

STATEMENT OF SHAUN DRUMMOND

I, Shaun Drummond, Acting Director General, of 1 William Street, Brisbane, do solemnly and sincerely declare that:

1. I am the Acting Director General of Queensland Health.
2. I have been issued with a requirement to provide a written statement by Commissioner Sofronoff QC, Notice 2022/126.

Background

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

3. I hold the position of Acting Director General of Queensland Health.
4. I have held this position since ¹⁴ ~~13~~ ^{CS.} March 2022.
5. In this role I am responsible for:
 - a. providing visionary, values-based leadership and management to the department;
 - b. building positive and healthy workplace cultures based on professional respect and integrity, enabling every employee to achieve their potential;
 - c. building a career structure for employees that is independent of patronage and that is, and is seen to be, based on merit;
 - d. identifying and nurturing leadership potential and actively promoting and supporting mobility and flexible work practices to grow the talent pipeline;
 - e. ensuring recruitment processes contribute to a workforce profile that is reflective of the Queensland community;

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- f. leading and facilitating strong, positive agency relationships with stakeholders and partners across other levels of government and sectors;
 - g. growing stakeholder confidence that leadership fosters and promotes ethical decision making, honesty and fairness, always in the public interest.
6. I also have a range of overarching legislative responsibilities, including:
- a. to secure the health and safety of workers and workplaces in accordance with the *Work Health and Safety Act 2011*;
 - b. undertaking the role of accountable officer for the department under the *Financial Accountability Act 2009*;
 - c. the provision of advice to government through the responsible Minister, regarding the functions, policies and administration of the department under the *Public Service Act 2008*;
 - d. undertaking the role of Chief Executive Officer of the department under the *Public Service Act 2008*;
 - e. ensuring the quality of employment opportunity and non-discriminatory work practices as outlined in the *Public Service Act 2008*;
 - f. ethical behaviour and integrity required under the *Public Sector Ethics Act 1994*.
7. My professional background is human resources and industrial relations and organisational development.

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


8. I have worked in Chief Executive Officer and Chief Operations Officer roles in the public sector health system in Queensland, New South Wales, Victoria and New Zealand for the past 20 years. This has included two periods working within the

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14. On 8 March 2022, at around 4:00pm, at the request of the then Director General John Wakefield, I attended a meeting with John Wakefield, Deputy Director General Professor Keith McNeil, Petra Derrington, Lara Keller, Dawn Schofield and Acting Chief Legal Counsel, Megan Fairweather. I was an ad hoc attendee as outlined in my answer to Q6 below. I recall the purpose of the meeting was to discuss the recommendation to proceed with an independent review into the FSS systems and processes. Professor McNeil advised that the FSS laboratory was accredited by the National Association of Testing Authorities (NATA) and this amounted to external validation of the FSS systems and processes. He did not consider an independent review was necessary. I raised my concerns that there were differences of scientific opinion that needed to be examined and that community confidence in the services provided by FSS was being impacted by the ongoing public dialogue. I thought the issue was far more significant than had been presented to that point in time and, to meet our public accountability, the response had to be commensurate to the level of concern. I advised that the Minister needed to be briefed and a review had to go ahead.
15. On 14 March 2022, at around 4:00pm I attended a meeting via Zoom to discuss the recommendation for an independent systems and processes review of Forensic and Scientific Services. The other attendees at this meeting were Minister Yvette D'Ath MP, Luke Richmond, Daniel Goodman, Professor Keith McNeil, Dawn Schofield and Megan Fairweather. Professor McNeil continued to reflect the perspective of the FSS scientific leadership that the system and process review was not necessary as the laboratory held NATA accreditation. He considered that because the FSS laboratory was meeting NATA standards, the testing thresholds were effectively a 'red herring'. Professor McNeil advised that only a small proportion of testing would be impacted by adopting a different threshold. The Minister agreed with me that an independent review was necessary to advise about the FSS systems and processes and to restore public confidence in FSS services.
16. On 2 June 2022, at around 1:00pm, I attended a meeting via Zoom to discuss Forensic and Scientific Services. The other attendees at this meeting were Minister Yvette D'Ath


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MP, Matthew Rigby, Daniel Goodman, Martin Philip, Daniel Carvosso and Lara Keller. Cathie Allen, the Managing Scientist also attended part of the meeting. The discussions included media reports about DNA testing by FSS, the QPS submission to the Women's Safety and Justice Taskforce, and whether a Commission of Inquiry would be an appropriate response. Lara Keller discussed variances in laboratory data about samples that would benefit from further testing, including concentration, being 1% on one hand and 5% on the other, and QPS was now publishing data that was significantly higher. I recall that Lara also mentioned that the NATA accreditation was a reason not to be concerned scientifically. Cathie Allen was asked to attend at one stage to answer questions about whether the thresholds had been applied in the samples tested in the Shandee Blackburn case. I recall Cathie replied categorically that thresholds had not been applied as they were not introduced until 2018 (this was later clarified as outlined in paragraph 20 below). I advised that we had gone past the point of thinking that public confidence could be restored by an independent review as planned, given that QPS, as the primary client of FSS, was publicly challenging the basis for the FSS decision to implement thresholds and therefore its ability to support the criminal justice system. The Minister agreed with that position. Further details about this meeting are provided in my responses to Q7(c) below. Following this meeting, I received two emails from Lara Keller now attached as, respectively, exhibits:

- a. **SD-01 - 20220602 - 1433 - FW: Options Papers - First one and Draft of Second**
which includes:
 - i. an email from Cathie Allen 2.08pm attaching the first options paper (#184) and an email from QPS officer Dale Freiberg
 - ii. an email from Lara Keller 2.33pm attaching 2018 options paper and 2022 review paper

- b. **SD-02 - 20220602 - 1547 - FW: Documents - timeline and number of requests**
which includes:

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- i. an email from Cathie Allen 3.14pm attaching a timeline of communications and excel spreadsheet
 - ii. an email from Lara Keller 3.47pm forwarding the attachments in Cathie Allen's statement and document containing number of requests for further concentration of samples reported as "Insufficient DNA Detected".
17. On 3 August 2022, I sent a memorandum to Helen Gregg copied to Professor Keith McNeil. This memorandum outlined the new text to be used in witness statements where the DNA was in the range 0.001-0.0088 ng/ μ L. A copy of this memorandum is attached to this statement. A copy of this memorandum is attached as **exhibit SD-03 – DG Memo – Urgent Amendment to Standard Operating Procedure required.**
18. On 5 August 2022, I sent a second memorandum to Helen Gregg copied to Professor Keith McNeil. This memorandum outlined the further updated text to be used in witness statements where the DNA was in the range 0.001-0.0088 ng/ μ L. A copy of this memorandum is attached to this statement A copy of this memorandum is attached as **exhibit SD-04 – DG Memo – Urgent Amendment to Standard Operating Procedure required – 5 August.**
 - i. **The Queensland Police Service submission in response to the Women's Safety and Justice Taskforce Discussion Paper 3 regarding the overall success rate of obtaining a useable profile when they requested re-testing of samples reported as "DNA insufficient for further processing";**
19. This was discussed in the meeting of 2 June 2022, referred to in paragraph 16 above, as it related to media reporting that had occurred on that day.
 - ii. **The processing and reporting of results in the case involving the murder of Shandee Blackburn;**
20. I was involved in one discussion during the meeting on 2 June 2022, referred to in paragraph 16 above, where Cathie Allen was asked about concentration. Cathie Allen

