

CHARITYPUB00446  
18/02/2011

CHARITY  
pp 00446-00510

PUBLIC  
HEARING

COPYRIGHT

INDEPENDENT COMMISSION AGAINST CORRUPTION

THE HONOURABLE DAVID IPP AO QC

PUBLIC HEARING

OPERATION CHARITY

Reference: Operation E10/0035

TRANSCRIPT OF PROCEEDINGS

AT SYDNEY

ON FRIDAY 18 FEBRUARY 2011

AT 10.09AM

Any person who publishes any part of this transcript in any way and to any person contrary to a Commission direction against publication commits an offence against section 112(2) of the Independent Commission Against Corruption Act 1988.

This transcript has been prepared in accordance with conventions used in the Supreme Court.

THE COMMISSIONER: Mr Alexis.

MR ALEXIS: Commissioner, I propose to have Ms Sandra Lazarus recalled to conclude her examination. I should note that Mr Hogan doesn't appear to be here and apart from raising that fact I don't wish to say anything further about it.

THE COMMISSIONER: Well, I think we have to start. I really can't wait for everybody who's late.

10

MR ALEXIS: Thank you, Commissioner. Well, I recall - - -

THE COMMISSIONER: Because people have been late throughout this hearing and we've got a lot to get through.

MR ALEXIS: Yes, we have. I am instructed, Commissioner, that a telephone call has been received by the office indicating with apologies that they were running late so could we recall then Ms Lazarus.

20

THE COMMISSIONER: Ms Lazarus. Ms Lazarus, you're still under former oath and the section 38 order still applies to you.

MR ALEXIS: Ms Lazarus, you're being shown the examination bundle Exhibit 1, could you turn it open please to page 227. Now, we see here do we one of the many invoices to the Royal North Shore Hospital that you prepared and sent on behalf of Complete Health and Medicine in relation to cervical cancer screening tests for \$9,000 plus GST, is that right?---Sorry, 2  
- - -

10

THE COMMISSIONER: 207 is it?

MR ALEXIS: 227?---07, oh, 227.

Is that right?---Yes, that's correct.

20

Thank you. Now, you recall you gave some evidence to the Commission that the rate per test that you charged on the invoices that were sent to the Royal Hospital for Women was \$1,500 a test. Do you recall that?---Yes, that's correct.

And should the same rate per test be understood as applying in relation to each of the invoices for the screening tests that were sent to the Royal North Shore Hospital?---That's correct.

So the invoice at page 227 is an invoice that you sent in relation to six tests for cervical cancer screening. Is that right?---No, that, that would be incorrect.

30

Why would that be incorrect?---I would be invoicing for the full ten and like you will point out later on I've actually left on cervical cancer in several, several of these invoices due to lack of concentration or, or just dismissed the fact that I actually left cervical cancer trial on there so even though I was charging for the prostate cancer trial the patients screened there I seem to have left cervical cancer throughout in sheer carelessness so I've actually invoiced incorrectly.

40

So what you're telling me is that when I look at this invoice at 227 and I see a charge for \$9,000 relating to cervical cancer screening tests I should understand that the invoice at that page doesn't relate to such a thing?  
---That's correct.

What does it relate to then?---It relates to a full ten tests that should be, that should have been completed.

Well, if you were charging \$1,500 per test then this relates to only six doesn't it?---That's correct. Like I said, there is an error in the calculation as well as the type of screening that was done for that particular trial.

Well, did this invoice relate to cancer - - -?---All those invoices relate to screening conducted on cervical cancer patients, that were the ten that were, there's a report about including the prostate for the 200 patients there as well.

All right. Just, thank you?---It should say that.

Could you attend to my question?---Yes.

10

Does the invoice at page 227 relate to a screening test for cervical cancer or not?---I wouldn't be able to tell you with clear - - -

Why not?---That's because, like I said, I seem to have carried the cervical cancer trial statement throughout without making a change.

And if you look at the invoice at page 229 - - -?---Yes, I've done the same thing.

20

Well, does this invoice at 229 for \$9,000 relate to six screening tests for cervical cancer or not?---No, it doesn't. Like I said - - -

Well, what does it relate to?---It should relate to \$16,000 for the ten tests completed. I always invoice for the ten tests. Like I said, it's just a mere lack of whatever it was in terms of leaving cervical on there as well, it shouldn't say cervical cancer and I've done that before where I've actually picked up that mistake and corrected that mistake in the next.

30

Well, if you come back to page 228 you'll see that on the non-order voucher form - - -?---I've written that - - -

- - - about halfway down you've referred to cervical cancer as the relevant subject of the goods and services that are the subject of that voucher, haven't you?---That's correct and that voucher is based on the invoice that was there in front of me that, so it's an exact copy made.

THE COMMISSIONER: Where is that, oh, I see, yes, thank you.

40

MR ALEXIS: Point 5 of the page, Commissioner.

THE COMMISSIONER: Yes.

MR ALEXIS: So is what you're saying to the Commission that you have made some error in relation to the preparation of the invoice at 229 and you've carried that error through into the non-order voucher at 228? ---That's correct and that's done for four until the mistake was picked up.

And just explain to me, what do you mean when you say that was done for four?---That was done for I think four of the invoices where I've made the error.

So we should understand that in relation to all of the invoices that refer in terms to cervical cancer screening tests, four of those invoices are incorrect? ---That's correct.

10 Can you tell me which ones are those which you say are incorrect?---I'll have to look through this.

Well take your time? That would be 206, sorry, 226, 227 - - -

Well hang on, just let's go one at a time, please. So is what you're doing identifying those invoices that you say don't relate to cervical cancer screening? Is that what you're about to do?---That don't relate to the correct, they're not correct invoices in terms of the amount charged.

20 All right. So we should go through - - -

THE COMMISSIONER: And the description (not transcribable)?---And the description, that's correct.

MR ALEXIS: Right. So we're starting at 226 are we?---226, 227 - - -

All right. Well hang on before we leave 226 tell what on that page is incorrect?---The details of the expenditure.

30 And what is it in relation to that description of details that's incorrect?---Oh, it shouldn't say cervical cancer.

All right. Thank you?---Because as you know, only 10 patients were screened.

Thank you.

40 THE COMMISSIONER: And do you know what it should relate to? ---Some relate to prostate and only one set would relate to, so all of these would, should have said prostate.

MR ALEXIS: So you're telling the Commissioner that at 226 the reference to cervical cancer should have been prostate cancer?---That's correct.

And what is it about the invoice or otherwise the content of the non-order voucher that leads you to say that the invoice and the voucher should relate to prostate not cervical cancer?---Well I can't be certain in that part whether it's prostate or cervical. They're just merely for the 10 tests that were completed.

So, all right, so what you - - -

THE COMMISSIONER: The 10 tests that were completed at Royal North Shore?---Yes. Each invoice is for 10 tests. So in total about 210 tests were completed that there is documentation for. So I would have charged - - -

These are the invoices, they do not concern the pilot test you say you carried out at Royal North Shore?---No.

10

These are for, these are for services you rendered after the pilot test had been completed?---The pilot test was completed with the cervical cancer not the prostate cancer. Prostate cancer, the full 200 were screened.

MR ALEXIS: Now Ms Lazarus, I'm sorry, Commissioner.

THE COMMISSIONER: I'm still trying to find, when, when do you say this, when do you say you, the pilot test was completed?---The pilot test was completed before that the report suggests 6 May.

20

What date do you say the pilot test - - -?---I cannot recall the exact date.

But what month do you say it was completed?---Well, the early, early to late 2008/2009.

No, that's not - - -?---That's the pilot for the cervical.

Early to late 2008/2009?---Yes.

30 What does that mean?---That means late 2008 to early 2009. Like I said, I can't remember the exact date. If I had my files I would be able to point that out.

Between the documents at 226 is on 16 January, it's dated 16 January, 2009 is it not?---That's correct.

So how do you know that it is not for the cervical cancer?---That's what I was trying to explain, I can't be certain whether it's prostate or - - -

40 How do you know it's not for the pilot test?---I can't be certain whether it's pilot or cervical.

You have no idea for what kind of patients this invoice relates?---That's correct. That's why it shouldn't say cervical.

And you really have no idea how many tests it relates to?---No, it relates to 10 test, 'cause I always invoiced - - -

(not transcribable)?---‘Cause I always invoice for 10 tests. That’s what I was pointing out.

Even though you don’t say it in it?---That was the amount that was agreed.

Agreed with whom?---With Sydvat, with them.

10 And was there any, was there any agreement with anybody from Royal North Shore Hospital?---The Royal was shown the, the proposed document that Johel Neiron had given both myself and my sister.

Who’s they?---The professors.

Who?---Ross Smith, Neville Hacker, they’d all seen that protocol. Not protocol, sorry, the, the contract.

Dr Burton?---Ah, Dr Burton, I don’t think I gave that to him.

20 So what other doctors did you give it to?---That was given to Ross Smith and Neville Hacker only, to the best of my recollection. I - -

And was it given to them and then taken back from them?---Yes. They, when they, when they signed the non-order voucher form, that document for both companies were present with them.

30 When they signed what non-order voucher?---The non-order voucher they denied signing, which is on page, sorry, the maintenance form which is on page 130 and 132 and 136. When they were presented with that contract, this, this um, form was presented with that contract and based on that contract and that form they signed and approved that.

I don’t understand how, let me start again?---Okay.

When you say that they, the doctors should have understood- - ?---That’s correct.

40 - - -that by doing something when they saw these vendor maintenance forms and the contract, that the hospital had agreed to pay for tests at \$1,500 a time out of a trust fund. Is that, is that what you say?---That’s exactly what I’m saying.

Can you tell me where this appears in these documents?---It doesn’t appear anywhere.

How would they know this?---They’ve done many tests, they would have understandings of, oh, many clinical trials, they would have an understanding of the protocols. I was given this and the contract, they went through the contract that was um, developed by um, it was on Sydvat’s

letterheads and stationery, outlining the payments that are supposed to be made to my sister and I in terms of the services we were providing with the research institution.

Where does it say that?---It doesn't say that on there. This is just a maintenance for putting the company on the database of the hospital for, to, to payments to be made.

10 So where in the contract that you, where in the contract of Sydvat does it deal with the amounts of payment you two receive?---They, they can't find the contract apparently.

So you rely, you say these two, that Dr Smith- - -?---Ross Smith and Neville Hacker.

- - -and Dr Burton- - -?---No, not Burton.

Sorry. Who was the other?---Ross Smith and Neville Hacker.

20 Sorry. Dr Ross Smith and Dr Neville Hacker were given the vendor maintenance forms and some contract which we've never seen?---That's correct.

And did the, did the contract which we've never seen say anything about what payment you were to receive?---It did, it did.

30 What did it say?---It said for the services that we were providing and it had a list of all the tasks that we'd be carrying out, this is what will be charged per test in total, how many tests that would be conducted with that particular research institution.

And, and what did it say, how much?---1,500 per test.

And, and where was the, did it say anything about a trust fund?---Um, the money would be provided by Sydvat. It didn't say- - -

Did the contract say that?---No, only by the trust fund.

40 I'm just trying to understand what it is that you gave the doctors that led them, that you say should have led them to understand that the hospital was going to pay you \$1,500 for each test that you say you carried out?---That, that, they could have made an assumption because it did outline that.

So is it all based on an assumption?---That's (not transcribable)

No, I'm asking you?---It might have been based on assumption.

Well, what else could it have been based on?---Based on the contract I've provided to them.

But there's nothing in the contract you say that says that the hospital will pay?---No, not the hospital, it said that they will provide the funds, Sydvat will be providing the funds.

Yes, but I'm asking you, how did the doctors know. I'll ask you again. I'm sure you understand this?---Yes.

10

How did the doctors know that the hospitals were undertaking to pay you \$1,500 per test?---Because it said the research institution where the tests will be conducted will be invoiced by the following companies.

That was in the contract?---Yes. It outlined all these details.

I thought I'd asked you that and you didn't say that earlier. Is this - - -?  
---No, you said was it outlined on the trust fund, there was no such thing outlined that the money would be put into a trust fund or anything like that.  
20 It just said that they would be providing the funds. There was no, there was no mention of the word trust fund.

And that the hospital would pay you \$1,500 a time?---Yes, by funds provided by Sydvat.

And Dr Burton - - -?---Not Dr Burton.

Dr Ross Smith?---Ross Smith and (not transcribable).

30 Each saw that?---That's correct.

And he signed it?---He signed it and then also had a look at the Wish Consulting one as well. I think you have originals of the vendor maintenance forms which he signed.

But we've never seen the contract that you're talking about?---That's correct. All the documents were taken, it should have been in that document. We had, we did have a copy of it, we don't have the originals, were never given the originals. The original was kept by Sydvat.

40

You didn't make a copy?---No, that's what I'm saying, I only had a copy.

Where is the copy?---With the things that were obtained from the house.

Well, ICAC has no record of it?---Well, we'll go back and search for it which I've done.

And you can't find it?---No, but the original's with Sydvat.

I'm asking for a copy Ms - - -?---I can't find it, because each page is signed by the Sydvat representative and ourselves, not just (not transcribable)

Where did you keep this copy?---In the white drawers with all the other stuff.

In the white drawers?---In the drawers at home. The, the, the investigators know what I'm talking about and my, my method of filing.

10

MR ALEXIS: Ms Lazarus, you told me a short moment ago that there were four invoices and vouchers - - -?---I'm still looking.

- - - that referred to cervical cancer screening tests when they in fact related to prostate. Is the first invoice and voucher which you put in that category at 226 and 227?---Yes, that's correct.

20

Thank you. So we should understand that the invoice and the voucher represented the performance of cervical cancer screening tests when none in fact occurred?---Like I said - - -

Well, is that right or not?---No, it's not right.

