used by police to employ a position in the application team.

Question 19 – What issues with respect to the Forensic Register were you made aware of and/or deal with while in the General Manager position? Include any concerns of FSS staff that were communicated to you, together with any positive feedback you received.

37. The Executive Director, Mr Paul Choban, and the Managing Scientist Police Stream, Ms Cathie Allen, both had concerns regarding the sustainability of the applications development team within Queensland Police Service. They were concerned that a number of enhancements logged with the applications team were not being progressed and that no development had taken place for some time, despite funding being provided. Amongst these were an enhancement to provide a suite of reports for the management of the DNA lab and a plan to extend the functionality of forensic register to the forensic chemistry laboratory.
38. There was a concern that Queensland Police Service was contemplating commercialisation of the Forensic Register and Mr Choban and Ms Allen were of the view that Forensic and Scientific Services held intellectual property in the application and should be involved in the commercialisation and benefit from it.
39. I recall meeting with Queensland Police regarding these matters and prepared a written brief to the Chief Executive Officer, Health Support Queensland in mid-2018 (for noting). Following this meeting, engagement with Queensland Police increased as they

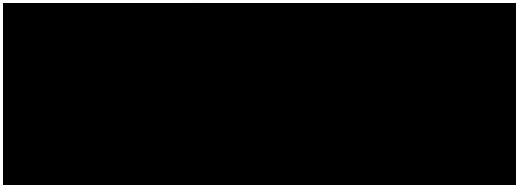
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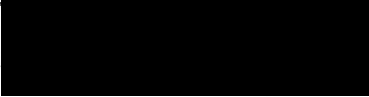
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supported the development of an MOU between the agencies to formalise collaboration, coordination and strategic planning.

Question 22 – In relation to such actions taken or directed to be taken:

- a. what was achieved by those actions?
43. A draft head MOU agreement was prepared and shared with Queensland Police Services. Forensic and Scientific Services also commenced drafting a services schedule for DNA testing, including service standards for timeframes and exhibit handling.
44. The Forensic Services Liaison Committee was established and met on a few occasions to progress the development of the MOU and establish a process where the parties could discuss any issues or consider emergent proposals. The membership comprised the General Manager Forensic and Scientific Services, the Executive Director Forensic and Scientific Services, the Assistant Commissioner Operations Support Command and the Superintendent Forensic Services Group, and Terms of Reference were adopted
- b. what was not achieved by those actions but which it had been hoped or expected would be achieved?
45. Only two or three of the quarterly meetings of the Forensic Services Liaison Committee were held before COVID-19 required police resources to be allocated elsewhere and meetings ceased. The proposed MOU was not progressed, with Queensland Police Service indicating the MOU appeared appropriate, but was not a current priority. The MOU had proposed the development of service standards which, with data backing, would have permitted end to end oversight of analytical testing. Proposed sharing of performance data and joint planning of forensic services activity was not achieved. A small number of position papers for additional testing opportunities were tabled for discussion and endorsed (subject to funding).
- c. If not included in your response to paragraph (a) or (b), above, identify if increased levels of consultation were achieved and whether measures of effectiveness and efficiency were implemented.


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46. Senior engagement increased throughout 2018 and 2019, as did operational engagement between the two agencies. There was no joint monitoring of measures of effectiveness of efficiency.

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*.

IPSWICH MAGISTRATES COURT
43 ELLENBOROUGH STREET
IPSWICH QLD 4305

TAKEN AND DECLARED before me at _____ in the State of
Queensland this 6th day of SEPTEMBER 2022

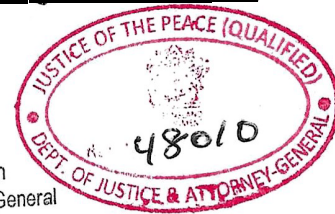
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Bernard Patrick Kenny



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