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said words to the effect that all samples were concentrated. I was subsequently advised that this was not accurate and there may have been one sample that was not concentrated after the thresholds were introduced in early 2018.

iii. **Any matter raised by the Hedley Thomas podcast “Shandee’s Story” or other media discussion regarding forensic DNA testing in Queensland.**

21. I was involved in many conversations in relation to the material covered in the podcast.
22. On 17 June 2022, Matthew Rigby emailed the Executive Leadership Team with a link to the podcast. A copy of this email is attached as exhibit **SD-05 -Link to Podcast**.
23. I believe I had one conversation with Katarina Carroll, Queensland’s Police Commissioner about going ahead with the independent FSS systems and processes review and another conversation when heading towards the Commission of Inquiry.

Question 6 – Explain your involvement in a meeting in late February 2022 with Lara Keller, Megan Fairweather, Keith McNeil and John Wakefield regarding the DNA Analysis Unit including identifying:

a. When this meeting occurred.

24. This meeting occurred on 8 March 2022.

b. How you prepared for the meeting.

25. I did not prepare for this meeting. I was attending the System Leadership Forum at the Royal Brisbane and Women’s Hospital on this date when the then Director General, John Wakefield, invited me to attend this meeting. I was an ad hoc attendee.

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

26. I had no discussions or correspondence in preparation for the meeting.

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

27. I did not review any documents prior to, or during, the meeting.

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

28. The discussion was about the recommendation to proceed with an independent FSS systems and processes review as outlined in paragraph 14 above.

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

29. The outcome of the meeting was to proceed with the independent FSS systems and processes review, identify potential experts and brief the Minister for Health, Yvette D'Ath. I was not Director General at this stage and the actions after the meeting were the responsibility of the then Director General.

Decision of 6 June 2022

Question 7 – 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/μL (range) be processed; and


30. I was the decision maker.

b. That some or all new samples in the range 0.001-0.0088 ng/μL (range) will go directly for amplification rather than for concentration,

31. I was the decision maker. This decision was made on advice from an email dated 3 June 2022. A copy of this email is attached as exhibit **SD-06 – Forensic DNA testing impacts**. I forwarded this email to Minister for Health, Yvette D'Ath MP, Simon Zanatta and Jasmina Joldic. A copy of this email is attached as exhibit **SD-07 – Fwd: Forensic DNA testing impacts**. I agreed with the “preferred” option to amplify results

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in the identified range because, based on the email advice, I understood that was the testing workflow that applied before the 2018 threshold options paper.

Including identifying:

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

32. I was the decision maker for both decisions. The decisions were based on the options contained in the email dated 3 June 2022, referred to in paragraph 31 above, and conversations with the Executive Director of Forensic Services, Lara Keller.
33. I considered the issue over the weekend, and I made my decision on the Monday, 6 June 2022.

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

34. I believed that it was necessary to revert to the pre-2018 model until after consideration of all the relevant evidence about these matters by the Commission of Inquiry. That is, I expect the Commission of Inquiry will make recommendations and provide further clarity about the most appropriate DNA testing options moving forward.
35. The methodology I adopted in making my decision to remove the thresholds implemented in early 2018 and to revert to the workflow in place before that time was to ask the following questions:
- a. Has an issue been identified in relation to the DNA testing thresholds implemented in 2018, “yes or no”?
 - b. If yes, I wanted to understand if we were able to revert the testing workflow that was in place immediately before the identified issue arose.
 - c. If yes, I also wanted to understand whether we were able to resource/support the reversion to the previous testing workflow.

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36. In relation to (a), I was satisfied that, in relation to the DNA testing thresholds implemented in early 2018, the answer was “yes” given the investigations being conducted by the Commission of Inquiry. I requested advice from the FSS laboratory about items (b) and (c). Once (b) and (c) were confirmed on advice from the FSS laboratory, I made the decisions noted above. I informed Lara Keller and asked her to give effect to my decisions, including to prepare a brief for me to authorise the additional resourcing requirements.

c. The details and content of a meeting on or about 2 June 2022 with Health Minister, Yvette D’Ath, and her advisors and Lara Keller regarding the DNA Analysis Unit; and:

37. I have referred to this meeting in paragraph 16 above. The meeting was arranged following media reports that morning about the content of the Queensland Police Service submission to the Women’s Safety and Justice Taskforce. Discussions then commenced about whether to go to a Commission of Inquiry.

i. How you prepared for the meeting.

38. I reviewed the briefing notes and the Terms of Reference that had been developed to support the Review.


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

39. I had a discussion with Lara Keller and Matthew Rigby about five (5) minutes before the meeting. This discussion was to ensure that I understood the documents correctly. There was no correspondence in preparation for the meeting.

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

40. We discussed the possibility of switching from the current proposal to undertake an independent FSS systems and processes review to a Commission of Inquiry. The Director General is the authoriser of the review and would determine if the review is to


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proceed or cease. The Director General's role is to advise the Minister on the impact and ability to support a Commission of Inquiry.

iv. What occurred as a result of the meeting.

41. I spoke to Jasmina Joldic, Associate Director General, about the process for the Commission of Inquiry.

d. The impetus for Lara Keller's email to you 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, and:

42. I have referred to this email in paragraph 16 above. The QPS were making a significantly different claim about the samples that would benefit from not having the threshold applied than was understood from the FSS laboratory scientists. Lara Keller had identified in discussions with me and in the meeting with the Minister that an updated report about the thresholds had been prepared by the FSS laboratory scientists. The advice included that the updated paper indicated that the efficacy rate of testing samples in the identified threshold range was higher than the 1% reported in the original options paper. I asked Lara to send that updated report along with the original options report. I wanted to be able to understand whether we should revert to the workflows in place before the 2018 thresholds.
43. I believe that the Minister for Health was included in this email as she was being consulted on the issue.

i. Your understanding of the contents of that material;

44. The contents of the options paper indicated that around 1.86% of DNA samples would benefit from additional testing if initial quantitation results were in the range of 0.001-0.0088 ng/ μ L. The contents of the updated report showed that a different proportion of

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the samples, around 5.3%, would benefit from further testing than was originally reported in the options paper. This was the case even with a limited sample.

ii. Your consideration at that time, of what steps might be taken by you or the Department of Health relating to processing samples in the range.

45. My consideration at that time was whether it was possible to revert back to the previous threshold and if we were able to resource the additional work as outlined in paragraph 35 above.

e. In relation to Lara Keller's email to you dated 3 June 2022, 5.10pm:

i. The impetus for that email, including who you discussed or corresponded with, when, and what was said.