Well, why isn't it right?---Because I can't recall and I've already told you where the error is. It's not correct.

30

THE COMMISSIONER: What's not correct?---I was invoicing in general. It shouldn't say whether it's cervical cancer or prostate cancer because I never defined it.

MR ALEXIS: Ms Lazarus - - -?---In this invoice it's defined for the simple reason that I've carried the instructions from an invoice that was created for services provided at the Royal Women's Hospital. It was just again one of those copy and paste things. It's carried through. That's why the amount is even incorrect and because I was putting that invoice through that same error is carried and populated onto the non-order voucher without change. If you have a look the wording and everything is exactly the same. Anyone would be able to tell it's just a simple copy and put it onto that, a non-order voucher as well.

40

Ms Lazarus, look at 227. You've told me that the reference to cervical cancer screening was intended to be a reference to prostate cancer screening because that's what the invoice relates to?---Yes.

So it must follow, must it not, that the invoice falsely represented that cervical cancer screening had been performed when in fact it hadn't?

MS SOARS: I object. That's a legal conclusion.

THE COMMISSIONER: It's certainly not.

MS SOARS: Okay. As, as you please?---Yeah, if you like to put it that way, yes, I would have to agree with you, that's correct.

MR ALEXIS: Thank you. Because at no time after you sent the non-order voucher and the invoice to the Royal North Shore Hospital did you say to them that the documents indicated the performance of cervical cancer screening tests when in fact none had occurred, had you?---They might have occurred. Like I said, I'm unsure (not transcribable).

Well, let's not guess about it. Do you ever - - -?---Well, if I was provided with more documentation and I actually had access to what you had obtained.

THE COMMISSIONER: This is dated September 2008.

MR ALEXIS: And Ms Lazarus, after 8 September, 2008 you never rang anyone at the Royal North Shore Hospital and told them that the reference to the cervical cancer screening tests in the invoice and the accompanying non-order voucher wrongly represented the performance of those tests, did you?---No, there was no - - -

You didn't?---No, I didn't, no, there was no - - -

Now tell me the next invoice that you say is incorrect?

THE COMMISSIONER: I presume the one at 229 is incorrect?---That's correct.

MR ALEXIS: So you're directing me to the - - -?---229 and 231, oh, sorry no, not 231, just 229.

Okay. Well I should draw attention to 228 and 229 being a replica of 226, 227?---That's correct.

But with different details on the non-order voucher. And I'll come back to that. So what's the next invoice that you say wrongly indicates cervical cancer screening tests?

THE COMMISSIONER: I presume 231 (not transcribable) delay, but 231 on your evidence generally seems to be incorrect?---231?

Yes?---For what reason?

Cervical cancer. And it's September 2008?---Yes.

Is that incorrect?---Yes, that's correct. I didn't change the description.

So you mean that it is correct that it is incorrect?---That's correct.

MR ALEXIS: So is your evidence madam, that in relation to the invoice at page 231, the reference to cervical cancer screening for \$15,000 is false because it relates in fact to prostrate cancer screening tests?---That's correct.

10 So again we have an invoice - - -?---Incorrect description.

- - - which falsely represents the performance of cervical cancer screening tests when they didn't occur. Is that correct?---Well, incorrect description, not (not transcribable).

THE COMMISSIONER: It's false.

MR ALEXIS: Well it's, it's a false description isn't it?---Yes, that's right.

20 Do you accept from me that the cervical cancer screening tests referred to in the invoice at 231 didn't occur?---Yes, that would be correct.

Thank you.

30 THE COMMISSIONER: Well, why did you change to \$15,000 in this invoice when you had done two invoices for \$9,000 and you say that your practice was simply to duplicate the \$9,000? What, what, what gave rise to this change to \$15,000?---When I realised, when after I put the invoices in and I always keep a photocopy, I realised that that error had occurred and I fixed that error up, like I mentioned earlier.

Why didn't you claim for the extra tests that you say you have done?---Like I said, I should have, but I didn't.

Well that's not an answer, but anyway.

MR ALEXIS: So should I understand that the invoice at 231 relates to 10 screening tests or some other number?---10.

40 Can you point out please the next invoice that falls into the category of invoices that represent cervical cancer screening tests when they in fact related to something else?---235.

THE COMMISSIONER: What about 233?

MR ALEXIS: Commissioner, can I indicate that 233 and 235 are the same invoice and reproduced in the bundle because of the different annotations at 232 and 234.

THE COMMISSIONER: I see.

MR ALEXIS: So if 233 and 235 are treated as the same invoice, is that the next invoice that - - -?---That's correct.

- - - you now accept falsely represents the performance of six or some other number of cervical cancer screening tests when in fact no such tests were performed?---That's incorrect.

10 Why is that incorrect?---The amount and cervical cancer tests.

So otherwise what I've put to you is correct?---Yes.

THE COMMISSIONER: Why did it suddenly turn back to \$9,000, because by now you'd realised that you'd made a mistake?---No, it's the same. They're all together. The four are all together.

I don't understand.

20 MR ALEXIS: Now Ms Lazarus - - -

THE COMMISSIONER: Sorry, Mr Alexis.

MR ALEXIS: I'm sorry, Commissioner.

THE COMMISSIONER: I'm trying to understand this. At page 231 the invoice is for \$15,000. Do you see that?---Yes, that's correct.

30 And that's an invoice dated 14 September, 2008?---Yes. That's - - -

Just a minute. I asked you why the amount had changed from \$1,500 to \$9,000 by the time you came to do the invoice dated 14 September, 2008, and you said you realised that you had made a mistake?---That's correct.

Now we come to the invoice at 235 which is dated three days after the invoice of 231, yet the amount is \$9,000. So on your evidence, you've sent an invoice for \$9,000 when you knew three days before you'd corrected an earlier mistake, the earlier mistake involving \$9,000 by sending an invoice for \$15,000?---That's - - -

40 And I would like to understand what your explanation is for that?---Okay. That's incorrect because um- - -

What is incorrect?---Um, if you have a look, the invoice dated um, 34, the non-order voucher- - -

I beg your pardon?---The non-order voucher um- - -

On what page?---234, was actually submitted on 16/1 and the non-order voucher which is 230 was actually submitted on 21/1.

I don't understand how that is an explanation- -?---That's- - -

- - -because I'm talking about the invoice which is at 231 which is dated 14 September, and you said by this time you had realised you had made a mistake in relation to the earlier invoices?---That's correct.

10 So why is it- -?---Because- - -

- - -that when you sent the invoice three days later that you go back to \$9,000?---This invoice was- - -

Which invoice?---The invoice on 230 was created after- - -

I'm not asking you about the invoice at 230. I put to you the invoice at 231. ---Yes, that is, that is exactly the same thing, 231 and 230's just a non-order voucher and- - -

20

Well, I'm talking about the invoice, Ms Lazarus?---Oh.

Can you just stick with what I'm, the question, please?---Yes.

What is your answer?---That's for the services that were provided. When I went back and I counted I had to invoice again. If you have a look at the non-order voucher when the error was corrected you will see- - -

30

What, what non-order voucher?---If you have a look at 230 and the date where it's signed Sandra Lazarus and Mark Sywak, you will see it says 21/1/2009. Thanks. If you have a look at the invoice at 234, the non-order voucher is dated 16/1. This voucher that says 9,000, regardless of the date that it says on the invoice, because the services were provided accordingly and the number of patients that I counted, I went back and re-invoiced, you will see that on 16/1 there was an invoice put through for \$9,000 but after 16/1 the error was picked up and was corrected and the invoice that actually went through, the error was corrected on and was submitted on the 1<sup>st</sup>, 21/1/2009.

40

Now, which, which invoice are you, was the correcting invoice?---Amount corrected?

Yes. Which invoice was the correcting invoice?---The correcting invoice was the 230, which is dated- - -

That's, that's a non-order voucher?---Yes, that's the non-order voucher and  
- - -

And, and the invoice for that is the one at 229?---No, 231.

231?---That's correct.

Yes. Right. And then why is the error repeated in invoice at 235?

---(NO AUDIBLE REPLY)

Because the date of that invoice is 17 September?---No. Um- - -

10 It is, have a look at it?---Yes. No. I'm looking at the dates, but it's when it's put in.

When it's put in?---Like, when the non-order voucher is actually claimed for. By then the, that's what I'm trying to explain to you.

Well, I'm sorry, you've got plenty of opportunity to explain but I don't understand your explanation. So can you proceed?---Okay. Yes. When I count, when I first initially invoiced for \$9,000 for the invoice that's dated 17/9, it was \$9,000, and that invoice was submitted on 16/1. By that time  
20 the error wasn't picked up, but by the time I realised of the error- - -

It was submitted on the 16<sup>th</sup>?---The 16<sup>th</sup>, that's correct.

For the 17<sup>th</sup>?---For the 17<sup>th</sup>. So it's a month later. The invoice was claimed almost two months later or whatever the maths is for the first - - -

Later then what?---The invoice was created on the 17<sup>th</sup>, it was billed for the 17<sup>th</sup> of the 9<sup>th</sup>.

30 Yes?---For the services provided. But when the non-order voucher went in, so when I put it in - - -

Went in?---When the non-order voucher was put into the, submitted for signature and for payment it was submitted on the 16<sup>th</sup> of the 1<sup>st</sup>, 2009.

Yes?---Yes.

By then you say you haven't understood the mistake?---That's right. By the 16<sup>th</sup> of the 1<sup>st</sup>, '09, I hadn't understood the mistakes that I made on the  
40 amount that was charged. But if you go to 230 and 236, the vouchers given and the services provided on the, on the invoice, which is 231 and dated the 14<sup>th</sup>, and 237 dated 19 September, in respect of the screening that was completed. When it came time to claim for the funds or for the services, that was done on 21<sup>st</sup> of the 1<sup>st</sup>, which is five days later. Within the five days the mistake and error was picked up and this was corrected before submitting. That's what was charged for the 16<sup>th</sup>. And again - - -

But you didn't, you didn't bother to correct the description of the services?

---No. But - - -

Why not?--- - - - the voucher has been corrected.

The voucher, the non-order voucher?---The non-order voucher descriptions have been corrected.

Of the work done?---Of the work done, that's correct.

10 Where do you, where does one see that?---It just says examination tests now. Because at this point I was screening so many patients that it just, I couldn't differentiate, but the number of patients were there because the file needed to be kept with all the numbers there because Sydvat members were coming and having a look at these files at every stage and informing me that the funds are going in accordingly.

MR ALEXIS: Ms Lazarus, is there a reason why the invoice at 233 by way of illustration, which is an invoice that you said was prepared on or about the date it bears, 17 September, 2008, was not submitted until four months  
20 late on or about 19 January, 2009? You might want to look at the date on page 232?---Yeah.

So we have it seems four months between - - -

MS SOARS: I object.

MR ALEXIS: Can I just put the question? We have it seems about four months between the date you created the invoice and the date it was  
30 submitted for payment. Is that right?---That's correct.

What's your explanation for why we have at least by comparison of these two documents at 232 and 233, a four month delay between creation of invoice and submission for payment?---Just a simple fact that I just, I was doing the work, I just kept doing the work and I hadn't put the invoice in until like I went and I thought well payment must be due, I'll have to (not transcribable) the invoice and then put it in accordingly. It's just a delay in my, my claim. It has nothing to do with anything - - -

40 Well we know it's a delay of four months. My question is why was there a delay of four months between the time of creation of the invoice and the date it was submitted for payment?---I was moving around three hospitals to the screening up to about six, seven, ten patients a day. I haven't had the time to put this in, when I had a time, when I have four months later. When I did all, all the patients I realised well these are things that need to be invoiced for (not transcribable). So it's just (not transcribable).

All right. I suppose another explanation might be that the invoice date is incorrect and was in fact created at or around the time it was submitted with

the voucher for payment. What do you say to that?---I wouldn't be able to (not transcribable) correctly.

Well I've already asked you whether or not the date of invoice is accurate in so far as it indicates the date upon which the invoice was prepared and you've accepted a number of times that - - -?---Yes.

- - - that you've relied upon the date of the invoice - - -?---Exactly, yes.

10 - - - as indicating the date of preparation?---Yes, roughly.

And you've already told us that the date of - - -?---I've said that - - -

- - - preparation of the invoice reflects the services that you say you have performed up to that point in time?---Yes, roughly. You should be able to take out a stamp from my hard drive as to exactly when these invoices were prepared.

We have?---Yes.

20

Thank you. Now, you've already identified three invoices that falsely represent the conduct of cervical cancer screening tests when in fact those tests have not been performed, I think you'd indicated there were four. Can you identify the fourth for me please?---Yes, I'll just find it. It's 240.

240?---Yes, and 241.

Thank you. So you directed me firstly to the invoice dated 29 September, 2008 - - -?---That's correct.

30

- - - with respect to cervical cancer screening tests and the accompanying non-order voucher at 240. Is that right?---Yes, that's correct.

And should we understand that the reference to cervical cancer screening tests at 241 did not occur?---Sorry?

Should we understand that the reference on the invoice at 241 relate to cervical cancer screening tests that were not performed?---That's correct.

40

So this another false invoice, is it?---Like I said, there's four. It's not a false invoice, it's just correct.

All right. Well, we'll see about that. Now, 240, if we just go back to it. By this stage we should understand that you had realised that the reference to cervical cancer on the non-order vouchers was incorrect and had been removed from the voucher. Is that right?---That's correct. Again, that's dated the 16<sup>th</sup> in terms of submission.

All right. Now, apart from the four invoices that you've identified at pages 227, 231, 235 and 241 are there any other invoices that you now accept false represent the performance of cervical cancer screening tests when no such tests occurred?---No, I don't think that's, that would be correct. It's not a question of falsely, I think it's just a, a, an account-keeping error.

