

From: Pamela Bennett
To: Cabinet Secretariat
Date: 5/25/2007 4:05:30 PM
Subject: Revised Issues Monitoring Update, Dept. of HCS, May 25, 2007

Please note the Healthy Aging Issue has been included on the Revised Issues Monitoring Update for the Department of Health and Community Services, May 25, 2007

CC: Betty Donahue; Bull, Angela; John Abbott; Joy Maddigan; Mary St. Croix; Moira Hennessey; Paula Burt; Ross Wiseman; Tansy Mundon; Tom Brophy

**Issue Monitoring Report
Department of Health and Community Services
May 25, 2007**

Issue: Retesting of Breast Cancer Patients – ER/PR

Activities/Developments To Date:

- In December 2006, Eastern Health released the outcome of a laboratory review of ER/PR retesting of breast cancer patients. The review involved 939 patients with negative ER/PR test results between 1997 and August 2005.
- This issue has been in the public domain since Fall, 2005.
- Prior to the December 2006 release of the test results, two court cases were initiated – one case is by a family of a deceased breast cancer patient and the second case is a class action suit by about 40 plaintiffs.
- In early May 2007, the media obtained court affidavits which include additional details about the test results. The affidavits state that the 939 patients include 763 live and 176 deceased patients. The information also states that 317 of the 763 live patients had changes in their test results, including the 117 women who had recommended treatment changes.
- The ER/PR retesting issue resurfaced in the public domain during the May 14 week.
- On May 18, Eastern Health held a media briefing and the CEO apologized for the confusion that has ensued about ER/PR retesting results. He stated that ‘at no time did Eastern Health withhold any personal information from any of the patients impacted by our decision to retest for ER/PR’.
- This issue has received a lot of media attention in the past two weeks, provincially and nationally. Eastern Health and the Government have been accused of covering up test results. The HCS Minister has been asked a lot of questions by the Opposition in the media and the House of Assembly.

Activities/Developments This Week:

- On May 22, Government announced it will undertake a judicial Commission of Inquiry on ER/PR testing for breast cancer patients. The Commission’s report will endeavour to get answers to what happened to ensure that this situation will not reoccur. The Commission’s report will be released publicly.
- A hearing on the certification for the class action suit took place in Supreme Court, May 23-25, 2007. The number of plaintiffs who have joined the lawsuit has increased following events of the past two weeks.
- Ms. Gerrie Smith, Solicitor, Department of Justice, is monitoring the legal proceedings with Eastern Health’s lawyer.

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Expected Activities/Developments in the Next Week:

- The ER/PR testing results will likely garner further attention in the media and the House of Assembly. The Department will continue to monitor this situation and provide updates to the HCS Minister and the Premier's Office as required.

Contact Person: Beverley Griffiths, 729-0717

Issue: Radiology Services – Burin

Activities/Developments to Date:

- Eastern Health announced on May 22 that it had commenced a review of services provided by a radiologist who commenced work at the Burin Peninsula Health Centre in November 2006. The review involves 6034 services provided to 3,475 patients up to April 24, 2007.
- Eastern Health became aware that there may be a problem in February 2007. On February 22, 2007, the Manager of Diagnostic Imaging in Burin sent a letter to the local Clinical Chief expressing concerns by the technologists at that site about the radiologist's technical ability to perform examinations. However, further analysis was required to confirm if in fact, there was an issue. Subsequently, the matter was referred to a peer review process (per Eastern Health's Medical Staff By-laws).
- The peer review started on February 28, 2007. Eastern Health initially selected 50 patient records to be reviewed independently by two senior radiologists in St. John's. The peer review report was received by Eastern Health on May 9 and the region suspended the radiologist's privileges on May 10, 2007.
- A peer review of an additional 50 samples was initiated and the preliminary results were received on May 23, 2007. Based on the two peer review reports, Eastern Health is working through the details on its termination of the radiologist. The suspension will remain in place until the current review process is finalized.
- All 6034 reports will be reviewed by a team of radiologists. It is estimated that the full review will take approximately two weeks to complete.
- The area Opposition member has spoken in the media and in the House of Assembly criticizing Eastern Health for not releasing information on a potential problem with the accuracy of the radiology tests more quickly.
- Eastern Health has issued a print ad to patients to advise them that the review is underway and the results of tests will be communicated to the physician who ordered the test. Patients are being referred to phone line and staff at Burin Peninsula Health Centre for further information.

Activities/Developments This Week:

- As above.

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Expected Activities/Developments in the Next Week:

- Eastern Health will continue to work through the details on its future relationship with the radiologist.
- Eastern Health will provide posters to physicians' offices as soon as possible
- The review of the approximately 6000 radiology test results will continue.
- The Department will continue to monitor this situation and provide updates to the HCS Minister and Premier's Office as required.