46. I had asked Lara Keller what the options were if we do not want to apply the thresholds of the samples that were currently in place. I had asked about the likely resources necessary if we wanted to revert to the pre-2018 testing model.

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 sample in that range before 2018, and the basis for your understanding.

47. I understood the advice in "option 1" was to revert to the pre-2018 workflow. I understood that "option 2" was to implement a different workflow to that in place pre-2018 to include a concentration step before proceeding through to full DNA profiling.

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 of your understanding;

48. I was advised that for option 2, there may not be an opportunity after testing to do additional testing, if the sample volume was used up by the concentration step. My preference would have been to concentrate everything if that was considered to improve

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the chances of a DNA profile being obtained, however, I was influenced by the advice about completely using the sample which is what option 2 presented. The basis of my understanding came from the email, the options paper and from discussions with Lara Keller and Keith McNeil. I do not recall the specifics of my discussions with Lara Keller and Keith McNeil. After the meeting of 14 March 2022, I had regular catch ups with Professor McNeil as part of my oversight role as Director General. I recall we discussed the progress of the systems and processes review and being updated about complexities with identifying and engaging suitably qualified independent experts. In the week leading up to 2 June 2022 I had further discussions with both Keith McNeil and Lara Keller. I do not recall each of the occasions on which these discussions took place, or specific details about the conversations, except to say they were increasingly to help me understand the purpose and effect of the 2018 thresholds, the concentration testing step, and new information about variances in FSS data as outlined in paragraph 16 above.

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 for your understanding.

49. My understanding was that concentration has the potential to increase the proportion of samples we might be able to get a DNA profile out of, albeit it might be a small proportion. This potential had to be weighed against the significance of the advice about the potential to exhaust DNA sample volume through the concentration step meaning that no sample would be available if further testing was required or requested.
50. My understanding came from a conversation between Lara Keller and Keith McNeill and also from the contents of Lara Keller's email sent at 5:10pm on 3 June 2022.

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

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51. My understanding, from advice given by Lara Keller and Keith McNeill and Lara Keller's email sent at 5:10pm on 3 June 2022, was that a sample concentration step would likely result in an increased resource demand in scientific consumables plus staff time, and in the meantime a potential backlog being created while this was put in place.

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

52. After considering the two options presented in the email of 3 June 2022, I specifically asked why we would not concentrate everything if the scientific process was available. I considered this would provide a more extensive support for the Queensland Police Service and the criminal justice system. I wanted to explore whether we could remove resource considerations from the outcome of the testing process. I was persuaded to select "option 1" because it was presented as the workflow in place immediately before the thresholds were introduced in 2018 and because I was concerned about the risk advised of exhausting sample volume with "option 2".

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

53. I had discussions on 6 June 2022 with Lara Keller and Jasmina Joldic about the options presented in the email of 3 June 2022 and, ultimately, I made the decisions as outlined in paragraphs 30 and 31 above. I believe that Lara Keller's advice was informed through conversations with Cathie Allen.

54. I had a telephone conversation with Minister Yvette D'Ath to inform her of my decision. I do not recall the date of this telephone conversation.

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.

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55. I had the discussions mentioned in paragraphs 15 and 16 above and considered the material in paragraphs 16 and 31 above.

h. The reasons for each decision, and for not choosing any other option presented, and the basis of those reasons in material or information.

56. I have explained the methodology for my decisions in paragraph 35 above.

57. The scientific debate was not a factor in my decisions. The question to answer was whether I could reinstate the pre-2018 testing workflow while the issue is considered by the Commission of Inquiry and pending a resolution by its findings or recommendations about the appropriate testing workflows moving forward.

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.

58. Lara Keller indicated to me that there were discussions with FSS DNA Analysis Unit management and scientific staff.

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, 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.

59. It was Lara Keller's responsibility to communicate with internal and external partners such as the FSS team and the Queensland Police Service. This is not the role for the Director General.

k. How the Minister for Health and the Premier were briefed in relation to each decision for the press conference held on 6 June 2022.

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60. I was not involved in briefing the Premier. I had multiple conversations with the Minister for Health over the weekend about the Commission of Inquiry. I was sent a public statement by Simon Zanatta, the Minister for Health's Chief of Staff. I read that statement and confirmed that it was in line with my decision. A copy of the email and the attachment are attached as **exhibit SD-08 – FSS Threshold Words**.

I. Whether, following either decision, your understanding of the options has changed. Identify the basis for any change in your understanding.

61. I have been advised, subsequent to my decisions of 6 June 2022, that option 2 was consistent with my intention to revert to the pre-2018 testing workflow than what was expressed at the time. I now understand it was not the case that all sample volume will be necessarily consumed by the addition of a concentration step. I am aware now that a concentration step was in place for all Priority 1 and 2 workflows before the introduction of the thresholds in 2018. I was provided this new information by David Rosengren during my period of planned leave on 16 August 2022.

Question 8 – 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 0.001-0.0088 ng/μL, but the case had not yet finalised. 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.

62. I was not involved in any other discussions other than those outlined above.

Question 9 – Explain how the 6 June 2022 decisions were communicated to staff within the DNA Analysis Unit and your involvement in that.

63. I was not involved in any direct communications to staff within the DNA Analysis Unit. My memorandums dated 3 and 5 August 2022 confirm my expectation that it would be shared with all FSS staff.

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Question 10 – Explain how the 6 June 2022 decisions were communicated to stakeholders, including the Queensland Police Service, and your involvement in that.

64. Forensic Scientific Services were to communicate to stakeholders, including the Queensland Police Service. I was not involved in any such communication because, as explained in paragraph 59 above, that is not the role of the Director General.

Question 11 – Describe any further discussions or communications you have had with the Queensland Police Service or any member of the Executive Government or their advisors, in relation to the 6 June decisions, including identifying:

- a. Any concerns or queries raised by the QPS or any member of the Executive Government or their advisors, about the decisions.**

65. I have no record of any conversations with the Queensland Police Service or any member of the Executive Government or their advisors in relation to the 6 June decisions.
66. I communicated with members of the Executive Government as outlined at paragraphs 14, 16, 31, 54 and 60.

Decision of 19 August 2022

Question 12 – Explain any discussion about or reconsideration of the decisions of 6 June 2022 that occurred between 6 June 2022 and 19 August 2022 and identify:

- a. Who was involved;**

67. I am aware that David Rosengren was involved in a reconsideration of my 6 June 2022 decisions when he was acting as the Director General while I was on a planned leave of absence between 8 August and 22 August 2022. I did attend a meeting on 8 August but not related to the Commission of Inquiry while on leave before departing Australia.

- b. What occurred in any correspondence or discussions;**

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68. Save for the two discussions I had with David Rosengren during my leave, outlined in paragraphs 69 and 70 below, I do not believe I was part of any correspondence or discussions that led to his reconsideration of my 6 June 2022 decisions.

c. The reason for any discussion or reconsideration.