Ms Lazarus, the invoice at 241 represents on its face that cervical cancer screening tests were performed, doesn't it?---Yes, that's correct.

10 And you're telling me that at the time you prepared the invoice you knew that those cervical cancer screening tests had not in fact been performed?  
---Yes, because I overlooked - - -

Well - - -?--- - - - that cervical cancer.

Well, whether you overlooked it or not it's clear isn't it that the - - -?  
---Yeah, okay, as the evidence - - -

- - - invoice falsely represents the performance of tests that didn't occur?  
20 ---That's, yes (not transcribable)

All right. Now, are there any other invoices that fall in that category, that is to say, they represent the performance of cervical cancer screening tests that were not performed?

THE COMMISSIONER: What about 1243?---It's just a copy of the - - -

MR ALEXIS: It's the same invoice as 241, Commissioner.

30 THE COMMISSIONER: It's the same one.

MR ALEXIS: Ms Lazarus, please take your time to identify and answer my question as to whether there are any other invoices - - -?---Yes.

- - - that falsely represent the performance of cervical cancer screening tests when in fact those tests did not occur?---That error was carried throughout all invoices.

40 Throughout all invoices?---Yes.

I'm sorry, I thought you told me that four invoices were of that (not transcribable)?---In terms of 9,000.

Sorry, in terms of?---The \$9,000 payment. In terms of the description I've carried that through all the way.

So let me be clear about it - - -?---Instead of writing prostate I've written cervical cancer throughout the whole thing.

So the invoice at 245 is a false invoice?---In terms of description, yes.

THE COMMISSIONER: And amount, you say?---At 245?

Yeah?---That's a copy of the 242.

Yes, but it should be, you say it should be 15,000?---That's correct, yes.  
And the rest all carry incorrect descriptions.

10

MR ALEXIS: Well, let me just be clear about it. So the invoice at page 249 is another false invoice relating to cervical cancer screening tests?  
---(NO AUDIBLE REPLY)

I'm at page 249?---Yeah.

Is that right?---That's correct. Again um, the same description error is carried all the way through.

20

But again it falsely represents the performance of cervical cancer screening tests that were not performed?---But again it doesn't show prostate cancer either. If it said prostate cancer and cervical cancer, then it would be a completely false, but it just says cervical cancer which should have been substituted by prostate cancer. So (not transcribable) It's an error that's carried out throughout every single invoice where, just overlooked from the fact that it should say prostate and not cervical.

Is the invoice at 266 another false invoice in relation to the description of services?---266. In terms of description, yes, that's again, and- - -

30

We don't need to repeat the same- - -?---Okay.

- - -evidence. I think we understand your position, madam. But can you just confirm for me that the invoice at 268 is another false invoice in relation to the performance of cervical cancer screening tests?---In terms of description, yes.

And the same at 270?---In terms of description, yes.

40

And at 272?---In terms of description, yes.

And at 274?---Description, yes.

And if you look at the invoices from 278 right through until the end of the examination bundle, leaving aside of course the Vaux letter and those relating to Wish Consulting, are they similarly all false insofar as they represent the performance of cervical cancer screening tests that did not occur?---All incorrect in terms of description.

All right. Now, having gone through that exercise, can you tell me which of the invoices which relate to the conduct of cancer screening tests in fact relate to the cervical cancer screening tests?---Like I said, I wouldn't be able to give you an accurate, it would be a very wild guess and might be incorrect.

10 Well, come back to page 207 and you'll see at 207 the invoice refers to examination tests without any indication as to whether it relates to prostate or cervical cancer. Do you see that?---207. That's correct.

Well, what did that relate to, the \$15,000 related to ten tests. Was that cervical cancer or prostate cancer?---Like I said, I can't pinpoint the exact kind of which, what it is, cervical or um, prostate.

THE COMMISSIONER: But under Duration, it says, "Until the trial is completed", on this invoice at 207?---That's correct.

20 Does that, so this suggests that the, that the tests for which you were charging under this invoice were for a trial?---That's correct.

So is that the pilot trial?---That's both trials being combined together.

So you call the 200 tests you say you carried out a trial?---Yes.

Why is it called a trial?---It's a full clinical trial.

I see.

30 MR ALEXIS: And the invoice at page 211, does that relate to ten examination tests for cervical cancer or prostate cancer?---Like I said, I cannot pinpoint. If I had those white folders um, that back in December in the closed hearing the Commissioner had instructed the ICAC investigators to accompany me to locate which came to my attention that the ICAC investigators didn't even know what those files looked like- - -

Mmm.---?- - -until Wednesday, I would have been able to tell you the exact date.

40 But in relation to this invoice, is it at least correct to understand that by 6 October, 2008, ten screening tests for either cervical or prostate cancer had been conducted by you?---That's correct.

And similarly if we just go back to 207 for a moment, should we understand that at least that indicates correctly that ten screening tests had been undertaken, whether for prostate or cervical cancer, by 29 September, 2008. Is that right?---That's correct.

THE COMMISSIONER: I'm not sure what you are trying to say, Ms Lazarus. Do you or do you not accept that you were given every possible opportunity to identify to the ICAC investigating officers what documents you say were relevant to your case- -?---Um- - -

- - -including these files which are missing?---No, I wasn't given an opportunity, because in- - -

10 You're recalling you're under oath in that- -?---Oh, yes, definitely.

And so why, were you not invited to come- -?---No.

- - -with the- -?---Never.

Do you mind if I finish or would you continue, would you prefer to continue to be rude and interrupt while I'm talking?---I do apologise.

20 Were you not given the opportunity to come and identify amongst the documents in, in the Commission's possession all documents on which you wished to rely to prove your case?---That's not correct.

30 Were you invited to come in to identify any documents?---Um, yes, I was invited to identify the documents, some documents, but in December, in late December, the closed hearing that we had, you concluded the instructing by ICAC investigators to go and locate these white folders, patient folders that I had been voicing exist. At no point did the ICAC investigators contact my lawyer either by phone, by written or um, by email, following your instructions to accompany me to these hospitals to locate these files that I'd been saying exist with the patients' details in there. Um, and I've realised that how can they look for something if they don't even know what it looks like and they only came to realise what it actually looks like on Wednesday when I showed an example of it.

That's not really an answer to my question. I asked you whether you were invited to come to the Commission's premises and indicate to the Commission investigators all documents in the Commission's possession which you say were relevant and helpful to you in preparing your case? ---Um- - -

40 Did it happen? Yes, or no?---Yes, that happened.

Thank you. I don't want any more in that. As I understand you, your complaint is that what didn't happen was that you weren't taken along to the hospitals with the investigators to try and find documents which you were unable to find amongst the documents you had produced to the Commission. Is that right?---No, that's not correct.

Well, what's wrong about that?---Um, the, the files with the patient details in them, the white folders I showed as an example, these folders were always kept at the hospital and from the day 1 in terms of the investigation I've been saying they're at the hospital, they're at the hospital, they need to be found. I didn't realise that, I was saying patient files, patient files but, but what I was describing wasn't well visually, wasn't able to visualise that, investigators. I was just thinking, how can they even find something when they don't even know what it looks like.

10 What was wrong in the proposition that I put to you?---I was never contacted to accompany the- - -

That's what I asked you. Your complaint is, the ICAC investigators did not ask you to come with them to go to the hospitals to look for the files?--- That's correct.

That's the only complaint you have?---Yes, because if I had those files- - -

That was all I want to know.

20

MR ALEXIS: Is that, thank you, Commissioner. Ms Lazarus, page 215, if we could go to that invoice, please?---Ah hmm.

And can you tell us whether the 10 examination tests referred to in that invoice related to cervical cancer or prostate cancer?---I wouldn't be able to tell you again.

We should understand that that invoice relates to 10 tests whether they be for cervical or prostate cancer - - -?---That's correct.

30

- - - that you performed by 22 September, 2008 when you prepared the invoice. Is that right?---That's correct.

Thank you. And finally at 221, there is a further invoice dated 14 October, 2008. Again can you tell me whether or not the 10 screening tests referred to in that invoice related to prostate or cervical cancer?---Again, I can't tell you.

40 What we do know from the invoice, like the earlier in this series is that 10 tests were performed by 14 October, 2008. Is that right?---That's correct.

But you're unable to say in respect of those four invoices at page 207, 211, 215 and 221 whether they related to Dr Vaux's patients or Dr, I'm sorry, Professor Burton's patients?---Or Burton, yes.

All right. Thank you. Now can I turn you to another matter. The invoices that were rendered to the North Shore Hospital with respect to marketing services and if you need to go to, for example, 209 and following in the

bundle, should we understand that they were invoices that you prepared on or about the dates that those invoices bear?---Roughly.

What should we understand by your reference to roughly?---Again, it would be later, so it wouldn't, if it's, it wouldn't be on the exact date, but they would be the services provided for that number of people.

We see as illustrated at 209 that this invoice is dated 29 September, 2008. Do you see that?---Sorry, can you (not transcribable)?

10

Page 209?---Yes.

And we should understand that that relates to marketing services rendered during the month of September, 2008. Is that right?---Yes, that's correct.

I'm sorry?---Yes, that's correct.

Thank you. And similarly just to get the scheme of them clear, if we look at the invoice at 213, you'll see that it's dated 6 October, 2008. That's  
20 relatively early in the month of October that year. How should we understand the charge of \$9,000 as relating to the performance of services during the month of October?---This is back payment in terms of the services that were already provided.

I see. So this relates to a, the provision of services for a month prior to September does it?---That's correct.

September of 2008?---Yes.

30 I see. Are you able to say just looking at the invoice at 213 which month prior to September 2008 these services refer to and the invoice relate to?---I wouldn't be able to tell you.

But it's clear is it because of the earlier invoice that it was before September, 2008. Correct?---That's correct.

All right. Now the invoice at page 217 which is dated 22 September, 2008, should we understand that that relates to a month of marketing services provided prior to the month of September, 2008?---Sorry, can you repeat  
40 that, please?

Sure. Should we understand this invoice relates to the provision of marketing services prior to the month of September, 2008?---That would be, yes, September, 2008.

Yes. Just so we're clear on it. If you go back to 209 you recall that this was the invoice where you told me that it related to the provision of marketing

services for that month, that is to say the month of the invoice?---That's correct.

So the following invoices that were generated in that month as well relate to marketing services provided to the hospital before that?---That's correct.

10 Are you able to tell us with respect to the invoice at 217 the month of the 2008 year prior to September that those services were subject that this invoice related to?---No, I wouldn't be able to tell you. But these are all back pays.

What about the invoice at 219, that's dated 14 October? We've already seen the invoice dated 6 October, 2008. For what period of time does the marketing services in the invoice at 219 relate to?---Again back services.

I see. Again before September, 2008?---That's correct.

20 Thank you. Can I ask you to tell me please, and if I've already asked you this question, I apologise, but could you identify for me please who it was at the Royal North Shore Hospital that agreed that Medical and Clinical Informatics Pty Limited be retained and paid for the performance of the screening tests using the Medex device?---It's not, your question is not clear to me? What do you mean? Like who authorised for the, can you please (not transcribable) that question?

Sure. You've submitted numerous invoices on behalf of the two companies of which you control?---Yes.

30 Who at the hospital, that is to say the Royal North Shore Hospital, did you agree with for the submission of those invoices and the payment of those invoices in relation to the performance of these screening tests using the Medex device?---Who authorised the payments for these was Ross Smith. Who authorised the payments would be the person, who authorised the company to be paid was Ross Smith. And who authorised the payments, the names are on the non-order voucher.

40 Now you responded to my question by using the word authorised I think three times and are you intending to convey to the Commissioner that it was Professor Smith who authorised those payments because on your evidence he signed the vendor maintenance forms?---That's correct.

Am I right so far?---That's correct.

And you also point to the various doctors who signed the non-order voucher forms that accompany the invoices and it's to those doctors that you say authorised the payments?---That's correct.

Is that what we should understand you to mean when you say that those doctors, Professor Smith and the other doctors - - -?---And the other doctors.

- - - authorised the payments?---That's correct. If you have a look at Ross Smith's evidence at page, on line 15, he realised that they were in constant communication in regards to the payments that were made to me, because he referred to Thomas Hugh having a conversation with him, being fully aware that he signed, but was not unclear whether he did sign it or not, authorising the payments.

10

All right. Now can I ask you to just listen to this question carefully, please. Who was it at Royal North Shore Hospital that agreed that you were able to submit invoices for a payment by companies that you controlled for the performance of the screening tests?---Ross Smith.

So have you understood that question to not be asking you about authorisation by reference to maintenance forms and non-order vouchers?  
---Yes.

20 You understand my question to you is directing to you to identify the person that - - -?---That's correct.

- - - that allowed you or agreed with you for invoices to be lodged by companies you control for the performance of these services?---That's correct. Ah hmm.

You understand my question very clearly do you?---Yes. You're saying that - - -

30 Thank you. And is your answer that it was Professor Ross Smith that agreed with you that the invoices on behalf of these companies could be lodged with the hospital for payment?---That's correct.

And no one else?---No one else.

Thank you. Now I need to ask you some questions about the non-order vouchers and can I indicate to you, Ms Lazarus, because you've been in the witness box for some time now, that I'm nearly finished?---That's okay.

40 Firstly, I wish to understand some detail concerning the cost centre codes. And by way of illustration if you look at the voucher at 206 you will see about half way down the page a number 6 and the word "coding". Do you see that?---206?

At page 206, halfway down the page there's a box with a number 6 in the left-hand side with the word "coding." Do you see that?

---Yes, that's correct.

And if you travel towards the right-hand side of the page you'll see columns headed Account, Cost Centre and Fund. Do you see that?---That's correct.