Contact Person: John Rumboldt, 729-3105

Issue: Healthy Aging Plan

Activities/developments in the previous week:

- Continued work on Healthy Aging Policy Framework and Plan.
- Adjustments/updates to the Perspectives on a Healthy Aging Plan: A Summary of Consultations document
- Ongoing development of Year 1: 2007-8 implementation plan
- Continued work on development of accountability structure.
- Continued budgetary considerations.
- Continued "Draft" development of cabinet paper.
- Meeting with Interdepartmental Working Group including Regional Health Authority representatives.

Expected activities/developments in the next week:

- Final work on "Draft" Healthy Aging Policy Framework and Implementation Plan documents for review of Ministerial Council on Aging and Seniors.
- Integration of recommendations from Accountability and Transparency perspective.
- Final adjustments/updates to the Perspectives on a Healthy Aging Policy Framework and Plan: A Summary of Consultations document
- Final work on development of "Draft" Year 1: 2007-8 implementation plan.
- Continued work on development of accountability structure.
- Continued budgetary considerations.
- Continued "Draft" development of cabinet paper.
- Meeting of Ministerial Council on Aging and Seniors – May 30, 2007.

Contact Person: Suzanne Brake, Director, Aging and Seniors Division

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Issue: Influenza Pandemic Planning

Activities/developments in the previous week:

- Reviewed M5's latest draft content and layout of pandemic pamphlet.
- Requested quotes for facilitator for Pandemic Committee planning meeting.
- Discussed progress of work on preparing the pandemic web site and pandemic pamphlet.
- Continued discussions with P/T counterparts and PHAC over concerns regarding the development of PHAC run Health Emergency Response Teams (HERT) to address surge capacity needs.
- Completed arrangements with PHAC for a HERT strategic planning and exercise meeting, in Ottawa, on the revised direction in the development of Health Emergency Response Teams (HERTs).
- Revised draft terms of reference for pandemic steering committee.
- Completed weekly update for issues monitoring of pandemic influenza planning.

Eastern Region

- Traveled to Burin Peninsula area to meet with site emergency planning committees.
- Discussed emergency planning in general and pandemic influenza planning initiatives.
- Working on creation of a sub-committee to discuss topics and content related to our pandemic influenza planning for inclusion on our intranet and web site. Two meetings had to be rescheduled.
- Completed weekly update for issues monitoring of pandemic influenza planning.

Central Region

- Health Emergency Management (HEM) Coordinator is on extended leave until at least June 28, 2007.
- Central Region will have a new Medical Officer of Health (MOH) in place on July 23, 2007. Until this time, MOHs from other regions are taking turns providing coverage for Central Health.
- There is nothing new to report. HEM Committee is continuing to work on completion of unfinished annexes for Central Region Pandemic Plan

Western Region

- Met with Materials Management staff to review status of stockpiling needs (Pandemic related materials) and space requirements.
- Assisted with the development of a "Patient Tracking Log" form which would be useful during a Pandemic event.
- Participated in an Ocean Guardian III planning meeting and discussed the "infectious disease element" inject.

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- Met with Regional Director with Transportation and Works to discuss access to one of their building as an alternate Emergency Operations Centre.
- Reviewed Emergency Preparedness efforts in relation to Western Health's accreditation review process, Pandemic preparedness efforts were reviewed at length during this process.
- Completed weekly update for issues monitoring of pandemic influenza planning.

Labrador Grenfell Region

- HEM coordinator attending meetings in Labrador City and is unable to report this week.

Activities/developments anticipated for the following week:

- Receive several quotes for a facilitator for the May 13 Department/RHA meeting re the revitalization of the Pandemic Steering Committee.
- Complete revision to the Terms of Reference and participate in a meeting to discuss preparation for pandemic planning steering committee meeting.
- Meet with PHAC for a HERT strategic planning and exercise discussion meeting, in Ottawa. The development of HERTs is to address surge capacity needs during disasters throughout the country which could include a possible public health response during the early stages of pandemic
- Hold teleconference with the provincial HEM planning team.
- Complete weekly update for issues monitoring of pandemic influenza planning.

Eastern Region

- Participate in Health Emergency Management teleconference.
- Discussions around a tabletop exercise to be conducted in the Fall, 2007 on mass immunization centres and the logistical considerations that would entail.
- Continue to work on updates to our pandemic planning document. Complete weekly update for issues monitoring of pandemic influenza planning.

Central Region

- The regional HEM Committee is scheduled to meet on May 29, 2007. One of the items to be discussed at this meeting will be an action plan for the HEM Coordinator Extended Leave Period.
- Also, this committee is continuing to work on completion of unfinished annexes for Central Region Pandemic Plan.

Western Region

- Provide an Emergency Preparedness presentation at a Long Term Care Managers meeting. This will include a backgrounder on Pandemic planning and preparedness.

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- Participate in a Code Green (Evacuation) working group meeting. Discussion at this group includes: reception centres, relocation of clients/patients, surge capacity, etc.
- Participate in Health Emergency Management teleconference.
- Participate in a Code Orange plan (Mass Casualty) review session this would include Directors from different departments discussing similar issues as noted in the Code Green meeting.
- Complete weekly update for issues monitoring of pandemic influenza planning.