69. I recall that during a routine check in conversation on or around 16 August 2022, David Rosengren advised me that the “option 1” did not give effect to my intention to revert to the pre-2018 testing workflow position. I was advised that “option 1” was a reversion to a comparable workflow rather than exactly the same workflow as pre-2018. It is my understanding that there was a scientist who provided this information to Lara Keller and Cathie Allen, and this information was then provided to David Rosengren.

Question 13 – 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 and 2 samples with a quantitation 0.001-0.0088 ng/μL? 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 the decision;
- b. When the decision was made;
- c. The reason for the decision;
- 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;
- e. The material or information on which the decision was based;
- f. The meetings, discussions or correspondence in relation to the decision.

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70. I did have a discussion with David Rosengren on the morning of 19 August 2022 during which I became aware of his intention to make a decision to revert to a workflow that would as closely as possible reflect the testing workflow in place before 2018, however, I did not have any involvement in that decision.

Question 14 – 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;

71. David Rosengren made the decision. I was not involved in the decision other than being advised by David, in the discussions outlined above, about how he was planning to resolve the matter.

b. When the decision was made;

72. I understand that this decision was made on 19 August 2022.

c. The reasons for the decision;

73. I understand that the reason for the decision was that it had been clarified that the samples would not be fully consumed in the concentration step.

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;

74. I refer to my response in paragraph 69 above.

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

75. I am not aware of the material or decision on which the decision was based.

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

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76. I had two discussions with David Rosengren during this period as I have outlined above. The first was on 16 August 2022 where David advised me that the issue had been raised by one of the scientists and that he was dealing with that issue. The second telephone conversation was on 19 August 2022 and during that conversation David advised me of his planned decision. I had no other involvement in the decision.

2018 Options Paper

Question 15 – Outline your understanding of the two options presented in the document titled *A review of the automatic concentration of DNA extracts using Microcon Centrifugal Filter Devices: Options for QPS consideration (Options Paper)*.

77. I understood the two options were as follows:
- “option 1”, continue with current process and the consequent impact on timeliness or resourcing; or
 - “option 2” would be to consider a process for rationalising the workload for priority 2 crimes and the potential to reduce demand, this option identifies a number of elements that required working through.

Question 16 – Identify who, in your view, should have been consulted regarding the issues raised in the Options Paper, and why.

78. The decision should have been passed up for resourcing and support. This was a significant policy amendment, as well as an operational decision for the scientific services. The Deputy Director General and the Director General should have been consulted about the issues raised in the Options Paper.

Question 17 – Identify who, in your view, should have been the responsible decision maker in relation to the options presented in the Options Paper, and why.

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79. The Deputy Director General or equivalent should have made the decision. It had a significant impact on the department fulfilling their responsibility for the services to the criminal justice system. I do not regard this as an “officer level” decision.

Funding

Question 18 – Explain how the DNA Analysis Unit would go about seeking further funding.

80. There are several ways for funding to be approved:
- a. Temporary funding through existing budget of Pathology Queensland, Forensic Scientific Services or Health Services Queensland. The Executive Director in charge can make an allocation in their budget. The first step would be to see if temporary funding is available.
 - b. The next option would be a Finance Branch process. At the time, there was a Budget Finance Oversight Group (BFOG). This was a committee with a function to assess applications for additional allocations from the corporate management budget in circumstance of a service deficit or resource need. Funding by the BFOG can be requested and approved on a temporary or permanent basis. The usual process would involve a submission by the Deputy Director General of the relevant area to BFOG for assessment and approval.
 - c. A third option would be a submission during the annual budget allocation process. This process will routinely accommodate predicted growth in allocations for clinical and scientific services. The initiator could be at any level and the submission would be presented to BFOG by the relevant Deputy Director General.
 - d. There is no formal process to make a direct request to the Director General, however staff are always able to contact the Director General to raise significant issues. This would generally take the form of an email.

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Question 19 – Identify what steps have been taken with the Department of Health at your behest to identify funding requests made in relation to the DNA Analysis Unit, and by whom, using what means. Attach all records of the outcome of those inquiries.

81. I have received briefs of information from Matthew Rigby regarding funding requests received. The email from Matthew Rigby attaching the brief of documents is attached as exhibit **SD-09 – Re Some information.**
82. I have also received a funding brief to approve the additional resources required to give effect to my decision of 6 June 2022 to implement, as it was then, “option 1”.

Question 20 – Attach any requests for further funding made in relation to the DNA Analysis Unit, and the reason for those requests, since 1 January 2010. Explain the outcome of any request made.

- g. I have provided a response to this question in paragraphs 81 and 82 above.

Question 21 – 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.

83. There is a memorandum of understanding between the Queensland Police Service and Queensland Health which provides a mechanism to seek additional funding. To my knowledge this has never been exercised. A copy of this memorandum of understanding is attached as exhibit **SD-10 – Memorandum of Understanding between Queensland Health & Queensland Police Services.**

Question 22 – Outline any discussion you have had about the adequacy of the DNA Analysis Unit’s funding that you have had with Cathie Allen, Lara Keller or any other staff member of Queensland Health since commencing your current role.

84. I have had no discussions about the adequacy of the DNA Analysis Unit’s funding. This issue has never been raised with me.

 Shaun Drummond

 Witness

Question 23 – Explain any prospective plans or inquiries you have regarding considering further funding for the DNA Analysis Unit.

85. There are no plans in place at this stage although I remain open to receive funding briefs at any time. We are awaiting the outcome of the Commission of Inquiry. Once this is received then there will be a review of the necessary funding to perform the scientific functions required.

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 *Brisbane* in the State of Queensland this *21st* day of September 2022

[Redacted signature]

Shaun Drummond

[Redacted signature]

Witness

[Redacted signature]

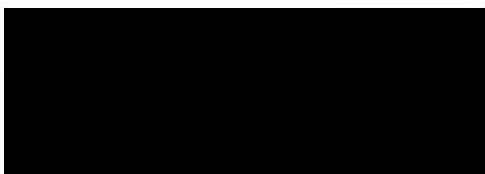
Shaun Drummond

[Redacted signature]

Witness

Exhibits Index – Shaun Drummond Statement

Question	Exhibit	Document Title
5(a)	SD-1	20220602 - 1433 - FW: Options Papers - First one and Draft of Second
5(a)	SD-2	20220602 - 1547 - FW: Documents - timeline and number of requests
5(a)	SD-3	DG Memo – Urgent Amendment to Standard Operating Procedure required
5(a)	SD-4	DG Memo – Urgent Amendment to Standard Operating Procedure required – 5 August.
5(d)	SD-5	Link to Podcast
7(b)	SD-6	Forensic DNA testing impacts
7(b)	SD-7	Fwd: Forensic DNA testing impacts
7(k)	SD-8	FSS Threshold Words
19 and 20	SD-9	Re Some information
21	SD-10	Memorandum of Understanding between Queensland Health & Queensland Police Services


Shaun Drummond


Witness

From: Lara Keller
Sent: Thu, 2 Jun 2022 14:33:22 +1000
To: Shaun
Drummond; Yvette.d'ath [REDACTED]; simon.zanatta [REDACTED]; Matthew
Rigby
Cc: FSS Corro
Subject: FW: Options Papers - First one and Draft of Second
Attachments: #184 Review of Microcon Options paper QPS (Final report).pdf, Assessment
of low quant DNA Samples.docm, Email advice Supt Frieberg on Options Paper_Feb 2018.pdf

Good afternoon All

Papers attached as discussed.

