# **WITCPUETKRV**

# PANDEMIC DECLARATION ACCOUNTABILITY AND OVERSIGHT COMMITTEE

### **Review of Pandemic Orders**

Melbourne—Tuesday, 29 March 2022

### MEMBERS

Ms Suzanna Sheed (Chair) Mr Jeff Bourman (Deputy Chair) Mr Josh Bull Ms Georgie Crozier Mr Enver Erdogan Ms Emma Kealy Ms Harriet Shing Ms Vicki Ward Mr Kim Wells

#### 1

#### WITNESS

Ms Jo de Morton, Chief Executive Officer, Service Victoria.

**The CHAIR**: I declare open this hearing of the Pandemic Declaration Accountability and Oversight Committee. The Pandemic Declaration Accountability and Oversight Committee is a joint investigatory committee established under the *Parliamentary Committees Act 2003* and the *Public Health and Wellbeing Act 2008*. Its powers include the ability to review pandemic orders made under the *Public Health and Wellbeing Act and report* to each house of Parliament on these orders.

I would like to begin by acknowledging the traditional owners of the land that we are gathered on here and pay my respects to them, their culture, their elders past, present and future and elders from other communities who may be here today.

I would like to welcome you, Ms de Morton, to today's hearing and introduce you to those of the committee who are presently here: Ms Georgie Crozier, Ms Emma Kealy, Mr Enver Erdogan and, online, Mr Kim Wells. And there are expected to be a couple of others joining us.

All evidence taken by the committee is protected by parliamentary privilege. Comments repeated outside this hearing, including on social media, may not be protected by this privilege.

All evidence given today is being recorded by Hansard. You will be provided with a proof version of the transcript to check. Verified transcripts, presentations and handouts will be placed on the committee website as soon as possible.

I welcome our witness and invite you to make an opening statement of no more than 5 minutes, and this will be followed by questions from the committee. Thank you very much.

**Ms de MORTON**: Thank you. So I am Jo de Morton. I am the Chief Executive Officer of Service Victoria. Service Victoria is government's dedicated customer service delivery agency. We aim to make it easy for people to get things done with government by delivering modern customer services designed around their needs. People's responses have been overwhelmingly positive, so that is great news. The customer satisfaction is consistently high—it is around 95 per cent—and the most common word people use in their verbatim feedback to us is 'easy'. So in relation to the role of this committee, and the quarantine, isolation and testing orders specifically, the customer services provided for in those orders include two services. One is allowing Service Victoria to issue exposure notifications on behalf of the Department of Health through the Service Victoria app. And the second service relates to allowing customers to display their rapid antigen test results through the Service Victoria app. So this means that those services are available for customers to use if and when they are needed to support the public health response to the pandemic. Thank you.

**The CHAIR**: So can you just give us a little bit of background on Service Victoria, when it was established? I anticipate there was not a thought that you would be involved in a pandemic when you were established—I think under legislation in 2018—so it was set up for a different purpose. Can you sort of give us a bit of a time line of when you became involved in services in relation to this pandemic?

**Ms de MORTON**: You are right: we were set up in 2018. The idea in our establishment was that we would be a customer service delivery agency, and so no matter which services needed customer interface we would be able to offer ways for customers to do those digitally in a way that was easy and convenient for them to do so. Most of our organisation are software engineers, so they develop digital systems, and we have taken a very modular approach to doing that. So with all of our services we think about what component parts can be developed and are re-usable so that there is consistency for the way that customers interact across all the different government services and of course so that there is efficiency for government—of designing and developing things once and re-using those assets for multiple purposes. Whether that is a payment gateway or whether it is plugging in a digital licence or whether it is online identity proofing or uploading documents, the way that our organisation thinks about those is abstracted in terms of the digital capability that is needed, and then we can plug and play those capabilities for any new government service that comes around. So you are right to say that at that time there was no idea that there would be a pandemic, but right from the outset our

purpose was to make sure that our capabilities are re-usable, no matter what type of government service comes along into the future.

**The CHAIR**: And so March 2020—were you engaged in any way at that time to think about what might be needed or how your service would be engaged in providing services during the pandemic?

**Ms de MORTON**: Yes. I am not sure exactly the month, but we started to get prepared for what were ways that we could make it easier for customers to do the things they needed to do in terms of the public health response. The first service that was available was the QR check-in service. There were also border permits and a range of other services from there. They were towards the tail end of 2020, and consistently new features and services were released throughout 2021.

**The CHAIR**: When was the app actually created, the Service Vic app—the first incorporation, I suppose, of one of these services related to the pandemic, whether it was the border checks or the QR coding? Because remember, early with the QR coding there were a whole range of private providers effectively, weren't there?

**Ms de MORTON**: Yes. November 2020 was when it was first used for the pandemic purposes—for the QR check-in.

The CHAIR: And for border purposes?

Ms de MORTON: I am pretty sure that was around the same period of time: November, December.

The CHAIR: So you needed a lead-in time to do the work with all those software engineers and get the processes up and going.

Ms de MORTON: Yes, that is right.

The CHAIR: Okay. I suppose the QR coding has probably been one of the biggest features in a way and on going. Can you talk us through how that process happened? Did you adopt software from elsewhere? Did you create something new within Service Victoria?

**Ms de MORTON**: Yes. The app that we had was already set up and established, so adding into that the ability to scan a code is common technology. We just needed to adopt those types of things that are used everywhere to scan QR codes and bring that feature into the app. There was very careful privacy design for where that data was going. We store very little and make sure that it is available to the contact tracers if it is needed in the event of a public health outbreak.

**The CHAIR**: So would most of the information gathered under the QR coding be going to the Department of Health or all of it?

Ms de MORTON: Only in the event of a contact-tracing need.

The CHAIR: Yes. Okay.

Ms de MORTON: But that was a period before these current orders came into effect, so they were not under these current orders.

**The CHAIR**: I am just trying to get a bit of background about how all this sort of played out, how it all started. We are now two years down the track and QR coding is still being used in a lot of settings but perhaps not as much as it obviously was when it was at its highest point during those earlier couple of years. So you are effectively gathering the information, and I am wondering then, when you get the information, what role and what steps you have in relation to protecting the privacy of that information as it is disseminated to whoever it is going to. Again, I am presuming it is the health department and nobody else.