Now, I wish to understand firstly in relation to the preparation of the non-order vouchers that you prepared all of the typed information that we see not only in this form at 206 but also in all of the other non-order vouchers for North Shore?---Sorry, did I?

10 You prepared the typed information, and I don't mean the standard form information but you inputted the particular information relating to the supplier?---That's correct.

And you did that on your laptop computer?---That's correct.

Can you explain to the Commissioner please how it was that you had the form of non-order voucher in your laptop computer to enable you to insert the details that were the subject of the claim?---That was given to me on a USB stick by the accounts department.

20 Ah hmm?---It was early I suggested that we had access to, Michelle Lazarus and I had access to finance details. I'm not the smartest person in the world by holding a degree in a Masters of Computer Science some understanding that you'd be able to access the log of people who actually log in to the system and you will realise at no point whatsoever did Michelle Lazarus access the hospital network system.

All right. What about - - -?---For that reason - - -

30 What about you?---I remember clearly that I did not but I was fiddling with the email account just to see if it was working or not so from my point from being none to maybe twice you'd be able to see again I'm going, I'm just having an understanding of how the computer system will work in terms of log, you would be able to see exactly what web page I went to and you will see that that wasn't the case. At no point whatsoever did I, Sandra Lazarus, access the email account, hospital email account ever and you'd be able to get that from that.

40 Thank you?---This was provided to me, to answer your question, this was provided to me on a USB stick and, and like costs centre numbers, all - - -

Well, we'll get to that but who was it that provided you with the form of non-order voucher for use at the Royal North Shore Hospital on the USB stick?---The, I'm not, I don't know his name but he sits in the accounts department on the ground, of the main entrance.

Mmm. And this person is a male, is he?---That's correct.

And can you describe him please in terms of height and general appearance?

---He's slightly large, drinks a lot of - - -

And by, by slightly large what do you mean?---He's a heavy person, slightly heavy.

All right. You've, in giving that answer to me you've got your hands apart about a metre. Is that intended to indicate that he is a large rotund man?

---Yes.

10 Fairly heavy?---Yes.

And can you identify any other characteristics that might assist us in identifying him?---He's middle-aged. He drinks a lot of soft drink.

And you know that because?---Because he always had a can on his table.

All right. And does this man have a name?---No, like I said, I can't remember his name. I've met him on several occasions because when I was filling this out I didn't know how to do this so I went back and forth,  
20 especially when one of the, one of the, one the clinicians who were authorised to sign this was away he actually indicated which one, other one I have to go to to get the payment authorisation.

In any event, you obtained access to the form of non-order voucher and you were able then to input the information for the purpose of then using the form to submit with the invoices for payment, is that right?---That's correct.

Now, the account number referred to on the voucher at 206, where did you obtain that detail from?---From him again, according to the supervisor who  
30 signed it.

And the cost centre number, where did you derive that number from?

---Yeah, that, that's correct, both of the two are together.

So is it correct for the Commissioner to understand that you obtained each of the cost centre codes that are referenced on these non-order vouchers from this large gentleman with respect of all of the various hospital departments that you referred to in the invoices in relation to the cost centre number?---That's correct. They were on a, on a, I can't recall now. I'm not  
40 sure if it was just a plain document or an Excel spreadsheet that they were provided.

And when you obtained the cost centre numbers did you also obtain a list of which particular departments or clinics each of those cost centre numbers relate to, related to?---Yes, he pointed those out.

I see. And when you inputted the relevant cost centre number on each of the non-order voucher did you take some care to ensure that the appropriate

cost centre number related to the particular clinic relating to the study or the screening test I should say that you were performing?---No, that wasn't the case. It was just a case of I went back to him and I said who's available. He just went down, I think, the pecking order in terms of who is authorised and had me change the costs centre number according to the person who was authorised and available for authorisation of the payment.

10 Can I understand what the point would be of inserting a cost centre number for the Royal North Shore Hospital urology clinic by way of example if you were seeking to be paid for the performance of screening tests relating to cervical cancer and therefore related to the Gynaecological Oncology Department?---But that's what I'm saying, that will relate to my error that I made in terms of description but not in terms of a cost centre number that was going through. Those were the bulk of patients I was screening and that was the person that was available at that time for the authorisation of the payment. If you have a look I think now that it's been pointed out that I've actually, I think one of those professors who authorised the payment belongs to a completely unrelated cost centre number and that was again just basically he said that he's available, he's the next person available and  
20 that's the cost centre number in terms of payment.

But, madam, can I just get this clear with you, when you were preparing the non-order voucher - - -?---Ah hmm.

- - - you understood that accompanying the submission of that voucher for payment would be the invoice?---That's correct.

30 And didn't you take some care to ensure that the cost centre number related to the screening tests that were the subject of the invoice being submitted with that voucher?---No, no care was taken in writing that the cost centre number, like I said it was just in accordance to who, what doctor was available.

So is your evidence to the Commissioner that the use of the cost centre numbers was something that you applied randomly and without any particular relationship to the type of screening tests being performed? ---That's correct. It was written accordance to who was available at that time for the authorisation of the payment.

40 So if we examine, for example, the non-order voucher that has a particular cost centre number how should we understand what your approach was in allocating a particular number to a particular invoice for a particular screening test?---I approached the accounts department person. He knew what department I belonged to because it was written on the badge. He said that person is not available, you, and this person's available and his cost centre is, number is this. So at that point I changed the cost centre number that he indicated and the name of the person that, who was available and that's about it.

So that's hardly a random allocation of numbers is it? You specifically spoke to someone who - - -?---Yes, but - - -

- - - gave you information concerning a cost centre and that's the number you used?---That's, it's random in terms of the screening tests but it's not random in terms of like pulled out of the air or randomly stuck out like taken from somewhere. It's random in terms of the tests that were conducted.

10

So, I see. So what informed your use of the particular cost centre number related to who it was that signed as the authorising officer on each non-order voucher form. Is that right?---That's correct.

I see. So for example if we look at page 206 which is the page that I'm using by way of illustration and we see that the authorising officer is a Dr Thomas Hugh or Hugh Thomas do you know which one it is?---Yes, it's Thomas Hugh.

20

Thank you. And we see the cost centre number of 256920?---Yes.

That cost centre number was used because you know that particular doctor has something to do with the general surgery department?---Um, that doctor has something to do with um, um that cost centre and generally in terms of surgery and oncology.

So?---Not directly.

30

If we can just understand the position as clear as we can, Ms Lazarus, there is a direct relationship between the cost centre number that you selected and the identity of the doctor that has signed the form as the authorising officer. Is that right?---That's correct, I, they're, that's the cost centre number and they would know it by heart.

And the use of that particular cost centre number it was unrelated to whether or not the tests, the subject of screening charges, related to cervical or prostate cancer. Is that right?---That's correct.

40

All right, thank you. Now, just coming to particular non-order vouchers, if I may, and just started with Dr Hugh, should we understand that the vouchers of 206, 208, 210 and 212 were signed by you and Dr Hugh on about 31 October 2008?---That's correct.

Now, should we understand that at no time you conducted any screening tests using the Medex device on any of Dr Hugh's patients?---That's correct, no patients of his were utilised.

Now, where did you have to go in order to obtain Dr Hugh's signature on each of these forms?---His office.

And where was his office located?---I cannot recall.

I'm sorry, you can't recall?---I cannot recall at the moment but it was the only meeting I had with him.

Well, are you sure about that?---Yes.

10

And, so is it your evidence that you only met him once. Is that right?  
---Well, just for the signatures, I haven't met him any, any other reason.

So, your evidence is, just so we're clear that you met him on one occasion which was 31 October, 2008 for the singular person of getting his signature on these voucher forms?---No, that's not correct.

20

Why is that incorrect?---Um, I met him just to get the signatures for these forms whether it's once, twice you will find out from the dates that he signed that, on the forms. Um, I, I could've gone twice or whenever that was, once or twice but just for the purpose of the signatures. At no point I screened any of his patients had any dealings with him outside of his signature.

Now, you've told us you can't remember where it was that saw Dr Hugh when you obtained his signatures?---No, it was in his office. I just can't picture the location right now.

30

Well, was it in the public hospital at Royal North Shore or was it in the private hospital or was it in private consulting rooms separate from the hospital, what?---I can't say, I'm sorry, I just cannot remember.

Please turn to page 214 and we see that on 11 November, 2008 you've signed and obtained Dr Hugh's signature on invoices at 214, 216, 218 and 220?---Yes, correct.

So, at least according to these documents - - -?---That's been provided.

40

- - - your evidence is that you attended on at least two occasions, on 31 October and 11 November and procured his signatures. Is that right?--- That's correct.

And where did you see him on 11 November?---It was always in his office. I can't give you the floor number, I'm sorry.

Can you just step us through how it was that you came to speak with him and obtain his signature?---Just again, accordance to the ah, cost centre and his name he approached.

So, we should understand that you obtained your cost centre number for general surgery department from the Royal North Shore Hospital and in that process you identified - - -?---Not obtaining, they were available on speed dial so that, I didn't have search for it or deliberately go looking for it.

But I thought you told me earlier that the large man on the ground floor at main reception of Royal North Shore gave you those details?---No, no, not the cost centre number. I mean the telephone number.

10

I see?---I'm talking about the telephone number, sorry.

All right. Perhaps my question was unclear. Is the position that you obtained the cost centre number - - -?---Yes.

- - - which identified the general surgery department - - -?---Yes, yes.

- - - you then were able to identify Dr Hugh as the head of that department?  
---That's correct.

20

And having ascertained that information you went to see him. Is that right?  
---That's correct.

And then you used the telephone number which I think we see, to use by way of example, on page 206 at the foot of the page, the number X-6-4-7-2-0. Is that right?---That's correct.

And by use of telephone you arranged to go and see him. Is that right?  
---That's correct.

30

And where did you go and see him?---In his office. I can't, I just cannot picture his office at the moment.

All right. Well can you recall to mind any particular feature about his office?---No. Honestly, I can't. I've described everything to you that I can remember.

40

In absolute detail, you have, Ms Lazarus. So what can you tell me about Dr Hugh's office?---I'm telling you I cannot tell you what his office is, but like I said in evidence, that Ross Smith gave, there was direct communication that's outlined on, in line - - -

Well, let's not go to that?---Okay. But I'm just saying that - - -

Just tell me about Dr Hugh's office?--- - - - I have met him. There is, because there is an implication that these signatures are false and I'm just trying to explain to you there was constant communication and he actually,

Thomas Hugh actually took the initiative to call Ross Smith, which he's (not transcribable)

Well, we'll go through the detail of your attendance in a moment. But can you recall to mind and tell us please any particular feature of Dr Hugh's office when you went to see him on these two occasions?---I honestly cannot remember any sort of feature.

10 All right?---I just cannot even picture the person at the moment. And I've told you that, even in terms of nurses, Ellen Barlow, I told you in first hearing - - -

This is not dealing with Ms Barlow, we're dealing with Dr Hugh?---I honestly can't remember.

All right?---(not transcribable) when I couldn't put her face and name together, I told you honestly, I cannot even picture her.

20 Who did you have to see in order to get access to Dr Hugh? Did you see his secretary? Did you see a receptionist? Did you see anyone?---No, I saw him directly.

All right. And did you have a telephone conversation with him before you went to see him on each occasion?---I would have. I would have, yes.

And when you went to see Dr Hugh what did you say?---I introduced, he knew that, who - - -

30 No, don't tell us what he knew. Just tell me what you said to him, please? ---Whose student I was.

Just tell me what you said to him, please?---I wouldn't, I can't remember three years ago (not transcribable)

40 As best you recall what did you say to Dr Hugh which led to these signatures being obtained?---I would have introduced myself to him, name and who's my supervisor. That's the reason why he would have known Ross Smith is my supervisor. I told him that the, this is the non-order voucher. This is the payment that's going through for the clinical trial that's been conducted. And, and that's the company. And that's about it. He looked at it (not transcribable) and signed it.

And - - -?---And no further communication or any other reference was made.

It sounds like a very brief conversation on each occasion?---It was.

Did he ask you any questions about what the clinical trial was that you were involved with?---No.

Did he ask you what the purpose of the trial was?---No.

Did he understand from what you said to him that you were a PhD student or would he have seen that on your badge?---No, it didn't even come up.

10 Did he see it, would he have seen it on your badge?---Yes. I always wore my badge.

Did he ask you what you were doing with your PhD studies?---Oh, no, I could not remember.

And your evidence is that you saw him pick up his pen and sign where we see what purports to be his signature on each of these voucher forms?  
---That's correct.

20 And once you got that submitted with the invoices the vouchers for payment?---Yes. Again that process was shown to me by the accounts department. This was, after the signature they were taken to the accounts department, put in an internal envelope, internal mail envelope and sent to the department that they outlined for, they I mean by the finance department outlined to me that that's where these non-order vouchers need to be sent through.

30 And I understood that the non-order vouchers with the invoices through the internal mail were sent to Newcastle for payment, for, I'm sorry, for processing and payment?---That's correct. The originals are there - - -

Now, can I ask you, please, when you presented each of the vouchers that we've identified to Dr Hugh for signature, did you have attached to each of them the invoice- - -?---That's correct.

- - -to which each related?---Yes. They were all stapled together.

40 So for example, just so we're clear, in relation to the vouchers signed in October 2008, Dr Hugh was presented with four vouchers attaching the four invoices which follow one another in the examination bundle. Is that right?  
---That's correct, yes.

And your evidence is that he didn't ask one question about what they related to?---To my best of my knowledge, no. Like I said, I can't remember the person. But like I said, the originals are there and again in December it was instructed that I go and assist the ICAC body to locate the originals and I wasn't contacted at all, nor was my lawyer. Since then I've actually taken steps to find and ah, the details were put forward to the ICAC again in obtaining the originals, including batch numbers and storage warehouses.

