Public Health Virology Laboratory Investigation Report Response

The findings, recommendations and observations from the Virology Laboratory Investigation Report have identified several opportunities for quality improvement. Queensland Health (QH) will continue to build on the substantial efforts made to date to take the recommendations and findings forward. Recommendations have been grouped across six categories.

Recommendation category	Summary of recommendations and findings from Investigation Report	QH response	Response detail
Recommendation Category 1: Codify regulatory obligations	• Update Public Health Virology General Manual, Physical Containment 3 and Physical Containment 4 Facility Manuals, and Management of Quarantine Materials with greater legal and regulatory detail and information on staff obligations and compliance • Update DAFF Biosecurity Checklist and document formal procedure for safe and secure storage of Risk Group 4 positive diagnostic material and relevant regulatory obligations • Clarify audit process within current quality management system for regulatory obligations	**Accepted**	• All recommendations are accepted in full • QH will incorporate the review and update of all relevant documents into 2025-26 work priorities to support greater understanding and compliance with regulatory obligations and clarify current quality management system processes
Recommendation Category 2: Implement robust electronic inventory systems	• Implement fit for purpose Storage Register and strengthen inventory system, commencing with an interim inventory audit and reconciliation and ceasing use of lock boxes in laboratories • Implement or update centralised equipment register and Building Management System • Create electronic records of paper documents	**Accepted**	• Recommendations related to establishing electronic systems are accepted, subject to resourcing availability and procurement processes that demonstrate value for money • The recommendation related to digitisation of paper documents is accepted in full • QH will incorporate digitising documents into existing 2025-26 work plans and commence additional work to explore resourcing availability and options related to electronic systems
Recommendation Category 3: Strengthen onboarding and workforce training	• Update Virology Induction Manual with greater legal and regulatory detail and staff obligations and compliance • Strengthen continuous training and implement electronic training system, including following updates to documents (e.g. Manuals, Checklists, Procedures), aligning to regulatory and accreditation requirements and for audit practices • Cease use of legacy acronyms to support greater clarity	**Accepted**	• All recommendations are accepted in full • QH will incorporate updating induction documents and training systems as part of 2025-26 work priorities to support a culture of continuous quality improvement and regulatory compliance at all levels
Recommendation Category 4: Update business continuity planning for PC4 environments	• Implement contingency Standard Operating Procedure (SOP) for Physical Containment 4 freezer failure • Implement an Incident Response Team	**Accepted**	• All recommendations are accepted in full • QH will immediately commence work to implement a contingency SOP for the PC4 freezer and finalise the design and implementation of an Incident Response Team in 2025-26
Recommendation Category 5: Structured audits	• Update current site map labelling • Establish Biosafety Compliance Officer or small working group to address fragmented regulatory reporting structure, creating less confusing pathway for staff and greater coordination and prevent gaps in external regulatory reporting • Establish regular timetable of quality assurance audits, including record keeping • Review current containment level practices and consider separating by risk group and physical containment levels	**Accepted**	• All recommendations are accepted in full • QH will immediately commence site label updates, recruitment of the Biosafety Compliance Officer and implementing a regular audit timetable. Further work will be undertaken over 2025-26 to review current containment level practices and assess future service delivery models and practices
Recommendation Category 6: Clarify role responsibilities and succession risk	• Update Virology Operational Officer Duties Checklist to include regulatory waste record keeping • Support staff at all levels directly and through strengthened quality system to report risks and be aware of statutory obligations, including public record legislation • Consider resourcing needs of operating model that meets contemporary standards and performance expectations, including quality and workplace improvement needs	**Accepted**	• All recommendations are accepted in full • QH will immediately update the Duties Checklist. Further work will be undertaken in 2025-26 to continue supporting staff awareness and capacity related to risks and compliance, as well as considering resourcing needs for contemporary operating model