2018 options paper : 1.86% were suitable to be uploaded to the National Criminal Investigation DNA
database
2022 review paper: 5.3% “ ” (but note smaller number assessed)

Thanks and Kind Regards

Lara



Lara Keller B App Sc (MLS), Grad Cert Health Mgt, MAIMS, CMgr FIML
A/Executive Director
Forensic and Scientific Services
vention, Queensland Health



Queensland Health acknowledges the Traditional Owners of the land, and pays respect to Elders past, present and emerging.

From: Cathie Allen <[REDACTED]>
Sent: Thursday, 2 June 2022 2:08 PM
To: Lara Keller <[REDACTED]>
Subject: Options Papers - First one and Draft of Second

Hi Lara

The first options paper is the pdf doc = #184 review of Microcon Options paper QPS. Attached email
from Supt Frieberg advising her authorisation to proceed with the 'DNA Insufficient' process (dated
Feb 2018).

I'll work on the rest and send as it's done.

Cheers
Cathie



Cathie Allen BSc, MSc (Forensic Science) (She/Her*)

Managing Scientist

Social Chair, Organising Committee for 25th International Symposium of the Australian and New Zealand Forensic Science Society (ANZFSS), Brisbane, 11 – 15 Sept 2022

Police Services Stream, Forensic & Scientific Services

Prevention Division, Queensland Health



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*If you're wondering about the use of pronouns She/Her on this signature block, I encourage you to read some resources available [here](#)



From: Lara Keller
Sent: Thu, 2 Jun 2022 15:46:40 +1000
To: Shaun Drummond; Yvette.d'ath [REDACTED]; simon.zanatta [REDACTED]; Matthew Rigby
Cc: FSS Corro
Subject: FW: Documents - timeline and number of requests
Attachments: Timeline of communications between QPS and QHFSS.docm, Requests for processing_2021 2022.docm, DNA insuff samples further processed_Sexual Offences.xlsx
Importance: High

Good afternoon All

As requested, kindly find attached:

1. Timeline re QPS and FSS engagement regarding thresholds
2. Number of requests for further concentration of samples reported as "Insufficient DNA Detected)
 Note: We are unable to readily identify outcomes of the requests without full case file reviews for each request. This would require a number of staff to go offline for some days as we do not have the capability via the IT platform to mine this data.
3. Cathie Allen's start of her review to challenge/confirm the findings put forward by QPS. This is a laborious case file review process as well.

Thanks and Kind Regards

Lara



Lara Keller B App Sc (MLS), Grad Cert Health Mgt, MAIMS, CMgr FIML
 A/Executive Director
Forensic and Scientific Services
 Prevention Division, Queensland Health



Queensland Health acknowledges the Traditional Owners of the land, and pays respect to Elders past, present and emerging.

From: Cathie Allen <[REDACTED]>
Sent: Thursday, 2 June 2022 3:14 PM
To: Lara Keller <[REDACTED]>
Subject: Documents - timeline and number of requests
Importance: High

Hi Lara

Attached is the Timeline of communications, and a collation of the number of requests for processing of DNA Insufficient samples for 2021 and 2022.

Attached is the excel spreadsheet that I've been working on – reviewing whether the processing of a DNA insufficient gave a new DNA profile that hadn't been seen before (given we don't know how the QPS are making decisions on what to process). I haven't finished but here's what I've got so far.

Cheers

Cathie



Cathie Allen BSc, MSc (Forensic Science) (She/Her*)

Managing Scientist

Social Chair, Organising Committee for 25th International Symposium of the Australian and New Zealand Forensic Science Society (ANZFSS), Brisbane, 11 – 15 Sept 2022

Police Services Stream, Forensic & Scientific Services

Prevention Division, Queensland Health



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Department of Health



Queensland
Government

MEMORANDUM

To: Helen Gregg, A/Executive Director, Forensic and Scientific Services

Copies to: Prof Keith McNeil, Deputy Director-General and
Chief Medical Officer, Prevention Division and Chief Clinical Information

From: Shaun Drummond, Acting Director-General

Enquiries to: David Harmer,
Senior Director,
Social Policy and
Legislation Branch.
[REDACTED]

Subject: Urgent amendment to Standard Operating Procedure required

File Ref: C-ECTF-22/12758

It has been brought to my attention that the following wording is currently used in witness statements where DNA was in the range 0.001ng/uL (LOD) - 0.0088ng/uL:

'insufficient DNA for analysis' or 'insufficient DNA for further processing'

This wording may convey the impression that further processing or analysis is not possible. To avoid this impression and ensure witness statements make clear that further analysis may be possible in some cases, please immediately amend the Standard Operating Procedure and other guidance for staff to require that the following alternative text is used in witness statements:

Low levels of DNA were detected in this sample and it was not submitted for further DNA profiling.

This sample is more likely to contain insufficient DNA to develop a DNA profile, but in a small number of such cases, there may be sufficient DNA to obtain a partial or full DNA profile.

If there is a requirement to clarify witness statements already submitted that use the descriptions *'insufficient DNA for analysis' or 'insufficient DNA for further processing'*, use the above wording in any clarifying statement.

Should you require further information, the Department of Health's contact is Mr David Harmer, Senior Director, Social Policy and Legislation Branch on telephone [REDACTED].

[REDACTED]

Shaun Drummond
Acting Director-General
03/08/2022



MEMORANDUM

To: Helen Gregg, A/Executive Director, Forensic and Scientific Services

Copies to: Professor Keith McNeil, Deputy Director-General and
Chief Medical Officer, Prevention Division and Chief Clinical Information

From: Shaun Drummond, Acting Director-General

Enquiries to: David Harmer, Senior Director, Social Policy and Legislation Branch.
[REDACTED]

Subject: Urgent amendment to Standard Operating Procedure required

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This wording may convey the impression that further processing or analysis is not possible. To avoid this impression and ensure witness statements make clear that further analysis may be possible in some cases, please immediately amend the Standard Operating Procedure and other guidance for staff to require that the following alternative text is used in witness statements:

Low levels of DNA were detected in this sample and it was not submitted for further DNA profiling.

The sample may have insufficient DNA to result in a DNA profile suitable for interpretation. It is possible that further testing may result in an interpretable DNA profile in some cases.

If there is a requirement to clarify witness statements already submitted that use the descriptions *'insufficient DNA for analysis' or 'insufficient DNA for further processing'*, use the above wording in any clarifying statement.

Please share this memorandum with Forensic DNA Analysis Unit staff.

Should you require further information, the Department of Health's contact is Mr David Harmer, Senior Director, Social Policy and Legislation Branch on telephone

[REDACTED]

[REDACTED]

Shaun Drummond
Acting Director-General
05/08/2022

From: Matthew Rigby
Sent: Fri, 17 Jun 2022 08:05:05 +1000
To: DL-ELT_Personal;Jane Martin
Subject: Link - Podcast

Morning everyone,

As discussed, here is the link to the podcast.