**Ms de MORTON**: That is right. So the information—we have made sure we keep very little in the Service Victoria systems, so we collect the information of the customer and their contact details if they are needed. We collect a date and time stamp and a location ID, but that is a string of meaningless letters and numbers, so humans cannot make any sense of it. What happens then is the Department of Health's systems have the ability to unlock and access that if it is needed in the event of an outbreak. That is how we make sure there is nothing available in our systems that is useful in any way—that might be interesting to people—and that only the contact tracers have the keys to unlock the information needed, if they access that in the event that it is needed.

**The CHAIR**: Right. Okay, look, I have asked a lot of sort of basic, simple questions. I am happy to move on, because there might be some more of those sorts of questions just to understand how your system works and how you interact with government. Perhaps, Georgie, I will move on to you.

Ms CROZIER: Thank you very much, Chair. Thank you very much, Ms de Morton, for being here. You mentioned the privacy design. I am interested in if there have been any attempts of data breach in the system.

Ms de MORTON: Not data breach, no.

Ms CROZIER: Cyber attacks?

Ms de MORTON: No.

Ms CROZIER: So you have had no breaches or any cyber attacks that have come into the system?

Ms de MORTON: No.

Ms CROZIER: Okay. You mentioned sharing of data, I think, or you said that there was information for customers and that you applied various apps. Is there information shared with various agencies?

**Ms de MORTON**: No. The information stays in the Service Victoria system. There is one connection to that system that is only through Department of Health, so only Department of Health can access that secure connection that would decrypt the information for their contact tracers.

Ms CROZIER: Right. But nobody has requested from you information in relation to the QR code information?

Ms de MORTON: We have had a couple of requests, less than half a dozen.

Ms CROZIER: Who were those requests from?

**Ms de MORTON**: I have not got that to hand at the moment. My staff have a look at those. We have an information-sharing agreement with Department of Health and the Department of Premier and Cabinet, where Department of Health are the custodians of that data, and so we refer those straight to them. It would only be in the event that we would have to grant one of those that it would get escalated to me.

Ms CROZIER: Okay, but if we could have the list of those six-

Ms de MORTON: There is not quite six, but yes, a couple.

**Ms CROZIER**: Just provide that to the committee. Thank you. Could I go back—you said that the QR code was developed, I think in answer to the Chair's question, some months after that, in March 2020. Could we also have that information—when you started to develop that?

Ms de MORTON: Yes, it was ready in November 2020.

Ms CROZIER: November 2020—the QR code. There were lots of problems with the QR codes and contact tracing, especially through lockdown 2. So you were not in a position then, through that—until November 2020 you were not providing any information through your Service Victoria portals or any apps.

#### Ms de MORTON: No.

Ms CROZIER: No. In 2021, again there were massive issues with ability for contact tracing. Could you just explain to us that information sharing, how it worked with the QR codes and with the contact tracers?

**Ms de MORTON**: The information when a customer checks in around the contact name they have provided and the contact number and the location ID and the time stamp come in to Service Victoria. They are stored there for 28 days. If they are needed in the event of contact tracing, the contact tracers on the Health side access that secure connection and retrieve the data from the location and the time stamp that they have on their side. That is the only way that that data can get accessed, and after 28 days it is destroyed. Ms CROZIER: Right. So was there any issue with that information through people putting in the wrong telephone numbers in their system and QR coding? Were you aware of any of that?

Ms de MORTON: No. I was not aware of any of that.

**Ms CROZIER**: Okay. I know Ms Kealy wants to ask about some issues on the border permits that you mentioned. Can I ask about the issue around the proof-of-vaccination certificates and what you were doing with the commonwealth? Obviously when we uploaded that, what input did Service Victoria have with the commonwealth to provide that information through what you are doing at Service Victoria?

**Ms de MORTON**: We participated in technical design workshops with Services Australia and Service New South Wales around the way that the commonwealth would create access to those records. The solution architects worked together on how to create those access points and design them and then do the technical work to connect the systems.

Ms CROZIER: What about in the instance of false certificates being made available on the internet? How have you dealt with that?

**Ms de MORTON**: That is not a matter for Service Victoria. What we have made sure of is that the certificates that appear in our app have a secure connection to the commonwealth system, and there is a secure token that gets exchanged to make sure that the certificate in the app has only come from the commonwealth's system. That was the extent of our role in providing that.

Ms CROZIER: And are you aware of any attempts of data breaches or cyber attacks on-

Ms de MORTON: No attempts.

Ms CROZIER: No attempts whatsoever. Okay. All right, I might leave it there for the minute, Chair, and I will come back with some more questions, if I may.

**The CHAIR**: Sure. Just as a follow-up to that information sharing, you will remember there was quite a bit of publicity around the risk of information being shared with Victoria Police and some media around that. I am just wondering how many inquiries you may have had from Victoria Police and what the process was for them to approach you, if it was you, for any information. Can you tell us a bit about that?

**Ms de MORTON**: It is the same as the answer I gave before. So within those couple of requests—I will find out who specifically they were from, but we have got an information sharing agreement with the Department of Health and Department of Premier and Cabinet where health are the custodians of that data, not Service Victoria. So any request we did get we would refer directly to the Department of Health for them to assess.

The CHAIR: Right. Okay, then, thanks very much. We might now go to Josh Bull. Josh, are you there?

**Mr J BULL**: Thanks very much, Chair. And, Jo, thank you for being here this morning with the committee and for your time. Please, if you could on our behalf pass our thanks to all of the staff at Service Victoria, who we know have worked incredibly hard through this very tough and challenging time.

#### Ms de MORTON: Thank you.

**Mr J BULL**: I wanted to ask a couple of questions if I could. I could not help but notice on the weekend, watching Lance Franklin kick his 1000th goal, the amount of iPhones that were actually present on the ground during that amazing achievement. It did lead me to having some thoughts around provisions for those without iPhones within our community, and what I am particularly interested in is what input Service Victoria had in planning for and developing support for those within our community that do not have access to a mobile phone so that they could of course comply with the orders.