Now, 216. Could I take you to that, please. I do apologise, Ms Lazarus, I meant 226, 226?---Okay. 226.

Now- - -?---226.

Now, should we understand that by reference to the voucher at 226, 232, 240- - -?---226?

10 Yes. Page 232, 240- - -?---Yes.

- - -and 244- - -?---Yes.

- - -you saw and spoke with Dr Back on about 16 January, 2009?---Yes, that's correct.

And where did you meet with him?---I remember him clearly because I had to go see him twice. Um, I met him in the radiology, oncology radiology department, which is outside um, ah, not in the main building.

20

Ah hmm?---It's further out um, where the Pacific Highway is. Um, and that's where those signatures were obtained.

I'm sorry, could you just explain to me where it was that you met Dr Back on- - -?---In the oncology radiology department.

And where is that?---Outside the main office um, outside the main hospital.

And within the grounds of Royal North Shore Hospital?---Oh, yes.

30

So it's adjacent to the public hospital, is it?---Um, it's, public hospital is facing this way and that particular building is on that side, closer to the Pacific Highway.

So you didn't see him in any private consulting rooms or- - -?---That was, I think those are his private consulting room but it's the oncology radiology department. I'm not sure if those are his consulting rooms. Like I said, I didn't screen any of his patients um, I had not other communication with him.

40

All right. Just if I can get the geography clear?---Yep.

Your evidence is that you saw Dr Back within the oncology radiology area adjacent to the public hospital at Royal North Shore. Is that right?---Ah, yes. That was closer to the Pacific Highway.

Now, when you saw him, were you wearing your identification badge?  
---Oh, yes, always, 'cause you need access um, to the- - -

I just want to know whether you were wearing it, that's all, Ms Lazarus?  
---Yes.

Now, when you spoke with him, did you introduce yourself to him as a laboratory technician?---No.

10 And can you recall the conversation that you had with Dr Back?---Um, roughly, because he had me do um, he um, had other process, like he had me follow other processes. Um, he asked about the trial and um, and that he knew he was signing on behalf of Nick Pavlakis. Um- - -

20 Could you tell me, please, what it is that you asked him to do?---Um, at that point this was filled out and when I went to Nick Pavlakis' office um, he wasn't there. Um, I wasn't aware that I could leave it with the receptionist at that stage so I didn't leave it with the receptionist. I came and um, I, and um, the accounts department said that this is the order you have to follow. So Michael Back was the person that I had to contact. Um, I went to Michael Back and um, he, he asked me questions about and it was all laid out to him.

So did you show him each voucher- - -?---Oh, yes.

- - -with the invoices attached?---Oh, yes.

And what do you say that he did in relation to them?---Um, he signed them.

30 But did he appear to you to look at them?---Oh, yes, he looked at them, he asked any questions.

Right. Did he- - -?---Like I said, I had a lengthy conversation with him.

Right. Well, tell me the questions that he asked?---Um, what the research was about um, who the supervisor was um, just in regards to the research that was being conducted um, and that's about it. And then he signed it and um, he made a photocopy. He made three photocopies. He gave me a photocopy, he put one photocopy of all the documents, not just the non-order voucher, he had all in Nick Pavlakis' pigeon-hole.

40 You saw him do that, did you?---Yes. And he took one copy himself and he gave me another copy plus the originals.

Ah hmm?---The originals I put into um, the again internal mail and send that through and um, and um, photocopy and things like that I filed away myself. But then what had happened was, they couldn't, they didn't find the ones that I sent through but since then they have 'cause you have a copy of it, yeah, I believe, 'cause there's two copies. They couldn't find the process, to process that. Um, so, and I couldn't locate my photocopy so I

went back down to Michael Back and I said, "Can I please have a photocopy that you sent through because they can't locate, the accounts department cannot locate these non-order vouchers." He said, "Oh, yes, I've still got that copy." Ah, from the copy he made a copy again and gave me a set of copy like that copy and he kept the copy, original copy that he had with himself.

10 Ah hmm?---And um, I took that copy um, and um, it didn't have my signature on it 'cause he'd only signed it at that stage when he made the photocopies. I signed it and I re-sent it as an example to the person I had contacted on the phone in regards to the payment.

I see. Thank you. Now, did he tell you when he was signing these or shortly before that, that he didn't hold any financial delegation to sign these forms?---Ah, I cannot recall, no.

Is there any reason why he signed these forms and noted that he was doing so on behalf of Dr Pavlakis?---Yes, that's correct, because- - -

20 Well, did he say anything to you about that?---He said um, roughly that oh, ah, "This is what Nick has to sign?" I go, "Yeah, that's right, he's not there." And for that reason that was the end of that conversation. For that reason he, he wrote, signing on behalf of Nick.

And is that because you understood Dr Pavlakis was on leave?---Ah, he wasn't there. Whether he was on leave or not, I'm not quite sure. He wasn't there at that time.

30 And did you tell Dr Back that unless the forms were signed there would be a hold-up on the conduct of clinical trials?---No (not transcribable)

Did you say anything to him or intimate to him in any way that the signing of these forms for the purpose of procuring payment was urgent?---No, no.

Or was required immediately?---No.

40 Were you pushy in your manner in terms of suggesting to him that he should sign these and sign them quickly otherwise the performance of the clinical trials would be interrupted?---No. I don't know how pushy I can possibly be by um, in terms of getting signatures. Um, I don't understand how, what kind of pushiness I could show for them to actually sign things.

Now, just coming to the cost centre number, can you tell me what you understood the relationship to be between the cost centre number referred to on the voucher at 226 and Dr Pavlakis?---I believe that to be his, his cost centre number.

Does that number, did you understand, have any relationship to Dr Back?

---No, I didn't know that.

All right?---I didn't change any of those numbers.

Now, what did you understand the fund number on the form to relate to?

10 ---The fund number was a generic number that appeared um, that I was told that appears on all the forms and that all of them have to have that and that's the GST number that the accounts department gave me as well. Um, like the accounts department, he filled out one of these and said, "These numbers will not change, the following number is the number that will change."

All right. Now would you come through please to page 230 of Exhibit 1 and there we see a series of vouchers - - -?---Sorry?

- - - that appears to have been signed by Dr Sywak, that's S-Y-W-A-K. Page 230?---No, I don't have page 230.

20 Page 230. Could I have access to Exhibit 1, please? Have you got any loose pages at all with you there in the witness box?---No.

Now at page 230 Ms Lazarus, we start with a series of vouchers that appear to have been signed by Mr Sywak. Do you see that?---That's correct.

And if you look at 230 and 236?---230 and 2 - - -

3-6 and 2-3-8 and 2-4-8 you'll see vouchers that he appears to have signed on 21 January, 2009. Is that right?---That's correct.

30 All right. Can you tell us please where it was that you saw Dr Sywak and obtained his signature?---Yes. In his office. Those are his private consulting rooms.

And where are his private consulting rooms?---On Christie Street in the AMA building.

I see. And you're sure that it was Dr Sywak that you saw in rooms in Christie Street?---Yeah, those are his consulting rooms.

40 All right?---But don't quote me on the name of the street, 'cause - - -

All right. Now can you tell me how it was that you came to identify Dr Sywak and approach him?---Again it was just a cost centre number relationship.

So you'd ascertained the cost centre number that we see illustrated by way of example on page 230 and you identified Dr Sywak as being the relevant head of that department did you?---That's correct.

All right. And how did you get in touch with Dr Sywak?---Telephone, via his secretary.

10 And how many times did you see him?---Every time those vouchers, I wouldn't be able to tell you an exact number. Quite often and also because I had made those, you know, those errors that I've made in terms of carrying out the same, the same details, I'd actually made an error on one of the, the non-order vouchers where I had written the wrong company as to the wrong voucher. And the receptionist was kind enough, again this was carried on a USB stick, was nice enough to let me use, behind her desk there was another computer room which is a non-network computer room, it's just, sorry, non-network computer, it's just a computer. 'Cause she asked me clearly, she said, "You don't need the internet do you?" I said, "No, no, no. I just need to make this change because I've written the wrong company name on the non-order voucher." So she let me use that computer and reprint the non-order vouchers while I waited for him.

20 So we're at Dr Sywak's private consulting rooms - - -?---That's correct.

- - - in Christie Street and you've got access to the computer room within his office have you?---That's the computer that has no connection. It's just a computer on its own.

All right. You had access to a computer - - -?---That's right.

- - - and Dr Sywak's secretary gave you that access did she?---That's correct.

30 And you, with the use of this form located on a USB stick were able via the computer to amend the name of the supplier. Is that what you're saying? ---That's correct. That's correct.

You then used the facilities there to print out the relevant form did you? ---That's correct.

Did you then attach it to the invoice that we, see for example at 231? ---That's correct.

40 And what did you then do with the voucher and the invoice?---I waited for him to, to be free. Like he was busy with patients, at which he come out and he said, "Oh, come in." And we had a very lengthy conversation in terms of what I'm doing, what this is about. He goes, okay. And, yeah, it was, he was talking about other stuff in general. I've seen him on several occasions, obviously for the signature. Again, I had, had screened no patients of his. He was aware of who the supervisor was and what department I belonged to. And, yeah, and at which point - - -

So what's the duration of the conversation that you had with him on 21 January, 2009 and obtained these signatures?---Maybe 10 minutes.

All right. And again you presented each of the vouchers to him with the attached invoices did you?---That's correct.

And did he ask you any questions about what the payments related to?  
---Yes.

10 And what did he ask you?---He roughly asked me, again I can't quote exactly, he roughly asked me that, what's this, like what is this research about and I actually told him about the device and what we were doing and things like that. And what patients were being screened. Like I said, it was a, in terms of conversations, that 10 minute conversation was quite detailed and lengthy.

All right. And after you've had that discussion you saw him sign each of these forms did you?---That's correct.

20 And then he gave them back to you?---That's correct.

And you then processed them through the internal mail as you've discussed?---Through the internal mail, yes. I'm not sure if you obtained the originals from my house of these or not, but they're there in storage with a batch of others.

Now could you look at page 291, please?---291?

30 Thank you. And should we see starting at 291 a further series of vouchers that Dr Sywak appears to have signed. Have you got 291?---Yes.

Thank you. Would you also look at 293?---Yes.

295 and 297. And is it the position that you attended again on Dr Sywak and obtained his signature on those four voucher forms on 28 July, 2009?  
---That's correct.

40 All right. And can you just tell us about where it was that you met with him on that occasion?---On each occasion I met him in his consulting rooms.

And when you arrived on this occasion in July, 2009 did you have access to his secretary's computer?---No, no, no.

The form that you had arrived on that occasion was correct was it?---That's correct.

As far as you were concerned?---Yes.

And so just tell me what happened on that occasion which led to him signing these forms?---He, he, because he already knew me from the first meeting, he didn't, it wasn't a very lengthy conversation as the first conversation. And he just asked what was, and I said these are the payments again. He goes, "Oh, okay, no problem." And he didn't even give it a second good look.

10 So, so what do, do you say that he looked at the invoices that were attached to each of the vouchers or - - -?---They were always attached, yes.

Sure. But did you see him actually look at the invoices?---Yes. Yes, because he flipped through each page, because both the invoice and the voucher, the two pages are always stapled together.

I see?---And he flicked through.

20 So he appeared to you to have looked through each of the vouchers and the invoices and you saw him grab his pen and then sign adjacent to authorisation office did you?---That's correct. And I think you've got the originals of that.

All right. Now can you tell me please what relationship if any there was at the time you saw Dr Sywak, between him and the cost centre referred to on each of the vouchers?---I believed to be that his cost centre number.

And again did you obtain the cost centre number that you've already explained?---Yes, in relation to this.

30 And how is it that you were able to identify Dr Sywak as having anything to do with that particular cost centre number?---Exactly the same way, the accounts department, that's the cost centre number and that's the supervisor.

So in order to have the form processed you identify the cost centre, you identify Dr Sywak as the relevant doctor who had authority to sign with respect to that number?---That's correct.

And that's what then led you to approach him for signature. Is that right? ---That's correct.

40 Thank you, finally, could I ask you to go please to page 265 and I need to deal with a series of invoices that appear to have been signed by Dr Pavlakis?---Page 265?

If we could start at 265 and, madam, could you look at in this connection the invoices of 265, 267, 269, 271 and 273?---273?

273 is the last of the five vouchers that I'm referring you to and we should understand, should we, that you saw Dr Pavlakis on 16 February, 2009 and obtained his signature on each of those five vouchers?---That's correct.

Where did you see him?---In his private rooms, that's in the private Royal North Shore Hospital.

What level?---It's not coming to mind, sorry.

10 And how was it that you were able to see him in his private consulting rooms?---Again, just, he was the, he's the head of department and I went there, excused myself on the first instance and he was, he was going through the patients, he asked me to come in and I said these are the, and since you're, and then since you're the head of department I just was wondering if you can authorise these payments. He asked me questions about who the supervisor was and if he was the right person. He wasn't sure about who was the right person. I told him that, who, who, who the supervisor was, Ross Smith. He looked through all the pages and he signed. The second  
20 time when I went there again he wasn't, he was away. I spoke to the secretary. She said oh, he's, he'll be back soon, you can leave them here. I left them with the secretary, this is the second occasion and I came back and I picked them up from the secretary and they were already signed.

All right?---On the third occasion he was there and - - -

Well, before we go to the third, so should we understand then on 16 February, 2009, which is the date that the five invoice, the five vouchers I've identified related to - - -?---Ah hmm.

30 - - - you attended his rooms in the private hospital, you had a conversation with him, you left the vouchers for him to sign and then you collected them at some later point in time. Is that right?---Not on the 16<sup>th</sup>.

I'm sorry. Well, just tell me what, again what happened on the 16<sup>th</sup>? You had the conversation?---On, the first time, yes, the first time there was a conversation in his office.