Thanks Matt <https://podcasts.apple.com/au/podcast/shandees-story/id1589336606?i=1000566605144>



Matt Rigby
Executive Director
Office of the Director-General
Queensland Health

[Redacted content]

From: Lara Keller
Sent: Fri, 3 Jun 2022 17:09:48 +1000
To: Shaun Drummond
Subject: Forensic DNA testing impacts

Good afternoon Shaun

Kindly find below two options for the term-of-review process. Please note that these figures are estimates only.

Option 1 – Process Only (Preferred)

Revert to pre 2018 workflow – which is where all samples above a quant value of 0 are **processed through** to DNA profiling. Samples that are identified as being beneficial for concentration can be based on the DNA profile achieved, item criticality and case context.

Will increase TAT to report, plus generate approx. 6 weeks backlog per 6 months

Estimated cost of kits plus IT = \$60K

Overtime likely

Option 2 – Concentrate and Process (Least Preferred)

Discontinue 2018 workflow and **concentrate** all samples with a quant value between 0 and 0.0088ng/uL and then **process through** to DNA profiling stage.

Risks:

1. concentration step creates a risk of there being no DNA sample available for testing by other technologies not undertaken in Queensland, future technologies or testing requested by Defence.
2. in previous discussions, the QPS did not support an automatic concentration process, as the sample hadn't been assessed in the context of the case and may leave no sample remaining for future testing.
3. concentration step is a manual process so will impact labour and TAT

Will increase TAT to report, plus generate approx. 3 months backlog per 6 months

Estimated cost of kits plus IT = \$80K

Overtime likely

To address subsequent backlog will require 5+ HP3 staff, noting that achieving minimum competency takes 3 months, full competency takes 12 months.

Thanks and Kind Regards

Lara



Lara Keller B App Sc (MLS), Grad Cert Health Mgt, MAIMS, CMgr FIML
 A/Executive Director

Forensic and Scientific Services

Prevention Division, Queensland Health



From: Shaun Drummond
Sent: Fri, 3 Jun 2022 17:51:47 +1000
To: Yvette.D'Ath [REDACTED]; simon.zanatta [REDACTED]; Jasmina Joldic
Subject: Fwd: Forensic DNA testing impacts

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From: Lara Keller <[REDACTED]>
Sent: Friday, June 3, 2022 5:09 pm
To: Shaun Drummond <[REDACTED]>
Subject: Forensic DNA testing impacts

Good afternoon Shaun

Kindly find below two options for the term-of-review process. Please note that these figures are estimates only.

Option 1 – Process Only (Preferred)

Revert to pre 2018 workflow – which is where all samples above a quant value of 0 are **processed through** to DNA profiling. Samples that are identified as being beneficial for concentration can be based on the DNA profile achieved, item criticality and case context.

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Thanks and Kind Regards

Lara



Lara Keller B App Sc (MLS), Grad Cert Health Mgt, MAIMS, CMgr FIML
 A/Executive Director
Forensic and Scientific Services
 Prevention Division, Queensland Health



From: simon.zanatta [REDACTED]
Sent: Mon, 6 Jun 2022 09:42:07 +1000
To: Shaun Drummond;Jasmina Joldic
Subject: FSS Threshold words
Attachments: FSS thresholds.docx

This email originated from outside Queensland Health. DO NOT click on any links or open attachments unless you recognise the sender and know the content is safe.



Simon Zanatta
Chief of Staff
Office of the Hon. Yvette D'Ath MP
Minister for Health and Ambulance Services
M: [REDACTED]
1 William Street Brisbane QLD 4000

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Unless stated otherwise, this email represents only the views of the sender and not the views of the Queensland Government.

Please consider the environment before printing this email.

From: Renaie Tesch
Sent: Tue, 6 Sep 2022 11:37:13 +1000
To: Matthew Rigby
Subject: RE: Some information
Attachments: FSS - SRO budget and briefs.docx

Hi Matt,

Detail attached.

In relation to the searches conducted within the Office of the Director-General these were done by the following positions:

- Sarah Johnson, A/Senior Information and Development Officer, Ministerial and Executive Services Unit, ODG
- Miranda Claughton, A/Director, Ministerial and Executive Services Unit, ODG
- Renaie Tesch, A/Senior Director, ODG

As included in the attached word document the excel file on the Briefs (Office of the Director-General) page contains a 'data dump' of all records from the electronic Documents Records Management System (Content Manager) from Health Support Queensland and Prevention Division locations, searching the words 'fund', 'FSS' or 'forensic'.

I am just waiting to discuss with Luan Sadikaj, Chief Finance Officer on the parameters used and by who for the BFOG submission information.

Thanks
Ren



Renaie Tesch

A/Senior Director

Office of the Director-General and Executive
Director
Queensland Health



**CLEAN HANDS
SAVE LIVES**

Wash your hands regularly to stop the spread of germs



Queensland Health acknowledges the Traditional Owners of the land, and pays respect to Elders past, present and future.

From: Matthew Rigby <[REDACTED]>
Sent: Tuesday, 6 September 2022 10:33 AM
To: Renaie Tesch <[REDACTED]>
Subject: Some information

Question 19 - Identify what steps have been taken within the Department of Health at your behest to identify funding requests made in relation to the DNA Analysis Unit, and by whom, using what means. Attach all records of the outcome of those inquiries.

1. [your response]

Question 20 - Attach any requests for further funding made in relation to the DNA Analysis Unit, and the reason for those requests, since 1 January 2010. Explain the outcome of any request made.

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File No:

0041-3000-328

0041-3000-328

RECORDS MANAGEMENT & SUPPORT
 INDIVIDUAL
 LEGAL DOCUMENTS
 MOU - DNA PROFILING TECHNOLOGY

RESTRICTED ACCESS
 RETURN FILE TO RECORD MANAGER'S CONFIDENCE

CASS

BRIEF INSTRUCTIONS FOR USE OF FILE COVER SHEETS

- A. FOLIO NUMBERS: Each page attached to the file must be in chronological order and given a consecutive number. The folio(s) on which action is entered in the first column, the second column will show to whom the file is referred. Papers must not be removed from the file without the records.
- B. MARKINGS TO OTHER OFFICERS: When an officer completes their action on the file and further action is required by some other officer, the officer should initial the third column and indicate the date in the fourth. On the next line, the officer should enter in the first column the folio number with the coding of the officer referred to in the second. The file can be delivered by hand or a direct file movement form completed in cases.
- C. BRING-UP MARKINGS: When action on a file is required at a later date the officer should enter in the first column the folio number followed by the coding "B/U" in addition to noting the bring-up on the actual folio. The file should then be returned to records for recording of the bring-up.