**Ms de MORTON**: With the exposure notifications, Service Victoria is just one service delivery channel and the official channel for those is through Department of Health, so that would be a manner to direct to them. Service Victoria is a supplementary channel. And similarly for the rapid antigen tests—the idea was that it is a way that could be more convenient to carry those around, but actually your test is the physical test that you have to have with you first before you can take a photo of it for the app, so in both of those we are a supplementary channel.

**Mr J BULL**: Sure. Thank you. So for Victorians and their ability to link vaccine certificates to their Service Vic app, what we know of course is the request needs to be made—and an approval—for the sharing of that information from the commonwealth Services Australia app. Can you just run through for the committee how that process works internally and what that looks like in a practical sense?

Ms de MORTON: Can you just clarify whether you meant the process to get agreement from the commonwealth or whether you meant the technical process, when the customer downloads their certificate?

Mr J BULL: I am interested in both, actually.

**Ms de MORTON**: Okay. On the former, around the agreement, that is something that DPC was the lead negotiator on. In terms then of the technical process to get the certificate into the app, customers log into their Medicare app or go onto MyGov on the website, whichever they choose. When they use that app they can view their vaccination certificate, and under the 'view' button there is a button they can press—I have forgotten the exact words on it now, but it says something like 'share with state app' or something like that. When they click that button that sends the permission to our app, and when they open up our app it will automatically receive the information passed through from the commonwealth system. That was that secure sharing exchange that I talked about earlier.

**Mr J BULL**: Excellent. In that process were there many instances of delays from the Medicare or the commonwealth side of the pairing of the two, or can we say that broadly it was quite seamless?

Ms de MORTON: I would say it was broadly quite seamless. I think we had about a million of them in the first week alone, so it worked quite well.

**Mr J BULL**: Excellent. Thanks, Chair. And again, Jo, thank you to you and your team for all of the work that has been done through this really tough and challenging time.

Ms de MORTON: Thanks.

**The CHAIR**: So just as a follow-up there, on that issue of people who had smartphones and people who did not, are you saying that was not an issue for you, that was a department issue? You were just collecting what people could put on the phones that they had and making that available to the Department of Health.

Ms de MORTON: In relation to these orders and the exposure notifications, that is correct.

The CHAIR: I am just thinking I had people coming into my office—elderly people—without a phone or, you know, the usual digital access wondering how they were going to have a certificate or be able to get into a restaurant or do any number of things. So you are saying that was not a Service Victoria issue, that was something that would be taken up with the department in terms of the level of proof or the like?

**Ms de MORTON**: So now that question is relating to vaccination certificates, which is a different service. In relation to vaccination certificates the evidence requirements of what constitutes proof of vaccination is a policy matter for the Department of Health. On the ways that you then can show that proof, we certainly made sure that there were analog ways to do that. You can contact Services Australia and ask them to print out a copy of your vaccination certificate for you, you can get it from your Medicare app or your MyGov app if you did not want to use Service Victoria, you can put it into your Apple Wallet or you can use Service Victoria, so that is what I mean when I say we are a complementary channel in those circumstances.

The CHAIR: Right. Okay. Thank you. We will move to Emma Kealy.

**Ms KEALY**: Thank you very much. Thanks so much for your time today and for coming in and answering our questions. I firstly just wanted to talk about how Service Vic came into being, particularly around the border permits. It is my understanding that it probably launched at the same time the border permits came online. Is that correct?

Ms de MORTON: Service Victoria was?

Ms KEALY: Yes. The app.

Ms de MORTON: No, we started in 2018 and the border permits came in in November 2020.

**Ms KEALY**: Yes, that is right. I am really wanting to learn about the time line of the development of the border permit app in terms of: when was Service Vic first asked to develop a portal, a channel, for the application of online border permits?

**Ms de MORTON**: Usually with services like that there is a period of time where things are being discussed around 'Would this be helpful, or wouldn't this be helpful? Would it be convenient for people? Is it the right way to deliver those services?'. I am not sure exactly when those conversations started—

Ms KEALY: And who were those conversations with?

**Ms de MORTON**: They would have been with Department of Health. And so then as it firmed up that they would like Service Victoria to offer those services, then it moves into specifically what are the requirements that need to be satisfied in order for people to be able to cross the border. Again, working through those requirements, that is all a matter for Department of Health and working with them. And then ultimately the step where Service Victoria actually builds and codes something is right at the end of that process. I am not sure how long that took us, but it was—

Ms KEALY: Can you estimate, please?

Ms de MORTON: Like a month maybe.

Ms KEALY: So it was, say, a few weeks or a month for the requirement, discussion and the scoping of what needed to be there—

**Ms de MORTON**: No. That is the bit that takes some time, the policy development work, but it was a few weeks to a month in terms of the software coders actually coding that.

**Ms KEALY**: The coding. Yes. Okay, so you had basically a month's notice to that date of November 2020 that the border permits were something your team was working on.

Ms de MORTON: To code it. In terms of how long were the conversations going on, I do not know, I am sorry.

**Ms KEALY**: Yes, but it was a month lead-up where you were actually physically working and coding to develop an online border permit channel. It was a very short time frame when that border was closed with South Australia in particular. My electorate is in the far west of the state and my region was heavily impacted by that. The Premier announced that the border would be closed and the community was told they would need a permit by midnight, but there was no ability to apply for a permit online by midnight. Can you give an explanation over when did you first hear from either the Department of Premier and Cabinet or the Department of Health that for the border permit system you had a hard deadline, that it needed to be turned on by that midnight, otherwise other people would not be able to get a permit to enter Victoria?

**Ms de MORTON**: The way we know when to turn on the border permit system is the Department of Health writing the directions that give authorisation for when they come into effect. There were so many changes in border permit directions, as you know, over that period. Some of them had more notice and others had less in terms of the urgency of the changes, so in relation to the first ones that you are talking about I think I have been answering a bit generally around usually how it works. I do not have the specifics, I am sorry, about the very first introduction of them with me here.