Labrador Grenfell Region

- HEM coordinator attending meeting in Labrador City and is unable to report this week.
- Complete weekly update for issues monitoring of pandemic influenza planning.

Contact Person: Dennis Davis, 729-3912

Issue: Turner Report Follow up

Activities/Developments in the Previous Week:

- Finalized curriculum for a provincial orientation program.
- Began planning for the entry of historical CYFS files into CRMS.
- Met with the Regional Directors of CYFS.
- Met with the OCIO to begin prioritizing of project initiatives for CYFS.
- Met with CRMS Steering Committee.
- Met with the School of Social Work regarding Duty to Report - Information Sharing working group.
- Met to review budget initiatives, priorities and timelines.
- Ministerail Sub-Committee met on two occasions.

Expected Activities/Developments in the Next Week:

- Continue to advance the recruitment process for the provincial positions.
- Continue development of the work plan related to the budget initiatives.
- Meet with the consultant completing the legislative review.
- Meet with the Child and Youth Advocate regarding system advocacy issues.
- Conference call with the regions on status of new initiatives.

Contact Person: Susan Walsh, 729-7289 / Jennifer Jeans, 729-5864

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Issue: Low Income Drug Program Implementation**Activities and developments in the previous week:**

- Applications for the Drug Program continue to arrive at a pace of approximately 489 per week and are being processed quickly.
- 20,487 individuals have been deemed eligible as of May 20, 2007.
- As of May 21, 2007 we have approximately 185 pharmacies out of 187 adjudicating in real time submitting 15,000 real-time claims per day.
- Most issues raised during pilot phase are now addressed. Largest remaining issue is still related to the small percentage of residents that are deemed eligible through the regional health authorities. These are largely residents of nursing or personal care homes. A focused effort is continuing towards cleaning up these residents on a per pharmacy basis.
- Cards that did not reach beneficiaries continue to be re-directed. IT issues associated with these inaccurate addresses continue to be addressed.
- The remaining Income Support clients who do not have their MCP numbers in the new system (which would allow the issue of their permanent drug cards) have been identified and a process put in place to follow-up.
- The approximately 30,000 rejected pharmacy claims continue to be analyzed for clean-up. A number of them had been cleaned up on the Apr 26/07 pay run, however some pharmacies are resubmitting previously submitted claims and we have no way to determine the number of duplicates vs. new rejections to come up with an accurate number. Xwave is currently assessing the rejected claims for these high-volume pharmacies (that the Division has validated all client card numbers for) to determine the relative number of claims that may have already been resubmitted by the pharmacies.
- Staff of the Pharmaceutical Services Division have been working with those providers with high numbers of rejects associated with wrong ID numbers and are addressing these on a priority basis. In each case a fax is being sent to the pharmacy indicating what the problem was with the ID number, or providing a new correct ID number that can be used for the client. Pharmacies completed to date account for approx 7500 claim rejections and \$325,000 in the value of the rejected claims. In addition to correcting the identifiers, eligibility issues (such as duplicate records) were corrected at the same time to remove other potential causes for rejection.
- The Tentative Agreement reached with the Pharmacists Association of NL (PANL) remains unsigned pending cabinet approval.
- PANL has advised the Department that pharmacies are having difficulty getting through to PSD, Xwave and Stephenville and are kept waiting on the line for 25-40 minutes. This is resulting due to extreme increases in the volume of phone calls to these offices. PSD has added an extra phone line, and continues to explore options and/or modifications to the current information manager, to accommodate the additional calls. Phone messages are being cleared on a regular basis and messages received with any detail provided are being returned as soon as

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possible. A request has also been made to the Office in Stephenville to have a similar analysis of their phone system conducted.

- PANL has also expressed concern regarding some provider's inability to access/read their payment statements. PSD is in the process of trying to obtain more detailed and current information on this, as a number of issues re these statements that had been previously identified are also ready rectified since the initial posting of the statements.
- A number of critical issues and questions have been identified with regards to the design and implementation of the enhancements to NLPDP for high drug costs, with operational and technical implications on the new drug claim adjudication system. Timely resolution of those issues will be critical to meeting the October 2007 launch target for the new drug plan. A number of these have been addressed, and progress is being made in the other areas, through the newly formed implementation team.

Expected activities and developments over the next week:

- Continue the roll-out of the real-time system to the remaining pharmacies, as they are ready. Roll-out of the remaining pharmacies will be limited to their pace. Some are in the process of converting to other vendor software systems or have not yet filled out their applications.
- Continue to work on data clean-up issues, focussing on the nursing home clients who have duplicate and un-linked records.
- Continue to work with Xwave on the reprocessing of rejected batch claims, with the goal of minimizing resubmissions by the pharmacies.
- Continue to prepare communication materials (application forms, information sheets, etc) so as to begin social marketing of the program as soon as the new computer system is operating smoothly.
- Continue with work on Phase II requirements for the real time system (projected implementation date of July 2007). These enhancements should further streamline the adjudication system resulting in more timely access to special authorization medications.

Contact Person: Patricia Clark, 729-1623