ENQUIRES CONCERNING THIS FILE SHOULD BE DIRECTED TO RECORDS MANAGEMENT AND SUPPORT

ON EXTENSION: 40979 OR 40980

REVIEW
 05/11/01 - 148

DISPOSAL ACTION:	0421-316-100m				CREATION DATE:	24/10/01	REVIEW/DESTRUCTION DATE:		/ /	
INIT: / DATE: /	FOLIO No.	REFERRED TO	OFFICER'S INITIALS	DATE	REMARKS	FOLIO No.	REFERRED TO	OFFICER'S INITIALS	DATE	REMARKS
	1.	Away	KB	24-01-01	LD:0009173.					
SECONDARY COVER ADDED										
File No:	Qld Health									
	088873									

0041-3000-328

LEGAL DOCUMENT REGISTER

File Number: 0041-3000- 328.

Registration Number: LD: 000923.

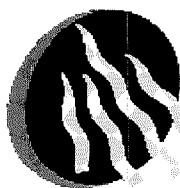
ALL DOCUMENTS ON THIS FILE HAVE
BEEN PRESERVED IN THE STATE
RECEIVED IN RECORDS

COPY ALSO ON : 0036-3146-003.

MEMORANDUM OF UNDERSTANDING

BETWEEN

**The State of Queensland through Queensland Health, Queensland
Health Scientific Services, Forensic Sciences**



**Queensland
Government**
Queensland Health

AND

The State of Queensland through the Queensland Police Service



This **MEMORANDUM OF UNDERSTANDING** is made at Brisbane on
the day of 2000.

2

BETWEEN

The State of Queensland through Queensland Department of Health,
Queensland Health Scientific Services, Forensic Sciences, 39 Kessels Road,
Coopers Plains, Brisbane.

AND

The State of Queensland through the Queensland Police Service, 200 Roma
Street, Brisbane.

1 EXPLANATION OF TERMS

- 1.1 “DNA” means Deoxyribonucleic Acid.
- 1.2 “MAJOR INCIDENT” For the purpose of this MOU a major incident also includes a major disaster where victim identification may be required using DNA profiling.
- 1.3 “MANAGER QHSS” This term used within this MOU relates to the Manager QHSS or the manager’s delegate.
- 1.4 “MOU” means Memorandum of Understanding.
- 1.5 “NATA” means National Association of Testing Authorities.
- 1.6 “O/C” means Officer in Charge.
- 1.7 “QHSS” means Queensland Health Scientific Services, Forensic Sciences.
- 1.8 “QPS” means Queensland Police Service.

2 INTRODUCTION

- 2.1 This MOU has been developed to clarify the roles and responsibilities of both of the parties to this memorandum and to facilitate the development of formal arrangements, which will ensure the effective use of DNA profiling technology.

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- 2.2 The QHSS and the QPS agree that this MOU does not create any legal relations between them. However the matters set out in this MOU are agreed in principle between the parties.

3 OBJECTIVES

- 3.1 The primary objective of this MOU is to establish the framework under which Queensland Police Service will provide funding to Queensland Health for forensic person sampling using DNA technology.
- 3.2 Additional objectives are:
- 3.2.1 To develop a positive and collaborative working relationship between the QHSS and the QPS in relation to the use of DNA profiling technology for the purpose of police enquiries and investigations.
- 3.2.2 To develop a funding model reinforced by the principle of financial equity and consistent with sound financial management practices, as prescribed in the *Financial Management Standard 1997*.
- 3.2.3 To minimise the administrative complexity of processing payments.
- 3.2.4 To ensure timing constancy in the provision of funds each quarter.
- 3.2.5 To achieve a high level of transparency in all transactions.

4 RECITALS

- 4.1 The QHSS will provide forensic scientific services to the QPS with the intention of identifying individuals using the evidentiary application of DNA profiles.
- 4.2 The QPS intends to use the DNA profile information supplied by the QHSS to assist in police enquiries and investigations.
- 4.3 The QHSS undertakes to provide forensic scientific services in a NATA accredited environment, in accordance with the prerequisites of the national DNA system.

4

5 **GENERAL ROLES AND RESPONSIBILITIES**

The following particulars outline the general roles and responsibilities of each party to this MOU.

- 5.1 The mission of Queensland Health is “Helping people to better health and wellbeing.”
- 5.2 The guiding principles and role of Queensland Health are:
 - 5.2.1 Prevention, health promotion and early intervention.
 - 5.2.2 Evidence-based clinical practice.
 - 5.2.3 Partnership with all health-care providers (including private sector and non-government bodies).
 - 5.2.4 Managing the public health risks of Queenslanders.
- 5.3 The mission of the QPS is “To serve the people of Queensland by protecting life and property, preserving peace and safety, preventing crime and upholding the law in a manner which has regard for the public good and the rights of the individual.”
- 5.4 The guiding principles of the QPS are:
 - 5.4.1 Provide a corruption free policing service to the Queensland community, based on integrity, fairness, equity, professionalism and accountability.
 - 5.4.2 In partnership with the Queensland community, as well as with other law enforcement agencies, provide responsive policing services to meet the Service’s statutory responsibility to preserve peace and good order and to prevent, detect and investigate breaches of the law by the use of problem solving approaches.
 - 5.4.3 Help create a safe environment for all Queensland residents and visitors.

5.4.4 Employ effective and efficient management systems which provide maximum support to operational police and all other staff through:

5.4.4.1 Human resource management practices which value the contribution of all staff members.

5.4.4.2 Education and training programs which support and enhance the capacities of all staff.

5.4.4.3 Corporate management practices, which provide the information systems and administrative support structures required to ensure a well, equipped and well-informed Police Service.

6 FUNDING MODEL

6.1 Cost Recovery

6.1.1 The per sample costs for each biological person sample processed by Queensland Health are as follows:

2000/2001 - \$85.93

2001/2002 - \$90.22

2002/2003 - \$89.65

The projections of sample volume are:

2000/2001 – 13,900

2001/2002 – 26,010

2002/2003 – 28,320

6.1.2 The Queensland Police Service and Queensland Health agree to undertake a review and renegotiation of per sample cost and projections of sample volume, if necessary, at the end of each financial year incorporated by this MOU. Additional funding requests to Queensland Treasury, if required, will be initiated by Queensland Police Service.

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- 6.2 Each payment to Queensland Health by Queensland Police Service will be made prospectively by the commencement of each quarter.
- 6.3 A quarterly acquittal process will be conducted to reconcile the payments made to the samples processed throughout the period.

7 **OPERATIONAL ASPECTS OF MEMORANDUM**

- 7.1 The fiscal years incorporated by this MOU are 2000/2001, 2001/2002, 2002/2003.
- 7.2 The MOU will take effect from the date of execution of the Memorandum by the last party to sign it, and will continue until either party withdraws from the memorandum by written notice to the other party.
- 7.3 Both parties must agree in writing to any alterations to this MOU. Any proposed alteration shall be raised and addressed through the Commissioner, QPS and the Director-General, Queensland Health.
- 7.4 Should either party (the first party) form the view that the other party (the second party) is not complying in any respect with any of the provisions of this MOU. The first party shall notify the second party in writing and request the second party to attend a meeting to resolve the issue. The second party shall cooperate with the first party in a genuine attempt to resolve the dispute.
- 7.5 The parties agree to respect the policy and legislative requirements of either party and that any joint service provision will reflect those requirements. Those policy and legislative requirements include:
 - 7.5.1 Queensland Police Service Code of Conduct.
 - 7.5.2 Queensland Police Service Operational Procedures Manual.