And you provided him with the voucher and the invoices attached?---That's correct.

40 Did he ask you any questions about what it related to?---Yes, plenty of questions.

Did he look at each of the invoices from what you could see?---Yes.

And what did he do?---He glanced, he looked at them because that was at his desk. I sat where the patient sits and he sat where he sits. He went through all the vouchers and the invoices. He asked me who the supervisor

was because like I said he was unclear a little bit as, as to whether he should be the one signing them. I told him it's Ross Smith. He said okay, that's fine I am a delegated person to sign this.

What, he told you that did he?---Yes.

I see. And he then proceeded to sign each of these five vouchers did he?  
---That's correct.

10 Now, what is the relationship if any between the cost centre number on these vouchers and Dr Pavlakis?---Because I believe that to be his cost centre number.

All right. Now, the next series of vouchers start at page 278 and if you could look at the voucher at 278, 280, 282, 284, 299, there's a few of these, 301, 303 and finally 305 and 307?---That's correct.

Now, should we understand that you have signed and dated each of those vouchers 29 May, 2009 but there does not appear to be any date adjacent to  
20 Dr Pavlakis' signature?---No, that's correct.

So was the voucher signed by him at or about the same time as you have dated adjacent to your own signature?---That's correct.

So we should understand that all of the vouchers that I just identified were presented by you to him, that is Dr Pavlakis, on or about 24 May or 29 May, 2009, is that right?---That's correct. This is an instance where I went and he was away for about ten minutes or, or so the receptionist said and I left these with her.

30 So you attended in his rooms again at the private hospital?---That's correct.

And what did you say to him on this occasion when you got him to sign all of these vouchers?---I didn't see him on that occasion.

I see. So you left the vouchers with who?---The receptionist.

And did you give her an instruction?---I said these are for Mr Pavlakis, could you please give these for him to be authorised and he, and I'll come  
40 back. She said oh, he'll be back in ten minutes. All right. Then I said (not transcribable) I'll be back. I think it was, I remember feeling, because Johel was coming that day, he was going to have a look at the files so I was, I had to accommodate him a little bit as well in terms of that so I left that, left these with her and came later that afternoon to pick them up.

All right. And when you collected them from whom did you collect them?  
---The receptionist.

And when you collected them they had Dr Pavlakis' signature on each of them, did he?---Correct.

And so we should understand that on the occasion of 29 May, 2009 you didn't actually speak with Dr Pavlakis, only his secretary?---Only his secretary but I did speak to him in the Kolling building because there was a meeting which was after this, in the Kolling building and it was in regards to a completely unrelated matter and he was going through and I said oh, oh (not transcribable) he said oh, that's okay and then he just left.

10

And when speaking with Dr Pavlakis on the first occasion did he ask you any questions about why it was that you were screening for cervical cancer using the Medex device?---No, he didn't.

Was there any conversation about that subject matter at all?---No, because I didn't outline to him what the Medex device was (not transcribable) didn't inquire about and I told him that there are (not transcribable) and the prostate patients, prostate patients being the largest group and then he inquired a little bit about who, like he was, when I was in his office as the head of department he did have some questions to ask but I think he, he knew, when he found out who my supervisor was he was a little bit more, in terms of I can verify this or (not transcribable) not relaxed but he knew where to go and verify these things. I mean, at that point I did explain to him about the clinic that I was using and the, the way he acknowledged it (not transcribable) what it was, where it was and, and what kind of patients I was using like it was said that these patients from the prostate cancer clinic, they were all post biopsy, had biopsies actually carried out elsewhere and things like that. He was aware that for this clinical trial they're able to ascertain the number of patients that I could go through there on those two clinics, that there are patients, the volume of patients, I believe in six months they actually see roughly around 600 - - -

20

30

MR ALEXIS: I'm sorry, Ms Lazarus, are you conveying to us the content of a conversation you had with Dr Pavlakis?---Yeah, that's right.

I see?---Yeah, so he was aware of that there are a substantial amount or number of patients because he was commenting about the, the kind of, the volume of patients he has and the volume of patients they had is still more relaxed to the volume of patients he had in terms of like he was making a joke.

40

So were you talking to him about the prostate screening tests or the cervical cancer screening test?---Prostate.

Yes?---The cervical um, he, I told him about the cervical as well but he didn't comment about the cervical.

I see?---But he was just commenting about that hospital because that's the hospital where his, he probably knew Vaux and I don't know why he was making a comment about that.

All right. Thank you. Commissioner, that's all I wish to ask Ms Lazarus in this tranche of examination. I'd ask that she be stood down and may I indicate that I propose recalling her towards the conclusion of the inquiry.

10 THE COMMISSIONER: Thank you, Ms Lazarus, you may stand down.

**THE WITNESS STOOD DOWN** **[12.00pm]**

MR ALEXIS: Just pardon me a moment, Commissioner. I call Helen McGilligan, Commissioner.

THE COMMISSIONER: Ms Furness?

20 MS FURNESS: Commissioner, I appear for Ms McGilligan and make an application on her behalf.

THE COMMISSIONER: You may be seated. Pursuant to section 38 of the Independent Commission Against Corruption Act, I declare that all answers given by Ms McGilligan and all documents and things produced by her during the course of her evidence at this public inquiry are to be regarded as having been given or produced on objection and accordingly there is no need for her to make objection in respect of any particular answer given or document or thing produced.

30

**PURSUANT TO SECTION 38 OF THE INDEPENDENT COMMISSION AGAINST CORRUPTION ACT, I DECLARE THAT ALL ANSWERS GIVEN BY MS MCGILLIGAN AND ALL DOCUMENTS AND THINGS PRODUCED BY HER DURING THE COURSE OF HER EVIDENCE AT THIS PUBLIC INQUIRY ARE TO BE REGARDED AS HAVING BEEN GIVEN OR PRODUCED ON OBJECTION AND ACCORDINGLY THERE IS NO NEED FOR HER TO MAKE OBJECTION IN RESPECT OF ANY PARTICULAR ANSWER GIVEN OR DOCUMENT OR THING PRODUCED.**

40

THE COMMISSIONER: Ms McGilligan, would you like to give your evidence under oath or do you wish to affirm the truth of your evidence?

MS MCGILLIGAN: Oath's fine.

THE COMMISSIONER: Mr Alexis?

MR ALEXIS: Thank you, Commissioner. Madam, is your full name Helen McGilligan?---Helen Elizabeth McGilligan, yes.

10 Helen Elizabeth McGilligan. Thank you. Do you prefer Mrs McGilligan or Ms McGilligan?---Ms, thank you.

Thank you. Now, you are currently retired. Is that correct?---Semi-retired, yes.

And in your prior working life, is it the case that you worked for about 11 years as Professor Neville Hacker's personal assistant at the Royal Hospital for Women at Randwick?---I was.

20 Now, could I ask you whether or not in relation to this matter you've given two written statements of evidence, one on 25 August, 2010, the other on 23 December, 2010?---That's right.

Could I show you each of those statements, please. And would be good enough to confirm for me that the two documents I've provided to you are copies of the two statements I just referred to?---Yes, they are.

Thank you. I tender each of those statements, Commissioner.

30 THE COMMISSIONER: Yes. The statement by Ms McGilligan of 25 August, 2010, will be Exhibit 28.

**#EXHIBIT 28 - STATEMENT OF HELEN MCGILLIGAN DATED 21 AUGUST 2010**

THE COMMISSIONER: And the statement by her of 23 December, 2010, will be Exhibit 29.

40

**#EXHIBIT 29 - STATEMENT OF HELEN MCGILLIGAN 23 DECEMBER 2010**

MR ALEXIS: Now, in paragraph 5 of your first statement, Ms McGilligan, do we see there set out the duties that you performed for Professor Hacker as his personal assistant?---You do, yes.

And one of the matters you refer to there towards the end of that paragraph relates to the escorting of research students to the security office in order for them to obtain an ID access card. Do you see that?---That's right.

Now, in paragraph 6, and I'll come back to that, but in paragraph 6 you tell us about when it was that you first met Ms Lazarus and you've put it sometime in 2007 and 2008. Are you able to assist us with a little more specificity on the likely time that you first met her?---It was approximately towards the end of 2007.

10

Thank you. And you tell us that it was on a Friday because of Professor Hacker's schedule. Is that right?---That's correct.

And then over the page at paragraph 7 you tell us that at some later point, Professor Hacker told you that Ms Lazarus was going to conduct some research. Do you see that?---That's right.

Are you able to recall to mind as best you can what it was that Professor Hacker said to you about Ms Lazarus and what she would be doing?

20

---Not quite, because when the students ring up and inquire as to their form of research they wish to do, I ask them to email me and outline the research and I pass it by Professor Hacker and it's under, comes under his cap he will do it or have a look at it, interview them. It was a little bit difficult to understand because there was machinery or some equipment was involved, but it was a research into cervical cancer.

Ah hmm?---And in my position, that was as far as I needed to know basically.

30

All right. And after the initial introduction, approximately how long was it until Professor Hacker conveyed to you that she would be conducting research into cervical cancer?---Oh, I can't quite recall exactly, no. I couldn't give you an exact date on that.

All right. Now, I just want to return to the subject of the identification badge and the access card. At what point in time did you escort Ms, I'm sorry, let me withdraw that, let me go back a step. In paragraph 5 of your statement you tell us that you would often escort students to obtain an identification badge and an access card. Do you recall doing that with Ms Lazarus?---I do.

40

And I'll now put the question I was going to ask you. When in relation to the time of your first meeting and the time that Professor Hacker conveyed to you that she would be undertaking some research, did you escort her for the purpose of obtaining the relevant badge and card?---I could only guess that that date. Approximately a month later.

What I'm seeking to really understand is whether or not it followed Professor Hacker telling you about the fact that she would be conducting some research and that he would be supervising her in doing so?---No doubt not on the same day, maybe another visit when she came to the, to the unit that he had said by then that she's going to do the research and will need access and an ID card, right, so that people, obviously she'd have access to the, in and out of the hospital.

10 Mmm. Now, where did you take her to obtain the badge and the card?---To the security office.

And did you remain with her while she undertook whatever procedure was there to obtain those privileges?---I did. I actually waited outside.

And do you have any understanding as to what occurred inside when- -? ---No. They just generally take your photograph and, and the form's filled in and that's it.

20 And is the card issued on the spot or is it- -?---Yes.

And can you assist us with what is contained within the identification badge and access card that's issued?---It's a photograph with a um, with a, a title or whether it be a PA to gynae-oncology or a PhD student or, you know, obstetrics, research fellow, all that.

30 All right. And if I could just press a little further on timing, what's your best recollection as to when it approximately was that you escorted Ms Lazarus to obtain her identification badge and security access pass? ---Maybe November 2007.

All right. Now, I want to come to paragraph 9 of your statement, but just while we are on the subject of introductions and access cards and the like, have you ever met anyone introduced as or known to you as Jessica Lazarus?---No.

Do you have any recollection of ever escorting someone by the name of Jessica Lazarus to obtain an identification badge or an access card- -? ---No.

40 - - -to the security office?---No.

As a matter of practice is there anyone else within Professor Hacker's office or indeed the Gynaecological Cancer Centre at Royal Women's Hospital that would escort someone like a student or a junior researcher to the security office to obtain such an ID badge or pass?---Probably not at that time.

Apart from you is my question?---No.

All right. Do you recall ever an occasion being present when Professor Hacker made an introduction of Jessica Lazarus to you and at the time Professor Hacker was in his scrubs?---No.

Now in paragraph 9 you tell us of an occasion when Ms Lazarus attended the centre and told you that she'd received a grant. Do you see that?  
---That's right.

10 Can you tell us what it was that she said about that subject?---She said that she'd received a grant to do research into cervical cancer and she should be getting some equipment and really couldn't start the, the research until she gets the equipment. And (not transcribable), the equipment I didn't know what it was, would it be computerised or whether it was in hands on or invasive or non-invasive, I wasn't, I wasn't au fait with what type of equipment it was or how big it was or who was going to install it.

Did she say from whom the grant was received?---I think she did mention a company at the time, which I can't recall the exact name of the company.  
20

All right. And did she give any indication as to the value of the grant or the amount of money involved?---200 odd thousand dollars she said.

All right. Now in paragraph 10 of your first statement you refer in the second sentence to an awareness concerning the subject of machinery. And you tell us that it never arrived at the office. Do you see that?---Ah hmm.

Now can I ask you what sort of machinery you're referring to there?---This is what she outlined as equipment. I've said machinery, but whether it be equipment or computerised equipment or some sort of device, I was not aware what it was. But as far as I know it hadn't arrived.  
30

Right. And how is it that you would be aware of such a thing?---It would come to the office and say this is for so and so, where, where has it got to go and we would then make arrangements of which room it's going to go to or where it was going to, if it be a computer, well it was going to that office, if it be like we're talking we would have made arrangements for where it was going to be set up in the clinic area.

40 All right. And if I could ask you to assume that the equipment may include a handheld device used to examine a patient to determine the presence of cancer, a gadget which connects the device to a computer called a hasp and a laptop computer or some other form of portable computer, did you ever see of those items of equipment either any or all arriving at the office in relation to any clinical trial being conducted by Ms Lazarus?---No, I didn't.

Now I just want to jump if I may to your second statement and ask you about something you tell us in paragraph 8. You there refer to an occasion

shortly after Ms Lazarus commenced at the centre where a request was made. Do you see that?---(NO AUDIBLE REPLY)

Could you tell us what she said?---Oh, can I have, can I have key for the door?

And this was the door to where?---To the main office of the Gynaecological Cancer Centre.

10 All right. We'll be able to identify that photographically in a minute, but can you tell us what your response to that request was?---No.