**Ms KEALY**: Can you provide those, particularly the time line, on notice? I am very interested to know when you were first notified that you would have a deadline, that you would have to have a border permit system available online, and any feedback that you provided back to the Department of Premier and Cabinet or the Department of Health to say, 'We're not going to meet that deadline'. Because in some instances the deadline was not met by not just a few minutes but by many, many hours. I would like to know, I guess, what feedback did you provide at any time, or do you have any recollections of conversations that you had with the Department of Premier and Cabinet or the Department of Premier and Cabinet or the Department of Health or ministers in particular that you would not be able to meet the deadline that had been set down publicly through the daily media releases but also through the directions.

Ms de MORTON: Yes, I can get you that information.

Ms KEALY: So did you provide that feedback?

**Ms de MORTON**: I think at all times everybody working on pandemic response knew that things were urgent and time was of the essence. Certainly I do not think I would say there was any time that the developers in Service Victoria felt comfortable that they had plenty of time. There was always urgency. In terms of 'Can the deadline be met?', I mean, I think they met pretty much—

Ms CROZIER: No, they didn't. They couldn't get a permit.

Ms de MORTON: Pardon?

Ms CROZIER: People couldn't get a permit.

Ms de MORTON: Are you saying on the first day they launched?

**Ms KEALY**: On a number of different occasions they were unable to get a permit, but particularly on the first day that it launched. The community was told, 'You will need a permit by midnight tonight to enter Victoria', and the permit system was not available—

Ms de MORTON: At midnight?

Ms KEALY: for hours.

Ms de MORTON: I-

The CHAIR: You can take that on notice, if need be.

Ms de MORTON: Yes, I am sorry.

**The CHAIR**: I think it is just having a sense of what the chronology was in relation to that, because you will remember there were a lot of border directions and orders made, and some very quickly.

**Ms de MORTON**: I just do not think it is correct that there were not available at—11.59 is when the directions normally come into effect.

**Ms KEALY**: Can I just go back? I have got some dates if you would like to go back to that and provide more information. I will just quote this, so 12 January 2021:

... Police Minister-

Lisa Neville-

... apologised to thousands of interstate travellers who struggled to apply for a permit to enter the state last night after technical issues caused a delay ...

Despite the permit system commencing at 6.00 pm on 11 January, it was not until around 9.00 pm that the Service Victoria application patch was available.

 $\dots$  last night was terrible and apologies to everyone who was frustrated, held up  $\dots$ 

And:

'There were technical issues of trying to get this set up properly, with Services Victoria working through some of the glitches to make sure it was working properly before it went online ...

Ms SHING: Sorry, Chair, can I just please raise a point of order?

Ms KEALY: That is 3 hours where it was not available.

The CHAIR: Just a moment please, Emma. Yes, Ms Shing.

Ms SHING: Yes. Thank you. Good morning, everyone. I am just mindful that these terms of reference for the committee require us to look at circumstances that were in place and orders that were in place from

December, at which point the border permit system was not in fact in place in the terms that are set out by Ms Kealy's inquiries. And this is where I would ask for some guidance perhaps from the Chair as to how this is relevant to the terms of reference and to Service Vic's remit as far as coming here to provide evidence and material from December onwards.

The CHAIR: Did you want to speak to that?

Ms KEALY: On the point of order, this has been a wideranging debate that we have spoken to, and through the presentation given to us by Ms de Morton—and the Chair—we have had reference to development, launch of the Service Vic app in November 2020, the specific reference to border permits which still may or may not be available at any point in time. Having an understanding of the processes and the relationship between Service Vic when they are developing apps, communicating with the department when there may be delays or glitches—as has been quoted by the minister—is very, very important in terms of understanding what will happen going forward as well. Because we know the borders could be closed at any particular time. It is still relevant today.

**Ms SHING**: Just further to that point of order, if I may, speculation as to what may or may not happen from here again serves little purpose in terms of discussion of the period from December 2021 to the orders as they apply now. Again, I just want to get a sense of the utility of in fact asking about matters in 2020–21, where in fact the terms of reference that we have here for this inquiry are to examine matters from the end of 2021 to now, when those border restrictions and that permit system are not in place.

**The CHAIR**: Look, my view of it as the Chair is that it is relevant to be looking at a time line. We are here to try and establish the role that Service Victoria played during the pandemic and play now—their capability, their interaction with government, the use of information. The privacy issue is probably the most important issue that we are actually wanting to look into on the advice that we have and looking at the orders as they stand at the moment, and clearly in the past that applies too. I think Ms Kealy is looking at a time line in a comparative way. I mean, she is thinking obviously of what might happen in the future, and I think we all know that that is a real risk. But in terms of orders at the moment and our role, I think to successfully do it we do have to look to some extent at the history of your role in the process. And so I am inclined to think that looking at the successes, the time lines and the like are relevant. So that is my ruling. But trying to keep it within the confines of the issues of your role—privacy, what you were able to provide to government. Your role is much less political. It was very much a case of a lot of engineers setting up capability for government.

Ms KEALY: So going back to the question, if you can provide an explanation of the briefings that you gave the department, and can I get some specifics? So who do you speak to if there are—if you are working through developing of the coding, if there may be delays, as we have spoken to, who do you speak to?

Ms de MORTON: Thank you. Towards the end you clarified what the issue was. Sorry, I was a bit on the backfoot, not really agreeing with the question.

#### Ms KEALY: Yes.

**Ms de MORTON**: So you are actually talking about a period of time in January, is what you quoted, which is not when the border permits went live. As far as I understand, I think we were ready at 11.59 on the date that they first went live back in November.

Ms CROZIER: November 2020.

Ms KEALY: I think it was late.

