

# Audit of TGA's COVID-19 Vaccine Safety Monitoring Plan (2021–2026) – ISO 19011 documentation-compliance audit - Independent Audit Process

Framework: ISO 19011:2018 + ANAO Performance Audit Standards + OSINT Methodology | Period: Feb 2021–Jan 2026 (4 years) | Finding: NON-CONFORMING

## 1. FOI REQUESTS

## 2. OAIC REVIEWS

## 3. RESEARCH AND ANALYSIS

## 4. EXPERT COLLABORATION

## 5. LEGAL ANALYSIS

## 6. AUDIT & MONITORING

### KEY AUDIT STEPS\*

- Risk Assessment: 68.4M doses (91% rollout), provisional approval, expert warnings (Phillips 2021)
- Define Criteria: TGA Plan (20 outputs), ISO 19011, ICH E2E, TGA's own GMP/GCP standards
- Evidence Collection: FOI Act 1982: 531 folders, 2,218 pages
- OAIC Reviews: MR22/00538, FOI 25-0166
- Senate Testimony: Oct 2025
- Public Docs: 150+ safety reports
- 4-Tier Evidence:
  - Tier 1: TGA's own searches (0 implementation docs)
  - Tier 2: Senate testimony (parliamentary privilege)
  - Tier 3: FOI responses (statutory)
  - Tier 4: Public documentation
- Analysis: Compare 20 Plan outputs vs documented evidence
- Classify: Full/Partial/Not documented
- Findings: 7 major non-conformities
- 15% fully documented, 85% partial/none
- Reporting: GitHub + Zenodo DOI (permanent archive)
- Monitoring: Parliamentary oversight (Senate Estimates)
- OAIC reviews ongoing
- OSINT Research Methodology: ISO 19011 framework - Systematic collection & verification: 150+ TGA reports, FOI/OAIC releases, Senate Hansard, performance data - Cross-reference multiple sources to identify contradictions in TGA positions - Transparent documentation: GitHub version control + Zenodo DOI + blockchain permanent archive

### ISO 19011 PRINCIPLES APPLIED

1. Integrity: Independent, no conflicts of interest, ~30 yrs experience
2. Fair Presentation: Evidence-based findings, limitations acknowledged
3. Due Professional Care: 4-year systematic investigation, comprehensive evidence
4. Confidentiality: FOI framework respected, sensitive info protected
5. Independence: No funding from manufacturers/government/advocacy
6. Evidence-Based: 4-tier hierarchy, verifiable primary sources
7. Risk-Based: High-consequence gaps, materiality focus (68M doses)

### ANAO STANDARDS APPLIED

- Proper Use of Resources: Assess effectiveness, economy, efficiency, ethics
- Evidence-Based Approach: Systematic FOI, OAIC validation, Senate testimony
- Parliamentary Importance: National health emergency, largest provisional rollout
- Risk Assessment: Materiality (68M doses), expert warnings, auditability
- Records Management: ANAO guidance applied to assess TGA documentation
- Performance Audit Process: Planning → Fieldwork → Reporting → Monitoring

### 7 MAJOR NON-CONFORMITIES

1. No Systematic Tracking: TGA admits monitoring 'day-to-day processes' never tracked vs Plan
2. No Coordination Protocols: OAIC unable to find integration between AusVaxSafety-AEMS
3. Data Linkage Gap Persists: Expert warnings (2020) → same gaps exist (2025)
4. Contradictory FOI Positions: 'Don't exist' → 'Ample docs' → 'Too complex'
5. No Signal Pathways: 6.8M surveys → 148 signals → 57 actions (no documented bridge)
6. Communication Contradiction: 'No different' (public) vs 'Enhanced' (policy)
7. Expert Warnings Ignored: 5-year gap between identification and response

### EVIDENCE SOURCES (Source Reliability)

- ✓ Tier 1: TGA's own OAIC-directed searches (0 implementation docs)
- ✓ Tier 2: Senate testimony under oath
- ✓ Tier 3: FOI statutory records
- ✓ Tier 4: Public documentation

### Independent Validation:

- ✓ OAIC reviews (MR22/00538, MR25/01153)
- ✓ External legal analysis
- ✓ Peer-reviewed publication

### OUTCOME: NON-CONFORMING

15% outputs fully documented (3/20)  
55% partial (11/20)  
30% not documented (6/20)

Phases of Audit: 1. Plan the audit 2. Gather evidence 3. Assess conformity 4. Report & archive

\*Scope: documentary evidence only (FOI, OAIC, Senate, public docs); no internal system access or interviews