And are you conveying that as your answer to her request or are you telling me you can't remember?---We have a lot of, no, we have a lot of fellows coming to-ing and fro-ing from overseas who, who are actually hands on doctors, who are seeing patients at 4 o'clock in the morning, 5 o'clock. They have to have access to the, to the office. Research people don't particularly have to. They can work within the, you know, 8.30 to 5 o'clock area.

20

Was that something you had to raise with Professor Hacker?---We seemed to lose a few keys, keys would go back to Denmark and wherever and we have to constantly have new keys being made.

Now if I could ask you - - ?---We were getting a bit loose with the keys.

Thank you very much. Now if I could take you back to paragraph 8 of your first statement and you there deal with the subject of attendance by Ms Lazarus and can you tell me what it was that occurred from time to time before you had a discussion with her about the subject of attendance or non-attendance?---She'd make appointments to see Professor Hacker, usually again on a Friday and would often not, not arrive. On one time she did arrive I, I chided you might say and said, you can't do this. This is, you know, he has other things to attend to. And you must either arrive or not arrive.

30

And what did she say to you in response to that?---I'm sorry.

All right. The subject of attendance is also dealt with in your second statement at paragraph 5. And you there describe about four lines from the bottom of that paragraph number 5 as attendance for approximately one year on an irregular basis?---That's right.

40

Do you see that?---Ah hmm.

And then you go on to say some weeks you'd see her three times, other weeks you wouldn't see her at all?---That's right.

Now just to get some clarity around the duration of each time that you saw her. With respect to the three times a week on those particular weeks, for how long each day would you see her for in the office or around the office?  
---Maybe two hours. Maybe an hour and a half.

And back when you were working with Professor Hacker, what was your normal commencement time each day?---8.30 until whenever.

10 And whenever, we should understand as something either around 5.00 or after 5.00?---6.00.

6.00pm each day?---Half past 5.00, 6.00.

Thank you. And that's five days a week?---Yes.

And so in that context is your evidence that on those occasions when she was there she was there for a couple of hours on those particular days?  
---That's right. Yes.

20 Now Ms McGilligan, I want to show you a drawing which is Exhibit 12 in this inquiry. And may I indicate to you that this was drawn by another witness as nothing more than an indicative and very rough sketch of the layout of the area. All right?---That's right.

And I also want to show you, and you can view this on your screen, a video of the area and what we're going to do is start, if you can just go back, back a bit. That's the start is it? All right. And what I'd like to do, Ms McGilligan, is identify by reference to the drawing, which is Exhibit 12 what we're seeing in the, in the video. And at various points, I'll have the  
30 operator pause the video so that we can discuss what we're seeing. Do you follow?---Yep.

Thank you. Can we start the video, please? Now the gentleman you're observing on your screen is an investigator from ICAC, Mr Kane. Where is he standing?---He's standing at the entrance to the, he's standing at the entrance to the filing room. We had compactuses at the back with all the patient files.

40 All right. Can we just pause there, please? Now just when we look at Exhibit 12, the entry way through which one can see various compactus files on the right hand side is located approximately where on the diagram?--You walk in that main door, around the, you walk in the main door, around my desk and I'm there. And the main door is there. You walk in and go around my desk and into that room.

We'll get a better overview in a minute?---Mmm.

But we should understand should we that Inspector Kane has walked through the doorway - - -?---Through the door, around my desk - - -

And if we just look at Exhibit 12 you'll see the word "lift" running perpendicular to the corridor?---Yeah, the back there, ah hmm.

And the entry way is down a corridor, we've walked in and we're turning and looking at your desk and we're seeing Mr Kane in the footage that we're viewing now. Is that right?---That's right.

10

And the filing room is behind your desk. Is that right?---That's right.

Thank you. Could we play a little more please.

(VIDEO FOOTAGE PLAYED)

MR ALEXIS: If you just pause there for a moment, please. Now, as the film has come back and panned to the area immediately outside of the filing room can you tell us what we are looking at?---What was my desk.

20

Thank you. So the area on the other side of the, the bench that runs at a right angle to the wall is where you occupied your position. Is that right? ---That's right. Where that, behind the, behind the pot plant.

And is it the pot plant the pot that appears not to have a plant?---That's right.

Thank you.

30 MR HOGAN: It's a former pot plant?---The former pot plant.

MR ALEXIS: Thank you for that clarity, counsel. Yes, thank, could we play the video further please.

(VIDEO FOOTAGE PLAYED)

MR ALEXIS: Now, the shelves that we're seeing adjacent to your workstation area, is that where you kept the materials that you would use from day to day?---Yes.

40

And just pausing there for a moment, what in terms of stationery letterhead for the cancer centre and the like is available in that area?---When I was there, right behind this gentleman, there's a stationery holder with all the little slots in it, all right, which would have the, your white copy paper, your yellow paper for the operation reports, the letterhead, the Gynaecological Cancer Centre letterhead and requisitions for x-rays, radiology, et cetera.

Thank you. Yes, can we play the video further please.

(VIDEO FOOTAGE PLAYED)

MR ALEXIS: Can we just fast forward that. All right. Just pausing there, Ms McGilligan, underneath the open shelves we saw Inspector Kane looking into a timber filing cabinet with doors that slid from one side to the other. Did you see that?---Yes.

10 And what, and we can see now in, in the photograph the cabinet I'm referring to, one of the doors is open?---Ah hmm.

What was kept in that cabinet with the sliding doors when you worked for Professor Hacker?---As you can see, a couple of old diaries, some spare letterhead, some spare letterhead, my handbag, odds and pieces, bits of Dictaphones, bits and pieces.

All right?---No files, no. That's about it. Thank you. Can we continue please.

20 (VIDEO FOOTAGE PLAYED)

MR ALEXIS: If you just fast forward through this area. And just, sorry, now you can just pause it there, have you seen the section of the video your computer screen and computer that you used to operate from. It flashed pretty quickly across the screen?---Um, yes, it flashed quickly.

You see it now?---Yes, I see it.

30 Thank you, to the left is that the printer?---Yes.

That you just saw?---Mmm.

Thank you, okay?---I had the printer where it is now.

There's, there's your, there's your stationery box for the letterheads and what are the things in them, paper?---(NO AUDIBLE REPLY)

40 Thank you. So that was to the right of your computer? Is that right?---It's now changed around slightly to what I had. I had it on the left and the printer on the right.

All right, thank you. Now, just pausing here, should we understand that Mr Kane has entered the filing room?---He has.

Which we saw earlier behind your desk?---He has.

And we should understand that the filing cabinets are have rolling sorts of shelves that contain all of the patient's files. Is that right?---That's right.

And is the door to the filing room in which the patient's records are kept a room that is locked when unattended?---There's no door on that.

All right, thank you. Keep going, please.

(VIDEO FOOTAGE PLAYED)

10 MR ALEXIS: And we're seeing, in the footage now, the patient files in the right, they appear to be Manilla type folders?---That's right.

Thank you. Keep going. Just pausing there. The camera has moved from the right-hand side of the filing room with the filing compactor surround to the front and then the left-hand side of that room. Can you tell us what was there when you were working for Professor Hacker, in terms of equipment and storage capacity?---Um, there was a, two great, two tall grey filing um, cabinets, a table on the left um, two, two storage boxes above that and four two or four compartments and a desk on the side and that came around to the other side where there was a fridge and a - - -

20

But was there any timber cupboards in that filing room located on the left-hand side or indeed anywhere within that room?---Timber?

Timber?---No.

Was there any chairs, white in colour in that room?---No white chairs in that room, no, there was a grey, grey or blue.

30 A chair that you would further as a dirty white chair?---A very old cream chair was there for a short period of time. It was, it was more like a, a big high, like an executive chair not a typist chair and it was very old.

And was that anywhere near a timber cupboard?---No timber cupboards.

All right. Okay, I'll come to some detail with respect of that in a moment can we just continue with this. Probably fast forward through here.

40 THE COMMISSIONER: In those, those, sorry. The general patient file where were they kept?---In the compactus.

And that's right behind your door?---That's right.

Now, are we looking from the direction of the, pardon me, the filing room back out into the office area?---You are. Ah hmm.

Thank you. Just bear with us, Ms McGilligan, while we cue up some more footage. Now, Ms McGilligan, are we seeing now the entry door into your office area?---That's right.

Thank you.

THE COMMISSIONER: Is that usually closed or open?---Usually open at all times during the course of the day while we're there. Um, we do, have tried to make it a rule that when everyone's gone, lock it, but we do have a lot of people coming in and out of the office at different times that don't have a key.

10 MR ALEXIS: And at the time behind where Inspector Kane is standing, was that Professor Marsden's office?---Yes.

And then off to the right of Mr Kane- - -?---No, that's Greg, that's Greg Robertson's office.

I do apologise?---Right.

But is, it was- - -?---It's Greg's. Don Marsden's more to the right.

20 More to the right. All right. Thank you.---Ah hmm.

So we see Dr Robertson behind Mr Kane?---That's right. That's Don Marsden's to the left.

Thank you. And to the left of the filing room, indeed down the corridor to the left of the picture we see on the wall, is that the entry to Professor Hacker's office?---Yes, it is.

Thank you.

30 THE COMMISSIONER: And we're back at the conspectus?---Compactus.

Compactus.

MR ALEXIS: Yes.

THE COMMISSIONER: It's a strange word.

40 MR ALEXIS: And, and, and we see some filing cabinets at the end of the filing room, we see a desk and a chair with blue fabric, fridge, microwave, jug, and that comprises what's down the left-hand side of the filing room. Is that right?---That's right.

And that's how it was at the time you worked there?---Yes, it was.

Thank you. Will you fast-forward, please. Now, is that the entry that we see now to Professor Hacker's room?---Yes. Yes, it is.

Thank you. Keep going. That's the entry to what used to be Dr Marsden's room?---Yes, it is.

Now, just pausing there, and if I could invite you to go back to Exhibit 12, do you see on the right-hand side of the drawing the word, main offices?

---Yep.

10 And if we look, sorry, if we just go back to the video, and if we can relate what we're seeing in the video now, just pause it there, please, perhaps by reference to the pot plant, the area along the main office area as shown in the diagram. So is that a further work area, is it?---That's, yes, that's the other secretary's. That's the secretary that was to look after Don Marsden and Greg Robertson.

Thank you. All right. Thank you. Continue. And we're now looking at the internal area of Professor Hacker's office. Is that right?---That's right.

Fast-forward, please. Now, just pausing there- -?---Mmm.

20 - - -and again back to the diagram, are we in the lift lobby area adjacent to the cancer centre?---That's right.

Thank you. Now, just pausing there, is the signage that we see there in this frame indicating what is at each end or along the corridor that we see shown in the diagram?---That's right.

Ah hmm. Keep going, please. And we saw on the signage board I think that outpatients was down to the left from the lift well?---That's a staff area to go into to the outpatients.

30 Just pause it there. What are we looking at now?---A staff entrance into the clinic area.

Thank you?---It runs off the lobby outside of the lifts.

Ah hmm. And what are we looking into now?---The hallway. There are all different clinics' doors. There's clinic 3 and they've all got a number and they've all got doctors in them.

40 Thank you. Did Professor Hacker normally use room 3?---Yes, he did.

And if you could just pause the video and relate the location of room 3 to the diagram that's before you, if you can. I'm not sure whether it's sufficiently detailed for you to do that. But do you see the consulting rooms referred to- -?---Yes.

- - -adjacent to the Lletz Room?---Yeah, he's be on the left. He'd be on the first one on the left.

And that's as you enter into that area, is it?---From the, from the staff area.

THE COMMISSIONER: It's with the set of consulting rooms at the bottom, is it, it's part of those?---Yeah, it's part of it.

MR ALEXIS: Thank you?---It's about the first room in on the left-hand side. He also occupied one of the others on the right-hand side.

10 THE COMMISSIONER: Opposite?---Opposite.

Okay?---But for a work-up, if it's a new patient, a lot of questions have to be asked before he actually sees the patient himself and that's usually done by the nurse.

And just looking at the screen now, is that a shot looking from the outpatient area back towards the- -?---That's, that's the outpatient area waiting room, that's their desk, the reception desk where that red mark is and if you walk back towards this way to me and you keep walking you'll come up to our  
20 offices. If you look directly opposite that red mark on the purple desk, that's the public entrance or the patients' entrance into the clinic. The nurse would come out of there um, ask for the patient and she would escort her into the room.

Thank you. Yes, thank you, Ms McGilligan. A few further matters if I may. Paragraph 10 of your first statement you refer to Professor Hacker arranging a room for Ms Lazarus at the outpatient clinic. Do you see that?  
---First statement?

30 Yes, first statement, paragraph 10, you say that you understand that Professor Hacker arranged a room. Do you see that?---That's right.

And is that understanding based on what Professor Hacker told you or from what you saw or- -?---What I understood, that if she was conducting any research on patients she would be um, given a room at that, to conduct the research in.

Thank you. Now, we saw on the video the number 3 on one of the rooms which you identified as Professor Hacker's normal room. Was that the  
40 room or was it a different room?---A, well, I didn't know which room it was.

Right?---But there are a few rooms to choose from if they're not being occupied by chemotherapy. There's always the, a room called the Lletz Room which could have been available on those particular days, depending who was holding clinics.

All right.

THE COMMISSIONER: Would you be the person who would allocate the rooms to the - - -?---No, no, sir.

MR ALEXIS: Who would ordinarily do that?---Professor Hacker.

Now, in paragraph 11 of your first statement you refer us to the use of your computer and you refer to the use of either that computer or one or other of the two within the office. Do you see that?---Yes.

10

And we saw your computer or what used to be your computer in the video and did we see the other work area across from where you worked, the workstation. Is that where the other computers were located?---Yes.

Thank you. Now, in relation to the use of your computer should we understand that confidential patient files could be accessed on your computer?---Nothing more that wasn't in the compactus.