#### Ms de MORTON: November 2020.

**Ms KEALY**: 21 November. So they were to come in at midnight on 20 November is my understanding. Certainly there was a delay. I cannot remember the exact time; I have not got it at my fingertips. But certainly I have got reference that on 21 November 2020 there were permits that were then available online after a lengthy delay. So if you have further information regarding the time frames—

**Ms de MORTON**: We will have a look at that one. The January period you are talking about was something different, and that was when the border permit system was changed quite significantly to introduce the coloured zones: red zone, orange zone, green zone. What happens when you develop computer software is

you go through lengthy testing processes, you get it ready to go, but then as you are deploying things can go wrong in the deployment. Unfortunately that was one of the occasions where something went wrong in the deployment. So it took us a couple of hours to fix the issue that we had with that and get that back online. I and all my staff apologise for that issue, but that was a case where there can be problems in a software release.

Ms KEALY: So with those issues, again, who do you speak to or who do you engage with in the department?

**Ms de MORTON**: So at that point in time I am not, but what my staff are doing is communicating with all the stakeholders around, so they are making sure that Health know that there is an issue and the deployment is not ready, they are making sure Department of Premier and Cabinet know that there is an issue and the deployment is not ready, and so those messages are getting out. What we are focused on internally is fixing the problem and making sure that we can recover that service as quickly as we possibly can.

**Ms KEALY**: Did you have to provide a briefing to the Department of Health or the Department of Premier and Cabinet as an explanation of what went wrong in that instance or when the software was first launched on 20 November 2020?

Ms de MORTON: We were providing the feedback to them in real time about what the issues were that we were having.

**Ms KEALY**: But did you have to do that? You said your staff would do it; you said you were not actually doing it. Have you ever provided a briefing to the Department of Premier and Cabinet or the Department of Health or the ministers around the problems there have been with some of the rollouts?

**Ms de MORTON**: Have I provided a briefing? No, I do not think so. No. I think there was a conversation at the time about what the issue was, and it was a very technical issue in the software release.

The CHAIR: Thank you. Your 10 minutes are up, Ms Kealy. Moving on to Ms Shing, thank you.

**Ms SHING**: Thanks very much, Chair. Thanks, Jo, for appearing today, and thank you to everyone at SV and DV for the work that has been done in relation to pandemic response and also making sure that technology has been able to continuously improve and to troubleshoot as the needs of the public health response have evolved over time. I would like to firstly ask you who you report to.

Ms de MORTON: I report to the Minister for Government Services.

Ms SHING: And who is your immediate report within the department?

Ms de MORTON: I do not report to but my contacts within the departments are Jeremi Moule and Michael McNamara.

**Ms SHING**: All right. So Michael McNamara and Jeremi Moule, being the CEO and secretary of DV and the Department of Premier and Cabinet respectively, would be part of regular conversations with you in relation to the rollout of these matters. Is that correct?

Ms de MORTON: That is correct.

Ms SHING: So would you be in the process of updating them on a regular basis about the way in which operational matters were being rolled out and the way in which troubleshooting had occurred?

**Ms de MORTON**: Yes. Me personally—at a time when we have an issue like that, my responsibility is to restore that service and make sure that the organisation is doing everything they can to get that service back into production, and I have staff who work for me whose job it is to make sure that all those stakeholders are informed about what the technical issue is and how we are progressing with it.

**Ms SHING**: Great. So you are not technically in the trenches of operational troubleshooting and problem-solving so much as leading the organisational response and reporting to the CEO and to the secretary of DPC?

**Ms de MORTON**: I am making sure that all of the organisation's resources are deployed where they need to be deployed to get that problem fixed, yes.

Ms SHING: And that is part of your regular engagement with DPC and DV?

Ms de MORTON: That is correct.

**Ms SHING**: Excellent. Thank you very much for clarifying that you have not in fact been the one providing that granular operational response as far as that troubleshooting is concerned. That is a really important distinction to make around your role and your work spearheading that ongoing discussion within DPC and then more broadly across the public service and ministerial responsibilities.

I would like to take you to your letter, please, of 23 March to the Chair of this particular committee. You have explored in some detail the relevance of this particular committee's terms of reference to the way in which SV has been involved—or indeed not—in the development or implementation of policy settings. Can I ask you to perhaps just put that on the record so that we have an understanding, a really clear understanding, of what it is that SV has done beyond the gathering, retention, treatment and release of data, which you addressed in answers earlier to Mr Bull? So just talk us through that letter and give us a sense of where and how SV's work sits in the overall terms of reference for the committee if you could, please, Jo.

**Ms de MORTON**: Service Victoria is a customer service delivery agency, and primarily we develop and deliver digital services. So we are an organisation that provides software engineering capability for government. We implement the policy directions that come from the policy departments—primarily in this case Department of Health—and our job is to make those digital services available if and when Department of Health determines that they are necessary in the public health response.

**Ms SHING**: And that would be part of the work that you have done, hand in glove, with challenges to the release of information? There were questions raised in earlier commentary around court challenges seeking access to information via the contact-tracing app and that data as gathered for use for other purposes. Were you involved in any of the decision-making around seeking to challenge those outcomes and to take those matters, all of which were successful, by way of challenge to the courts?

**Ms de MORTON**: No. As I said earlier, there is an information-sharing agreement which makes Department of Health the custodian of that data, and all such matters we would refer to Department of Health as custodian of the data.

**Ms SHING**: Great. Thank you for clearing that up. I would like to again have an understanding of the work that you have done in comparison to other jurisdictions, noting the upload and synthesis of vaccination data and the certificates being translated through to the COVIDSafe app. To my mind I think we tracked well ahead of New South Wales, and we did have some challenges associated with engaging with the commonwealth on matters associated with the way in which those sources of information could be gathered and indeed made available in a uniform fashion. Can you tell us how we actually worked through that in comparison to where other states sit, and the jurisdiction of the federal government as well, please?

**Ms de MORTON**: There was collaboration across all the jurisdictions, particularly as there needed to be with the commonwealth because we have to make sure that our system can connect with theirs. In terms of the way that you design those connections, our architects were right in the middle of those conversations to make sure that the connections were suitable, secure and would cope with the volumes that possibly were going to come.

Certainly I think the design in Victoria was a simple design that was very robust and that worked. I think in New South Wales they have different systems, and it was much more complicated for them. Certainly we had discussions about how they might think about solving their design as well, and so ultimately that meant that for Victoria we were very, very well positioned and that our service was live and ready ahead of other jurisdictions.