7

7.5.3 *Police Powers and Responsibilities Act 2000* including the Responsibilities Code.

7.5.4 *Police Service Administration Act 1990*.

7.5.5 *Criminal Code Act 1899*.

- 7.6 Forensic samples obtained by QPS during the course of investigations for evidentiary purposes remain the property of QPS during investigations.
- 7.7 The QHSS will overview the initial sampling procedures and certify in writing to the QPS that the procedure is in accordance with NATA protocols and will protect the integrity of any samples.
- 7.8 The QHSS will provide advice to the QPS on packaging and transport of DNA person samples obtained from arrested persons, prisoners and from consenting persons.
- 7.9 The QHSS will provide advice to QPS on packaging and transport of samples relating to the DNA database.
- 7.10 The QHSS will provide advice to the QPS DNA Unit as to quality of samples received.
- 7.11 The O/C of the QPS DNA Unit will develop a suitable person sample delivery procedure and schedule in conjunction with the Manager QHSS.
- 7.12 The QHSS shall guarantee that they have the capacity to provide DNA profiles to a minimum of Twenty Thousand person samples per annum.
- 7.13 The Commissioner of the Queensland Police Service authorises the Director General of Queensland Health to keep and maintain a DNA database for the purpose of recording any information obtained by a DNA analysis of a DNA sample. The DNA database that is kept and maintained by the Director-

General of Queensland Health is approved for that use by the Commissioner of the Queensland Police Service.

- 7.13.1 A DNA database approved under paragraph 7.13 may include a database established by agreement between the Commonwealth and the States for keeping information, including DNA information, obtained by Commonwealth and State law enforcement agencies and is for use only for investigations being conducted by those agencies.
- 7.13.2 The Commissioner may arrange for information obtained by a DNA analysis of either of the following, held by the commissioner, to be included in the database. A sample including blood taken before or after the commencement of this MOU or a thing a police officer reasonably suspects is evidence of the commission of an offence.
- 7.13.3 It is lawful for the Commissioner to use the DNA database for any investigation being conducted by a police officer for the police service or a declared law enforcement agency.
- 7.14 The QHSS will provide advice to the QPS on training issues in relation to the collection of samples and data for a DNA database.
- 7.15 The QHSS will notify the results of any DNA profile matches to the QPS DNA Unit. These profile matches include those profiles that are presently stored on the QHSS database, including person to person matches, person to crime scene matches and crime scene to crime scene matches
- 7.16 The QHSS will provide the DNA Unit with information in relation to any DNA profile matches within forty-eight hours of a match being confirmed. The QHSS will restrict this information to the QPS DNA Unit except where a task force or

major operation is current and awaiting the result of a specific DNA profiling.

- 7.17 The agreed maximum turn around time in relation to person samples is ten working days.
- 7.18 Where a task force or major operation is currently deployed then the QHSS and the O/C QPS DNA Unit shall liaise with each in order to facilitate direct contact between the QHSS and the chief investigator concerning any relevant DNA profile.
- 7.19 DNA profile information that is recorded pursuant to Section 317 of the *Police Powers and Responsibilities Act* and held by the Forensic Biology Section, QHSS is for law enforcement purposes only.
- 7.20 The QHSS will provide adequate security of any exhibits used for DNA profiling and any data and electronic systems used to store that DNA profile. This security will also include physical protection of buildings as required.
- 7.19 The QHSS will develop a satisfactory procedure of removing DNA profiles from the searchable records of the DNA database in accordance with section 316 of the *Police Powers and Responsibilities Act*.
- 7.20 The QHSS will provide to the QPS DNA Unit, on or before, the fifth day of each month an activity statement detailing the number of DNA samples received and the number of profiles obtained during the preceding month.
- 7.21 As in 7.20, the QHSS will supply to the QPS on a monthly basis, an activity statement detailing the number and the reasons for the non-profiling of any samples.
- 7.22 Upon a request of the O/C QPS DNA Unit the QHSS will provide to that unit any information in order to identify a person that has a DNA profile from a person sample obtained from matching profiles stored within the QHSS database. Any data stored within the QHSS database is done so in an interim

arrangement pending the commencement of the national DNA system, CrimTrac.

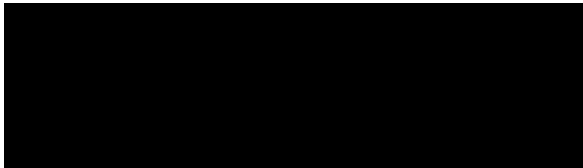
- 7.23 On the commencement of the National DNA system, CrimTrac, the QHSS will provide the QPS with DNA matching reports on a person to person basis, person to crime scene basis or crime scene to crime scene basis.
- 7.24 The QPS will continue to work towards providing QPS Intranet access to the QHSS in order to provide intranet email advice to the O/C QPS DNA Unit.
- 7.25 The QHSS will provide a contact person in the event of any major incident or major disaster where identification using DNA profiling may be required.
- 7.26 The QHSS and the QPS will agree on any necessary procedures in the event of any major incident or major disaster.
- 7.27 In matters relating to priority:
- 7.27.1 The O/C QPS DNA Unit will from time to time request the Manager QHSS to give priority over the QHSS current DNA profiling work load in relation to an urgent crime scene sample or person sample.
- 7.27.2 When a request, as detailed in paragraph 7.27.1 is made the Manager QHSS, depending on resource implications, will give that priority to the relevant crime scene sample or person sample.
- 7.28 The O/C QPS DNA Unit will give prior advice, where applicable, to the Manager QHSS in relation to any screening operations that are currently in action or about to commence.

8 TERMS OF AGREEMENT

In a spirit of cooperation between the QHSS and the QPS, the parties agree as follows:

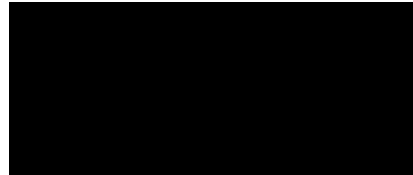
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- 8.19 To participate in regular meetings designed to improve service delivery in issues impacting on their respective responsibilities.
- 8.20 To develop protocols and operational procedures to improve coordination of services in relation to DNA profiling.
- 8.21 To develop clear lines of communication between the QHSS and the QPS.
- 8.22 To work together to identify needs and develop strategies for future initiatives.
- 8.23 To cooperate in the preparation and presentation of training packages relating to the collection of samples and data for the DNA database that will be applicable and complimentary to both agencies.

SIGNED BY:

**R ATKINSON
COMMISSIONER
QUEENSLAND POLICE SERVICE**

8 / 1 / 2000-2001



**(DR) R L STABLE
DIRECTOR GENERAL
QUEENSLAND HEALTH**

21 / 1 / 2000-2001