I see. Did you have with the use of your computer access to the hospital's Intranet system?---Yes, I did.

20

And did that enable you to access accounting forms or accounting information and things of that type?---No. That was, I think it was just something, Oracle or something like that which I didn't have.

I see. Is that because you didn't have access to it or is that because you just didn't have occasion to use it or both?---I didn't want it.

You didn't want it? But - - -?---No.

30

- - - can you help on whether or not if one wanted to access the Oracle financial system within the hospital's computer network one would be able to via your computer?---No. I wasn't set up for it so they couldn't access it.

All right. What about the other computers that were available within the office there?---No, no.

All right. And in relation to the signature which you tell us about in paragraph 12, that is Professor Hacker's signature, how was that available on your computer desktop?---That was a (not transcribable) I forget the word, when I needed to put his signature in for a standard letter or something like that I could, I could print it in the, on the letter instead of a signature.

40

And that would paste the signature onto a letter so that the signature was printed when the letter was printed. Is that how it worked?---That's right, yes.

And in what sort of file on the computer desktop was Professor Hacker's signature (not transcribable)?---It would have been under, in Neville Hacker's documents, Neville Hacker's documents.

And was there a particular file that identified the file as containing his signature?---Signature.

Signature, all right. And is that generally the way letters or reports signed by Professor Hacker were signed, by the use of an electronic signature?  
10 ---No.

So what were the circumstances in which you would use his electronic signature?---For something very standard, he signed every letter that I ever, every letter that was typed he, went to him for signature. The one, the computerised one would be used for, what could I say, an interoffice memo, something like that because he checked everything that went out of the office.

All right?---As in typing and things like that.  
20

Would you regard him as someone who was meticulous in relation to those sorts of things, outgoing correspondence and the like?---As in - - -

As in checking to make sure they were accurate and - - -?---Absolutely.

Now, I want to come now to your second statement if I may. I appreciate I'm moving between your statements but I'm trying to present this in a convenient way if I can. Paragraph 6 of your second statement you deal with the subject of Ms Lazarus attending the centre and working at a desk  
30 belonging to either of the two secretaries. Do you see that?---Yeah.

Now, did you ever observe her sitting at the desk of either of the two secretaries that we saw on the video?---Yes.

And can you tell us what it is that you saw her actually doing if you can?  
---I can't.

Was he using a computer, was she - - -?---Using a computer.

And did you see - - -?---The one usually directly opposite me.  
40

And do you know what she was using the computer for?---No, she'd often say can I use your computer if you're going to lunch. It was mainly when we weren't in the office if you recall, it was when you were at lunch.

So you'd return from lunch and you'd see her working, is that right?---And then well, I'd need the computer and she would remove herself.

Mmm, I see. And do you recall ever an occasion where Ms Lazarus assisted you in filing patient files away?---Not really, no.

Now, do you have a recollection as to whether or not Ms Lazarus ever had a desk within the cancer centre?---No.

And by no are you saying you've got no recollection or she had no desk or what should we understand?---She had no desk.

10 Now, do you recall ever seeing any files or research type materials stored by her in the filing room?---No.

Now, I just want to raise one particular aspect of that with you. Thank you. Just on the subject of computer access to your computer, was your workstation password protected?---Yes.

And so if someone wanted to use your computer they would have to access it with your password?---Yes.

20 And in relation to Ms Lazarus using your computer did you provide her with your password?---No.

So how should we understand that she able to use your computer?---It was open, it was open. I hadn't closed it off.

I see. So you hadn't logged off your computer - - -?---No.

- - - which enabled her to use it - - -?---Yes.

30 - - - without knowing your password. Is that - - -?---That's right.

What about the other computers for the other secretaries, do you know - - -?  
---Well, pretty much the same thing applied. I'm not quite sure but I'm sure that the same thing applied.

40 Now, I just want to draw attention to some evidence that's been given in this inquiry and Commissioner, I'm at page 126 of the transcript, line 18 and following. Ms McGilligan, that's a reference for the Commissioner. It's been suggested that there was a white folder or white folders maintained in a storage cabinet at the, at the centre in the filing room and it's been described as filing cabinets on one side, it has a cupboard on the other side, a short wooden like, a short cupboard and then it has a filing cabinet like a storage cabinet where stationery's kept, in front of that is a white chair, like a dirty white chair, underneath that I kept the equipment and the two folders and it's suggested that all of that is behind the receptionist's desk, the receptionist's office where someone called Helen apparently sat and worked. Now, in relation to what I've just suggested to you, do you have any recollection as to the existence of any storage cabinet either in or around

or under white folders containing files were kept by Ms Lazarus?---No, I wasn't.

10 And we spoke earlier about the, the chair that's been described as white and looking a little dirty. When you referred to I think a cream chair where was that located when you were - - -?---That was a broken chair and it was, did disappear, as I said also it could have been an old blue one that was a bit wobbly and in the video it shows an old blue one, one that needs to be fixed but the old cream executive-type chair might have been, might have gone by then, we might have got rid of it but - - -

But if, if we were to focus on the area as one walks into the filing room, having passed on the left-hand side the microwave, the fridge and the jug on the table and I think we come to a, a desk with a chair - - -?---Yeah.

20 - - - with drawers, did you ever see anywhere in and around that area in the filing room any folders containing files relating to patients in respect of whom Ms Lazarus had conducted any screen tests together with any equipment relating to the work that she was doing?---No, I didn't.

And I gather in the course of your day to day duties you went in and out of that room a couple of times at least a day?---Maybe once.

Once a day?---Once a day, once for lunch.

All right.

30 THE COMMISSIONER: And did you ever see Ms Lazarus go to this position when she was in the vicinity to look for files?---I can't recall that, sir, no.

And how often would you be at your desk?---Most of the day, sir.

And if someone was going into the conspectus (as said) - - -?---Compactus.

MR ALEXIS: Compactus.

40 THE COMMISSIONER: Compactus. Would you, could that happen without you seeing it?---No.

Did Ms Lazarus go into the compactus?---No, I'd have to see her, they have to walk past my desk, invade my space.

Did she?---Not as far as I can recall.

Never?---She might have walked in there, but she wasn't in there for any length of time to do anything.

What reason could she have for going in there?---Well, research. A lot of people doing research would get one of the chairs and sit there. And on that wooden desk, if they were doing something on ovarian cancer or cervical cancer, they'd pull the files, they'd take, sit on that wooden desk, take notes and whatever and then put the files back. But I can't recall her doing that.

Many other research officers I can, yes.

10 And research officers have authority to go in whenever they like?---  
Reasonable, not necessarily, obviously they're doctors that are doing  
research - - -

Yes. But some of them - - -?--- - - - our fellows.

Did Sandra Lazarus have authority to go in there whenever she wanted?  
---As a PhD student. He never accepted her as his, as to supervise her. She  
would have had, yeah.

20 And so she could look at the patients files?---That's right.

But you never saw her doing that?---No.

Did you ever go into the waiting room?---Which waiting room?

Where the patients wait?---Me?

Yes?---Not really. I might walk down there for two seconds and say Mrs so  
and so is going to be late if the phones didn't answer.

30 Did Sandra Lazarus ever ask you questions about Professor Hacker's  
patients?---No.

Did she ever tell you that she was working on them or doing research with  
them?---She was doing research but she couldn't, she was around the office  
a lot and I said, "When are you starting?" I recall a conversation saying,  
"When are you starting it?" And she said she couldn't do it until she got her  
equipment. And that she had to have a, a cost centre set up. She got a grant  
for 200 odd thousand and a cost centre had to be set up for that money to go  
into.

40 Is that what she told you or is that something you independently know?  
---Well, if she had the money and she got a grant and she had to pay for it,  
that's what would have to have been done.

But how do you know she got a grant?---She told me, which I thought was  
very impressive at the time.

Yes.

MR ALEXIS: Thank you. Ms McGilligan, did Ms Lazarus ever request you to provide her with any patients list for Professor Hacker?---No.

Did you ever provide her with any patient list with respect to Professor Hacker's patients?---No.

10 Can you recall ever seeing Ms Lazarus speaking with any of the patients that attended the centre, whether Professor Hacker's patients or other patients of other doctors within the centre?---No.

Did you ever have occasion to observe whether or not Ms Lazarus ever utilised the examination room that you understood Professor Hacker had made available for her?---No, I did not.

20 Now in paragraph 13 of your first statement you deal with the subject of the requisition book and we should understand I think that unless office supplies and the like were ordered online, they had to be sought via the requisition book. Is that right?---Sorry?

In paragraph 13 - - -?---Yes.

- - - you tell us that there were two methods to purchase goods or pay invoices?---Yes.

One was online ordering from Office Works and the other was via the requisition book?---That's right.

30 And that was the procedure at the time you worked for Professor Hacker. Is that right?---Yes.

Now could I show you the original requisition book that was available to you whilst you were working for Professor Hacker. It's marked as Exhibit 7. And could you just look at the book and examine the book and satisfy yourself that that's the book that was available to you at that time. I appreciate it went missing at some stage, but, is that the requisition book? ---That is a requisition, it's not the (not transcribable)

40 THE COMMISSIONER: I beg your pardon?---It's not the exact one.

Exact one as what?---As the, well it was written in, I think if I recall, it had Gynae-oncology written on it in, in texta. But they must have needed a new books by then.

MR ALEXIS: Could I invite you to look at the cover of the book and particularly the number which appears on the front?---Ah hmm.

It's 1-5-2-0-7-0 is it?---Ah hmm.

And was the account code for the Gynaecological Cancer Centre?---I think I can recall that, yep.

And now where was that requisition book kept during the period from late 2007 and through until about July, 2008?---Generally in the back cupboard that you saw in the video, there's two gray cupboards in the compactus room. One was, it was stored in there.

10 All right. And that was a cupboard that was not locked?---No.

Now on occasions when you completed a requisition in the requisition book and presented it to Professor Hacker for signature, can you tell us what your experience was with him looking at what you provided to him and signing requisitions?---He would naturally ask was this necessary. And you'd have to say that the machine was broken because we generally wouldn't get it anyway. So we refrained half the time from trying to get anything because you're not going to get it. So, but if we had to and say the dictating machine was broken down and we couldn't share the other one, well we'd put a  
20 requisition in and he would sign it. I would requisite, he would sign it and then it would go down to administration for them to sign it.

And would you take the book down to administration?---I would or the other secretary would, yes.

And did you ordinarily see the person, I think usually Professor Walters to obtain signature - - -?---It was, it was given to his secretary, Joanne East.

I see. And she would then deal with it would she?---Yes.  
30

And how would you then get the book back after the requisition had been completed by someone with authority to sign as authorising officer?---Once we presume, if we haven't got it back from her, we'd find it in the mail room.

And where is the main mail room relative to your office?---It's on the ground, ground floor level, right as you, you come in the main entrance of the hospital, you go around the reception desk to the left and go down the hall about two, there's two, there's a chapel and a space, a toilet area and  
40 (not transcribable) mail room.

All right. And was the requisition book procured from the mail room after the requisition had been signed by an authorising officer - - -?---That's right.

- - - and the original I think, one of the carbon copies had been removed? ---That's right. They would remove the original and we would be left with the blue one or the, whatever one it was. It was blue in those days anyway.

And the book would then come back to your office and be put back in the cupboard that you identified?---Yes.

All right. Now in paragraph 20 of your first statement you tell us that the book was missing for a period?---That's right.

Now we know that the requisitions that are of interest to this inquiry were signed in or on 11 and or 14 July, 2008. Are you able to be a little more specific as to the period of time during which you recall the book went missing?---I would believe that, I said six months in my statement, I believe it'd be about four months maybe, four months.

And is there any, is there a particular occasion that occurred where you went to try and find the book and it wasn't missing and, and it was missing and you couldn't use it to complete the requisition which enables you to recall to mind when that was?---We still couldn't find, we checked every avenue of where it may be.

THE COMMISSIONER: When did you first notice that it was missing?  
20 ---Oh, I can't recall that, sir. But it just didn't come back for quite a while.

Approximately when?---June, July, August, around about then.

THE COMMISSIONER: Mr Alexis?

MR ALEXIS: Yes.

THE COMMISSIONER: I'm afraid I have to stop.

30 MR ALEXIS: Yes. I see the time and I understand the position and I regret that I haven't finished Ms McGilligan.

THE COMMISSIONER: Well, I don't think that there'll be questioning by others.

MR ALEXIS: Yes. I have about probably five minutes.

THE COMMISSIONER: I think we should wait. I have to stop I'm afraid.

40 MR ALEXIS: Okay.

THE COMMISSIONER: But (not transcribable) and Ms Soars, how long would you be? You'd want to get instructions as well I presume.

MS SOARS: I would need to.

THE COMMISSIONER: I think we will have to, I'm afraid, to go on on Monday. Ms McGilligan, I apologise that we have not finished your

evidence today. I really am sorry. I know that it must be a considerable inconvenience to you and also to Professor Hacker, but I'm afraid there nothing we can do about it?---Right.

This has happened not through unawareness on our part and not through an attempt to make sure that you finished. But I'm afraid this is how things sometimes happen?---Right.

10 Would you be able to return Monday? Otherwise, I mean we could arrange you to, if it's very inconvenient on Monday, we could try and fit you in at some other time. But I will leave that to you. If you could speak to Mr Alexis, you can come to an arrangement about that?---Certainly. Okay. Thank you.

THE COMMISSIONER: And we will adjourn until, and what time on Monday?

MR ALEXIS: 10 o'clock Monday.

20 THE COMMISSIONER: Okay.

**THE WITNESS STOOD DOWN [1.02pm]**

**AT 1.02pm THE MATTER WAS ADJOURNED ACCORDINGLY [1.02pm]**