**Ms SHING**: So is it fair to say it was not a perfect process by any estimation but that in this particular area around the platform's capability and scope we were well placed to assist other states and other jurisdictions?

Ms de MORTON: Victoria certainly was. On the commonwealth side, they had systems that were not intended initially for that purpose. There was a lot of work for them to do to make them more robust and

scalable. So working very carefully with them to make sure that they would be suitable at the time the service went live was really important to us, and I think you can see that we got a good outcome for doing that work.

**Ms SHING**: So understanding the way in which different jurisdictions fit together, is it a fair summary to say that where you have different jurisdictions across a border and you need those systems to talk to each other, it requires a collaboration that is based not only in decision-making and policy but also in making the technology capable of scaling up, of working in an iterative way to exchange information and also storing it within policy and privacy frameworks?

**Ms de MORTON**: Absolutely; and the technical solution design is critical in that respect. It is shaped by the types of systems on either side that need to talk and interact with each other. How those systems are built and what the options are for building up those connections—you cannot do that unilaterally.

Ms SHING: So how would you say the continuous improvement model has worked to make sure that you are able to get better over time learning what you have learned throughout the last couple of years, not just within Victoria but with other states?

**Ms de MORTON**: Right from the outset Service Victoria was careful to build our technology in a way that was modular and with component parts that could be easily re-used. What that means is that as we discover and learn things in a component it is very easy to upgrade that particular part and then every service that uses that component benefits from that upgrade.

Ms SHING: So would you say then that as a result we are better placed to manage the challenges associated with what might arise around the complexity of pandemic and public health responses into the future?

**Ms de MORTON**: Certainly that was the aim. As we were creating these modular components we made sure that we were creating an asset that was re-usable for the state in the future—to be able to be combined in whatever way was necessary for the rapidly changing context of the pandemic.

The CHAIR: And that was your final question.

Ms SHING: Thanks, Chair.

The CHAIR: Moving now to Mr Wells.

**Mr WELLS**: Thank you, and thanks for your time. First question on notice: since December, can you provide the committee with the dates that you have met or communicated with the Minister for Government Services, who you report through to, and provide the briefing notes for the committee?

Ms CROZIER: We are just trying to understand who you are meeting with.

The CHAIR: Yes. Well, is that something you can do?

Ms de MORTON: I am hoping Mr Wells might be a bit more specific on the particular topics that the question relates to.

**Mr WELLS**: Okay. Obviously you have provided information and briefing notes to the Minister for Government Services since these pandemic orders have been in place. I am just wondering if we could get the dates where you have met or communicated with the minister along with those briefing notes.

Ms CROZIER: Is that a yes?

Ms de MORTON: In relation to the pandemic orders and the topic of the orders, yes.

Mr WELLS: We can get those copies?

Ms de MORTON: Well, I will take on notice to provide-

The CHAIR: Provided to the committee.

Mr WELLS: Yes. Provided to the committee.

Ms de MORTON: I will take your question on notice.

Mr WELLS: Yes, and obviously any information in regard to the QR codes.

Ms de MORTON: Well, that is a very broad—

**The CHAIR**: There are obviously privacy issues around that, but I think what Mr Wells is looking for is your interaction with government and the responsible minister throughout the period of the development of the app and since, and of course specifically in relation to this order that we are looking at today.

Ms de MORTON: Specifically in relation to the orders—I will take that on notice, yes.

The CHAIR: This order.

Ms de MORTON: This order.

**Mr WELLS**: This order, yes. Thanks. Can I just pick up on a couple of questions that have already been asked so I can get clarity around this, and it has been mentioned a couple of times. In regard to outside bodies wanting the information that has been provided to Service Victoria through the QR codes, it is my understanding that the application is made but then you hand it to the Department of Health for them to make a ruling one way or the other.

**Ms de MORTON**: Yes, if we received a request of some kind, we would refer that request to the Department of Health.

**Mr WELLS**: And then do you get to know what the result was? I mean, for example, the information that you pass on to the Department of Health, does the Department of Health let you know through the proper channels that that information has been released to the police or some other body?

**Ms de MORTON**: It is a slightly different process. We pass the request on to the Department of Health to assess. If information is required, then they would come back to us for that, and they have not come back to us.

**Mr WELLS**: Is there a set time frame? Understanding that there have been no requests, but in the orders is there a set time frame that they have to do the assessment and get back to you about what decision has been made? Is that set out in some memorandum of understanding?

Ms de MORTON: I think the information-sharing agreement does talk to time frames, but I am sorry I do not have that detail with me right here.

Mr WELLS: Can we get that for the committee, please? Can that be provided to the committee?

Ms de MORTON: I can find the time frames for the committee, yes.

**Mr WELLS**: All right. Thanks. Just moving on, could we also maybe have a copy of the MOU of what the information-sharing arrangements are? Can we get a copy of that MOU?

**The CHAIR**: Look, I think that is allowed to the committee. That is my understanding. I am sure you will get advice on it anyway.

Ms de MORTON: I will take that on notice. Thank you.

**Mr WELLS**: All right. Thanks. Just moving on to different topics. Does Service Victoria have to purchase the QR code, and is there an ongoing cost of using the QR code?

**Ms de MORTON**: Service Victoria developed that software and so all of the costs are within Service Victoria's internal staffing. The ongoing cost to deliver—there are marginal costs for things like Amazon Web Services access and software licensing costs.

**Mr WELLS**: When you purchased the QR code system, was there a cost to Service Victoria? I understand that you developed your own system, but the use of the QR code—do you have a cost for the licensing fees for that QR code?

Ms de MORTON: We did not need to purchase the code for that; we wrote the code for that.

**Mr WELLS**: Okay. All right. Thanks. When it comes to people registering for a RAT and they are positive, are there any tests being done by Service Victoria or maybe through the Department of Health as to how that compares to the actual numbers of people who may be positive in the community?

Ms de MORTON: We provide the customer services and the digital services. That is not a question I can answer.

**Mr WELLS**: Sure. That is fine. Just to clarify one other point, was it right that you said that Service Victoria keeps the data for 26 days? Is that correct?

Ms de MORTON: Twenty-eight.

Mr WELLS: Twenty-eight days.

Ms de MORTON: That is correct.

Mr WELLS: And then after that?

Ms de MORTON: The data has gone from the database. It overwrites with the fresh data. It is deleted.

Mr WELLS: All right. Thank you. Those are all the questions I have.

The CHAIR: Thank you, Mr Wells. And now, Ms Ward.

**Ms WARD**: Thank you. Apologies for being late. Sorry. Sometimes kids are a challenge to wrangle, especially when they are teenagers and it is athletics day. I am sure this has already been said before, but thank you for all of the work that you have done. Being able to use the app and the ease with which we can check in and do the rest of it is terrific, and I feel for many businesses it has given them the opportunity to pause as people come in and really given them a tool to help manage the safety of their own workplace, which I think is incredibly important to them. So thank you for all the work that you have done and for the work that has to all intents and purposes helped keep us safe or safer or as safe as we can be. So with that reference to businesses, in developing the app and the work that you did—and apologies if I am asking questions that have already been canvassed because I was late, so feel free to say, 'I've already answered that' and move on—in terms of usability and how people interact with the app and the interface, was there much discussion with businesses around the best way to use this or how it could work for them and any changes that were made to the app or feedback that was taken on board that helped you develop it or adapt it?

Ms de MORTON: In relation to the services under these orders, the exposure notifications and the negative RATs?

#### Ms WARD: Yes.

**Ms de MORTON**: So for the exposure notifications it does not really enliven the role of businesses at all. It is direct from a Department of Health location to the customer who might have been there. So with that one, no. With the negative RAT, that is not yet live, so we are not up to that point yet—so not yet.

**Ms WARD**: Okay. Yes. Great, thank you. There has been discussion about the data and how that all works. So as you check in, it then goes into a spreadsheet, and then it is deleted after 28 days—like it just is a continuing rolling out?

Ms de MORTON: A database, yes. The 29th day overwrites.

**Ms WARD**: Yes. So what is the process for working out whether or not there is a mass exposure site? There is a collation of sites—how does that process work?

Ms de MORTON: That is a question you will have to send to the Department of Health. What they do is once they have worked out a site, however that happens, they access the secure connection and retrieve the information that relates to that site. So it is all done remotely from the Department of Health.

**Ms WARD**: Yes, okay. Look, I think I am actually quite fine with questions, because I think, from what I have heard when I have come in, we seem to be going over a bit of the common ground. Like, there is a bit of overlap, so I will not keep asking you the same questions. Thank you.

The CHAIR: So we will go to Mr Erdogan.

**Mr ERDOGAN**: Thank you very much for that. Thank you, Ms de Morton, for being here today, and to Service Victoria for your work throughout the pandemic. We have talked about the uses of the Service Victoria app. Obviously the main uses that are quite common are the vaccination certificate and checking in at different locations. Can you give us some of the examples or some other examples of other ways that the app is used—for example, prompts to get vaccinated?

**Ms de MORTON**: So when you open the Service Victoria app what you see on the front page at the top are what we call promotional tiles. So whatever the thing is that customers are most likely to want to interact with that day gets the prominent tile. So, for example, when the sick pay guarantee was launched, that would be the tile for that day. And then at other times—you are right—prompts for third doses might be there or where to get tested might be there or reporting a positive RAT might be there. So those are the tiles that rotate through the top. The section then below that is quite static. It is the information architecture or the categories of information. One of those categories is coronavirus, and you can click on that and find links to relevant services from there.

**Mr ERDOGAN**: I realise there was a question earlier from Mr Wells about the app. So the intellectual property for this app is actually owned by Service Victoria. So you own the actual app?

Ms de MORTON: That is correct. Yes.

**Mr ERDOGAN**: Yes. I just wanted to clarify that. I guess Service Victoria links to an online form for the self-reporting of positive RATs. Can you take us through the implementation of that system and how it currently runs?

**Ms de MORTON**: That is all a matter for the Department of Health. The form for that is owned by them. What our app does is make it easy for people to find and access that by putting the tile there, and the tile takes them directly to there. What we find is that many people now are becoming familiar with clicking the orange app button to help them navigate government services. It is a quicker and more direct pathway often than, say, a Google pathway. So all we do is provide a link to the Department of Health in that respect.

**Mr ERDOGAN**: Excellent. Many of the questions I was going to ask have already been asked, as you can tell. I think it has been great to have you here today, because obviously you have expanded on some of the issues or the role that Service Victoria has played in terms of the actual delivery of that information and the essential resources in combating the pandemic. So thank you for being here. I do not think there is a need to extend your appearance, but I will leave that to the Chair. Thank you.

Ms de MORTON: Thank you.

**The CHAIR**: Thanks. Ms Crozier, you had a few minutes left in your questioning and would like a few more questions.

Ms CROZIER: Thank you, Chair. Thank you, Ms de Morton. I am just wondering: for January, February and March of this year, what is the comparison of QR code check-ins?

Ms de MORTON: Numbers of them?

Ms CROZIER: Yes.

Ms de MORTON: The official numbers come from the Department of Health, not Service Victoria.

Ms CROZIER: But you would obviously have that, wouldn't you?

**Ms de MORTON**: Yes. As an indication they are declining because the amount of places that you need to check in are now less than they were before. So as a general trend it follows the policy settings from Department of Health. For the specific detailed numbers all requests need to go through Department of Health.

Ms CROZIER: So, what numbers have you been told? What is the decline or percentage?

Ms de MORTON: I do not have that information here at the moment.

Ms CROZIER: Would you be able to provide that to the committee just for the-

Ms de MORTON: Department of Health would be able to provide it to the committee.

Ms CROZIER: But you have just said that you have that information—you have the discussions with them, you know that it is declining.

Ms de MORTON: As a general trend, because the number of locations where you need to check in is reduced now—

Ms CROZIER: So how many locations need check-ins then?

Ms de MORTON: It is the type of locations that need check-ins. Again, they are the policy settings of Department of Health.

Ms CROZIER: How many?

**The CHAIR**: I think she has been very clear that they do not hold that information, that we need to be looking to Health to get the detail of that.

Ms CROZIER: I understand that, but there are conversations being had with Department of Health. She has just said that they have had that.

Ms WARD: Just to try and help, maybe it is around the changing orders and what is the percentage of decline in terms of businesses that no longer need to be checked in compared to the check-ins.

Ms de MORTON: Again, that is not our information. That is Department of Health.

**Ms CROZIER**: But if I could just say, in the initial conversation when I first asked the question you said it was declining, and I said, 'You had those conversations with the department', and you said yes—

Ms de MORTON: We see general trends in app usage, not the official numbers.

Ms CROZIER: Could we have a copy of those trends that you have? Could the committee have a copy of what you have just said, that you receive—

Ms de MORTON: We see general trends in our analytics system. It is not a document, so-

Ms CROZIER: Okay, just those trends, if the committee could have a look at that.

Ms de MORTON: Again, I can pull the report out of a general Google Analytics system, but they are not the official numbers in the system of record and so any official numbers that come will need to come from the Department of Health.

Ms KEALY: Google Analytics would be great.

**Ms CROZIER**: Exactly. I think obviously with the data you have, you have the technology where people are putting their information in, therefore that would be very appreciated by the committee. What the department have is something else. I can go to them, but I am interested in what you have got over the last three months.

**Ms de MORTON**: Accessing what is in the systems is Department of Health reporting on those numbers. We see broad web trends in our analytics system. I will have to run a report on the trends—

Ms CROZIER: If we could have those trends, that would be great. Thank you.

**The CHAIR**: Look, I am not sure that the committee would be asking someone to create documents that do not exist when they exist somewhere else and we can get them from somewhere else. I think what we are seeing today is that there is another line of questioning that might need to be followed—

Ms WARD: But there also needs to be context with your analytics, which would mean that in order for that comparative data to really be properly examined you would need to understand the decline of need in terms of requirement for check-in along with the actual check-in trends. It becomes useless data if we do not have that comparative data.

**The CHAIR**: And I think we have used the questions on notice directly to the department at times, and there is probably no reason that we could not.

**Ms CROZIER**: Well, we will put those, but I still fail to understand. Surely if Service Victoria is here with the committee to provide us information about what is going on with QR codes and they have got discussions going on with various departments, DPC and Department of Health, surely they have conversations about what the trends are. Is that right?

**The CHAIR**: The question you asked her was could she create a document that gave you some answers. The question I think is that you do not have such documentation, but the department do have material that would arise out of the analytics that you somehow have—is that right?

**Ms de MORTON**: I think there is a big difference between broadbrush web analytics trends and system of record official numbers. It is Department of Health that have the system of record official numbers, and they also have the context then about the changing policy settings that go with those numbers. Our monitoring is about 'Is our software working as it needs to be?'.

**Ms CROZIER**: So do you have any discussions? Because there were multiple issues when you set up in the outset. We know that. There were multiple failures, and you said you were looking at different technology. New South Wales were way ahead of Victoria in having a QR code. Again I go to the point: there must be discussion between the various departments that you are responsible for or answer to, DPC and Department of Health, so that they understand what you can do and therefore they understand the numbers that are coming through and how your software and the data that is then collected is accurate. Surely you have those conversations.

Ms WARD: Can I just intervene? Can I just ask-

Ms Crozier interjected.

Ms WARD: But there is badgering going on.

The CHAIR: Well, I think this is the final question. Let us just get an answer to that question.

**Ms de MORTON**: That has conflated quite a lot of things there, so I am not sure. The assertion that there were issues in the beginning with our software, can you elaborate on that? Because I do not think that there were.

Ms CROZIER: It is well reported and documented.

Ms de MORTON: What is?

Ms CROZIER: Well reported and documented about the failures in the QR codes.

**The CHAIR**: I think it is unreasonable to put a statement to her without some evidence of that. Ms Kealy read something out. That was a bit of evidence of something that you are putting to her.

Ms CROZIER: I can read it out too. I know we are running out of time.

**The CHAIR**: You have run out of time, and I think the issue is there are two places where there is information held, and the information that you want is with the Department of Health. I think that is—

Ms CROZIER: I am just asking, Chair: is there a conversation between Service Victoria and the department? That is what I am trying to ascertain.

**The CHAIR**: You have also put to her in your question a whole lot of material about New South Wales being ahead, Victoria being a failure, when the evidence that she gave was that Victoria was the first to come up with this QR—

Ms de MORTON: For the vaccination certificates.

The CHAIR: for the vaccination certificates, yes. I am just not sure-

Ms CROZIER: The QR codes. I am referring to the QR codes, not vaccination. I was not referring to vaccination.

The CHAIR: I think it is just a matter of being really clear about the question, and I think the answer is it is in two places.

**Ms CROZIER**: Well, my question was, Chair, around QR codes and the data for January, February and March of this year. That is what I specifically asked about. I wanted to know whether Service Victoria are having discussions with the departments that they are responsible for, DPC and the Department of Health. And I do not think the committee—

The CHAIR: So that is a yes or no.

Ms CROZIER: has had a very clear answer from the CEO of Service Victoria on this very important issue. This is about what we know, what actually is happening and whether that data is declining. The comparison was what I was asking for.

The CHAIR: Give her a chance now to answer the question.

**Ms de MORTON**: The clear question you asked was about the data from January, February and March, and I have said that that is a request that needs to go to Department of Health. The second question you are asking—

Ms CROZIER: You said there were trends.

Ms de MORTON: is 'Were there discussions?'. What specifically was the question?

**The CHAIR**: I think what we will do from here, given that your time has run out, is you can put a question in writing, obviously, as we have done on other occasions to get clarity.

Ms de MORTON: Thank you.

Ms CROZIER: That would be great.

**The CHAIR**: Thank you very much for attending the hearing today. I will just say to you that you will receive a copy of the transcript of this hearing within the next week, including a list of any questions that were taken on notice. They will be provided to you as well. We will now take a short break. Thank you.

Witness withdrew.